

## ARIC MANUSCRIPT PROPOSAL FORM

Manuscript #182

1. Title (26 char):

Angina Pectoris: RF, Athero

[Angina Pectoris: repeatability, and associations with demographic characteristics, risk factors and carotid atherosclerosis]

2. Writing Group (lead person listed first):

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3. Timeline:

Analysis to begin now; more detailed analyses when a more complete visit 2 tape is available.

4. Rationale:

Angina pectoris (AP) is often the initial clinical manifestation of coronary atherosclerosis. It appears more prevalent in women than men and subsequent mortality is elevated in both men and women. The ARIC study provides an opportunity to study the repeatability of AP as determined by Rose Questionnaire, to study correlates of prevalent AP (age, race, risk factors), to study its association with carotid atherosclerosis, and to investigate and compare these relationships in men and women.

5. Main Hypothesis:

We are proposing a descriptive analysis of 1) the repeatability of Rose AP using visit 1, annual follow-up, and visit 2; 2) the prevalence of AP by age, sex and race using a definition of prevalence with the least measurement error (e.g. combined over several assessments); 3) the association of prevalent AP with usual coronary heart disease risk factors; and 4) the association of prevalent AP with carotid wall thickness. These relationships will be compared between men and women. The analysis of repeatability of Rose AP can be used to provide a basis for definition of incident AP.

6. Data (variables, time frame, source, inclusions/exclusions):

Rose AP assessed in visit 1, annual follow-up between visits 1 and 2, and visit 2.

Demographic variables (age, sex, race).

Risk factors at visit 1 (blood pressure, hypertension, cholesterol (total, HDL, LDL), smoking, diabetes, BMI, physical activity,

Lp(a)).

Ultrasound (wall thickness) at visit 1.

Exclude (or stratify on) prevalent MI.