

CLEANED/DERIVED VARIABLE METADATA TOP SHEET

For Submission to the NSHD Scientific Support Team

Date of submitting documentation	02/10/2019
Categories of variables*: (may be more than one)	Family and Medical History
Summary of work undertaken	<p>Cleaning Description/Rationale:</p> <ul style="list-style-type: none"> • Downloaded from XNAT • Dropped all variables containing no data • Labelled values for multiple-choice options according to the questionnaire (see below) • Labelled missing data (missing for unknown reason) as -99
Source data file(s)	XNAT
Date source file(s) created:	Usually on date of each participant's study visit
Names of source variables	<p>See form below for definitions of these variables:</p> <ul style="list-style-type: none"> • id (participant ID number) • head_injury • consciousness • hospital • skull • diagnosis1 • other1 • onset1 • diagnosis2 • other2 • mother • mother_diagnosis1 • mother_other1 • mother_onset1 • mother_diagnosis2 • mother_other2 • mother_onset2 • mother_diagnosis3 • mother_death • father • father_other1 • father_onset1 • father_diagnosis2 • father_onset2 • father_death • count • pedigree • siblings • sibling1 • sibling1_diagnosis1 • sibling1_onset1

	<ul style="list-style-type: none"> • sibling1_diagnosis2 • sibling1_onset2 • sibling1_death • sibling2 • sibling2_diagnosis1 • sibling2_onset1 • sibling2_diagnosis2 • sibling2_onset2 • sibling2_death • sibling3 • sibling3_diagnosis1 • sibling3_onset1 • sibling3_death
Syntax provided	No
Location of syntax file	N/A
Date syntax file created:	N/A
Format of syntax	N/A
Output variables (please list names of new variables created)	Same as source variables
Output data file provided	Yes
Date output file created:	02/10/2019
Location of output file	N:\Test_Data_and_Video_Files\Phase 1\3_Cleaned Data\Insight46_history_medication_cleaned_final_20191002
Format of output file	Stata .dta file
Documentation provided	Cleaning: see "Summary of work done" section above Derivation: not applicable
List any papers in which cleaned/derived variables have been used	

* See list of categories on Swift

† Please delete as appropriate

Copies of the XNAT forms are provided below, with the variable names noted in red.

Personal History

I	Have you ever had a loss of consciousness or admission to hospital following a head injury, or have you ever had a skull fracture? (head_injury)	<input type="checkbox"/> 0 No	<input type="checkbox"/> 1 Yes
	If yes, have you ever had a loss of consciousness	<input type="checkbox"/> 0 No	<input type="checkbox"/> 1 Yes

	following a head injury (consciousness)				
	If yes, have you ever had an admission to hospital following a head injury? (hospital)	<input type="checkbox"/> 0 No		<input type="checkbox"/> 1 Yes	
	If yes, have you ever had a skull fracture (skull)	<input type="checkbox"/> 0 No		<input type="checkbox"/> 1 Yes	
2	Do you have cognitive impairment or another neurological condition? (cognitive_neurological)	<input type="checkbox"/> 0 No	<input type="checkbox"/> 1 Yes	<input type="checkbox"/> 2 Unknown	
3	If yes, what was the diagnosis? <i>(Note that there was space to add multiple diagnoses: the maximum number in this dataset is 2)</i> diagnosis1 diagnosis2	<input type="checkbox"/> 01 bvFTD	<input type="checkbox"/> 02 PPA	<input type="checkbox"/> 03 PSP	<input type="checkbox"/> 04 CBS
		<input type="checkbox"/> 05 MND/ALS	<input type="checkbox"/> 06 FTD-MND/ALS	<input type="checkbox"/> 07 PD	<input type="checkbox"/> 08 DLB
		<input type="checkbox"/> 09 Schizophrenia	<input type="checkbox"/> 10 Bipolar disorder	<input type="checkbox"/> 11 AD	<input type="checkbox"/> 12 VaD
		<input type="checkbox"/> 13 HD	<input type="checkbox"/> 14 Dementia-NOS	<input type="checkbox"/> 15 Stroke	<input type="checkbox"/> 16 Other
4	If yes, what was the age at onset? onset1 onset2	--	Code -99 for unknown		
5	If "other" is chosen as a diagnosis, record in free text box. other1 other2				

Family History

a. Mother

1	Does or did your mother have cognitive impairment or another neurological condition? mother	<input type="checkbox"/> 0 No	<input type="checkbox"/> 1 Yes	<input type="checkbox"/> 2 Unknown
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	If yes, what was the diagnosis? <i>(Note that there was space to add multiple diagnoses: the maximum number in this dataset is 3)</i> mother_diagnosis1 mother_diagnosis2 mother_diagnosis3	<input type="checkbox"/> 01 bvFTD <input type="checkbox"/> 05 MND/ALS <input type="checkbox"/> 09 Schizophrenia <input type="checkbox"/> 13 HD	<input type="checkbox"/> 02 PPA <input type="checkbox"/> 06 FTD-MND/ALS <input type="checkbox"/> 10 Bipolar disorder <input type="checkbox"/> 14 Dementia-NOS	<input type="checkbox"/> 03 PSP <input type="checkbox"/> 07 PD <input type="checkbox"/> 11 AD <input type="checkbox"/> 15 Stroke	<input type="checkbox"/> 04 CBS <input type="checkbox"/> 08 DLB <input type="checkbox"/> 12 VaD <input type="checkbox"/> 16 Other
2	If yes, what was the age at onset? mother_onset1 mother_onset2 mother_onset3	--	Code -99 for unknown		
3	If yes, what was the age at death? mother_death	--	Code -99 for unknown, -88 for still alive		
4	If "other" is chosen as a diagnosis, record in free text box. mother_other1 mother_other2				

b. Father

1	Does or did your father have cognitive impairment or another neurological condition? father	<input type="checkbox"/> 0 No	<input type="checkbox"/> 1 Yes	<input type="checkbox"/> 2 Unknown
2	If yes, what was the diagnosis? <i>(Note that there was space to add multiple diagnoses: the maximum number in this dataset is 2)</i> father_diagnosis1 father_diagnosis2	<input type="checkbox"/> 01 bvFTD <input type="checkbox"/> 05 MND/ALS <input type="checkbox"/> 09 Schizophrenia <input type="checkbox"/> 13 HD	<input type="checkbox"/> 02 PPA <input type="checkbox"/> 06 FTD-MND/ALS <input type="checkbox"/> 10 Bipolar disorder <input type="checkbox"/> 14 Dementia-NOS	<input type="checkbox"/> 03 PSP <input type="checkbox"/> 07 PD <input type="checkbox"/> 11 AD <input type="checkbox"/> 15 Stroke <input type="checkbox"/> 16 Other
3	If yes, what was the age at onset? father_onset1 father_onset2	--	Code -99 for unknown	
4	If yes, what was the age at death?	--	Code -99 for unknown, -88 for still alive	

5	If "other" is chosen as a diagnosis, record in free text box. father_other1 father_other2	
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c. Siblings (*There was space to add information about cognitive/neurological conditions for multiple siblings – the maximum number in this dataset is 3. There was space to add multiple diagnoses for each sibling. Note that all diagnoses variables are coded in the same 16 categories as in the forms above. Note that if 'other' was chosen, details were NOT recorded.*)

1	How many siblings does the subject have? count				---
2	What number in the pedigree is the subject? pedigree				---
3	Did any of your siblings have cognitive impairment or another neurological condition? siblings				--- Enter number of siblings, or -99 for unknown
4	Affected sibling	Number in pedigree -- sibling1	Diagnosis __ sibling1_diagnosis1	Age at onset __ sibling1_onset1	Age at death -- sibling1_death
			Diagnosis __ sibling1_diagnosis2	Age at onset __ sibling1_onset2	
5	Affected sibling	Number in pedigree -- sibling2	Diagnosis __ sibling2_diagnosis1	Age at onset __ sibling2_onset1	Age at death -- sibling2_death
			Diagnosis __ sibling2_diagnosis2	Age at onset __ sibling2_onset2	
6	Affected sibling	Number in pedigree -- sibling3	Diagnosis __ sibling3_diagnosis1	Age at onset __ sibling3_onset1	Age at death -- sibling3_death