# MRC NATIONAL SURVEY OF HEALTH AND DEVELOPMENT <br> University College London Medical School <br> Department of Epidemiology and Public Health <br> 1-19 Torrington Place <br> London WC1E 6BT 

## NURSE INTERVIEW 1999

## CAPI Version 5

$23^{\text {rd }}$ January 2002

## KEY

| Normal text | Nurse reads this out to cohort member |
| :--- | :--- |
| Bold | Emphasis for the nurse when reading out question |
| Italics | Instruction to nurse only |
| \# | Instruction to nurse to press shift and F2 to save |
| $\wedge$ | Instruction to nurse to press 1 to continue |
| [ ] | Indicates inserted feed forward data from elsewhere |
| FF | Warren's feed forward data |
| LFF | Local feed forward data (i.e. data collected in interview) |
| SFF | SCPR feed forward data |

1. Enter a numeric value between 1 and 990

Point number
POINT
$\pm$
2. You are in the interview schedule for serial number [SFF]. Enter a numeric value between 1001 and $7002 . \quad \pm$ SERIAL Serial number $\qquad$
3. Nurse: check date of interview and alter if not correct. Version: Ver05. \# $\wedge$ $\pm$ INTDATE

Interview date | day |  | month |  |  | year |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  | 1 | 9 | 9 | 9 |

4. Before I start the interview, I need to check that I have opened the right file for you. Code: Cohort member's sex.

| Male | 1 | $\pm$ |
| :--- | :--- | :--- |
| Female | 2 |  |

5. Can I check? What day in March is your birthday? Enter a numeric value between $3 \& 9$. $\pm$ BDAT

Birth date
6. Can I check, is your name still .......(read from ARF) or have you changed it for any reason?
$\pm$ CMNAME
Same 1
Changed $\quad 2 \rightarrow$ Nurse: please record name change details in full on ARF page 1 by label. $\wedge$
7. Nurse: please code whether you are interviewing the cohort member themselves or conducting a proxy interview with the cohort member's carer?

Interview conducted with cohort member $1 \rightarrow$ Q8a $\pm$ INTWHO
Interview conducted with carer $\quad 2 \rightarrow \mathrm{Q} 8 \mathrm{~b}$
8. Before we begin the interview, I need to get your written permission to carry out this interview. Please read and sign Consent Form 1. Nurse: Make sure the form has been signed and dated. $\pm$ CONSENT1

Form 1 signed $\quad 1 \rightarrow$ Nurse: circle codes 01 and 04 on front of consent booklet. $\wedge$
Form 1 refused $2 \rightarrow$ Nurse: circle codes 02, 04, 06, 08, 10, 12, 14, 16, 18, 20, 22, 24 and 26 on front of consent booklet. $\rightarrow$ Q133

8b. Nurse: address this question to the carer. Before we begin the interview, I need to get your written permission to carry out this interview on behalf of the cohort member. Please read and sign Consent Form 2. Nurse: Make sure the form has been signed and dated. $\quad \pm$ CONSENT2

Form 2 signed $\quad \overline{1} \rightarrow$ Nurse: circle codes 02 and 03 on front of consent booklet. $\wedge$
Form 2 refused $2 \rightarrow$ Nurse: circle codes 02, 04, 06, 08, 10, 12, 14, 16, 18, 20, 22, 24 and 26 on front of consent booklet. $\rightarrow$ Q133
9. Nurse to code: Is cohort member in an institution?

$$
\pm \text { INST }
$$

| Yes | 1 |
| :--- | :--- |
| No | 2 |

10. I would like to start by asking you some questions about your household. How many people in total live in this household, including yourself? Include individuals absent temporarily e.g. someone working away or a child that is a student. Enter a numeric value between 1 and 20.

|  | $\square$ |  |
| :--- | :--- | :--- |
|  | $*$ HOU $\quad$ (If total is one, go toQ14) |  |

11. Do you have a husband/wife or partner living in this household?

* REL1

Spouse $\quad 1$
Partner 2
Neither 3
12. How many children under 16 live in your household all of the time? Include any step, adopted or foster children you are responsible for. Include all children for whom survey member is parent figure. Enter a numeric value between 0 and 15.

Number

$\pm \quad \mathrm{HMC1} 6$
13. Now children aged 16 or over, including grown up ones. How many live in your household all of the time? Include step, foster, adopted or any for whom survey member is parent figure. Enter a numeric value between 0 and 15.

Number $\square$ $\pm$ HMCAD
14. Now I would like to get some general information about your household. Does your household own or rent this accommodation? Please give an answer from this card. (Show card A)

| Owns it or is buying it | $1 \rightarrow Q 15$ |  |
| :--- | :--- | :--- |
| Renting it from the Council | $2 \rightarrow Q 15$ |  |
| Renting if from a relative | $3 \rightarrow Q 15$ | $*$ |
| Renting it from a private landlord | $4 \rightarrow$ Q15 |  |
| Renting it from a housing association | $5 \rightarrow$ Q15 |  |
| Other (please specify) | $6 \rightarrow Q 14 b$ |  |

b. In what way does your household occupy this accommodation? $\pm$ OWNOTH
15. I would now like to update our records about marriages and partners. First, what is your current marital status...

| Single, that is never married | $1 \rightarrow \mathrm{Q} 15 \mathrm{c}$ |  |
| :--- | :--- | :--- |
| Married and living with your husband/wife | $2 \rightarrow \mathrm{Q} 15 \mathrm{~b}$ |  |
| Married and separated from your husband/wife | $3 \rightarrow \mathrm{Q} 15 \mathrm{~b}$ |  |
| Divorced | $4 \rightarrow \mathrm{Q} 15 \mathrm{~b}$ |  |
| Or, widowed? | $5 \rightarrow \mathrm{Q} 15 \mathrm{~b}$ |  |

b. Can I check, have you been married once or more than once? If more than once, probe for number of marriages. Enter number of marriages. Enter a numeric value between 0 and 9 .
$\pm$ MARNUM
Number $\quad \square \rightarrow$ Q16
c. Since we last interviewed you in [FF], have you lived with a partner for more than a year? * MARP

$$
\begin{array}{ll}
\text { Yes } & 1 \rightarrow \text { Q17 } \\
\text { No } & 2 \rightarrow \text { Q17 }
\end{array}
$$

16.Thinking of your [LFF e.g. first/second/last] marriage, when were you married. Can you tell me the year? Nurse: If respondent gives you an age rather than a year you can enter the age here instead. Enter a numeric value between 16 and 1999.

Year or age

$\begin{array}{llll}\stackrel{*}{-}(\mathrm{x}=1-4) & \text { MARY } & \text { MARY2 } & \text { MARY3 MARY4 } \\ \stackrel{*}{-}(\mathrm{x}=1-4) & \text { MARB } & \text { MARB2 } & \text { MARB3 MARB4 }\end{array}$
b. How did this marriage end?

| Marriage not ended | $1 \rightarrow$ Q17 |
| :--- | :--- |
| Death | $2 \rightarrow$ Q16c |
| Divorce | $3 \rightarrow$ Q16d |
| Separation | $4 \rightarrow$ Q16d |

c. When did your partner die - just tell me the year. Enter a numeric value between 1956 and 2000. ? (x=1-2) MADY MADY2

d. When did you stop living together - just tell me the year? Enter a numeric value between 1956 and 2000.? ( $\mathrm{x}=1-3$ )

$$
\begin{array}{l|l|l|l|}
\hline & \text { Year } & & \\
& \rightarrow Q 25 & \text { MASY MASY2 MASY3 }
\end{array}
$$

If more marriages, go back to Q16a
17.Turning now to children of your own... Refer only to biological children. Exclude still births and miscarriages. ^ Have you ever had any children of your own. Include biological children only. Exclude still births and miscarriages. $\underset{\sim}{*}$ CHIL

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q20 |

b. How many children of your own have you had altogether? Include biological children only. Exclude still births and miscarriages. Enter number of children. Enter a numeric value between 0 and $25 . \quad \underset{\sim}{*}$ CHILN

Number

18. Thinking of your [LFF e.g. first/next/last] child... ^ What is your child called?
$\pm \pm(\mathrm{x}=2-5) \mathrm{CHILNAME}$ CHILNAM2
CHILNAM3 CHILNAM4 CHILNAM5
b. Is [LFF] a boy or girl?

* $(\mathrm{x}=1-5) \mathrm{CHSS}$ CHSS 2 CHSS 3

Boy 1
Girl 2
CHSS4 CHSS5
c. In what year was [LFF] born? Enter a numeric value between 1960 and 2000.

Year


If more children, ^, go back to Q25c

19a.Do any of your own children now have children of their own?

* GCH

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q26 |

b. In what year was the first one born? $\quad \underset{\sim}{*}$ GCHDF

20.Now something about hospital treatment. Since we last saw you in [FF year], when you were [FF age], have you been admitted to hospital as an in-patient? In-patient= at least one overnight stay. $\quad \underset{\sim}{*}$ HOAD

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Nurse: circle code $\mathbf{0 6}$ on front of consent booklet. $\neg \rightarrow$ Q23 |

b. How many times have you been admitted to hospital since we saw you last in [FF year]? Enter no of admissions. Enter a numeric value between 1 and 25.

* HOADN

Number

21. I would like some information about your in-patient admissions. ${ }^{\wedge}$ Thinking of the [LFF time e.g. first/last] time you were in hospital as an in-patient since we last saw you in [FF]. Which hospital did you go into? Collect full name of hospital and name of town/city in which located. Enter verbatim. HOSPNAME HOSPNA2 HOSPNA3 $\pm \pm(x=1-16)$ HOSPNA4 HOSPNA5 HOSPNA6 HOSPNA7 HOSPNA8 - HOSPNA9 HOSPNA10 HOSPNA11 HOSPNA12 HOSPNA13 HOSPNA14 HOSPNA15 HOSPNA16
b. Which town was this in? $\pm+(x=1-16)$
TOWNNAME TOWNNA2 TOWNNA3 TOWNNA TOWNNA5 TOWNNA6 TOWूNNA7 TOWNNA8 TOWNNA9 TOWNNA10 TOWNNA11 TOWNNA12 TOWNNA13 TOWNNA14 TOWNNA15 TOWNNA16
c. Were you an NHS or a private patient? HOXNH HOXNH2 HOXNH3 HOXNH4 $\underset{(x=1-16) ~ H O X N H 5 ~ H O X N H 6 ~ H O X N H 7 ~}{~ H O X N H}$ NHS 12 Hoxnh8 HOXNH9 HOXNH10 HOXNH11 HOXNH12 HOXNH13 HOXNH14 Hoxnh15 Private 2 HOXNH16
d. When did you go in, first tell me the month and then the year? Enter a numeric value between 1 and 12 .

Month $\quad \square \quad \square$ HOXMT HOXMT2* (x=1-16) HOXMT3 HOXMT4 HOXMT5 HOXMT6 HOXMT7 HOXMT8 HOXMT9 HOXMT10 $(x=1-16)_{\text {HOXMT11 }}$ HOXMT12 HOXMT13 HOXMT14 HOXMT15 HOXMT16
e. And the year? If year not known enter age. If both not known press $<C t r l+K>$. Enter a numeric value between 0 and 2000. Year $\quad|\quad| \quad|\quad| \quad H O X Y R ~ *(x=1-16)$ HOXYR2 HOXYR3 HOXYR4 HOXYR5 HOXYR6 HOXYR7 HOXYR8 HOXYR9 HOXYR10 HOXYR11 HOXYR12 HOXYR13 HOXYR14 HOXYR15 HOXYR16
f. Why were you admitted to hospital as an in-patient on this occasion? Probe for full reason and diagnosis. Record all reasons leading to admission. Enter verbatim. REASON1 REASON2 REASON3 REASON4 $\pm(\mathrm{x}=1-16)$ REASON5 REASON6 REASON7 REASON8 REASON9 REASON10 REASON11 REASON12 REASON13 REASON14 REASON15 REASON16
g. What was the name of the ward you were in? If in more than one ward - enter names of all wards remembered. WARD 1 WARD2 WARD3 WARD 4 WARD 5 WARD 6 WARD 7 WARD 8 WARD 9 WARD $10 \pm(x=1-16)^{\text {WARD } 11 ~ W A R D ~} 12$ WARD 13 WARD 14 WARD15 WARD16
h. What was the name of the doctor who was in charge of your case while you were in hospital? Record verbatim.

DOCTOR1 DOCTOR2 DOCTOR3 DOCTOR4 DOCTOR5 DOCTOR6 DOCTOR7 $\pm(\mathrm{x}=1-16)^{\text {DOCTOR8 DOCTOR9 DOCTOR10 }}$
DOCTOR11 DOCTOR12 DOCTOR13 DŌCTOR14 DOCTOR15 DOCTOR16
If more inpatient hospital admissions, go back to Q21a
22.Thank you for your help with these questions. It is possible that the research team at the Medical Research Council would like to obtain more information from the hospital's records. May we ask your permission to consult your hospital records?

| Yes, permission given | 1 |
| :--- | :--- |
| Permission refused | $2 \rightarrow$ Nurse: circle code $\mathbf{0 6}$ on front of consent booklet. $\wedge \rightarrow$ Q23 |

b. Before the Medical Research Council can look at your records, they need to have your written consent to confirm that you have no objection to them collecting fuller information about your in-patient stay(s) in hospital. Please read and sign Consent form 3. Nurse: Please make sure the form has been signed and dated by the cohort member (and carer if applicable).
23. Now some questions about going into hospital as a day patient for treatment or surgery. Since we last saw you in [FF year], aged [FF age], have you spent a day at a hospital for treatment or surgery and then come home at the end of the day?

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q25 |

b. Have you been in hospital as a day patient for just one illness or condition or have you been in for more than one type of problem? Count each type of problem/illness/condition as one course of treatment. Enter number of courses of treatment. Enter a numeric value between 1 and 25.

* HDADN

Number

24. I would like some information about the problems that caused you to go into hospital as a day patient for treatment or surgery. Collect information about each course of treatment. Starting with first one since last interview. \#^ What was the illness or condition that was being treated on the first occasion since [FF year]. Record all problems treated.
CONDIT1 CONDIT2 CONDIT3 CONDIT4 CONDIT5 CONDIT6 CONDIT7 $\pm(\mathrm{x}=1-15)$ CONDIT8 CONDIT9 CONDIT10
CONDIT11 CONDIT12
$\pm(\mathrm{x}=1-15)$ CONDIT8 CONDIT9 CONDIT10
b. In which year or what age did you go into hospital as a day patient for this first problem? Nurse: Enter year - this should not be before year of last interview. Nurse: If respondent gives you an age rather than a year you can enter the age here instead. Enter a numeric value between 0 and 2000.

$$
\text { Year } \begin{array}{|l|l|l|l|}
\hline & & & \\
\hline
\end{array}
$$

HDXM HDXM2 HDXM3 HDXM4 HDXM5 HDXM6 HDXM7 HDXM8 HDXM9 HDXM10 HDXM11 HDXM12 HDXM13 HDXM14 HDXM15
If more day patient admissions, go back to Q24a.
25.Now I am going to ask you some questions about your general health. Have you ever been told by a doctor that you have had angina?

| Yes | 1 | $\simeq$ ANGE |
| :--- | :--- | :--- |
| No | $2 \rightarrow$ Q26 |  |

b. How old were you when you first had this problem? Nurse: If asked, when respondent first felt they had angina if respondent was born with this condition, enter 0 . Enter number in years. Enter a numeric value between 0 and $53 . \simeq$ BANG

Age

c. Have you had any more attacks since then?
$\pm$ SCPRGH2

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q25e |

d. How old were you when you last had this problem? Enter number in years. Enter a numeric value between 0 and 53.

Age


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~ LANG
```

e. Have you consulted a doctor or other health professional about your angina in the last 12 months? Code all that apply. Enter at most 3 values.

| Yes, a doctor | 1 |  |
| :--- | :--- | ---: |
| Yes, another health professional | $2 \rightarrow$ Q25g | $\pm$ SCPRGH31 |
| No | $3 \rightarrow$ Q25h | SCPRGH32 |

f. How often have you consulted a doctor about your angina in the last 12 months? Enter a numeric value between 0 and 100.

$$
\text { Number } \quad \begin{array}{|l|l|l|}
\hline & & \\
\cline { 2 - 4 }
\end{array}
$$

If only consulted a doctor, go toQ25g.
g. How often have you consulted a health professional about your angina in the last 12 months? Enter a numeric value between 0 and 100.

$$
\text { Number } \quad \begin{array}{ll|l|l|}
\hline & & \\
& \simeq \text { OANG }
\end{array}
$$

h. Have you taken any prescribed medicines or tablets for your angina in the last $\mathbf{1 2}$ months?

| Yes | 1 |  |
| :--- | :--- | :--- |
| No | $2 \rightarrow$ Q26 | $\simeq$ PANG |
| (Can't remember) | $3 \rightarrow$ Q26 |  |

i. Please tell me the name of the prescribed medicines or tablets that you have taken for this in the last $\mathbf{1 2}$ months. Probe for others and record verbatim.

$$
\begin{aligned}
& \pm \text { PANG1 } \\
& \stackrel{*}{ }-\text { ANGIN }
\end{aligned}
$$

| Yes | $1 \rightarrow \mathrm{Q} 26 \mathrm{c}$ |
| :--- | :--- |
| No | 2 |

b. Have you ever had any pressure or heaviness in your chest?

* CHPR

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q27 |

c. Do you get it when you walk uphill or hurry?

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 27$ |
| Never walks uphill or hurries | 3 |

d. Do you get it when you walk at an ordinary pace on the level?

* CHPRN

| Yes | 1 |
| :--- | :--- |
| No | 2 |
| Never walks | $3 \rightarrow$ Q27 |

b. What do you do if you get it while walking? Do you ....read out....

* CHPRR

Stop or slow down 1
Carry on or $\quad 2 \rightarrow$ Q27
Carry on after taking a nitro-glycerine tablet under your tongue? $3 \rightarrow$ Q27
f. And if you stand still what happens to it. Does the pain in your chest ....read out.... $\quad \underset{\sim}{\text { CHPRS }}$

Go away, $\quad 1$
Or not go away? 2
g. How soon does it go away. Does it go in ....read out....

* CHPRT

10 minutes or less 1
Or more than 10 minutes? $\quad 2 \rightarrow$ Q27
h. Show card B. Will you show me where you get this pressure or heaviness in the chest? Nurse: Use show card B to help code the position. Code all that apply. Probe: Anywhere else? Enter at most 6 values.

Sternum (upper or middle) 1
Sternum lower 2
Left anterior chest 3
Left arm 4
Right anterior chest 5
Right arm 6
(Somewhere else) $\quad 7$
i. Did you see a doctor or hospital specialist because of this pain or discomfort? If yes, probe for who: Who? Code all that apply.

Enter at most 3 values.

* CHPRD1

CHPRD2
$-0$
Yes, GP 1
Yes, hospital specialist 2
27. Do you get pain in either leg on walking?

$$
\begin{aligned}
& 1 \\
& 2 \rightarrow \text { Q28 } \\
& 3 \rightarrow \text { Q28 }
\end{aligned}
$$

b. Does this pain ever begin when you are standing still or sitting?
$\simeq \mathrm{LGP}$

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q28 |
| Respondent is chair/bed bound | $3 \rightarrow$ Q28 |

c. In what part of your leg do you feel this pain or discomfort? Nurse: Ask respondent to point. $\simeq$ LGPP T

| In calf muscle(s) | 1 |
| :--- | :--- |
| Not in calf muscle(s) | $2 \rightarrow$ Q28 |

d. Do you get it if you walk uphill or hurry
Yes 1

No $\quad 2 \rightarrow$ Q28
Never hurries or walks uphill3
e. Do you get it when you walk at an ordinary pace on the level?
$\simeq$ LGPU

Y
Yes
No 2
Never walks $\quad 3 \rightarrow$ Q28
f. Does the pain ever disappear while you are walking?

Yes $\quad 1 \rightarrow \mathrm{Q} 28$
No
2
g. What do you do if you get it when you are walking? Do you ....read out....
$\simeq$ LGPR
Stop or slow down
1
Carry on $\quad 2 \rightarrow$ Q28
h. What happens to it if you stand still. Is the pain....read out....
$\pm$ LGPX
Still not relieved $\quad 1 \rightarrow \mathrm{Q} 28$
Or does it go away? 2
i. How soon does it go away. Does it go in....read out....
$\simeq$ LGPT
10 minutes or less 1
Or more than 10 minutes? 2
28.Have you ever suffered from a heart attack?
$\simeq$ HARAE

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q29 |

b. How many heart attacks have you had? Nurse: enter number. Enter a numeric value between 1 and 20
$\simeq$ HARAN
Number $\square$
c. Who diagnosed these heart attack(s). Was it ....read out.... Nurse: For more than one heart attack code all that apply. Enter at most 2 values.

| A GP, | 1 |  |  |
| :--- | :--- | :--- | :--- |
| A specialist, | 2 | $\simeq$ HARAD1 | HARAD2 |
| Or was no medical diagnosis made? | 3 |  |  |

d. How old were you when you had your first heart attack? Enter number in years. If less than one, enter 0. Enter a numeric value between 0 and 53 .

Age $\quad \square=$ HARAB
e. How old were you when you had your most recent heart attack? Enter number in years. Enter a numeric value between 0 and 53.

Age $\square$

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~ HARAL
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29.Now I would like to ask you about some more specific health problems or illnesses. \#^ Looking at this card, please tell me which of these kinds of heart trouble you have had, if any, in the last ten years that is since you were 43 years old? Nurse code all that apply. Show card C. Enter at most 8 values.

| Coronary thrombosis | $1 \rightarrow$ Q29c |  | HEART1 |
| :--- | :--- | :---: | :---: |
| Myocardial infarction | $2 \rightarrow$ Q29c |  | HEART2 |
| Valvular disease | $3 \rightarrow$ Q29c |  | HEART3 |
| Aortic stenosis | $4 \rightarrow$ Q29c | $\pm$ | HEART4 |
| Ischaemic heart disease | $5 \rightarrow$ Q29c |  | HEART5 |
| Tachycardia | $6 \rightarrow$ Q29c |  |  |
| Palpitations or heart murmur $7 \rightarrow$ Q29c |  |  |  |
| Other (please specify) | $8 \rightarrow$ Q32b | $9 \rightarrow$ Q30 |  |
| None of these |  |  |  |

b. What kind of heart trouble have you had? Nurse type verbatim.
$\qquad$

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+ OTHHRT
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c. Has a doctor said you had this problem?

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\pm HDOCTOLD
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| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q30 |

d. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

Age |  |  |  |  |
| :--- | :--- | :--- | :--- |

30. Have you had any kind of blood pressure problems in the last ten years that is since you were 43 years old?

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q31 |

b. What blood pressure problems have you had? Enter at most 3 values. $\pm$ WHTBP 1

Other kind of blood pressure
c. Has a doctor said you had this problem?
$\pm$ BDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

d. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

Age
 $\pm$ BAGE
31. And in the last ten years (that is since you were 43 years old,) have you had a stroke? $\pm$ STROKE

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q32 |

b. Has a doctor said you had this problem?
$\pm$ SDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

Age


## $\pm$ SAGE

32. And in the last ten years (that is since you were 43 years old,) have you had a thyroid disorder? If asked: examples include goitre, hyperthyroidism or hypothyroidism.
$\pm$ THYRASK

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q33 |

b. What kind of thyroid disorder have you had? Nurse: code all that apply. Enter at most 4 values. $\pm$ THYROID1

Goitre 1 THYROID2
Hyperthyroidism 2
Hypothyroidism 3
Other 4
c. Has a doctor said you had this problem?
$\pm$ TDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

d. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

33. And in the last ten years (that is since you were 43 years old,) have you had meningitis or encephalitis? $\pm$ MENIN

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q34 |

b. Has a doctor said you had this problem?

+ MDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

34. (And) in the last ten years (that is since you were 43 years old,) have you had shingles? $\pm$ SHIN

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q35 |

b. If yes, probe 'Did your shingles involve your eyes?' Did you have shingles....read out.... $\pm$ SPROB

Yes, involving the eyes 1
Yes, not involving the eyes 2
No
c. Has a doctor said you had this problem?
$\pm$ SHDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

d. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

35. And in the last ten years (that is since you were 43 years old,) have you ever had any fits or epilepsy? $\pm$ FIT

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q36 |

b. Has a doctor said you had this problem?
$\pm$ FDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.
Age $\square$ $\pm$ FAGE
36. And in the last ten years (that is since you were 43 years old, have you had cancer? $\pm$ CANCER

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q37 |

b. Looking at this card [please tell me what type of cancer you have had in the last ten years? Show card D. Nurse: Code all that apply and give any further details by opening a notepad by using Ctrl + M. Enter at most 11 values.

| Leukaemia | $1 \rightarrow$ Q36d |  |
| :--- | :--- | ---: |
| Hodgkin's disease | $2 \rightarrow$ Q36d |  |
| Lymphoma | $3 \rightarrow$ Q36d |  |
| Skin cancer | $4 \rightarrow$ Q36d | $\pm$ CWHERE01 |
| Bone cancer | $5 \rightarrow$ Q36d | CWHERE02 |
| Breast cancer | $6 \rightarrow$ Q36d |  |
| Cancer of the uterus | $7 \rightarrow$ Q36d |  |
| Cancer of the cervix | $8 \rightarrow$ Q36d |  |
| Cancer of the colon | $9 \rightarrow Q 36 d$ |  |
| Other (specify) | 10 |  |

c. What other kind of cancer have you had? Nurse: type verbatim.
$\qquad$ $\pm$ OTHCNCER
d. Has a doctor said you had this problem?
$\pm$ CDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

Age $\quad$|  |  |  |
| :--- | :--- | :--- |

37. And in the last ten years (that is since you were 43 years old,) have you had Chronic fatigue syndrome or Myaligic
encephalomyelitis, better known as ME?
$\pm \mathrm{ME}$
$\begin{array}{ll}\text { Yes } & 1 \\ \text { No } & 2 \rightarrow \text { Q38 }\end{array}$
b. Has a doctor said you had this problem?
$\pm$ MEDOCTLD
$\begin{array}{ll}\text { Yes } & 1 \\ \text { No } & 2\end{array}$
No 2
c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

$\pm$ MEAGE
38. And in the last ten years (that is since you were 43 years old,) have you had diabetes? $\quad \underset{\sim}{\text { DIAB }}$

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q39 |

b. What kind of diabetes have you had. Was it....read out.... Nurse: code all that apply. Enter at most 3 values. $\pm$ KINDDIA1 Insulin-dependent 1
Non-insulin dependent or 2
High blood sugar or 3
Some other kind of diabetes? 4
c. Has a doctor said you had this problem?
$\pm$ DDOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

d. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.


## $\pm$ DAGE

39. And in the last ten years have you had asthma? $\pm$ ASTHMA

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 40$ |

b. Has a doctor said you had this problem? $\pm$ ADOCTOLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.


## $\pm$ AAGE

40. And in the last ten years that is since you were 43 years old, have you had hay fever? $\pm$ HAYF

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 41$ |

b. Has a doctor said you had this problem? $\pm$ HFDOCTLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.

$\pm$ HFAGE
41. And in the last ten years have you suffered from migraines? $\pm$ HEADACHE

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow Q 42$ |

b. Has a doctor said you had this problem? $\pm$ HADOCTLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. How old were you then? Nurse: Enter age when diagnosis first made. Nurse; If respondent gives you a year rather than an age you can enter the year here instead. Enter 0 if born with illness. Enter a numeric value between 0 and 2000.
$\square$
42. (And in the last ten years that is since you were 43 years old,) have you had a sudden speech problem which got better after a day?
Yes
1
$\pm$ SPEECH
No
2
43. (And) in the last ten years (that is since you were 43 years old,) have you had sudden sight problems which got better after a day?
Yes $\quad 1$
$\pm$ SIGHT
No
2
44. And in the last ten years (that is since you were 43 years old,) have you had a sudden weakness in an arm or leg which got better after a day?

| Yes | 1 | $\pm$ LIMB |
| :--- | :--- | :--- |
| No | 2 |  |

45. And in the last ten years (that is since you were 43 years old,) have you had anaemia? $\pm$ BLOOD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

46. (And in the last ten years) have you had any liver diseases?
$\pm$ LIVER
Yes 1
No 2
47. (And in the last ten years) have you had any stomach trouble such as ulcers, gastritis or acid indigestion?

| Yes | 1 | $\pm$ |
| :--- | :--- | :--- |
| No | 2 | $\pm U M$ |

48. (And in the last ten years) have you had gall bladder trouble?

+ GALLB

| Yes | 1 |
| :--- | :--- |
| No | 2 |

49. (And in the last ten years) have you had any kidney or bladder infections?
$\pm$ KIDNEY
Yes 1
No 2
50. (And in the last ten years) have you had a hernia?
$\pm$ HERNIA
Yes 1
No 2
51. (And in the last ten years) have you had any allergies?

+ ALLERGY
Yes 1
No 2

52. (And in the last ten years) have you had cataracts, glaucoma or other serious eye trouble? $\pm \mathrm{EYE}$

Yes 1
No 2
53. (And in the last ten years) have you had any skin trouble such as eczema or psoriasis? + SKIN
Yes 1
No 2
54. (And in the last ten years) have you had any persistent trouble with your gums or mouth?

Yes 1
No 2
55. Do you now regularly take any prescribed medicines? $\quad \underset{\sim}{*} \mathrm{OHOM}$

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q56 |

b. What are they called? Nurse: Record names of all medicines and they are used for.
$\pm$ OHOP
56. Do you usually cough first thing in the morning in the winter?

* WIC

| Yes | 1 |
| :--- | :--- |
| No | 2 |

b. Do you usually cough during the day or night in winter?
*WID
Yes 1
No 2 (If no to both 56a \& b $\rightarrow$ Q57)
c. Do you cough like this on most days for as much as 3 months each year?

* WIM

| es | 1 |
| :--- | :--- |
| No | 2 |

57. Do you usually bring up any phlegm (spit from the chest) first thing in the morning in winter? * P HL
Yes 1

No 2
b. Do you usually bring up any phlegm during the day or at night in winter?

* PHLD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

c. Do you bring up phlegm on most days for as much as 3 months each year?

* PHLM

| Yes | 1 |
| :--- | :--- |
| No | 2 |

d. In the past 3 years, have you had a period of cough and phlegm lasting for 3 weeks or more? $\quad \underset{-}{ }$ COPH

| Yes | 1 |
| :--- | :--- |
| No | 2 |

e. Does your chest ever sound wheezy or whistling?

* WZY

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q57g |

f. Do you get this most days or nights?

* WZYD

| Yes | 1 |
| :--- | :--- |
| No | 2 |

g. During the past 3 years, have you had any chest illness, for example, bronchitis or pneumonia, which has kept you off work or indoors for a week or more?

* BRONC

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q58 |

h. How many illnesses like this have you had in the last 3 years. Have you had....read out....
One or $1 \quad \underset{\sim}{*}$ NUM

More than one 2
i. Did you consult a doctor about this during the last 3 years?

$$
\simeq \text { BROND }
$$

| Yes | 1 |
| :--- | :--- |
| No | 2 |

58. Now a few questions about smoking. Can I check, do you smoke cigarettes at all nowadays? * SMOS

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow Q 59$ |

b. How many cigarettes a day do you usually smoke? Nurse: If roll-ups give equivalent number of cigarettes. Enter number. Enter a numeric value between 1 and 300.

$$
\stackrel{*}{*} \text { SMODS }
$$

c. What is the main brand of cigarettes you smoke? Nurse: Ask to see packet if necessary. Type both the brand and the type.
$\qquad$ * SMOSB
d. Enter the 4 digit cigarette brand code. Enter a numeric value between 0 and 9999.

|  |  |  |  | $*$ CIGCODEA $\rightarrow \mathrm{Q} 60$ |
| :--- | :--- | :--- | :--- | :--- |

59. Have you ever smoked cigarettes regularly, by which I mean at least one cigarette a day for 12 months or more? ${ }_{-}^{*}$ SMOSE

| Yes | 1 |
| :--- | :--- |
| No | 2 |

60. Do any of the people you live with smoke cigarettes at home?
$\simeq \mathrm{SMOH}$

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q61 |
| Not applicable | $3 \rightarrow$ Q61 |

b. Thinking about all the people you live with, on average, about how many cigarettes a day do they smoke at home? Enter total number of cigarettes. Enter a numeric value between 0 and 90.

Number $\quad$|  |  | $\simeq$ SMOSP |
| :--- | :--- | :--- |

$\begin{array}{cll}\text { 61.Do you smoke a pipe? } & & * \text { PIPE } \\ \text { Yes } & 1 & \\ \text { No } & 2 \rightarrow \text { Q62 } & \end{array}$
b. How much pipe tobacco do you usually smoke per week? Nurse: Enter code first and amount at next question.

| Grams or | 1 | $\pm$ PAMNT |
| :--- | :--- | :--- |
| Ounces | 2 |  |

c. Nurse: Enter amount in grams. If less than one gram, enter 0 . Enter a numeric value between 0 and 900.

Amount $\quad$|  |  |  |  |
| :--- | :--- | :--- | :--- |

d. Nurse: Enter amount in ounces. If less than one ounce, enter 0 . Enter a numeric value between 0 and 90.

Amount $\quad$|  |  |  |
| :--- | :--- | :--- |

f. What brand of tobacco you smoke? Nurse: ask to see packet if necessary. $\quad \underset{\sim}{*}$ IPEB
62. Do you smoke cigars? $\quad$ - CIG
Yes $\quad 1$

No $\quad 2 \rightarrow$ Q63
b. How many cigars do you smoke per week? Enter a numeric value between 0 and 300 .

```
\pm CIGA
```

c. What brand of cigars you smoke? Nurse: ask to see packet if necessary. $\pm$ CIGS
63. Did either of your parents smoke cigarettes, cigars or pipes when you lived with them as a child? Nurse: If did not live with parents, ask about the people respondent lived with. Code all that apply. Enter at most 4 values.

Mother smoked 1
Father smoked 2
Neither smoked 3
Can't answer 4
64. Now some questions about your family? \#^ Can I now check, is your natural mother alive? $\quad \underset{\sim}{*}$ MLIV
Yes
$1 \rightarrow$ Q65
No
2
b. How old was your mother when she died? Enter age in years. Enter a numeric value between 10 and 120.

c. What was the date of her death, the year first please? If don't know press Ctrl+K. Enter a numeric value between 1946 and 1999.

Year


* MDY
d. The month please? If don't know press Ctrl+K. Enter a numeric value between 1 and 12 .

Month $\quad \square \quad \square \quad \underset{\sim}{*}$ MDM
e. The day please? If don't know press Ctrl+K. Enter a numeric value between 1 and 31 .
Day


* MDD
f. What was the cause of her death? (If necessary, probe: What was on the death certificate?) Write in fully.
$\pm$ MCAUSE

65. (Can I now check,) is your natural father alive? $\quad \underset{\sim}{*}$ FLIV

| Yes | $1 \rightarrow$ Q66 |
| :--- | :--- |
| No | 2 |

b. How old was your father when she died? Enter age in years. Enter a numeric value between 10 and 120.

Age $\quad \square$
c. What was the date of his death, the year first please? If don't know press Ctrl+K. Enter a numeric value between 1946 and 1999.

$$
\text { Year } \quad \begin{array}{|l|l|l|l|}
\hline & & & \\
\hline
\end{array} \quad \underset{\sim}{*} \text { FDY }
$$

d. The month please? If don't know press Ctrl + K. Enter a numeric value between 1 and 12 .

Month

* FDM
e. The day please? If don't know press Ctrl+K. Enter a numeric value between 1 and 31 .
Day
* FDD
f. What was the cause of his death? (If necessary, probe: What was on the death certificate?) Write in fully. $\pm$ FCAU

If male respondent go to Q73.
66. I would now like to ask you some questions about mammograms, which are x-rays of the breast. Have you ever had a mammogram?

| Yes | 1 | $\simeq M M E$ |
| :--- | :--- | :--- |
| No | $2 \rightarrow Q 69$ |  |

67. When did you have your first mammogram. Please either tell me the year or how old you were at the time? Nurse: record whether the answer is being given as a year or as an age.

| Age | $1 \rightarrow \mathrm{Q} 67 \mathrm{~b}$ |  |
| :--- | :--- | :--- |
| Year | $2 \rightarrow \mathrm{Q} 67 \mathrm{c}$ | $\pm$ AGEYEAR1 |
|  |  |  |
| enter age in years. Enter a numeric value between 0 and 53. | + MMMA1 |  |

Age $\quad \square \rightarrow$ Q67d
c. Nurse: Enter year using 4 digits. Enter a numeric value between 1946 and 2001. + MMYX

Year

d. What is the name of the hospital/medical facility you attended for your mammogram? Nurse: type in full name. (If don't know, type ' $d k$ ')
$\pm$ MAM1NAME
e. What town is the hospital/medical facility in? Nurse: type in full name. (If don't know, type 'dk')
$\pm$ MAM1 TOWN
f. Was the mammogram part of a routine breast screening?
$\pm$ MMR1

| Yes | 1 |
| :--- | :--- |
| No | 2 |

g. Was anything abnormal found in your first mammogram?
Yes
No $\quad 2 \rightarrow$ Q67i
$\pm$ MMAB1
$\pm$ MMB1WHAT
i. Have you had any other mammograms since the one we've just talked about?

+ MAMMOTH

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 69$ |

68. When did you have your most recent mammogram. Please either tell me the year or how old you were at the time? Nurse: record whether the answer is being given as a year or as an age.
$\pm$ AGEYEARR

| Age | $1 \rightarrow$ Q68b |
| :--- | :--- |
| Year | $2 \rightarrow$ Q68c |

b. Nurse: Enter age in years. Enter a numeric value between 0 and $53 . \quad+$ MMMAR

Age $\quad \square \quad \rightarrow$ Q68d
c. Nurse: Enter year using 4 digits. Enter a numeric value between 1946 and 2001. + MMYXR

Year

d. What is the name of the hospital/medical facility you attended for your mammogram? Nurse: type in full name. (If don't know, type 'dk')
$\pm$ MAMRNAME
e. What town is the hospital/medical facility in? Nurse: type in full name. (If don't know, type 'dk') $\pm$ MAMRTOWN
f. Was the mammogram part of a routine breast screening? $\pm$ MMRR

| Yes | 1 |
| :--- | :--- |
| No | 2 |

g. Was anything abnormal found in your most recent mammogram?

| Yes | 1 | $\pm$ MMABR |
| :--- | :--- | :--- |
| No | $2 \rightarrow$ Q57 |  |

h. What was found? Nurse: Type in verbatim. $\pm$ MMBRWHAT
69. Have you ever consulted a doctor about breast lumps? $\simeq$ LUE

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Nurse: circle code $\mathbf{0 8}$ on front of consent booklet. $\wedge$ Q73 |

70. How many times have you consulted a doctor about breast lumps. Is it ....read out... Nurse: if asked, doctor can be a doctor of any kind i.e. GP, hospital consultant etc.

| Once | 1 |  |
| :--- | :--- | :--- |
| Twice | 2 | $\pm$ LUTIME |
| 3 times or | 3 |  |
| More than 3 times? | 4 |  |

b. I would now like to ask you some questions about your first consultation about breast lumps. When did you have your first consultation. Please either tell me the year or how old you were at the time? Nurse: record whether the answer is being given as a year or as an age.

| Age | $1 \rightarrow$ Q70d | $\pm$ LUWHENX |
| :--- | :--- | :--- |
| Year | $2 \rightarrow$ Q70e |  |

c. Nurse: Enter age in years. Enter a numeric value between 0 and 53. $\pm$ LUAX

d. Nurse: Enter year using 4 digits. Enter a numeric value between 1946 and 2001. $\pm$ LUYX

Year

e. So your first consultation was in [LFF year] when you were [LFF age]. Is that correct?
$\pm$ LUXCHK
Yes
1
No 2 Nurse: go back and amend.
f. In what month of [LFF year] did you have your first consultation? Nurse: please enter the month. Enter a numeric value between 0 and 12.

Month $\quad \square \pm$ LUMX
g. Show Card E. Looking at the show card E, please tell me what was the diagnosis. Please choose an answer from this card.

Nurse: code one only.
$\pm$ LUDGX
No abnormality
Benign breast lump
Breast cancer
Other, specify at next question
Status unknown
h. What was the diagnosis?
$1 \rightarrow$ Q70j
$2 \rightarrow$ Q70j
$3 \rightarrow$ Q70j
4
$5 \rightarrow$ Q70j
i. Did you have a breast biopsy, (that is having a small piece of tissue removed from your breast)? $\pm$ LUBX
Yes
1
No $\quad 2 \rightarrow$ Q71
j. What is the name of the hospital you attended for your biopsy in [LFF month and year]. Nurse: type in full name. (If don't know, type 'dk') $\pm$ LUHOSPX
k. What town is the hospital in? Nurse: type in full name. (If don't know, type 'dk')

1. And can you tell me the name of the consultant in charge of your biopsy?
$\pm$ LUCONSX
2. If only one consultation about breast lumps, go to Q72. I would now like to ask you some questions about your most recent consultation about breast lumps. When did you have your most recent consultation. Please either tell me the year or how old you were at the time? Nurse: record whether the answer is being given as a year or as an age.

| Age | $1 \rightarrow$ Q71d | $\pm$ |
| :--- | :--- | :--- |
| Year | $2 \rightarrow$ Q71e | $\pm$ |

b. Nurse: Enter age in years. Enter a numeric value between 0 and $53 . \pm$ LUAX2

Age
$\rightarrow$ Q71f
c. Nurse: Enter year using 4 digits. Enter a numeric value between 1946 and 2001.
$\pm$ LUYX2
Year
d. So your first consultation was in [LFF year] when you were [LFF age]. Is that correct?

| Yes | 1 |
| :--- | :--- |
| No | 2 Nurse: go back and amend. |

e. In what month of [LFF year] did you have your first consultation? Nurse: please enter the month. Enter a numeric value between 0 and 12.

Month $\quad \square \pm$ LUMX2
f. Show Card E. Looking at the show card E, please tell me what was the diagnosis. Please choose an answer from this card. Nurse: code one only.
? LUDGX2
No abnormality $\quad 1 \rightarrow$ Q71j
Benign breast lump $\quad 2 \rightarrow$ Q71j
Breast cancer $3 \rightarrow$ Q71j
Other, specify at next question
Status unknown
$5 \rightarrow$ Q71j
g. What was the diagnosis?
$\pm$ LUOTH2
h. Did you have a breast biopsy, (that is having a small piece of tissue removed from your breast)? $\pm$ LUBX2

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q72 |

i. What is the name of the hospital you attended for your biopsy in [LFF month and year]. Nurse: type in full name. (If don't know, type 'dk') $\quad \pm$

LUHOSPX2
j. What town is the hospital in? Nurse: type in full name. (If don't know, type 'dk')
k. And can you tell me the name of the consultant in charge of your biopsy?
$\pm$ LUTOWNX2
$\pm$ LUCONSX2
72. To help analyse this information more effectively, we may wish to obtain a copy of your mammogram. Would you be willing for the Medical Research Council to do that? $\pm$ CNSNT4IN

```
Yes
1
2->Nurse: circle code 08 on front of consent booklet. ^Q73
```

b. In order for this to be done, we need to obtain your written permission. Could you please read Consent Form 4 then sign and date it? $\pm$ CONSENT 4Nurse: Please make sure the form is correctly signed and dated. $\wedge$ Nurse: Circle code 07 on front of consent booklet. $\wedge$
73. In the last 12 months, have you had pain or stiffness in your left hand or fingers on most days for at least a month? Probe for which. Code all that apply. Enter at most 2 values.

| Pain | 1 |  |  |
| :--- | :--- | :--- | :--- |
| Stiffness | 2 | $\simeq$ HNPL1 | HNP L2 |
| Neither | 3 |  |  |

74. In the last 12 months, have you had pain or stiffness in your right hand or fingers on most days for at least a month? Probe for which. Code all that apply. Enter at most 2 values.

| Pain | 1 |  | HNPR1 |
| :--- | :--- | :--- | :--- |
| Stiffness | 2 | $\simeq$ | HNPR2 |
| Neither | 3 |  |  |

75. Do you have difficulty because of long term health problems holding something heavy like a full kettle or removing a stiff lid from a jar?

| No | 0 | $*$ | GRIP |
| :--- | :--- | :--- | :--- |
| Yes | 1 |  |  |

76. Now I would like to examine your hands for any bumps or swellings. Would you be willing for me to examine your hands? If no, record whether refusal or other reason.

| Yes | 1 |  | HAND1 |
| :--- | :--- | :--- | :---: |
| No refuses | $2 \rightarrow$ Q77 | $\pm$ | HAND2 |

b. Fill out details on front cover and make examination of each hand and record markings on page 2 of paper test booklet. Serial: [LFF] Date: [LFF] \#^
77.How frequently at home or at work do you use your hands in strong movements, such as squeezing water out of a towel, playing racket sports, digging the garden, or carrying heavy items such as a suitcase, briefcase, bucket or shopping bag. Please choose an answer from this card. Show card $F$

```
Several times a day 1
Once a day 2
Once or several times a week 3}\simeq~\mathrm{ HNSMF
Occasionally 4
Never 5
```

78. Do you have difficulty because of long term health problems using either arm to reach up high above your head or to reach behind to tuck a shirt in or do up a zip? $\quad *$ ARM

| Yes | 1 |
| :--- | :--- |
| No | 2 |

79.How frequently at home or at work do you use your arms to reach up above head, such as dusting high pictures, replacing light bulbs, reaching objects on high shelves, or gardening activities like pruning or trimming high hedges. Please choose an answer from this card. Show card F

| Several times a day | 1 |  |
| :--- | :--- | :--- |
| Once a day | 2 |  |
| Once or several times a week | $3 \simeq$ SHAHF |  |
| Occasionally | 4 |  |
| Never | 5 |  |

80.In the last 12 months, have you had pain or stiffness in your left knee on most days for at least a month? Probe for which.

Code all that apply. Enter at most 2 values. $\simeq$ KNP L1

| Pain | 1 | KNP L2 |
| :--- | :--- | :--- |
| Stiffness | 2 |  |
| Neither | 3 |  |

81.In the last 12 months, have you had pain or stiffness in your right knee on most days for at least a month? Probe for which. Code all that apply. Enter at most 2 values. $\simeq$ KNPR1

| Pain | 1 | KNPR2 |
| :--- | :--- | :--- |
| Stiffness | 2 |  |
| Neither | 3 |  |

82. Have you ever injured your knees badly enough to see a doctor about it? Probe for which. Code all that apply. Enter at most 2 values.

| Right knee | 1 |  |
| :--- | :--- | :--- |
| Left knee | 2 | $\pm$ |
| Never had a knee injury | 3 | KNEE2 |

83. In the last 12 months, have you had sciatica, lumbago or severe backache? $\pm \mathrm{BACK}$

| Yes | 1 |
| :--- | :--- |
| No | 2 |

84.Do you find it difficult to walk for a quarter of a mile on the level because of long term health problems? If asked: a quarter of a mile is 400 yards.
$\pm$ WALK

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 85$ |

b. How far can you walk without stopping or severe discomfort. Would you say....read out.... If asked a quarter of a mile is 400 yards.

| More than 400 yards | 1 |  |
| :--- | :--- | :--- |
| 200 to 400 yards | 2 | $*$ |
| 50 to 200 yards or | 3 |  |
| Less than 50 yards | 4 |  |

85. Do you find it difficult walking up and down stairs, because of long term health problems? $\quad * \quad$ STEP

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow$ Q86 |

b. Can you walk up and down a flight of 12 stairs in a normal manner without holding on or taking a rest? * STEPL
Yes 1

No 2
86.Do you easily fall or have difficulty keeping your balance because of long term health problems? $\quad \underset{-}{ }$ FALL

| Yes | 1 |
| :--- | :--- |
| No | 2 |

b. Have you fallen at all in the past 12 months that is since [LFF month and year]?
$\pm$ FALLEN

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 87$ |

c. How many times have you fallen in the past 12 months. Have you fallen ....read out....
$\pm$ FALLNO
Once or twice
1
Between 3 and 11 times or 2
Have you fallen 12 or more times in the past 12 months 3
87. I would now like to assess your balance and co-ordination. First, I will ask you to fold your arms and, after I count up to three, stand on your preferred leg, and raise your other foot off the floor like this (nurse demonstrate). I will ask you to hold this position for as long as you can or until I tell you to stop. Then I want you to repeat the test with your eyes closed. Would you be willing to have a go? Nurse code one only.

Respondent willing 1
Respondent not willing $2 \rightarrow$ Q88 $\pm$ BALINT
Respondent unable to perform test $\quad 3 \rightarrow$ Q88
b. Which is your dominant leg (ignoring any current injury)? If asked: Which leg would you kick a ball with or hop on. Code one only.

| Right leg | 1 | $\simeq$ | LEGDM |
| :--- | :--- | :--- | :--- |
| Left leg | 2 |  |  |

c. Nurse carry out test with cohort member's eyes open. Allow the cohort member to practice. Nurse code one only.

| Balance measured | 1 |  |
| :--- | :--- | :--- |
| Balance refused | $2 \rightarrow$ Q87e | $\pm$ OPENRESP |
| Balance attempted, not obtained | $3 \rightarrow Q 87 e$ |  |
| Balance not attempted | $4 \rightarrow$ Q87e |  |

d. Nurse: record time for balance test with eyes open. Enter time in seconds. Enter a numeric value between 0 and 30 . Time
$\simeq$ LEGBP
e. Nurse carry out test with cohort member's eyes open. Allow the cohort member to practice. Set stop watch for 30 seconds. Nurse code one only.

| Balance measured | 1 |  |  |
| :--- | :--- | :--- | :--- |
| Balance refused | $2 \rightarrow \mathrm{Q} 88$ | CLSERESP |  |
| Balance attempted, not obtained | $3 \rightarrow \mathrm{Q} 88$ |  |  |
| Balance not attempted | $4 \rightarrow \mathrm{Q} 88$ |  |  |

f. Nurse: record time for balance test with eyes closed. Enter time in seconds. Enter a numeric value between 0 and 30.

Time $\simeq$ LEGBC
88. I would now like you to do some chair stands. First I will ask you to fold your arms and, after I count up to three, I will ask you to stand up from your chair and sit down again ten times like this (nurse demonstrate). Would you be willing to have a go? Nurse code one only.

| Respondent willing | 1 |  |  |
| :--- | :--- | :--- | :--- |
| Respondent not willing | $2 \rightarrow \mathrm{Q89}$ | $\pm \quad$ CHAIRINT |  |
| Respondent unable to perform test | $3 \rightarrow \mathrm{Q} 89$ |  |  |

b. Nurse: Let the cohort member practice then record time for chair stands test. Enter time in seconds. Enter code 888 if respondent unable to finish. Enter a numeric value between 0 and 888.
$\simeq$ CHRST
89. Have you broken a bone since you were 25 years old?
$\simeq B R O K B$

| Yes | 1 |
| :--- | :--- |
| No | 2 |

90. Have you ever been knocked unconscious by a blow to the head? $\simeq$ KOUNE

| Yes | 1 |
| :--- | :--- |
| No | 2 |

91. In the last 4 weeks, that is since [LFF day and date], have you taken part in any sports or vigorous leisure activities or done any exercises in your spare time, not including getting to and from work? If asked: Include things like badminton, swimming, yoga, press-ups, dancing, mountain climbing or jogging and brisk walks for 30 minutes or more. $\quad{ }_{-}$EXER

| Yes | 1 |
| :--- | :--- |
| No | $2 \rightarrow \mathrm{Q} 92$ |

b. On how many occasions in the last 4 weeks did you do these activities? Enter a numeric value between 1 and 100.

Number $\square$
c. On how many of these occasions did your exercise make you sweaty and or out of breath? Enter a numeric value between 0 and 100.

Number |  |  |  |
| :--- | :--- | :--- |
|  | EXERS |  |

92. The next few questions are about your social life, particularly with friends and relatives who do not live at home with you. $\wedge$ Are there any relatives or friends with whom you have regular contact, either by visit, telephone or letters? $\pm$ FRNDC1
```
Yes 1
No 2
```

b. Thinking of all your relatives or friends, how often do you regularly visit or are visited by these people. Do you see them....read out....
$\simeq F R N D C$
Never/almost never 1
Once every few months 2
About once a month 3
About once a week 4
Almost daily 5
c. How often do you regularly visit or are visited by these persons? ) *

Never/almost never 1
Once every few months 2
About once a month 3
About once a week 4
Almost daily 5
93. How many relatives or friends do you see once a month or more? * FRNDR

| None | 1 |
| :--- | :--- |
| $1-2$ | 2 |
| $3-5$ | 3 |
| $6-10$ | 4 |
| More than 10 | 5 |

94. Do you think that you have friends, neighbours or relatives who would help you out if a problem or crisis came up?

Would you say you had ....read out....

* FRNDH

No one to help 1
Would sometimes get help 2
Would often get help, or 3

Would always get help? 4
95. Overall do you wish that you had more of a social life, or are things about right for you, or would you prefer to see less of people?

| Prefer less | 1 |  |
| :--- | :--- | :--- |
| About right | 2 | $*$ |
| Prefer more | 3 |  |

96. I would now like to ask you some questions about things you have experienced over the last 12 months, that is since [LFF month and year]. Thinking back over the last 12 months have you developed, or found out that you have, a serious illness or disability?

* ILL
Yes
No
1
b. Have you had an accident or received an injury which has affected you for a month or more? * AC

Yes 1
No 2
c. Have you been assaulted, robbed or been a victim of attempted robbery? $\underset{\sim}{*} \mathrm{ROB}$
Yes
1
No
2
d. Have you lost your job or thought you would soon lose your job?

* LJOB

Yes 1
No 2
e. Have you had any other crises or serious disappointments in your work or career in general? * WKC

Yes 1
No 2
f. Have you moved house in the last 12 months? $\quad \underset{\sim}{\text { HOU2 }}$

Yes 1
No 2
g. Did you move away from the area where most of your friends lived? $\quad$ HOUM

| Yes | 1 |
| :--- | :--- |
| No | 2 |

h. During the last 12 months has your spouse/partner had a serious accident or illness, or received a serious injury, or been assaulted?

| Yes | 1 |  |
| :--- | :--- | :--- |
| No | 2 | ${ }_{-}$ |

No spouse/partner 3
i. Has your spouse/partner lost their job or thought they would soon lose their job?

* $\operatorname{SPLJ}$

| Yes | 1 |
| :--- | :--- |
| No | 2 |
| No spouse/partner | 3 |

j. Has your spouse/partner had any other crises or serious disappointments in their work? $\quad \underset{-}{ }$ SPCR

| Yes | 1 |
| :--- | :--- |
| No | 2 |
| No spouse/partner | 3 |

k. Have you had any serious disagreements with your spouse/partner or felt betrayed or disappointed by them? $\quad \underset{\sim}{*} \operatorname{DSP}$

Yes 1
No 2
No spouse/partner 3
l. In the last 12 months have you had any serious difficulties with any of your children, because of their health or behaviour or for other reasons?

| Yes | 1 |  |
| :--- | :--- | :--- |
| No | 2 |  |
| No children | 3 |  |

m. Has a friend or relative (other than your spouse/partner or children) or someone you know well had a serious accident or illness or received a serious injury?

| Yes | 1 |
| :--- | :--- |
| No | 2 |

* RELIL

Not had a friend/relative known anyone well this year3
n. Has a friend or relative or someone you know well died during the last 12 months?
Yes
1
No 2

Not had a friend/relative known anyone well this year3
o. Have you fallen out or had a serious disagreement with a friend or relative or felt betrayed by them? $\quad \underset{\sim}{*}$ RDIS

| Yes | 1 |
| :--- | ---: |
| No | 2 |
| Not had |  |

Not had a friend/relative known anyone well this year3
p. Have you lost contact with a close friend or relative for any other reason?

* RLOS

Yes
1
No 2
Not had a friend/relative known anyone well this year3
q. Have you had any other serious upsets or disappointments in the last year?

* UPS

Yes 1
No $\quad 2 \rightarrow$ Q97
r. What were they? Type verbatim.
97. The next section of the interview is about paid work. Are you currently in paid work? Include self-employed, government schemes for employment training, temporary absence (e.g. holiday), unpaid work for family business. Exclude: waiting to take up a job.
Yes
No
$1 \rightarrow$ Q98
2

$$
\simeq \text { JOBW }
$$

b. Are you seriously looking for any kind of paid work?

| Yes | $1 \rightarrow$ Q97d |
| :--- | :--- |
| No | 0 |

c. What is the main reason you are not seeking paid work. Show Card G.
Student 1

Looking after home/family 2
Caring for dependent relatives 3
Temporarily sick or injured 4
Long term sick or disabled 5
Retired from paid work 6
Other reasons 9
$\simeq$ JOBLK

$$
5
$$


$\pm$ WHAT

$$
\pm \text { WHAT }
$$


d. Since 1989 have you had any paid work, include any job held in 1989 ?

| Yes | 1 |  |
| :--- | :--- | :--- |
| No | $Q$ | 2 |

98. I am now going to ask some questions about your spouse/partner's work. Is your spouse/partner currently in paid work?

Include self-employed, government schemes for employment training, temporary absence (e.g. holiday), unpaid work for family business. Exclude: waiting to take up a job.

| Yes | $1 \rightarrow$ Q98d | $\pm$ SP JW |
| :--- | :--- | :--- |
| No | 2 |  |

b. Are they seriously looking for any kind of paid work? $\simeq S P$ JLK
Yes 1
No 0
c. Since 1989 have they had any paid work, include any job held in 1989 ? $\quad$ SP JE

| Yes | 1 |
| :--- | :--- |
| No | 0 |

d. What is the full title of your partner's current or most recent job? Use precise terms, for example primary school teacher not teacher, production engineer not engineer, chartered accountant not accountant, government: record grade, army: record rank.
e. What are/were the main things they do/did in the job? Clarify for obscure jobs only. If self-explanatory, type 'as above'.
$\qquad$
f. Are/were they working as an employee or are/were they self-employed?

| Employee | $1 \rightarrow \mathrm{Q} 98 \mathrm{i}$ | $\pm \mathrm{SPESR}$ |
| :--- | :--- | :--- |
| Self employed | 2 |  |

g. Do/did they have any managerial duties, or are/were they supervising any other employees?

| Manager | 1 |  |
| :--- | :--- | :--- |
| Foreman, supervisor or chargehand | 2 | $\pm$ SPESS |
| Not supervising others | 3 |  |

h. How many employees are/were there at the place where they work(ed)?

| 1 to 9 | Q99 |
| :---: | :---: |
| 10 to 24 | $2 \rightarrow$ 欠99 |
| 25 to 499 | 3 -999 |
| 500 or more | $4 \rightarrow$ Q99 |

i. Do/did they work on their own or do/did they have any employees? $\pm$ SPESSA

On own / with partner(s) but no employees $1 \rightarrow$ Q99
With employees
2
j. How many people do/did they employ at the place where they work(ed)? $\pm$ SPESSB

1 to $9 \quad 1$
10 to $24 \quad 2$
25 to $499 \quad 3$
500 or more 4
99. Show card H. Please use this card to tell me your total net household income. Include your own and your partner's earned income (after deduction for income tax and national insurance), any state benefits and any other sources of income such as pensions and interest. You should also include contributions from other members of your household (such as children). Tell me which of the letters on this card represents your total net household income?

* INCH

| A | 1 | J | 10 |
| :--- | :--- | :--- | :--- |
| B | 2 | K | 11 |
| C | 3 | L | 12 |
| D | 4 | M | 13 |
| E | 5 | N | 14 |
| F | 6 | O | 15 |
| G | 7 | P | 16 |
| H | 8 | Q | 17 |
| I | 9 | R | 18 |

100. I would now like to ask you some questions about your present job. What is the full title of your present job? Use precise terms, for example primary school teacher not teacher, production engineer not engineer, chartered accountant not accountant, government: record grade, army: record rank.
b. What are/were the main things you do/did in the job? Clarify for obscure jobs only. If self-explanatory, type 'as above'.

$$
\pm \text { SOCR2 }
$$

c. Are/were you working as an employee or self-employed?

| Employee | 1 |  | $*$ |
| :--- | :--- | :--- | :--- |
| Self employed | $2 \rightarrow$ Q101 |  |  |

d. Did/do you have any managerial duties, or were/are you supervising any other employees?
Manager 1

Foreman, supervisor or chargehand $2 \pm$ ESS
Not supervising others
3
e. How many employees are/were there at the place where you work(ed)?

| $1-9$ | 1 |  |
| :--- | :--- | :--- |
| 10 to 24 | 2 | $\pm$ ESR1 |
| 25 to 499 | 3 |  |
| 500 or more | 4 |  |

101.Were/are you working on your own or did/do you have employees?
$\begin{array}{lll}\text { On own/with partner(s) but no employees } & 1 \rightarrow \mathrm{Q} ? & \pm \mathrm{ESSA} \\ \text { With employees } & 2 & \end{array}$
b. How many people did/do you employ at the place where you worked/work?

| $1-9$ | 1 |  |
| :--- | :--- | :--- |
| 10 to 24 | 2 |  |
| 25 to 499 | 3 | ESSB |
| 500 or more | 4 |  |
|  |  |  |
| this job do/did you work....read out.... |  |  |
| Full time, that is 30 hours or more per week 1  <br> Or part-time 2  |  |  |

d. I would next like to ask you about your usual gross earnings before any deductions and including overtime. What pay period would it be convenient for you to use....read out....Nurse: If seasonally employed, do not use code $3 \pm$ EARNP

One week 1
Four weeks or a month 2
Or one year 3
SHOW CARD J/I
e. Which of the letters on this card represents your usual gross earnings for that pay period, before any deductions, and including regular overtime? Nurse enter number.

| A | 1 |
| :--- | ---: |
| B | 2 |
| C | 3 |
| B | 4 |
| E | 5 |
| F | 6 |
| G | 7 |
| H | 8 |
| I | Q |


|  |  |
| :--- | ---: |
|  | 10 |



EARN1
f. How many hours a week do you usually work in this job, including regular overtime? Enter number. Enter a numeric value between 0 and 120.

Hours |  |  |  |
| :--- | :--- | :--- |
|  | $\simeq$ JOBHW |  |

g. Does your employer contribute towards your pension?

* EMPCN

Yes $\quad 1$
102. As well as this job, do you have a second job?
$\simeq$ JOBTW

| Yes | 1 |
| :--- | :--- |
| No | 2 |

b. Since 1989, how many jobs have you had altogether, including any job held in 1989 and any current job? Enter number. Enter a numeric value between 0 and 100.
$\pm$ JOBN
103. Going back to 1989, have you had any spells of a month or more when you were not in any kind of paid work? Include 1989.

Yes 1
No $0 \quad \underset{\sim}{*}$ NWKS
[If T not selected go to f.]
SHOW CARD I/2 \{as for e but with 26 letters and numbers EARN2
b. Since 1989, how much of the time have you not been in any paid work? Choose an answer from this card? Amount of time not in paid work since 1989. Show Card J. $\quad \pm$ TIME 1

| Less than 6 months | 2 |
| :--- | :--- |
| $6-11$ months | 3 |
| $1-4$ years | 4 |
| $5-9$ years | 5 |
| Since 1989 | 6 |

c. And how much of that time were you unemployed, that is seriously looking for work. Please choose an answer from this card? Estimate, if unsure. Show Card J.
$\pm$ TIME2

| None of the time | 1 |
| :--- | :--- |
| Less than 6 months | 2 |
| $6-11$ months | 3 |
| $1-4$ years | 4 |
| $5-9$ years | 5 |
| Since 1989 | 6 |

104.Now please think of your present job. On the whole, how happy would you say you are /were with your job? Would you say you were....read out....

```
Very happy 1
Fairly happy 2 & HAPWK
Not very happy, or 3
Unhappy 4
```

105. How often did you find your work stressful? Would you say that it was....read out....

* WKSTR

Rarely stressful 1
Sometimes stressful 2
Stressful most of the time, or 3
Stressful all of the time 4
106.On your present income do you find (as a family) ....read out.... $\quad \underset{\sim}{*}$ INCM
that it's really quite hard to manage 1
that you manage fairly well 2
that you manage comfortably 3
b. Has your family/have you had to go without things you really needed in the last year because you were short of money? If yes, probe 'Often or sometimes'
Yes, often 1

* INCGW
Yes, sometimes 2
No 3
c. Have you found you have been unable to pay the bills in the last year because you were short of money? If yes, probe 'Often or sometimes'

Yes, often $\quad 1 \quad \underset{-}{*}$ INCUB
Yes, sometimes 2
No
3
107.Over the past 12 months would you say that you had more trouble than you used to with Anything that requires memory for example keeping appointments, remembering where you put things, remembering names of people or objects, remembering short lists of things to do?
$\simeq$ TRMEM

```
Yes 1
No 2
```

108.Now for something different. I want to see how well you remember a list of fifteen words. I will show you one word at a time and when I reach the end of the list you have one minute to write down as many words as you can. Please write the words in any order you like. It is best not to talk to anyone while you are doing this. Nurse: Hand over the paper test booklet at page 3 and make sure the cohort member has a pencil. Code one only.

| Word tests administered | 1 |  |
| :--- | :--- | :--- |
| Test not attempted - respondent has difficulty reading/writing | $2 \rightarrow$ Q109 |  |
| Word lists refused | $3 \rightarrow$ Q109 | $\pm$ WLREF |

b. Nurse: Show the words at two second intervals using Word List [FF A/B]. Make sure the last word is shown for two seconds. Tell respondent to start. Start the stopwatch and time for one minute then tell the respondent to finish. \#^ Turn booklet to page
5. Show the words again. Tell respondent to start. Start the stopwatch and time for one minute then tell the respondent to finish. \#^ Turn booklet to page 7. Show the words again. Tell respondent to start. Start the stopwatch and time for one minute then tell the respondent to finish. \#^ Nurse: record whether the word list trials were completed. Code one only.

| All 3 trials were attempted | $1 \rightarrow$ Q109 |
| :--- | :--- |
| 2 out of the 3 trials were attempted | $2 \rightarrow$ Q109 |
| Only one trial was attempted | $3 \rightarrow Q 109$ |
| None of the trials were attempted | 4 |

$\pm$ WLDONE
None of the trials were attempted
4
c. Nurse: Please record why no word list trials were done.
$\pm$ NOWRDLST
109.Nurse: Turn to letter search (page 4 of paper test booklet). I would now like to see how quickly you can work through this list, crossing out the P's and W's. Start at the top left where the arrow is and work along the row from left to right, then go to the beginning of the next row and work from left to right again, like reading a page. Carry on this way crossing out any $\mathbf{P}$ 's and W's with one mark of the pencil like this. (Demonstrate). Carry on until I tell you to stop. Work as quickly and as accurately as you can. Nurse: Set your stop watch for one minute. Tell the respondent to start and stop at the correct moment. Record whether the letter search was attempted. Code one only.

Letter search attempted $\quad 1 \rightarrow$ Q110
Letter search not attempted 2
b. Nurse: Please record why the letter search was not attempted. $\pm$ NOLS
110.Do you remember that list of 15 words I showed you earlier. I would like you to write down as many of those words as you can remember. I would like you to write down as many of those words as you can remember. Nurse: Turn to page 8 of the paper test booklet. Record whether the fourth word list trial was attempted. Code one only.

| Fourth trial attempted | $1 \rightarrow \mathrm{Q} 111$ | $\pm$ WL 4 DONE |
| :--- | :--- | :--- |
| Fourth trial not attempted | 2 |  |
|  |  |  |
| e: Please record why fourth word list trial was not attempted. | $\pm$ |  |

111.Nurse: Hold up blank envelope. Later on I am going to give you a name and address to write on this envelope. When you have finished doing that I would like you to do the following: Turn it over, seal it, and write your initials on the back. Could you remember to do that then, without me reminding you? Nurse: Now put the envelope out of sight. $\pm$ ENV

$$
\text { Respondent will do the test } 1
$$

Respondent refuses to do the test 2
112.Now I would like you to tell me the names of as many different animals as you can in one minute? Animals are everything that is not vegetable or mineral. If asks for clarification: animals include birds, insects, humans, etc. Set the stop watch for one minute and write down the animals on page 8 of the paper test booklet.
$\pm$ ANIMLINT
$\begin{array}{ll}\text { Respondent will do the test } & 1 \\ \text { Respondent refuses to do the test } & 2\end{array}$
ANIN
113.Nurse: Hand over the envelope. Please write the following name and address on this envelope: John Brown, 42 West Street, Bedford. Please go on remembering this name and address and I will ask you about it later. Nurse record if envelope is sealed and initials written on back.
Yes, both actions completed correctly, without prompting 1
Only one action completed, without prompting 2
No actions completed, without prompting

## $\pm$ REMEM

3
114.I would now like you to read slowly down this list of words, starting here (nurse point to chord). Continue down this column and onto the next. I must warn you that there are many words that you won't recognise. In fact most people don't know them, so just guess at these. Please begin when you are ready. Nurse: Hand over NART reading test to respondent. Turn to page 6 of paper test booklet. Place mark next to each word to indicate correct, incorrect or not sure. Nurse code:
$\begin{array}{ll}\text { NART test attempted } & 1 \rightarrow \text { Q115 } \\ \text { NART test not attempted } & 2\end{array}$
NART test terminated early
b. Nurse enter reason test not attempted.
$\pm$ NARTINT
$3 \rightarrow$ Q115
115.Can you tell me the name and address I asked you to remember a short while ago? Nurse enter the codes next to the words remembered. Code all that apply. Enter at most 6 values.

| John | 1 |  |
| :--- | :--- | ---: |
| Brown | 2 | NAADTA1 |
| 42 | 3 | NAADTA2 |
| West | 4 | $\pm$ NAADTA3 |
| Street | 5 | NAADTA4 |
| Bedford | 6 | NAADTA5 |
| None of the above | 7 | NAADTA6 |
| Refused | 8 |  |

116.Nurse: Did the survey member have visual difficulty during testing?

No difficulty 1
Mild difficulty $2 \simeq$ SEET
Severe difficulty 3
No tests done 4
117.Nurse: Did the survey member have hearing difficulty during testing?

No difficulty 1
Mild difficulty $2 \simeq$ HET
Severe difficulty 3
No tests done 4
118.I would now like you to fill in this questionnaire while I am getting the equipment out for the medical exam. Please ask me if any of the questions are not clear. Nurse enter details on front cover of yellow self-completion booklet. Serial: [FF] Date: [LFF] Nurse cross out page(s) [LFF] before handing booklet to respondent.

Booklet accepted 1
Booklet refused 2
b. Nurse: count up and enter the number of animals mentioned. Enter a numeric value between 0 and 100.

c. Nurse: set up equipment for physical measurements. \#^ Nurse: Has CM completed the self completion booklet?

| Yes | 1 |
| :--- | :--- |
| No | 2 |

d. Nurse: Collect self-completion booklet and record.

Booklet completed independently 1
Booklet completed with assistance from interviewer 2
Booklet completed with assistance from someone else 3
Booklet refused4

$$
\pm \text { SCFIN }
$$

$$
\pm \text { SC3END }
$$

119.I would now like to take some physical measurements but before I do I need to obtain your written consent. Please read, sign and date form 5 of the consent booklet. Nurse: Make sure the form is signed and dated.

+ MEDINTRO
Form 5 signed $\quad 1 \rightarrow$ Nurse: circle 09 on front of consent booklet. \#^
Form 5 refused $2 \rightarrow$ Nurse: circle 10 on front of consent booklet. \#^
b. If female ask Can I check, are you pregnant at the moment? $\pm$ PREGNTJ
$\begin{array}{ll}\text { Yes } & 1 \rightarrow \text { Respondent is pregnant. No measurements to be done. } \wedge \rightarrow \text { Lung function } \\ \text { No } & 2\end{array}$
120.Now follows the blood pressure module. (As I mentioned earlier) I would like to measure your blood pressure. If asked The analysis of blood pressure readings will tell us a lot about the health of the population. Are you willing to have your Blood Pressure measured?

| Yes, agrees | 1 |
| :--- | :--- |
| No, refuses | $2 \rightarrow \mathrm{Q} 120 \mathrm{i}$ |
| Unable to measure BP for reason other than refusal | $3 \rightarrow \mathrm{Q} 121 ?$ |

b. Nurse: Enter serial of Omron. Enter a numeric value between 1 and 60. Serial $\square$ $\pm$ OMRON
c. Enter first pulse reading (bpm). If reading not obtained, enter 999. Enter a numeric value between 1 and 999. Pulse $\quad \square$
d. Enter first systolic reading (mmHg). If reading not obtained, enter 999. Enter a numeric value between 1 and 999. Systolic $\square$ $\pm$ SYS
e. Enter first diastolic reading ( mmHg ). If reading not obtained, enter 999. Enter a numeric value between 1 and 999.

Diastolic

$\pm$ DIAS
f. Enter second pulse reading (bpm). If reading not obtained, enter 999. Enter a numeric value between 1 and 999. Pulse $\quad \square$
g. Enter second systolic reading ( mmHg ). If reading not obtained, enter 999. Enter a numeric value between 1 and 999.
Systolic


$$
\pm \text { SYS2 }
$$

h. Enter second diastolic reading (mmHg). If reading not obtained, enter 999. Enter a numeric value between 1 and 999. Diastolic $\square \mid-\quad \square$ DIAS2
Your blood pressure is [LFF normal/...?] ^ Nurse: Circle code 20 on front of consent booklet. $\leadsto \rightarrow \mathrm{Q} 121$
i. Record why reading refused. Code all that apply. Enter at most 2 values. $\pm$ NATTBP Respondent upset/anxious/nervous $\quad 1 \rightarrow$ code 20 Other reason(s) (Specify at next question) 2
j. Enter full details of other reason(s) for not obtaining/attempting two BP readings. $\pm$ OTHNBP
121.Now I would like to measure your lung function. Can I check, have you had abdominal or chest surgery in the past three weeks?
Yes

$$
1 \rightarrow \mathrm{Q} 122
$$

$$
\pm \text { HASURG }
$$

No
2
b. Have you been admitted to hospital for a heart complaint or stroke in the past six weeks?

| Yes | 1 | $\pm$ HASTRO |
| :--- | :--- | :--- |
| No | 2 |  |

c. In the past three weeks, have you had any respiratory infections such as influenza, pneumonia, bronchitis or a severe cold?

| Yes | 1 | $\pm$ CHESTINF |
| :--- | :--- | :--- |
| No | 2 |  |

d. (Can I just check), have you used an inhaler, puffer or any medication for your breathing in the last 24 hours?

| Yes | 1 | $\pm$ INHALER |
| :--- | :--- | :--- |
| No | 2 |  |

e. How many hours ago did you use it? Interviewer, enter number of hours. If less than one hour, code 0 . Enter a numeric value between 0 and 24 . Hours $\quad \square \mid \square \pm$ INHALHRS
f. (As I mentioned earlier). We would like to measure your lung function which will help us to find out more about the health of the population. Would you be willing to have your lung function measured?
Yes $\quad 1$
$\stackrel{1}{2} \rightarrow$ Q122
$\pm$ LFWILL
No $\quad 2 \rightarrow$ Q122
g. Nurse: Enter the two-digit spirometer serial number. Enter a numeric value between 1 and 60 .

Serial $\pm$ SPIRNO
Explain the procedure and demonstrate the test. Record the results of two blows by the respondent in the boxes below. Record each blow as it is carried out. For each blow, enter measurements and code whether technique was satisfactory. ^
h. First blow. If no reading obtained enter '0' and suppress all checks. Enter a numeric value between 0.00 and 9.95 .

$$
\stackrel{*}{-} \mathrm{FEV}
$$

i. First blow. If no reading obtained enter '0' and suppress all checks. Enter a numeric value between 0.00 and 9.95 .

j. First blow. If no reading obtained enter '0' and suppress all checks. Enter a numeric value between 0 and 200.


$$
\pm \text { FER }
$$

k. First blow. If no reading obtained enter '0' and suppress all checks. Enter a numeric value between 0 and 995.

$$
\pm \mathrm{PF}
$$

1. First blow. Now switch off the spirometer and switch it on again to take another reading. Press enter to continue.
m. First blow. Technique satisfactory? $\pm$ TECHNIQU
n. Second blow. If no reading obtained enter ' 0 ' and suppress all checks. Enter a numeric value between 0.00 and 9.95. $\quad *$ FEV2
o. Second blow. If no reading obtained enter '0' and suppress all checks. Enter a numeric value between 0.00 and 9.95. * FVC2
p. Second blow. If no reading obtained enter '0' and suppress all checks. Enter a numeric value between 0 and 200. $\pm$ FER2
q. Second blow. If no reading obtained enter ' 0 ' and suppress all checks. Enter a numeric value between 0 and 995. $\pm$
r. Second blow. Now switch off the spirometer and switch it on again to take another reading. Press enter to continue.
$\pm$ CL2
s. Second blow. Technique satisfactory?
```
+ TECHNIQ2
```

122.I would now like to measure your height and weight. $\wedge$ Nurse code:

Standing height measured 1
Standing height refused 2
Standing height attempted, not obtained 3
Standing height not attempted 4

## $\pm$ STHTRESP

b. Nurse: Measure standing height and enter in centimetres to nearest 0.5 cm . Enter a numeric value between 0.0 and 244.0.


* HT
c. Nurse: Check standing height is entered correctly. You are [LFF] centimetres high or [LFF] feet [LFF] inches?

| Yes | 1 |
| :--- | :--- |
| No | 2 |

HTREAD
No 2
$2 \pm$ SITHTRSP
Sitting height refused 2
Sitting height attempted, not obtained
3
Sitting height not attempted 4
b. Nurse: Measure sitting height and enter in centimetres to nearest 0.5 cm . Enter a numeric value between 0.0 and 244.0.
$\pm$ SITHT
124.Nurse code:

| Weight measured | 1 |
| :--- | ---: |
| Weight refused | 2 |
| Weight attempted, not obtained | 3 |
| Weight not attempted 4 |  |

b. Nurse: Enter serial number of scales. Enter a numeric value between 1 and 60. $\pm$ SCALES Serial

c. Nurse: Measure weight to nearest 0.5 kilograms. Enter a numeric value between 0.0 and 244.0.

d. Nurse: Check weight is entered correctly. So you weigh [LFF] kilo's or [LFF] stone [LFF] pounds?

| Yes | 1 | $\pm$ | WEICHK |
| :--- | :--- | :--- | :--- |
| No | 2 |  |  |

125.I would now like to measure your upper arm circumference. If asked: This gives us information about the distribution of fat.

Measurement agreed 1
Measurement refused $2 \pm$ MUACINT
Unable to take measurement 3
b. Measure circumference of left arm and record in centimetres. If measurement not obtained, enter '99.9'. Enter a numeric value between 10.0 and 100.0.


$$
\underset{-}{*} \quad \text { RUAC }
$$

c. Is this measurement reliable?

```
Yes 1 + CUPREL
```

126.I would now like to measure your chest, waist and hips. Would you be willing to have your chest, waist and hip circumference measured? If asked 'These measurements are very useful for assessing the distribution of weight over the body.'

| Measurement agreed | 1 |
| :--- | :--- |
| Measurement refused | 2 |
| Unable to take measurement | 3 |

b. Nurse: Measure the chest circumference to the nearest mm. Enter chest measurement in centimetres (Remember to include the decimal point). If measurement not obtained, enter '999.9'. Enter a numeric value between 0.0 and 1000.0.
Chest

$\square$ * CHC
c. Nurse: Measure the expanded chest circumference to the nearest mm. Enter expanded chest measurement in centimetres (Remember to include the decimal point). If measurement not obtained, enter '999.9'. Enter a numeric value between 0.0 and 1000.0.

d. Nurse: Measure the waist circumference to the nearest mm. Enter waist measurement in centimetres (Remember to include the decimal point). If measurement not obtained, enter '999.9'. Enter a numeric value between 0.0 and 1000.0. Waist

$\square$ * ABC
e. Nurse: Measure the hip circumference to the nearest mm. Enter measurement of hip circumference in centimetres (Remember to include the decimal point). If measurement not obtained, enter '999.9'. Enter a numeric value between 0.0 and 1000.0.

f. Nurse: Enter ambient temperature in Celsius to the nearest degree. Enter a numeric value between 0 and 40.


* RTEMP
g. Nurse: Record the time of day.
* TIMED

| Morning | 1 |
| :--- | :--- |
| Afternoon | 2 |
|  | 3 |

Evening 3
127.Now I would like to assess the strength of your hand in a gripping action. I will count up to 3 and then ask you to squeeze this handle as hard as you can, just for a couple of seconds and then let go. Please watch the display as you are squeezing so that you can see how well you are doing. I will take 2 measurements from your right hand followed by 2 measurements from your left hand.

| Measurement agreed | 1 |  |
| :--- | :--- | :--- |
| Measurement refused | 2 | $\pm$ |
| Unable to take measurement | 3 |  |

b. Nurse: Enter serial number of dynamometer. Enter a numeric value between 1 and 60 . Serial $\square$ $\pm$ DYNAM
c. Nurse: Record and code one only.

```
                                    * NOTATT
```

Respondent has the use of both hands 1
Respondent is unable to use right hand 2
Respondent is unable to use left hand 3
Respondent is unable to use either hand 4
d. Would you be willing to have your hand grip measured? * GRIPWILL

| Yes | 1 |
| :--- | :--- |
| No | 2 |

e. Which is your dominant hand ? $\simeq$ HNLR

| Right hand | 1 |
| :--- | :--- |
| Left hand | 2 |

f. Nurse, position the respondent correctly, select the correct hand grip and set the probable range on the dynamometer. Explain the procedure once again. Show the respondent how to do the test and let cohort member have a practice with both hands. ^ Left hand, first measurement. Enter the results to one decimal place. Enter a numeric value between 0.1 and 200.0

.


$$
\simeq \operatorname{GRPL} 1
$$

g. Right hand, first measurement. Enter the results to one decimal place. Enter a numeric value between 0.1 and 200.0

h. Left hand, second measurement. Enter the results to one decimal place. Enter a numeric value between 0.1 and 200.0

$\square$ $\simeq \operatorname{GRPL} 2$
i. Right hand, second measurement. Enter the results to one decimal place. Enter a numeric value between 0.1 and 200.0

$\simeq \operatorname{GRPR} 2$
128. I would now like to examine your knees for any bumps or swellings. Would you be willing for me to examine your knees? If no, record whether refusal or other reason.

| Yes | 1 |  |
| :--- | :--- | :--- |
| No refuses | 2 | $\pm$ KNEEINT |
| No for some other reason | 3 |  |

b. Nurse: Make examination of each knee and record answers in CAPI. \#^ Nurse record examination of left knee. Code all that apply. Enter at most 5 values.

Knee tenderness
Bony swelling at the joint margin
Crepitus LEFTK1 LEFTK2
2 LEFTK3
Varus LEFTK4
Valgus 5 LEFTK5
None of these
6
c. Nurse: Make examination of each knee and record answers in CAPI. \#^ Nurse record examination of right knee. Code all that apply. Enter at most 5 values.

| $\pm$ | RIGHTK1 |
| :--- | :---: |
| 1 | RIGHTK2 |
| 2 | RIGHTK3 |
| 3 | RIGHTK4 |
| 4 |  |
| 5 | RIGHTK5 |

d. Nurse: Are there any other observations to make. $\pm$ KNEEOTH

| Yes | 1 |
| :--- | :--- |
| No | 2 |

e. Nurse please write in other knee observations. Remember to write in which knee(s) are affected. $\pm$ KNEEYES
129.Nurse: I would now like a sample of the cells from the inside of your mouth. This involves you gently rubbing the inside of your cheeks with a small swab. Are you willing to have a mouth swab taken? If asked The sample will be analysed for DNA(genetics) study.

Sample agreed $\quad 1$
Sample refused 2
Unable to take sample 3
b. Before I take the sample, I need you to sign and date this form. Nurse, hand over consent form 6 and ring consent code 11. Make sure the respondent has signed and dated the form before taking the sample. Nurse code one only.
Signature obtained 1
Signature not obtained 2

```
                                    \pm CONSENT5
                                    - CONSENT5
```

c. Nurse Take mouth swab sample and code:

$$
\begin{aligned}
& \text { Buccal sample obtained } 1 \\
& \text { Buccal sample not obtained }
\end{aligned} \quad \frac{ \pm}{2} \quad \text { SALOBT1 }
$$

Knee tenderness
Bony swelling at the joint margin
Crepitus
3 RIGHTK3
Varus
5
Valgus
None of these
6 RIGHTK5
No
2 $\pm$ SALINT1 3

Yes 1Nurse: No blood sample to be taken. Circle codes 14, 16, 18 and 26 on front of consent booklet. $\wedge$ No 2
d. Would you be willing to have a blood sample taken? $\pm$ BSWILL

| Yes | 1 |
| :--- | :--- |
| No | 2 |

e. Before I can take any blood, I have to obtain your written consent. Nurse: Fill in respondent's name and your name at top of consent form 7 in consent booklet. Ask respondent to read, sign and date part 1 of blood sample consent form. $\wedge$ Circle consent code 13 on front of consent booklet. $\wedge$ Check you have all applicable signatures. Take blood samples. Fill tubes in this order: Tube 2: EDTA (purple) 3 ml . Tube 3: EDTA (purple)2 ml. Tube 4: ACD (yellow) 6 ml . Tube 5: Lithium Heparin (green) 4 ml . Tube 6: EDTA (purple) 3 ml . Write the serial number, nurse number, sex and date of collection on the (red) label. Do one label per tube. $\wedge$ Code if Tube 2: EDTA (purple) $\mathbf{3} \mathbf{~ m l}$ was filled (include partially filled tube):

| Yes | 1 | $\pm$ SAMPF1 |
| :--- | :--- | :--- |
| No | 2 |  |

f. Code if Tube 3: EDTA (purple)2 ml was filled (include partially filled tube):

| Yes | 1 | $\pm$ SAMPF2 |
| :--- | :--- | :--- |
| No | 2 |  |

g. Code if Tube 4: ACD (yellow) $6 \mathbf{m l}$ was filled (include partially filled tube):

| Yes | 1 | $\pm$ SAMPF3 |
| :--- | :--- | :--- |
| No | 2 |  |

h. Code if Tube 5: Lithium Heparin (green) $\mathbf{4} \mathbf{~ m l}$ was filled (include partially filled tube):

| Yes | 1 | $\pm$ SAMPF4 |
| :--- | :--- | :--- |
| No | 2 |  |

i. Code if Tube 6: EDTA (purple) $\mathbf{3} \mathbf{~ m l}$ was filled (include partially filled tube):

| Yes | 1 | $\pm$ SAMPF5 |
| :--- | :--- | :--- |
| No | 2 |  |

j. Blood sample outcome: $\pm$ SAMP TAK

Blood sample obtained 1
No blood sample obtained 2
k. Record which arm blood taken from: $\pm$ SAMPARM

| Right | 1 |
| :--- | :--- |
| Left | 2 |
| Both | 3 |

1. Record any problems in taking blood sample. Code all that apply. Enter at most 7 values. $\pm$ SAMDIF 1
No problem 1

Incomplete sample 2
Collapsing/poor veins 3
3
4
SAMDIF2

Second attempt necessary 4
SAMDIF3

Some blood obtained, but respondent felt faint/fainted5
Unable to use tourniquet
6
Other 7
131. May we have your consent to take part in the genetics study? Nurse: If asked, read out consent form 7 part 2.

| Yes | 1 | $\pm$ GENE |
| :--- | :--- | :--- |
| No | 2 |  |

b. I need to have your written consent to take part in the genetic studies project. Please read and sign Part 2 of Form 7. $\wedge$ Nurse: circle consent code 15 on front of consent booklet. ^ May we have your consent to store any remaining blood for future analysis?

| Storage consent given | 1 | $\pm$ CONSTORB |
| :--- | :--- | :--- |
| Consent refused | 2 |  |

c. I have to obtain your written consent for this. Nurse: Ask cohort member to read sign and date part 3 of blood sample consent form. Circle consent code 17 on front of consent booklet. ^ This is the end of all the measurements. Can I check, are you currently registered with a GP?

| Yes | 1 | $\pm$ |
| :--- | :--- | :--- |
| No | 2 |  |

132. Would you like the results of your measurements to be sent to your GP? If asked, please read out the measurements listed below. Enter at most 12 values.

| Blood Pressure | 1 | SHOWME01 |
| :--- | :--- | ---: |
| Respiration | 2 | SHOWME 02 |
| Standing height | 3 | SHOWME 03 |
| Sitting height | 4 | SHOWME 04 |
| Weight | 5 | SHOWME 05 |
| Upper arm circumference | 6 | +SHOWME 06 |
| Chest circumference | 7 | SHOWME 07 |
| Expanded chest circumference | 8 | SHOWME 08 |
| Abdominal circumference | 9 | SHOWMR09 |
| Hip circumference | 10 | SHOWME10 |
| Blood sample | 11 | SHOWME11 |
| None of the above | 12 | SHOWME12 |

b. Before I can pass your results onto your GP, I need your written consent. Please check the details are correct, then sign and date Consent Form 8. Nurse please fill in correct details on consent form 8. Check respondent has signed the form. Circle codes as appropriate on front of consent booklet. ^ Check name by which GP knows respondent. Check GP name, address and phone no. Are recorded on front of consent booklet. ^ There is just one more thing the MRC National Survey would like you to do and that is to keep this diet diary for the next 5 days and then send it back in this envelope. All the instructions are in the diary. If you'd like to talk to someone about it please call the number on the diary ask them to return your call. Nurse: If pressed for further clarification say I'm sorry I don't know anything about this but if you'd to talk to someone about it, please call the number on the diary and ask them to return your call. Nurse: Enter details on front of diary and hand over with reply envelope. Date of interview: [LFF] Serial number: [LFF]

$$
\text { Diary accepted } 1
$$

Diary refused 2
133.A few interviews on any survey are checked by a supervisor to make sure people are happy with the way the interview was carried out. In case my supervisor needs to contact you...Nurse check front of ARF: If telephone number recorded: may I check your telephone number is ......(read out and amend ARF if different)? If telephone number not recorded: it would be helpful if you could let me have your telephone number? (nurse record on front of ARF.

| Telephone number obtained | 1 |
| :--- | ---: |
| Telephone number refused | 2 |
| No telephone number available | 3 |

## $\pm$ TPHONE

$\wedge$ to close the interview. Please enter the first four digits of your nurse number. If already entered just press <enter> to continue. $\pm$ NURNO

