ARIC MANUSCRIPT PROPOSAL FORM

Manuscript #629

1. Full Title: Pulmonary Function and Stroke in the Atherosclerosis Risk in Communities Study
Abbreviated Title (Length 26): PFT and Stroke

2. Writing Group (list individual with lead responsibility first):
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3. Timeline:
Analysis and writing will be completed by June 1999.

4. Rationale:
Several large cohort studies have examined the relation between decreased lung function in particular FEV1 as a risk for CVD or CHD mortality outcomes. Fewer studies have investigated the relation between lung function and stroke (1-7). There was evidence of an association between decreased lung function and stroke in these studies. Only two studies included women and used peak flow or vital capacity as a predictor of the outcomes investigated. Pulmonary function tests were obtained at baseline and at three year follow-up. Cerebrovascular events are available through 1995.

5. Main Hypothesis:
Decreased pulmonary function is associated.with an increased risk of stroke.

6. Data (variables, time window, source, inclusions/exclusions):
Exclusions: No PFT data.
Dependent variable: Incident stroke.
Independent variables: pulmonary function data obtained at baseline and at followup.
Covariates: Smoking data, blood pressures measurements, blood sugar and diabetic history, lipid profile, family history, body mass index, age, race, sex, waist/hip ratio, education, fibrinogen, Von Willebrand factor, ECG LVH, ATS questions on chronic cough and phlegm.

References

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