

## ARIC MANUSCRIPT PROPOSAL FORM

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Manuscript # 657

Publications Committee:	Date Received 02/26/99	Status Approved	Priority: K
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Steering Committee: \_\_\_\_\_

1.a. Full Title: Anthropometric cutpoints to assess risk of diabetes in primary care programs

b. Abbreviated Title (Length 26): anthropometric cutpoints

2. Writing Group (list individual with lead responsibility first):

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3. Timeline: Preliminary analyses must be complete in time for a national conference to be held May 6<sup>th</sup>, 1999

4. Rationale: The lead author has been invited to give a presentation at the "Workshop on the use of anthropometry to assess risk for diabetes and cardiovascular disease in disease prevention and primary care programs". The workshop is sponsored by the Division of Diabetes Translation of the Centers for Disease Control and Prevention (CDC), and will be held May 6-7, 1999.

Below are excerpts from the description of the workshop:

"In 1998 new obesity guidelines were published separately by the World Health Organization (WHO) and the National Heart, Lung, and Blood Institute (NHLBI)...The purpose of this workshop is to complement the WHO and NHLBI guidelines. The workshop will review the methods of adult anthropometry from the perspective of estimating absolute and attributable population risks, and it will consider the implementation of anthropometry within adult primary care and health promotion activities."

This conference may influence national policy regarding the use of anthropometric measurements in clinical and public health settings. Analyses from the ARIC data can contribute important information for decision making.

5. Main Hypothesis:

Two of the five workshop aims are pertinent to this proposal and are shown below:

1. To compare several anthropometric indicators in their ability to estimate absolute and attributable risk of diabetes and cardiovascular disease in a variety of adult populations.
2. To select cut-off points to categorize levels of low and high risk for these indicators. Special attention will be given to the effects of age, sex and ethnicity on this categorization.

We will use anthropometric data from the ARIC baseline study and all available follow-up data on incident diabetes and CHD/CVD to address these aims.

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

Time window: Visits 1 to 4

Variables:

Anthropometrics: height, weight, waist circumference, hip circumference

Outcome: Incident diabetes, CHD/CVD

Others: ID, center, gender, ethnicity, age, education, baseline diabetes, smoking, alcohol intake, physical activity