

ARIC MANUSCRIPT PROPOSAL FORM

Manuscript #168

1. Title (length 26):

Aspirin Correlates/Trends

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

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3. Timeline:

Analysis - through Winter 1993

Draft - Spring 1993

4. Rationale:

Considerable data from both observational studies and clinical trials suggest that regular aspirin use has a preventive role in cardiovascular diseases. Being a non-prescribed medication, patterns of aspirin use in the general population are likely to reflect both medical practice and self-initiated usage. Surprisingly, few data are available regarding determinants of aspirin use or trends in recent years. The findings of the Physicians' Health Study (which likely had substantial impact on aspirin use) were first published in January 1988, about the time that one-third of the ARIC cohort completed the baseline examination.

5. Main Hypothesis:

The manuscript will examine demographic, socioeconomic, and clinical correlates of aspirin use in blacks and whites in visit 1 and again in visit 2. It is hypothesized that aspirin use is more frequent among subjects in higher SES and among those with higher CVD risk scores. The second part of the manuscript will examine trends in use in visit 1 before and after January 1988 and again between visit 1 as a whole and visit 2. It is hypothesized that a dramatic increase in aspirin use occurred during visit 1 and a moderate increase continued through visit 2.

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

Both visit 1 and visit 2 data: medications; demographic and socioeconomic variables; CVD risk factors (cholesterol, smoking, diabetes, family history, etc.); prevalent CVD variables (symptomatic CHD, intermittent claudication, history of stroke).

Aspirin (or aspirin containing medications, excluding cold meds) will be identified as MTC codes 641000 and 641099 (salicylates). Generic names (GNAME) will also be checked to assure completeness of the data.