Form 38 - Daily Life

vomen's HEALTH NITIATIVE	Data File: f38_os_pub	File Date: 08/08/2007	Structure: M	ultiple rows per participant Population: OS participants	
Participa	nt ID				
Variable #	1		Usage Notes:	none	
Sas Name:	ID				
Sas Label:	Participant ID		Categories:	Study: Administration	
F38 Days	since randomization/enroll	ment			
Variable #	2		Usage Notes:	none	
Sas Name:	F38DAYS				
		- 11	Categories:	Study: Administration	

Sas Label: F38 Days since randomization/enrollment

N	Min	Max	Mean	Std Dev
83266	51	2731	1133.4779	104.74172

F38 Visit type

Variable # 3				Usage Notes	Usage Notes: none		
Sas	Name: F38VTYP				Other Advantation		
Sas Label: Visit type				Categories:	Study: Administration		
Valu	es	Ν	%				
1	Screening Visit	0	0.0%				
2	Semi-Annual Visit	26	0.0%				
3	Annual Visit	83,233	100.0%				
4	Non Routine Visit	7	0.0%				
		83,266					

F38 Visit year

Visit year for which this form was collected.

Variable #	4				Usage Notes	: none
Sas Name:	F38VY				Categories:	Study: Administration
Sas Label:	Visit year				Calegories.	
N	Min	Max	Mean	Std Dev		
83259	1	7	2.99871	.10286		

F38 Closest to visit within visit type and year

For forms entered with the same visit type and year, indicates the one closest to that visit's target date. Valid for forms entered with an annual or semiannual visit type.

Variable # 5		Usage Notes	Usage Notes: See data preparation document.			
Sas	Name: F38VCLO					
Sas Label: Closest to visit within visit type and year				Categories:	Study: Administration	
Valu	es	Ν	%			
0	No	144 (0.2%			
1	Yes	83,122 9	9.8%			
		83,266				

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F38 Expected for visit

This form/data was expected for this visit. Form 38 (Daily Life) is expected of all CT at Annual Visit 1, and on a subsample of CT at Annual Visits 3, 6, and 9. A form 38 is expected of all OS at Annual Visit 3.

Varia	able # 6			Usage Notes	: none
Sas	Name: F38EXPC				
Sas	Label: Expected for visit			Categories:	Study: Administration
Valu	es	Ν	%		
0	No	357	0.4%		
1	Yes	82,909	99.6%		
		83,266			

F38 Rate quality of life

Overall, how you would rate your quality of life? (Mark one oval in the box below.)

Varia	able # 7			Usage Notes	: none
Sas I	Name: LIFEQUAL				
Sas I	Label: Rate quality of life			Categories:	Psychosocial/Behavioral
Valu	es	Ν	%		
0	Worst	69	0.1%		
1	1	69	0.1%		
2	2	165	0.2%		
3	3	520	0.6%		
4	4	881	1.1%		
5	Halfway	5,606	6.7%		
6	6	3,330	4.0%		
7	7	9,362	11.2%		
8	8	24,002	28.8%		
9	9	21,374	25.7%		
10	Best	17,532	21.1%		
	Missing	356	0.4%		
		83,266			

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F38 How satisfied with quality of life

How satisfied are you with your current quality of life? (Mark one oval in the box below.)

Varia	able # 8			Usage Notes	: none
Sas I	Name: SATLIFE				
Sas I	Label: How satisfied with quality of life			Categories:	Psychosocial/Behavioral
Valu	es	Ν	%		
0	Dissatisfied	477	0.6%		
1	1	331	0.4%		
2	2	617	0.7%		
3	3	1,286	1.5%		
4	4	1,667	2.0%		
5	Halfway	6,151	7.4%		
6	6	3,639	4.4%		
7	7	8,243	9.9%		
8	8	18,769	22.5%		
9	9	19,136	23.0%		
10	Satisfied	22,598	27.1%		
	Missing	352	0.4%		
		83,266			

F38 In general, health is

In general, would you say your health is (Mark one oval.)

Variable # 9				Usage Notes	Usage Notes: none			
Sas Name: GENHEL Sas Label: In general, health is Values				Categories:	Psychosocial/Behavioral			
		Ν	%					
1	Excellent	12,470	15.0%					
2	Very good	34,688	41.7%					
3	Good	27,051	32.5%					
4	Fair	7,956	9.6%					
5	Poor	835	1.0%					
	Missing	266	0.3%					
		83,266						

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F38 Compare health to 1 year ago

Compared to one year ago, how would you rate your health in general now? (Mark one oval.)

Varia	able # 10	Usage Notes	Usage Notes: none		
Sas Name: HLTHC1Y Sas Label: Compare health to 1 year ago				Categories:	Psychosocial/Behavioral
Valu	es	Ν	%		
1	Much better now than 1 year ago	5,765	6.9%		
2	Somewhat better now than 1 year ago	10,458	12.6%		
3	About the same time	53,214	63.9%		
4	Somewhat worse now than 1 year ago	12,607	15.1%		
5	Much worse than 1 year ago	976	1.2%		
	Missing	246	0.3%		
		83,266			

F38 Limited vigorous activities

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Vigorous activities, such as running, lifting heavy objects, or strenuous sports

Vari	able # 11			Usage Notes	: none
Sas	Name: VIGACT				
Sas	Label: Vigorous activities			Categories:	Physical Activity
Valu	es	Ν	%		
1	Yes, limited a lot	27,945	33.6%		
2	Yes, limited a little	37,617	45.2%		
3	No, not limited at all	17,228	20.7%		
	Missing	476	0.6%		
		83,266			

F38 Limited moderate activities

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Moderate activities, such as moving a table, vacuuming, bowling, or golfing

Varia	able # 12			Usage Notes	: none
	Name: MODACT			Categories:	Physical Activity
Sas Label: Moderate activites				g .	
Valu	es	N	%		
1	Yes, limited a lot	7,442	8.9%		
2	Yes, limited a little	23,154	27.8%		
3	No, not limited at all	52,326	62.8%		
	Missing	344	0.4%		
		83,266			

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F38 Limited lifting or carrying groceries

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Lifting or carrying groceries

Varia	able # 13			Usage Notes	: none
Sas I	Name: LIFTGROC				
Sas I	Label: Lifting or carrying groceries			Categories:	Physical Activity
Valu	es	Ν	%		
1	Yes, limited a lot	4,084	4.9%		
2	Yes, limited a little	18,940	22.7%		
3	No, not limited at all	59,930	72.0%		
	Missing	312	0.4%		
		83,266			

F38 Limited climbing several flights of stairs

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Climbing several flights of stairs

Variable # 14			Usage Notes: none		
Sas	Name: STAIRS				
Sas	Label: Climbing several flights of stairs	i.		Categories:	Physical Activity
Valu	es	Ν	%		
1	Yes, limited a lot	11,751	14.1%		
2	Yes, limited a little	28,438	34.2%		
3	No, not limited at all	42,687	51.3%		
	Missing	390	0.5%		
		83,266			

F38 Limited climbing one flight of stairs

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Climbing one flight of stairs

Var	iable # 15			Usage Notes	: none
Sas	Name: STAIR				
Sas	Label: Climbing one flight of stairs			Categories:	Physical Activity
Valu	ies	Ν	%		
1	Yes, limited a lot	3,516	4.2%		
2	Yes, limited a little	14,200	17.1%		
3	No, not limited at all	65,146	78.2%		
	Missing	404	0.5%		
		83,266			

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F38 Limited bending, kneeling, stooping

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Bending, kneeling, stooping

Varia	able # 16			Usage Notes	: none
Sas I	Name: BENDING				
Sas I	Label: Bending, kneeling, stooping			Categories:	Physical Activity
Valu	es	Ν	%		
1	Yes, limited a lot	9,144	11.0%		
2	Yes, limited a little	31,704	38.1%		
3	No, not limited at all	42,090	50.5%		
	Missing	328	0.4%		
		83,266			

F38 Limited walking more than one mile

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Walking more than a mile

Variable # 17			Usage Notes: none		
Sas Name: WALK1M Sas Label: Walking more than one mile					Physical Activity
				Categories:	
Valu	les	Ν	%		
1	Yes, limited a lot	12,493	15.0%		
2	Yes, limited a little	19,414	23.3%		
3	No, not limited at all	50,929	61.2%		
	Missing	430	0.5%		
		83,266			

F38 Limited walking several blocks

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Walking several blocks

Var	iable # 18			Usage Notes	: none
Sas	Name: WALKBLKS				
Sas	Label: Walking several blocks			Categories:	Physical Activity
Valu	les	Ν	%		
1	Yes, limited a lot	7,233	8.7%		
2	Yes, limited a little	12,770	15.3%		
3	No, not limited at all	62,853	75.5%		
	Missing	410	0.5%		
		83,266			

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F38 Limited walking one block

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Walking one block

Vari	able # 19			Usage Notes	: none
Sas	Name: WALK1BLK				
Sas	Label: Walking one block			Categories:	Physical Activity
Valu	es	N	%		
1	Yes, limited a lot	2,471	3.0%		
2	Yes, limited a little	7,350	8.8%		
3	No, not limited at all	72,978	87.6%		
	Missing	467	0.6%		
		83,266			

F38 Limited bathing or dressing yourself

The following are questions about a typical (or usual) day's activities. Does your health now limit you in these activities and, if so, how much? (Mark one oval for each question.) Bathing or dressing yourself

Varia	able # 20			Usage Notes	: none
Sas I	Name: BATHING				
Sas I	Label: Bathing or dressing yourself			Categories:	Physical Activity
Value	es	Ν	%		
1	Yes, limited a lot	695	0.8%		
2	Yes, limited a little	3,439	4.1%		
3	No, not limited at all	78,792	94.6%		
	Missing	340	0.4%		
		83,266			

F38 Extent physical/emotional problems interfered

During the past four weeks, to what extent have your physical health or emotional problems interfered with your normal social activities with family, neighbors, friends, or groups? (Mark one oval.)

Lifestyle

Medical History

Vari	able # 21			Usage Notes	: none
Sas	Name: INTSOC				
Sas	Label: Extent phys or emotional	probs interfere		Categories:	Lifesty Medic
Valu	les	Ν	%		
1	Not at all	58,180	69.9%		
2	Slightly	13,472	16.2%		
3	Moderately	6,436	7.7%		
4	Quite a bit	3,872	4.7%		
5	Extremely	1,048	1.3%		
	Missing	258	0.3%		
		83,266			

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File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 How much bodily pain

During the past four weeks, how much bodily pain have you had? (Mark one oval.)

Variable # 22		Usage Notes: none			
Sas	Sas Name: BODPAIN				
Sas	Label: How much bodily pain			Categories:	Lifestyle Medical History
Valu	les	Ν	%		
0	None	16,376	19.7%		
2	Very mild	30,630	36.8%		
3	Mild	17,204	20.7%		
4	Moderate	15,460	18.6%		
5	Severe	3,351	4.0%		
	Missing	245	0.3%		
		83,266			

F38 How much did pain interfere

During the past four weeks, how much did pain interfere with your normal work (both outside your home and at home)? (Mark one oval.)

Variable # 23			Usage Notes: none		
Sas	Sas Name: PAININT				
Sas	Label: How much did pain interfere			Categories:	Lifestyle Medical History
Valu	es	Ν	%		
1	Not at all	46,603	56.0%		
2	A little bit	20,360	24.5%		
3	Moderately	9,603	11.5%		
4	Quite a bit	5,084	6.1%		
5	Extremely	1,393	1.7%		
	Missing	223	0.3%		
		83,266			

F38 Physical/Cut down on time spent

The next questions are about your regular daily activities like work, child care, or community activities. As a result of you physical health, have any of the following problems occurred during the past 4 weeks? You cut down on the amount of time you spent on work or other activities

Varia	able # 24			Usage Notes	: none
	Name: LESSWRKP Label: Physical/Cut down on time spent			Categories:	Lifestyle
Values		N %		Medical History	
0	No 65,8	85	79.1%		
1	Yes 16,9	19	20.3%		
	Missing 4	62	0.6%		
	83,2	66			

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F38 Physical/Accomplished less

The next questions are about your regular daily activities like work, child care, or community activities. As a result of you physical health, have any of the following problems occurred during the past 4 weeks? You accomplished less than you would have liked

Vari	able # 25			Usage Notes	Usage Notes: none		
Sas	Name: LESSACCP						
Sas Label: Physical/Accomplished less				Categories:	Lifestyle Medical History		
Valu	es	Ν	%				
0	No	48,539	58.3%				
1	Yes	34,192	41.1%				
	Missing	535	0.6%				
		83,266					

F38 Physical/Limited kind of work

The next questions are about your regular daily activities like work, child care, or community activities. As a result of you physical health, have any of the following problems occurred during the past 4 weeks? You were limited in the kind of work or other activities you did

Vari	able # 26	Usage Notes: none			
Sas	Name: LESSKNDP				
Sas	Label: Physical/Limited kind of work			Categories:	Lifestyle Medical History
Valu	es	Ν	%		
0	No	58,047	69.7%		
1	Yes	24,599	29.5%		
	Missing	620	0.7%		
		83,266			

F38 Physical/Difficulty performing work

The next questions are about your regular daily activities like work, child care, or community activities. As a result of you physical health, have any of the following problems occurred during the past 4 weeks? You had difficulty performing work or other activities (it took extra effort)

Vari	iable # 27			Usage Notes	none
Sas	Name: WRKDIFFP				
Sas	Label: Physical/Difficulty performing	Categories:	Lifestyle Medical History		
Valu	les	Ν	%		
0	No	57,098	68.6%		
1	Yes	25,513	30.6%		
	Missing	655	0.8%		
		83,266			

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F38 Emotional/Cut down on time spent

In the past four weeks, as a result of any emotional problem (feeling depressed or anxious), have any of the following occurred? You cut down on the amount of time spent on work or other activities

Varia	ble # 28			Usage Notes	: none
Sas N	ame: LESSWRKE				
Sas Label: Emotional/Cut down on time spent		Categories:	Physical Activity Psychosocial/Behavioral		
Value	s	Ν	%		
0	No	71,840	86.3%		
1	Yes	10,888	13.1%		
	Missing	538	0.6%		
		83,266			

F38 Emotional/Accomplished less

In the past four weeks, as a result of any emotional problem (feeling depressed or anxious), have any of the following occurred? You accomplished less than you would have liked

Vari	iable # 29			Usage Notes: none		
Sas	Name: LESSACCE					
Sas Label: Emotional/Accomplished less				Categories:	Physical Activity Psychosocial/Behavioral	
Valu	les	Ν	%			
0	No	61,850	74.3%			
1	Yes	20,788	25.0%			
	Missing	628	0.8%			
		83,266				

F38 Emotional/Worked less carefully

In the past four weeks, as a result of any emotional problem (feeling depressed or anxious), have any of the following occurred? You did work or other things less carefully than usual

Vari	able # 30			Usage Notes	: none
Sas	Name: LESSCARE				
Sas	Label: Emotional/Worked less carefully			Categories:	Physical Activity Psychosocial/Behavioral
Valu	es	Ν	%		
0	No	72,311	86.8%		
1	Yes	10,243	12.3%		
	Missing	712	0.9%		
		83,266			

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F38 I get sick easier than others

Of these statements, how true or false is each for you? I seem to get sick a little easier than other people.

Vari	able # 31			Usage Notes	: none
Sas	Name: SICKEASY				
Sas	Label: I get sick easier than others			Categories:	Medical History Psychosocial/Behavioral
Valu	les	Ν	%		
1	Definitely true	956	1.1%		
2	Mostly true	2,653	3.2%		
3	Not sure	6,920	8.3%		
4	Mostly false	17,396	20.9%		
5	Definitely false	54,862	65.9%		
	Missing	479	0.6%		
		83,266			

F38 I am as healthy as anybody

Of these statements, how true or false is each for you? I am as healthy as anybody I know.

Varia	able # 32			Usage Notes	: none
Sas I	Name: HLTHYANY				
Sas	Label: I am as healthy as anybody			Categories:	Medical History Psychosocial/Behavioral
Valu	es	Ν	%		
1	Definitely true	29,490	35.4%		
2	Mostly true	31,378	37.7%		
3	Not sure	10,117	12.2%		
4	Mostly false	6,276	7.5%		
5	Definitely false	5,539	6.7%		
	Missing	466	0.6%		
		83,266			

F38 I expect my health to get worse

Of these statements, how true or false is each for you? I expect my health to get worse.

345	Name: HLTHWORS				
Sas	Label: I expect my health to get wors	е		Categories:	Medical History Psychosocial/Behavioral
Valu	es	Ν	%		,
1	Definitely true	2,230	2.7%		
2	Mostly true	8,968	10.8%		
3	Not sure	25,535	30.7%		
4	Mostly false	19,471	23.4%		
5	Definitely false	26,444	31.8%		
	Missing	618	0.7%		
		83,266			

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F38 My health is excellent

Of these statements, how true or false is each for you? My health is excellent.

able # 34			Usage Notes	: none
Name: HLTHEXCL				
Label: My health is excellent			Categories:	Medical History Psychosocial/Behavioral
es	Ν	%		,
Definitely true	20,518	24.6%		
Mostly true	40,947	49.2%		
Not sure	8,234	9.9%		
Mostly false	7,467	9.0%		
Definitely false	5,585	6.7%		
Missing	515	0.6%		
	83,266			
	Mostly true Not sure Mostly false Definitely false	Name: HLTHEXCLLabel: My health is excellentesNDefinitely true20,518Mostly true40,947Not sure8,234Mostly false7,467Definitely false5,585Missing515	Name: HLTHEXCLLabel: My health is excellentesNDefinitely true20,51824.6%Mostly true40,94749.2%Not sure8,2349.9%Mostly false7,4679.0%Definitely false5,5856.7%Missing5150.6%	Name: HLTHEXCL Categories: Label: My health is excellent Categories: es N % Definitely true 20,518 24.6% Mostly true 40,947 49.2% Not sure 8,234 9.9% Mostly false 7,467 9.0% Definitely false 5,585 6.7% Missing 515 0.6%

F38 Time physical/emotional problems interfered

During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends and relatives)?

Vari	able # 35			Usage Notes	: none
Sas	Name: INTSOC2				
Sas	Label: Time physical/emotional	probs interfere		Categories:	Medical History Psychosocial/Behavioral
Valu	ies	Ν	%		
1	All of the time	751	0.9%		
2	Most of the time	2,347	2.8%		
3	Some of the time	8,856	10.6%		
4	A little bit of the time	13,244	15.9%		
5	None of the time	57,745	69.4%		
	Missing	323	0.4%		
		83,266			

F38 Did you feel full of pep

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Did you feel full of pep?

Vari	iable # 36			Usage Notes	: none	
Sas	Sas Name: FULLPEP					
Sas	Label: Did you feel full of pep			Categories:	Psychosocial/Behavioral	
Valu	les	Ν	%			
1	All of the time	2,835	3.4%			
2	Most of the time	30,671	36.8%			
3	A good bit of the time	20,025	24.0%			
4	Some of the time	17,479	21.0%			
5	A little bit of the time	8,027	9.6%			
6	None of the time	3,761	4.5%			
	Missing	468	0.6%			
		83,266				

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F38 Have you been a very nervous person

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Have you been a very nervous person?

Varia	ble # 37			Usage Notes	: none
Sas N	lame: NERVOUS				
Sas L	.abel: Have you been a very nervous	s person		Categories:	Psychosocial/Behavioral
Value	es	Ν	%		
1	All of the time	436	0.5%		
2	Most of the time	1,322	1.6%		
3	A good bit of the time	2,921	3.5%		
4	Some of the time	10,958	13.2%		
5	A little bit of the time	28,142	33.8%		
6	None of the time	39,066	46.9%		
	Missing	421	0.5%		
		83,266			

F38 Felt so down in the dumps nothing could cheer

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Have you felt so down in the dumps that nothing could cheer you up?

Varia	Variable # 38		Usage Notes	Usage Notes: none			
Sas I	Name: DWNDUMPS						
Sas L	_abel: Felt down in the dumps			Categories:	Psychosocial/Behavioral		
Value	es	Ν	%				
1	All of the time	213	0.3%				
2	Most of the time	560	0.7%				
3	A good bit of the time	1,401	1.7%				
4	Some of the time	5,045	6.1%				
5	A little bit of the time	13,109	15.7%				
6	None of the time	62,475	75.0%				
	Missing	463	0.6%				
		83,266					

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F38 Felt calm and peaceful

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Have you felt calm and peaceful?

Varia	able # 39			Usage Notes	: none
Sas I	Name: CALM				
Sas I	Label: Felt calm and peaceful			Categories:	Psychosocial/Behavioral
Valu	es	Ν	%		
1	All of the time	5,919	7.1%		
2	Most of the time	40,910	49.1%		
3	A good bit of the time	16,650	20.0%		
4	Some of the time	12,996	15.6%		
5	A little bit of the time	4,795	5.8%		
6	None of the time	1,456	1.7%		
	Missing	540	0.6%		
		83,266			

F38 Did you have a lot of energy

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Did you have a lot of energy?

Variable # 40				Usage Notes: none			
Sas I	Name: ENERGY						
Sas I	Label: Did you have a lot of energy			Categories:	Psychosocial/Behavioral		
Value	es	Ν	%				
1	All of the time	4,168	5.0%				
2	Most of the time	29,855	35.9%				
3	A good bit of the time	17,679	21.2%				
4	Some of the time	16,741	20.1%				
5	A little bit of the time	9,356	11.2%				
6	None of the time	4,967	6.0%				
	Missing	500	0.6%				
		83,266					

Form 38 - Daily Life



Data File: f38_os_pub

F38 Felt downhearted and blue

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Have you felt downhearted and blue?

Varia	able # 41			Usage Notes	: none
Sas I	Name: FELTBLUE				
Sas I	Label: Felt downhearted and blue			Categories:	Psychosocial/Behavioral
Value	es	Ν	%		
1	All of the time	289	0.3%		
2	Most of the time	1,032	1.2%		
3	A good bit of the time	2,479	3.0%		
4	Some of the time	10,702	12.9%		
5	A little bit of the time	30,058	36.1%		
6	None of the time	38,164	45.8%		
	Missing	542	0.7%		
		83,266			

F38 Did you feel worn out

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Did you feel worn out?

Varia	ble # 42			Usage Notes	: none
Sas N	lame: WORNOUT				
Sas L	.abel: Did you feel worn out			Categories:	Psychosocial/Behavioral
Value	es	Ν	%		
1	All of the time	874	1.0%		
2	Most of the time	3,124	3.8%		
3	A good bit of the time	6,632	8.0%		
4	Some of the time	20,909	25.1%		
5	A little bit of the time	34,488	41.4%		
6	None of the time	16,646	20.0%		
	Missing	593	0.7%		
		83,266			

Form 38 - Daily Life



Data File: f38_os_pub

F38 Have you been happy

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Have you been happy?

Varia	able # 43			Usage Notes	: none
Sas	Name: HAPPY				
Sas	Label: Have you been happy			Categories:	Psychosocial/Behavioral
Valu	es	Ν	%		
1	All of the time	10,229	12.3%		
2	Most of the time	47,076	56.5%		
3	A good bit of the time	12,292	14.8%		
4	Some of the time	9,240	11.1%		
5	A little bit of the time	3,101	3.7%		
6	None of the time	941	1.1%		
	Missing	387	0.5%		
		83,266			

F38 Did you feel tired

These questions are about how you feel and how things have been during the past 4 weeks. Give the one answer that comes closet to the way you have been feeling. Did you feel tired?

Variable # 44		Usage Notes	Usage Notes: none		
Sas	Name: TIRED				
Sas	Label: Did you feel tired			Categories:	Psychosocial/Behavioral
Valu	es	N	%		
1	All of the time	1,701	2.0%		
2	Most of the time	5,133	6.2%		
3	A good bit of the time	9,518	11.4%		
4	Some of the time	28,111	33.8%		
5	A little bit of the time	33,461	40.2%		
6	None of the time	4,992	6.0%		
	Missing	350	0.4%		
		83,266			

F38 Can you eat

Can you eat:

Vari	iable # 45			Usage Notes	: Not collected on all versions of Form 38.
	Name: EAT Label: Can you eat			Categories:	Physical Activity
Valu	les	N	%		
1	Without help (can feed self completely)	82,292	98.8%		
2	With some help (help cutting, etc.)	246	0.3%		
3	Completely unable to feed self	374	0.4%		
	Missing	354	0.4%		
		83,266			

Form 38 - Daily Life



Data File: f38_os_pub

F38 Can you dress and undress yourself

Can you dress and undress yourself:

Varia	able # 46			Usage Notes	: Not collected on all versions of Form 38.
	Name: DRESS Label: Can you dress and undress sel	f		Categories:	Physical Activity
Valu	es	Ν	%		
1	Without help (can pick clothes, dress)	82,290	98.8%		
2	With some help	483	0.6%		
3	Unable to dress and undress self	153	0.2%		
	Missing	340	0.4%		
		83,266			

F38 Can you get in and out of bed

Can you get in and out of bed:

Vari	able # 47			Usage Notes	: Not collected on all versions of Form 38.
	Name: INOUTBED Label: Can you get in and out of bed			Categories:	Physical Activity
Valu	es	Ν	%		
1	Without any help or aids	82,393	99.0%		
2	With some help (from a person or device)	469	0.6%		
3	Totally dependent on someone else	44	0.1%		
	Missing	360	0.4%		
		83,266			

F38 Can you take a bath or shower

Can you take a bath or shower:

Vari	able # 48		
Sas	Name: SHOWER		
Sas	Label: Can you take a bath or shower		
Valu	les	Ν	%
1	Without help	81,632	98.0%
2	With some help (help in/out, tub attach)	1,216	1.5%
3	Completely unable to bathe self	78	0.1%
	Missing	340	0.4%
		83,266	

Usage Notes: Not collected on all versions of Form 38.

Categories: Physical Activity

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Data File: f38_os_pub

F38 Bloating or gas

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Bloating or gas

Variable # 49		Usage Notes	Usage Notes: Not collected on all versions of Form 38.				
Sas	Name: BLOATING						
Sas	Label: Bloating or gas			Categories:	Medical History: Other Disease/Condition		
Valu	es	N	%				
0	Symptom did not occur	26,346	31.6%				
1	Symptom was mild	41,155	49.4%				
2	Symptom was moderate	12,905	15.5%				
3	Symptom was severe	2,352	2.8%				
	Missing	508	0.6%				
		83,266					

F38 Constipation

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Constipation (difficulty having bowel movements)

Variable # 50				Usage Notes: none		
Sas	Name: CONSTIP					
Sas	Label: Constipation			Categories:	Medical History: Other Disease/Condition	
Valu	es	Ν	%			
0	Symptom did not occur	50,986	61.2%			
1	Symptom was mild	22,924	27.5%			
2	Symptom was moderate	7,018	8.4%			
3	Symptom was severe	1,846	2.2%			
	Missing	492	0.6%			
		83,266				

F38 Night sweats

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Night sweats

Variable # 51				Usage Notes	Usage Notes: none		
Sas Name: NIGHTSWT Sas Label: Night sweats Values N %		Categories:	Medical History: Other Disease/Condition				
		N	%	U			
0	Symptom did not occur	62,708	75.3%				
1	Symptom was mild	14,868	17.9%				
2	Symptom was moderate	4,158	5.0%				
3	Symptom was severe	910	1.1%				
	Missing	622	0.7%				
		83,266					

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Data File: f38_os_pub

File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 General aches or pains

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. General aches or pains

Variable # 52		Usage Notes	: none		
Sas	Name: ACHES				
Sas	Label: General aches or pains			Categories:	Medical History: Other Disease/Condition
Valu	les	Ν	%		
0	Symptom did not occur	15,608	18.7%		
1	Symptom was mild	44,603	53.6%		
2	Symptom was moderate	18,626	22.4%		
3	Symptom was severe	3,791	4.6%		
	Missing	638	0.8%		
		83,266			

F38 Breast tenderness

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Breast tenderness

Variable # 53				Usage Notes	: none
Sas I	Name: BRSTTEN				
Sas L	_abel: Breast tenderness			Categories:	Medical History: Other Disease/Condition
Value	es	N	%		
0	Symptom did not occur	66,216	79.5%		
1	Symptom was mild	13,568	16.3%		
2	Symptom was moderate	2,600	3.1%		
3	Symptom was severe	410	0.5%		
	Missing	472	0.6%		
		83,266			

F38 Hot flashes

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Hot flashes

Variable # 54		Usage Notes	Usage Notes: none		
Sas Name: HOTFLASH Sas Label: Hot flashes Values N			Categories:	Medical History: Other Disease/Condition	
		N	%		-
0	Symptom did not occur	66,797	80.2%		
1	Symptom was mild	11,917	14.3%		
2	Symptom was moderate	3,242	3.9%		
3	Symptom was severe	885	1.1%		
	Missing	425	0.5%		
		83,266			

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Data File: f38_os_pub

F38 Diarrhea

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Diarrhea

Variable # 55			Usage Notes	: none	
Sas	Name: DIARRHEA				
Sas	Label: Diarrhea			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	60,928	73.2%		
1	Symptom was mild	16,160	19.4%		
2	Symptom was moderate	4,357	5.2%		
3	Symptom was severe	1,346	1.6%		
	Missing	475	0.6%		
		83,266			

F38 Mood swings

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Mood swings

Variable # 56		Usage Notes: none					
Sas I	Name: MOODSWNG						
Sas I	Label: Mood swings			Categories:	Medical History: Other Disease/Condition		
Value	es	N	%				
0	Symptom did not occur	54,149	65.0%				
1	Symptom was mild	23,336	28.0%				
2	Symptom was moderate	4,660	5.6%				
3	Symptom was severe	594	0.7%				
	Missing	527	0.6%				
		83,266					

F38 Nausea

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Nausea

Variable # 57				Usage Notes	Usage Notes: none		
Sas Name: NAUSEA Sas Label: Nausea		Categories:	Medical History: Other Disease/Condition				
Valu	es	N	%				
0	Symptom did not occur	72,347	86.9%				
1	Symptom was mild	8,442	10.1%				
2	Symptom was moderate	1,550	1.9%				
3	Symptom was severe	493	0.6%				
	Missing	434	0.5%				
		83,266					

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Data File: f38_os_pub

F38 Dizziness

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Dizziness

Variable # 58		Usage Notes: none			
Sas	Name: DIZZY				
Sas	Label: Dizziness			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	64,259	77.2%		
1	Symptom was mild	15,000	18.0%		
2	Symptom was moderate	2,834	3.4%		
3	Symptom was severe	675	0.8%		
	Missing	498	0.6%		
		83,266			

F38 Feeling tired

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Feeling tired

Variable # 59				Usage Notes	: none
Sas Name: TIRED2					
Sas Label: Feeling tired				Categories:	Medical History: Other Disease/Condition
Valu	es	N	%		
0	Symptom did not occur	10,520	12.6%		
1	Symptom was mild	50,011	60.1%		
2	Symptom was moderate	18,592	22.3%		
3	Symptom was severe	3,698	4.4%		
	Missing	445	0.5%		
		83,266			

F38 Forgetfulness

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Forgetfulness

Variable # 60				Usage Notes	Usage Notes: none		
Sas Name: FORGET		Categories:	Medical History: Other Disease/Condition				
Sas	Label: Forgetfulness			eutogeneel			
Valu	es	N	%				
0	Symptom did not occur	29,438	35.4%				
1	Symptom was mild	43,435	52.2%				
2	Symptom was moderate	8,806	10.6%				
3	Symptom was severe	1,075	1.3%				
	Missing	512	0.6%				
		83,266					

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Data File: f38_os_pub

File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 Increased appetite

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Increased appetite

Variable # 61		Usage Notes	Usage Notes: none		
Sas	Name: HUNGRY				
Sas	Label: Increase appetite			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	58,762	70.6%		
1	Symptom was mild	17,533	21.1%		
2	Symptom was moderate	5,426	6.5%		
3	Symptom was severe	991	1.2%		
	Missing	554	0.7%		
		83,266			

F38 Heart racing or skipping beats

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Heart racing or skipping beats

Variable # 62				Usage Notes: none		
Sas I	Name: HEARTRAC					
Sas Label: Heart racing or skipping beats				Categories:	Medical History: Other Disease/Condition	
Value	es	Ν	%			
0	Symptom did not occur	62,599	75.2%			
1	Symptom was mild	15,947	19.2%			
2	Symptom was moderate	3,580	4.3%			
3	Symptom was severe	634	0.8%			
	Missing	506	0.6%			
		83,266				

F38 Tremors

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Tremors (shakes)

Variable # 63				Usage Notes	Usage Notes: none		
Sas Name: TREMORS Sas Label: Tremors		Categories:	Medical History: Other Disease/Condition				
Valu	es	Ν	%				
0	Symptom did not occur	75,777	91.0%				
1	Symptom was mild	5,298	6.4%				
2	Symptom was moderate	1,405	1.7%				
3	Symptom was severe	307	0.4%				
	Missing	479	0.6%				
		83,266					

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Data File: f38_os_pub

F38 Heartburn

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Heartburn

Variable # 64		Usage Notes	Usage Notes: none		
Sas	Name: HEARTBRN				
Sas	Label: Heartburn			Categories:	Medical History: Other Disease/Condition
Valu	les	Ν	%		
0	Symptom did not occur	52,305	62.8%		
1	Symptom was mild	22,297	26.8%		
2	Symptom was moderate	6,297	7.6%		
3	Symptom was severe	1,796	2.2%		
	Missing	571	0.7%		
		83,266			

F38 Restless and fidgety

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Restless or fidgety

Varia	able # 65			Usage Notes	: none
Sas I	Name: RESTLESS				
Sas I	Label: Restless and fidgety			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	55,406	66.5%		
1	Symptom was mild	22,265	26.7%		
2	Symptom was moderate	4,345	5.2%		
3	Symptom was severe	579	0.7%		
	Missing	671	0.8%		
		83,266			

F38 Low back pain

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Low back pain

Variable # 66				Usage Notes: none			
Sas	Name: LOWBACKP			Categories:	Medical History: Other Disease/Condition		
Sas	Label: Low back pain			oalegones.	Medical History. Other Disease/Condition		
Valu	es	Ν	%				
0	Symptom did not occur	34,808	41.8%				
1	Symptom was mild	28,804	34.6%				
2	Symptom was moderate	14,080	16.9%				
3	Symptom was severe	5,017	6.0%				
	Missing	557	0.7%				
		83,266					

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Data File: f38_os_pub

F38 Neck pain

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Neck pain

Vari	Variable # 67		Usage Notes: none		
Sas	Name: NECKPAIN				
Sas	Label: Neck pain			Categories:	Medical History: Other Disease/Condition
Valu	es	N	%		
0	Symptom did not occur	45,407	54.5%		
1	Symptom was mild	24,518	29.4%		
2	Symptom was moderate	10,040	12.1%		
3	Symptom was severe	2,689	3.2%		
	Missing	612	0.7%		
		83,266			

F38 Skin dryness or scaling

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Skin dryness or scaling

Variable # 68			Usage Notes	Usage Notes: none		
Sas Name: SKINDRY						
Sas Label: Skin dryness or scaling				Categories:	Medical History: Other Disease/Condition	
Valu	es	Ν	%			
0	Symptom did not occur	35,536	42.7%			
1	Symptom was mild	33,515	40.3%			
2	Symptom was moderate	10,900	13.1%			
3	Symptom was severe	2,883	3.5%			
	Missing	432	0.5%			
		83,266				

F38 Headaches or migraines

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Headaches or migraines

Variable # 69			Usage Notes: none		
Sas	Name: HEADACHE			Cotomorios	Madical History: Other Disease/Condition
Sas	Label: Headaches or migraines			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	48,310	58.0%		
1	Symptom was mild	26,475	31.8%		
2	Symptom was moderate	6,470	7.8%		
3	Symptom was severe	1,627	2.0%		
	Missing	384	0.5%		
-		83,266			

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Data File: f38_os_pub

F38 Clumsiness

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Clumsiness

Variable # 70		Usage Notes	Usage Notes: none		
Sas Name: CLUMSY Sas Label: Clumsiness			Categories:	Medical History: Other Disease/Condition	
Valu	es	Ν	%		
0	Symptom did not occur	58,129	69.8%		
1	Symptom was mild	20,885	25.1%		
2	Symptom was moderate	3,211	3.9%		
3	Symptom was severe	361	0.4%		
	Missing	680	0.8%		
		83,266			

F38 Trouble with vision

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Any trouble seeing that is uncorrected by lenses

Variable # 71				Usage Notes	Usage Notes: none		
Sas	Name: TRBSEE						
Sas Label: Trouble with vision				Categories:	Medical History: Other Disease/Condition		
Valu	es	Ν	%				
0	Symptom did not occur	64,377	77.3%				
1	Symptom was mild	12,926	15.5%				
2	Symptom was moderate	4,086	4.9%				
3	Symptom was severe	1,150	1.4%				
	Missing	727	0.9%				
		83,266					

F38 Vaginal or genital irritation

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Vaginal or genital irritation or itching

Variable # 72				Usage Notes	Usage Notes: none		
Sas Name: VAGITCH				Categories:	Medical History: Other Disease/Condition		
	Sas Label: Vaginal or genital irritation Values		%				
0	Symptom did not occur	65,881	79.1%				
1	Symptom was mild	13,442	16.1%				
2	Symptom was moderate	2,702	3.2%				
3	Symptom was severe	711	0.9%				
	Missing	530	0.6%				
		83,266					

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Data File: f38_os_pub

File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 Difficulty concentrating

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Difficulty concentrating

Variable # 73		Usage Notes	Usage Notes: none		
Sas I	Name: CONCEN				
Sas I	Label: Difficulty concentrating			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	54,787	65.8%		
1	Symptom was mild	23,278	28.0%		
2	Symptom was moderate	3,901	4.7%		
3	Symptom was severe	660	0.8%		
	Missing	640	0.8%		
		83,266			

F38 Joint pain or stiffness

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you... Be sure to mark one box on each line. Joint pain or stiffness

Varia	able # 74		Usage Notes: none					
Sas	Name: JNTPAIN				Madiaal I listamu Othan Diagona (Canditian			
Sas	Label: Joint pain or stiffness			Categories:	Medical History: Other Disease/Condition			
Valu	es	Ν	%					
0	Symptom did not occur	20,249	24.3%					
1	Symptom was mild	38,055	45.7%					
2	Symptom was moderate	18,413	22.1%					
3	Symptom was severe	6,027	7.2%					
	Missing	522	0.6%					
		83,266						

F38 Decreased appetite

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Decreased appetite

Variable # 75				Usage Notes	Usage Notes: none			
	Name: NOHUNGER			Categories:	Medical History: Other Disease/Condition			
Sas Label: Decreased appetite				j				
Valu	es	N	%					
0	Symptom did not occur	73,924	88.8%					
1	Symptom was mild	6,888	8.3%					
2	Symptom was moderate	1,543	1.9%					
3	Symptom was severe	374	0.4%					
	Missing	537	0.6%					
		83,266						

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Data File: f38_os_pub

F38 Hearing loss

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Hearing loss

Variable # 76		Usage Notes: none			
Sas	Name: HEARLOSS				
Sas	Label: Hearing loss			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	59,678	71.7%		
1	Symptom was mild	16,741	20.1%		
2	Symptom was moderate	4,948	5.9%		
3	Symptom was severe	1,272	1.5%		
	Missing	627	0.8%		
		83,266			

F38 Swelling of hands or feet

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Swelling of hands or feet

Variable # 77				Usage Notes	: none
Sas Name: SWELLHND					
Sas L	_abel: Swelling of hands or feet			Categories:	Medical History: Other Disease/Condition
Value	es	Ν	%		
0	Symptom did not occur	54,996	66.0%		
1	Symptom was mild	20,632	24.8%		
2	Symptom was moderate	5,688	6.8%		
3	Symptom was severe	1,427	1.7%		
	Missing	523	0.6%		
		83,266			

F38 Vaginal or genital dryness

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Vaginal or genital dryness

Variable # 78				Usage Notes	Usage Notes: none			
Sas Name: VAGDRY Sas Label: Vaginal or genital dryness				Categories:	Medical History: Other Disease/Condition			
Valu	es	N	%					
0	Symptom did not occur	58,343	70.1%					
1	Symptom was mild	17,575	21.1%					
2	Symptom was moderate	5,267	6.3%					
3	Symptom was severe	1,433	1.7%					
	Missing	648	0.8%					
		83,266						

Form 38 - Daily Life



Data File: f38_os_pub

F38 Upset stomach or belly pain

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Upset stomach or belly pain or discomfort

Variable # 79			Usage Notes	Usage Notes: none			
Sas I	Name: UPSTOM			Cotomorios	Medical Listony Other Disease/Condition		
Sas I	Label: Upset stomach or belly pain			Categories:	Medical History: Other Disease/Condition		
Valu	es	Ν	%				
0	Symptom did not occur	56,547	67.9%				
1	Symptom was mild	19,633	23.6%				
2	Symptom was moderate	5,093	6.1%				
3	Symptom was severe	1,432	1.7%				
	Missing	561	0.7%				
		83,266					

F38 Pain or burning while urinating

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Pain or burning while urinating

Varia	able # 80			Usage Notes	: none
	Name: URINPAIN Label: Pain or burning while urinating			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	77,623	93.2%		
1	Symptom was mild	3,804	4.6%		
2	Symptom was moderate	1,006	1.2%		
3	Symptom was severe	345	0.4%		
	Missing	488	0.6%		
		83,266			

F38 Coughing or wheezing

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Cough or wheezing

Vari	able # 81			Usage Notes	: none
Sas	Name: COUGH				
Sas	Label: Coughing or wheezing			Categories:	Medical History: Other Disease/Condition
Valu	es	Ν	%		
0	Symptom did not occur	55,836	67.1%		
1	Symptom was mild	19,133	23.0%		
2	Symptom was moderate	6,056	7.3%		
3	Symptom was severe	1,728	2.1%		
	Missing	513	0.6%		
		83,266			

Form 38 - Daily Life



Data File: f38_os_pub

File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 Vaginal or genital discharge

Below is a list of symptoms people sometimes have. For each item, mark the one oval that best describes how bothersome the symptom was during the past 4 weeks for you. Be sure to mark one oval on each line. Vaginal or genital discharge

Variable # 82				Usage Notes: none		
Sas N	lame: VAGDIS					
Sas L	abel: Vaginal or genital discharge			Categories:	Medical History: Other Disease/Condition	
Value	25	Ν	%			
0	Symptom did not occur	72,558	87.1%			
1	Symptom was mild	8,974	10.8%			
2	Symptom was moderate	1,091	1.3%			
3	Symptom was severe	177	0.2%			
	Missing	466	0.6%			
		83,266				

F38 Did your spouse or partner die

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did your spouse or partner die?

Variable # 83			Usage Notes: Not collected on all versions of Form 38.			
Sas Name: SPOUSDIE Sas Label: Did your spouse or partner die						
				Categories:	Psychosocial/Behavioral	
Valu	es	N	%			
0	No	80,258	96.4%			
1	Yes and upset me: Not too much	227	0.3%			
2	Yes and upset me: Moderately	610	0.7%			
3	Yes and upset me: Very much	1,639	2.0%			
	Missing	532	0.6%			
		83,266				

F38 Did your spouse/partner have a serious illness

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did your spouse or partner have a serious illness?

Variable #84Sas Name:SPOUSILLSas Label:Did your spouse have a serious illness				Usage Notes: Not collected on all versions of Form 38.			
				Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	No	64,706	77.7%				
1	Yes and upset me: Not too much	2,366	2.8%				
2	Yes and upset me: Moderately	5,038	6.1%				
3	Yes and upset me: Very much	6,158	7.4%				
	Missing	4,998	6.0%				
		83,266					

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Data File: f38_os_pub

F38 Did a close friend die or have serious illness

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Over the past year: Did a close friend or family member die or have a serious illness (other than your spouse or partner)?

Variable # 85				Usage Notes: Not collected on all versions of Form 38.			
Sas	Name: FRIENDIE						
Sas	Label: Did a close friend die			Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	No	45,765	55.0%				
1	Yes and upset me: Not too much	8,379	10.1%				
2	Yes and upset me: Moderately	15,697	18.9%				
3	Yes and upset me: Very much	12,936	15.5%				
	Missing	489	0.6%				
		83,266					

F38 Have major problems with money

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did you have any major problems with money?

Varia	able # 86		Usage Notes: Not collected on all versions of Form 38.			
Sas	Name: MONPROB					
Sas	Label: Have major problems with mor	ney	Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%			
0	No	66,338	79.7%			
1	Yes and upset me: Not too much	8,234	9.9%			
2	Yes and upset me: Moderately	5,424	6.5%			
3	Yes and upset me: Very much	2,859	3.4%			
	Missing	411	0.5%			
		83,266				

F38 Have a divorce or break-up

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did you have a divorce or break-up with a spouse or partner?

Variable # 87 Sas Name: DIVORCE Sas Label: Have a divorce or break-up				Usage Notes: Not collected on all versions of Form 38.			
				Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	No	81,140	97.4%				
1	Yes and upset me: Not too much	427	0.5%				
2	Yes and upset me: Moderately	481	0.6%				
3	Yes and upset me: Very much	696	0.8%				
	Missing	522	0.6%				
		83,266					

Form 38 - Daily Life



File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 Close friend/family have a divorce

Data File: f38_os_pub

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did a family member or close friend have a divorce or break-up?

Variable # 88				Usage Notes: Not collected on all versions of Form 38.			
	Name: FRNDIV			Categories:	Psychosocial/Behavioral		
Sas Label: Close friend/family have a divorce Values N			%				
0	No	72,101	86.6%				
1	Yes and upset me: Not too much	3,872	4.7%				
2	Yes and upset me: Moderately	3,914	4.7%				
3	Yes and upset me: Very much	2,958	3.6%				
-	Missing	421	0.5%				
		83,266					

F38 Have major conflict with children

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did you have a major conflict with children or grandchildren?

Variable # 89				Usage Notes: Not collected on all versions of Form 38.			
Name: CHILCON							
Label: Have major conflict with childre	en	Categories:	Psychosocial/Behavioral				
es	Ν	%					
No	69,548	83.5%					
Yes and upset me: Not too much	5,363	6.4%					
Yes and upset me: Moderately	4,532	5.4%					
Yes and upset me: Very much	3,388	4.1%					
Missing	435	0.5%					
	83,266						
	Name: CHILCON Label: Have major conflict with children es No Yes and upset me: Not too much Yes and upset me: Moderately Yes and upset me: Very much	Name: CHILCONLabel: Have major conflict with childrenesNNo69,548Yes and upset me: Not too much5,363Yes and upset me: Moderately4,532Yes and upset me: Very much3,388Missing435	Name: CHILCONLabel: Have major conflict with childrenesNNo69,548Yes and upset me: Not too much5,363Yes and upset me: Moderately4,532Yes and upset me: Very much3,3884.1%Missing435	Name: CHILCON Categories: Label: Have major conflict with children Categories: es N % No 69,548 83.5% Yes and upset me: Not too much 5,363 6.4% Yes and upset me: Moderately 4,532 5.4% Yes and upset me: Very much 3,388 4.1% Missing 435 0.5%			

F38 Have a major accident or disaster

Below are some hard things that sometimes happen to people. Pls try to think back over the past yr to remember if any of these things happened. Over the past year: Did you have any major accidents, disasters, muggings, unwanted sexual experiences, robberies or similar events?

	able # 90			Usage Notes: Not collected on all versions of Form 38.			
	Name: MAJACC Label: Have a major accident or disas	ster		Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	No	78,170	93.9%				
1	Yes and upset me: Not too much	1,451	1.7%				
2	Yes and upset me: Moderately	1,680	2.0%				
3	Yes and upset me: Very much	1,648	2.0%				
	Missing	317	0.4%				
		83,266					

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Data File: f38_os_pub

F38 Did you, family, or friend lose job or retire

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did a family member or close friend lose their job or retire?

Variable # 91				Usage Notes: Not collected on all versions of Form 38.			
Sas	Name: FRNJOB						
Sas	Label: You, family, friend lose job or r	etire		Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	No	68,102	81.8%				
1	Yes and upset me: Not too much	7,982	9.6%				
2	Yes and upset me: Moderately	4,390	5.3%				
3	Yes and upset me: Very much	2,485	3.0%				
	Missing	307	0.4%				
		83,266					
		03,200					

F38 Were you physically abused

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Were you physically abused by being hit, slapped, pushed, shoved, punched or threatened with a weapon by a family member or close friend?

Vari	iable # 92		Usage Notes: Not collected on all versions of Form 38		
Sas	Name: PHYAB				
Sas	Label: Were you physically abused		Categories:	Psychosocial/Behavioral	
Valu	les	Ν	%		
0	No	82,362	98.9%		
1	Yes and upset me: Not too much	217	0.3%		
2	Yes and upset me: Moderately	162	0.2%		
3	Yes and upset me: Very much	249	0.3%		
	Missing	276	0.3%		
		83,266			

F38 Were you verbally abused

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: . Were you verbally abused by being made fun of, severely criticized, told you were a stupid or worthless person, or threatened with harm to yourself, your possessions, or your pets, by a family member or close friend?

Variable # 93			Usage Notes: Not collected on all versions of Form 38.			
Sas Name: VERBAB			Categories: Psychosocial/Behavioral	Psychosocial/Behavioral		
	N	%				
No	76,254	91.6%				
Yes and upset me: Not too much	2,811	3.4%				
Yes and upset me: Moderately	2,114	2.5%				
Yes and upset me: Very much	1,774	2.1%				
Missing	313	0.4%				
	83,266					
	Name: VERBAB Label: Were you verbally abused es No Yes and upset me: Not too much Yes and upset me: Moderately Yes and upset me: Very much	Name: VERBABLabel: Were you verbally abusedesNNo76,254Yes and upset me: Not too much2,811Yes and upset me: Moderately2,114Yes and upset me: Very much1,774Missing313	Name: VERBABLabel: Were you verbally abusedesNNo76,25491.6%Yes and upset me: Not too much2,8113.4%Yes and upset me: Moderately2,1142.5%Yes and upset me: Very much1,7741,7742.1%Missing3130.4%	Name: VERBAB Categories: Psychosocial/Behavioral Label: Were you verbally abused N % es N % No 76,254 91.6% Yes and upset me: Not too much 2,811 3.4% Yes and upset me: Moderately 2,114 2.5% Yes and upset me: Very much 1,774 2.1% Missing 313 0.4%		

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Data File: f38_os_pub

F38 Did a pet die

Below are some hard things that sometimes happen to people. Please try to think back over the past year to remember if any of these things happened. Mark the answer that seems best. Over the past year: Did a pet die?

Variable # 94				Usage Notes: Not collected on all versions of Form 38.			
	Name: PETDIE Label: Did a pet die			Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	No	76,266	91.6%				
1	Yes and upset me: Not too much	1,384	1.7%				
2	Yes and upset me: Moderately	2,488	3.0%				
3	Yes and upset me: Very much	2,757	3.3%				
	Missing	371	0.4%				
		83,266					

F38 You felt depressed

These are questions about your feelings during the past week. For each of the statements, please indicate the choice that tells how often you felt that way. You felt depressed (blue or down)

Variable # 95			Usage Notes: Not collected on all versions of Form 38.		
ame: FELTDEP					
abel: You felt depressed			Categories:	Psychosocial/Behavioral	
S	N	%			
Rarely or none of the time	61,178	73.5%			
Some or a little of the time	15,273	18.3%			
Occasionally or a moderate amount	4,812	5.8%			
Most or all of the time	1,569	1.9%			
Missing	434	0.5%			
	83,266				
	ame: FELTDEP abel: You felt depressed s Rarely or none of the time Some or a little of the time Occasionally or a moderate amount Most or all of the time	ame: FELTDEPabel: You felt depressedsNRarely or none of the time61,178Some or a little of the time15,273Occasionally or a moderate amount4,812Most or all of the time1,569Missing434	ame: FELTDEPabel: You felt depressedsNRarely or none of the time61,178Some or a little of the time15,273Occasionally or a moderate amount4,812Most or all of the time1,569Missing4340.5%	Categories:ame: FELTDEPCategories:abel: You felt depressedNsNRarely or none of the time61,178Gome or a little of the time15,273Some or a little of the time15,273Occasionally or a moderate amount4,812Most or all of the time1,569Missing434O.5%	

F38 Your sleep was restless

These are questions about your feelings during the past week. For each of the statements, please indicate the choice that tells how often you felt that way. Your sleep was restless

Variable # 96				Usage Notes	Usage Notes: Not collected on all versions of Form 38.			
Sas	Name: RESTSLP			e / · ·	Lifeetules Clean			
Sas	Label: Your sleep was restless			Categories:	Lifestyle: Sleep Psychosocial/Behavioral			
Valu	es	Ν	%					
0	Rarely or none of the time	36,025	43.3%					
1	Some or a little of the time	29,653	35.6%					
2	Occasionally or a moderate amount	11,447	13.7%					
3	Most or all of the time	5,749	6.9%					
	Missing	392	0.5%					
		83,266						

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Data File: f38_os_pub

F38 You enjoyed life

These are questions about your feelings during the past week. For each of the statements, please indicate the choice that tells how often you felt that way. You enjoyed life

Variable # 97			Usage Notes	Usage Notes: Not collected on all versions of Form 38.			
	Name: ENJLIF Label: You enjoyed life			Categories:	Psychosocial/Behavioral		
Valu		N	%				
0	Rarely or none of the time	7,672	9.2%				
1	Some or a little of the time	5,397	6.5%				
2	Occasionally or a moderate amount	10,213	12.3%				
3	Most or all of the time	59,389	71.3%				
	Missing	595	0.7%				
		83,266					

F38 You had crying spells

These are questions about your feelings during the past week. For each of the statements, please indicate the choice that tells how often you felt that way. You had crying spells

Variable # 98				Usage Notes	Usage Notes: Not collected on all versions of Form 38.		
Sas	Name: CRYSPELL						
Sas	Label: You had crying spells			Categories:	Psychosocial/Behavioral		
Valu	es	Ν	%				
0	Rarely or none of the time	75,230	90.3%				
1	Some or a little of the time	5,297	6.4%				
2	Occasionally or a moderate amount	1,765	2.1%				
3	Most or all of the time	534	0.6%				
	Missing	440	0.5%				
		83,266					

F38 You felt sad

These are questions about your feelings during the past week. For each of the statements, please indicate the choice that tells how often you felt that way. You felt sad

Variable # 99				Usage Notes:	Usage Notes: Not collected on all versions of Form 38.			
Sas Name: FELTSAD Sas Label: You felt sad		Categories:	Psychosocial/Behavioral					
Valu	es	Ν	%					
0	Rarely or none of the time	53,706	64.5%					
1	Some or a little of the time	22,435	26.9%					
2	Occasionally or a moderate amount	4,995	6.0%					
3	Most or all of the time	1,650	2.0%					
	Missing	480	0.6%					
		83,266						

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Data File: f38_os_pub

F38 You felt people disliked you

These are questions about your feelings during the past week. For each of the statements, please indicate the choice that tells how often you felt that way. You felt that people disliked you

Variable # 100 Sas Name: PEOPDIS				Usage Notes: Not collected on all versions of Form 38.			
				Categories:	Psychosocial/Behavioral		
Sas	Label: You felt people disliked you			Categories.	1 Sychosocia/ Denavioral		
Valu	es	Ν	%				
0	Rarely or none of the time	74,316	89.3%				
1	Some or a little of the time	6,840	8.2%				
2	Occasionally or a moderate amount	1,195	1.4%				
3	Most or all of the time	491	0.6%				
	Missing	424	0.5%				
		83,266					

F38 Felt sad for two weeks or more

In the past year, have you had two weeks or more during which you felt sad, blue, or depressed, or lost pleasure in things that you usually cared about or enjoyed?

Variable # 101		Usage Notes	Usage Notes: Not collected on all versions of Form 38.			
Sas M	Name: SAD2WK					
Sas L	_abel: Felt sad for two weeks or more			Categories:	Psychosocial/Behavioral	
Value	es	Ν	%			
0	No	66,453	79.8%			
1	Yes	16,376	19.7%			
	Missing	437	0.5%			
		83,266				

F38 Felt sad for two or more years

Have you had two years or more in your life when you felt depressed or sad on most days, even if you felt okay sometimes?

Variable # 102		Usage Notes	Usage Notes: Not collected on all versions of Form 38.			
Sas I	Name: SAD2YRS					
Sas I	Sas Label: Felt sad for two or more years			Categories:	Psychosocial/Behavioral	
Value	es	Ν	%			
0	No	65,012	78.1%			
1	Yes	17,591	21.1%			
	Missing	663	0.8%			
		83,266				

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Data File: f38_os_pub

File Date: 08/08/2007 Structure: Multiple rows per participant Population: OS participants

F38 Felt sad much of past year

Have you felt depressed or sad much of the time in the past year?

Variable # 103 Sas Name: SADMUCH Sas Label: Felt sad much of past year				Usage Notes:	: Sub-question of F38 V6 Q57 "Felt sad two or more years". Not collected on all versions of Form 38.			
			Categories:	Psychosocial/Behavioral				
Value	es	Ν	%					
0	No	12,322	14.8%					
1	Yes	5,158	6.2%					
	Missing	65,786	79.0%					
		83,266						

F38 DId you take medication for sleep

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you take any kind of medication or alcohol at bedtime to help you sleep?

Varia	able # 104	Usage Notes	: none		
Sas	Name: MEDSLEEP				
Sas	Label: Did you take medication for s	leep		Categories:	Lifestyle: Sleep
Valu	es	Ν	%		
1	No, not in past 4 weeks	59,765	71.8%		
2	Yes, less than once a week	7,987	9.6%		
3	Yes 1 or 2 times a week	5,090	6.1%		
4	Yes, 3 or 4 times a week	2,830	3.4%		
5	Yes, 5 or more times a week	7,197	8.6%		
	Missing	397	0.5%		
		83,266			

F38 Did you fall asleep during quiet activity

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you fall asleep during quiet activities like reading, watching TV, or riding in a car?

Varia	able # 105	Usage Notes	: none		
Sas I	Name: FALLSLP				
Sas L	_abel: Fall asleep during quiet activity			Categories:	Lifestyle: Sleep
Value	es	Ν	%		
1	No, not in past 4 weeks	22,210	26.7%		
2	Yes, less than once a week	19,693	23.7%		
3	Yes 1 or 2 times a week	20,803	25.0%		
4	Yes, 3 or 4 times a week	12,520	15.0%		
5	Yes, 5 or more times a week	7,627	9.2%		
	Missing	413	0.5%		
		83,266			

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Data File: f38_os_pub

F38 Did you nap during the day

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you nap during the day?

Varia	ble # 106		Usage Notes	: none	
Sas N	lame: NAP				
Sas L	.abel: Did you nap during the day			Categories:	Lifestyle: Sleep
Value	es	N	%		
1	No, not in past 4 weeks	35,892	43.1%		
2	Yes, less than once a week	18,200	21.9%		
3	Yes 1 or 2 times a week	15,080	18.1%		
4	Yes, 3 or 4 times a week	8,363	10.0%		
5	Yes, 5 or more times a week	5,250	6.3%		
	Missing	481	0.6%		
		83,266			

F38 Did you have trouble falling asleep

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you have trouble falling asleep?

Vari	able # 107			Usage Notes	: none
Sas	Name: TRBSLEEP			• • • •	
Sas	Label: Did you have trouble failling a	asleep		Categories:	Lifestyle: Sleep
Valu	es	Ν	%		
1	No, not in past 4 weeks	48,331	58.0%		
2	Yes, less than once a week	15,253	18.3%		
3	Yes 1 or 2 times a week	10,500	12.6%		
4	Yes, 3 or 4 times a week	4,984	6.0%		
5	Yes, 5 or more times a week	3,667	4.4%		
	Missing	531	0.6%		
		83,266			

F38 Did you wake up several times

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you wake up several times at night?

Vari	able # 108	Usage Notes	Usage Notes: none		
Sas	Name: WAKENGHT				
Sas Label: Did you wake up several times				Categories:	Lifestyle: Sleep
Valu	les	Ν	%		
1	No, not in past 4 weeks	17,238	20.7%		
2	Yes, less than once a week	13,671	16.4%		
3	Yes 1 or 2 times a week	16,692	20.0%		
4	Yes, 3 or 4 times a week	15,135	18.2%		
5	Yes, 5 or more times a week	19,992	24.0%		
	Missing	538	0.6%		
		83,266			

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Data File: f38_os_pub

F38 Did you wake up earlier than planned

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you wake up earlier than you planned

Vari	iable # 109	Usage Notes: none			
Sas	Name: UPEARLY				
Sas	Label: Did you wake up earlier than	Categories:	Lifestyle: Sleep		
Valu	les	Ν	%		
1	No, not in past 4 weeks	34,151	41.0%		
2	Yes, less than once a week	17,386	20.9%		
3	Yes 1 or 2 times a week	15,413	18.5%		
4	Yes, 3 or 4 times a week	9,300	11.2%		
5	Yes, 5 or more times a week	6,492	7.8%		
	Missing	524	0.6%		
		83,266			

F38 Did you have trouble getting back to sleep

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you have trouble getting back to sleep after you woke up too early?

Vari	able # 110			Usage Notes	: none
Sas	Name: BACKSLP				
Sas	Label: Have trouble getting back to	sleep		Categories:	Lifestyle: Sleep
Valu	es	N	%		
1	No, not in past 4 weeks	38,438	46.2%		
2	Yes, less than once a week	16,998	20.4%		
3	Yes 1 or 2 times a week	14,029	16.8%		
4	Yes, 3 or 4 times a week	7,923	9.5%		
5	Yes, 5 or more times a week	5,264	6.3%		
	Missing	614	0.7%		
		83,266			

F38 Did you snore

These next questions are about your sleep habits. Please mark one of the answers for each of the following questions. Pick the answer that best describes how often you experienced the situation in the past 4 weeks. Did you snore?

Vari	able # 111	Usage Notes	Usage Notes: none			
Sas	Name: SNORE					
Sas	Label: Did you snore	Categories:	Lifestyle: Sleep			
Valu	les	Ν	%			
1	No, not in past 4 weeks	17,520	21.0%			
2	Yes, less than once a week	4,037	4.8%			
3	Yes 1 or 2 times a week	5,264	6.3%			
4	Yes, 3 or 4 times a week	4,054	4.9%			
5	Yes, 5 or more times a week	8,141	9.8%			
9	Don't know	43,794	52.6%			
	Missing	456	0.5%			
		83,266				

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F38 Typical night's sleep

Overall, was your typical night's sleep during the past 4 weeks:

Varia	able # 112			Usage Notes	: none
Sas I	Name: QUALSLP			• • •	
Sas I	Label: Typical night's sleep			Categories:	Lifestyle: Sleep
Value	es	Ν	%		
1	Very restless	1,964	2.4%		
2	Restless	11,798	14.2%		
3	Average quality	34,520	41.5%		
4	Sound or restful	23,316	28.0%		
5	Very sound or restful	11,355	13.6%		
	Missing	313	0.4%		
		83,266			

F38 How many hours of sleep

About how many hours of sleep did you get on a typical night during the past 4 weeks?

Varia	ble # 113	Usage Notes: none			
Sas N	lame: HRSSLP				
Sas L	abel: How many hours of sleep			Categories:	Lifestyle: Sleep
Value	95	Ν	%		
1	5 or less hours	7,052	8.5%		
2	6 hours	21,895	26.3%		
3	7 hours	30,731	36.9%		
4	8 hours	19,099	22.9%		
5	9 hours	3,721	4.5%		
6	10 or more hours	515	0.6%		
	Missing	253	0.3%		
		83,266			

F38 Ever leaked urine

Have you ever leaked even a very small amount of urine involuntarily and you couldn't control it?

Varia	able # 114			Usage Notes: none
	Name: INCONT Label: Ever leaked urine			Categories: Medical History: Incontinence
Valu	es	N	%	
0	No	21,434	25.7%	
1	Yes	61,294	73.6%	
	Missing	538	0.6%	
		83,266		

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F38 How often leaked urine

How often does this leaking urine occur? (Mark one oval.)

Variable # 115 Sas Name: FRQINCON Sas Label: How often leaked urine		Usage Notes:	: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied).		
				Categories:	Medical History: Incontinence
Valu	es	Ν	%		
1	Not once during past year	3,847	4.6%		
2	Less than once a month	18,087	21.7%		
3	More than once a month	15,438	18.5%		
4	One or more times a week	16,251	19.5%		
5	Daily	9,418	11.3%		
	Missing	20,225	24.3%		
		83,266			

F38 No longer leak urine

When do you usually leak urine? (Mark all that apply.) No longer leak urine

Variable # 116 Sas Name: NOINCON Sas Label: No longer leak urine				rule n	question of F38 V6 Q68 "Ever leaked urine" (skip pattern ot applied). ollected on all versions of Form 38.
				Categories: Medio	cal History: Incontinence
Value	es	N	%	-	
0	No	58,805	70.6%		
1	Yes	3,473	4.2%		
	Missing	20,988	25.2%		
		83,266			

F38 Leak urine when cough, laugh

When do you usually leak urine? (Mark all that apply.) When I cough, laugh, sneeze, lift, stand up. Or exercise

Sas N Sas L	Variable # 117 Sas Name: CGHINCON Sas Label: Leak urine when cough, laugh Values		Usage No N %		Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied). Not collected on all versions of Form 38.
0	No	27,875	33.5%	Categories:	Medical History: Incontinence
1	Yes	34,403	41.3%		
	Missing	20,988	988 25.2%		
		83,266			

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F38 Leak urine when can't get to toilet

Data File: f38_os_pub

When do you usually leak urine? (Mark all that apply.) When I feel the need to urinate and can't get to a toilet fast enough

Sas I	able # 118 Name: TOINCON Label: Leak urine when can't get to toilet		Usage Notes: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Values N %			Not collected on all versions of Form 38.
0	No 27,640	33.2%	Categories: Medical History: Incontinence
1	Yes 34,638	41.6%	
	Missing 20,988	25.2%	
	83,266		

F38 Leak urine when I am sleeping

When do you usually leak urine? (Mark all that apply.) When I sleep

Sas I Sas I	Variable # 119 Sas Name: SLPINCON Sas Label: Leak urine when I am sleeping Values				: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied). Not collected on all versions of Form 38.
Value			%	Catamaniaa	Medical Llistony Incentingnes
0	No	60,322	72.4%	Categories:	Medical History: Incontinence
1	Yes	1,956	2.3%		
	Missing	20,988	25.2%		
		83,266			

F38 When leak urine, Other

When do you usually leak urine? (Mark all that apply.) Other

Variable # 120 Sas Name: OTHINCON Sas Label: When leak urine, Other Values		N	, i i i i i i i i i i i i i i i i i i i	rı S rı	 s: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied). Not collected on all versions of Form 38.
0	No	59,792	71.8%	Categories: N	Medical History: Incontinence
1	Yes	2,486	3.0%		
	Missing	20,988	25.2%		
		83,266			

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F38 How much urine do you lose

How much urine do you usually lose when it leaks? (Mark one oval.)

Variable # 121 Sas Name: LEAKAMT Sas Label: How much urine do you lose				Usage Notes:	Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Value	s	Ν	%	Categories:	Medical History: Incontinence
1	None	571	0.7%		
2	Barely noticeable on underpants	44,991	54.0%		
3	Soaked underpants	11,455	13.8%		
4	Soaked through to outer clothing	2,020	2.4%		
	Missing	24,229	29.1%		
		83,266			

F38 Leak Protect/No protection

What protection do you wear in case you leak urine? (Mark all that apply.) None

Variable # 122 Sas Name: NOPRTCT Sas Label: Leak Protect/No protection		Usage		Usage Notes:	ge Notes: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).	
Value	es	Ν	%	Categories:	Medical History: Incontinence	
0	No	27,882	33.5%			
1	Yes	31,297	37.6%			
	Missing	24,087	28.9%			
		83,266				

F38 Leak Protect/Mini-pad, tissue

What protection do you wear in case you leak urine? (Mark all that apply.) Mini-pad, tissue or towel

Sas I	Variable # 123 Sas Name: MINIPAD Sas Label: Leak Protect/Mini-pad, tissue Values			rul	: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied). Medical History: Incontinence
Value			%		
0	No	38,597	46.4%		
1	Yes	20,582	24.7%		
	Missing		28.9%		
		83,266			

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F38 Leak Protect/Menstrual pad

What protection do you wear in case you leak urine? (Mark all that apply.) Menstrual pad or shield

Variable # 124 Sas Name: MENSPAD Sas Label: Leak Protecti/Menstrual pad				Usage Notes	s: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Value	Values		%	% Categories:	Medical History: Incontinence
0	No	52,845	63.5%		
1	Yes	6,334	7.6%		
	Missing	24,087	28.9%		
		83,266			

F38 Leak Protect/Diaper, Attends

What protection do you wear in case you leak urine? (Mark all that apply.) Diaper, towel, Attends, Depends

Sas N	Variable # 125 Sas Name: DIAPER Sas Label: Leak Protect/Diaper, Attends			Usage Notes:	Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Value	Values		%	Categories:	Medical History: Incontinence
0	No	56,891	68.3%		
1	Yes	2,288	2.7%		
	. Missing		28.9%		
		83,266			

F38 Leak Protect/Other

What protection do you wear in case you leak urine? (Mark all that apply.) Other

Variable # 126 Sas Name: OTHPRTCT Sas Label: Leak Protect/Other					: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Valu	es	N	%	Categories:	Medical History: Incontinence
0	No	58,049	69.7%		
1	Yes	1,130	1.4%		
	Missing	24,087	28.9%		
		83,266			

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F38 How often does leakage limit activities

How often does the leakage of urine limit your daily activities? (Mark one oval.)

Variable # 127 Sas Name: INCONLMT Sas Label: How often does leakage limit activities				Usage Notes:	: Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied). Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Value	ů	N	%	Categories:	Medical History: Incontinence
1	Never	43,816	52.6%	_	
2	Almost never	10,746	12.9%		
3	Sometimes	3,573	4.3%		
4	Fairly often	764	0.9%		
5	Very often	311	0.4%		
	Missing	24,056	28.9%		
		83,266			

F38 How much does leakage bother you

How much does the leakage of urine bother or disturb you? (Mark one oval.)

Variable # 128 Sas Name: INCONDIS				Usage Notes:	Sub-question of F38 V6 Q68 "Ever leaked urine" (skip pattern rule not applied).
	Sas Label: How much does leakage bother				Sub-question of F38 V6 Q70 "No longer leak urine" (skip pattern rule not applied).
Value	s	Ν	%	Categories:	Medical History: Incontinence
1	Not at all disturbing	13,988	16.8%		
2	A little disturbing	27,726	33.3%		
3	Somewhat disturbing	10,823	13.0%		
4	Very disturbing	4,893	5.9%		
5	Extremely disturbing	1,751	2.1%		
	Missing	24,085	28.9%		
		83,266			

F38 Currently married or intimate

Are you currently married or in an intimate relationship with at least one person?

Variable # 129 Sas Name: MARRIED		Usage Notes: none			
			Categories:	Lifestyle: Sexual Activity	
	Sas Label: Currently married or intimate Values		N %		
0	No	29,722	35.7%		
1	Yes	53,180	63.9%		
	Missing	364	0.4%		
		83,266			

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F38 Sexual activity in last year

Did you have any sexual activity with a partner in the last year?

Vari	able # 130		Usage Notes: none			
Sas	Name: SEXACTIV					
Sas	Label: Sexual activity in last year			Categories:	Lifestyle: Sexual Activity	
Valu	les	Ν	%			
0	No	40,610	48.8%			
1	Yes	38,538	46.3%			
9	Don't want to answer	3,728	4.5%			
	Missing	390	0.5%			
		83,266				

F38 How satisfied sexually

How satisfied are you with your current sexual activities, either with a partner or alone? (Mark one oval.)

Vari	iable # 131			Usage Notes: none			
Sas	Name: SATSEX						
Sas	Label: How satisfied sexually			Categories:	Lifestyle: Sexual Activity		
Valu	les	Ν	%				
1	Very unsatisfied	9,325	11.2%				
2	A little unsatisfied	11,393	13.7%				
3	Somewhat satisfied	18,043	21.7%				
4	Very satisfied	26,286	31.6%				
9	Don't want to answer	15,887	19.1%				
	Missing	2,332	2.8%				
		83,266					

F38 Satisfied with sex frequency

Are you satisfied with the frequency of your sexual activity, or would you like to have sex more or less often? (Mark one oval.)

Vari	able # 132			Usage Notes	Usage Notes: none			
Sas	Name: SATFRQSX			Cotomoriaa				
Sas	Label: Satisfied with sex frequency			Categories:	Lifestyle: Sexual Activity			
Valu	les	Ν	%					
1	Less often	2,763	3.3%					
2	Satisfied with current frequency	36,957	44.4%					
3	More often	20,103	24.1%					
9	Don't want to answer	20,392	24.5%					
	Missing	3,051	3.7%					
		83,266						

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F38 Worried sexual activity will affect health

Are you worried that sexual activities will affect your health? (Mark one oval.)

Vari	able # 133			Usage Notes: none		
Sas	Name: SEXWORRY		Categories:	Lifestular Council Astivity		
Sas	Label: Worried sex activity will a	ffect healh		Categories.	Lifestyle: Sexual Activity	
Valu	es	Ν	%			
1	Not at all worried	68,950	82.8%			
2	A little worried	2,431	2.9%			
3	Somewhat worried	1,233	1.5%			
4	Very worried	463	0.6%			
9	Don't want to answer	8,473	10.2%			
	Missing	1,716	2.1%			
		83,266				

Activities of daily living construct

Computed from Forms 36/38, questions 39-42. Source: WHI BAC. Four items describing basic activities (whether can eat, dress, get in and out of bed, and take a bath) each of which has three possible values (1=without help, 2=some help, 3=completely unable) are summed. A lower score indicates greater ability to cope with daily living activities. Missing if any of the four items are missing.

Variable #	134				Usage Notes: none		
Sas Name:	ACTDLY				Categories:	Computed Variables Psychosocial/Behavioral	
Sas Label:	Activities of Da	aily Living C	onstruct				
Ν	Min	Max	Mean	Std Dev			
82734	4	12	4.04462	.3328			

Role limitations due to emotional problems

Computed from Form 36/38, questions 22, 23, and 24. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on role limitations due to emotional problems. EMOLIMIT ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	135				Usage Notes: none		
Sas Name:	EMOLIMIT				Categories:	Computed Variables Psychosocial/Behavioral	
Sas Label:	Role limitation of	due to emo	otional problem	า			
Ν	Min	Мах	Mean	Std Dev			
82329	0	100	83.15458	31.12608			

Emotional well-being

Computed from Form 36/38, questions 31, 32, 33, 35, and 37. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on emotional well-being. EMOWELL ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	136				Usage Notes	: none
Sas Name:	EMOWELL					
Sas Label:	Emotional well-	-being			Categories:	Computed Variables Psychosocial/Behavioral
Ν	Min	Мах	Mean	Std Dev		
81971	0	100	79.87147	14.95193		

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Energy/fatigue

Computed from Form 36/38, questions 30, 34, 36, and 38. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on energy/fatigue. ENERFAT ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	137				Usage Notes	none
Sas Name:	ENERFAT					
Sas Label:	Energy/fatigue				Categories:	Computed Variables Psychosocial/Behavioral
N	Min	Max	Mean	Std Dev		
82123	0	100	63.05523	20.4681		

General health construct

Computed from Form 36/38, questions 3, 25, 26, 27, and 28. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on general health. GENHLTH ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	138				Usage Notes: none		
Sas Name:	GENHLTH						
Sas Label:	General health	construct			Categories:	Computed Variables Psychosocial/Behavioral	
N	Min	Max	Mean	Std Dev			
82077	0	100	72.26178	18.84144			

Life event construct #1 (0,1 scoring)

Computed from Form 36/38, questions 44.1, and 45-54. Source: WHI BAC; based on measures used in the Alameda County Study and BHAT. The eleven items are recoded, setting original responses from 1-3 equal to 1, and then summed. The construct has a range from 0 to 11 with a higher score indicating a greater number of life events. Missing if any of the eleven items are missing.

Variable #	139				Usage Notes: none		
Sas Name:	LFEVENT1					Computed Variables Psychosocial/Behavioral	
Sas Label:	Life event cons	truct #1 (0,	1 scoring)				
Ν	Min	Max	Mean	Std Dev			
81414	0	11	1.38475	1.2952			

Life event construct #2 (0-3 scoring)

Computed from Form 36/38, question questions 44.1, and 45-54. Source: WHI BAC; based on measures used in the Alameda County Study and BHAT. This construct is a sum of the eleven items that are coded from 0-3 resulting in a range from 0 to 33 with a higher score indicating a greater number of life events. If any of the eleven items are missing, LFEVENT2 is set to missing.

Variable #	140			Usage Notes: none		
Sas Name:	LFEVENT2					
Sas Label:	Life event const	truct #2 (0-	3 scoring)	Categories:	Computed Variables Psychosocial/Behavioral	
Ν	Min	Max	Mean	Std Dev		
81414	0	30	2.68347	2.84323		

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Pain construct

Computed from Form 36/38, questions 16 and 17. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on pain. PAIN ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	141				Usage Notes	none
Sas Name:	PAIN					•
Sas Label:	Pain construct				Categories:	Computed Variables Psychosocial/Behavioral
Ν	Min	Max	Mean	Std Dev		
82983	0	100	72.11522	24.71257		

Role limitations due to physical health

Computed from Form 36/38, questions 18-21. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on role limitations due to physical health. PHYLIMIT ranges from 0 to 100 with a higher score indicating a more favorable health state.

Vari	iable #	142				Usage Notes: none			
Sas	Name:	PHYLIMIT				Categories:	Computed Variables Psychosocial/Behavioral		
Sas	Label:	Role limitations	due to phy	ysical health					
	Ν	Min	Max	Mean	Std Dev				
82	2212	0	100	69.46948	38.39481				

Physical functioning construct

Computed from Form 36/38, questions 5-14. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on physical functioning. PHYSFUN ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	143				Usage Notes: none		
Sas Name:	PHYSFUN					Computed Variables Physical Activity Psychosocial/Behavioral	
Sas Label:	Physical functio	ning const	truct		Categories:		
N	Min	Max	Mean	Std Dev			
81579	0	100	77.72153	22.78922			

Shortened CES-D/DIS screening instrument

Computed from Form 36/38, questions 55.1-55.6, 56, 57, and 57.1. Source: Center for Epidemiological Studies; depression scale (CES-D, short form). PSHTDEP ranges from 0 to 1 with a higher score indicating a greater likelihood of depression. Cutoff values of .06 and .009 have been used to indicate depression.

Variable #	144				Usage Notes: none			
Sas Name:	PSHTDEP							
Sas Label:	Shortened CE	S-D/DIS scre	ening instrun	nent	Categories:	Computed Variables Psychosocial/Behavioral		
N	Min Max Mean Std Dev							
81026	.00028	.95938	.03808	.1276				

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Sleep disturbance construct

Computed from Form 36/38, questions 61-64 and 66. Sum of five components. Questions 61-64 range from 1-5 and question 66 is recoded and reverse coded resulting in a range from 0-4 before summing. The summary score ranges from 0 to 20 where a higher score indicates greater sleep disturbance. Missing if any of the five components is missing.

Variable #	145				Usage Notes	Usage Notes: none			
Sas Name:	SLPDSTRB					-			
Sas Label:	Sleep disturban	ice constru	ct		Categories:	Computed Variables Lifestyle: Sleep			
Ν	Min	Max	Mean	Std Dev					
81531	0	20	6.83991	4.55441					

Social functioning

Computed from Form 36/38, questions 15 and 29. Source: Rand 36-Item Health Survey (SF-36). Quality of life subscale on social functioning. SOCFUNC ranges from 0 to 100 with a higher score indicating a more favorable health state.

Variable #	146				Usage Notes	Usage Notes: none			
Sas Name:	SOCFUNC								
Sas Label:	Social functionir	ıg			Categories:	Computed Variables Psychosocial/Behavioral			
Ν	Min	Max	Mean	Std Dev					
82775	0	100	87.49079	20.50341					

Symptom construct

Computed from Form 36/38, questions 43.1-43.34. Source: PEPI, national and other surveys. Average of 34 items measuring occurrence and severity of symptoms. The summary score ranges from 0 to 3 where a higher score indicates more numerous and/or more severe symptoms. Missing if any of the 34 items is missing.

Variable #	147				Usage Notes: none			
Sas Name:	SYMPTOM							
Sas Label:	Symptom cor	nstruct			Categories:	Computed Variables Psychosocial/Behavioral		
N	Min	Max	Mean	Std Dev				
76434	0	2.76471	.45843	.28702				