

# Glioma Data Dictionary

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## Document Summary

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# Glioma: Data Dictionary

## Section 1: Identifiers

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Variable	Label	Description	Format Text
<b>build</b>	Build	Masterfile build date.	Char, 30
<b>plco_id</b>	PLCO ID	PLCO ID	Char, 8
<b>build_cancers</b>	Build Cancer Cohort	The source of the cancer incidence data.	1="Trial Only"
<b>build_death_cutoff</b>	Build Death Cutoff		4="Deaths through 2018"
<b>build_incidence_cutoff</b>	Build Incidence Cutoff	The censoring cutoff for cancer incidence data associated with the dataset.	1="Cancer Incidence Data Through 2009"

## Section 2: Study

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Variable	Label	Description	Format Text
<b>ph_glio_trial</b>	Trial Personal History of Glioma	Did the participant have a personal history of glioma prior to trial entry?	0="No" 1="Yes" 9="Unknown"
<b>ph_any_trial</b>	Trial Personal History of Any Cancer	Did the participant have a personal history of any cancer prior to trial entry?	0="No" 1="Yes" 9="Unknown"
<b>in_tgwas_population</b>	In Total GWAS Population	Final denominator of Total GWAS population	0="No" 1="Yes"

## Section 3: BQ Eligibility

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Variable	Label	Description	Format Text
<b>glio_eligible_bq</b>	BQ Glioma Analysis: Eligible?	Flagged participants must have completed a valid questionnaire, had no history of glioma prior to the trial or the questionnaire, and had time at risk for their first cancer following the questionnaire.	0="No" 1="Yes"
<b>entryage_bq</b>	BQ Analysis Entry Age	Age at BQ analysis entry.	Numeric .F="No Form"
<b>entrydays_bq</b>	BQ Analysis Entry Days	Days from the date of randomization until the participant has been randomized and completed the BQ.	Numeric .F="No Form"
<b>ph_glio_bq</b>	BQ Analysis Personal History of Glioma	Did the participant have a personal history of glioma prior to BQ analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"
<b>ph_any_bq</b>	BQ Analysis Personal History of Any Cancer	Did the participant have a personal history of any cancer prior to BQ analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"

## Section 4: DHQ Eligibility

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Variable	Label	Description	Format Text
<b>glio_eligible_dhq</b>	DHQ Glioma Analysis: Eligible?	Flagged participants must have completed a valid questionnaire, had no history of cancer prior to the trial or the questionnaire, and had time at risk for their first cancer following the questionnaire.	0="No" 1="Yes"
<b>entryage_dhq</b>	DHQ Analysis Entry Age	Age at DHQ analysis entry.	Numeric .F="No Form" .M="Missing"
<b>entrydays_dhq</b>	DHQ Analysis Entry Days	Days from the date of randomization until participant has been randomized and completed the BQ and DHQ.	Numeric .F="No Form" .M="Missing"
<b>ph_glio_dhq</b>	DHQ Analysis Personal History of Glioma	Did the participant have a personal history of glioma prior to DHQ analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"
<b>ph_any_dhq</b>	DHQ Analysis Personal History of Any Cancer	Did the participant have a personal history of any cancer prior to DHQ analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"

## Section 5: DQX Eligibility

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Variable	Label	Description	Format Text
<b>glio_eligible_dqx</b>	DQX Glioma Analysis: Eligible?	Flagged participants must have completed a valid questionnaire, had no history of cancer prior to the trial or the questionnaire, and had time at risk for their first cancer following the questionnaire.	0="No" 1="Yes"
<b>entryage_dqx</b>	DQX Analysis Entry Age	Age at DQX analysis entry.	Numeric .F="No Form" .M="Missing"
<b>entrydays_dqx</b>	DQX Analysis Entry Days	Days from the date of randomization until participant has been randomized and completed the BQ and DQX.	Numeric .F="No Form" .M="Missing"
<b>ph_glio_dqx</b>	DQX Analysis Personal History of Glioma	Did the participant have a personal history of glioma prior to DQX analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"
<b>ph_any_dqx</b>	DQX Analysis Personal History of Any Cancer	Did the participant have a personal history of any cancer prior to DQX analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"



## Section 6: SQX Eligibility

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Variable	Label	Description	Format Text
<b>glio_eligible_sqx</b>	SQX Glioma Analysis: Eligible?	Flagged participants must have completed a valid questionnaire, had no history of glioma prior to the trial or the questionnaire, and had time at risk for their first cancer following the questionnaire.	0="No" 1="Yes"
<b>entryage_sqx</b>	SQX Analysis Entry Age	Age at SQX analysis entry.	Numeric .F="No Form"
<b>entrydays_sqx</b>	SQX Analysis Entry Days	Days from the date of randomization until the participant has been randomized and completed the BQ and SQX.	Numeric .F="No Form"
<b>ph_glio_sqx</b>	SQX Analysis Personal History of Glioma	Did the participant have a personal history of glioma prior to SQX analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"
<b>ph_any_sqx</b>	SQX Analysis Personal History of Any Cancer	Did the participant have a personal history of any cancer prior to SQX analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"

## Section 7: MUQ Eligibility

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Variable	Label	Description	Format Text
<b>entryage_muq</b>	MUQ Analysis Entry Age	Age at MUQ analysis entry.	Numeric .F="No Form"
<b>entrydays_muq</b>	MUQ Analysis Entry Days	Days from the date of randomization until the participant has been randomized and completed the BQ and MUQ.	Numeric .F="No Form"
<b>ph_glio_muq</b>	MUQ Analysis Personal History of Glioma	Did the participant have a personal history of glioma prior to MUQ analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"
<b>ph_any_muq</b>	MUQ Analysis Personal History of Any Cancer	Did the participant have a personal history of any cancer prior to MUQ analysis entry?	.F="No Form" 0="No" 1="Yes" 9="Unknown"

## Section 8: Exit

Variable	Label	Description	Format Text
<b>fstcan_exitstat</b>	First Cancer Incidence Exit Status	Status of the participant at exit for first cancer incidence.  Only cancers occurring during the trial are used to determine exit.	0="No Time at Risk" 1="Confirmed Cancer" 3="Last Participant Contact Prior to Unconfirmed Report" 4="Last Participant Contact" 5="Death" 6="Date Lost, Prior to Death" 8="Cancer Free at Cutoff" 9="Post-2009 Death, Exit At 12/31/09"
<b>glio_exitstat</b>	Glioma Incidence Exit Status	Status of the participant at exit for glioma incidence.	0="No Time at Risk" 1="Confirmed Cancer" 3="Last Participant Contact Prior to Unconfirmed Report" 4="Last Participant Contact" 5="Death" 6="Date Lost, Prior to Death" 8="Cancer Free at Cutoff" 9="Post-2009 Death, Exit At 12/31/09"
<b>fstcan_exitdays</b>	Days Until First Cancer Incidence Exit	Days from trial entry (randomization) to first cancer diagnosis for participants with cancer, or to trial exit otherwise.  Only cancers occurring during the trial are used to determine exit.	Numeric
<b>glio_exitdays</b>	Days Until Glioma Incidence Exit	Days from trial entry (randomization) to cancer diagnosis for participants with glioma, or to trial exit otherwise.	Numeric
<b>fstcan_exitage</b>	First Cancer Incidence Exit Age	Age of participant at exit for first cancer incidence. This is age at diagnosis for participants with cancer and age at trial exit otherwise.  Only cancers occurring during the trial are used to determine exit.	Numeric
<b>glio_exitage</b>	Glioma Incidence Exit Age	Age of participant at exit for glioma incidence. This is age at diagnosis for participants with glioma and age at trial exit otherwise.	Numeric
<b>mortality_exitstat</b>	Exit Status for Mortality	Status of the participant at mortality exit.  For participants not confirmed dead, this is the most recent contact or NDI search indicating the participant is alive.	1="Death" 2="Last NDI/Cutoff" 3="Refusal" 4="Other"

Variable	Label	Description	Format Text
<b>mortality_exitdays</b>	Days Until Mortality Exit	Days from randomization until mortality exit date.  This is the day of death or the day last known alive. Participants are known alive through either trial contact or by queries to NDI.	Numeric
<b>mortality_exitage</b>	Exit Age for Mortality	Age of the participant at death, or when last known to be alive.	Numeric

## Section 9: Demographics at Trial Entry

Variable	Label	Description	Format Text
<b>age</b>	Age At Randomization	Age at trial entry, computed from date of birth and randomization date.	Numeric
<b>agelevel</b>	Age At Randomization	Categorical version of age, created from the derived age variable.	0="≤ 59" 1="60-64" 2="65-69" 3="≥ 70"
<b>arm</b>	Randomization Arm	Randomization group or arm. The intervention (screening) group or the control (usual-care) group.	1="Intervention" 2="Control"
<b>center</b>	Study Center	The study center at which the participant was randomized.	1="University of Colorado" 2="Georgetown University" 3="Pacific Health Research and Education Institute (Honolulu)" 4="Henry Ford Health System" 5="University of Minnesota" 6="Washington University in St Louis" 8="University of Pittsburgh" 9="University of Utah" 10="Marshfield Clinic Research Foundation" 11="University of Alabama at Birmingham"
<b>rndyear</b>	Year Of Randomization	Calendar year of trial entry, at which point the participant was randomized into an arm.	Numeric
<b>sex</b>	Sex	Sex of the participant.	1="Male" 2="Female"

## Section 10: Re-consent

Variable	Label	Description	Format Text
<b>reconsent_outcome</b>	Outcome of the Re-Consent Process	<p>The immediate result of the attempt to transfer the participant to centralized follow-up.</p> <p>Participants alive at trial close-out were informed of the transfer to centralized follow-up, and could request/refuse continued follow-up. In the absence of participant contact, the re-consent outcome was determined by default. The default outcome varied by study center.</p> <p>Active: Transferred to centralized follow-up, including continued contact, state registry query and NDI search.            Passive: No active contact, but allows for state registry query and NDI search.            Lost: Lost to follow-up and not known dead before re-consent. Considered passive at the time of re-consent.            Refused: Declined further follow-up.            Confirmed/Presumed Dead: Death prior to opportunity to re-consent.</p>	1="Active by Request" 2="Active by Default/Follow-up" 3="Passive by Request" 4="Passive by Default/Follow-up" 5="Refused by Request" 6="Refused by Default/Follow-up" 11="Refused Prior to Re-Consent" 12="Confirmed Dead Prior to Re-Consent" 13="Presumed Dead Prior to Re-Consent" 14="Passive, Lost Prior to Re-Consent"
<b>reconsent_outcome_days</b>	Days Until Re-Consent Outcome is Determined	<p>Days from randomization until the participant's re-consent outcome is determined.</p> <p>For participants who re-consented by request or refused by request, this is the time of request. For participants whose transfer status was determined by default, this is an estimated time of request had there been contact. If the participant had refused or died prior to re-consent, this is the time of those events.</p>	Numeric

## Section 11: Cancer Diagnosis

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Variable	Label	Description	Format Text
<b>glio_cancer</b>	Confirmed Glioma?	Does the participant have confirmed primary glioma diagnosed during the trial?	0="No Confirmed Cancer" 1="Confirmed Cancer"
<b>glio_cancer_diagdays</b>	Glioma Confirmed Cancer Diagnosis Days		Numeric .N="Not Applicable"
<b>glio_cancer_first</b>	Was Glioma the First Diagnosed Cancer?	Among all of a participant's cancers diagnosed during the trial, was glioma the earliest?	.N="Not Applicable" 0="No" 1="Yes"
<b>glio_annyr</b>	Anniversary year of diagnosis	The glioma cancer anniversary year. If the participant has no cancer, this is set to .N.	Numeric .N="Not Applicable"

## Section 12: Cancer Characteristics

Variable	Label	Description	Format Text
<b>glio_type</b>	Glioma Type	Classificaiton of cancer as a glioma or another cancer.	.N="Not Applicable" 1="Glioma" 2="Other Brain or Spinal Cord Cancer"
<b>glio_behavior</b>	Glioma Behavior (ICD-O-2)		.N="Not Applicable" 1="Uncertain, Borderline, or LMP" 3="Malignant, Primary Site"
<b>glio_grade</b>	Glioma Grade (ICD-O-2)		.N="Not Applicable" 1="Well Differentiated; Grade I" 2="Moderately Differentiated; Grade II" 3="Poorly Differentiated; Grade III" 4="Undifferentiated; Grade IV" 9="Not Determined/Stated/Applicable"
<b>glio_morphology</b>	Glioma Morphology (ICD-O-2)		See ICD-O-2 Documentation .N="Not Applicable"
<b>glio_topography</b>	Glioma Topography (ICD-O-2)		"C700"="Cerebral meninges" "C710"="Cerebrum" "C711"="Frontal lobe" "C712"="Temporal lobe" "C713"="Parietal lobe" "C714"="Occipital lobe" "C716"="Cerebellum, NOS" "C717"="Brain stem" "C718"="Overlapping lesion of brain" "C719"="Brain, NOS" "C720"="Spinal cord" "C723"="Optic nerve" "C728"="Overlapping lesion of brain and central nervous system"
<b>glio_seer</b>	Glioma Seer	SEER classification of the cancer.	.N="N/A" 31010="Brain" 31040="Cranial Nerves Other Nervous System"
<b>glio_seercat</b>	Glioma Seercat	Categorical SEER classification of the cancer.	.N="Not Applicable" 22="Brain and Other Nervous System"



## Section 13: Mortality Status

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Variable	Label	Description	Format Text
<b>is_dead</b>	Dead?	Is the participant confirmed dead?	0="Not Confirmed Dead" 1="Dead"
<b>is_dead_with_cod</b>	Dead With Known Cause?	Is the participant confirmed dead with known cause of death?	0="Not Confirmed Dead" 1="Dead"
<b>dth_days</b>	Days Until Death	Days from randomization until date of death.	Numeric .N="Not applicable"

## Section 14: Death Certificate Cause of Death

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Variable	Label	Description	Format Text
<b>d_seer_death</b>	Underlying Cause of Death	<p>Underlying cause of death.</p> <p>This is a grouping of ICD-9 codes for underlying causes of death from the death certificate. This grouping is based on the SEER cause of death recode format, with some modifications.</p>	<p>.F="No Form"  .N="Not Applicable"  1="Prostate"  2="Lung"  3="Colon"  4="Ovarian"  5="Peritoneal"  6="Fallopian Tube"  11="Pancreas"  12="Melanoma of the Skin"  13="Bladder"  14="Breast"  15="Hematopoietic"  16="Endometrial"  17="Glioma"  18="Renal"  19="Thyroid"  20="Head and Neck"  21="Liver"  23="Upper-Gastrointestinal"  24="Biliary"  25="Male Breast"  21030="Small Intestine"  21042="Colon: Appendix"  21049="Colon: Large Intestine, NOS"  21060="Anus, Anal Canal, and Anorectum"  21110="Retroperitoneum"  21120="Peritoneum, Omentum and Mesentary"  21130="Other Digestive Organs"  22030="Lung and Bronchus"  22050="Pleura"  22060="Trachea, Mediastinum and Other Resp Organs"</p> <p>[continued...]</p>

Variable	Label	Description	Format Text
<p data-bbox="94 321 246 348">[...continued]</p> <p data-bbox="94 375 250 403"><b>d_seer_death</b></p>			<p data-bbox="1162 321 1299 348">[...continued]</p> <p data-bbox="1162 375 1479 403">23000="Bones and Joints"</p> <p data-bbox="1162 405 1471 457">24000="Soft Tissue including Heart"</p> <p data-bbox="1162 459 1468 512">25020="Other Non-Epithelial Skin"</p> <p data-bbox="1162 514 1382 541">27010="Cervix Uteri"</p> <p data-bbox="1162 543 1333 571">27050="Vagina"</p> <p data-bbox="1162 573 1317 600">27060="Vulva"</p> <p data-bbox="1162 602 1479 655">27070="Other Female Genital Organs"</p> <p data-bbox="1162 657 1317 684">28020="Testis"</p> <p data-bbox="1162 686 1317 714">28030="Penis"</p> <p data-bbox="1162 716 1451 768">28040="Other Male Genital Organs"</p> <p data-bbox="1162 770 1317 798">29030="Ureter"</p> <p data-bbox="1162 800 1487 827">29040="Other Urinary Organs"</p> <p data-bbox="1162 829 1398 856">30000="Eye and Orbit"</p> <p data-bbox="1162 858 1528 911">32020="Other Endocrine including Thymus"</p> <p data-bbox="1162 913 1406 940">37000="Miscellaneous"</p> <p data-bbox="1162 942 1471 995">38000="In situ, benign or unknown behavior neoplasm"</p> <p data-bbox="1162 997 1373 1024">50030="Septicemia"</p> <p data-bbox="1162 1026 1468 1079">50040="Other Infectious and Parasitic Diseases"</p> <p data-bbox="1162 1081 1438 1108">50050="Diabetes Mellitus"</p> <p data-bbox="1162 1110 1373 1138">50051="Alzheimers"</p> <p data-bbox="1162 1140 1446 1167">50060="Diseases of Heart"</p> <p data-bbox="1162 1169 1471 1222">50070="Hypertension without Heart Disease"</p> <p data-bbox="1162 1224 1422 1276">50080="Cerebrovascular Diseases"</p> <p data-bbox="1162 1278 1422 1306">50090="Atherosclerosis"</p> <p data-bbox="1162 1308 1471 1360">50100="Aortic Aneurysm and Dissection"</p> <p data-bbox="1162 1362 1487 1415">50110="Other Diseases of Arteries, Arterioles, Capillaries"</p> <p data-bbox="1162 1417 1292 1444">[continued...]</p>

Variable	Label	Description	Format Text
<p>[...continued]</p> <p><b>d_seer_death</b></p>			<p>[...continued]</p> <p>50120="Pneumonia and Influenza"</p> <p>50130="Chronic Obstructive Pulmonary Disease and Allied Cond."</p> <p>50140="Stomach and Duodenal Ulcers"</p> <p>50150="Chronic Liver Disease and Cirrhosis"</p> <p>50160="Nephritis, Nephrotic Syndrome and Nephrosis"</p> <p>50180="Congenital Anomalies"</p> <p>50200="Symptoms, Signs and Ill-Defined Conditions"</p> <p>50300="Other death"</p> <p>60000="Unnatural Death"</p> <p>60001="All other endocrine and metabolic diseases and immunity disorders"</p> <p>60002="All other diseases of blood and blood-forming organs"</p> <p>60003="Senile and presenile organic psychotic conditions"</p> <p>60004="All other psychoses"</p> <p>60005="Parkinsons disease"</p> <p>60006="Other hereditary and degenerative diseases of the central nervous system"</p> <p>60007="Other diseases of the nervous system"</p> <p>60008="Pneumoconioses and other lung diseases due to external agents"</p> <p>60009="All other diseases of respiratory system"</p> <p>[continued...]</p>

Variable	Label	Description	Format Text
<b>[...continued]</b> <b>d_seer_death</b>			[...continued]  60010="All other noninfective gastroenteritis and colitis" 60011="All other diseases of digestive system" 60012="All other diseases of urinary system"
<b>d_cancersite</b>	Death Certificate Cause of Death (From Cancer)	Underlying cause of death from cancer.  This is a grouping of ICD-9 codes from the death certificate underlying cause of death. This grouping is based on the PLCO trial cancers of interest.	.F="No Form" .N="Not Dead" 1="Prostate" 2="Lung" 3="Colorectal" 4="Ovarian, Peritoneal, and Fallopian Tube" 11="Pancreas" 12="Melanoma of the Skin" 13="Bladder" 14="Breast" 15="Hematopoietic" 16="Endometrial" 17="Glioma" 18="Renal" 19="Thyroid" 20="Head and Neck" 21="Liver" 23="Upper-Gastrointestinal" 24="Biliary" 25="Male Breast" 99="Other Cancer" 999="Not Cancer"
<b>d_dth_glio</b>	Is Glioma The Underlying Cause Of Death?	Is glioma the underlying cause of death? This conclusion is based on the information from the death certificate.	0="No" 1="Yes"
<b>d_codeath_cat</b>	Cause of Death from Death Certificate	Categorized underlying cause of death.  This is a grouping of ICD-9 codes from the death certificate underlying cause of death. This grouping is based on official trial definitions for PLCO cancers and standard ICD-9 groupings for other causes of death. The PLCO trial assesses the ICD-9 code of 185XX as prostate cancer, 162XX as lung cancer, 153XX-154XX (except 1535X) as colorectal cancer, and 183XX as ovarian cancer.	.F="No Form" .N="Not applicable" 1="Prostate" 2="Lung" 3="Colorectal" 4="Ovarian" 5="Peritoneal" 6="Fallopian Tube" 100="Non-PLCO Neoplasms" 200="Ischemic Heart Disease" 300="Cerebrovascular Accident" 400="Other Circulatory Disease" 500="Respiratory Illness" 600="Digestive Disease" 700="Infectious Disease" 800="Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders" 900="Diseases of the Nervous System" 1000="Accident" 1100="Other"

## Section 15: Final Cause of Death

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Variable	Label	Description	Format Text
<b>f_seer_death</b>	Final Underlying Cause of Death	<p>Underlying cause of death.</p> <p>This is a grouping of ICD-9 codes for underlying causes of death from the death certificate and death review. This grouping is based on the SEER cause of death recode format, with some modifications.</p>	<p>.F="No Form"  .M="Missing"  .N="Not Applicable"  1="Prostate"  2="Lung"  3="Colon"  4="Ovarian"  5="Peritoneal"  6="Fallopian Tube"  11="Pancreas"  12="Melanoma of the Skin"  13="Bladder"  14="Breast"  15="Hematopoietic"  16="Endometrial"  17="Glioma"  18="Renal"  19="Thyroid"  20="Head and Neck"  21="Liver"  23="Upper-Gastrointestinal"  24="Biliary"  25="Male Breast"  21030="Small Intestine"  21042="Colon: Appendix"  21049="Colon: Large Intestine, NOS"  21060="Anus, Anal Canal, and Anorectum"  21110="Retroperitoneum"  21120="Peritoneum, Omentum and Mesentary"  21130="Other Digestive Organs"  22030="Lung and Bronchus"  22050="Pleura"  22060="Trachea, Mediastinum"</p> <p>[continued...]</p>

Variable	Label	Description	Format Text
[...continued] f_seer_death			[...continued] and Other Resp Organs" 23000="Bones and Joints" 24000="Soft Tissue including Heart" 25020="Other Non-Epithelial Skin" 27010="Cervix Uteri" 27050="Vagina" 27060="Vulva" 27070="Other Female Genital Organs" 28020="Testis" 28030="Penis" 28040="Other Male Genital Organs" 29030="Ureter" 29040="Other Urinary Organs" 30000="Eye and Orbit" 32020="Other Endocrine including Thymus" 37000="Miscellaneous" 38000="In situ, benign or unknown behavior neoplasm" 50030="Septicemia" 50040="Other Infectious and Parasitic Diseases" 50050="Diabetes Mellitus" 50051="Alzheimers" 50060="Diseases of Heart" 50070="Hypertension without Heart Disease" 50080="Cerebrovascular Diseases" 50090="Atherosclerosis" 50100="Aortic Aneurysm and Dissection" 50110="Other Diseases of  [continued...]

Variable	Label	Description	Format Text
<p>[...continued]</p> <p>f_seer_death</p>			<p>[...continued]</p> <p>Arteries, Arterioles, Capillaries"</p> <p>50120="Pneumonia and Influenza"</p> <p>50130="Chronic Obstructive Pulmonary Disease and Allied Cond."</p> <p>50140="Stomach and Duodenal Ulcers"</p> <p>50150="Chronic Liver Disease and Cirrhosis"</p> <p>50160="Nephritis, Nephrotic Syndrome and Nephrosis"</p> <p>50180="Congenital Anomalies"</p> <p>50200="Symptoms, Signs and Ill-Defined Conditions"</p> <p>50300="Other death"</p> <p>60000="Unnatural Death"</p> <p>60001="All other endocrine and metabolic diseases and immunity disorders"</p> <p>60002="All other diseases of blood and blood-forming organs"</p> <p>60003="Senile and presenile organic psychotic conditions"</p> <p>60004="All other psychoses"</p> <p>60005="Parkinsons disease"</p> <p>60006="Other hereditary and degenerative diseases of the central nervous system"</p> <p>60007="Other diseases of the nervous system"</p> <p>60008="Pneumoconioses and other lung diseases due to external agents"</p> <p>[continued...]</p>



Variable	Label	Description	Format Text
[...continued] f_seer_death			[...continued]  60009="All other diseases of respiratory system" 60010="All other noninfective gastroenteritis and colitis" 60011="All other diseases of digestive system" 60012="All other diseases of urinary system"
f_cancersite	Cause of Death (From Cancer)	Underlying cause of death from cancer.  This is a grouping of ICD-9 codes for underlying causes of death from the death certificate and death review. This grouping is based on the PLCO trial cancers of interest.	.F="No Form" .M="Missing" .N="Not Dead" 1="Prostate" 2="Lung" 3="Colorectal" 4="Ovarian, Peritoneal, and Fallopian Tube" 11="Pancreas" 12="Melanoma of the Skin" 13="Bladder" 14="Breast" 15="Hematopoietic" 16="Endometrial" 17="Glioma" 18="Renal" 19="Thyroid" 20="Head and Neck" 21="Liver" 23="Upper-Gastrointestinal" 24="Biliary" 25="Male Breast" 99="Other Cancer" 999="Not Cancer"
f_dth_glio	Is Glioma The Underlying Cause Of Death?	Is glioma the underlying cause of death? This conclusion is based on the information from the death certificate and death review.	0="No" 1="Yes"

Variable	Label	Description	Format Text
<b>f_codeath_cat</b>	Cause of Death	<p>Categorized underlying cause of death.</p> <p>This is a grouping of ICD-9 codes for underlying causes of death from the death certificate and death review. This grouping is based on official trial definitions for PLCO cancers and standard ICD-9 groupings for other causes of death. The PLCO trial assesses the ICD-9 code of 185XX as prostate cancer, 162XX as lung cancer, 153XX-154XX (except 1535X) as colorectal cancer, and 183XX as ovarian cancer.</p>	<p>.F="No Form"  .M="Missing"  .N="Not applicable"  1="Prostate"  2="Lung"  3="Colorectal"  4="Ovarian"  5="Peritoneal"  6="Fallopian Tube"  100="Non-PLCO Neoplasms"  200="Ischemic Heart Disease"  300="Cerebrovascular Accident"  400="Other Circulatory Disease"  500="Respiratory Illness"  600="Digestive Disease"  700="Infectious Disease"  800="Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders"  900="Diseases of the Nervous System"  1000="Accident"  1100="Other"</p>

## Section 16: BQ Compliance

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Variable	Label	Description	Format Text
<b>bq_returned</b>	Did the Participant Return the BQ?		0="No" 1="Yes"
<b>bq_age</b>	Age at BQ	Calculated from date of baseline questionnaire completion and date of birth.	Numeric .F="No Form"
<b>bq_compdays</b>	Days Until BQ Completion	Question M48, F63 - "What is the date you completed this questionnaire?"  The number of days between BQ completion and randomization.	Numeric .F="No Form"
<b>bq_adminm</b>	Method of Questionnaire Administration	Part of the section, For Office Use Only, headed "Method of Administration".	.F="No Form" .M="Not Answered" 1="Self" 2="Self With Assistance" 3="In-Person Interview By SC Staff" 4="In-Person Interview By Other" 5="Telephone"

## Section 17: BQ Demographics

Variable	Label	Description	Format Text
<b>race7</b>	Race	<p>BQ Form Versions 1 and 2: Question 2 - "Which of these best describes your race or ethnic background?"</p> <p>BQ Form Version 3: Question 2 - "Which of these groups best describes you?"</p> <p>Question 2a - "Are you of Hispanic origin?"</p> <p>Participants can only be considered white or black when they are not Hispanic. If the participant is white or black and Hispanic, then they are considered Hispanic. If the participant is Asian, Pacific Islander, or American Indian then they are considered that race.</p>	<p>1="White, Non-Hispanic"</p> <p>2="Black, Non-Hispanic"</p> <p>3="Hispanic"</p> <p>4="Asian"</p> <p>5="Pacific Islander"</p> <p>6="American Indian"</p> <p>7="Missing"</p>
<b>hispanic_f</b>	Are You Of Hispanic Origin?	<p>BQ Form Versions 1 and 2: Question 2.</p> <p>BQ Form Version 3: Question 2a.</p> <p>What is your race or ethnicity?</p>	<p>.F="No Form"</p> <p>.M="Not Answered"</p> <p>0="Not Hispanic"</p> <p>1="Hispanic"</p>
<b>educat</b>	Education	<p>Question 3 - "What is the highest grade or level of schooling you completed?"</p>	<p>.F="No Form"</p> <p>.M="Not Answered"</p> <p>1="Less Than 8 Years"</p> <p>2="8-11 Years"</p> <p>3="12 Years Or Completed High School"</p> <p>4="Post High School Training Other Than College"</p> <p>5="Some College"</p> <p>6="College Graduate"</p> <p>7="Postgraduate"</p>
<b>marital</b>	Marital Status	<p>Question 4 - "What is your current marital status?"</p>	<p>.F="No Form"</p> <p>.M="Not Answered"</p> <p>1="Married Or Living As Married"</p> <p>2="Widowed"</p> <p>3="Divorced"</p> <p>4="Separated"</p> <p>5="Never Married"</p>
<b>occupat</b>	Occupation	<p>Question 5 - "Which of these categories best describes your current working situation?"</p>	<p>.F="No Form"</p> <p>.M="Not Answered"</p> <p>1="Homemaker"</p> <p>2="Working"</p> <p>3="Unemployed"</p> <p>4="Retired"</p> <p>5="Extended Sick Leave"</p> <p>6="Disabled"</p> <p>7="Other"</p>

## Section 18: BQ Smoking

Variable	Label	Description	Format Text
<b>cig_stat</b>	Cigarette Smoking Status	Participant's current cigarette smoking status.	.A="Ambiguous" .F="No Form" .M="Not Answered" 0="Never Smoked Cigarettes" 1="Current Cigarette Smoker" 2="Former Cigarette Smoker"
<b>cig_stop</b>	# of Years Since Stopped Smoking Cigarettes	The number of years passed since the participant has stopped smoking.	Numeric .F="No Form" .M="Not Answered" .N="Not Applicable" 0.5="Six Months"
<b>cig_years</b>	Duration Smoked Cigarettes	The total number of years the participant smoked.	Numeric .F="No Form" .M="Not Answered" 0.5="Six Months"
<b>cigpd_f</b>	# of Cigarettes Smoked Per Day	Question 14 - "During periods when you smoked, how many cigarettes did or do you usually smoke per day?"	.F="No Form" .M="Not Answered" 0="0" 1="1-10" 2="11-20" 3="21-30" 4="31-40" 5="41-60" 6="61-80" 7="81+"
<b>pack_years</b>	Pack Years	Number of packs smoked per day * years smoked.	Numeric .F="No Form" .M="Missing"
<b>cigar</b>	Ever Smoked Cigars?	Question 17 - "Do you now or did you ever smoke cigars regularly for a year or longer?"	.F="No Form" .M="Not Answered" 0="Never" 1="Current Cigar Smoker" 2="Former Cigar Smoker"
<b>filtered_f</b>	Usually Filtered or Non-Filtered?	Question 15 - "During periods when you smoked, did or do you more often smoke filter or non-filter cigarettes?"	.F="No Form" .M="Not Answered" .N="Not Applicable" 1="Filter" 2="Non-Filter" 3="About Equal"
<b>pipe</b>	Ever Smoked a Pipe?	Question 16 - "Do you now or did you ever smoke a pipe regularly for a year or longer?"	.F="No Form" .M="Not Answered" 0="Never" 1="Current Pipe Smoker" 2="Former Pipe Smoker"
<b>rsmoker_f</b>	Smoke Regularly Now?	Question 12 - "Do you smoke cigarettes regularly now?"	.F="No Form" .M="Not Answered" .N="Not Applicable" 0="No" 1="Yes"

Variable	Label	Description	Format Text
<b>smokea_f</b>	Age Started Smoking	Question 11 - "At what age did you start smoking cigarettes regularly?"	Numeric .F="No Form" .M="Not Answered Or Inconsistent Data" .N="Not Applicable" .R="Age not in reasonable range."
<b>smoked_f</b>	Ever Smoke Regularly >= 6 Months?	Question 10 - "Have you ever smoked cigarettes regularly for six months or longer?"	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>ssmokea_f</b>	Age Stopped Smoking	Question 13 - "At what age did you last stop smoking cigarettes regularly?"	Numeric .F="No Form" .M="Not Answered Or Inconsistent Data" .N="Not Applicable" .R="Age not in reasonable range."

## Section 19: BQ Family History

Variable	Label	Description	Format Text
<b>fh_cancer</b>	Has Family History of Any Cancer?	Any first-degree relative with cancer. Basal cell skin cancers are not included. First-degree relatives include parents, full-siblings, and children. Half-siblings are not included.	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>glio_fh</b>	Family History of Glioma	Glioma family history in first-degree relatives. Includes parents, full-siblings, and children. Glioma includes brain and central nervous system cancer.	.F="No Form" .M="Missing" 0="No" 1="Yes, Immediate Family Member" 9="Possibly - Relative Or Cancer Type Not Clear"
<b>glio_fh_age</b>	Age of Youngest Relative with Glioma	Diagnosis age of the youngest first-degree relative diagnosed with glioma. Glioma includes brain and central nervous system cancer.	Numeric .A="Ambiguous" .F="No Form" .M="Missing" .N="Not Applicable" 0="< 1 Year"
<b>glio_fh_cnt</b>	# of Relatives with Glioma	The number of first-degree relatives with glioma. Glioma includes brain and central nervous system cancer.	Numeric .F="No Form" .M="Missing"
<b>brothers</b>	# of Brothers	Question 19 - "How many full and half-brothers do you have, both living and deceased?"  Participants who have more than seven brothers are collapsed into "7 or more."	.F="No Form" .M="Not Answered" 0="None" 1="One" 2="Two" 3="Three" 4="Four" 5="Five" 6="Six" 7="Seven Or More"
<b>sisters</b>	# of Sisters	Question 18 - "How many full and half-sisters do you have, both living and deceased?"  Participants with more than seven sisters are collapsed into "7 or more".	.F="No Form" .M="Not Answered" 0="None" 1="One" 2="Two" 3="Three" 4="Four" 5="Five" 6="Six" 7="Seven Or More"

## Section 20: BQ Body Type

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Variable	Label	Description	Format Text
<b>bmi_curc</b>	BMI at Baseline	This is the World Health Organization (WHO) standard categorization of BMI. BMI is considered out of range if any of the following occur: <ul style="list-style-type: none"> <li>- Weight is less than 60 pounds</li> <li>- Height is less than 48 inches</li> <li>- Height is greater than 78 inches for females</li> <li>- Height is greater than 84 inches for males</li> <li>- After BMI is calculated, BMI is less than 15</li> </ul>	.F="No Form" .M="Not Answered" .R="Height Or Weight Not In Reasonable Range" 1="0-18.5" 2="18.5-25" 3="25-30" 4="30+"
<b>bmi_curr</b>	BMI at Baseline	BMI is considered out of range if any of the following occur: <ul style="list-style-type: none"> <li>- Weight is less than 60 pounds</li> <li>- Height is less than 48 inches</li> <li>- Height is greater than 78 inches for females</li> <li>- Height is greater than 84 inches for males</li> <li>- After BMI is calculated, BMI is less than 15</li> </ul>	Numeric .F="No Form" .M="Not Answered" .R="Height Or Weight Not In Reasonable Range"
<b>height_f</b>	Height (inches)	Question 23 - "How tall are you?"  Height is considered out of range if any of the following occur: <ul style="list-style-type: none"> <li>- Height is less than 48 inches</li> <li>- Height is greater than 78 inches for females</li> <li>- Height is greater than 84 inches for males</li> <li>- After BMI is calculated, BMI is less than 15</li> </ul>	Numeric .F="No Form" .M="Missing" .R="Height Out Of Range"
<b>weight_f</b>	Weight (lbs) at Baseline	Question 22 - "What is or was your weight at these ages?"  Weights less than 60 pounds are out of range.	Numeric .F="No Form" .M="Missing" .R="Weight Out Of Range"
<b>bmi_20</b>	BMI at Age 20	BMI is considered out of range if any of the following occur: <ul style="list-style-type: none"> <li>- Weight is less than 60 pounds</li> <li>- Height is less than 48 inches</li> <li>- Height is greater than 78 inches for females</li> <li>- Height is greater than 84 inches for males</li> <li>- After BMI is calculated, BMI is less than 15</li> </ul>	Numeric .F="No Form" .M="Not Answered" .R="Height Or Weight Not In Reasonable Range"



Variable	Label	Description	Format Text
<b>bmi_20c</b>	BMI at Age 20	This is the World Health Organization (WHO) standard categorization of BMI. BMI is considered out of range if any of the following occur: - Weight is less than 60 pounds - Height is less than 48 inches - Height is greater than 78 inches for females - Height is greater than 84 inches for males - After BMI is calculated, BMI is less than 15	.F="No Form" .M="Not Answered" .R="Height Or Weight Not In Reasonable Range" 1="0-18.5" 2="18.5-25" 3="25-30" 4="30+"
<b>weight20_f</b>	Weight at Age 20 (lbs)	Question 22 - "What is or was your weight at these ages?"  Weights less than 60 pounds are out of range.	Numeric .F="No Form" .M="Missing" .R="Weight Out Of Range"
<b>bmi_50</b>	BMI at Age 50	BMI is considered out of range if any of the following occur: - Weight is less than 60 pounds - Height is less than 48 inches - Height is greater than 78 inches for females - Height is greater than 84 inches for males - After BMI is calculated, BMI is less than 15	Numeric .F="No Form" .M="Not Answered" .R="Height Or Weight Not In Reasonable Range"
<b>bmi_50c</b>	BMI at Age 50	This is the World Health Organization (WHO) standard categorization of BMI. BMI is considered out of range if any of the following occur: - Weight is less than 60 pounds - Height is less than 48 inches - Height is greater than 78 inches for females - Height is greater than 84 inches for males - After BMI is calculated, BMI is less than 15	.F="No Form" .M="Not Answered" .R="Height Or Weight Not In Reasonable Range" 1="0-18.5" 2="18.5-25" 3="25-30" 4="30+"
<b>weight50_f</b>	Weight at Age 50 (lbs)	Question 22 - "What is or was your weight at these ages?"  Weights less than 60 pounds are out of range.	Numeric .F="No Form" .M="Missing" .R="Weight Out Of Range"

## Section 21: BQ NSAIDS

Variable	Label	Description	Format Text
<b>asp</b>	Use Aspirin Regularly?	Question 24 - "During the last 12 months, have you regularly used aspirin or aspirin-containing products, such as Bayer, Bufferin or Anacin? (Please do not include aspirin-free products such as Tylenol and Panadol.)"	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>asppd</b>	# of Aspirin	Question 25 - "During the last 12 months, how many pills of aspirin or aspirin containing products did you usually take per day, per week or per month?"	.F="No Form" .M="Not Answered" 0="None" 1="1/Day" 2="2+/Day" 3="1/Week" 4="2/Week" 5="3-4/Week" 6="<2/Month" 7="2-3/Month"
<b>ibup</b>	Use Ibuprofen Regularly?	Question 26 - "During the last 12 months, have you regularly used ibuprofen-containing products, such as Advil, Nuprin, or Motrin?"	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>ibuppd</b>	# of Ibuprofen	Question 27 - "During the last 12 months, how many pills of ibuprofen-containing products did you usually take per day, per week, or per month?"	.F="No Form" .M="Not Answered" 0="None" 1="1/Day" 2="2+/Day" 3="1/Week" 4="2/Week" 5="3-4/Week" 6="<2/Month" 7="2-3/Month"

## Section 22: BQ Diseases

Variable	Label	Description	Format Text
<b>arthrit_f</b>	Arthritis	Did the participant ever have arthritis?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>bronchit_f</b>	Bronchitis	Did the participant ever have chronic bronchitis?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>colon_comorbidity</b>	Colon Comorbidities	Did the participant ever have a colon related co-morbidity (ulcerative colitis, Crohn's disease, Gardner's syndrome, or familial polyposis)?	.F="No Form" .M="Missing" 0="No" 1="Yes"
<b>diabetes_f</b>	Diabetes	Did the participant ever have diabetes?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>divertic_f</b>	Diverticulitis/Diverticulosis	Did the participant ever have diverticulitis or diverticulosis?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>emphys_f</b>	Emphysema	Did the participant ever have emphysema?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>gallblad_f</b>	Gallbladder Stones or Inflammation	Did the participant ever have gall bladder stones or inflammation?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>hearta_f</b>	Heart Attack	Did the participant ever have coronary heart disease or a heart attack?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>hyperten_f</b>	Hypertension	Did the participant ever have high blood pressure?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>liver_comorbidity</b>	Liver Comorbidities	Did the participant ever have a liver related co-morbidity (hepatitis or cirrhosis)?	.F="No Form" .M="Missing" 0="No" 1="Yes"
<b>osteopor_f</b>	Osteoporosis	Did the participant ever have osteoporosis?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"
<b>polyps_f</b>	Colorectal Polyps	Did the participant ever have colorectal polyps?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"

Variable	Label	Description	Format Text
<b>stroke_f</b>	Stroke	Did the participant have a stroke?	.F="No Form" .M="Not Answered" 0="No" 1="Yes"

## Section 23: BQ Female Specific

Variable	Label	Description	Format Text
<b>hyster_f</b>	Ever Have a Hysterectomy?	Question F47 - "Have you had a hysterectomy, that is, have you had your uterus or womb removed?"  Participants modified to "yes" if an age of hysterectomy is given in question F48	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes" 2="Don't Know"
<b>hystera</b>	Age at Hysterectomy	Question F48 - "What was your age when you had your uterus or womb removed?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<40" 2="40-44" 3="45-49" 4="50-54" 5="55+"
<b>ovariesr_f</b>	Removed Ovaries	Question F49 - "Have you ever had one or both of your ovaries removed?"  Question F50 - "What exactly was removed?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="Ovaries Not Removed" 1="One Ovary - Partial" 2="One Ovary - Total" 3="Both Ovaries - Partial" 4="Both Ovaries - Total" 5="Don't Know" 8="Ambiguous"
<b>tuballig</b>	Ever Tubes Tied?	Question F46 - "Have you had a tubal ligation, that is have you had your tubes tied?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes" 2="Don't Know"
<b>bcontr_f</b>	Ever Take Birth Control Pills?	Question F43 - "Did you ever take birth control pills for birth control or to regulate menstrual periods?".  Participant's answer modified to "yes" if they specified both an age they started taking birth control pills and a total number of years they took them.	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"
<b>bcontra</b>	Age Started Birth Control Pills?	Question F44 - "How old were you when you first started taking birth control pills?"  Participants who were "50-59" or "60+" when they started birth control pills were collapsed into a "50+" category.	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<30" 2="30-39" 3="40-49" 4="50+"

Variable	Label	Description	Format Text
<b>bcontrt</b>	Total Years Took Birth Control Pills?	Question F45 - "For how many total years did you take birth control pills?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="Not Applicable" 1="10+ Years" 2="6-9 Years" 3="4-5 Years" 4="2-3 Years" 5="1 Year or Less"
<b>curhorm</b>	Currently Using Female Hormones?	Question F52 - "Are you currently using female hormones?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"
<b>horm_f</b>	Ever Take Female Hormones?	Question F51 - "Sometimes women take female hormones such as estrogen or progesterone around the time of menopause. Have you ever used female hormones (tablets, pills, or creams) for menopause?"  Participant's answers modified to "yes" if they had said "no" but gave an answer for whether they are currently using female hormones and said they used them for greater than 1 year.	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes" 2="Don't Know"
<b>horm_stat</b>	Female Hormone Status	Female hormone status uses ever taken female hormones and currently on hormones to determine the participant's hormone status.	.F="No Form" .G="Wrong Gender" .M="Missing" 0="Never" 1="Current" 2="Former" 3="Unknown Whether Current Or Former" 4="Doesn't Know If She Ever Took HRT"
<b>thorm</b>	# of Years Taking Female Hormones	Question F53 - "For how many total years did you take female hormones?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="Not Applicable" 1="10+ Years" 2="6-9 Years" 3="4-5 Years" 4="2-3 Years" 5="<= 1 Year"
<b>fchilda</b>	Age at Birth of First Child?	Question F42 - "What was your age at the birth of your first child?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<16" 2="16-19" 3="20-24" 4="25-29" 5="30-34" 6="35-39" 7="40+"

Variable	Label	Description	Format Text
<b>livec</b>	# of Live Births	Question F41 - "How many of your pregnancies resulted in a live birth?"  Allowed values are 0-29. Participants with more than five pregnancies are collapsed to "five or more".	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="Zero" 1="One" 2="Two" 3="Three" 4="Four" 5="Five Or More"
<b>miscar</b>	# of Miscarriages/Abortions	Question F39 - "How many of your pregnancies resulted in miscarriage or an abortion?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="0" 1="1" 2="2+"
<b>preg_f</b>	Ever Been Pregnant?	Question F35 - "Have you ever been pregnant?"  Participant's answer is modified to be "yes" if the participant answers on age of first pregnancy, number of pregnancies, number of still birth pregnancies, number of miscarriages, number of tubal pregnancies, age at birth of first child, or the number of live births implied pregnancy.	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes" 2="Don't Know"
<b>prega</b>	Age When First Became Pregnant?	Question F36 - "How old were you when you first became pregnant?"  Participants who were "40-44" or "45+" when they first became pregnant were collapsed into "40+".	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<15" 2="15-19" 3="20-24" 4="25-29" 5="30-34" 6="35-39" 7="40+"
<b>pregc</b>	# of Pregnancies	Question F37 - "How many times have you been pregnant? Please include stillbirths, miscarriages, abortions, tubal or ectopic pregnancies, and live births."	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="None" 1="1" 2="2" 3="3-4" 4="5-9" 5="10+"
<b>stillb</b>	# of Still Birth Pregnancies	Question F38 - "How many of your pregnancies resulted in a stillbirth?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="0" 1="1" 2="2+"
<b>trypreg</b>	Ever Tried to Become Pregnant for a Year or More Without Success?	Question F34 - "Have you ever tried to become pregnant for a year or more without success?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"

Variable	Label	Description	Format Text
<b>tubal</b>	# of Tubal/Ectopic Pregnancies?	Question F40 - "How many of your pregnancies resulted in a pregnancy in one of your tubes, that is, a tubal or ectopic pregnancy?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="0" 1="1" 2="2+"
<b>fmenstr</b>	Age When Had First Menstrual Period?	Question F31 - "How old were you when you had your first menstrual period?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 1="<10" 2="10-11" 3="12-13" 4="14-15" 5="16+"
<b>lmenstr</b>	Age at Menopause	Question F32 - "How old were you when you had your last period?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 1="<40" 2="40-44" 3="45-49" 4="50-54" 5="55+"
<b>menstrs</b>	Type of Menopause	Question F33 - "Did your periods stop because of natural menopause, surgery, radiation, or drug therapy?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 1="Natural Menopause" 2="Surgery" 3="Radiation" 4="Drug Therapy"
<b>menstrs_stat_type</b>	Reason menstrual periods stopped.	Reason the participant's menstrual periods stopped. Because minimal information was gathered about menopause, the menopause information is supplemented with hysterectomy and oophorectomy information.	.F="No Form" .G="Wrong Gender" 1="Natural postmenopausal" 2="Bilateral oophorectomy" 3="Hysterectomy, no bilateral oophorectomy" 4="Surgical, details unclear" 5="Drug therapy" 6="Radiation" 7="Postmenopausal, reason unknown" 8="Menopausal status unknown"
<b>post_menopausal</b>	Post-Menopausal Status	Was the participant post-menopausal at trial entry. This question was not asked directly on the BQ, therefore information on menopause has been supplemented with hysterectomy and oophorectomy information.	.F="No form" .G="Wrong gender" 1="Definitely post-menopausal" 2="Possibly post-menopausal"
<b>bbd</b>	Ever Have Benign or Fibrocystic Breast Disease?	Question F54 - "Have you ever been told by a doctor that you had any of the following conditions?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"
<b>benign_ovcyst</b>	Ever Have Benign Ovarian Tumor/Cyst?	Question F54 - "Have you ever been told by a doctor that you had any of the following conditions?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"



Variable	Label	Description	Format Text
<b>endometriosis</b>	Ever Have Endometriosis?	Question F54 - "Have you ever been told by a doctor that you had any of the following conditions?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"
<b>uterine_fib</b>	Ever Have Uterine Fibroid Tumors?	Question F54 - "Have you ever been told by a doctor that you had any of the following conditions?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"

## Section 24: BQ Male Specific

Variable	Label	Description	Format Text
<b>enlpros_f</b>	Ever Have Enlarged Prostate or BPH?	Question M34 - "Has a doctor ever told you that you had an enlarged prostate or benign prostatic hypertrophy (BPH)?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"
<b>enlprosa</b>	How Old When Told Had Enlarged Prostate or BPH?	Question M35 - "How old were you when a doctor first told you that you had this problem?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<30" 2="30-39" 3="40-49" 4="50-59" 5="60-69" 6="70+"
<b>infpros_f</b>	Ever Have Inflamed Prostate?	Question M36 - "Has a doctor ever told you that you had an inflamed prostate or prostatitis?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="No" 1="Yes"
<b>infprosa</b>	How Old When Told Had Inflamed Prostate?	Question M37 - "How old were you when a doctor first told you that you had this problem?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<30" 2="30-39" 3="40-49" 4="50-59" 5="60-69" 6="70+"
<b>prosprob_f</b>	Have Problem with Prostate?	Did the participant ever have a problem with their prostate?	.F="No Form" .G="Wrong Gender" .M="Missing" 0="No" 1="Yes"
<b>urinate_f</b>	During The Past Year, How Many Times Did You Wake Up At Night To Urinate?	Participants who indicate they "never" wake up more than once or failed to answer the question and provided an age when urinating more than once a night started regularly are placed into "not never."	.F="No Form" .G="Wrong Gender" .M="Not Answered" 0="Never" 1="Once" 2="Twice" 3="Three Times" 4="More Than 3 Times" 5="Not Never"

Variable	Label	Description	Format Text
<b>urinatea</b>	Age At Which Began Waking Up To Urinate More Than Once At Night	Question M32 - "How old were you when you first began waking up to urinate more than once a night on a regular basis?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<30" 2="30-39" 3="40-49" 4="50-59" 5="60-69" 6="70+"

## Section 25: BQ Prostate Surgery

Variable	Label	Description	Format Text
<b>surg_age</b>	Age at First Prostate Surgery	<p>Question M39 - "How old were you when you had a surgical procedure of the prostate the first time?"</p> <p>Participants who were "&lt;30" or "30-39" when they had their first prostate surgery were collapsed into a "&lt;40" category.</p>	<p>.F="No Form"  .G="Wrong Gender"  .M="Not Answered"  .N="Not Applicable"  1="&lt;40"  2="40-49"  3="50-59"  4="60-69"  5="70+"</p>
<b>surg_any</b>	Ever Have Any Prostate Surgeries?	<p>Question M38 - "Have you ever had any of the following surgical procedures of the prostate?"</p> <p>Has the participant had at least one of the following prostate surgeries:</p> <ol style="list-style-type: none"> <li>1. Prostatectomy for benign disease.</li> <li>2. Transurethral resection of the prostate or TURP.</li> <li>3. Biopsy of the prostate.</li> <li>4. Prostate surgery, but the type is unknown.</li> <li>5. The participant provided the age of the first prostate surgery and did not answer they don't know if they had any surgery.</li> </ol>	<p>.F="No Form"  .G="Wrong Gender"  .M="Not Answered"  0="No"  1="Yes"  2="Don't Know"</p>
<b>surg_biopsy</b>	Ever Have Biopsy of Prostate?	<p>Question M38 - "Have you ever had any of the following surgical procedures of the prostate?"</p>	<p>.F="No Form"  .G="Wrong Gender"  .M="Not Answered"  0="No"  1="Yes"</p>
<b>surg_prostatectomy</b>	Ever Had Prostatectomy for Benign Disease?	<p>Question M38 - "Have you ever had any of the following surgical procedures of the prostate?"</p>	<p>.F="No Form"  .G="Wrong Gender"  .M="Not Answered"  0="No"  1="Yes"</p>
<b>surg_resection</b>	Ever Had Transurethral Resection of Prostate?	<p>Question M38 - "Have you ever had any of the following surgical procedures of the prostate?"</p>	<p>.F="No Form"  .G="Wrong Gender"  .M="Not Answered"  0="No"  1="Yes"</p>
<b>vasect_f</b>	Had a Vasectomy?	<p>Question M40 - "Have you had a vasectomy, that is, a sterilization procedure for men?"</p> <p>Participants who didn't answer or said "no" are modified to "yes" when they list an age when they had a vasectomy.</p>	<p>.F="No Form"  .G="Wrong Gender"  .M="Not Answered"  0="No"  1="Yes"</p>

Variable	Label	Description	Format Text
<b>vasecta</b>	Age at Vasectomy	Question M41 - "How old were you when you had a vasectomy?"	.F="No Form" .G="Wrong Gender" .M="Not Answered" .N="Not Applicable" 1="<25" 2="25-34" 3="35-44" 4="45+"