CHRIS Study

Interview – Diabetes mellitus

Version 1.1

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Authors: LB, MG

1. Introduction

This module stores information related to the diabetes history of participant, that were collected at the interview.

Participants book a morning appointment at the CHRIS study center, ranging from 7.45 to 8.45 a.m. Each study participant is assigned a workflow at the reception. If there are ten study participants (maximum capacity), there are ten different workflows, marked with the letters from "A" to "K". The current workflow is as follows: A-B-C-D-E-F-G-H-I-K. All the workflows can be found in the documentation of CHRIS Baseline/General information/Administrative data, in the file named "Workflows at baseline assessment". The interview occurs always after the spiralography and the blood drawing, for most as the last session, after the ECG assessment and the self-administered questionnaire (workflows B, C, E, F, H, I, L). For the remainder, the interview occurs after breakfast and just before the self-administered questionnaire (workflows A and G) or in between the blood drawing and the anthropometry (workflow D).

The interview full text and its corresponding answer lists are available at CHRIS Baseline/Interview. This module is based on the FRAGEN ZUR GESUNDHEIT module of the follow-up F4 questionnaire of the KORA Study (*Kooperative Gesundheitsforschung in der Region Augsburg*).

2. History version changes

Version 1 of this interview module was in use between August 24th,2011. No further versions were in use.

3. Data cleaning

1. The main CHRIS dataset was loaded.
2. The variables on diabetes diagnosis and its year, x0dm00, x0dm01b, and x0dm02, were corrected if a pregnancy diabetes was reported in the notes but not present in the other variables.
3. The variable on diabetes mellitus diagnosis, x0dm00, had it observations transformed into:
    a) "Unexpected missing" (-89) if they were missing,
    b) "Don't know" (-88) if the third answer option "I do not know" was chosen.
4. The variables on age at diabetes diagnosis, x0dm01b, diabetes type, x0dm02, and diabetes treatment, x0dm03, had their missing observations transformed into:
    a) "Missing by design" (-99) if no diabetes ever was reported (x0dm00="No", "Missing by design" or "Don't know")
    b) "Unexpected missing" otherwise.
5. The variable on the age at insulin treatment initiation, x0dm04b, had its missing observations set to:
    a) "Missing by design" (-99) if no insulin treatment was reported (x0dm03="Only with tablets", "Only with diet", "No treatment", "Missing by design" or "Don't know")
    b) "Unexpected missing" otherwise.
6. All the year variables, x0dm01a and x0dm04a, were dropped in favor of the age variables, x0dm01b and x0dm04b.

7. The variable storing the notes additional information on diabetes, x0dmnote, was translated and categorized when possible.
8. The ages at diabetes diagnosis, x0dm01b, and at insulin treatment initiation, x0dm04b, were corrected if additional information was reported in x0dmnote.
9. The baseline dataset was saved.

4. Advices for the analysis

The content of the nurse's notes, referring to diabetes mellitus, can include reporting information on diabetes treatment changes or multiple diabetes diagnoses, such as multiple occurrences of pregnancy diabetes or a type 2 diabetes after a pregnancy diabetes. Additionally, circumstances of diabetes occurrence (e.g. after a cancer or due to specific treatments) or borderline values are reported in x0dmnote.

Participants were often unaware of their diabetes type, but the analyst can easily distinguish between them looking at the reported age at diagnosis, x0dm01b.

The questions on current treatment, x0dm03, can be complemented with the drugs module x0dd, where the participant let their current medication packages be scanned by the nurse at the study center. Specifically, the variable x0dd21 reports on current diabetes medication use of the participant.

Finally, the analyst should always take into account that the operator in charge of carrying out the interview might have influenced how the participant reported their answers. The analyst should therefore adjust for the operator variable, x0_opintc, when possible.

5. References

Löwel H, Döring A, Schneider A, Heier M, Thorand B, Meisinger C. The MONICA Augsburg surveys - basis for prospective cohort studies. Gesundheitswesen. 2005;67(Sonderheft 1):S13–S18. DOI: 10.1055/s-2005-858234

Holle R, Happich M, Löwel H, Wichmann H-E. KORA-A Research Platform for Population Based Health Research. Gesundheitswesen. 2005;67(Sonderheft 1):S19–S25. DOI: 10.1055/s-2005-858235