

UNC Alumni Heart Study NEWSLETTER

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During the past year, we at the UNCAHS have been writing proposals to continue the study for years 20 to 25. We have great plans for the future and continuing this important and meaningful research. Our goal is to continue to explore how individual differences in personality are related to health and disease during middle age.

Response to Questionnaire 10 was excellent. On May 24, 2004, we mailed 5,730 Q10 packets. To date, we have received 4,381 responses, a whopping 76%! About 15% of those were completed on our WEB version of the Questionnaire. We are very happy to be able to offer a web-based version and members seem to like it. Questionnaire 11 will be available in a web-based version as well, and information on using this option will be sent shortly before our full Questionnaire packet is mailed out.

OUR SPECIAL STRENGTHS AS A STUDY OF HEART DISEASE AND NORMAL AGING LIE IN EXAMINING:

THE RELATIONSHIP BETWEEN STABILITY AND CHANGE IN PERSONALITY and BEHAVIORAL RISK. We have measured personality traits at several points in time since 1964 and need to continue repeating some of these measures to gauge change and stability. This will be critical in understanding the implications of changing your behavior and seeing what difference it makes in terms of health and disease.

THE BABY BOOM GENERATION. The crest of the baby boom generation is turning 60. The Baby Boom generation (born 1946-1964) is the largest group of children in the US and has changed national policy on many issues. The UNCAHS is primarily composed of persons born in 1946, 1947 and 1948 who entered UNC in 1964, 1965 and 1966 and who will turn age 60 in 2006, 2007 and 2008. Understanding the health and health behaviors of this generation is critical to the health and well being of the nation.

MIDDLE AGE TRANSITIONS. Transitions include expected events such as caregiving for your parents or in-laws, retirement for you or your spouse, and planning for such events. Also included are unexpected events such as war, natural disaster, divorce, and loss of a spouse. Both types influence your health, and the timing of disease.

LATEST FINDINGS:

HOSTILITY AND HYPERTENSION: As we reported in our last newsletter, we have been examining the patterns of change in hostility scores over time, now using our third measure of hostility, obtained from you in Questionnaire 9. For the 4989 subjects who joined the UNCAHS, we have found that hostility measured in midlife predicts hypertension, and that change in hostility from that measured at college age (which on average declines as you get older) is an even better predictor – individuals who remain stable on hostility, therefore going against the developmental trend, are more likely to have hypertension before age 60. Hypertension is, as expected, related to being overweight or obese, having a family history of hypertension, and is less likely in those who exercise and drink a modest amount of alcohol. These findings were the same for both men and women in the study and are being readied for publication.

OBESITY: Given that obesity has become such a health priority, we also examined personality facets as predictors of Body Mass Index (BMI) over a 14 year period during midlife in study participants. BMI uses a mathematical formula that takes into account both a person's height and weight. BMI equals a person's weight in kilograms divided by height in meters squared. (BMI=kg/m²). The following table has already done the math and metric conversions if you would like to see your own BMI. (5 feet=60 inches)

BMI (kg/m ²)	19	20	21	22	23	24	25	26	27	28	29	30	35	40
Height (in.)	Weight (lb.)													
58	91	96	100	105	110	115	119	124	129	134	138	143	167	191
59	94	99	104	109	114	119	124	128	133	138	143	148	173	198
60	97	102	107	112	118	123	128	133	138	143	148	153	179	204
61	100	106	111	116	122	127	132	137	143	148	153	158	185	211
62	104	109	115	120	126	131	136	142	147	153	158	164	191	218
63	107	113	118	124	130	135	141	146	152	158	163	169	197	225
64	110	116	122	128	134	140	145	151	157	163	169	174	204	232
65	114	120	126	132	138	144	150	156	162	168	174	180	210	240
66	118	124	130	136	142	148	155	161	167	173	179	186	216	247
67	121	127	134	140	146	153	159	166	172	178	185	191	223	255
68	125	131	138	144	151	158	164	171	177	184	190	197	230	262
69	128	135	142	149	155	162	169	176	182	189	196	203	236	270
70	132	139	146	153	160	167	174	181	188	195	202	207	243	278
71	136	143	150	157	165	172	179	186	193	200	208	215	250	286
72	140	147	154	162	169	177	184	191	199	206	213	221	258	294
73	144	151	159	166	174	182	189	197	204	212	219	227	265	302
74	148	155	163	171	179	186	194	202	210	218	225	233	272	311
75	152	160	168	176	184	192	200	208	216	224	232	240	279	319
76	156	164	172	180	189	197	205	213	221	230	238	246	287	328

Included below is a table from the journal article detailing our findings. The article is in press, and will be available on our website at publication. In it, we provide details on how your personality relates to changes in BMI over time. In brief, we found that Neuroticism for females, Extraversion for males, and Openness, Agreeableness and Conscientiousness for both genders, were related to BMI. Note that some of the numbers in the table are percentages, not actual BMIs.

Levels of BMI by Gender Over Follow-up.

Questionnaire # (Year) # responses	3 (1989) n = 3401	5 (1992) n = 2995	6 (1994) n = 2890	9 (2002) n = 2402	National Norms 1988-1994
Females					
BMI, mean (SD)	23.0 (4.0)	23.7 (4.2)	24.1 (4.4)	25.5 (5.0)	
Age, mean (SD)	42.9 (1.7)	46.2 (1.7)	47.6 (1.7)	54.8 (1.7)	
Percent*					
Underweight	4.3	3.3	3.5	1.0	
Normal weight	73.4	70.8	67.7	54.8	49.2
Over weight	15.3	17.3	17.9	28.4	24.8
Obese	7.0	8.6	10.9	15.8	23.1
Males					
BMI, mean (SD)	25.4 (3.2)	25.9 (3.4)	25.9 (3.4)	27.0 (3.9)	
Age, mean (SD)	42.9 (1.3)	46.3 (1.3)	47.6 (1.3)	54.9 (1.3)	
Percent*					
Underweight	0.3	0.3	0.4	0.3	
Normal weight	49.8	44.5	43.0	32.1	38.1
Over weight	42.0	44.2	45.4	49.6	40.7
Obese	8.0	11.0	11.2	18.0	20.3

***Underweight BMI < 18.5; Normal BMI 18.5 – 24.9; Overweight BMI 25.0 – 29.9; Obese BMI ≥ 30.0.**

<http://www.cdc.gov/nchs/data/nhanes/databriefs/adultweight.pdf>

PLANS FOR THE FUTURE:

Knowing who gets what disease when, and the extent to which it is related to known risk indicators, is critical to our research. We are seeking to understand the role of personality and the extent to which it changes the risk behaviors that you engage in, and how that might keep you healthy or lead to specific diseases relatively early in the lifespan. Each additional measurement of hostility or personality allows us to better understand how patterns of change work. We realize some of these measures of personality are long and some of the questions seem a little odd, but it's vital to our research to occasionally repeat them among as many study members as are willing to complete them, so we can gauge change and patterns over time.

In the next 5 years, we plan to send out 3 questionnaires to all study members. In that time, we will ask about your caregiver status and ask that you update us on important life events and any changes in your employment status, weight, exercise and marital status. We will be repeating personality and hostility measures and we will ask in each questionnaire that you update us on your health and disease status.

Do you need to contact us? Call any time (800)233-5912 or email us at study@uncahs.org
We love to hear from study members!

The UNC ALUMNI HEART STUDY

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