Manuscript #088

1. Title:
Age, Sex, and Race Distributions of Lipid, Lipoproteins and Apolipoproteins in the ARIC Study

2. Writing Group:
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3. Timeline:
The major step required will be the compiling of all Visit 1 data.

4. Rationale:
Currently, the population distributions of total cholesterol and triglyceride for adults are based on the results of the Lipid Research Clinics Intervention Study. The large adult population in the ARIC Study will allow the examination and reporting in one manuscript the population distributions of not only total cholesterol and triglyceride, but also other measured plasma lipids, lipoproteins, and apolipoproteins. This examination will inspect these lipid analytes by age [per year], by sex, and by race.

In two and probably other proposed manuscripts partial examination of all these analytes will be reported. These manuscripts have examined lipid values between sexes in 5 years intervals, i.e. LDL-chol between black men and white men who are 40-45 years of age. Such will be the case in manuscript proposal #5, "Racial Differences in Risk Factors" and in the "LDL Cholesterol and Apolipoprotein B Associations."

However, none of these other proposed manuscripts present either:
1. all the population distributions of all the lipid analytes in one manuscript, or
2. these population distributions reported by year.

For those in the clinical and research lipid fields, this information will be useful. This type of data presentation is similar to the already approved manuscript proposal number 10e "Population Hemostatic Distributions."

5. Main Hypothesis/Issues to be Addressed:
1. To examine and report the changes associated with race, sex, and age of the various measured lipid, lipoprotein, and apolipoprotein levels.

2. These data will be compared to former epidemiologic studies.

6. Data Requirements:
Visit 1 data from the Central Lipid Laboratory as well as age, sex, gender, and field center ID. These data will be ranked by sex and then further ranked and analyzed by age. These data will be analyzed by the lead author.

Exclusion criteria will include change of medication or hormone use, heart or arterial surgery, TIA or stroke,
or non-fasting and other variables which appear appropriate.