1. Title (length 26):
Reproduction/Ultrasound

2. Writing Group (list individual with lead responsibility first):
(lead) Nabulsi           Folsom             White
Szklo                 Higgins              CSCC Representative

3. Timeline:
Draft manuscript expected 11/90. If results are not striking this will be merged with ms. 014, on which we are now working.

4. Rationale:
A marked elevation of total cholesterol, HDL, LDL, VLDL, and triglycerides has been observed acutely in association with pregnancy. The long-term effects of the metabolic changes observed with reproductive events on coronary heart disease are not well established. Several case-control studies have addressed this issue but their results were inconsistent. Some suggested an increased CHD risk with increased parity and some failed to detect any significant associations. Few prospective reports have addressed this issue and have produced inconsistent results. We feel that the ARIC cohort offers a unique opportunity to address the issue of reproductive events and CVD by studying the association of reproductive events with carotid artery wall thickness.

5. Main Hypothesis:
In ARIC women we expect carotid artery wall thickness to be positively associated with the number of pregnancies and the number of liveborn children and inversely associated with the age at menarche. It will also be higher in those with surgical versus natural menopause.

6. Data (variables, time window, source, inclusions/exclusions):
Visit 1 data. Dependent variable: carotid artery wall thickness. Independent variables: number of pregnancies, number of liveborn children, age at menarche, menopause variables. Covariates: Age, race, body mass index, education, sport index, hormone replacement therapy, SBP, DBP, smoking, drinking, oral contraceptive use, diabetes, total cholesterol, HDL, LDL, triglycerides.