Manuscript #218

1. Title:
Effects of Passive Smoking

2. Writing Group (list individual with lead responsibility first):
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3. Timeline:
Analysis could be started immediately. The timeline will depend on assigned priority for plan to complete by Spring of 1994.

4. Rationale:
Passive smoking is associated with cardiovascular disease and in ARIC with carotid IMT. It likely produces adverse physiologic effects similar to active smoking. ARIC assessed passive smoking as the number of hours exposed. By comparing passive smokers at various exposure levels to non-smokers we will determine if passive smoking is associated with the variables mentioned below. We will also determine if a change in passive smoking status is associated with a change in these variables by comparing base-line and exam 2 data in participants who have had a change in passive smoking status.

Manuscript #83 addresses passive smoking correlates in relation to spouse pairs only. We have discussed our proposal with these authors and have confirmed our proposals do not overlap.

5. Main Hypothesis:
Passive smoking is associated positively with white blood cell count, beta-thromboglobulin, platelet factor IV, platelet count, fibrinogen, antithrombin III, factor VII and waist/hip ratio, and negatively with RDL-C and apo A1.

6. Data (variables, time window, source, inclusions/exclusions):
Data from visits 1 and 2 will be analyzed. Exclusions will be active and former smoking and known coronary heart disease. Independent variable: passive smoking (hours of exposure)
Dependent variables: HDL-cholesterol, apolipoprotein A1, white blood cell count, platelets, beta TG, PF-4, fibrinogen, antithrombin III, factor VII, waist to hip ratio.
Covariates: age, race, sex, BMI, physical activity, alcohol consumption, cholesterol