Manuscript #263

1. Title:
The Association Between Comprehensive Dietary Agreement and Coronary Disease Prognostic Factors Among African-Americans with Self-Reported Non-Insulin Dependent Diabetes Mellitus (NIDDM)

2. Writing Group:
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3. Timeline:
Conditional upon acceptance of the Publications Committee, analyses will begin immediately (by the lead author). Expected time of completion is July, 1994.

4. Rationale:
Persons with non-insulin dependent diabetes mellitus (NIDDM) are 3 - 4 times more likely to develop coronary artery disease (CAD) than those without NIDDM. African-Americans have a higher proportion of NIDDM compared to most other races in the United States, but little is known whether differences exist within this population. Diet, one mode of treatment, is the cornerstone of therapy for diabetes. It is the hope that persons who have been diagnosed with diabetes have: (1) received ample dietary information and instruction for treatment and maintenance, and (2) access to dietary items which will help prevent further diabetes complications. Most studies of dietary adherence have investigated one nutrient at a time, rather than comprehensively, though diet is multidimensional, with the consumption of many nutrients influencing one another. The proposed research seeks to investigate whether there is an association between level of comprehensive dietary agreement with the American Diabetes Association recommendations and level of coronary disease prognostic factors in African-Americans with self-reported NIDDM. This research would provide: (1) a holistic approach to the relationship of diet and cardiovascular disease outcome, (2) comprehensive dietary information on the similarities or differences in a population known to have a high prevalence of NIDDM and CAD, and (3) inferences regarding the prognostic effects of dietary adherence in African-Americans with NIDDM.

5. Main Hypothesis:
There is a difference in the relationship between level of comprehensive dietary agreement with the ADA recommendations and levels of coronary prognostic factors among African-Americans with self-reported NIDDM.

6. Data Requested:
Visit 1 Data needed for this manuscript only: Lipid levels (HDL, LDL, TGL, and total cholesterol), prevalent CHD, stroke history, creatinine levels, history of peripheral vascular disease, income, education, dietary nutrients (total calories, carbohydrates, fats (including subtypes), cholesterol, protein, fiber, alcohol, sodium), race, gender, age, BMI, physical activity, medication survey data, diastolic and systolic blood pressure, smoking (CIGT01).