Manuscript #264

1. Title:
The Association Between Levels of Comprehensive Dietary Agreement and Lipid Levels Among African-Americans with Self-Reported Diabetes

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:
Of the few studies conducted, a relationship has been observed between fat and fat subtype consumption and cholesterol and serum lipid levels among persons with NIDDM, whose risk of coronary artery disease (CAD) is three to four times greater than those without NIDDM. Though, among those with NIDDM, African-Americans compared to Caucasians are more likely to develop CAD, little is known whether there are differences within the African-American population. In addition, most studies have investigated these relationships one nutrient at a time, controlling for the effect of the other nutrients, rather than investigating the comprehensive effect of diet on lipid outcome. The proposed research seeks to prospectively investigate whether there is an association between level of comprehensive dietary agreement with the American Diabetes Association recommendations and lipid levels. This research would stimulate: (1) a holistic approach to the relationship of diet and cardiovascular disease outcome, (2) 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 Hypotheses:
1) There is an inverse relationship between level of comprehensive dietary agreement with the ADA recommendations and HDL level among African-Americans with self-reported NIDDM.

2) There is an inverse relationship between level of comprehensive dietary agreement with the ADA recommendations and triglyceride level among African-Americans with self-reported NIDDM.

6. Data Requested:
Visit 1 Data needed for this manuscript only. Dependent variables: dietary nutrients (total calories, carbohydrates, fats (including subtypes), cholesterol, protein, fiber, alcohol, sodium), and food frequency data. Independent variables: race, gender, age, BMI, physical activity, income, education, medication survey data, lipid levels (HDL, LDL, TGL), diastolic and systolic blood pressure, smoking (CIGT01), medication data.