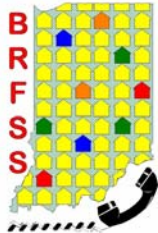


Indiana BRFSS Newsletter



*Indiana State Department of Health
Epidemiology Resource Center
Data Analysis*

Preview of 2003 BRFSS Data

The 2003 Indiana Behavioral Risk Factor Surveillance System (BRFSS) report will not be released for another few months; however, Indiana BRFSS data summaries from the Centers for Disease Control and Prevention (CDC) are available. This issue of the Indiana BRFSS Newsletter will highlight some selected risk factors and behaviors.

Many health conditions and behaviors are not reportable; hence, prevalence data must be obtained from another source. The BRFSS is an annual random digit-dial telephone survey of adults ages 18 years and older. The survey is done through a cooperative agreement with CDC. All 50 states and the District of Columbia participate.

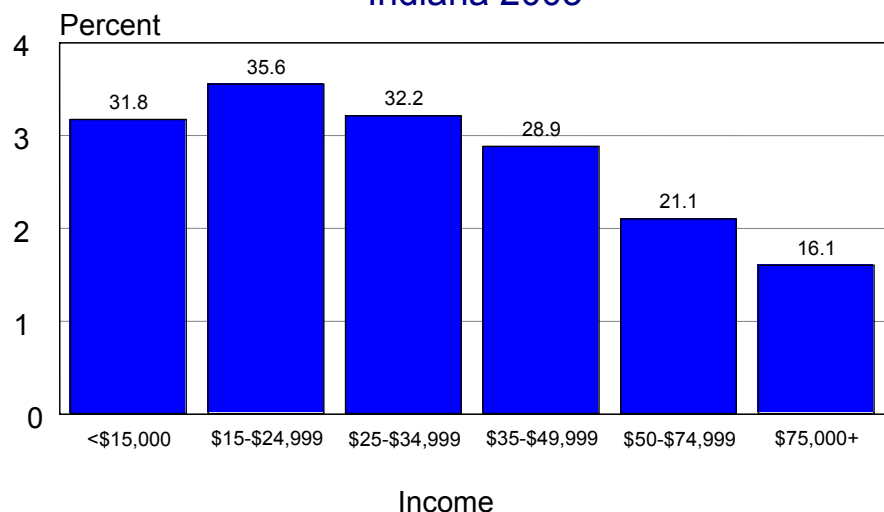
The BRFSS relies on self-reported data. This type of survey has certain limitations that should be understood in the interpretation of the data. Many times respondents have the tendency to underreport some behaviors that may be considered socially unacceptable (e.g., overweight, smoking). Conversely, respondents may over-report behaviors that are desirable (e.g., physical activity, nutrition).

Figure 1

Current Smoking Status

Overall, 26.1% of adults were current smokers. Males were significantly more likely than females to be current smokers (28.6% vs. 23.8%, respectively). Respondents who were college graduates were significantly less likely to be current smokers than respondents who had less than a college education. Similarly, respondents in the higher household income levels (\$50,000 or more) were significantly less likely to be current smokers than respondents in lower income levels. (See Figure 1.)

Current Smoking Status by Income Level Indiana 2003



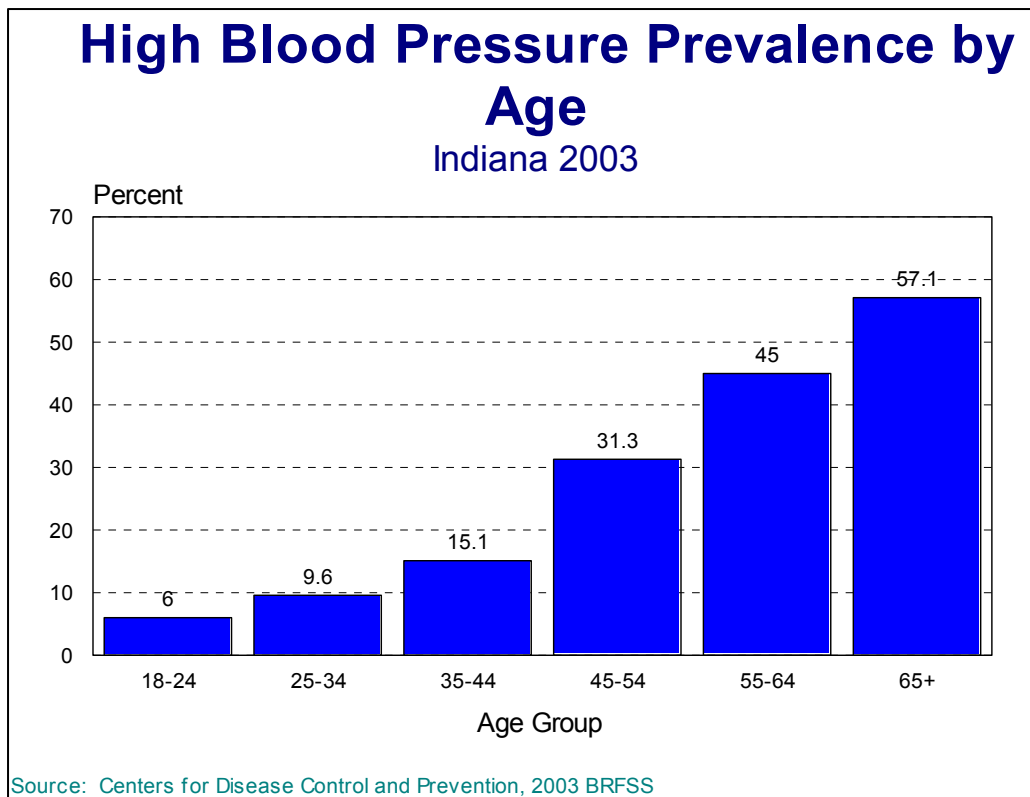
Source: Centers for Disease Control and Prevention, 2003 BRFSS

Moderate Physical Activity – This is defined as 30 or more minutes of physical activity per day for five or more days per week or vigorous activity for 20 or more minutes per day on three or more days per week. Male respondents were significantly more likely than female respondents to meet the recommendation for moderate physical activity (50.9% vs. 43.1%, respectively). Respondents with some college or college graduates were significantly more likely to meet the recommendation than respondents that graduated high school or had less than a high school graduation.

Hypertension Awareness – Overall, 26.9% of respondents reported that they had been told by a doctor, nurse, or other health professional that they have high blood pressure. Black, non-Hispanic respondents were significantly more likely than white, non-Hispanic respondents to report high blood pressure (36.8% vs. 27.0%, respectively). The prevalence of high blood pressure increases with age. (See Figure 2)



Figure 2

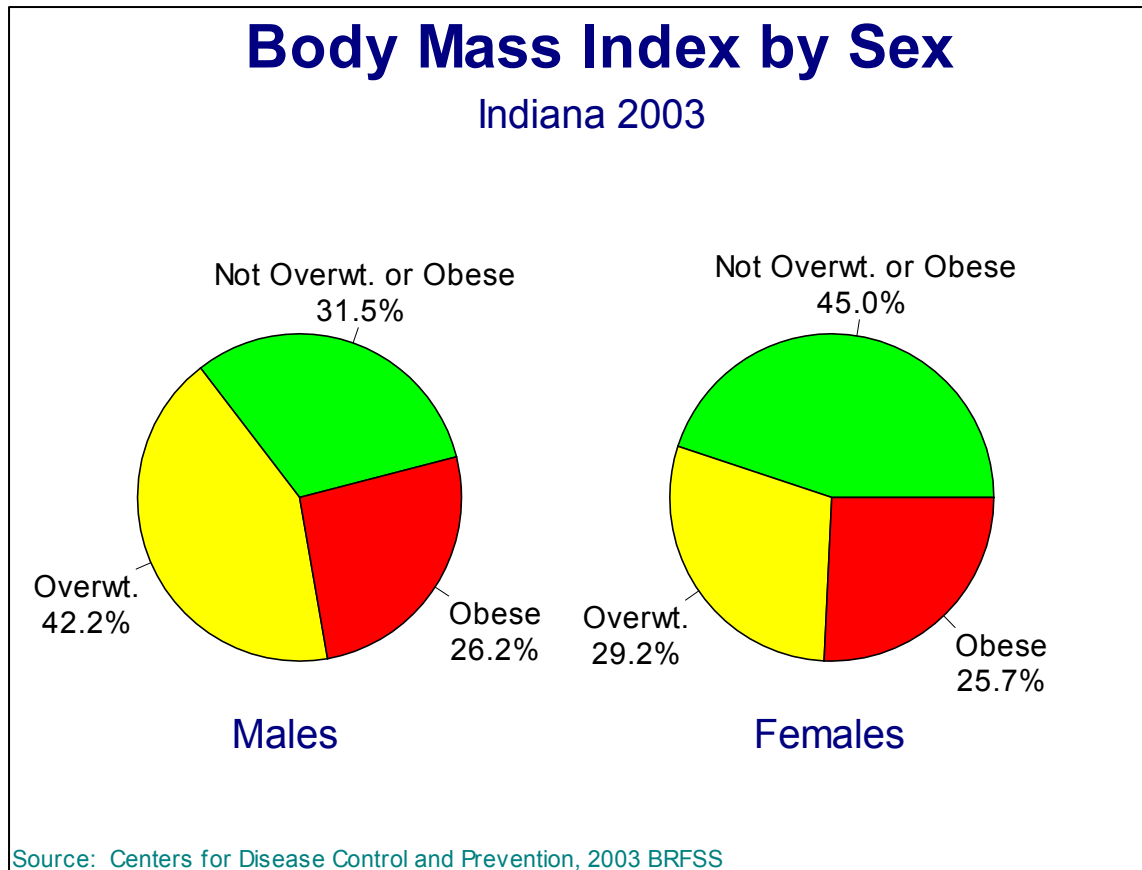


Immunization - The single best way to prevent the flu is to get vaccinated each fall. Overall, 66.1% of respondents ages 65 years and older reported receiving an influenza vaccination (flu shot) in the past 12 months. Respondents with lower education and income levels were at greatest risk for not receiving a flu shot. Information by race was not available due to small denominators.

In 2003, 24.0% of respondents reported ever receiving a pneumonia shot. Respondents ages 65 years and older were more than twice as likely to have ever received a pneumonia shot (61.5%) than younger respondents.

Overweight/Obesity – Body mass index (BMI) is used to estimate overweight and obesity. The BMI is calculated as weight in kilograms divided by the square of height in meters (W/H^2). A BMI between 19 and 24.9 is desirable. Overweight is defined as a BMI between 25.0 and 29.9, while obese is defined as a BMI of 30 or greater. Individuals classified as overweight or obese are at increased risk for health problems including Type 2 (non-insulin dependent) diabetes, coronary heart disease, and certain types of cancer (specifically, colon, breast, and prostate). In 2003, 35.7% of respondents were considered overweight and 26.0% were obese, with some differences by sex. (See Figure 3.)

Figure 3

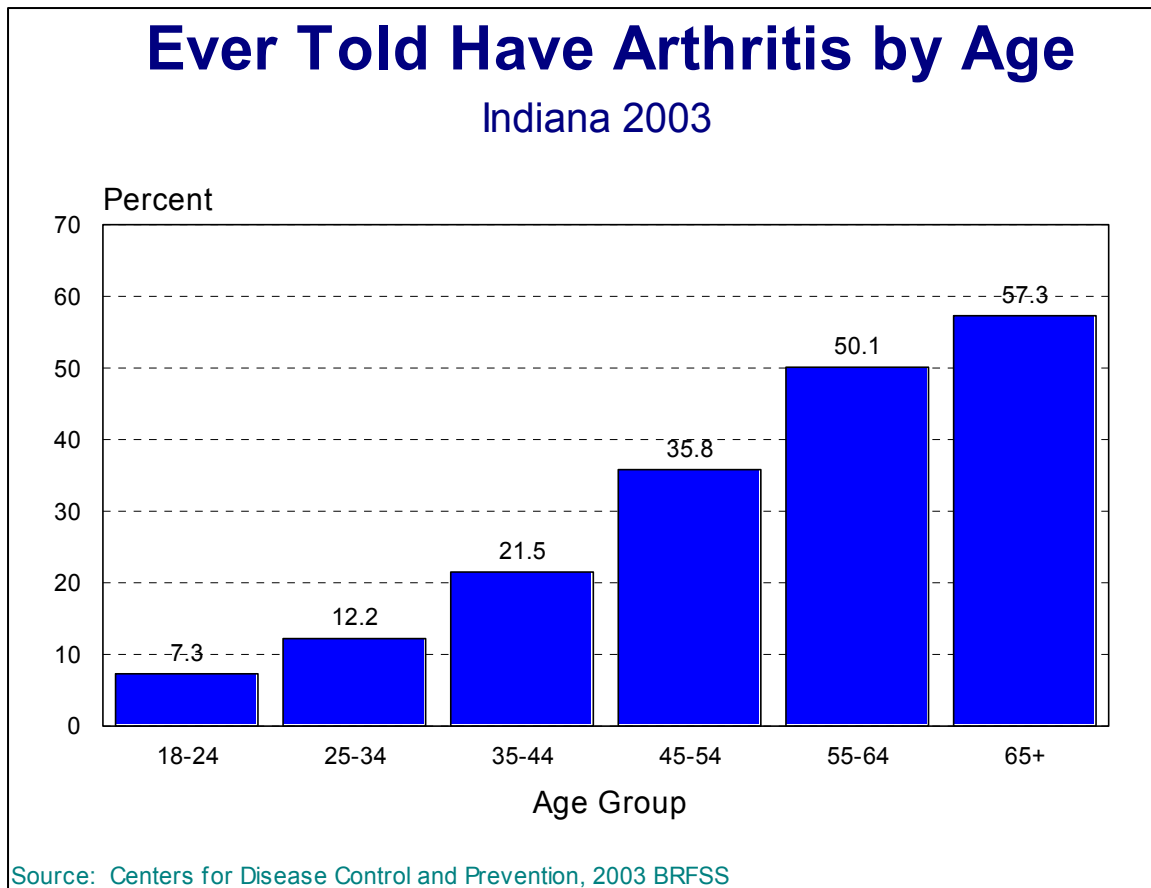


Diabetes – Almost eight percent (7.8%) of respondents reported having been told by a doctor that they had diabetes. The percentage increases with age (0.1% for respondents ages 18-24 years to 17.4% for respondents ages 65 years and older). The percentage of black, non-Hispanic respondents was higher than white, non-Hispanic respondents (11.5% vs. 7.5%, respectively), the difference was not statistically significant.

Disability – Respondents were asked if they were limited in any way in any activities because of physical, mental, or emotional problems. Overall, 18.4% of respondents reported this condition, with females significantly more likely than males to report a limitation (20.2% vs. 16.5%, respectively).

Arthritis – Respondents were asked if they had ever been told by a health professional that they have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia. Almost a third of respondents reported arthritis (30.4%), with the prevalence increasing with age. (See Figure 4.)

Figure 4



Alcohol Consumption - Respondents were asked about binge drinking and heavy drinking. Binge drinking is defined as having five or more drinks on one or more occasions. Fifteen percent (15.0%) of respondents reported binge drinking, with males significantly more likely than females (22.6% vs. 8.0%, respectively) to report this behavior. There were no significant differences among race categories. Respondents ages 18-24 were significantly more likely than the other age groups to report binge drinking.

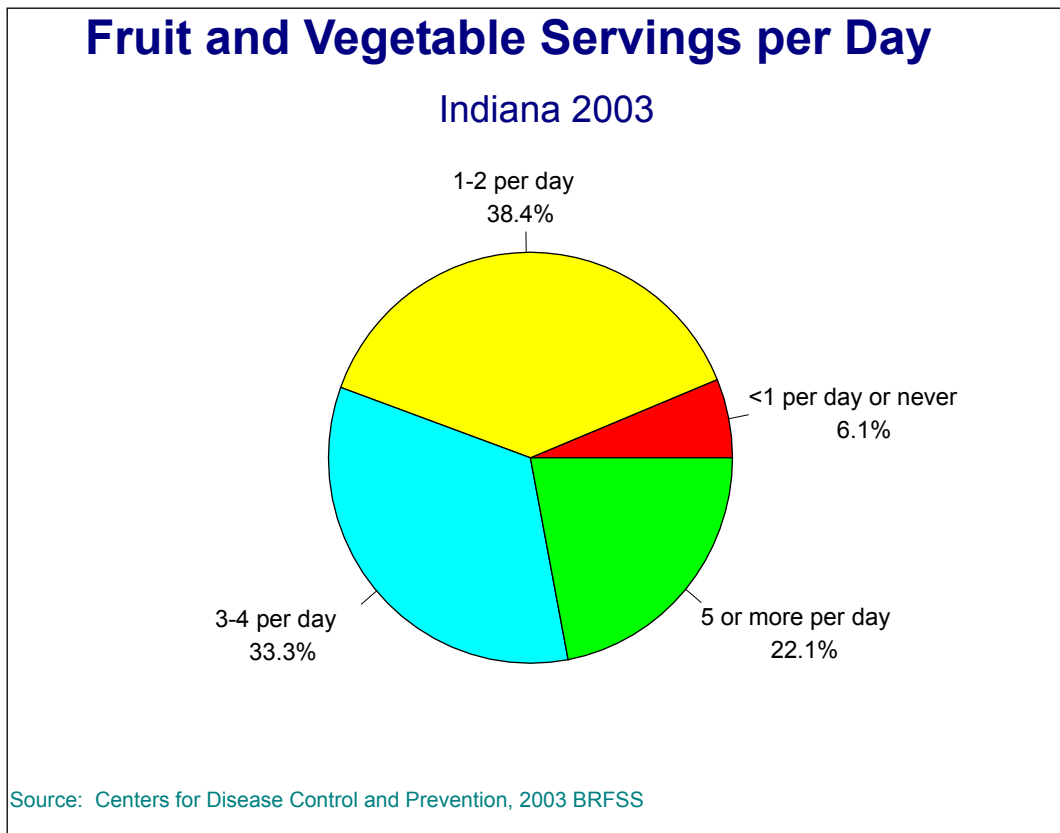


Heavy drinking is defined as having more than two drinks per day for males and one or more drinks per day for females. Approximately six percent (5.7%) of respondents reported heavy drinking, with males significantly more likely than females to report this behavior (7.2% vs. 4.2%, respectively). As with binge drinking, younger respondents were more likely to report heavy drinking.

Fruit and Vegetable Consumption – The National Cancer Institute recommends eating at least five fruit and vegetable servings every day. In 2003, only 22.1% of respondents reported eating five or more servings of fruits and vegetables daily. (See Figure 5.) One of the Healthy People 2010 Objectives is to increase to at least 75% the proportion of people aged 2 and older who meet the minimum average daily goal of at least five servings of fruits and vegetables.



Figure 5



Current Asthma – This is defined as ever being diagnosed with asthma and still having asthma. Overall, 8.0% of respondents reported current asthma, with females significantly more likely than males to have this condition (11.0% vs. 4.9%, respectively). There were no significant differences among race or age groups. Respondents with less than a high school education were significantly more likely to report current asthma than respondents with a college education (11.7% vs. 6.7%, respectively).

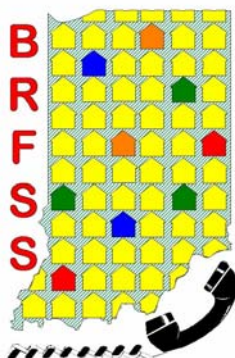
Cholesterol Awareness – Respondents that had their blood cholesterol checked within the past five years were asked if they had been told their blood cholesterol was high. White, non-Hispanic respondents were significantly more likely to report having high blood cholesterol than black, non-Hispanic respondents (36.9% vs. 28.1%, respectively). Respondents with household income less than \$15,000 were significantly more likely to have high blood cholesterol than respondents with household income of \$75,000 or more.



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