# Dataset Integrity Check for Chronic Renal Insufficiency Cohort (CRIC): DSIC 2 --- Atrial Fibrillation Dataset (M\_37)

As a partial check of the integrity of the CRIC datasets archived in the NIDDK data repository, a set of tabulations was performed to verify that published results from the CRIC study can be reproduced using the archived datasets. Analyses were performed to duplicate published results for two CRIC datasets. The present Dataset Integrity Check (DSIC) reports results for the atrial fibrillation analysis dataset (M\_37). This dataset supports findings reported by Soliman et al. in 2010 in the *American Heart Journal* [1]. The results of our dataset integrity check are described below.

Purpose. The intent of this dataset integrity check is to provide confidence that the dataset distributed by the NIDDK repository is a true copy of the study data. Our intent is not to assess the integrity of the statistical analyses reported by study investigators. As with all statistical analyses of complex datasets, complete replication of a set of statistical results should not be expected on a first (or second) exercise in secondary analysis. This occurs for a number of reasons including differences in the handling of missing data, restrictions on cases included in samples for a particular analysis, software coding used to define complex variables, etc. Experience suggests that most discrepancies can ordinarily be resolved by consultation with the study DCC, however this process is labor-intensive for both DCC and Repository staff. It is thus not our policy to resolve every discrepancy that is observed in a dataset integrity check. Thus, we do not attempt to resolve minor or inconsequential discrepancies with published results or discrepancies that involve complex analyses unless staff of the NIDDK Repository suspect that the observed discrepancy suggests that the dataset may have been corrupted in storage, transmission, or processing by repository staff. We do, however, document such discrepancies in footnotes to the dataset integrity check or by highlighting in tables those instances in which

our secondary analyses produced results that were not fully consistent with those reported in the target publication.

**Datasets.** The dataset used for these analyses was m37\_20100104.sas7bdat received from the DCC (with date stamps of 12-23-2010). This SAS dataset was converted to STATA format using Stat/Transfer and output as a STATA data file m37\_20100104.dta: (date stamp: 3-16-2011). Although a SAS format file (formats.sas7bcat) was provided by the DCC, incompatible use of upper and lower case letters prevented a simple translation of value labels using Stat/Transfer. Equivalent STATA value labels were constructed, and they were applied to create a new STATA dataset with value labels (m37\_w\_Labels.dta; time-date stamp: 3-16-2011, 2-42pm).

Comparison of Characteristics of Subjects. Table 1 of the Soliman et al. article reports sample sizes and selected characteristics of CRIC cohort. The archived data were analyzed to produce the same characteristics reported by Soliman et al. Our **Table 1** compares the published results to those obtained from our analysis of the archived data. It will be seen from **Table 1** that our calculations from the archived data are fully equivalent to the published results.

Comparison of Atrial Fibrillation (AF) Prevalence by Selected Characteristics. Table 2 of the Soliman et al. article reports the prevalence of atrial fibrillation for the total population and subpopulations defined by eGFR status, age, gender, and race/ethnicity. As will be seen from our **Table 2**, calculations from the archived dataset yielded results that were identical to those reported in the published article.

**Unadjusted association of AF and selected characteristics.** The first panel of Table 3 in Soliman et al. reports unadjusted association between AF and selected sociodemographic and medical characteristics and the prevalence of atrial fibrillation. Our **Table 3a** compares the published results with those obtained by analysis of the archive CRIC data. With one exception, the results of our calculations are identical to the published results. The one exception occurs for gender. The published OR for female gender is the inverse of the result

<sup>&</sup>lt;sup>1</sup> This same file was re-transmitted in July of 2011 with other data files that included corrections. The AF analysis file in this re-transmission had identical file name, file size, and time-and-date stamp as the original file transmitted in December of 2010.

we obtained. That is to say that rather than females having 0.98 lower odds of reporting atrial fibrillation, we obtain this result for males.

Demographically adjusted association of AF and selected characteristics. Our Table 3b repeats the previous analysis (Table 3a) but the estimated impact of respondent characteristics are adjusted for: age, gender, race (non-Hispanic Black vs. other), and the study center that enrolled the subject. Here again we fully replicate the published findings except for gender. The published results report that females have lower adjusted odds (0.90) than males of reporting AF. We obtain an identical result but for males not females

Multivariable adjusted association of AF and selected characteristics. Table 4 of Soliman et al. report a final model predicting atrial fibrillation as a function of age, gender, education, total cholesterol level, BMI, physical activity, smoking status, and presence of congestive heart failure and other cardiovascular disease.

Our Table 4 compares the published results to our estimated coefficients for the same multivariable logistic regression model fit to the archived data. As Table 4 shows, the results are again identical with the exception of those for gender.<sup>2</sup> The published results for "females" are equivalent to the results we obtained for males.

Conclusion. Our results fully replicate the published findings with the exception of the three instances noted above. The DCC for CRIC has informed us that there is an error in the published tables and that the three calculated results are correct

# References.

[1] Soliman EZ, Prineas RJ, Go AS, Xie D, Lash JP, Rahman M, Ojo A, Teal VL, Jensvold NG, Robinson NL, Dries DL, Bazzano L, Mohler ER, Wright JT, Feldman HI; Chronic Renal Insufficiency Cohort (CRIC) Study Group. Chronic kidney disease and prevalent atrial fibrillation: the Chronic Renal Insufficiency Cohort (CRIC). Am Heart J. 2010 Jun;159(6):1102-7. Erratum in: Am Heart J. 2010 Dec;160(6):1190.

<sup>&</sup>lt;sup>2</sup> There was also a minor deviation in p-values for education (p = 0.06 vs. 0.09).

**TABLE 1**. Characteristics of the CRIC study population: Published versus tabulated results.

CHARACTERISTIC	Published	Calculated
Age (y)	58.55 (10.81)	58.55 (10.81)
Sex (male)	1775 (54%)	1775 (54%)
Race/ethnicity (non-Hispanic black)	1640 (50%)	1640 (50%)
Education		
< high school grad	523 (16%)	523 (16%)
High school grad	649 (20%)	649 (20%)
Post-high school	1028 (31%)	1028 (31%)
College graduate	606 (19%)	606 (19%)
Postgraduate degree	461 (14%)	461 (14%)
Smoker		
Current	470 (14%)	470 (14%)
Former	1392 (43%)	1392 (43%)
Never	1405 (43%)	1405 (43%)
Alcohol use (drinkers)	1310 (40%)	1310 (40%)
Total physical activity (METh/wk)	204.6 (148.33)	204.6 (148.33)
Hypertension	2807 (86%)	2807 (86%)
Diabetes	1486 (45%)	1486 (45%)
Congestive heart failure	328 (10%)	328 (10%)
Cardiovascular Disease	1125 (34%)	1125 (34%)
eGFR (mL/[min1.73m2])	43.6 (13.4)	43.6 (13.4)
Participants with eGFRb < 45mL/(min1.7	1795 (55%)	1795 (55%)
Body mass index (kg/m2)	32.31 (8.0)	32.31 (8.0)
Total cholesterol (mg/dL)	182.8 (43.8)	182.8 (43.8)
Uric acid (mg/dL)	7.4 (1.9)	7.4 (1.9)
hs-CRP (mg/dL)	5.8 (10.2)	5.8 (10.2)
(N)	(3,267)	(3,267)

**TABLE 2.** Prevalence of atrial fibrillation by eGFR, age, sex, and race/ethnicity: Comparison of published results to results calculated from archived dataset.

SUBPOPULATIONS		PUBLISHED		CALCULATED			
SUBPOPULATIONS	N	AF n (%)	P value	N	AF n (%)	P value	
All population	3267	602 (18.4%)		3267	602 (18.4%)		
eGFR (mL/[min 1.73 m2])			<.0010			0.001	
<45	1795	367 (20.4%)		1795	367 (20.4%)		
45+	1472	235 (16.0%)		1472	235 (16.0%)		
Age (y)			<.0001			<0.001	
<40	239	19 (7.9%)		239	19 (7.9%)		
40-49	398	49 (12.3%)		398	49 (12.3%)		
50-59	958	162 (16.9%)		958	162 (16.9%)		
60-69	1217	256 (21.0%)		1217	256 (21.0%)		
70+	455	116 (25.5%)		455	116 (25.5%)		
Sex			0.7807			0.7807	
Male	1775	324 (18.3%)		1775	324 (18.3%)		
Female	1492	278 (18.6%)		1492	278 (18.6%)		
Race/ethnicity			0.0156			0.016	
Non-Hispanic white	1627	273 (16.8%)		1627	273 (16.8%)		
Non-Hispanic black	1640	329 (20.1%)		1640	329 (20.1%)		

**TABLE 3a.** Unadjusted association of AF (atrial fibrillation) and selected sociodemographic and biomedical characteristics of patients: Comparison published results (Table 3, columns 1-3) and calculations from dataset archived at NIDDK Central Repository.

Indonondont Voviobles	PUBLISHED			CALCULATED		
Independent Variables	OR (95% CI)*	P value		OR (95% CI)*	P value	
Age (y)‡	1.03 (1.02-1.04)	<.0001		1.03 (1.02-1.04)	<.001	
Male sex**	0.98 (0.82-1.16)**	0.7805		0.975 (0.817-1.164)**	0.781	
Race (non-Hispanic black vs. other)	1.24 (1.04-1.49)	0.0157		1.24 (1.04-1.49)	0.0155	
Education (reference: post–high school education)						
Less than high school graduate	1.40 (1.09-1.80)	0.0086		1.40 (1.09-1.80)	0.009	
High school graduate	0.86 (0.67-1.12)	0.2673		0.86 (0.67-1.12)	0.267	
College graduate	0.80 (0.61-1.04)	0.099		0.80 (0.61-1.04)	0.099	
Postgraduate degree	0.69 (0.51-0.93)	0.0162		0.69 (0.51-0.93)	0.016	
Total cholesterol (mg/dL)‡	1.00 (0.99-1.00)	0.0006		0.996 (0.994 - 0.998)	0.001	
Uric acid (mg/dL) ‡	1.04 (1.00-1.09)	0.0716		1.040 (0.996-1.093)	0.072	
eGFR (mL/[min 1.73 m <sup>2</sup> ]) (eGFR<45 vs. 45)	1.35 (1.13-1.62)	0.001		1.35 (1.13-1.62)	0.001	
hs-CRP (mg/dL)‡	1.00 (1.00-1.01)	0.2751		1.004 (0.996-1.0125)	0.2751	
Body mass index (kg/m²)‡	1.01 (1.00-1.02)	0.0398		1.01 (1.00-1.02)	0.04	
Physical activity (total MET h/wk)‡	1.00 (1.00-1.00)	<.0001		0.998 (0.997-0.999)	<.001	
Smoking status (reference: never)						
Current	1.38 (1.04-1.82)	0.0237		1.38 (1.04-1.82)	0.024	
Former	1.78 (1.46-2.16)	<.0001		1.78 (1.46-2.16)	<.001	
Alcohol use (drinker vs. other)	0.75 (0.62-0.90)	0.0022		0.75 (0.62-0.90)	0.002	
Hypertension	1.18 (0.91-1.54)	0.2201		1.18 (0.91-1.54)	0.22	
Diabetes	1.25 (1.05-1.49)	0.0139		1.25 (1.05-1.49)	0.014	
Congestive heart failure	5.63 (4.43-7.14)	<.0001		5.63 (4.43-7.14)	<.001	
Any cardiovascular disease	3.48 (2.90-4.17)	<.0001		3.48 (2.90-4.17)	<.001	

<sup>\*</sup> Odds ratios represent unadjusted association of individual variables in the first column with AF.

<sup>\*\*</sup> As discussed in text, the published article reports results as being for FEMALE subjects. Analysis indicates that published results are for MALE subjects.

<sup>‡</sup> The originally published table states that coefficients for continuous variables were odds ratios for a one standard deviation change in independent variable. While this is true for Model 2 (see Table 3b) it is not true for the Model 1 (above). Calculations of unadjusted results shown above are for a single unit change in the independent variable (e.g., one year of age) not 1 sd of change in independent variable. The authors issued a correction noting this fact in Am Heart J. 2010 Dec;160(6):1190.

**TABLE 3b.** Association of AF (atrial fibrillation) and selected sociodemographic and biomedical characteristics of patients controlling for sociodemographic characteristics of sample (age, gender, ethnicity) and clinical site: Comparison of published results (Table 3, columns 1 and 4-5) and calculations from dataset archived at NIDDK Central Repository.

In donon don ( Vorighton	PUBLISI	HED		CALCULATED		
Independent Variables -	OR (95% CI) <sup>†</sup>	P value	OR <sup>†</sup>	95% CI <sup>†</sup>	P value**	
Age (y)‡	1.46 (1.32-1.62)	<.0001	1.464	1.321 - 1.621	<0.001	
Male sex*	0.90 (0.75-1.09)	0.2875	0.903	0.748 - 1.090	0.287	
Race (non-Hispanic black vs. non-Hispanic whit	1.25 (1.03-1.52)	0.0228	1.252	1.032 - 1.518	0.023	
Education (reference: post-high school education)		0.0452			0.045	
Less than high school graduate	1.13 (0.86-1.47)		1.126	0.862 - 1.471		
High school graduate	0.78 (0.60-1.01)		0.771	0.598 - 1.010		
College graduate	0.85 (0.65-1.13)		0.854	0.648 - 1.126		
Postgraduate degree	0.73 (0.53-1.00)		0.728	0.529 - 1.001		
Total cholesterol (mg/dL)‡	0.85 (0.77-0.94)	0.0014	0.853	0.774 - 0.940	0.001	
Uric acid (mg/dL) ‡	1.01 (0.92-1.11)	0.8366	1.010	0.918 - 1.112	0.837	
eGFR (mL/[min 1.73 m2]) (eGFR<45 vs 45)	1.12 (0.92-1.35)	0.271	1.115	0.920 - 1.353	0.271	
hs-CRP (mg/dL)‡	1.02 (0.94-1.12)	0.5922	1.024	0.940 - 1.115	0.592	
Body mass index (kg/m²)‡	1.09 (1.00-1.20)	0.0599	1.092	0.996 - 1.197	0.060	
Physical activity (total MET h/wk)‡	0.85 (0.76-0.95)	0.0056	0.853	0.763 - 0.955	0.006	
Smoking status (reference: never)		0.0001				
Current	1.30 (0.98-1.73)		1.299	0.976 - 1.727		
Former	1.56 (1.27-1.91)		1.560	1.273 - 1.913		
Alcohol use (drinker vs nondrinkers)	0.87 (0.71-1.06)	0.1678	0.870	0.713 - 1.061	0.168	
Hypertension	0.83 (0.63-1.11)	0.2036	0.831	0.625 - 1.105	0.204	
Diabetes	1.11 (0.92-1.33)	0.2828	1.106	0.921 - `1.328	0.283	
Congestive heart failure	5.20 (4.06-6.67)	<.0001	5.205	4.062 - 6.671	<0.001	
Any cardiovascular disease	3.06 (2.53-3.71)	<.0001	3.062	2.529 - 3.708	<0.001	

<sup>\*</sup> As discussed in text, the published article reports these results as being for FEMALE subjects. Analysis indicates that published results are for MALE subjects.

<sup>\*\*</sup> For binary independent variables, p-values are for tests of statistical significance of the estimated logisitc regression coefficeint. For categorical independent variables with 3 or more categories (i.e., education and smoking), p-values are for Wald tests of hypotheses that impact of categories of these variables was zero.

<sup>†</sup> Odds ratios represent age-, sex-, race/ethnicity-, and clinical center–adjusted associations of the individual variables in the first column with AF

<sup>‡</sup> Odds ratios for continuous variables are for 1-SD increase.

TABLE 4. Multivariable adjusted associations of variables with atrial fibrillation: Comparison of published and calculated values.

INDERFNDENT VARIABLES*	PUBLISHE	ED .	CALCULATED			
INDEPENDENT VARIABLES*	OR (95% CI)‡	P value	OR‡	95% CI		P values**
Age (y)†	1.27 (1.13-1.43)	< .0001	1.272	1.131 -	1.430	< 0.001
Male sex***	0.80 (0.65-0.98)	0.0303	0.796	0.648 -	0.979	0.030
Race (non-Hispanic black)	1.07 (0.86-1.34)	0.5283	1.073	0.862 -	1.335	0.528
Education (reference: post-high school education)		0.0662		-		0.093
Less than high school graduate	1.14 (0.86-1.52)		1.141	0.859 -	1.517	
High school graduate	0.76 (0.58-1.01)		0.762	0.578 -	1.009	
College graduate	1.03 (0.77-1.37)		1.025	0.768 -	1.369	
Postgraduate degree	0.84 (0.60-1.17)		0.838	0.600 -	1.170	
Total cholesterol (mg/dL)†	0.93 (0.84-1.02)	0.1243	0.925	0.837 -	1.022	0.124
Body mass index (kg/m²)†	1.04 (0.94-1.14)	0.4809	1.036	0.939 -	1.142	0.481
Physical activity (total MET h/wk)†	0.93 (0.83-1.04)	0.1957	0.927	0.827 -	1.040	0.195
Smoking status (reference: never)		0.0276				0.029
Current	1.15 (0.84-1.56)		1.145	0.843 -	1.556	
Former	1.34 (1.08-1.66)		1.336	1.078 -	1.656	
Congestive heart failure	3.28 (2.47-4.36)	< .0001	3.280	2.468 -	4.356	<0.001
Any cardiovascular disease	1.94 (1.56-2.43)	< .0001	1.943	1.556 -	2.426	<0.001

<sup>\*</sup> Study geographic center was also included in the multivariable model, but their ORs were omitted from this table.

<sup>\*\*</sup> For categorical independent variables., p-values for calculated results are Wald tests of hypotheses that impact of categories of individual variables were zero.

<sup>\*\*\*</sup> As discussed in text, the published article reports these results as being for FEMALE subjects. Analysis indicates that published results are for MALE subjects.

<sup>†</sup> Odds ratios for continuous variables are for 1-SD increase.

<sup>‡</sup> Odds ratios represent the multivariable associations of the individual variables with atrial fibrillation.

# Appendix A

# **PUBLISHED ARTICLE**

Soliman EZ, Prineas RJ, Go AS, Xie D, Lash JP, Rahman M, Ojo A, Teal VL, Jensvold NG, Robinson NL, Dries DL, Bazzano L, Mohler ER, Wright JT, Feldman HI; Chronic Renal Insufficiency Cohort (CRIC) Study Group. Chronic kidney disease and prevalent atrial fibrillation: the Chronic Renal Insufficiency Cohort (CRIC). Am Heart J. 2010 Jun;159(6):1102-7.

Erratum in: Am Heart J. 2010 Dec;160(6):1190.

# Chronic kidney disease and prevalent atrial fibrillation: The Chronic Renal Insufficiency Cohort (CRIC)

Elsayed Z. Soliman, MD, MSc, MS, a Ronald J. Prineas, MD, PhD, Alan S. Go, MD, Dawei Xie, PhD, C James P. Lash, MD, d Mahboob Rahman, MD, Akinlolu Ojo, MD, Val L. Teal, MS, Nancy G. Jensvold, MPH, b Nancy L. Robinson, PhD, <sup>c</sup> Daniel L. Dries, MD, MPH, <sup>g</sup> Lydia Bazzano, MD, PhD, <sup>h</sup> Emile R. Mohler, MD, <sup>i</sup> Jackson T. Wright, MD, PhD, e Harold I. Feldman, MD, MSCE, and Chronic Renal Insufficiency Cohort (CRIC) Study Group Winston-Salem, NC; Oakland, CA; Philadelphia, PA; Chicago, II; Cleveland, OH; Ann Arbor, MI; and New Orleans, LA

**Background** The epidemiology of atrial fibrillation (AF) has been mainly investigated in patients with end-stage renal disease, with limited data on less advanced chronic kidney disease (CKD) stages.

Methods A total of 3,267 adult participants (50% non-Hispanic blacks, 46% women) with CKD from the Chronic Renal Insufficiency Cohort were included in this study. None of the study participants had been on dialysis. Those with self-identified race/ethnicity other than non-Hispanic black or white (n = 323) or those without electrocardiographic data (n = 22) were excluded. Atrial fibrillation was ascertained by a 12-lead electrocardiogram and self-report. Age-, sex-, and race/ethnicityspecific prevalence rates of AF were estimated and compared between subgroups. Cross-sectional associations and correlates with prevalent AF were examined using unadjusted and multivariable-adjusted logistic regression analysis.

**Results** The mean estimated glomerular filtration rate was 43.6 (±13.0) mL/(min 1.73 m<sup>2</sup>). Atrial fibrillation was present in 18% of the study population and in >25% of those ≥70 years old. In multivariable-adjusted models, 1-SD increase in age (11 years) (odds ratio 1.27, CI 95% 1.13-1.43, P < .0001), female sex (0.80, 0.65-0.98, P = .0303), smoking (former vs never) (1.34, 1.08-1.66, P = .0081), history of heart failure (3.28, 2.47-4.36, P < .001), and history of cardiovascular disease (1.94, 1.56-2.43, P < .0001) were significantly associated with AF. Race/ethnicity, hypertension, diabetes, body mass index, physical activity, education, high-sensitivity C-reactive protein, total cholesterol, and alcohol intake were not significantly associated with AF. An estimated glomerular filtration rate <45 mL/(min 1.73 m<sup>2</sup>) was associated with AF in an unadjusted model (1.35, 1.13-1.62, P = .0010), but not after multivariable adjustment (1.12, 0.92-1.35, P = .2710).

**Conclusions** Nearly 1 in 5 participants in Chronic Renal Insufficiency Cohort, a national study of CKD, had evidence of AF at study entry, a prevalence similar to that reported among patients with end-stage renal disease and 2 to 3 times of that reported in the general population. Risk factors for AF in this CKD population do not mirror those reported in the general population. (Am Heart J 2010;159:1102-7.)

From the <sup>a</sup>Department of Epidemiology, Division of Public Health Sciences, Wake Forest University School of Medicine, Winston-Salem, NC, bDivision of Research, Kaiser Permanente of Northern California, Oakland, CA, <sup>c</sup>Center for Clinical Epidemiology and Biostatistics, University of Pennsylvania, Philadelphia, PA, <sup>d</sup>Department of Medicine, University of Illinois at Chicago, Chicago, IL, <sup>e</sup>Department of Medicine, Case Western University, Cleveland, OH, fDepartment of Medicine, University of Michigan, Ann Arbor, MI, <sup>9</sup>Cardiovascular Division, University of Pennsylvania, Philadelphia, PA, <sup>h</sup>Department of Epidemiology, Tulane University School of Public Health and Tropical Medicine, New Orleans, LA, and Department of Medicine, University of Pennsylvania, Philadelphia, PA.

Reprint requests: Elsayed Z. Soliman, MD, MSc, MS, Epidemiological Cardiology Research Center (EPICARE), Wake Forest University School of Medicine, 2000 West

0002-8703/\$ - see front matter © 2010, Mosby, Inc. All rights reserved. doi:10.1016/j.ahj.2010.03.027

Submitted February 5, 2010; accepted March 18, 2010. First St, Piedmont Plaza 2, Suite 505, Winston Salem, NC 27104. E-mail: esoliman@wfubmc.edu

Atrial fibrillation (AF) is the most common sustained arrhythmia in the general population. More than 2.3 million Americans have AF, and the number of cases is expected to rise to 5.6 million by 2050. Atrial fibrillation is one of the strongest risk factors for ischemic stroke and an independent predictor of death.2-6 Whereas AF prevalence in the general population ranges from 1% to 8%<sup>7-9</sup> depending on age and method of AF detection, the estimated prevalence of AF among patients with endstage renal disease (ESRD) has been reported to be between 13% and 23%. 10-13 Because > 26 million US adults have chronic kidney disease (CKD), 14 understanding the prevalence and correlates of AF has important public health, epidemiologic, and clinical implications. Atrial fibrillation and CKD share several common risk factors

(eg, hypertension, diabetes, preexisting cardiovascular

American Heart Journal
Volume 159, Number 6
Soliman et al 1103

disease, obesity, metabolic syndrome). 6,10,12,15-20 Although a high prevalence of AF has been demonstrated in ESRD, there are limited data on the prevalence and correlates of AF in less severe CKD, which is substantially more common than ESRD. 14 Therefore, we examined the prevalence and correlates of AF in a large, diverse cohort of adults with CKD enrolled in the Chronic Renal Insufficiency Cohort (CRIC) study, a multiracial national US prospective study examining risk factors for the progression of kidney disease and cardiovascular disease in CKD patients.

## **Methods**

## Study population

The CRIC study is a prospective cohort of 3,612 participants with CKD. The study design and methods<sup>21</sup> as well as the baseline cohort characteristics<sup>22</sup> have been described elsewhere. Briefly, 7 clinical centers recruited adults who were aged 21 to 74 years and had CKD (but were not on dialysis) using age-based estimated glomerular filtration rate(eGFR) inclusion criteria (eGFR of 20 to 70, 60, or 50 mL/[min 1.73 m<sup>2</sup>] for age ranges 21-44, 45-64 and 65-74 years, respectively). Informed consent was obtained from all participants. Participants with self-identified race/ethnicity other than non-Hispanic black or non-Hispanic white (169 Hispanics and 154 others) or those without electrocardiographic (ECG) data (n = 22) were excluded from this analysis. After all exclusions, the final analytic sample included 3,267 non-Hispanic black and non-Hispanic white participants.

#### Ascertainment of AF

AF was identified in CRIC study from 2 sources: (1) ECGs recorded during the study's baseline visit and (2) participants' responses to a question about history of AF: "Have you ever been diagnosed with or has a doctor or other health professional ever told you that you have atrial fibrillation?" Standard 12-lead ECGs were recorded in all participants by strictly standardized procedures using identical ECG equipment (GE MAC 1200; GE Medical Systems, Milwaukee, WI). The digitally recorded ECGs stored in the ECG machines were transmitted regularly over analogue phone lines to the CRIC ECG Reading Center located at Wake Forest University, Winston-Salem, NC, for analysis using Minnesota ECG classification. <sup>23</sup> In this analysis, we defined *AF* as either presence of AF in the study baseline ECGs or an affirmative response to the AF question.

#### Other clinical variables

At the baseline visit, data on sociodemographic characteristics, medical history, lifestyle behaviors, current medications, and anthropometric measures (eg, height and weight) were obtained. Levels of physical activity were measured based on survey questions regarding different types of activity. Minutes of activity were summed for each discrete activity type, converted to hours for ease of presentation, and multiplied by metabolic equivalent (MET) level.<sup>24,25</sup> Participants who report drinking alcohol more than once a month during the 12 months preceding the baseline visit were classified as alcohol drinkers. History of chronic heart failure and history of cardiovascular

disease (angina, myocardial infarction, or coronary revascularization) were collected from the medical history questionnaire completed at the baseline visit. Standardized blood pressure measurements were obtained using a previously validated protocol<sup>26</sup> and calibrated sphygmomanometers.<sup>27</sup> Hypertension was defined as systolic blood pressure ≥140 mm Hg, diastolic blood pressure ≥90 mm Hg, or self-reported use of antihypertensive medications.<sup>28</sup> Diabetes was defined as a fasting glucose ≥126 mg/dL, random glucose ≥200 mg/dL, or use of insulin or other antidiabetic medication.<sup>29</sup> Serum creatinine was measured at the University of Pennsylvania laboratory and calibrated based on standard measurements made from the Cleveland Clinic Foundation laboratory in Cleveland, OH.30 Estimated glomerular filtration rate was calculated using the simplified Modification of Diet in Renal Disease equation.<sup>31</sup> Other blood assays such as cholesterol, serum uric acid, and high-sensitivity C-reactive protein (hs-CRP) were conducted in the CRIC Study's central laboratory.

#### Statistical analysis

Frequency distributions of all variables were first inspected to identify anomalies and outliers possibly caused by measurement artifacts. Continuous data were described by their mean and SD; and categorical data, as proportions (percentage). The prevalence of AF at the study baseline was examined by eGFR (dichotomized using 45 mL/[min 1.73 m<sup>2</sup>] as a cutoff point), age, sex, and race/ethnicity. A series of logistic regression analysis was used to identify correlates of AF. Our approach was first to examine unadjusted associations between individual sociodemographic and clinical variables with AF. Next, we examined the same variables after adjustment for age, sex, race/ethnicity, and study center. Finally, we conducted a final multivariable model that included all the variables that were significantly associated with AF after adjustment for the demographic variables. Age, sex race/ethnicity, and study center were forced into the final model. A 2-tailed  $P \le .05$  was considered significant at  $\alpha$  level of 0.05. SAS version 9.1 (SAS Institute, Inc, Cary, NC) was used in all analyses.

The CRIC Study is supported by cooperative agreement project grants UL1 RR-024134, UL1 RR-025005, M01 RR-16500, UL1 RR-024989, M01 RR-000042, UL1 RR-024986, UL1RR029879, RR-05096, and UL1 RR-024131 from the National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health. The authors are solely responsible for the design and conduct of this study, all study analyses, the drafting and editing of the article, and its final contents.

#### Results

Among the 3,267 participants included in this analysis, 1,627 were non-Hispanic white and 1,640 were non-Hispanic black (Table I). Mean age was 58.6 years, and 46% were women. More than 86% were hypertensive, 45% were diabetic, and 34% had a self-reported history of cardiovascular disease. The mean eGFR was 43.6 ±13.4 mL/(min 1.73 m<sup>2</sup>); approximately 55% of the study population had an eGFR <45 mL/(min 1.73 m<sup>2</sup>).

AF was present in 602 (18%) participants (Table II). Most AF cases were detected by self report. Electrocardiographically-detected AF was present in only 40 participants.

Table I. Characteristics of the study population

	Mean (SD) or n (%). N = 3267
Age (y)	58.55 (10.81)
Sex (male)	1775 (54%)
Race/ethnicity (non-Hispanic black) Education	1640 (50%)
Less than high school grad	523 (16%)
High school grad	649 (20%)
Post–high school education	1028 (31%)
College graduate	606 (19%)
Postgraduate degree	461 (14%)
Smoker	
Current	470 (14%)
Former	1392 (43%)
Never	1405 (43%)
Alcohol use (drinkers)	1310 (40%)
Total physical activity (MET h/wk)	204.6 (148.33)
Hypertension	2807 (86%)
Diabetes	1486 (45%)
Congestive heart failure	328 (10%)
Cardiovascular Disease	1125 (34%)
eGFR (mL/[min 1.73 m <sup>2</sup> ])	43.6 (13.4)
Participants with eGFR <45 mL/(min 1.73 m <sup>2</sup> )	1795 (55%)
Body mass index (kg/m²)	32.31 (8.0)
Total cholesterol (mg/dL)	182.8 (43.8)
Uric acid (mg/dL)	7.4 (1.9)
hs-CRP (mg/dL)	5.8 (10.2)

Participants with eGFR <45 mL/(min 1.73 m<sup>2</sup>) had a higher prevalence of AF compared with participants with eGFR  $\geq$ 45 mL/(min 1.73 m<sup>2</sup>) (20.4% vs 16.0%, P = .001). When age was categorized into decades (<40, 40-49, 50-59, 60-69,  $\geq$ 70 years), the prevalence of AF across decades was significantly greater with higher age (7.9%, 12.3%, 16.9%, 21.0%, and 25.5%, respectively; P < .0001). There was no statistically significant difference in the prevalence of AF between women and men (18.6% vs 18.3%, P = .78). Blacks had a significantly higher prevalence of AF compared with whites (20.1% vs 16.8%, P = .02).

In univariate analyses, older age, eGFR <45 mL/(min 1.73 m<sup>2</sup>), black race, higher levels of total cholesterol, higher body mass index, lack of physical activity, smoking, drinking, diabetes, history of heart failure, and history of cardiovascular disease were significantly associated with a higher odds of prevalent AF. On the other hand, sex, uric acid, hs-CRP, and hypertension were not significantly associated with AF in the sample. Compared with having high school education, less than high school education was associated with a higher prevalence of AF, whereas postgraduate education was associated with a lower prevalence of AF. After adjustment for age, sex, race, and study centers, the strength of associations between AF with eGFR level, diabetes, educational attainment, body mass index, and drinking status became attenuated (Table III).

In the final multivariable model, only older age (per 1-SD increase) (odds ratio [OR] 1.27, 95% CI 1.13-1.43), female sex (OR 0.80, 95% CI 0.65-0.98), smoking (former

**Table II.** Prevalence of AF by eGFR, age, sex, and race/ethnicity

	N = 3267	<b>AF</b> n (%)	P value
All population	3267	602 (18.4%)	
eGFR (mL/[min 1.73 m <sup>2</sup> ])			.0010
<45	1795	367 (20.4%)	
≥45	1472	235 (16.0%)	
Age (y)			<.0001
<40	239	19 (7.9%)	
40-49	398	49 (12.3%)	
50-59	958	162 (16.9%)	
60-69	1217	256 (21.0%)	
≥70	455	116 (25.5%)	
Sex			.7807
Male	1775	324 (18.3%)	
Female	1492	278 (18.6%)	
Race/ethnicity			.0156
Non-Hispanic white	1627	273 (16.8%)	
Non-Hispanic black	1640	329 (20.1%)	

vs never) (OR 1.34, 95% CI 1.08-1.66), history of heart failure (OR 3.28, 95% CI 2.47-4.36), and history of cardiovascular disease (OR 1.94, 95% CI 1.56-2.43) were significantly associated with AF (Table IV).

#### **Discussion**

This study addressed the prevalence and correlates of prevalent AF in a well-defined multiracial cohort of US individuals with CKD who are not receiving long-term dialysis treatments. Most of the previous studies that examined associations between AF and CKD were conducted either in ESRD patients on dialysis or in a general population sample, or were restricted to a single racial/ethnic group. 10-13,32,33 Our study revealed 3 main findings. First, the prevalence of AF was high in this sample of participants with mild-moderate CKD, affecting nearly 1 in 5 persons overall and >1 in 4 participants  $\geq$  70 years old. This prevalence estimate is 2- to-3-fold higher than estimates from the general population using AF ascertainment methods similar to those used in our study. 8 In the REGARDS study, a national US cohort study with >30,000 participants, the prevalence of AF was only 7.8% despite the fact that REGARDS participants were approximately 7 years older than CRIC Study participants.

Second, the high prevalence of AF observed in our study sample is similar to estimates among patients with ESRD receiving long-term dialysis, which range from 13% to 23%. <sup>10-13</sup> This finding suggests that processes influencing the development of AF likely occur early in the course of CKD. Interestingly, when examining eGFR level and prevalent AF, the graded association with lower eGFR was no longer significant after adjustment for age, sex, race/ethnicity, and study center. Similar results were obtained when eGFR was modeled as a continuous variable (1-SD increase) or categorized into different strata (data not shown). Because CKD is substantially

American Heart Journal
Volume 159, Number 6
Soliman et al 1105

**Table III.** Unadjusted and demographic-adjusted associations with AF in logistic regression analysis

	Model 1: una	djusted	Model 2: demograp	ohic adjusted
	OR (95% CI)*	P value	OR (95% CI) <sup>†</sup>	P value
Age (y) <sup>‡</sup>	1.03 (1.02-1.04)	<.0001	1.46 (1.32-1.62)	<.0001
Female sex	0.98 (0.82-1.16)	.7805	0.90 (0.75-1.09)	.2875
Race (non-Hispanic black vs non-Hispanic white)	1.24 (1.04-1.49)	.0157	1.25 (1.03-1.52)	.0228
Education (reference: post-high school education)				.0452
Less than high school graduate	1.40 (1.09-1.80)	.0086	1.13 (0.86-1.47)	
High school graduate	0.86 (0.67-1.12)	.2673	0.78 (0.60-1.01)	
College graduate	0.80 (0.61-1.04)	.0990	0.85 (0.65-1.13)	
Postgraduate degree	0.69 (0.51-0.93)	.0162	0.73 (0.53-1.00)	
Total cholesterol (mg/dL) <sup>‡</sup>	1.00 (0.99-1.00)	.0006	0.85 (0.77-0.94)	.0014
Uric acid (mg/dL) <sup>‡</sup>	1.04 (1.00-1.09)	.0716	1.01 (0.92-1.11)	.8366
eGFR (mL/[min 1.73 m <sup>2</sup> ]) (eGFR<45 vs ≥45)	1.35 (1.13-1.62)	.0010	1.12 (0.92-1.35)	.2710
hs-CRP (mg/dL) <sup>‡</sup>	1.00 (1.00-1.01)	.2751	1.02 (0.94-1.12)	.5922
Body mass index (kg/m²)‡	1.01 (1.00-1.02)	.0398	1.09 (1.00-1.20)	.0599
Physical activity (total MET h/wk) <sup>‡</sup>	1.00 (1.00-1.00)	<.0001	0.85 (0.76-0.95)	.0056
Smoking status (reference: never)				.0001
Current	1.38 (1.04-1.82)	.0237	1.30 (0.98-1.73)	
Former	1.78 (1.46-2.16)	<.0001	1.56 (1.27-1.91)	
Alcohol use (drinker vs nondrinkers)	0.75 (0.62-0.90)	.0022	0.87 (0.71-1.06)	.1678
Hypertension	1.18 (0.91-1.54)	.2201	0.83 (0.63-1.11)	.2036
Diabetes	1.25 (1.05-1.49)	.0139	1.11 (0.92-1.33)	.2828
Congestive heart failure	5.63 (4.43-7.14)	<.0001	5.20 (4.06-6.67)	<.0001
Any cardiovascular disease	3.48 (2.90-4.17)	<.0001	3.06 (2.53-3.71)	<.0001

<sup>\*</sup>Odds ratios represent unadjusted association of individual variables in the first column with AF.

**Table IV.** Multivariable-adjusted associations with AF in logistic regression analysis\*

	OR (95% CI)*	P value
Age (y)	1.27 (1.13-1.43)	<.0001
Female sex	0.80 (0.65-0.98)	.0303
Race (non-Hispanic black vs non-Hispanic white)	1.07 (0.86-1.34)	.5283
Education (reference: post-high school education)		.0662
Less than high school graduate	1.14 (0.86-1.52)	
High school graduate	0.76 (0.58-1.01)	
College graduate	1.03 (0.77-1.37)	
Postgraduate degree	0.84 (0.60-1.17)	
Total cholesterol (mg/dL)	0.93 (0.84-1.02)	.1243
Body mass index (kg/m²)	1.04 (0.94-1.14)	.4809
Physical activity (total MET h/wk)	0.93 (0.83-1.04)	.1957
Smoking status (reference: never)		.0276
Current	1.15 (0.84-1.56)	
Former	1.34 (1.08-1.66)	
Congestive heart failure	3.28 (2.47-4.36)	<.0001
Any cardiovascular disease	1.94 (1.56-2.43)	<.0001

Study geographic center was also in the multivariable model, but the ORs were omitted from the table.

more common than ESRD in the United States, these findings are of particular significance from clinical and public health perspectives.

Third, risk factors for AF in this CKD population do not mirror those reported in the general population. In our multivariable logistic regression analysis, although selected risk factors for AF in the general population were independent correlates in our sample (ie, older age, heart failure, other cardiovascular disease), others were not (ie, race/ethnicity, hypertension, diabetes, body mass index, physical activity, education, hs-CRP, total cholesterol, and alcohol intake). These findings suggest the need for further investigation of the risk factors for AF in the setting of CKD, as various AF risk prediction models developed in the general population<sup>34</sup> may not apply.

Of interest, we found that black race was significantly associated with a higher prevalence of AF in crude analyses, but was no longer a significant correlate after adjustment for other covariates. Although this observation contrasts with the reported higher prevalence of AF among whites in the general population, 1,9,35-37 our finding is consistent with the high rate of stroke among blacks, 38 the high prevalence of AF and stroke risk factors among blacks, and the strong association between AF and stroke.<sup>39-42</sup> The observed prevalence of ethnic/racial distribution of AF in our study is consistent with the possibility that studies of the general population may have disproportionately underdiagnosed AF in nonwhite populations. <sup>7,8,43</sup> Underdiagnosis of AF in blacks might be a result of black having a higher prevalence of paroxysmal or asymptomatic AF, the difficult-to-detect

<sup>†</sup> Odds ratios represent age-, sex-, race/ethnicity-, and clinical center-adjusted associations of the individual variables in the first column with AF each variable.

<sup>‡</sup>Odds ratios for continuous variables are for 1-SD increase.

<sup>\*</sup>Odds ratios represent the multivariable associations of the individual variables that were significant in the demographic-adjusted models.

patterns of AF.<sup>7,8</sup> Future longitudinal evaluation of incident AF is needed among large, diverse populations with CKD to provide further clarification of the racial/ethnic epidemiology of AF in the setting of CKD.

The strong and unique association of AF with CKD could be explained by the fact that AF and CKD share a number of risk factors. 6,10,12,15-20,32 Although mechanical stress on atria due to volume overload could be the mediating factor that leads to development of AF in patients with ESRD, this may not be the case in less advanced stages. One possible mechanism for a higher prevalence of AF in early stages of CKD could be related to inflammation.<sup>36</sup> Elevated levels of inflammatory markers have been reported in CKD even in its early stages, 44,45 inflammatory markers predict progression of kidney dysfunction, 46,47 and inflammation plays a significant role in the pathogenesis of AF. 48,49 Nevertheless, the negative association between high hs-CRP (an inflammatory marker) with AF in our study is not concordant with such an explanation. It is not clear, however, whether other inflammatory markers other than hs-CRP have stronger associations with AF or not, a possibility that needs testing.

Our results should be interpreted in the context of a number of limitations. As a cross-sectional analysis, we cannot establish a causal inference between CKD and AF or the temporal sequence of the 2 conditions. In addition, residual confounding might have affected some of the associations in the multivariable models. However, we adjusted for many of the most common risk factors for AF. Furthermore, we controlled for the geographic location of the study clinical centers (7 clinical centers) to adjust for possible differences in unmeasured characteristics of the participants related to the residence location of care.

Standard 12-lead ECG, which was 1 of the 2 AF ascertainment methods in our study, has a major limitation in detecting paroxysmal AF, which is common among CKD patients. 11,50 We supplemented ECG data with self-reported AF to increase the sensitivity of AF ascertainment. Defining AF cases as "the presence of AF by self report and/or ECG" has been shown as a more sensitive method to detect AF. 8 Self-report is a common method for AF ascertainment in epidemiologic studies, and it is known that the associations of morbidity and mortality with self-reported AF are similar to those with ECG-detected AF. 37,51 Having said that, because we could not validate the self-reported AF, there could be some misclassification of AF using this method, which is another study limitation.

Although it would be interesting to stratify AF correlates by the method of AF detection (ECG vs self-report), the small number of AF detected by ECG alone did not allow us to make appropriate inferences because of statistical power considerations. Despite these limitations, this analysis provided a number of significant

findings that shed light on the epidemiology of AF in patients with pre-ESRD.

In conclusion, the prevalence of AF in patients with less advanced CKD is very high and is similar to that observed in patients with ESRD. Many known predictors of AF observed in the general population were not significantly correlated with AF in the setting of CKD. These findings emphasize the underappreciated clinical and public health burden of AF among individuals with CKD and the need to delineate additional predictors of developing AF in CKD to provide more robust AF risk prediction models for patients with kidney dysfunction.

# **Acknowledgements**

We thank the CRIC participants, staff, and investigators for their contributions to CRIC study.

#### References

- Go AS, Hylek EM, Phillips KA, et al. Prevalence of diagnosed atrial fibrillation in adults: national implications for rhythm management and stroke prevention: the AnTicoagulation and Risk Factors in Atrial Fibrillation (ATRIA) Study. JAMA 2001;285(18):2370-5.
- Benjamin EJ, Wolf PA, D'Agostino RB, et al. Impact of atrial fibrillation on the risk of death: the Framingham Heart Study. Circulation 1998;98:946-52.
- Dries DL, Exner DV, Gersh BJ, et al. Atrial fibrillation is associated with an increased risk for mortality and heart failure progression in patients with asymptomatic and symptomatic left ventricular systolic dysfunction: a retrospective analysis of the SOLVD trials. Studies of Left Ventricular Dysfunction. J Am Coll Cardiol 1998;32:695-703.
- Wolf PA, Mitchell JB, Baker CS, et al. Impact of atrial fibrillation on mortality, stroke, and medical costs. Arch Intern Med 1998;158: 229-34.
- Ott A, Breteler MM, de Bruyne MC, et al. Atrial fibrillation and dementia in a population-based study. The Rotterdam Study. Stroke 1997;28:316-21.
- Fabbian F, Catalano C, Lambertini D, et al. Clinical characteristics associated to atrial fibrillation in chronic hemodialysis patients. Clin Nephrol 2000;54:234-9.
- Soliman EZ, Prineas RJ, Case D, et al. Ethnic distribution of electrocardiographic predictors of atrial fibrillation and its impact on understanding the ethnic distribution of ischemic stroke in the Atherosclerosis Risk in Communities Study (ARIC). Stroke 2009;40: 1204-11.
- Prineas RJ, Soliman EZ, Howard G, et al. The sensitivity of the methods of detection of atrial fibrillation in population studies affects group-specific prevalence estimates: ethnic and regional distribution of atrial fibrillation in REGARDS study. J Epidemiol 2009;19(4): 177-81
- Alonso A, Agarwal SK, Soliman EZ, et al. Incidence of atrial fibrillation in whites and African-Americans: the Atherosclerosis Risk in Communities (ARIC) study. Am Heart J 2009;158(1):111-7.
- Vazquez E, Sanchez-Perales C, Borrego F, et al. Influence of atrial fibrillation on the morbido-mortality of patients on hemodialysis. Am Heart J 2000;140:886-90.
- Zebe H. Atrial fibrillation in dialysis patients. Nephrol Dial Transplant 2000;15:765-8.

- Ansari N, Manis T, Feinfeld DA. Symptomatic atrial arrhythmias in hemodialysis patients. Ren Fail 2001;23:71-6.
- Genovesi S, Pogliani D, Faini A, et al. Prevalence of atrial fibrillation and associated factors in a population of long-term hemodialysis patients. Am J Kidney Dis 2005;46:897-902.
- Coresh J, Selvin E, Stevens LA, et al. Prevalence of chronic kidney disease in the United States. JAMA 2007;298:2038-47.
- Foley RN, Parfrey PS, Kent GM, et al. Long-term evolution of cardiomyopathy in dialysis patients. Kidney Int 1998;54:1720-5.
- Wang TJ, Parise H, Levy D, et al. Obesity and the risk of new-onset atrial fibrillation. Jama 2004;292:2471-7.
- Watanabe H, Tanabe N, Watanabe T, et al. Metabolic syndrome and risk of development of atrial fibrillation: the Niigata preventive medicine study. Circulation 2008;117:1255-60.
- Fliser D, Pacini G, Engelleiter R, et al. Insulin resistance and hyperinsulinemia are already present in patients with incipient renal disease. Kidney Int 1998;53:1343-7.
- Levin A, Djurdjev O, Barrett B, et al. Cardiovascular disease in patients with chronic kidney disease: getting to the heart of the matter. Am J Kidney Dis 2001;38:1398-407.
- Chen J, Muntner P, Hamm LL, et al. The metabolic syndrome and chronic kidney disease in U.S. adults. Ann Intern Med 2004;140: 167-74.
- Feldman HI, Appel LJ, Chertow GM, et al. The Chronic Renal Insufficiency Cohort (CRIC) Study: design and methods. J Am Soc Nephrol 2003;14(Suppl):S148-53.
- Lash JP, Go AS, Appel LJ, et al. Chronic Renal Insufficiency Cohort (CRIC) Study: baseline characteristics and associations with kidney function. Clin J Am Soc Nephrol 2009;4(8):1302-11.
- Prineas RJ, Crow RS, Blackburn H. The Minnesota code manual of electrocardiographic findings. Boston (Mass): John Wright PSG, Inc.; 1982
- Ainsworth BE, Haskell WL, Whitt MC, et al. Compendium of physical activities: an update of activity codes and MET intensities. Med Sci Sports Exerc 2000;32(Suppl 9):S498-504.
- Bertoni AG, Whitt-Glover MC, Chung H, et al. The association between physical activity and subclinical atherosclerosis. The Multi-Ethnic Study of Atherosclerosis. Am J Epidemiol 2009;169(4): 444-54
- 26. Perloff D, Grim C, Flack J, et al. Human blood pressure determination by sphygmomanometry. Circulation 1993;88:2460-70.
- Ma Y, Temprosa M, Fowler S, et al. Evaluating the accuracy of an aneroid sphygmomanometer in a clinical trial setting. Am J Hypertens 2009;22:263-6.
- Chobanian AV, Bakris GL, Black HR, et al. The seventh report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure: the JNC 7 report. JAMA 2003; 289:2560-72.
- American Diabetes Association. Diagnosis and classification of diabetes mellitus. Diabetes Care 2006;29(Suppl 1):S43-8.
- Pauca AL, O'Rourke MF, Kon ND. Prospective evaluation of a method for estimating ascending aortic pressure from the radial artery pressure waveform. Hypertension 2001;38:932-7.
- Levey AS, Bosch JP, Lewis JB, et al. A more accurate method to estimate glomerular filtration rate from serum creatinine: a new prediction equation. Modification of Diet in Renal Disease Study Group. Ann Intern Med 1999;130:461-70.

- Watanabe H, Watanabe T, Sasaki S, et al. Close bidirectional relationship between chronic kidney disease and atrial fibrillation: the Niigata preventive medicine study. Am Heart J 2009;158(4):629-36.
- Iguchi Y, Kimura K, Kobayashi K, et al. Relation of atrial fibrillation to glomerular filtration rate. Am J Cardiol 2008;102(8):1056-9.
- Schnabel RB, Sullivan LM, Levy D, et al. Development of a risk score for atrial fibrillation (Framingham Heart Study): a community-based cohort study. Lancet 2009;373(9665):739-45.
- Ruo B, Capra AM, Jensvold NG, et al. Racial variation in the prevalence of atrial fibrillation among patients with heart failure: the Epidemiology, Practice, Outcomes, and Costs of heart failure (EPOCH) study. J Am Coll Cardiol 2004;43:429-35.
- Haywood LJ, Ford CE, Crow RS, et al, for the ALLHAT Collaborative Research Group. Atrial fibrillation at baseline and during follow-up in ALLHAT (Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial). J Am Coll Cardiol 2009;54(22):2023-31.
- Psaty BM, Manolio TA, Kuller LH, et al. Incidence and risk factors for atrial fibrillation in older adults. Circulation 1997;96:2455-61.
- Kissela B, Schneider A, Kleindorfer D, et al. Stroke in a biracial population: the excess burden of stroke among blacks. Stroke 2004; 35:426-31.
- Hart RG. Stroke prevention in atrial fibrillation. Curr Cardiol Rep 2000;2:51-5.
- 40. Flegel KM, Shipley MJ, Rose G. Risk of stroke in non-rheumatic atrial fibrillation. Lancet 1987;1:526-9.
- Wolf PA, Abbott RD, Kannel WB. Atrial fibrillation as an independent risk factor for stroke: the Framingham Study. Stroke 1991;22:983-8.
- Levy S, Maarek M, Coumel P, et al. Characterization of different subsets of atrial fibrillation in general practice in France: the ALFA study. The College of French Cardiologists. Circulation 1999;99:3028-35.
- Soliman EZ, Alonso A, Goff Jr DC. Atrial fibrillation and ethnicity: the known, the unknown, and the paradox. Future Cardiol 2009;5(6): 547-56.
- Shlipak MG, Fried LF, Crump C, et al. Elevations of inflammatory and procoagulant biomarkers in elderly persons with renal insufficiency. Circulation 2003;107:87-92.
- Landray MJ, Wheeler DC, Lip GY, et al. Inflammation, endothelial dysfunction, and platelet activation in patients with chronic kidney disease: the chronic renal impairment in Birmingham (CRIB) study. Am J Kidney Dis 2004;43:244-53.
- Bologa RM, Levine DM, Parker TS, et al. Interleukin-6 predicts hypoalbuminemia, hypocholesterolemia, and mortality in hemodialysis patients. Am J Kidney Dis 1998;32:107-14.
- Fried L, Solomon C, Shlipak M, et al. Inflammatory and prothrombotic markers and the progression of renal disease in elderly individuals. J Am Soc Nephrol 2004;15(12):3184-91.
- Chung MK, Martin DO, Sprecher D, et al. C-reactive protein elevation in patients with atrial arrhythmias: inflammatory mechanisms and persistence of atrial fibrillation. Circulation 2001;104:2886-91.
- Aviles RJ, Martin DO, Apperson-Hansen C, et al. Inflammation as a risk factor for atrial fibrillation. Circulation 2003;108:3006-30010.
- Kimura K, Tabei K, Asano Y, et al. Cardiac arrhythmics in hemodialysis patients. A study of incidence and contributary factors. Nephron 1989;53:201-7.
- Furberg CD, Psaty BM, Manolio TA, et al. Prevalence of atrial fibrillation in elderly subjects (the Cardiovascular Health Study). Am J Cardiol 1994;74:236-41.

#### Correction

In the article "Chronic kidney disease and prevalent atrial fibrillation: The Chronic Renal Insufficiency Cohort (CRIC)" (Am Heart J 2010:159;1102-7), the authors would like to correct errors in their article. The errors appear in the Methods section and in Table III.

The atrial fibrillation (AF) question mentioned under AF Ascertainment should be corrected as follows: "Have you ever been diagnosed with or has a doctor or other health professional ever told you that you have atrial fibrillation or atrial flutter (an irregular heart rhythm)?" The published text stops at "atrial fibrillation" with omission of "an atrial flutter (irregular heart rhythm)." The authors write: "While this distinction may not have had major influence on our estimated prevalence of AF, it is possible that the lack of specificity of the question increased the reported prevalence beyond what it would have been if the question had only asked about AF."

The authors continue: "The odds ratios for the continuous variables in the first column of Table III are per 1-unit increase not per 1-standard deviation (1-SD) as in the rest of the table. The ORs and 95% confidence interval for 1-SD increase in age (year), total cholesterol (mg/dL), uric acid (mg/dL), hs-CRP (mg/dL), body mass index (kg/m $^2$ ), and physical activity (total MET h/wk) should be 1.44 (1.30-1.59), 0.85 (0.77-0.93), 1.09 (0.99-1.19), 1.05 (0.96-1.13), 1.09 (1.00-1.19), and 0.77 (0.69-0.86), respectively. The P values associated with these ORs are stated correctly in the table. We apologize for any confusion or inconvenience this has caused."

# APPENDIX B STATA output for Analyses

\_\_\_\_\_

name: <unnamed>

log: Z:\CRIC\AnalysisData\MS037\Label\_Run\_Output.log

log type: text

opened on: 16 Mar 2011, 14:42:44

. clear all

. \*pause on

. use Z:\CRIC\AnalysisData\MS037\m37\_20100104.dta, clear

. \*describe

. #delimit ;

delimiter now;

- . label define yesno 0"No" 1"Yes";
- . label values mirevasc chf anycvd alcoh\_use hypertension hichol diabetes alcoh37 yesno;
- . describe mirevasc chf anycvd alcoh\_use hypertension hichol diabetes alcoh37;

variable name	storage type	display format	value label	variable label
mirevasc	byte	%8.0g	yesno	myocardial infarction/prior revasc (y/n)
chf	byte	%8.0g	yesno	congestive heart failure (y/n)
anycvd	byte	%8.0g	yesno	cardio-vascular disease (y/n)
alcoh_use	byte	%8.0g	yesno	alcohol use (medhx)
hypertension	byte	%8.0g	yesno	hypertension $(y/n)$
hichol	byte	%8.0g	yesno	high cholesterol
diabetes	byte	%8.0g	yesno	diabetes
alcoh37	byte	%8.0g	yesno	alcohol use

- . tab1 mirevasc chf anycvd alcoh\_use hypertension hichol diabetes alcoh37;
- -> tabulation of mirevasc

Cum.	Percent	Freq.	myocardial   infarction/   prior   revasc   (y/n)
77.66 100.00	77.66 22.34	2,537 730	No   Yes
	100.00	3,267	Total

## -> tabulation of chf

congestive   heart   failure   (y/n)	Freq.	Percent	Cum.
No   Yes	2,939 328	89.96 10.04	89.96 100.00
Total	3,267	100.00	

# -> tabulation of anycvd

cardio-vasc   ular   disease   (y/n)	Freq.	Percent	Cum.
No   Yes	2,142 1,125	65.56 34.44	65.56 100.00
Total	3,267	100.00	

# -> tabulation of alcoh\_use

alcohol use   (medhx)	Freq.	Percent	Cum.
No   Yes	1,155 2,112	35.35 64.65	35.35 100.00
Total	3,267	100.00	

# -> tabulation of hypertension

hypertensio n (y/n)	   Freq.	Percent	Cum.
No Yes	458 2,807	14.03 85.97	14.03 100.00
Total	3,265	100.00	

# -> tabulation of hichol

high   cholesterol	Freq.	Percent	Cum.
No   Yes	619 2,648	18.95 81.05	18.95 100.00
Total	3,267	100.00	

#### -> tabulation of diabetes

diabetes	Freq.	Percent	Cum.
No Yes	1,781 1,486	54.51 45.49	54.51 100.00
Total	3,267	100.00	

## -> tabulation of alcoh37

alcohol use	Freq.	Percent	Cum.
No Yes	1,957 1,310	59.90 40.10	59.90 100.00
Total	3,267	100.00	

- . \*pause;
- . label define sex 1"Male" 2"Female" 98"Other";
- . label values sex sex;
- . describe sex;

variable name	_	display format	value label	variable label
sex	byte	%8.0g	sex	sex

. tab sex;

sex	Freq.	Percent	Cum.
Male Female	1,775   1,492	54.33 45.67	54.33 100.00
Total	3,267	100.00	

- . label define race\_ethnicity\_cat2a 1"Non-Hispanic White" 2"Non-Hispanic
- > Black" 3"Hispanic" 4"Other";
- . label values race\_ethnicity\_cat2 race\_ethnicity\_cat2a;
- . describe race\_ethnicity\_cat2;

storage variable name type		value label	variable label	
race_ethnicit~2 byte	%20.0g	race_ethni	city_cat2a race ethnicity category 2	

. tab race\_ethnicity\_cat2;

race eth cate	nicity gory 2	   Freq	. Percent	Cum.
Non-Hispanic	White Black	1,62		49.80 100.00
	Total	3,26	7 100.00	

- . \*pause;
- . label define edu\_cat\_1a
- > 1"0-6th grade"
- > 2"7-12 grade, no diploma"
- > 3"HS grad or equiv"
- > 4"Tech-Voc degree"
- > 5"Some college, no degree"
- > 6"College grad"
- > 7"Prof or grad degree";
- . label values edu\_cat\_1 edu\_cat\_1a;
- . describe edu\_cat\_1;

variable name	storage type		value label	variable label
edu_cat_1	byte	%23.0g	edu_cat_1a	education category 1(categorical)

. tab edu\_cat\_1;

education category 1(categorical)	   Freq.	Percent	Cum.
0-6th grade	27	0.83	0.83
7-12 grade, no diploma	496	15.18	16.01
HS grad or equiv	649	19.87	35.87
Tech-Voc degree	172	5.26	41.14
Some college, no degree	856	26.20	67.34
College grad	606	18.55	85.89
Prof or grad degree	461	14.11	100.00
Total	3,267	100.00	

- . \*pause;
- . label define age\_cat\_1a
- > 1"< 30"
- > 2"30-39"
- > 3"40-49"
- > 4"50-59"
- > 5"60-69"
- > 6"70+";
- . label values age\_cat\_1 age\_cat\_1a;

. describe age\_cat\_1;

variable name	_	display format	value label	variable label
age_cat_1	byte	%8.0g	age_cat_1a	age category 1

. tab age\_cat\_1;

age category 1	   Freq.	Percent	Cum.
< 30 30-39 40-49 50-59 60-69 70+	49   190   398   958   1,217   455	1.50 5.82 12.18 29.32 37.25 13.93	1.50 7.32 19.50 48.82 86.07 100.00
Total	+   3,267	100.00	

- . \*pause;
- . label define age\_cat\_2a
- > 1"21-44"
- > 2"45-64"
- > 3"65+"
- > 9"Total ???";
- . label values age\_cat\_2 age\_cat\_2a;
- . describe age\_cat\_2;

variable name		display format	value label	variable label
age_cat_2	byte	%9.0g	age_cat_2a	age category 2

. tab age\_cat\_2;

age   category 2	Freq.	Percent	Cum.
21-44   45-64   65+	410 1,885 972	12.55 57.70 29.75	12.55 70.25 100.00
Total	3,267	100.00	

- . \*pause;
- . label define smoke100a 0"Non-Smoker";
- . label values smoke100 smoke100a;
- . describe smoke100;

variable name	storage type		value label	variable label
smoke100	byte	%10.0g	smoke100a	smoked 100 cigarettes

. tab smoke100;

smoked 100   cigarettes	Freq.	Percent	Cum.
Non-Smoker   Smoker	1,405 1,862	43.01 56.99	43.01 100.00
Total	3,267	100.00	

- . label define smokenow 0"Not current smoker" 1"Yes current smoker";
- . label values smokenow smokenow;
- . describe smokenow;

variable name	_		value label	variable label
smokenow	byte	%18.0g	smokenow	current smoker

. tab smokenow;

current smoker	Freq.	Percent	Cum.
Not current smoker   Yes current smoker	2,797 470	85.61 14.39	85.61 100.00
Total	3,267	100.00	

- . label define egfr\_roche\_cat\_baseline
- > 1 "<30" 2 "30-39" 3 "40-49" 4 "50-59" 5 "60+" 9 "Total ???";</pre>
- . label values egfr\_roche\_cat\_baseline egfr\_roche\_cat\_baseline;
- . describe egfr\_roche\_cat\_baseline;

variable name	orage display type format	value label	variable label
egfr_roche_ca~e l	byte %9.0g	3 <b>–</b> –	_cat_baseline egfr category baseline

. tab egfr\_roche\_cat\_baseline;

egfr category baseline	     Freq.	Percent	Cum.
<30 30-39 40-49 50-59 60+	579   766   889   669	17.72 23.45 27.21 20.48 11.14	17.72 41.17 68.38 88.86 100.00
Total	+   3,267	100.00	

- . label define egfr\_roche\_catla 1"<45" 2"45+";
- . label values egfr\_roche\_cat1 egfr\_roche\_cat1a;
- . describe egfr\_roche\_cat1 ;

storage	display	value	variable label
variable name type	format	label	
egfr_roche_cat1 byte	%8.0g	egfr_roche_	_cat1a

. tab egfr\_roche\_cat1 ;

egfr category 1	   Freq.	Percent	Cum.
<45 45+	1,795   1,472	54.94 45.06	54.94 100.00
Total	3,267	100.00	

- . label define egfr\_roche\_cat4a 1"<15" 2"15-29" 3"30-59" 4"60+";
- . label values egfr\_roche\_cat4 egfr\_roche\_cat4a;
- . describe egfr\_roche\_cat4;

storage variable name type		value label	variable label
egfr_roche_cat4 byte	%8.0g	egfr_roche	_cat4a egfr category 4

. tab egfr\_roche\_cat4;

egfr category 4	   Freq.	Percent	Cum.
<15 15-29 30-59 60+	4   575   2,324   364	0.12 17.60 71.14 11.14	0.12 17.72 88.86 100.00
Total	3,267	100.00	

- . label define bmi\_cat\_2a
- > 1"<25 (UnderW/Normal)"</pre>
- > 2"25-29 (OverW)"
- > 3"30+ (Obese)";
- . label values bmi\_cat\_2 bmi\_cat\_2a;
- . describe bmi\_cat\_2;

variable name	storage type		value label	variable lab	el
bmi_cat_2	byte	%19.0g	bmi_cat_2a	bmi category	2

. tab bmi\_cat\_2;

bmi category 2	Freq.	Percent	Cum.
<25 (UnderW/Normal)   25-29 (OverW)   30+ (Obese)	452 894 1,842	14.18 28.04 57.78	14.18 42.22 100.00
Total	3,188	100.00	

. #delimit cr delimiter now cr

<sup>.</sup> save "Z:\CRIC\AnalysisData\MS037\m37\_w\_Labels.dta", replace

end of do-file

. log close

name: <unnamed>

log: Z:\CRIC\AnalysisData\MS037\Label\_Run\_Output.log

log type: text

closed on: 16 Mar 2011, 14:46:41

\_\_\_\_\_

name: <unnamed>

log: Z:\CRIC\AnalysisData\MS037\Analysis\_1\_Output.log

log type: text opened on: 16 Mar 2011, 15:37:36

. clear all

. pause on

. set linesize 180

. use "Z:\CRIC\AnalysisData\MS037\m37\_w\_Labels.dta", clear

. tab edu\_cat\_1 edu

education category	1			edu			
1(categorical)	1	1	2	3	4	5	Total
0-6th grade		27	0	0	0	0	27
7-12 grade, no diplom	1	496	0	0	0	0	496
HS grad or equiv	1	0	649	0	0	0	649
Tech-Voc degree	1	0	0	172	0	0	172
Some college, no degr	1	0	0	856	0	0	856
College grad	1	0	0	0	606	0	606
Prof or grad degree	1	0	0	0	0	461	461
Total	.+ 	523	649	1,028	606	461	3,267

. label define edu 1"<HS" 2"HSG" 3"Post HS" 4"Col Grad" 5"Postgrad"

. label values edu edu

. tab edu\_cat\_1 edu

education category	1			edu			
1(categorical)	1	<hs< th=""><th>HSG</th><th>Post HS</th><th>Col Grad</th><th>Postgrad  </th><th>Total</th></hs<>	HSG	Post HS	Col Grad	Postgrad	Total
0-6th grade		27	0	0	0	0	27
7-12 grade, no diplom	1	496	0	0	0	0	496
HS grad or equiv	1	0	649	0	0	0	649
Tech-Voc degree	1	0	0	172	0	0	172
Some college, no degr	1	0	0	856	0	0	856
College grad	1	0	0	0	606	0	606
Prof or grad degree	1	0	0	0	0	461	461
Total	- <b>+</b>	523	649	1,028	606	461	3,267

. tab smoke100 smokenow

smoked 100	1	current	smoker		
cigarettes	1	Not curre	Yes curre	١	Total
	+-			+	
Non-Smoker	1	1,405	0	1	1,405
Smoker	1	1,392	470	1	1,862
	+-			+	
Total	I	2,797	470	Ι	3,267

#### . tab smoker

smoker	Freq.	Percent	Cum.
1	470	14.39	14.39
2	1,392	42.61	56.99
3	1,405	43.01	100.00
Total	, 3,267	100.00	

- . label define smoker 1"Current" 2"Former" 3"Never"
- . label values smoker smoker
- . label var totalmetsum "Total Physical Activity (MET h/wk)"
- . generate egfr\_1t\_45 = .
  (3267 missing values generated)
- . replace egfr\_lt\_45 = 1 if egfr\_roche < 45
  (1795 real changes made)</pre>
- . replace egfr\_lt\_45 = 0 if egfr\_roche >= 45
  (1472 real changes made)
- . \* tab egfr\_lt\_45
- . label var egfr\_lt\_45 "eGFR < 45"
- . tab1 sex race\_ethnicity\_cat2 edu smoker alcoh37 hypertension diabetes chf anycvd egfr\_lt\_45

# -> tabulation of sex

sex	Freq.	Percent	Cum.
Male   Female	1,775 1,492	54.33 45.67	54.33 100.00
Total	3,267	100.00	

## -> tabulation of race\_ethnicity\_cat2

race ethi cate	nicity gory 2		Freq.	Percent	Cum.
Non-Hispanic Non-Hispanic	White Black	   	1,627 1,640	49.80 50.20	49.80 100.00
	Total	+ 	3,267	100.00	

# -> tabulation of edu

edu	Freq.	Percent	Cum.
<hs th=""  <=""><th>523</th><th>16.01</th><th>16.01</th></hs>	523	16.01	16.01
HSG	649	19.87	35.87
Post HS	1,028	31.47	67.34
Col Grad	606	18.55	85.89
Postgrad	461	14.11	100.00
Total	3,267	100.00	

## -> tabulation of smoker

smoker	Freq.	Percent	Cum.
Current Former	1,392	14.39 42.61	14.39 56.99
Never	1,405 	43.01  100.00	100.00

## -> tabulation of alcoh37

alcohol use	Freq.	Percent	Cum.
No   Yes	1,957 1,310	59.90 40.10	59.90 100.00
Total	3,267	100.00	

# -> tabulation of hypertension

hypertensio n (y/n)	   	Freq.	Percent	Cum.
No Yes	   	458 2,807	14.03 85.97	14.03 100.00

Total | 3,265 100.00

## -> tabulation of diabetes

diabetes	Freq.	Percent	Cum.
No	1,781	54.51	54.51
Yes	1,486 	45.49 	100.00
Total	3,267	100.00	

# -> tabulation of chf

# congestive | heart |

failure |

(y/n)	İ	Freq.	Percent	Cum.
No Yes	•	2,939 328	89.96 10.04	89.96 100.00
Total	·+ 	3,267	100.00	

# -> tabulation of anycvd

card	10-	va	sc	!
		11 1	ar	

disease |

(y/n)	Freq. Percent		Cum.
No	2,142	65.56	65.56
Yes	1,125	34.44	100.00
Total	3,267	100.00	

# -> tabulation of egfr\_lt\_45

eGFR < 45	Freq.	Percent	Cum.
0   1	1,472 1,795	45.06 54.94	45.06 100.00
Total	3,267	100.00	

. summarize age totalmetsum egfr\_roche bmi tc uric\_acid hs\_crp

Variable	Obs	Mean	Std. Dev.	Min	Max
+					
age	3267	58.55395	10.80797	21.15733	75.15343
totalmetsum	3259	204.6259	148.3339	0	1692.25
egfr_roche	3267	43.62454	13.37062	7.004488	113.9882
_ bmi	3259	32.31229	8.039422	14.59011	88.01366
tc	3258	182.8432	43.83615	76	571
+					
uric_acid	3220	7.402422	1.906139	1.9	15.2
hs_crp	3257	5.799183	10.15226	.08	187

end of do-file

. exit, clear

```
name: <unnamed>
      log: Z:\CRIC\AnalysisData\MS037\Analysis_2_Output.log
 log type: text
opened on: 6 Apr 2011, 14:22:13
. clear all
. pause on
. set linesize 180
. use "Z:\CRIC\AnalysisData\MS037\m37 w Labels.dta", clear
. *tab edu_cat_1 edu
. label define edu 1"<HS" 2"HSG" 3"Post HS" 4"Col Grad" 5"Postgrad"
. label values edu edu
. *tab edu_cat_1 edu
. *tab smoke100 smokenow
. *tab smoker
. label define smoker 1"Current" 2"Former" 3"Never"
. label values smoker smoker
. label var totalmetsum "Total Physical Activity (MET h/wk)"
. generate egfr 1t 45 = .
(3267 missing values generated)
. replace egfr_lt_45 = 1 if egfr_roche < 45</pre>
(1795 real changes made)
. replace egfr lt 45 = 0 if egfr roche >= 45
(1472 real changes made)
. * tab egfr 1t 45
. label var egfr_lt_45 "eGFR < 45"
. *tab1 sex race_ethnicity_cat2 edu smoker alcoh37 hypertension diabetes
chf anycvd egfr_lt_45
. *summarize age totalmetsum egfr_roche bmi tc uric_acid hs_crp
. tab comp_afib
ecg and/or |
self report |
              Freq. Percent
-----
        0 | 2,665 81.57
1 | 602 18.43
                                       81.57
     Total | 3,267 100.00
```

Z:\CRIC\AnalysisData\MS037\Analysis 2 Output.log

. tab egfr\_lt\_45 comp\_afib, row chi

+	+
Key	١
	1
frequency	I
row percentage	١
<b>_</b>	_

eGFR < 45	ecg and/or   report   0	self 1	Total
0	1,237   84.04	235 15.96	1,472
1	1,428	367	1,795
	79.55	20.45	100.00
Total	2,665	602	3,267
	81.57	18.43	1 100.00

Pearson chi2(1) = 10.8039 Pr = 0.001

- . gen age5=.
  (3267 missing values generated)
- . replace age5 = 39 if age<40
  (239 real changes made)</pre>
- . replace age5 = 40 if age>= 40 & age < 50 (398 real changes made)
- . replace age5 = 50 if age>= 50 & age < 60 (958 real changes made)
- . replace age5 = 60 if age>= 60 & age < 70 (1217 real changes made)  $^{\circ}$
- . replace age5 = 70 if age>= 70 (455 real changes made)
- . tab age5 comp\_afib, row chi

age5	ecg and/or   report   0	self 1	Total
39	220   92.05	19 7.95	239
40	349   87.69	49 12.31	398 1 100.00
50	796   83.09	162 16.91	958
60	961   78.96	256 21.04	1,217   100.00
70	339   74.51	116 25.49	455
Total	2,665   81.57	602 18.43	3,267   100.00

Pearson chi2(4) = 49.4509 Pr = 0.000

. tab sex comp\_afib, row chi

	ecg and/or report		
sex	0 +	1 	Total
Male	1,451   81.75 +	324 18.25	1,775   100.00
Female	1,214   81.37	278 18.63	1,492
Total	2,665   81.57	602 18.43	3,267   100.00

Pearson chi2(1) = 0.0775 Pr = 0.781

. tab race\_ethnicity\_cat2 comp\_afib, row chi

race ethnicity	ecg and/or report	self	
category 2	0 +	1	Total
Non-Hispanic White	1,354	273	1,627
	83.22 +	16.78 	100.00
Non-Hispanic Black	1,311	329	1,640
	79.94 	20.06 	100.00
Total	2,665	602	3,267
	81.57	18.43	100.00

Pearson chi2(1) = 5.8515 Pr = 0.016

end of do-file

. log close

name: <unnamed>
log: Z:\CRIC\AnalysisData\MS037\Analysis\_2\_Output.log

log type: text

closed on: 6 Apr 2011, 14:24:41

# $Z: \CRIC\AnalysisData\MS037\Table\_3a.wpd$

name: <unnamed>

log: Z:\CRIC\AnalysisData\MS037\Table\_3a\_3b\_4\_Output\_rev1.log

log type: text

opened on: 16 Apr 2011, 21:52:14

. clear all

- . \*pause on
- . set linesize 180

. use "Z:\CRIC\AnalysisData\MS037\m37\_w\_Labels.dta", clear

.
. generate NonHisp\_Black = race\_ethnicity\_cat2

. recode NonHisp\_Black (1=0)(2=1)
(NonHisp\_Black: 3267 changes made)

. tab race\_ethnicity\_cat2 NonHisp\_Black

race ethnicity category 2		 	NonHisp_I 0	NonHisp_Black 0 1		
Non-Hispanic Non-Hispanic	White Black	   	1,627 0	0 1,640	+-   	1,627 1,640
	Total	1	1,627	1,640	т- 	3,267

- . generate female = sex
- . recode female (2=1)(1=0)
  (female: 3267 changes made)
- . tab female sex

	1	s	ex		
female	۱ 	Male	Female	•	Total
0	•	1,775 0	0 1,492	i	1,775 1,492
Total	T-	1,775	1,492	. <del></del> .	3,267

- . generate male = sex
- . recode male (2=0)

(male: 1492 changes made)

. tab male sex

	:	sex	
male	Male +	Female	Total
0	0	1,492	1,492
1	1,775 +	0	1,775 -+
Total	1,775	1,492	3,267

```
. *tab edu_cat_1 edu
. label define edu 1"<HS" 2"HSG" 3"Post HS" 4"Col Grad" 5"Postgrad"
. label values edu edu
. *tab edu_cat_1 edu
. *tab smoke100 smokenow
. *tab smoker
. label define smoker 1"Current" 2"Former" 3"Never"
. label values smoker smoker
. label var totalmetsum "Total Physical Activity (MET h/wk)"
. generate egfr 1t 45 = .
(3267 missing values generated)
. replace egfr_lt_45 = 1 if egfr_roche < 45</pre>
(1795 real changes made)
. replace egfr_lt_45 = 0 if egfr_roche >= 45
(1472 real changes made)
. * tab egfr lt 45
. label var egfr_lt_45 "eGFR < 45"
. *tab1 sex race_ethnicity_cat2 edu smoker alcoh37 hypertension diabetes chf
anycvd egfr_lt_45
. *summarize age totalmetsum egfr_roche bmi tc uric_acid hs_crp
. * tab comp afib
. * tab egfr_lt_45 comp_afib, row chi
. gen age5=.
(3267 missing values generated)
. replace age5 = 39 if age<40
(239 real changes made)
. replace age5 = 40 if age>= 40 & age < 50
(398 real changes made)
. replace age5 = 50 if age>= 50 & age < 60
(958 real changes made)
. replace age5 = 60 if age>= 60 & age < 70
(1217 real changes made)
. replace age5 = 70 if age>= 70
(455 real changes made)
. * tab age5 comp afib, row chi
. * tab sex comp afib, row chi
. * tab race_ethnicity_cat2 comp_afib, row chi
. logistic comp afib age
```

Logistic regression

3267

Number of obs =

Log likelihood = -1533.101			Prob >	2(1) = chi2 = R2 =	0.0000	
comp_afib   Odds Ratio	Std. Err.	z	P>   z	[95% Conf.	Interval]	
age   1.034323	.004899	7.12	0.000	1.024765	1.043969	
. logistic comp_afib age_1s	d					
Logistic regression				of obs = 2(1) =		
				chi2 =		
Log likelihood = -1533.101			Pseudo	R2 =	0.0179	
comp_afib   Odds Ratio	Std. Err.	z	P>   z	[95% Conf.	Interval]	
age_1sd   1.440129	.0737225	7.12	0.000	1.302648	1.59212	
<pre> logistic comp_afib female</pre>	<b>!</b>					
Logistic regression			Number	of obs =	3267	
			LR chi	2(1) =	0.08	
Log likelihood = -1560.9414			Prob >	chi2 = R2 =	0.7807	
-						
comp_afib   Odds Ratio	Std. Err.	z	P>   z		Interval]	
female   1.02553	.0928456	0.28	0.781	.8587874	1.224648	
. logistic comp_afib male						
Logistic regression			Number	of obs = 2(1) = chi2 = R2 =	3267 0.08	
			Prob >	chi2 =	0.7807	
Log likelihood = -1560.9414			Pseudo	R2 =	0.0000	
comp_afib   Odds Ratio						
male   .9751052						
. xi: logistic comp_afib NonHisp_Black						
Logistic regression			Number	of obs =	3267 5.86	
			Prob >	2(1) = chi2 =	0.0155	
Log likelihood = -1558.0507				R2 =		
comp afib   Odds Ratio				 [95% Conf.		
comp_afib   Odds Ratio						
NONHISP_BI~K   1.244030						

```
. char _dta[omit] "prevalent"
. xi: logistic comp afib i.edu, or
               _Iedu_1-5
                                (naturally coded; _Iedu_3 omitted)
                                          Number of obs =
Logistic regression
                                                              3267
                                          LR chi2(4) = 23.89
Prob > chi2 = 0.0001
Pseudo R2 = 0.0077
Log\ likelihood = -1549.0339
______
  comp_afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
   _Iedu_1 | 1.400871 .1796173 2.63 0.009 1.089579 1.8011
_Iedu_2 | .8648755 .1131734 -1.11 0.267 .6692209 1.117732
_Iedu_4 | .798853 .1087416 -1.65 0.099 .6117859 1.04312
_Iedu_5 | .6880676 .1069612 -2.41 0.016 .5073533 .9331505
______
. test _Iedu_1 _Iedu_2 _Iedu_4 _Iedu_5
 ( 1) [comp_afib]_Iedu_1 = 0
 ( 2) [comp_afib]_Iedu_2 = 0
 ( 3) [comp_afib]_Iedu_4 = 0
 ( 4) [comp_afib]_Iedu_5 = 0
         chi2(4) = 24.24
       Prob > chi2 = 0.0001
. char _dta[omit]
. logistic comp afib tc
                                          Number of obs = 3258

LR chi2(1) = 12.33

Prob > chi2 = 0.0004

Pseudo R2 = 0.0040
Logistic regression
Log likelihood = -1550.0064
  comp_afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
tc | .9962555 .001084 -3.45 0.001 .9941331
______
. logistic comp_afib tc_1sd
                                          Number of obs = 3258

LR chi2(1) = 12.33

Prob > chi2 = 0.0004

Pseudo R2 = 0.0040
Logistic regression
Log likelihood = -1550.0064
  comp_afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
tc 1sd | .8483581 .0404657 -3.45 0.001
                                                 .7726413
______
. logistic comp afib uric acid
Logistic regression
                                          Number of obs =
                                                             3220
```

Log likelihood = -1533.4183			Prob >	(1) = chi2 = R2 =	0.0719
comp_afib   Odds Ratio	Std. Err.	z	P> z	[95% Conf.	Interval]
uric_acid   1.043772	.0248188	1.80	0.072	.9962442	1.093567
. logistic comp_afib uric_a					
Logistic regression				of obs = (1) =	
				chi2 =	
Log likelihood = -1533.4183				R2 =	
comp_afib   Odds Ratio	Std. Err.	z	P>   z	 [95% Conf.	Interval]
uric_acid_~d   1.085088					
logistic comp_afib egfr_l	t_45				
Logistic regression				of obs = (1) =	
				chi2 =	
Log likelihood = -1555.533			Pseudo	R2 =	0.0035
comp_afib   Odds Ratio	Std. Err.				
egfr_lt_45   1.352819					
. logistic comp_afib hs_crp					
				_	
Logistic regression			Number LR chi2	of obs = (1) = chi2 =	1.13
			Prob >	chi2 =	0.2883
Log likelihood = -1555.4041			Pseudo	R2 =	0.0004
comp_afib   Odds Ratio	Std. Err.	z	P>   z	[95% Conf.	Interval]
hs_crp   1.004461	.0040996	1.09	0.275	.9964576	1.012528
. logistic comp_afib hs_crp					
Logistic regression			Number LR chi2	of obs = (1) =	3257 1.13
			Prob >	chi2 =	0.2883
Log likelihood = -1555.4041				R2 =	
comp_afib   Odds Ratio	Std. Err.	z	P>   z	[95% Conf.	Interval]

logistic comp_afib bmi						
Logistic regression			LR chi	2(1)	=	3259 4.14
Log likelihood = -1552.8146						0.0418 0.0013
comp_afib   Odds Ratio	Std. Err.	z	P>   z	[95% (	Conf.	Interval]
bmi   1.011263	.0055099	2.06	0.040	1.0005	522	1.02212
. logistic comp_afib bmi_1s	d					
Logistic regression			Number LR chi	of obs	=	3259 4 14
Log likelihood = -1552.8146			Prob > Pseudo	chi2 R2	=	4.14 0.0418 0.0013
comp_afib   Odds Ratio				 [95% (		
bmi_1sd   1.094223	.0479304	2.06	0.040	1.0042	201	1.192316
logistic comp_afib totalm	etsum					
Logistic regression						3259 25.43
Log likelihood = -1545.1501						0.0000 0.0082
comp_afib   Odds Ratio	Std. Err.	z 	P> z	[95% (	Conf.	Interval]
totalmetsum   .9982108	.0003822	-4.68 	0.000	.99746	619 	.9989603
. logistic comp_afib totalm	etsum_1sd					
Logistic regression						3259
						25.43 0.0000
Log likelihood = -1545.1501						0.0082
comp_afib   Odds Ratio					Conf.	Interval]
totalmetsu~d   .7667199	.043549	-4.68	0.000	. 685		
. char _dta[omit] "prevalen	t"					
. xi: logistic comp_afib i. i.smokerIsmoker_		(naturall	y coded;	_Ismoke:	r_3 o:	mitted)
Logistic regression			Number	of obs	=	3267
<u>,</u>			LR chi	2(2)	=	34.17
			Prob >	chi2	=	0.0000

+-	Odds Ratio					
_Ismoker_1	1.376622	.1944867	2.26	0.024	1.043659	1.815812
_Ismoker_2	1.779791	.1775179	5.76		1.463/39	2.164057
. test _Ismoke	er_1 _Ismoke	er_2				
( 1) [comp_af ( 2) [comp_af		-				
chi2 Prob >	2( 2) = 33 > chi2 = 0	3.43 0.0000				
. char _dta[omi	it]					
. logistic comp	p_afib alcoh3	37				
Logistic regres	ssion				of obs =	
				LR chi	2(1) = chi2 =	9.58
Log likelihood	= -1556.1882	2		Pseudo	R2 =	0.0031
comp_afib						
alcoh37						
logistic comr	n afih hypert	ension				
. logistic comp Logistic regres Log likelihood	ssion			Number LR chi Prob > Pseudo	of obs = 2(1) = chi2 = R2 =	3265 1.55 0.2138 0.0005
Logistic regres  Log likelihood  comp afib		)  Std. Err.	z	LR chi Prob > Pseudo  P> z	.2(1) = chi2 = R2 =	1.55 0.2138 0.0005
Logistic regres  Log likelihood  comp_afib   hypertension		Std. Err. 	z 1.23	LR chi Prob > Pseudo  P> z   0.220	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005  Interval]  1.538512
Logistic regres  Log likelihood  comp_afib	= -1559.7999  Odds Ratio 	Std. Err. .1595907	z 1.23	LR chi Prob > Pseudo  P> z   0.220	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005  Interval]  1.538512
Logistic regres  Log likelihood  comp_afib   hypertension		Std. Err. .1595907	z 1.23	LR chi Prob > Pseudo  P> z   0.220 	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005  Interval]  1.538512 
Logistic regres  Log likelihood  comp_afib    hypertension    logistic comp		Std. Err.  .1595907 	z 1.23	LR chi Prob > Pseudo  P> z  0.220  Number LR chi Prob >	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005  Interval]  1.538512  3267 6.05 0.0139
Logistic regres  Log likelihood  comp_afib    hypertension    logistic comp  Logistic regres  Log likelihood	= -1559.7999  Odds Ratio 1.180359 p_afib diabet ssion  = -1557.9562	Std. Err. .1595907 	z 1.23	LR chi Prob > Pseudo  P> z   0.220  Number LR chi Prob > Pseudo	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005 
Logistic regres  Log likelihood  comp_afib    hypertension    logistic comp  Logistic regres  Log likelihood  comp afib	= -1559.7999 Odds Ratio 1.180359 p_afib diabet ssion = -1557.9562	Std. Err1595907	z 1.23	LR chi Prob > Pseudo  P> z   0.220  Number LR chi Prob > Pseudo	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005 
Logistic regres  Log likelihood  comp_afib    hypertension    logistic comp  Logistic regres  Log likelihood  comp_afib	= -1559.7999  Odds Ratio  1.180359  Dafib diabet  ssion  = -1557.9562	Std. Err1595907	z 1.23	LR chi	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005 
Logistic regres  Log likelihood  comp_afib    hypertension    logistic comp  Logistic regres  Log likelihood  comp_afib    diabetes	= -1559.7999  Odds Ratio  1.180359  Dafib diabet  ssion  = -1557.9562	Std. Err1595907	z 1.23	LR chi	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005 
Logistic regres  Log likelihood  comp_afib    hypertension    logistic comp  Logistic regres  Log likelihood  comp_afib    diabetes	= -1559.7999  Odds Ratio  1.180359  Dafib diabet  ssion  = -1557.9562  Odds Ratio  1.248945	Std. Err1595907	z 1.23	LR chi Prob > Pseudo  P> z   0.220  Number LR chi Prob > Pseudo  P> z   0.014	2(1) = chi2 = R2 = [95% Conf	1.55 0.2138 0.0005 

			Prob >			
Log likelihood = $-1466.4746$			Pseudo	R2	=	0.0605
comp_afib   Odds Ratio S	td. Err.	z	P>   z	[95%	Conf.	<pre>Interval]</pre>
chf   5.625733 .	6860969	14.16	0.000	4.429	649	7.144783
. logistic comp_afib anycvd						
Logistic regression						3267
			LR chi2			
						0.0000
Log likelihood = -1469.6413			Pseudo	R2	=	0.0585
comp_afib   Odds Ratio S						
anycvd   3.476231 .						

\_\_\_\_\_\_

name: <unnamed>

log: Z:\CRIC\AnalysisData\MS037\Table\_3b\_4\_Output\_rev1.log

log type: text

opened on: 21 Apr 2011, 15:26:28

. clear all

. pause on

. set linesize 180

. use "Z:\CRIC\AnalysisData\MS037\m37\_w\_Labels.dta", clear

. generate NonHisp\_Black = race\_ethnicity\_cat2

. recode NonHisp\_Black (1=0)(2=1)
(NonHisp\_Black: 3267 changes made)

. tab race\_ethnicity\_cat2 NonHisp\_Black

race ethnicity	NonHisp_	Black	
category 2	0	1	Total
Non-Hispanic White   Non-Hispanic Black	1,627 0	0   1,640	1,627 1,640
Total	1,627	1,640	3,267

. generate female = sex

. recode female (2=1)(1=0)
(female: 3267 changes made)

. tab female sex

	5	sex	
female	Male	Female	Total
0	_,	0 1,492	
Total	1,775	1,492	3,267

. generate male = sex

. recode male (2=0)
(male: 1492 changes made)

. tab male sex

		sex	
male	Male	Female	Total
0		1,492 0	
Total	1,775	1,492	3,267

. \*tab edu\_cat\_1 edu

. label define edu 1"<HS" 2"HSG" 3"Post HS" 4"Col Grad" 5"Postgrad"

```
. label values edu edu
. *tab edu_cat_1 edu
. *tab smoke100 smokenow
. *tab smoker
. label define smoker 1"Current" 2"Former" 3"Never"
. label values smoker smoker
. label var totalmetsum "Total Physical Activity (MET h/wk)"
. generate egfr lt 45 = .
(3267 missing values generated)
. replace egfr lt 45 = 1 if egfr roche < 45
(1795 real changes made)
. replace egfr lt 45 = 0 if egfr roche >= 45
(1472 real changes made)
. * tab egfr lt 45
. label var egfr lt 45 "eGFR < 45"
. *tabl sex race ethnicity cat2 edu smoker alcoh37 hypertension diabetes chf
anycvd egfr lt 45
. *summarize age totalmetsum egfr roche bmi tc uric acid hs crp
. * tab comp afib
. * tab egfr_lt_45 comp_afib, row chi
. gen age5=.
(3267 missing values generated)
. replace age5 = 39 if age<40
(239 real changes made)
. replace age5 = 40 if age>= 40 & age < 50
(398 real changes made)
. replace age5 = 50 if age>= 50 & age < 60
(958 real changes made)
. replace age5 = 60 if age>= 60 & age < 70
(1217 real changes made)
. replace age5 = 70 if age>= 70
(455 real changes made)
. * tab age5 comp afib, row chi
. * tab sex comp afib, row chi
. * tab race ethnicity cat2 comp afib, row chi
. encode ccidsite, generate(site)
. tab site
      cric |
center-site |
                 Freq. Percent
-----
      0101 |
                 470 14.39
266 8.14
                                         14.39
      0201 |
                                         22.53
                  251
184
      0202 |
                             7.68
5.63
                                         30.21
      0302 |
```

35.84

40.62

156

4.78

0303 |

		- 0.5	
	175	5.36	45.97
1	310	9.49	55.46
1	120	3.67	59.14
	98	3.00	62.14
	388	11.88	74.01
	382	11.69	85.71
	403	12.34	98.04
	6 4	1.96	100.00
3	3,267	100.00	
		120   98   388   382   403   64	310 9.49 120 3.67 98 3.00 388 11.88 382 11.69 403 12.34 64 1.96

. describe site

variable name	_	display format	value label	variable label	
site	long	%8.0g	site	cric center-site	

. tab sex male

sex		male 0	1	1	Total
Male Female		0 1,492	1,775 0		1,775 1,492
Total	- + - 	1,492	1,775	- + -	3,267

. tab sex female

sex	female 0	1	Total
Male Female	1,775   0	0   1,492	1,775 1,492
Total	1,775	1,492	3,267

Logistic regression	Number of obs	=	3267
	LR chi2(15)	=	100.75
	Prob > chi2	=	0.0000
Log likelihood = -1510.6054	Pseudo R2	=	0.0323

comp_afib	Odds Ratio	Std. Err.	Z	P> z	[95% Conf.	<pre>Interval]</pre>
+						
age 1sd	1.463735	.0763613	7.30	0.000	1.321467	1.62132
female	1.107426	.1062327	1.06	0.287	.9176165	1.336499
NonHisp Bl~k	1.251504	.1233542	2.28	0.023	1.031653	1.518206
Isite 2	1.447202	.2853398	1.87	0.061	.9833328	2.129892
Isite_3	1.835154	.3542495	3.15	0.002	1.257073	2.679072
Isite 4	1.133709	.266161	0.53	0.593	.7155915	1.796132
Isite 5	.853752	.2320538	-0.58	0.561	.501154	1.454428
Isite_6	1.368834	.3239388	1.33	0.185	.8608178	2.176658
Isite_7	1.297846	.2632778	1.29	0.199	.8720682	1.931504
Isite 8	1.572288	.4119116	1.73	0.084	.9408759	2.627434
Isite_9	.5189551	.1948611	-1.75	0.081	.2486076	1.083291
	1.654797	.2934477	2.84	0.005	1.168961	2.342554

_Isite_11   _Isite_12   _Isite_13		.2661301 .1650402 .3992631	2.09 -0.91 0.08	0.037 0.364 0.939	1.023473 .5678501 .4817463	2.088951 1.231056 2.201827
. xi: logistic	c comp_afib ac _Isite_1-				ite _Isite_1 omi	tted)
Logistic regre	ession			LR ch	r of obs = i2(15) = > chi2 =	3267 100.75 0.0000
Log likelihood	A = -1510.6054	1		Pseud		0.0323
comp_afib	Odds Ratio	Std. Err.	z	P>   z	[95% Conf.	Interval]
age_1sd		.0763613	7.30	0.000	1.321467	1.62132
male		.086622	-1.06	0.287	.7482237	1.08978
NonHisp_Bl~k		.1233542	2.28	0.023	1.031653	1.518206
_Isite_2	1.447202	.2853398	1.87	0.061	.9833328	2.129892
_Isite_3	1.835154	.3542495	3.15	0.002	1.257073	2.679072
_Isite_4	1.133709	.266161	0.53	0.593	.7155915	1.796132
_Isite_5		.2320538	-0.58	0.561	.501154	1.454428
_Isite_6		.3239388	1.33	0.185	.8608178	2.176658
_Isite_7	1.297846	.2632778	1.29	0.199	.8720682	1.931504
_Isite_8	1.572288	.4119116	1.73	0.084	.9408759	2.627434
_Isite_9		.1948611	-1.75	0.081	.2486076	1.083291
_Isite_10	1.654797	.2934477	2.84	0.005	1.168961	2.342554
Isite_11	1.462185	.2661301	2.09	0.037	1.023473	2.088951
_Isite_12		.1650402	-0.91	0.364	.5678501	1.231056
_Isite_13	1.029914	.3992631	0.08	0.939	.4817463	2.201827
. char dta[om	nit] "prevaler	nt"				
<pre>. char _dta[on . xi: logistic i.edu i.site</pre>	c comp_afib i. Iedu 1-5	.edu age_1so	(natural)	Ly coded;	lack i.site _Iedu_3 omit _Isite_1 omi	ted) tted)
. xi: logistic	c comp_afib i. _Iedu_1-5 _Isite_1-	.edu age_1so	(natural)	ly coded; ly coded; Numbe: LR ch	_Iedu_3 omit _Isite_1 omit r of obs = i2(19) =	3267 110.55
. xi: logistic i.edu i.site	c comp_afib i. _Iedu_1-5 _Isite_1-	.edu age_1sc 5 -13	(natural)	ly coded; ly coded; Number LR ch	_Iedu_3 omit _Isite_1 omit r of obs =	3267 110.55 0.0000
. xi: logistic i.edu i.site Logistic regre	c comp_afib i. _Iedu_1-5 _Isite_1-	.edu age_1sc 5 -13	(natural)	ly coded; ly coded; Number LR ch	_Iedu_3 omit _Isite_1 omi r of obs = i2(19) = > chi2 =	3267 110.55 0.0000
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession $A = -1505.7049$ Odds Ratio	edu age_1sc 5 -13 Std. Err.	(natural)	Number LR ch. Prob Pseudo	_Iedu_3 omit_ _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 =	3267 110.55 0.0000 0.0354
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib    ledu 1	c comp_afib iIedu_1-5 _Isite_1- ession  A = -1505.7049  Odds Ratio	.edu age_1sc 5 -13 9 Std. Err.	(natural) (natural)	Ly coded; Ly coded; Number LR ch Prob Pseudo	_Iedu_3 omit _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf.	3267 110.55 0.0000 0.0354  Interval]
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib    ledu 1	c comp_afib iIedu_1-5 _Isite_1- ession  A = -1505.7049  Odds Ratio	.edu age_1sc 5 -13 9 Std. Err.	(natural) (natural)	Ly coded; Ly coded; Number LR ch Prob Pseudo	_Iedu_3 omit _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf.	3267 110.55 0.0000 0.0354  Interval]
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib    _Iedu_1    _Iedu_2    _Iedu_4	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	std. Err13351 .104065 .1203861	(natural) (natural)  z 0.87 -1.88 -1.12	Number LR ch. Prob Pseudo	_Iedu_3 omit_ _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf. 	3267 110.55 0.0000 0.0354  Interval]  1.470616 1.010352
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib    _Iedu_1    _Iedu_2    _Iedu_4	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	std. Err13351 .104065 .1203861	(natural) (natural)  z 0.87 -1.88 -1.12	Number LR chaprob Pseudo P> z   0.385 0.060 0.263	_Iedu_3 omit_ _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf. .8616773 .5977254 .6478533	3267 110.55 0.0000 0.0354 
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib    _Iedu_1    _Iedu_2    _Iedu_4	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	std. Err13351 .104065 .1203861	(natural) (natural)  z 0.87 -1.88 -1.12	Number LR ch. Prob Pseudo Pseudo 0.385 0.060 0.263 0.051 0.000	_Iedu_3 omit _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf. .8616773 .5977254 .6478533 .5295349 1.312064	3267 110.55 0.0000 0.0354  Interval]  1.470616 1.010352 1.125785 1.001355
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib    _Iedu_1    _Iedu_2    _Iedu_4	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	std. Err13351 .104065 .1203861	(natural) (natural)  z 0.87 -1.88 -1.12	Number LR ch. Prob Pseudo Pseudo 0.385 0.060 0.263 0.051 0.000	_Iedu_3 omit _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf. .8616773 .5977254 .6478533 .5295349 1.312064	3267 110.55 0.0000 0.0354  Interval]  1.470616 1.010352 1.125785 1.001355
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	.edu age_1sc 5 -13 -13 	(natural) (natural) (natural) 	Number LR chapter Prob Prop 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_Iedu_3 omit_ _Isite_1 omit r of obs = i2(19) = > chi2 = o R2 = [95% Conf. 	3267 110.55 0.0000 0.0354 
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib iIedu_1-5Isite_1- ession  A = -1505.7049  Odds Ratio 1.125698 .7771186 .854016 .7281844 1.455599 1.096238 1.154838	.edu age_1sc 5 -13 -13 	(natural) (natural) (natural) 2 	Number LR chapter Prob Prop 1	_Iedu_3 omit- _Isite_1 omi- r of obs = i2(19) = > chi2 = o R2 = [95% Conf. 	3267 110.55 0.0000 0.0354 
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib iIedu_1-5Isite_1-6 ession  a = -1505.7049  Odds Ratio	.edu age_1sc 5 -13 -13 	(natural) (natural) (natural) 2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82	Number LR chapter Policy Prober 1	_Iedu_3 omit_ _Isite_1 omit r of obs = i2(19) = > chi2 = o R2 = [95% Conf. 	3267 110.55 0.0000 0.0354 
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib iIedu_1-5Isite_1-6 ession  a = -1505.7049  Odds Ratio	.edu age_1sc 5 -13 -13 	(natural) (natural) (natural) 2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82	Number LR chapter Policy Prober 1	_Iedu_3 omit_ _Isite_1 omit r of obs = i2(19) = > chi2 = o R2 = [95% Conf. 	3267 110.55 0.0000 0.0354 
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	.edu age_1sc 5.13 -13 Std. Err. -15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482	(natural) (natural) (natural) 2 	Number LR chapter Prob Prob 2	Iedu_3 omitIsite_1 omi  r of obs = i2(19) = > chi2 = o R2 =	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib iIedu_1-5Isite_1Isite_1	sedu age_1sc -13 -13 -13 -13 -13 -13 -14 -15 -15 -15 -104065 -1203861 -1183527 -0771006 -1055685 -1214032 -2832575 -339494 -2606482 -2285173	(natural) (natural) (natural) 2 	Number LR ch. Prob Pseudo 1. No 1. Prob Pseudo 1. P	Iedu_3 omitIsite_1 omi  r of obs = i2(19) = chi2 = 0 R2 =  [95% Conf8616773 .5977254 .6478533 .5295349 1.312064 .9076817 .9398048 .9728082 1.190738 .6963471 .488408	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib iIedu_1-5Isite_1- ession  a = -1505.7049	.edu age_1sc 5.13 Std. Err. Std. Err. .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767	(natural) (natural) (natural) 2 	Ly coded; Ly coded; Number LR ch Prob Pseudon	Iedu_3 omitIsite_1 omi  r of obs = i2(19) = > chi2 = o R2 =	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib iIedu_1-5Isite_1- ession  a = -1505.7049	.edu age_1sc 5.13 Std. Err. Std. Err. .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767	(natural) (natural) (natural) 2 	Number LR ch. Prob Pseudo 1. Prob Ps	_Iedu_3 omit_ _Isite_1 omi r of obs = i2(19) = > chi2 = o R2 = [95% Conf. 	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786 1.916612
. xi: logistic i.edu i.site  Logistic regree  Log likelihood	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio  1.125698     .7771186     .854016     .7281844     1.455599     1.096238     1.154838     1.433085     1.743907     1.105427     .8350595     1.342549     1.286443     1.519183	.edu age_1sc 5.13 Std. Err. Std. Err. .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767 .2616764 .3996253	(natural) (natural) (natural)  2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82 2.86 0.43 -0.66 1.24 1.24 1.59	Number LR ch Prob Pseudon No Seudon	Iedu_3 omitIsite_1 omi r of obs = i2(19) = chi2 = chi	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786 1.916612 2.544023
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib	c comp_afib i. _Iedu_1-5 _Isite_1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	std. Err.  Std. Err.  .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767 .2616764 .3996253 .1884929	(natural) (natural) 2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82 2.86 0.43 -0.66 1.24 1.59 -1.84	Number LR ch. Prob Pseudo 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Iedu_3 omitIsite_1 omi r of obs = i2(19) = chi2 = chi	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786 1.916612 2.544023 1.047588
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib	c comp_afib i. _Iedu_1-5 _Isite_1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	std. Err.  Std. Err.  .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767 .2616764 .3996253 .1884929	(natural) (natural) 2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82 2.86 0.43 -0.66 1.24 1.59 -1.84	Number LR ch. Prob Pseudo 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Iedu_3 omitIsite_1 omi r of obs = i2(19) = chi2 = chi	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786 1.916612 2.544023 1.047588 2.213689
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib	c comp_afib i. _Iedu_1-5 _Isite_1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	std. Err.  Std. Err.  .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767 .2616764 .3996253 .1884929	(natural) (natural) 2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82 2.86 0.43 -0.66 1.24 1.59 -1.84	Number LR ch. Prob Pseudo 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Iedu_3 omitIsite_1 omi r of obs = i2(19) = chi2 = chi	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786 1.916612 2.544023 1.047588 2.213689
. xi: logistic i.edu i.site  Logistic regree  Log likelihood  comp_afib	c comp_afib i. _Iedu_1-5 _Isite_1-6 ession  A = -1505.7049  Odds Ratio	std. Err.  Std. Err.  .15351 .104065 .1203861 .1183527 .0771006 .1055685 .1214032 .2832575 .339494 .2606482 .2285173 .3189767 .2616764 .3996253 .1884929	(natural) (natural) 2 0.87 -1.88 -1.12 -1.95 7.09 0.95 1.37 1.82 2.86 0.43 -0.66 1.24 1.59 -1.84	Number LR ch. Prob Pseudo 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Iedu_3 omitIsite_1 omi r of obs = i2(19) = chi2 = chi	3267 110.55 0.0000 0.0354  Interval] 1.470616 1.010352 1.125785 1.001355 1.614836 1.323964 1.419071 2.111139 2.554057 1.754828 1.427749 2.138786 1.916612 2.544023 1.047588 2.213689

-----

```
. test _Iedu_1 _Iedu_2 _Iedu_4 _Iedu_5
 (1) [comp_afib]_Iedu_1 = 0
 (2) [comp afib] Iedu 2 = 0
 (3) [comp_afib]_Iedu_4 = 0
 (4) [comp_afib]_Iedu_5 = 0
             chi2(4) =
                              9.73
           Prob > chi2 =
                              0.0452
. char dta[omit]
. xi: logistic comp afib to 1sd age 1sd female NonHisp Black i.site
                     _Isite_1-13 (naturally coded; _Isite_1 omitted)
Logistic regression
                                                             Number of obs =
                                                                                         3258
                                                             LR chi2(16) =
                                                             Prob > chi2
                                                                              =
Log likelihood = -1500.5723
                                                             Pseudo R2
______
   comp afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
   ______
     tc_1sd | .8533107 .0423187 -3.20 0.001 .7742712 .9404187 age_1sd | 1.452091 .0761003 7.12 0.000 1.310342 1.609175 female | 1.18494 .1160956 1.73 0.083 .9779105 1.435799

      Hisp_Bl~k | 1.260774
      .1246572
      2.34
      0.019

      _Isite_2 | 1.463409
      .2890991
      1.93
      0.054

      _Isite_3 | 1.863214
      .3605012
      3.22
      0.001

      _Isite_4 | 1.128548
      .2655125
      0.51
      0.607

NonHisp Bl~k |
                                                2.34 0.019
                                                                     1.038666
                                                                                    1.530377
                                                                      .9935948 2.155371
                                                                     1.275174 2.722427
                                                                     .7116375
                                                                                    1.789705
      ____Isite_5 | .8400294 .2287576 -0.64 0.522
__Isite_6 | 1.372144 .3251617 1.34 0.182
                                                                      .4926001
                                                                                    1.432499
                                                                      .8623576 2.183292
      Isite_7 |
                    1.31729 .2676795
                                                1.36 0.175
                                                                      .8845315
                                                                                    1.961777
    __Isite_8 |
                                                                     .9681819
                  1.621655 .4267537
                                                1.84 0.066
                                                                                     2.71619
                  1.021000 .4207037 1.84 0.066
.5328145 .2004227 -1.67 0.094
1.638777 .2916187 2.78 0.006
1.494767 .2736156 2.20 0.028
.8540288 .16889 -0.80 0.425
      Isite_9 |
                                                                      .2549114
                                                                                    1.113686
     _Isite_10 |
                                                                     1.156244
                                                                                    2.322685
     Isite 11 |
                                                                     1.044147
                                                                                    2.139858
    __Isite_12 | .8540288 .16889 -0.80 0.425
_Isite_13 | 1.019967 .3955312 0.05 0.959
                                                                     .5796177
                                                                                    1.258356
                                                                      .4769798 2.181082
______
. xi: logistic comp_afib uric_acid_1sd age female NonHisp_Black i.site
                     i.site
                                                             Number of obs =
Logistic regression
                                                                                         3220
                                                             96.76
                                                                                      0.0000
                                                             Prob > chi2
Log likelihood = -1486.6586
                                                             Pseudo R2
                                                                                      0.0315
 ._____
   comp afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
______
uric_acid_~d | 1.01017 .0495568 0.21 0.837 .9175643
age | 1.034995 .0050407 7.06 0.000 1.025163
female | 1.123278 .1105946 1.18 0.238 .926148

NonHisp_Bl~k | 1.22885 .1241083 2.04 0.041 1.008164
_Isite_2 | 1.430341 .2822738 1.81 0.070 .9715327
_Isite_3 | 1.804302 .3514381 3.03 0.002 1.231726
_Isite_4 | 1.096476 .2602399 0.39 0.698 .68861
_Isite_5 | .8367105 .2275698 -0.66 0.512 .4909803
_Isite_6 | 1.352516 .3210955 1.27 0.203 .8493018
_Isite_7 | 1.288069 .2628859 1.24 0.215 .8634058
_Isite_8 | 1.510297 .4029845 1.55 0.122 .8952424
_Isite_9 | .5315409 .1999138 -1.68 0.093 .2543301
                                                                      .9175643
                                                                                    1.112123
                                                                                    1.044922
                                                                                    1.362367
                                                                       .926148
                                                                  1.008164
.9715327
1.231726
                                                                                    1.497843
                                                                                    2.105823
                                                                                    2.643044
                                                                                    1.745923
                                                                                    1.425891
                                                                                     2.153887
                                                                                    1.921602
2.547909
                                                                     .2543301
                                                                                    1.110901
```

_Isite_10 _Isite_11 _Isite_12 _Isite_13	1.40436 .7931898	.2908665 .2585297 .1580775 .390708	2.69 1.84 -1.16 0.02	0.007 0.065 0.245 0.984	1.139201 .9789944 .5367082 .4712183	2.303062 2.014544 1.172239 2.15452
. xi: logistic		gfr_lt_45 ago -13	e_1sd fem	nale NonHi Ly coded;	isp_Black i.s _Isite_1 omi	ite tted)
Logistic regre	ession				of obs =	3267
					= =	101.96
Log likelihood	d = -1509.9983	3		Prob > Pseudo	> chi2 = = = = = = = = = = = = = = = = = = =	0.0000
comp_afib	Odds Ratio	Std. Err.		P> z	[95% Conf.	Interval]
egfr lt 45	1.115057	.1103239	1.10	0.271	.9184994	1.353677
age_1sd	1.451301	.0764292	7.07	0.000	1.308974	1.609103
female		.1056335	0.94	0.347	.9063667	1.322914
NonHisp_Bl~k	1.254352	.1236783	2.30	0.022	1.033931	1.521764
_Isite_2	1.425985	.2818584	1.80	0.073	.967983	2.100692
_Isite_3	1.794079	.3482259	3.01	0.003	1.226382	2.624566
Isite_4 _Isite_5	1.116642	.262672 .2301422	0.47 -0.61	0.639 0.539	.7041784	1.770702 1.441822
_Isite_5   _Isite_6	.845934   1.317353	.3150713	1.15	0.539	.8243667	2.105155
_Isite_0	1.281398	.260405	1.22	0.249	.8604057	1.90838
_Isite_8	1.512266	.3997227	1.56	0.118	.9008205	2.538739
Isite 9		.1926512	-1.78	0.075	.2456635	1.070923
_Isite_10		.2877411	2.53	0.012	1.108442	2.260382
Isite 11		.2637013	2.03	0.043	1.012029	2.067851
Isite12	.8415089	.1662042	-0.87	0.382	.5713999	1.239302
_Isite_13	1.014162	.3934343	0.04	0.971	.4741242	2.169316
. xi: logistic i.site					isp_Black i.s _Isite_1 omi	
Logistic regre	ession			LR chi	c of obs = 12(16) = chi2 =	3257 101.06 0.0000
Log likelihood	d = -1505.4387	7			R2 =	0.0325
comp_afib	Odds Ratio	Std. Err.		P> z	[95% Conf.	Interval]
hs crp 1sd	1.023694	.0447583	0.54	0.592	.9396226	1.115287
age_1sd   female   NonHisp_Bl~k	1.467248	.0767867	7.33 1.13 2.15 1.88	0.000	1.32421	1.625736
female	1.114767	.1071304	1.13	0.258	.9233849 1.018522	1.345816
NonHisp_Bl~k	1.236875	.1225762	2.15	0.032		
_Isite_2		.2858741	1.88	0.060		2.133445
_Isite_3		.3492155	3.04	0.002	1.233457	
_Isite_4	1.136898   .8502197	.2670519 .2311113		0.585	.7174279	1.801626
_lsite_5	.8502197   1.366896	.2311113	-0.60	0.551	.4990603	1.448469
_ISITE_6	1.366896		1.32	0.187	.8594857	2.173864
Isite_7	1.299846			0 077	.8732153 .9504587	1.934918 2.656956
O	1.589128 .5197533	1951633		0.077	2489876	1.084968
_=====================================	1.660966	. 2950903	2.86	0.001	.2489876	2 35281
	1.442002	.263323	2.00	0.045	1.008157	
Isite 12					.5657839	
	1.028801	.3989126	0.07	0.942	.4811515	2.199787

LR chi2(16) = 101.72 Prob > chi2 = 0.0000 Pseudo R2 = 0.0327

comp_afib	Odds Ratio	Std. Err.	z	P> z	[95% Conf.	Interval]
bmi 1sd	1.091891	.0510116	1.88	0.060	.9963507	1.196592
age 1sd	1.469319	.0772732	7.32	0.000	1.325411	1.628853
female	1.078075	.104832	0.77	0.439	.891001	1.304427
NonHisp Bl~k	1.223158	.121191	2.03	0.042	1.007268	1.48532
Isite 2	1.427831	.2818022	1.80	0.071	.9697963	2.102196
	1.767123	.3435517	2.93	0.003	1.207208	2.586732
Isite_4	1.136778	.2669624	0.55	0.585	.7174281	1.801246
	.8265973	.2252505	-0.70	0.485	.4845502	1.410098
Isite_6	1.364439	.3233847	1.31	0.190	.8574551	2.171185
Isite 7	1.292482	.2623595	1.26	0.206	.8682408	1.924018
Isite_8	1.560534	.4097061	1.70	0.090	.9328175	2.610655
Isite_9	.5194514	.1951954	-1.74	0.081	.2487065	1.084933
Isite 10	1.644868	.292087	2.80	0.005	1.161393	2.329608
 	1.419767	.2594401	1.92	0.055	.9923694	2.031238
Isite_12	.8382912	.1656062	-0.89	0.372	.569165	1.234672
Isite_13	1.03908	.4031949	0.10	0.921	.4856871	2.223009

. xi: logistic comp\_afib totalmetsum\_1sd age female NonHisp\_Black i.site 

Logistic regression	Number of obs	=	3259
	LR chi2(16)	=	109.26
	Prob > chi2	=	0.0000
Log likelihood = $-1503.2337$	Pseudo R2	=	0.0351

comp_afib	Odds Ratio	Std. Err.	Z	P> z	[95% Conf.	Interval]
totalmetsu~d	.8532635	.0488444	-2.77	0.006	.7627054	.9545738
age	1.031698	.0051467	6.26	0.000	1.02166	1.041835
female	1.099683	.1057653	0.99	0.323	.9107533	1.327805
NonHisp Bl~k	1.242839	.1227605	2.20	0.028	1.02409	1.508314
Isite 2	1.44861	.2858452	1.88	0.060	.9839863	2.132621
	1.806399	.3494768	3.06	0.002	1.236332	2.639321
Isite_4	1.128468	.2655282	0.51	0.608	.7115436	1.789685
	.8539513	.2323276	-0.58	0.562	.5010183	1.455501
Isite_6	1.385597	.3284802	1.38	0.169	.8706521	2.205105
	1.297269	.2634582	1.28	0.200	.8712893	1.931514
	1.57173	.4129812	1.72	0.085	.9391172	2.630487
	.4442088	.1751636	-2.06	0.040	.2050857	.9621417
Isite 10	1.58434	.2822059	2.58	0.010	1.117456	2.246292
Isite 11	1.424214	.2598076	1.94	0.053	.9960872	2.036352
Isite 12	.8314955	.1642784	-0.93	0.350	.5645315	1.224706
_Isite_13	1.00407	.3892107	0.01	0.992	.4696886	2.146435

```
. char _dta[omit] "prevalent"
```

. xi: logistic	comp_afib i.smoker	age_1sd female	NonHisp_Black i.site
i.smoker	_Ismoker_1-3	(naturally	<pre>coded; _Ismoker_3 omitted)</pre>
i.site	_Isite_1-13	(naturally	<pre>coded; _Isite_1 omitted)</pre>

Logistic regression	Number of obs	=	3267
	LR chi2(17)	=	119.39
	Prob > chi2	=	0.0000
Log likelihood = -1501.2873	Pseudo R2	=	0.0382

```
______
  comp afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
_____
_Isite_5 | .8404764 .2292979 -0.64 0.524
                                                .4923814 1.434661
   .8617883 2.185915
                                 1.27 0.203
                                                .8695239 1.931191
   .9256062 2.593242
                                                 .2469179 1.080204
              1.60452.28598692.650.0081.427292.2607441.950.051
  _Isite_10 |
                                                1.131432 2.275422
  _Isite_11 | 1.427292 .260744
                                                .9977267 2.041804
              .836803 .1657852 -0.90 0.368
1.045827 .406241 0.12 0.908
  _Isite_12 |
                                                .5675255 1.233846
  _Isite_13 | 1.045827
                                                  .488449
                                                           2.23924
______
. test _Ismoker_1 _Ismoker_1
 (1)
     [comp afib] Ismoker 1 = 0
     [comp afib] Ismoker 1 = 0
      Constraint 2 dropped
         chi2(1) = 3.23
        Prob > chi2 = 0.0721
. char dta[omit]
. xi: logistic comp_afib alcoh37 age_1sd female NonHisp_Black i.site
               _Isite_1-13 (naturally coded; _Isite_1 omitted)
                                           Number of obs =
Logistic regression
                                                              32.67
                                                            102.66
                                          LR chi2(16) =
                                          Prob > chi2
                                                       =
                                                            0.0000
Log likelihood = -1509.649
                                          Pseudo R2
                                                            0.0329
______
  comp afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
______
             .8695494 .0881231 -1.38 0.168 .7129033 1.060615
1.452456 .0762182 7.11 0.000 1.310497 1.609794
1.077618 .1055347 0.76 0.445 .8894143 1.305647
1.219925 .1223416 1.98 0.047 1.002234 1.484899
1.4347 .2831024 1.83 0.067 .9745355 2.112149
1.808837 .3497617 3.07 0.002 1.238251 2.642349
1.127943 .2648941 0.51 0.608 .711844 1.787266
    alcoh37 |
    age 1sd |
    female |
NonHisp Bl~k |
   _Isite_2 |
   _Isite_3 |
   _Isite_4 |
             .8382536 .2282143 -0.65
1.362696 .3226347 1.31
1.282167 .2603841 1.22
   _Isite_5 |
                                  -0.65 0.517
1.31 0.191
                                                .4916274
                                                           1.429272
   _Isite_6 |
             1.302030 .322034/ 1.31 0.191
1.282167 .2603841 1.22 0.221
1.536963 .4033814 1.64 0.101
.5098578 .1915717 -1.79 0.073
1.622206 .2886439 2.72 0.007
1.440088 .2626167 2.00 0.046
                                                 .8567746
                                                            2.16736
   _Isite_7 |
                                                .8611554
                                                           1.909008
   _Isite_8 |
                                                  .918888
                                                           2.570776
                                               .2441307
1.144588
                                                 .2441307
    _Isite_9 |
                                                           1.064819
                                                           2.299126
   Isite 10 |
  1.007309
                                                           2.058807
  .5714026
                                                           1.239218
                                                           2.233612
                                                 .4884605
______
. xi: logistic comp afib hypertension age 1sd female NonHisp Black i.site
               _Isite_1-13 (naturally coded; _Isite_1 omitted)
Logistic regression
                                           Number of obs
                                                               3265
```

comp_afib	Odds Ratio	Std. Err.	Z	P> z	[95% Conf.	Interval]
hypertension	.8314069	.1207443	-1.27	0.204	.6254529	1.105179
age 1sd	1.482213	.0787037	7.41	0.000	1.335712	1.644782
female	1.102191	.1057841	1.01	0.311	.9131916	1.330307
NonHisp_Bl~k	1.280763	.1287515	2.46	0.014	1.051719	1.559688
Isite 2	1.438297	.2837367	1.84	0.065	.9770793	2.117227
Isite_3	1.853435	.358249	3.19	0.001	1.268964	2.707107
Isite_4	1.143567	.2686357	0.57	0.568	.7216151	1.812248
Isite 5	.8633699	.234773	-0.54	0.589	.5066789	1.471164
Isite 6	1.390177	.3295449	1.39	0.165	.8735559	2.212328
Isite_7	1.298895	.2635945	1.29	0.198	.872636	1.933369
Isite 8	1.602332	.4208025	1.80	0.073	.9576589	2.680983
Isite 9	.5289073	.1987754	-1.69	0.090	.2532087	1.104792
Īsite 10	1.679536	.2986411	2.92	0.004	1.185321	2.379814
Isite_11	1.472609	.2682078	2.13	0.034	1.030522	2.104348
Isite_12	.8185045	.1622741	-1.01	0.312	.5549638	1.207195
Isite_13	1.031719	.400106	0.08	0.936	.4824599	2.206286

Logistic regression	Number of obs	=	3267
	LR chi2(16)	=	101.90
	Prob > chi2	=	0.0000
$I_{\text{log}}$ likelihood = -1510.0289	Pseudo R2	=	0.0326

comp_afib	Odds Ratio	Std. Err.	Z	P> z	[95% Conf.	Interval]
diabetes	1.105662	.1033906	1.07	0.283	.9205058	1.328062
age 1sd	1.457138	.0763749	7.18	0.000	1.314878	1.614789
female	1.108335	.1063841	1.07	0.284	.9182645	1.337747
NonHisp Bl~k	1.236665	.1226713	2.14	0.032	1.018162	1.50206
Isite 2	1.460781	.2883664	1.92	0.055	.9920945	2.150884
Isite 3	1.836045	.3544478	3.15	0.002	1.257649	2.680449
Isite 4	1.137974	.2672944	0.55	0.582	.7181201	1.8033
Isite 5	.8573674	.2331161	-0.57	0.571	.5031846	1.460853
Isite 6	1.370973	.324423	1.33	0.182	.86219	2.179991
Isite 7	1.309962	.265992	1.33	0.184	.8798716	1.950284
Isite 8	1.563765	.4097511	1.71	0.088	.935691	2.613428
Isite 9	.5234498	.1966244	-1.72	0.085	.2506898	1.092983
Īsite 10	1.65341	.2933094	2.83	0.005	1.167832	2.340889
 	1.469295	.2675561	2.11	0.035	1.028268	2.099478
Isite_12	.8530228	.1691606	-0.80	0.423	.5783107	1.25823
Isite_13	1.034243	.4009649	0.09	0.931	.4837497	2.211181

Logistic regression		Number	of obs	=	3267
		LR chi	2(16)	=	263.97
		Prob >	chi2	=	0.0000
Log likelihood = $-1428.9934$		Pseudo	R2	=	0.0846
<pre>comp_afib   Odds Ratio Std. Err.</pre>	Z	P>   z	[95%	Conf.	<pre>Interval]</pre>

comp_afib					[95% Conf.	
chf	5.205222	.6587374	13.04	0.000	4.061785	6.670548

```
__Isite_12 | .9224304 .1871539 -0.40 0.691 .6197713 
__Isite_13 | 1.222727 .4779103 0.51 0.607 .5683712
                                                                           2.63043
. xi: logistic comp_afib anycvd age_1sd female NonHisp_Black i.site
                   _Isite_1-13 (naturally coded; _Isite_1 omitted)
Logistic regression
                                                     Number of obs =
                                                     LR chi2(16) =
                                                                            234.81
                                                      Prob > chi2
                                                                     =
                                                      Pseudo R2
Log likelihood = -1443.5731
______
   comp afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
______
     anycvd | 3.062218 .2990441 11.46 0.000 2.528781 3.708183 age_lsd | 1.292058 .071131 4.65 0.000 1.159902 1.439271 female | 1.212925 .1199747 1.95 0.051 .9991679 1.472412
NonHisp Bl~k | 1.172726 .1188225
                                          1.57 0.116
                                                             .9615051
                                                                          1.430348

      Hisp_Bl~k | 1.172726
      .1188225
      1.57
      0.116

      _Isite_2 | 1.450888
      .2929328
      1.84
      0.065

      _Isite_3 | 1.705413
      .3375537
      2.70
      0.007

      _Isite_4 | 1.163742
      .2791108
      0.63
      0.527

      _Isite_5 | .8543107
      .2369682
      -0.57
      0.570

                                                              .9767356 2.155215
                                                             1.157046 2.513671
                                                              .727286
                                                                          1.862122
                                                            .4960325
                                                                          1.471369
     Isite_5 | .8543107 .2369682 -0.57 0.570

Isite_6 | 1.271803 .3082381 0.99 0.321

Isite_7 | 1.374535 .2848533 1.54 0.125

Isite_8 | 1.458616 .3916321 1.41 0.160

Isite_9 | .4970436 .189201 -1.84 0.066

Isite_10 | 1.457687 .2655304 2.07 0.039

Isite_11 | 1.247509 .2326051 1.19 0.236
    _Isite_6 |
                                                             .7908971
                                                                          2.045124
    _Isite_7 |
                                                              .9157056
                                                                          2.063267
    _Isite_8 |
                                                              .8617814
                                                                          2.468794
                                                              .2357123
                                                                           1.04811
    Isite 10 |
                                                             1.020025
                                                                          2.083138
                                                             .8656303
    Isite 11 |
                                                                          1.797857
    .6270107
                                                                          1.381123
                              .440544 0.28 0.782
                                                              .5145724
                                                                          2.419092
______
. * summarize age_1sd tc uric_acid hs_crp bmi totalmetsum totalmetsum_1sd
. char dta[omit] "prevalent"
. xi: logistic comp afib age 1sd female NonHisp Black i.edu tc 1sd bmi 1sd
totalmetsum 1sd i.smoker chf anycvd i.site
                 i.smoker
i.site
                                                      Number of obs =
Logistic regression
                                                      LR chi2(26) = Prob > chi2 = Proudo P2
                                                                            321.48
                                                                             0.0000
Log likelihood = -1386.2182
                                                      Pseudo R2
                                                                             0.1039
    ______
   comp_afib \mid Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
______
age_1sd | 1.27172 .076162 4.01 0.000 1.130874 1.430109 female | 1.256 .1321626 2.17 0.030 1.021932 1.54368 NonHisp_Bl~k | 1.072961 .119803 0.63 0.528 .8620686 1.335445
```

```
_Iedu_4 | 1.025451 .151151 0.17 0.865
                                                      .7681541
                                                                  1.368932
                                                                  1.1699
     _Iedu_5 | .8377777 .1427331 -1.04 0.299
                                                      .5999412
    tc_1sd | .9250014 .0469154 -1.54 0.124
bmi_1sd | 1.035837 .0517346 0.70 0.481
                                                                   1.02168
                                                      .8374715
                                                      .9392439 1.142364
.8265331
                                                                   1.03972
                                                      .8430453
                                                                  1.556225
                                                      1.078399 1.655634
                                                      2.466719 4.356044
                                                      1.556204 2.426364
    _Isite_2 | 1.405971 .2922553
                                      1.64 0.101
                                                      .9354908 2.113067
   __Isite_3 | 1.65442 .3411864
__Isite_4 | 1.091799 .2708112
                                     2.44 0.015
                                                      1.104345 2.478487
                                      0.35 0.723
                                                      .6714433 1.775316
    _Isite_5 | .8984611 .2551446 -0.38 0.706
                                                      .5149622 1.567556
    _Isite_6 | 1.425796 .352948 1.43 0.152
                                                      .8777021 2.316155
    _Isite_7 | 1.497454 .3169505
                                      1.91 0.056
                                                      .9889824
                                                                   2.26735
   _Isite_8 | 1.642085 .4529227
                                      1.80 0.072
                                                      .9563476 2.819522
    Isite 9 | .4903336 .1989481 -1.76 0.079
                                                      .2213731
                                                                  1.086071
   .9595055 2.019427
   _Isite_11 | 1.120274 .2190701
                                      0.58 0.561
                                                      .7636098
                                                                  1.643528
   __Isite_12 | .9574109 .1975486 -0.21 0.833 
__Isite_13 | 1.204745 .4761351 0.47 0.637
                                                      .6389467
                                                       .5552469
                                                                   2.61399
______
. xi: logistic comp afib age 1sd male NonHisp Black i.edu tc 1sd bmi 1sd
totalmetsum 1sd i.smoker chf anycvd i.site
                 i.smoker
i.site
                                                Number of obs =
Logistic regression
                                                                      3242
                                               LR chi2(26) =
                                                                    321.48
                                                Prob > chi2
                                                              =
                                                                   0.0000
Log likelihood = -1386.2182
                                                Pseudo R2
                                                                    0.1039
______
  comp afib | Odds Ratio Std. Err. z P>|z| [95% Conf. Interval]
______

      1.27172
      .076162
      4.01
      0.000
      1.130874

      .7961784
      .0837779
      -2.17
      0.030
      .6478027

      1.072961
      .119803
      0.63
      0.528
      .8620686

     age_1sd |
                                                                  1.430109

    1.27172
    .076162
    4.01
    0.000

    .7961784
    .0837779
    -2.17
    0.030

    1.072961
    .119803
    0.63
    0.528

    1.141451
    .1655623
    0.91
    0.362

    .7624111
    .1079263
    -1.92
    0.055

    1.025451
    .151151
    0.17
    0.865

     male |
                                                                  .9785388
                                                                  1.335445
NonHisp Bl~k |
                                                      .8590028
                                                                  1.516772
    Iedu 1 |
                                                      .5776887
                                                                  1.006201
     Iedu 2 |
              1.025451 .151151 0.17 0.865
.8377777 .1427331 -1.04 0.299
     _Iedu_4 |
                                                       .7681541
                                                                  1.368932
    _Iedu_5 |
                                                       .5999412
                                                                   1.1699
               .03,7,7, .142,7331 -1.04 0.299
.9250014 .0469154 -1.54 0.124
1.035837 .0517346 0.70 0.481
.9270184 .0542663 -1.29 0.195
                                                      .8374715
                                                                   1.02168
     tc 1sd |
                                                                  1.142364
    bmi 1sd |
                                                       .9392439
                                                      .8265331
totalmetsu~d |
                                                                   1.03972
               1.145412 .1791194
1.336202 .1461347
3.277978 .4755458
                                   0.87 0.385
2.65 0.008
  _Ismoker 1 |
                                                                  1.556225
                                                       .8430453
  _Ismoker_2 |
                                                      1.078399
                                                                  1.655634
                                      8.18
                          .4755458
                                            0.000
       chf |
                                                      2.466719
                                                                  4.356044
               1.943172
                                      5.86 0.000
                                                      1.556204
                         .2201694
                                                                  2.426364
     anycvd |
                1.405971 .2922553
1.65442 .3411864
    _Isite_2 |
                                      1.64
               1.405971
                                            0.101
                                                                  2.113067
                                                       .9354908
   _Isite_3 |
                                      2.44
                                            0.015
                                                      1.104345
                                                                  2.478487
                1.091799 .2708112
.8984611 .2551446
1.425796 .352948
   _Isite_4 |
                                      0.35
              1.091799
                                                      .6714433
                                            0.723
                                                                  1.775316
                                   -0.38
1.43
1.91
1.80
                                            0.706
   _Isite_5 |
                                                      .5149622
                                                                  1.567556
               1.425796
   _Isite_6 |
                                            0.152
                                                      .8777021
                           .352948
                                                                  2.316155
               1.497454 .3169505
1.642085 .4529227
.4903336 .1989481
   1.497454
                                                      .9889824
                                             0.056
                                                                   2.26735
   _Isite_8 |
              1.642085
                                            0.072
                                                      .9563476
                                                                  2.819522
                                     -1.76
                                                      .2213731
                                            0.079
    _Isite_9 |
                                                                  1.086071
  .9595055
                                                                   2.019427
                                                      .7636098
                                                       1.643528
                                                      .6389467
______
```

```
. char _dta[omit]
. test _Iedu_1 _Iedu_2 _Iedu_4 _Iedu_5
(1) [comp_afib]_Iedu_1 = 0
(2) [comp_afib]_Iedu_2 = 0
(3) [comp_afib]_Iedu_4 = 0
 (4) [comp_afib]_Iedu_5 = 0
          chi2(4) = 7.97
        Prob > chi2 = 0.0925
. test _Ismoker_1 _Ismoker_2
(1) [comp_afib]_Ismoker_1 = 0
 (2) [comp_afib]_Ismoker_2 = 0
         chi2(2) = 7.06
        Prob > chi2 = 0.0293
. log close
     name: <unnamed>
     log: Z:\CRIC\AnalysisData\MS037\Table_3b_4_Output_rev1.log
 log type: text
closed on: 21 Apr 2011, 15:26:41
```