The “ID numbers” shown on the following page are **not** actual patient ID numbers. They are instead the values of the variable MASK_PAT which is a ***masked*** ID number used for privacy protection.

Form 47: Availability, Adherence and Expectation Interview

Purpose: To assess a volunteer's willingness and ability to carry out a randomly assigned treatment regimen and the corresponding follow-up schedule.

Collection Schedule: Eligibility screening only.

Data Set Name: F0471

Structure: One record per patient.

Size: 1422 observations of 79 variables.

Known Anomalies: Form 47 is missing for 19 patients (ID numbers 116, 283, 299, 369, 379, 431, 521, 611, 642, 694, 696, 736, 820, 851, 930, 989, 1039, 1316, and 1404).

DG

1 FORM

DIABETES CONTROL AND COMPLICATIONS TRIAL

Availability, Adherence and Expectation Interview

This interview of the DCCT subject is used (1) to determine the subject's ability to keep the follow-up appointments which would be required of him/her should he/she be randomized, (2) to assess the subject's knowledge of and adherence to his/her current treatment regimen, and (3) to discover if the subject has unrealistic expectations about what he/she will gain from participating in the study.

The interview should be given by the clinic coordinator during the visit when the Informed Consent for Baseline Examinations (DCCT Form 031.1) is to be signed.

The information from this interview will primarily be used by the clinic coordinator to better understand the subject and his/her particular schedule and needs, and to aid in scheduling clinic visits and providing assistance (if possible) in areas such as child care, nutrition counseling, etc. But the information should also be reviewed by the Principal Investigator, for it may suggest that the subject would have poor compliance and would not be suitable for the trial.

Most of the questions provide space for write-in responses as well as multiple-choice check-boxes. The Coordinating Center will tabulate only the check-box items, so be sure that these are completed, but try to avoid using them to suggest answers to the subject. Send a completed copy of this form to the Coordinating Center in the weekly forms mailing.

A. IDENTIFYING INFORMATION

2 CLINIC 1. Clinic Number ☐☐ 5-6

PATIENT 2. Patient ID Number ☐☐☐☐☐ 7-11

TIALS 3. Patient's Initials ☐☐☐ 12-14

4. Date of Interview ☐☐/☐☐/☐☐ (Month / Day / Year) 15-20

5 FORMDATE ~~MMDDYY8~~

B. AVAILABILITY ASSESSMENT

1. Do you plan to move out of town in the near future? (*If subject is an adolescent, you may also ask:* Do you plan to leave home after you graduate?)

6 DGB1A

- ☐ No 21
- ☐ Yes
- ☐ Not Certain

If YES, ask: Where do you plan to go and when will you be leaving?

Anticipated Place _____ Anticipated Date ☐☐/☐☐ (Month / Year) 22-25

7 DGB1B / ~~DGB1C~~ 8

AVAILABILITY ASSESSMENT (cont'd.)

If the location is nearby, ask: Can you return to the center once a week if required?

8 DGB1C

- ☐ Yes 26
- ☐ No
- ☐ Not certain

If No or Not certain, ask: How often can you come in? _____

If the location is not nearby, but is close to another DCCT center ask: There is a DCCT center in (place) . Do you think that if you were enrolled into the study here that you could continue to participate in the study by being treated at our center in (place) ?

9 DGB1D

- ☐ No 27
- ☐ Yes
- ☐ Not certain

2. Can you currently come in at least once a week if required?

10 DGB2

- ☐ Yes 28
- ☐ No
- ☐ Not certain

If No or Not certain, ask: How often can you come in? _____

3. How did you get to the center today?

Car	11/12 DGB3	38
Taxi		
Bus/Subway		
Walked		
Other; specify: _____		

4. Did you have any trouble getting to the center today?

12/13 DGB4

No		39
Yes		

If Yes, explain:

_____

_____

_____

5. Do you ever have any transportation problems?

13/14 DGB5

No		31
Yes		

If Yes, explain:

_____

_____

_____

6. Do you have any children?

14/15 DGB6A

No		32
Yes		

If Yes, do you ever have any trouble getting someone to care for your children when you come in to the center?

No (or not relevant)		33
Yes	15/16 DGB6B	

If Yes, elaborate:

_____

_____

_____

AVAILABILITY ASSESSMENT (cont'd)

7. What times are most convenient for you to come to the center?

_____

_____

_____

At what times will it be impossible for you to come to the center?

_____

_____

_____

If there is a discrepancy between when the subject is available and the center's hours of operation, try to arrange some mutually acceptable times. List them below:

_____

_____

_____

8. How flexible is your employer (school) about giving you time off to keep doctor's appointments?

16/17 DGB8

Fairly flexible		34
Fairly inflexible		
Not applicable		

9. Will you have to take vacation or sick time at work to come to the center?

17/18 DGB9

No		35
Yes		
Not applicable (student, homemaker, unemployed, etc.)		

10. Do you have a telephone number where you can be reached during the day?

18/19 DGB10

No		36
Yes		

(Number: _____)

Patient ID _____

C. ADHERENCE ASSESSMENT

1. What is your current diabetes treatment plan? *(Allow the subject to describe the regimen. If the subject does not address all the areas, ask specifically about the items listed below.)*

   Insulin Schedule: _____

   _____

   _____

   Urine (or blood glucose) testing: _____

   _____

   _____

   Diet: _____

   _____

   Exercise: _____

   _____

2. During the past month, how often have you not followed your insulin injection plan?

   DGC2

Never	1	37
Very infrequently (less than 10% of the time)	2	
Infrequently (10-44% of the time)	3	
About half the time (45-55% of the time)	4	
Most of the time (56-90% of the time)	5	
Almost all of the time (more than 90% of the time)	6	
Always	7	

   When and where do you have the most difficulty staying on your insulin injection schedule?

   _____

   _____

   _____

   _____

ADHERENCE ASSESSMENT (Cont'd.)

3. During the past month, how often did you purposely decide not to take your insulin injection:

   20
   21
   DGC3

Never	1	38
Very infrequently (less than 10% of the time)	2	
Infrequently (10-44% of the time)	3	
About half the time (45-55% of the time)	4	
Most of the time (56-90% of the time)	5	
Almost all of the time (more than 90% of the time)	6	
Always	7	

   Why do you decide not to take your insulin injection?

   _____

   _____

   _____

   _____

4. During the past month, how often have you gone a whole day without testing your urine or blood for glucose?

   21
   22
   DGC4

Never	1	39
Very infrequently (less than 10% of the time)	2	
Infrequently (10-44% of the time)	3	
About half the time (45-55% of the time)	4	
Most of the time (56-90% of the time)	5	
Almost all of the time (more than 90% of the time)	6	
Always	7	

   When and where do you have the most difficulty performing the blood or urine tests?

   _____

   _____

   _____

   _____

ADHERENCE ASSESSMENT (cont'd.)

5. During the past month, how often did you purposely decide not to follow your urine blood testing schedule?

DGC5

Never	1	41
Very infrequently (less than 10% of the time)	2	
Infrequently (10-44% of the time)	3	
About half the time (45-55% of the time)	4	
Most of the time (56-90% of the time)	5	
Almost all of the time (more than 90% of the time)	6	
Always	7	

Why do you decide not to follow your urine or blood testing schedule?

_____

_____

_____

_____

6. During the past month, how often did you not follow your meal plan?

DGC6

Never	1	43
Very infrequently (less than 10% of the time)	2	
Infrequently (10-44% of the time)	3	
About half the time (45-55% of the time)	4	
Most of the time (56-90% of the time)	5	
Almost all of the time (more than 90% of the time)	6	
Always	7	

When and where do you have the most difficulty following your meal plan?

_____

_____

_____

_____

7. During the past month, how often did you purposely decide not to follow your meal plan?

DGC7

Never	1	42
Very infrequently (less than 10% of the time)	2	
Infrequently (10-44% of the time)	3	
About half the time (45-55% of the time)	4	
Most of the time (56-90% of the time)	5	
Almost all of the time (more than 90% of the time)	6	
Always	7	

Why do you decide not to follow your meal plan?

_____

_____

_____

_____

8. Does being at work (or school) interfere with following your diabetes treatment plan?

DGC8

Yes	1	43
No	2	

If YES, What difficulties does work (or school) cause you?

_____

_____

_____

9. Does being on vacation ever interfere with following your diabetes treatment plan?

DGC9

Yes	1	44
No	2	

If YES, What difficulties does being on vacation cause you?

_____

_____

_____

_____

ADHERENCE ASSESSMENT (cont'd.)

10. Do social situations (being at a friend's house, at a party, in a restaurant, etc.) ever interfere with following your diabetes treatment plan?

27 28 DGC10

Yes ☐1 45
No ☐2

If YES, What difficulties do you usually have in social situations?

_____

_____

_____

_____

11. Does your family life ever interfere with following your diabetes treatment plan?

29 DGC11

Yes ☐1 46
No ☐2

If YES, In what ways does your family life interfere?

_____

_____

_____

_____

12. How often during the past year have you not followed your diabetes treatment plan because of illness?

30 DGC12

Never ☐1 47
Very infrequently (less than 10% of the time) ☐2
Infrequently (10-44% of the time) ☐3
About half the time (45-55% of the time) ☐4
Most of the time (56-90% of the time) ☐5
Almost all of the time (more than 90% of the time) ☐6
Always ☐7

12. (Cont'd.)

What illnesses did you have and which aspects of your treatment plan were interrupted?

_____

_____

_____

_____

D. ASSESSMENT OF EXPECTATIONS

1. Do you have a strong preference for being assigned to one treatment group over the other? If so, which do you prefer and why?

31 DGD1

No, has no strong preference ☐1 48
Yes, has strong preference for Standard Treatment Group ☐2
Yes, has strong preference for Experimental Treatment Group ☐3

Reason for preference: _____

_____

_____

2. Would you be willing to accept being randomly assigned to either of the treatment groups?

31 32 DGD2

Yes, certainly ☐1 49
Yes, probably ☐2
No ☐3 STOP

IMPORTANT NOTE: If the subject states that he/she would not be willing to be randomly assigned to either treatment group, he/she is ineligible for the study. Bring this information to the attention of the Clinic Coordinator or the Principal Investigator as soon as the interview is over.

ASSESSMENT OF EXPECTATIONS (cont'd.)

3. What do you think you will gain from the study?

Let the subject generate responses but be sure that the following areas are addressed and correct any misconceptions.

Rate the subject's understanding:

• *blood sugar* 32 33 DGD3A

- Realistic ☐1 s9
- Somewhat unrealistic ☐2
- Very unrealistic ☐3

• *complications* 34 DGD3B

- Realistic ☐1 s1
- Somewhat unrealistic ☐2
- Very unrealistic ☐3

• *general well-being* 35 DGD3C

- Realistic ☐1 s2
- Somewhat unrealistic ☐2
- Very unrealistic ☐3

Comments: _____

_____

_____

4. You may find that in order to perform the urine or blood glucose tests you will need to use certain pieces of medical equipment in public. How do you feel about using the necessary medical equipment in public? 36

Check the statement that best describes the patient's feelings: DGD4

- Does not at all mind using the equipment in public ☐1 s3
- Somewhat minds using the equipment in public ☐2
- Very much minds using the equipment in public ☐3

5. What effect do you expect this study to have on your current daily routine?

Check the statement that best describes the patient's feelings: 37 DGD5

- Should have minimal adverse effect or no effect at all ☐1 s4
- Should have considerable adverse effect ☐2
- Should have a positive effect ☐3

6. How do you expect this study to affect your family?

Check the statement that best describes the patient's expectations:

38 37 DGD6

- Should have minimal adverse effect or no effect at all ☐1 s5
- Should have considerable adverse effect ☐2
- Should have a positive effect ☐3

Type or print name of Clinic Coordinator:

_____

Certification Numbers (if any)

☐☐-☐☐ s6-s9

38 DGCERTNO

39 46 DGWEEKNO

CONTENTS PROCEDURE

Data Set Name:	DCEXPORT.F0471	Observations:	1422
Member Type:	DATA	Variables:	35
Engine:	V608	Indexes:	0
Created:	15:18 Friday, December 1, 1995	Observation Length:	79
Last Modified:	15:18 Friday, December 1, 1995	Deleted Observations:	0
Protection:		Compressed:	NO
Data Set Type:		Sorted:	YES
Label:			

-----Engine/Host Dependent Information-----

Data Set Page Size:	4096	
Number of Data Set Pages:	30	
File Format:	607	
First Data Page:	2	
Max Obs per Page:	51	
Obs in First Data Page:	43	
Userid :	ONITE1	
File :	F0471	DCEXPORT

-----Alphabetic List of Variables and Attributes-----

#	Variable	Type	Len	Pos	Format	Label
7	DGB2	Num	2	15		VISIT ONCE/WK NOW IF REQUIRED
8	DGB3	Num	2	17		HOW GOT TO CLINIC TODAY
9	DGB4	Num	2	19		TROUBLE GETTING TO CLINIC TODAY
10	DGB5	Num	2	21		EVER HAVE TRANSPORTATION PROBLEMS
13	DGB8	Num	2	27		EMPLOYER"S FLEXIBILITY
14	DGB9	Num	2	29		NEED TO TAKE VACATION OR SICK TIME
15	DGB10	Num	2	31		HAVE TELEPHONE
3	DGB1A	Num	2	6		PLANS A MOVE SOON
4	DGB1B	Num	3	8		MONTH AND YEAR MOVING
5	DGB1C	Num	2	11		VISIT ONCE/WK AFTER MOVE IF REQUIRED
6	DGB1D	Num	2	13		CONTINUE AT ANOTHER CLINIC
11	DGB6A	Num	2	23		HAVE CHILDREN
12	DGB6B	Num	2	25		EVER HAVE PROBLEM GETTING CHILDCARE
16	DGC2	Num	2	33		NOT FOLLOWED INSULIN INJECTION PLAN
17	DGC3	Num	2	35		DECIDE NOT TO TAKE INJECTION
18	DGC4	Num	2	37		GONE WHOLE DAY W/O MONITORING
19	DGC5	Num	2	39		DECIDE NOT TO TEST URINE
20	DGC6	Num	2	41		DID NOT FOLLOW MEAL PLAN
21	DGC7	Num	2	43		DECIDED NOT TO FOLLOW MEAL PLAN
22	DGC8	Num	2	45		WORK OR SCHOOL INTERFERES W/PLAN
23	DGC9	Num	2	47		VACATION INTERFERES W/PLAN
24	DGC10	Num	2	49		SOCIAL SITUATIONS INTERFERE W/PLAN
25	DGC11	Num	2	51		FAMILY LIFE INTERFERES W/PLAN
26	DGC12	Num	2	53		NOT FOLLOWED PLAN DUE TO ILLNESS
27	DGD1	Num	2	55		TREATMENT GROUP PREFERENCE
28	DGD2	Num	2	57		WILLING TO BE RANDOMIZED
32	DGD4	Num	2	65		ATTITUDE TOWARD PUBLIC USE OF EQUIPMENT
33	DGD5	Num	2	67		EXPECTED EFFECT ON CURRENT DAILY ROUTINE
34	DGD6	Num	2	69		EXPECTED EFFECT ON FAMILY
29	DGD3A	Num	2	59		BLOOD SUGAR EXPECTATIONS
30	DGD3B	Num	2	61		COMPLICATIONS EXPECTATIONS

CONTENTS PROCEDURE

#	Variable	Type	Len	Pos	Format	Label
31	DGD3C	Num	2	63		GENERAL WELL-BEING EXPECTATIONS
2	FORM	Num	3	3		DCCT FORM NUMBER
1	FSASDATE	Num	3	0	MMDDYY8.	FORMDATE AS SAS DATE VALUE
35	MASK_PAT	Num	8	71		Patient ID number

-----Sort Information-----

Sortedby: MASK_PAT
Validated: YES
Character Set: EBCDIC

DISTRIBUTIONAL SUMMARY

Variable Attributes	Statistic	<------Primary Retinopathy------> <--Int-->	<--Cnv-->	<-Total->	<-----Secondary Retinopathy-----> <--Int-->	<--Cnv-->	<-Total->	<--Treatment Group--> <--Int-->	<--Cnv-->	<Overall>
PLANS A MOVE SOON	N	342.00	376.00	718.00	354.00	349.00	703.00	696.00	725.00	1421.00
Variable Name: DGB1A	Nmiss	1.00	0.00	1.00	0.00	0.00	0.00	1.00	0.00	1.00
	Value (1) %	90.64	93.09	91.92	94.35	94.27	94.31	92.53	93.66	93.10
	Value (2) %	4.68	3.99	4.32	2.26	2.58	2.42	3.45	3.31	3.38
	Value (3) %	4.68	2.93	3.76	3.39	3.15	3.27	4.02	3.03	3.52
MONTH AND YEAR MOVING	N	20.00	16.00	36.00	11.00	12.00	23.00	31.00	28.00	59.00
Variable Name: DGB1B	Nmiss	323.00	360.00	683.00	343.00	337.00	680.00	666.00	697.00	1363.00
	Mean	898.45	787.50	849.14	714.00	811.92	765.09	833.00	797.96	816.37
	Std	233.43	263.19	249.78	405.09	147.94	296.71	311.86	218.06	269.73
	Minimum	288.00	188.00	188.00	86.00	587.00	86.00	86.00	188.00	86.00
	25th pct	787.50	687.00	689.00	188.00	688.00	687.00	688.00	688.00	688.00
	Median	987.50	885.50	888.00	886.00	836.50	886.00	888.00	885.50	887.00
	75th pct	990.50	987.00	988.50	987.00	936.00	986.00	990.00	985.50	988.00
	Maximum	1288.00	1188.00	1288.00	1187.00	988.00	1187.00	1288.00	1188.00	1288.00
VISIT ONCE/WK AFTER MOVE IF REQUIRED	N	61.00	63.00	124.00	65.00	63.00	128.00	126.00	126.00	252.00
Variable Name: DGB1C	Nmiss	282.00	313.00	595.00	289.00	286.00	575.00	571.00	599.00	1170.00
	Value (1) %	83.61	80.95	82.26	92.31	87.30	89.84	88.10	84.13	86.11
	Value (2) %	3.28	1.59	2.42	6.15	3.17	4.69	4.76	2.38	3.57
	Value (3) %	13.11	17.46	15.32	1.54	9.52	5.47	7.14	13.49	10.32
CONTINUE AT ANOTHER CLINIC	N	21.00	15.00	36.00	12.00	13.00	25.00	33.00	28.00	61.00
Variable Name: DGB1D	Nmiss	322.00	361.00	683.00	342.00	336.00	678.00	664.00	697.00	1361.00
	Value (1) %	9.52	6.67	8.33	8.33	0.00	4.00	9.09	3.57	6.56
	Value (2) %	90.48	86.67	88.89	83.33	100.00	92.00	87.88	92.86	90.16
	Value (3) %	0.00	6.67	2.78	8.33	0.00	4.00	3.03	3.57	3.28
HAVE TELEPHONE	N	317.00	336.00	653.00	322.00	306.00	628.00	639.00	642.00	1281.00
Variable Name: DGB1O	Nmiss	26.00	40.00	66.00	32.00	43.00	75.00	58.00	83.00	141.00
	Value (1) %	5.05	5.36	5.21	9.32	6.21	7.80	7.20	5.76	6.48
	Value (2) %	94.95	94.64	94.79	90.68	93.79	92.20	92.80	94.24	93.52
VISIT ONCE/WK NOW IF REQUIRED	N	340.00	370.00	710.00	349.00	347.00	696.00	689.00	717.00	1406.00
Variable Name: DGB2	Nmiss	3.00	6.00	9.00	5.00	2.00	7.00	8.00	8.00	16.00
	Value (1) %	87.65	82.70	85.07	90.83	89.34	90.09	89.26	85.91	87.55
	Value (2) %	3.53	4.32	3.94	2.87	2.88	2.87	3.19	3.63	3.41
	Value (3) %	8.82	12.97	10.99	6.30	7.78	7.04	7.55	10.46	9.03
HOW GOT TO CLINIC TODAY	N	343.00	376.00	719.00	354.00	348.00	702.00	697.00	724.00	1421.00
Variable Name: DGB3	Nmiss	0.00	0.00	0.00	0.00	1.00	1.00	0.00	1.00	1.00
	Value (1) %	86.30	87.77	87.07	86.72	89.66	88.18	86.51	88.67	87.61
	Value (2) %	0.58	1.33	0.97	0.85	1.15	1.00	0.72	1.24	0.99
	Value (3) %	9.33	7.18	8.21	7.34	6.03	6.70	8.32	6.63	7.46
	Value (4) %	1.75	1.60	1.67	1.98	0.86	1.42	1.87	1.24	1.55
	Value (5) %	2.04	2.13	2.09	3.11	2.30	2.71	2.58	2.21	2.39

Notes:

Variable Attributes	Statistic	<------Primary Retinopathy------> <--Int-->	<--Cnv-->	<-Total->	<-----Secondary Retinopathy-----> <--Int-->	<--Cnv-->	<-Total->	<--Treatment Group--> <--Int-->	<--Cnv-->	<Overall>
TROUBLE GETTING TO CLINIC TODAY	N	342.00	374.00	716.00	352.00	349.00	701.00	694.00	723.00	1417.00
Variable Name: DGB4	Nmiss	1.00	2.00	3.00	2.00	0.00	2.00	3.00	2.00	5.00
	Value (1) %	97.66	97.59	97.63	96.31	96.56	96.43	96.97	97.10	97.04
	Value (2) %	2.34	2.41	2.37	3.69	3.44	3.57	3.03	2.90	2.96
EVER HAVE TRANSPORTATION PROBLEMS	N	341.00	376.00	717.00	353.00	349.00	702.00	694.00	725.00	1419.00
Variable Name: DGB5	Nmiss	2.00	0.00	2.00	1.00	0.00	1.00	3.00	0.00	3.00
	Value (1) %	96.48	96.01	96.23	96.60	96.28	96.44	96.54	96.14	96.34
	Value (2) %	3.52	3.99	3.77	3.40	3.72	3.56	3.46	3.86	3.66
HAVE CHILDREN	N	341.00	375.00	716.00	353.00	348.00	701.00	694.00	723.00	1417.00
Variable Name: DGB6A	Nmiss	2.00	1.00	3.00	1.00	1.00	2.00	3.00	2.00	5.00
	Value (1) %	61.88	57.60	59.64	58.92	62.93	60.91	60.37	60.17	60.27
	Value (2) %	38.12	42.40	40.36	41.08	37.07	39.09	39.63	39.83	39.73
EVER HAVE PROBLEM GETTING CHILDCARE	N	136.00	164.00	300.00	154.00	145.00	299.00	290.00	309.00	599.00
Variable Name: DGB6B	Nmiss	207.00	212.00	419.00	200.00	204.00	404.00	407.00	416.00	823.00
	Value (1) %	94.12	94.51	94.33	93.51	95.86	94.65	93.79	95.15	94.49
	Value (2) %	5.88	5.49	5.67	6.49	4.14	5.35	6.21	4.85	5.51
EMPLOYER''S FLEXIBILITY	N	343.00	376.00	719.00	354.00	347.00	701.00	697.00	723.00	1420.00
Variable Name: DGB8	Nmiss	0.00	0.00	0.00	0.00	2.00	2.00	0.00	2.00	2.00
	Value (1) %	82.51	85.90	84.28	83.33	83.86	83.59	82.93	84.92	83.94
	Value (2) %	4.08	2.13	3.06	5.08	5.76	5.42	4.59	3.87	4.23
	Value (3) %	13.41	11.97	12.66	11.58	10.37	10.98	12.48	11.20	11.83
NEED TO TAKE VACATION OR SICK TIME	N	342.00	374.00	716.00	354.00	346.00	700.00	696.00	720.00	1416.00
Variable Name: DGB9	Nmiss	1.00	2.00	3.00	0.00	3.00	3.00	1.00	5.00	6.00
	Value (1) %	57.60	56.42	56.98	63.28	61.85	62.57	60.49	59.03	59.75
	Value (2) %	19.30	18.18	18.72	18.36	21.97	20.14	18.82	20.00	19.42
	Value (3) %	23.10	25.40	24.30	18.36	16.18	17.29	20.69	20.97	20.83
SOCIAL SITUATIONS INTERFERE W/PLAN	N	343.00	376.00	719.00	352.00	349.00	701.00	695.00	725.00	1420.00
Variable Name: DGC10	Nmiss	0.00	0.00	0.00	2.00	0.00	2.00	2.00	0.00	2.00
	Value (1) %	34.99	29.79	32.27	36.93	36.39	36.66	35.97	32.97	34.44
	Value (2) %	65.01	70.21	67.73	63.07	63.61	63.34	64.03	67.03	65.56
FAMILY LIFE INTERFERES W/PLAN	N	343.00	376.00	719.00	354.00	349.00	703.00	697.00	725.00	1422.00
Variable Name: DGC11	Nmiss	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Value (1) %	6.41	5.32	5.84	7.06	3.72	5.41	6.74	4.55	5.63
	Value (2) %	93.59	94.68	94.16	92.94	96.28	94.59	93.26	95.45	94.37

Variable Attributes	Statistic	<------Primary Retinopathy------> <--Int-->	<--Cnv-->	<-Total->	<-----Secondary Retinopathy-----> <--Int-->	<--Cnv-->	<-Total->	<--Treatment Group--> <--Int-->	<--Cnv-->	<Overall>
NOT FOLLOWED PLAN DUE TO ILLNESS Variable Name: DGC12	N	343.00	375.00	718.00	353.00	347.00	700.00	696.00	722.00	1418.00
	Nmiss	0.00	1.00	1.00	1.00	2.00	3.00	1.00	3.00	4.00
	Value (1) %	70.55	74.67	72.70	68.56	69.45	69.00	69.54	72.16	70.87
	Value (2) %	27.11	23.47	25.21	27.76	28.53	28.14	27.44	25.90	26.66
	Value (3) %	2.33	1.87	2.09	3.40	2.02	2.71	2.87	1.94	2.40
	Value (4) %	0.00	0.00	0.00	0.28	0.00	0.14	0.14	0.00	0.07
NOT FOLLOWED INSULIN INJECTION PLAN Variable Name: DGC2	N	343.00	376.00	719.00	354.00	349.00	703.00	697.00	725.00	1422.00
	Nmiss	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Value (1) %	80.47	73.40	76.77	78.81	79.94	79.37	79.63	76.55	78.06
	Value (2) %	17.20	23.67	20.58	16.10	16.33	16.22	16.64	20.14	18.42
	Value (3) %	1.46	2.39	1.95	3.67	1.72	2.70	2.58	2.07	2.32
	Value (4) %	0.00	0.53	0.28	0.00	1.15	0.57	0.00	0.83	0.42
	Value (6) %	0.29	0.00	0.14	0.28	0.57	0.43	0.29	0.28	0.28
	Value (7) %	0.58	0.00	0.28	1.13	0.29	0.71	0.86	0.14	0.49
DECIDE NOT TO TAKE INJECTION Variable Name: DGC3	N	342.00	376.00	718.00	353.00	349.00	702.00	695.00	725.00	1420.00
	Nmiss	1.00	0.00	1.00	1.00	0.00	1.00	2.00	0.00	2.00
	Value (1) %	96.20	92.02	94.01	96.03	95.70	95.87	96.12	93.79	94.93
	Value (2) %	3.22	6.91	5.15	3.40	3.15	3.28	3.31	5.10	4.23
	Value (3) %	0.58	1.06	0.84	0.57	0.57	0.57	0.58	0.83	0.70
	Value (4) %	0.00	0.00	0.00	0.00	0.57	0.28	0.00	0.28	0.14
GONE WHOLE DAY W/O MONITORING Variable Name: DGC4	N	342.00	376.00	718.00	354.00	349.00	703.00	696.00	725.00	1421.00
	Nmiss	1.00	0.00	1.00	0.00	0.00	0.00	1.00	0.00	1.00
	Mean	2.66	2.59	2.62	3.35	3.21	3.28	3.01	2.89	2.95
	Std	1.77	1.67	1.72	1.95	1.87	1.91	1.89	1.80	1.84
	Minimum	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	25th pct	1.00	1.00	1.00	2.00	2.00	2.00	1.00	1.00	1.00
	Median	2.00	2.00	2.00	3.00	3.00	3.00	2.00	2.00	2.00
	75th pct	4.00	4.00	4.00	5.00	5.00	5.00	5.00	4.00	4.00
	Maximum	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00
DECIDE NOT TO TEST URINE Variable Name: DGC5	N	342.00	371.00	713.00	349.00	345.00	694.00	691.00	716.00	1407.00
	Nmiss	1.00	5.00	6.00	5.00	4.00	9.00	6.00	9.00	15.00
	Mean	2.13	2.01	2.07	2.58	2.35	2.47	2.36	2.18	2.27
	Std	1.72	1.58	1.65	1.98	1.75	1.87	1.87	1.68	1.77
	Minimum	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	25th pct	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Median	1.00	1.00	1.00	2.00	2.00	2.00	1.00	1.00	1.00
	75th pct	3.00	2.00	2.00	4.00	3.00	4.00	3.00	3.00	3.00
	Maximum	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00

Variable Attributes	Statistic	<------Primary Retinopathy------> <--Int-->	<--Cnv-->	<-Total->	<-----Secondary Retinopathy-----> <--Int-->	<--Cnv-->	<-Total->	<--Treatment Group--> <--Int-->	<--Cnv-->	<Overall>
DID NOT FOLLOW MEAL PLAN	N	341.00	374.00	715.00	346.00	341.00	687.00	687.00	715.00	1402.00
Variable Name: DGC6	Nmiss	2.00	2.00	4.00	8.00	8.00	16.00	10.00	10.00	20.00
	Mean	2.57	2.57	2.57	2.64	2.61	2.63	2.61	2.59	2.60
	Std	1.31	1.26	1.28	1.27	1.25	1.26	1.29	1.25	1.27
	Minimum	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	25th pct	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00
	Median	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00
	75th pct	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
	Maximum	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00
DECIDED NOT TO FOLLOW MEAL PLAN	N	340.00	370.00	710.00	345.00	345.00	690.00	685.00	715.00	1400.00
Variable Name: DGC7	Nmiss	3.00	6.00	9.00	9.00	4.00	13.00	12.00	10.00	22.00
	Mean	2.15	2.06	2.10	2.15	2.10	2.13	2.15	2.08	2.11
	Std	1.35	1.22	1.29	1.32	1.21	1.27	1.34	1.22	1.28
	Minimum	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	25th pct	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Median	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00	2.00
	75th pct	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
	Maximum	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00
WORK OR SCHOOL INTERFERES W/PLAN	N	342.00	375.00	717.00	352.00	346.00	698.00	694.00	721.00	1415.00
Variable Name: DGC8	Nmiss	1.00	1.00	2.00	2.00	3.00	5.00	3.00	4.00	7.00
	Value (1) %	21.64	22.13	21.90	20.74	28.90	24.79	21.18	25.38	23.32
	Value (2) %	78.36	77.87	78.10	79.26	71.10	75.21	78.82	74.62	76.68
VACATION INTERFERES W/PLAN	N	343.00	376.00	719.00	354.00	348.00	702.00	697.00	724.00	1421.00
Variable Name: DGC9	Nmiss	0.00	0.00	0.00	0.00	1.00	1.00	0.00	1.00	1.00
	Value (1) %	23.91	21.81	22.81	26.55	25.57	26.07	25.25	23.62	24.42
	Value (2) %	76.09	78.19	77.19	73.45	74.43	73.93	74.75	76.38	75.58
TREATMENT GROUP PREFERENCE	N	342.00	376.00	718.00	353.00	349.00	702.00	695.00	725.00	1420.00
Variable Name: DGD1	Nmiss	1.00	0.00	1.00	1.00	0.00	1.00	2.00	0.00	2.00
	Value (1) %	84.50	81.65	83.01	79.89	83.38	81.62	82.16	82.48	82.32
	Value (2) %	6.43	8.51	7.52	7.37	8.31	7.83	6.91	8.41	7.68
	Value (3) %	9.06	9.84	9.47	12.75	8.31	10.54	10.94	9.10	10.00
WILLING TO BE RANDOMIZED	N	343.00	376.00	719.00	354.00	349.00	703.00	697.00	725.00	1422.00
Variable Name: DGD2	Nmiss	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Value (1) %	93.88	90.16	91.93	92.66	91.40	92.03	93.26	90.76	91.98
	Value (2) %	6.12	9.84	8.07	7.34	8.60	7.97	6.74	9.24	8.02

Variable Attributes	Statistic	<------Primary Retinopathy------> <--Int-->	<--Cnv-->	<-Total->	<-----Secondary Retinopathy-----> <--Int-->	<--Cnv-->	<-Total->	<--Treatment Group--> <--Int-->	<--Cnv-->	<Overall>
BLOOD SUGAR EXPECTATIONS	N	339.00	368.00	707.00	351.00	344.00	695.00	690.00	712.00	1402.00
Variable Name: DGD3A	Nmiss	4.00	8.00	12.00	3.00	5.00	8.00	7.00	13.00	20.00
	Value (1) %	94.99	96.20	95.62	97.44	96.51	96.98	96.23	96.35	96.29
	Value (2) %	5.01	3.80	4.38	2.56	3.49	3.02	3.77	3.65	3.71
COMPLICATIONS EXPECTATIONS	N	338.00	367.00	705.00	351.00	344.00	695.00	689.00	711.00	1400.00
Variable Name: DGD3B	Nmiss	5.00	9.00	14.00	3.00	5.00	8.00	8.00	14.00	22.00
	Value (1) %	95.27	94.82	95.04	94.87	95.06	94.96	95.07	94.94	95.00
	Value (2) %	4.73	4.63	4.68	4.56	4.94	4.75	4.64	4.78	4.71
	Value (3) %	0.00	0.54	0.28	0.57	0.00	0.29	0.29	0.28	0.29
GENERAL WELL-BEING EXPECTATIONS	N	338.00	369.00	707.00	353.00	344.00	697.00	691.00	713.00	1404.00
Variable Name: DGD3C	Nmiss	5.00	7.00	12.00	1.00	5.00	6.00	6.00	12.00	18.00
	Value (1) %	97.63	98.37	98.02	99.15	98.55	98.85	98.41	98.46	98.43
	Value (2) %	2.37	1.63	1.98	0.85	1.45	1.15	1.59	1.54	1.57
ATTITUDE TOWARD PUBLIC USE OF EQUIPMENT	N	342.00	375.00	717.00	353.00	347.00	700.00	695.00	722.00	1417.00
Variable Name: DGD4	Nmiss	1.00	1.00	2.00	1.00	2.00	3.00	2.00	3.00	5.00
	Value (1) %	88.89	88.53	88.70	87.25	87.61	87.43	88.06	88.09	88.07
	Value (2) %	10.23	11.47	10.88	11.61	12.10	11.86	10.94	11.77	11.36
	Value (3) %	0.88	0.00	0.42	1.13	0.29	0.71	1.01	0.14	0.56
EXPECTED EFFECT ON CURRENT DAILY ROUTINE	N	341.00	375.00	716.00	354.00	345.00	699.00	695.00	720.00	1415.00
Variable Name: DGD5	Nmiss	2.00	1.00	3.00	0.00	4.00	4.00	2.00	5.00	7.00
	Value (1) %	53.96	55.20	54.61	50.56	47.25	48.93	52.23	51.39	51.80
	Value (2) %	0.00	1.07	0.56	0.00	0.58	0.29	0.00	0.83	0.42
	Value (3) %	46.04	43.73	44.83	49.44	52.17	50.79	47.77	47.78	47.77
EXPECTED EFFECT ON FAMILY	N	341.00	372.00	713.00	353.00	344.00	697.00	694.00	716.00	1410.00
Variable Name: DGD6	Nmiss	2.00	4.00	6.00	1.00	5.00	6.00	3.00	9.00	12.00
	Value (1) %	58.94	59.68	59.33	54.67	50.00	52.37	56.77	55.03	55.89
	Value (2) %	0.00	0.27	0.14	0.28	0.00	0.14	0.14	0.14	0.14
	Value (3) %	41.06	40.05	40.53	45.04	50.00	47.49	43.08	44.83	43.97
DCCT FORM NUMBER	N	343.00	376.00	719.00	354.00	349.00	703.00	697.00	725.00	1422.00
Variable Name: FORM	Nmiss	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Value (471) %	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00