

























































*Data Set Name: mb.sas7bdat*

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	TMPT2	Num	8	TMPTDW.	3.	Timepoint day week
4	DOEM	Num	8	3.	3.	Date of evaluation month
5	DOED	Num	8	3.	3.	Date of evaluation day
6	DOEY	Num	8	5.	5.	Date of evaluation year
7	MAIT	Num	8	YESNO.	3.	Mati interferon injection rev
8	MAPMS	Num	8	YESNO.	3.	Mati patient med schedule
9	MASE	Num	8	YESNO.	3.	Mati side effects addressed
10	MAAD	Num	8	YESNO.	3.	Mati adherence training
11	MABC	Num	8	YESNO.	3.	Mati birth control addressed
12	MACON	Num	8	YESNO.	3.	Mati contact numbers
13	DCCM	Num	8	3.	3.	Date data collection month
14	DCCD	Num	8	3.	3.	Date data collection day
15	DCCY	Num	8	5.	5.	Date data collection year
16	doedate	Num	8	MMDDYY10.		Date of evaluation
17	tmpt	Num	8	TMPT.		

*Data Set Name: mm.sas7bdat*

Num	Variable	Type	Len	Format	Label
1	vsite	Num	8		Site
2	vhcid	Num	8		Patient ID
3	MMRBS	Char	30	\$30.	MEMS rib time five min specify
4	MMRNDS	Char	30	\$30.	MEMS open no dose specify
5	MMINS	Char	30	\$30.	MEMS int time five min specify
6	TMPT	Num	8	TMPT.	Timepoint
7	FCMPL	Num	8	COMPBY.	Form completed by
8	DOEM	Num	8		Date of evaluation month
9	DOED	Num	8		Date of evaluation day
10	DOEY	Num	8		Date of evaluation year
11	MMRB	Num	8	TIMEOP.	MEMS rib time open bottle dose
12	MMRND	Num	8	NEVER.	MEMS open bottle no dose taken
13	MMIN	Num	8	TIMEOP.	MEMS int time open bottle dose
14	MMIFP	Num	8	NEVWK.	MEMS open int bottle no dose
15	DOEDATE	Num	8	MMDDYY10.	Date of evaluation

**Data Set Name: pe.sas7bdat**

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	DBXM	Num	8	3.	3.	Date of biopsy month
4	DBXD	Num	8	3.	3.	Date of biopsy day
5	DBXY	Num	8	5.	5.	Date of biopsy year
6	BXSC	Num	8	BXSC.	3.	Source of specimen
7	BXADQ	Num	8	YESNO.	3.	Specimen considered adequate
8	RNAL	Num	8	YESNO.	3.	Extra tissue stored
9	DOEM	Num	8	3.	3.	Date bx read month
10	DOED	Num	8	3.	3.	Date bx read day
11	DOEY	Num	8	5.	5.	Date bx read year
12	HAIPP	Num	8	3.	3.	HAI periportal inflammation
13	HAILB	Num	8	3.	3.	HAI lobular inflammation
14	HAIPT	Num	8	3.	3.	HAI portal inflammation
15	HAIFB	Num	8	3.	3.	HAI fibrosis
16	ISHAK	Num	8	3.	3.	Ishak fibrosis score
17	FESC	Num	8	3.	3.	Iron scoring
18	FERET	Num	8	YESNO.	3.	Reticuloendothelial iron
19	FATSC	Num	8	3.	3.	Fat score
20	TPORT	Num	8	3.	3.	Total portal areas
21	Z3BAL	Num	8	YESNO.	3.	Steato zone 3 degeneration
22	Z3SIN	Num	8	YESNO.	3.	Steato zone 3 fibrosis
23	MALBD	Num	8	YESNO.	3.	Steato mallory bodies
24	SMDYS	Num	8	YESNO.	3.	Small cell dysplasia
25	LGDYS	Num	8	YESNO.	3.	Large cell dysplasia
26	SLNUM	Num	8	3.	3.	Number of slides
27	SLORG	Num	8	YESNO.	3.	Original slides sent
28	COMM	Num	8	YESNO.	3.	Comments
29	COMMS	Char	60	\$60.	\$60.	Comments 1
30	COMM2S	Char	60	\$60.	\$60.	Comments 2
31	doedate	Num	8	MMDDYY10.		Date bx read
32	dbxdate	Num	8	MMDDYY10.		Date of biopsy
33	FESC2	Num	8	BEST12.		Iron score 2
34	FATSC2	Num	8	BEST12.		Fat score 2
35	ISHKPP	Num	8	BEST12.		Ishak periportal inflammation
36	ISHKCN	Num	8	BEST12.		Ishak confluent necrosis

Num	Variable	Type	Len	Format	Informat	Label
37	ISHKLB	Num	8	BEST12.		Ishak lobular inflammation
38	ISHKPT	Num	8	BEST12.		Ishak portal inflammation
39	METVHIS	Num	8	BEST12.		METAVIR activity score
40	METVFIB	Num	8	BEST12.		METAVIR fibrosis score
41	BXLENGTH	Num	8	BEST12.		Biopsy length millimeters
42	BXWIDTH	Num	8	BEST12.		Biopsy width millimeters
43	FRAGMT	Num	8	YESNO.		Fragmented
44	LYMAGG	Num	8	YESNO.		Lymphoid aggregates
45	GERMC	Num	8	YESNO.		Germinal centers
46	FRACPN	Num	8	BEST12.		Fract portal areas piecemeal necrosis
47	FRAC50PN	Num	8	BEST12.		Fract portal areas >50% piecemeal necrosis
48	FRACSN	Num	8	BEST12.		Fract 20x fields with spotty necrosis
49	FRACMI	Num	8	BEST12.		Fract portal areas >= mod inflammation
50	fatsc_HC	Num	8	BEST12.	BEST32.	Fat score HALT-C

**Data Set Name: ql.sas7bdat**

Num	Variable	Type	Len	Format	Label
1	vsite	Num	8		Site
2	vhcid	Num	8		Patient ID
3	TMPT	Num	8	TMPT.	Timepoint
4	FCMPL	Num	8	COMPBY.	Form completed by
5	DOEM	Num	8		Date of evaluation month
6	DOED	Num	8		Date of evaluation day
7	DOEY	Num	8		Date of evaluation year
8	GH1	Num	8	EXCPOR.	General health
9	HL1YR	Num	8	HL1YR.	Rate health compare 1yr ago
10	VIGAC	Num	8	LIMIT.	Limit vigorous activities
11	MODAC	Num	8	LIMIT.	Limit moderate activities
12	GROC	Num	8	LIMIT.	Limit carrying groceries
13	CLMBS	Num	8	LIMIT.	Limit climbing several stairs
14	CLMBO	Num	8	LIMIT.	Limit climbing one stair
15	BENG	Num	8	LIMIT.	Limit bending kneeling
16	WMILE	Num	8	LIMIT.	Limit walking more than mile
17	WSBLK	Num	8	LIMIT.	Limit walking several blocks
18	WOBLK	Num	8	LIMIT.	Limit walking one block
19	BTHDR	Num	8	LIMIT.	Limit bath dress yourself
20	PHAMT	Num	8	YESNO.	Limit amount time work
21	PHACC	Num	8	YESNO.	Accomplish less than you like
22	PHLIM	Num	8	YESNO.	Limit other work activities
23	PHDIF	Num	8	YESNO.	Difficulty perform work act
24	EMAMT	Num	8	YESNO.	Limit amount time work
25	EMACC	Num	8	YESNO.	Accomplished less than like
26	EMCAR	Num	8	YESNO.	Did not work carefully
27	SOC	Num	8	SOC.	Past 4wks interfere normal act
28	BDYPN	Num	8	BDYPN.	Past 4wks how much body pain
29	WKPN	Num	8	NOTEXT.	Past 4wks pain interfere work
30	PEP	Num	8	ALL6NO.	Past 4wks feel full of pep
31	NRV	Num	8	ALL6NO.	Past 4wks been very nervous
32	DMP	Num	8	ALL6NO.	Past 4wk down in dumps
33	CLM	Num	8	ALL6NO.	Past 4wk felt calm
34	ENGY	Num	8	ALL6NO.	Past 4wk have lot energy
35	BLU	Num	8	ALL6NO.	Past 4wk felt blue
36	WRN	Num	8	ALL6NO.	Past 4wk feel worn out

Num	Variable	Type	Len	Format	Label
37	HPY	Num	8	ALL6NO.	Past 4wk been happy
38	TRD	Num	8	ALL6NO.	Past 4wk feel tired
39	SOCAT	Num	8	ALL5NO.	Past 4wk interfere with social
40	SICK	Num	8	TRFAL.	Get sick easier than others
41	HLTHY	Num	8	TRFAL.	Healthy as anybody I know
42	HLWRS	Num	8	TRFAL.	Expect my health to get worse
43	HLEXC	Num	8	TRFAL.	My health is excellent
44	SLP	Num	8	ALL5NO.	Past 4wk trouble sleeping
45	WAKE	Num	8	ALL5NO.	Past 4wk felt rested
46	STWK	Num	8	ALL5NO.	Past 4wk trouble stay awake
47	STEMP	Num	8	ALL5NO.	Past 4wk felt short tempered
48	MOOD	Num	8	ALL5NO.	Past 4wk felt moody
49	TCONC	Num	8	ALL5NO.	Past 4wk trouble concentrating
50	ISOL	Num	8	ALL5NO.	Past 4wk felt isolated
51	SOINT	Num	8	ALL5NO.	Past 4wk reluctant socialize
52	SOCST	Num	8	ALL5NO.	Past 4wk strained social rel
53	IMWK	Num	8	NOTEXT.	Past 4wk impact work
54	FIN	Num	8	NOTEXT.	Past 4wk financial problem
55	UNWK	Num	8	NOTEXT.	Past 4wk unable to work
56	ENJSX	Num	8	NOTEXT.	Past 4wk enjoy sex
57	INTSX	Num	8	NOTEXT.	Past 4wk lack interest sex
58	SXPER	Num	8	NOTEXT.	Past 4wk interfere sex perform
59	FUNC	Num	8	SATISF.	Satisfied ability to function
60	SOCLF	Num	8	SATISF.	Satisfied with social life
61	OVRLF	Num	8	SATISF.	Satisfied with life overall
62	doedate	Num	8	MMDDYY10.	Date of evaluation

**Data Set Name: ra.sas7bdat**

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	DOEM	Num	8	3.	3.	Date of evaluation month
4	DOED	Num	8	3.	3.	Date of evaluation day
5	DOEY	Num	8	5.	5.	Date of evaluation year
6	TRF	Num	8	YESNO.	3.	Ever had blood tranfusion
7	DTRFM	Num	8	3.	3.	Date first tranfusion month
8	DTRFD	Num	8	3.	3.	Date first transfusion day
9	DTRFY	Num	8	5.	5.	Date first trans year
10	DTRFUK	Num	8	YESNO.	3.	Date unknown prior 1991
11	BLD	Num	8	YESNO.	3.	Ever received blood products
12	BLDCF	Num	8	YESNO.	3.	Blood products clotting factor
13	BLDGG	Num	8	YESNO.	3.	Blood products gamma globulin
14	BLDRM	Num	8	YESNO.	3.	Blood products rhogam
15	BLDO	Num	8	YESNO.	3.	Blood products other
16	BLDOS	Char	30	\$30.	\$30.	Received blood treat specify
17	RDLY	Num	8	YESNO.	3.	Ever renal dialysis
18	HOSP	Num	8	YESNO.	3.	Ever work hospital setting
19	HOSPN	Num	8	YESNO.	3.	Work hospital needle stick
20	HOSPNSP	Num	8	YESNO.	3.	Needle stick source pt known
21	INJT	Num	8	YESNO.	3.	Ever injection drugs
22	INCOCA	Num	8	YESNO.	3.	Ever intranasal illicit drugs
23	LIVE	Num	8	YESNO.	3.	Ever live with hcv pos person
24	HCVSX	Num	8	YESNO.	3.	Ever had sex with hcv pos
25	BYPC	Num	8	YESNO.	3.	Ever body piercing
26	BYPCP	Num	8	YESNO.	3.	Body piercing by professional
27	TAT	Num	8	YESNO.	3.	Ever tattoo
28	TATP	Num	8	YESNO.	3.	Tattoo by professional
29	HCEMOM	Num	8	YESNO.	3.	Birth mother hcv positive
30	RISK	Num	8	RISK.	3.	Number first risk factor
31	SOURCE	Num	8	SOURCE.	3.	Source hcv by investigator
32	SOURCES	Char	30	\$30.	\$30.	Source other specify
33	DINFM	Num	8	3.	3.	Date hcv infection month
34	DINFY	Num	8	5.	5.	Date hcv infection year
35	DCCM	Num	8	3.	3.	Date data collection month
36	DCCD	Num	8	3.	3.	Date data collection day



<b>Num</b>	<b>Variable</b>	<b>Type</b>	<b>Len</b>	<b>Format</b>	<b>Informat</b>	<b>Label</b>
37	DCCY	Num	8	5.	5.	Date data collection year
38	doedate	Num	8	MMDDYY10.		Date of evaluation

*Data Set Name: sa.sas7bdat*

Num	Variable	Type	Len	Format	Label
1	vsite	Num	8		Site
2	vhcid	Num	8		Patient ID
3	TMPT	Num	8	TMPT.	Timepoint
4	FCMPL	Num	8	COMPBY.	Form completed by
5	DOEM	Num	8		Date of evaluation month
6	DOED	Num	8		Date of evaluation day
7	DOEY	Num	8		Date of evaluation year
8	SAOV	Num	8		Feel overall
9	SAFAT	Num	8		Felt fatigue past week
10	SAHAC	Num	8		Felt headache past week
11	SAMAC	Num	8		Felt muscle aches past week
12	SAIRR	Num	8		Felt irritability past week
13	SADP	Num	8		Felt depression sad past week
14	doedate	Num	8	MMDDYY10.	Date of evaluation

**Data Set Name: sc.sas7bdat**

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	RSC	Num	8	3.	3.	Rescreen
4	DOEM	Num	8	3.	3.	Date of evaluation month
5	DOED	Num	8	3.	3.	Date of evaluation day
6	DOEY	Num	8	5.	5.	Date of evaluation year
7	SCAGE	Num	8	YESNO.	3.	Screening appropriate age
8	SCRACE	Num	8	YESNO.	3.	Screening white or black only
9	NATUSA	Num	8	YESNO.	2.	Born USA
10	GENO	Num	8	YESNO.	3.	HCV genotype
11	QUAN	Num	8	YESNO.	3.	Serum HCV >600
12	LBX	Num	8	YESNO.	3.	Liver biopsy past 12 months
13	DLBXM	Num	8	3.	3.	Recent liver biopsy month
14	DLBXD	Num	8	3.	3.	Recent liver biopsy day
15	DLBXY	Num	8	5.	5.	Recent liver biopsy year
16	AFPROT	Num	8	YESNO.	3.	AFP value and no carcinoma
17	BCON	Num	8	YESNO.	3.	Patient will use birth control
18	CONS	Num	8	YESNO.	3.	Give informed consent
19	CONGEN	Num	8	YESNO.	3.	Genetic consent
20	CONGST	Num	8	YESNO.	3.	Consent to store genetic samples
21	NAIV	Num	8	YESNO.	3.	Interferon ribavirin naive
22	TRANP	Num	8	YESNO.	3.	Ever organ or marrow transplan
23	PREG	Num	8	YESNO.	3.	Patient pregnancy related
24	ABALC	Num	8	YESNO.	3.	Abusing alcohol
25	DRG	Num	8	YESNO.	3.	Abusing drugs
26	HBV	Num	8	YESNO.	3.	HBsAg positive
27	HIV	Num	8	YESNO.	3.	HIV positive
28	LVDIS	Num	8	YESNO.	3.	History chronic liver disease
29	IMMD	Num	8	YESNO.	3.	History immune mediated diseas
30	CRTN	Num	8	YESNO.	3.	Normal creatinine level
31	NEUT	Num	8	YESNO.	3.	Normal neutrophil count
32	HEMG	Num	8	YESNO.	3.	Normal hemoglobin level
33	PLTL	Num	8	YESNO.	3.	Normal platelet count
34	ALBUM	Num	8	YESNO.	3.	Albumin less 3mgdl
35	BILIRB	Num	8	YESNO.	3.	Dbili greater 1mgdl
36	PTINR	Num	8	YESNO.	3.	PT INR greater 1.5 normal

Num	Variable	Type	Len	Format	Informat	Label
37	ACIT	Num	8	YESNO.	3.	History of acites
38	ENCEP	Num	8	YESNO.	3.	History of encephalopathy
39	ESVAR	Num	8	YESNO.	3.	History of GI bleeding
40	CHD	Num	8	YESNO.	3.	Coronary heart disease
41	SEIZ	Num	8	YESNO.	3.	Seizure disorder or med
42	THYD	Num	8	YESNO.	3.	Thyroid disease
43	RETIN	Num	8	YESNO.	3.	History retinopathy
44	PSYCH	Num	8	YESNO.	3.	History psych disease
45	SUHOSP	Num	8	YESNO.	3.	Suicide or hospitalized psych
46	OSTER	Num	8	YESNO.	3.	History oral steroid use
47	INOP	Num	8	YESNO.	3.	Opinion PI ineligible
48	INOPS	Char	60	\$60.	\$60.	Specify opin PI ineligible
49	DCCM	Num	8	3.	3.	Date data collection month
50	DCCD	Num	8	3.	3.	Date data collection day
51	DCCY	Num	8	5.	5.	Date data collection year
52	doedate	Num	8	MMDDYY10.		Date of evaluation

**Data Set Name: se.sas7bdat**

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	RSC	Num	8	3.	3.	Rescreen
4	SEX	Num	8	SEX.	3.	Patient gender
5	HISP	Num	8	YESNO.	3.	Hispanic
6	HISPO	Num	8	HISP.	3.	Hispanic origin
7	HISPOS	Char	30	\$30.	\$30.	Hispanic other specify
8	RACEW	Num	8	YESNO.	3.	White or Caucasian
9	RACEB	Num	8	YESNO.	3.	Black or African American
10	RACEA	Num	8	YESNO.	3.	Asian
11	RACEI	Num	8	YESNO.	3.	American Indian or Alaskan Nat
12	RACEH	Num	8	YESNO.	3.	Native Hawaii Pacific Islander
13	RACEO	Num	8	YESNO.	3.	Other race
14	RACEOS	Char	30	\$30.	\$30.	Other race specify
15	BUSA	Num	8	USA.	3.	Patient born USA
16	BUSAS	Char	30	\$30.	\$30.	Patient born specify
17	LXENCP	Num	8	YESNO.	3.	Liver history encephalopathy
18	LXVHMR	Num	8	YESNO.	3.	Liver history variceal hemorr
19	LXASC	Num	8	YESNO.	3.	Liver history ascites
20	LXJND	Num	8	YESNO.	3.	Liver history jaundice
21	MXDIAB	Num	8	YESNO.	3.	Med history diabetes
22	MXDIABT	Num	8	DIAB.	3.	Med history diabetes treatment
23	MXBP	Num	8	YESNO.	3.	Med hx hypertension
24	MXBPNO	Num	8	YESNO.	3.	Med hx hypertension none
25	MXBPCC	Num	8	YESNO.	3.	Med hx hypertension cachannel
26	MXBPDT	Num	8	YESNO.	3.	Med hx hypertension diet
27	MXBPDU	Num	8	YESNO.	3.	Med hx hypertension diuretic
28	MXBPAC	Num	8	YESNO.	3.	Med hx hypertension ACE
29	MXBPVD	Num	8	YESNO.	3.	Med hx hyperten vasodialator
30	MXBPBB	Num	8	YESNO.	3.	Med hx hypertension betablock
31	MXBPO	Num	8	YESNO.	3.	Med hx hypertension other
32	MXBPOS	Char	30	\$30.	\$30.	Med hist hyperten other specif
33	MXLLA	Num	8	YESNO.	3.	Med history lipid lower agent
34	MXLLAT	Num	8	STATIN.	3.	Med history lipid lower type
35	MXLLATS	Char	30	\$30.	\$30.	Med history lipid other specif
36	MXGI	Num	8	YESNO.	3.	Med history gi meds

Num	Variable	Type	Len	Format	Informat	Label
37	MXGIT	Num	8	GI.	3.	Med history gi med type
38	MXGITS	Char	30	\$30.	\$30.	Med history gi med oth specify
39	MXAD	Num	8	YESNO.	3.	Med history antidepress med
40	MXANX	Num	8	YESNO.	3.	Med history anxiety med
41	MXAPSY	Num	8	YESNO.	3.	Med history antipsychotic med
42	MXRES	Num	8	YESNO.	3.	Med history respiratory agent
43	MXTHY	Num	8	YESNO.	3.	Med history thyroid med
44	MXMET	Num	8	YESNO.	3.	Med history methadone
45	MXHB	Num	8	YESNO.	3.	Med history herb supplement
46	MXHB1	Num	8	HERBCAT.	3.	Med hx herbal supp 1
47	MXHB2	Num	8	HERBCAT.	3.	Med hx herbal supp 2
48	MXHB3	Num	8	HERBCAT.	3.	Med hx herbal supp 3
49	MXHB4	Num	8	HERBCAT.	3.	Med hx herbal supp 4
50	MXHB5	Num	8	HERBCAT.	3.	Med hx herbal supp 5
51	MXHB6	Num	8	HERBCAT.	3.	Med hx herbal supp 6
52	SYFAT	Num	8	YESNO.	3.	Symptom fatigue
53	SYWK	Num	8	YESNO.	3.	Symptom weakness
54	SYNAU	Num	8	YESNO.	3.	Symptom nausea
55	SYVOM	Num	8	YESNO.	3.	Symptom vomiting
56	SYAPP	Num	8	YESNO.	3.	Symptom poor appetite
57	SYWGT	Num	8	YESNO.	3.	Symptom weight loss
58	SYMUS	Num	8	YESNO.	3.	Symptom muscle aches
59	SYJOI	Num	8	YESNO.	3.	Symptom joint aches
60	SYHACH	Num	8	YESNO.	3.	Symptom headache
61	SYLIV	Num	8	YESNO.	3.	Symptom pain over liver
62	SYABP	Num	8	YESNO.	3.	Symptom abdominal pain
63	SYRSH	Num	8	YESNO.	3.	Symptom rash
64	SYITCH	Num	8	YESNO.	3.	Symptom itching
65	SYHAIR	Num	8	YESNO.	3.	Symptom hair loss
66	SYFEV	Num	8	YESNO.	3.	Symptom fever
67	SYCH	Num	8	YESNO.	3.	Symptom chills
68	SYNSW	Num	8	YESNO.	3.	Symptom night sweats
69	SYCGH	Num	8	YESNO.	3.	Symptom cough dyspnea
70	SYBTH	Num	8	YESNO.	3.	Symptom shortness of breath
71	SYIRR	Num	8	YESNO.	3.	Symptom irritability
72	SYSLP	Num	8	YESNO.	3.	Symptom trouble sleeping
73	SYCONC	Num	8	YESNO.	3.	Symptom diff concentrating
74	SYDEP	Num	8	YESNO.	3.	Symptom depression
75	SYDHA	Num	8	YESNO.	3.	Symptom diarrhea

Num	Variable	Type	Len	Format	Informat	Label
76	SYCSTP	Num	8	YESNO.	3.	Symptom constipation
77	SYO	Num	8	YESNO.	3.	Symptom other
78	SYOS	Char	30	\$30.	\$30.	Symptom other specify
79	DPSAD	Num	8	YESNO.	3.	Felt depressed most of time
80	DPFTR	Num	8	YESNO.	3.	Felt helpless about future
81	DPHRM	Num	8	YESNO.	3.	Thoughts about harm
82	HGTIN	Num	8	6.1	6.1	Height inches
83	HIPIN	Num	8	6.1	6.1	Hip measurement inches
84	WGTLB	Num	8	4.	4.	Weight pounds
85	WSTIN	Num	8	6.1	6.1	Waist measurement inches
86	TEMPF	Num	8	7.1	7.1	Temperature fahrenheit
87	HRMIN	Num	8	4.	4.	Heart rate beats per minute
88	BPS	Num	8	4.	4.	Blood pressure systolic
89	BPD	Num	8	4.	4.	Blood pressure diastolic
90	PEMW	Num	8	YESNO.	3.	Physical exam muscle wasting
91	PESA	Num	8	YESNO.	3.	Physical exam spider angiomata
92	PEPE	Num	8	YESNO.	3.	Physical exam pedal edema
93	PEELV	Num	8	YESNO.	3.	Physical exam enlarged liver
94	PETLV	Num	8	YESNO.	3.	Physical exam enlarged liver
95	PESP	Num	8	YESNO.	3.	Physical exam spleen enlarged
96	HAVR	Num	8	POSNEG.	3.	HAV
97	HAVM	Num	8	3.	3.	Sample date HAV month
98	HAVD	Num	8	3.	3.	Sample date HAV day
99	HAVY	Num	8	5.	5.	Sample date HAV year
100	HBSR	Num	8	POSNEG.	3.	HBS
101	HBSM	Num	8	3.	3.	Sample date HBS month
102	HBSD	Num	8	3.	3.	Sample date HBS day
103	HBSY	Num	8	5.	5.	Sample date HBS year
104	HBSAR	Num	8	POSNEG.	3.	HBsAg
105	HBSAM	Num	8	3.	3.	Sample date HBsAg month
106	HBSAD	Num	8	3.	3.	Sample date HBsAg day
107	HBSAY	Num	8	5.	5.	Sample date HBsAg year
108	HBCR	Num	8	POSNEG.	3.	HBcAb
109	HBCM	Num	8	3.	3.	Sample date HBcAB month
110	HBCD	Num	8	3.	3.	Sample date HBcAB day
111	HBCY	Num	8	5.	5.	Sample date HBcAB year
112	HIVR	Num	8	POSNEG.	3.	Anti-HIV
113	HIVM	Num	8	3.	3.	Sample date HIV month
114	HIVD	Num	8	3.	3.	Sample date HIV day

Num	Variable	Type	Len	Format	Informat	Label
115	HIVY	Num	8	5.	5.	Sample date HIV year
116	HCVR	Num	8	POSNEG.	3.	Anti-HCV
117	HCVM	Num	8	3.	3.	Sample date HCV month
118	HCVD	Num	8	3.	3.	Sample date HCV day
119	HCVY	Num	8	5.	5.	Sample date HCV year
120	AFP	Num	8	7.1	7.1	Alphafetopr result lab
121	CHL	Num	8	4.	4.	Cholesterol result lab
122	TIBC	Num	8	4.	4.	TIBC iron lab
123	SFE	Num	8	4.	4.	Serum iron lab result
124	FERR	Num	8	8.1	8.1	Ferritin lab result
125	ANA	Num	8	POSNEG.	3.	Antinuclear antibody lab
126	ANAT	Num	8	5.	5.	Antinuclear antibody titer
127	AAT	Num	8	4.	4.	Alpha 1 antitrypsin lab
128	CERP	Num	8	7.1	7.1	Result ceruloplasmin
129	COMM	Num	8	YESNO.	3.	Comments
130	COMMS	Char	60	\$60.	\$60.	Comments specify
131	COMM2S	Char	60	\$60.	\$60.	Comments 2 specify
132	DCCM	Num	8	3.	3.	Date data collection month
133	DCCD	Num	8	3.	3.	Date data collection day
134	DCCY	Num	8	5.	5.	Date data collection year
135	doedate	Num	8	MMDDYY10.		Date of evaluation
136	age	Num	8			Age at screening



*Data Set Name: sq.sas7bdat*

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	BUSAFS	Char	30	\$30.		Father born USA specify
4	BUSAMS	Char	30	\$30.		Mother born USA specify
5	EDUCS	Char	30	\$30.		Patient level education specify
6	WORKS	Char	30	\$30.		Current employment specify
7	OCCS	Char	30	\$30.	\$30.	Patient occupation specify
8	TMPT	Num	8	TMPT.		Timepoint
9	FCMPL	Num	8	COMPBY.		Form completed by
10	DOEM	Num	8			Date of evaluation month
11	DOED	Num	8			Date of evaluation day
12	DOEY	Num	8			Date of evaluation year
13	ZIP	Num	8			Zip code
14	NADULT	Num	8			Number adults household
15	NCHILD	Num	8			Number children household
16	MARST	Num	8	MARST.		Marital status
17	BUSAF	Num	8	USA.		Father born USA
18	BUSAM	Num	8	USA.		Mother born USA
19	EDUC	Num	8	EDUC.		Patient level education
20	WORK	Num	8	WORK.		Current employment status
21	HMEMP	Num	8	YESNO.		Employed outside of home
22	REDHR	Num	8	YESNO.		Reduce work hours due to hcv
23	ENDWORK	Num	8	YESNO.		Stop working due to hcv
24	OCC	Num	8	BEST12.	BEST32.	Patient occupation NAM Power code
25	INSUR	Num	8	INS.		Patient primary insurance
26	ALC	Num	8	YESNO.		Ever alcohol bever 12 months
27	ALCBE	Num	8			Number bottles beer per week
28	ALCWI	Num	8			Number glasses wine per week
29	ALCLQ	Num	8			Number liquor per week
30	BIN	Num	8	YESNO.		Ever 7 more alcohol drinks 24h
31	BINAMT	Num	8	BIN.		How often binge
32	ALCNOW	Num	8	ALC.		How much compared to now
33	ALCPRY	Num	8	ALC.		How much comp to prev years
34	EVSMK	Num	8	YESNO.		Ever smoked
35	CURSMK	Num	8	YESNO.		Current smoker
36	SMKDAY	Num	8	SMOKE.		Smoke packs per day

Num	Variable	Type	Len	Format	Informat	Label
37	DOEDATE	Num	8	MMDDYY10.	MMDDYY10.	Date of evaluation

**Data Set Name: ss.sas7bdat**

Num	Variable	Type	Len	Format	Label
1	vsite	Num	8		Site
2	vhcid	Num	8		Patient ID
3	TMPT	Num	8	TMPT.	Timepoint
4	FCMPL	Num	8	COMPBY.	Form completed by
5	DOEM	Num	8		Date of evaluation month
6	DOED	Num	8		Date of evaluation day
7	DOEY	Num	8		Date of evaluation year
8	NREL	Num	8		How many close relatives
9	HBED	Num	8	NONALL.	Someone help confined to bed
10	LSTN	Num	8	NONALL.	Someone to listen to you
11	CRISIS	Num	8	NONALL.	Someone give advice crisis
12	HDOCT	Num	8	NONALL.	Someone to take you to doctor
13	LOVE	Num	8	NONALL.	Someone who shows love
14	GTIME	Num	8	NONALL.	Someone to have good time with
15	HINFO	Num	8	NONALL.	Someone give info situation
16	CFTLK	Num	8	NONALL.	Someone confide talk problems
17	HUG	Num	8	NONALL.	Someone to hug you
18	RELAX	Num	8	NONALL.	Someone relax with
19	MEAL	Num	8	NONALL.	Someone prepare meals for you
20	ADVC	Num	8	NONALL.	Someone whose advice you want
21	HMIND	Num	8	NONALL.	Someone help get mind off
22	HCHOR	Num	8	NONALL.	Someone to help with chores
23	WORRY	Num	8	NONALL.	Someone to share worries with
24	SUGG	Num	8	NONALL.	Someone for suggestion problem
25	ENJOY	Num	8	NONALL.	Someone do something enjoyable
26	UNDST	Num	8	NONALL.	Someone to understand problems
27	FWANT	Num	8	NONALL.	Someone make you feel wanted
28	FHELP	Num	8		Get help from family
29	EMSUP	Num	8		Get emotional support
30	EMREC	Num	8		Get emotion supp oth resources
31	DAILY	Num	8		Get help daily tasks
32	ASKILL	Num	8		Ask doctor about illness
33	PERPB	Num	8		Discuss personal prob with doc
34	DXDIF	Num	8		Work out difficulties doctor
35	KFATG	Num	8		Keep fatigue from interfering
36	PYDIS	Num	8		Keep pain from interfering

Num	Variable	Type	Len	Format	Label
37	INTSY	Num	8		Keep symptom from interfering
38	CONSY	Num	8		Control symptoms from interfer
39	PYRED	Num	8		Reduce discomfort or pain
40	KDISC	Num	8		Keep from geting discouraged
41	KSAD	Num	8		Keep from feeling sad
42	KLON	Num	8		Keep from feel lonely
43	FLON	Num	8		Do something feel better lonel
44	FDISC	Num	8		Do something feel discouraged
45	FSAD	Num	8		Do something when feeling sad
46	MEDIF	Num	8		Take interferon without miss
47	MEDRV	Num	8		Take ribavirin without miss
48	MEDSE	Num	8		Take med even if side effects
49	MEDTD	Num	8		Take med even if depressed
50	MED30	Num	8		Take med for next 30 days
51	MISAP	Num	8		Keep all doctor appointments
52	doedate	Num	8	MMDDYY10.	Date of evaluation

**Data Set Name: te.sas7bdat**

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	TMPT1	Num	8	TMPTT.	3.	Timepoint
4	TMPT2	Num	8	TMPTDW.	3.	Timepoint day week
5	DOEM	Num	8	3.	3.	Date of evaluation month
6	DOED	Num	8	3.	3.	Date of evaluation day
7	DOEY	Num	8	5.	5.	Date of evaluation year
8	AE	Num	8	YESNO.	3.	Adverse event
9	SAE	Num	8	YESNO.	3.	Serious adverse event
10	WGTLB	Num	8	4.	4.	Weight pounds
11	TEMPF	Num	8	7.1	7.1	Temperature fahrenheit
12	HRMIN	Num	8	4.	4.	Heart rate beats per minute
13	BPS	Num	8	4.	4.	Blood pressure systolic
14	BPD	Num	8	4.	4.	Blood pressure diastolic
15	SYFAT	Num	8	YESNO.	3.	Symptom fatigue
16	SYSLP	Num	8	YESNO.	3.	Symptom difficulty sleeping
17	SYIRR	Num	8	YESNO.	3.	Symptom irritability
18	SYHAIR	Num	8	YESNO.	3.	Symptom hair loss
19	SYDEP	Num	8	YESNO.	3.	Symptom depression
20	SYWGT	Num	8	YESNO.	3.	Symptom weight loss
21	SYFLU	Num	8	YESNO.	3.	Symptom flu like
22	SYGI	Num	8	YESNO.	3.	Symptom gastrointestinal
23	SYINJ	Num	8	YESNO.	3.	Symptom injection site reaction
24	SYRSH	Num	8	YESNO.	3.	Symptom rash
25	SYJOI	Num	8	YESNO.	3.	Symptom joint aches
26	SYRES	Num	8	YESNO.	3.	Symptom respiratory
27	SYMUS	Num	8	YESNO.	3.	Symptom muscle ache
28	SYHACH	Num	8	YESNO.	3.	Symptom headache
29	SYITCH	Num	8	YESNO.	3.	Symptom itching
30	SYO	Num	8	YESNO.	3.	Symptom other
31	SYOS	Char	30	\$30.	\$30.	Symptom other specify
32	MXAD	Num	8	YESNO.	3.	Med history antidepress med
33	MXRES	Num	8	YESNO.	3.	Med history respiratory agent
34	MXTHY	Num	8	YESNO.	3.	Med history thyroid med
35	MXGF	Num	8	YESNO.	3.	Med hx growth factor
36	MXHB	Num	8	YESNO.	3.	Med hx herbal supplement













Num	Variable	Type	Len	Format	Informat	Label
154	ILM	Num	8	3.	3.	Interfer last use mems month
155	ILD	Num	8	3.	3.	Interfer last use mems day
156	ILY	Num	8	5.	5.	Interfer last use mems year
157	ILHR	Num	8	3.	3.	Interfer last use mems hour
158	ILMN	Num	8	3.	3.	Interfer last use mems minute
159	CR1M	Num	8	3.	3.	Coordinator1 ribv cap month
160	CR1D	Num	8	3.	3.	Coordinator1 ribv cap day
161	CR1Y	Num	8	5.	5.	Coordinator1 ribv cap year
162	CR1HR	Num	8	3.	3.	Coordinator1 ribv cap hour
163	CR1MN	Num	8	3.	3.	Coordinator1 ribv cap minutes
164	CI1M	Num	8	3.	3.	Coordinator1 interf cap month
165	CI1D	Num	8	3.	3.	Coordinator1 interf cap day
166	CI1Y	Num	8	5.	5.	Coordinator1 interf cap year
167	CI1HR	Num	8	3.	3.	Coordinator1 interf cap hour
168	CI1MN	Num	8	3.	3.	Coordinator1 interf cap minute
169	CR2M	Num	8	3.	3.	Coordinator2 ribv cap month
170	CR2D	Num	8	3.	3.	Coordinator2 ribv cap day
171	CR2Y	Num	8	5.	5.	Coordinator2 ribv cap year
172	CR2HR	Num	8	3.	3.	Coordinator2 ribv cap hour
173	CR2MN	Num	8	3.	3.	Coordinator2 ribv cap minutes
174	CI2M	Num	8	3.	3.	Coordinator2 interf cap month
175	CI2D	Num	8	3.	3.	Coordinator2 interf cap day
176	CI2Y	Num	8	5.	5.	Coordinator2 interf cap year
177	CI2HR	Num	8	3.	3.	Coordinator2 interf cap hour
178	CI2MN	Num	8	3.	3.	Coordinator2 interf cap minute
179	CR3M	Num	8	3.	3.	Coordinator3 ribv cap month
180	CR3D	Num	8	3.	3.	Coordinator3 ribv cap day
181	CR3Y	Num	8	5.	5.	Coordinator3 ribv cap year
182	CR3HR	Num	8	3.	3.	Coordinator3 ribv cap hour
183	CR3MN	Num	8	3.	3.	Coordinator3 ribv cap minutes
184	CI3M	Num	8	3.	3.	Coordinator3 interf cap month
185	CI3D	Num	8	3.	3.	Coordinator3 interf cap day
186	CI3Y	Num	8	5.	5.	Coordinator3 interf cap year
187	CI3HR	Num	8	3.	3.	Coordinator3 interf cap hour
188	CI3MN	Num	8	3.	3.	Coordinator3 interf cap minute

**Data Set Name: ue.sas7bdat**

Num	Variable	Type	Len	Format	Informat	Label
1	vsite	Num	8			Site
2	vhcid	Num	8			Patient ID
3	DOEM	Num	8	3.	3.	Date of evaluation month
4	DOED	Num	8	3.	3.	Date of evaluation day
5	DOEY	Num	8	5.	5.	Date of evaluation year
6	VISIT	Num	8	VISIT.	3.	Reason unsched visit
7	LABS	Num	8	YESNO.	3.	Complete labs unsched visit
8	WGTLB	Num	8	4.	4.	Weight pounds
9	TEMPF	Num	8	7.1	7.1	Temperature fahrenheit
10	HRMIN	Num	8	4.	4.	Heart rate beats per minute
11	BPS	Num	8	4.	4.	Blood pressure systolic
12	BPD	Num	8	4.	4.	Blood pressure diastolic
13	SYFAT	Num	8	YESNO.	3.	Symptom fatigue
14	SYSLP	Num	8	YESNO.	3.	Symptom difficulty sleeping
15	SYIRR	Num	8	YESNO.	3.	Symptom irritability
16	SYHAIR	Num	8	YESNO.	3.	Symptom hair loss
17	SYDEP	Num	8	YESNO.	3.	Symptom depression
18	SYWGT	Num	8	YESNO.	3.	Symptom weight loss
19	SYFLU	Num	8	YESNO.	3.	Symptom flu like
20	SYGI	Num	8	YESNO.	3.	Symptom gastrointestinal
21	SYINJ	Num	8	YESNO.	3.	Symptom injection site reaction
22	SYRSH	Num	8	YESNO.	3.	Symptom rash
23	SYJOI	Num	8	YESNO.	3.	Symptom joint aches
24	SYRES	Num	8	YESNO.	3.	Symptom respiratory
25	SYMUS	Num	8	YESNO.	3.	Symptom muscle ache
26	SYHACH	Num	8	YESNO.	3.	Symptom headache
27	SYITCH	Num	8	YESNO.	3.	Symptom itching
28	SYO	Num	8	YESNO.	3.	Symptom other
29	SYOS	Char	30	\$30.	\$30.	Symptom other specify
30	MXAD	Num	8	YESNO.	3.	Med history antidepress med
31	MXRES	Num	8	YESNO.	3.	Med history respiratory agent
32	MXTHY	Num	8	YESNO.	3.	Med history thyroid med
33	MXGF	Num	8	YESNO.	3.	Med hx growth factor
34	MXHB	Num	8	YESNO.	3.	Med hx herbal supplement
35	MXHB1	Num	8	HERBCAT.	3.	Med hx herbal supp 1
36	MXHB2	Num	8	HERBCAT.	3.	Med hx herbal supp 2

Num	Variable	Type	Len	Format	Informat	Label
37	MXHB3	Num	8	HERBCAT.	3.	Med hx herbal supp 3
38	MXHB4	Num	8	HERBCAT.	3.	Med hx herbal supp 4
39	MXHB5	Num	8	HERBCAT.	3.	Med hx herbal supp 5
40	MXHB6	Num	8	HERBCAT.	3.	Med hx herbal supp 6
41	DPSAD	Num	8	YESNO.	3.	Felt depressed most of time
42	DPFTR	Num	8	YESNO.	3.	Felt helpless about future
43	DPHRM	Num	8	YESNO.	3.	Thoughts about harm
44	COMM	Num	8	YESNO.	3.	Comments
45	COMMS	Char	60	\$60.	\$60.	Comments specify
46	COMM2S	Char	60	\$60.	\$60.	Comments 2 specify
47	DCCM	Num	8	3.	3.	Date data collection month
48	DCCD	Num	8	3.	3.	Date data collection day
49	DCCY	Num	8	5.	5.	Date data collection year
50	doedate	Num	8	MMDDYY10.		Date of evaluation

**Data Set Name: *xf.sas7bdat***

<b>Num</b>	<b>Variable</b>	<b>Type</b>	<b>Len</b>	<b>Format</b>	<b>Label</b>
1	vsite	Num	8		Site
2	vhcid	Num	8		Patient ID
3	TMPT	Num	8	TMPT.	Timepoint
4	FCMPL	Num	8	COMPBY.	Form completed by
5	DOEM	Num	8		Date of evaluation month
6	DOED	Num	8		Date of evaluation day
7	DOEY	Num	8		Date of evaluation year
8	XFDES	Num	8	ALWNEV.	XF sexual desire
9	XFOG	Num	8	SEXFUNC.	XF reach orgasm
10	XFSEX	Num	8	SATDIS.	XF overall sex life
11	XFSF	Num	8	BETTER.	XF therapy general sex funct
12	doedate	Num	8	MMDDYY10.	Date of evaluation

*Data Set Name: xm.sas7bdat*

Num	Variable	Type	Len	Format	Label
1	vsite	Num	8		Site
2	vhcid	Num	8		Patient ID
3	TMPT	Num	8	TMPT.	Timepoint
4	FCMPL	Num	8	COMPBY.	Form completed by
5	DOEM	Num	8		Date of evaluation month
6	DOED	Num	8		Date of evaluation day
7	DOEY	Num	8		Date of evaluation year
8	XMDES	Num	8	ALWNEV.	XM sexual desire
9	XMERT	Num	8	SEXFUNC.	XM erection sexual activity
10	XMEJ	Num	8	SEXFUNC.	XM ejaculate sexual stimulat
11	XMSEX	Num	8	SATDIS.	XM overall sex life
12	XMSF	Num	8	BETTER.	XM therapy general sex funct
13	doedate	Num	8	MMDDYY10.	Date of evaluation