

Coding Staff: |__|

SWQ: |__|__|__|__|__|

Name: _____

District: _____

Street: _____

Neighborhood Committee:

Follow Up Questionnaire for Women Health

English Translated Version

Dear residents:

Thank you for your support for our work by participating in this Prospective Cohort Study on Women Cancer Risk Reduction and Diet.

In the past several years, the rates of malignancies among Shanghai urban residents have been rising continuously, and cancer has become the most common cause of death. In 1997 at Changning District one out of three men and one out of four women died of cancer. The death rate due to cancers increased by 2% ~ 4% than the previous year. But we are still in lack of knowledge as to the causes and risks of cancers, and the effective prevention methods of some common malignancies. So we are here to conduct this large-scale research of women health. The aim of this research is to determine the major causes of the most common cancers among the Shanghai women and come up with effective prevention methods.

Thank you and all the other volunteers devoting to improve women health for participating in this medical research that will benefit to all women. It was because of your help that we were able to keep the participation rate on 97%. In consideration of the intimate relationship between chronic diseases and lifestyles, which tend to change over time, we now send interviewers again and inquire more questions concerning foods or diet. At the same time we send you some materials on improving health with the hope to contribute something to your health.

To ensure you that you know about our research and get the research results on time as well as the update knowledge about chronic disease prevention, please inform us of your addresses if you move. Also, your comments and suggestions for our work are always welcome. We will share your support and concern to the women health with all the volunteers participated in the study.

If you have questions, please call 64034901 or 64164814.

Thanks again for your support!

*Research Team for Protecting Women Health and Reducing Cancer Risks
Shanghai Cancer Research Institute*

Instructions:

1. Please fill this questionnaire out with pencil.
 2. Please answer all the questions.
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Part I General Information

A01. Pulse: _____ times/minute A01 |_|_|_|_|

A02. Systolic Blood Pressure A02 |_|_|_|_|

A03. Systolic Blood Pressure A03 |_|_|_|_|

A1. Name _____

A2. Date of Birth ____ year ____ month ____ day A2 |_|_|_|_|_|_|_|

A6. Date: ____ year ____ month ____ day A6 |_|_|_|_|_|_|_|_|

A7. The time when the interview starts:

1. Morning.

2. Afternoon; ____ minutes past ____ o'clock

A7 |_|_|_|_|_|_|_|

Part II Dietary History

First of all, please tell something about your dietary habits in the past year. In the following form, we have listed the food names residents in Shanghai most frequently eat. Please answer the questions in this order: did you eat or not first; then the frequency of consuming per week, month, or year; and lastly the amounts consumed per unit of time. Please do not leave any box blank.

For example, if an interviewee answered she had had beef and lamb every month, on average 5 Liang per month, please circle “month 3” in the Column -- Frequency of food consumption and fill “5” in the column – Amt., as follows:

	Frequency of food consumption					Amt. (Liang)	Coding
	Everyday 1	Every week 2	Every month 3	Every year 4	Never		
Beef or lamb			○			5	_ _ _ _

As to those foods that were rarely consumed such as black tree fungi, please indicate the amount of a whole every year. For example, if a family of three members consumed 2 Jin of dried Xianggu mushroom, half of which or 10 Liang was consumed by her, the form should be filled as follows:

	Frequency of food consumption					Amt. (Liang)	Coding
	Everyday 1	Every week 2	Every month 3	Every year 4	Never		
Dried Xionggu mushroom						10	_ _ _ _

As to the seasonal foods such as vegetables or fruits, please tell us the consumption of them when they are available on the market. For example, if an interviewee consumed about 5 Liang of spinach per every week when it is on the market, the 5 Liang could be eaten at a time or several occasions, the form should be as follows:

	Frequency of food consumption					Amt. (Liang)	Coding
	Everyday 1	Every week 2	Every month 3	Every year 4	Never		
Spinach						5	_ _ _ _

We understand it is not easy to figure out the exact consumption amount of a kind food, but even the estimated figures roughly reflect your diet and will be of great help to our study. Again please remember that it is about the dietary habit of yourself rather than that of your whole family. Also, we take the gross weights of foods.

Thank you very much for your support!

B1. Name of the food	Frequency of food consumption					Amt. (Liang)	Coding
	Everyday 1	Every week 2	Every month 3	Every year 4	Never		
1. Rice	Everyday 1	Every week 2	Every month 3	Every year 4	Never		B1-1 _ _ _
2. noodles, bums and other cooked wheat products	Everyday 1	Every week 2	Every month 3	Every year 4	Never		B1-2 _ _ _

B2. Meat, egg, fish	Frequency of food consumption					Amt. consumed (Liang)	Coding
	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		
1. pork chops	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-1 _ _ _
2. pork ribs	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-2 _ _ _
3. pig's feet	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-3 _ _ _
4. fresh pork (fat)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-4 _ _ _
5. fresh pork (lean)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-5 _ _ _
6. fresh pork (fat and lean mixed)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-6 _ _ _
7. pig liver, cow liver, sheep liver	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-7 _ _ _
8. animal organ meat (heart, brain, tongue, tripe, intestine)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-8 _ _ _
9. beef, lamb	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-9 _ _ _
10. hen, duck eggs	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-10 _ _ _
11. chicken	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-11 _ _ _
12. duck, goose	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-12 _ _ _
13. salt water fish (e.g., yellow croaker, hair tail)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-13 _ _ _
14. fresh water fish (silver carp, bream, crucian carp, etc.)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-14 _ _ _
15. rice field eel or river eel	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-15 _ _ _
16. shrimp, crab, etc	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-16 _ _ _
17. conch and shell fishes.	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-17 _ _ _
18. fresh milk	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-18 _ _ _

19. powdered milk	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B2-19 _ _ _ _
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Next, please provide something about the consumption of desserts and bean products:

B3. Desserts, beans and others	Frequency of food consumption					Amt. consumed (Liang)	Coding
1. all kinds of desserts	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-1 _ _ _ _
2. bread	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-2 _ _ _ _
3. candy and preserved fruits	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-3 _ _ _ _
4. soy milk, powdered soy milk	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-4 _ _ _ _
5. bean curd (tofu)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-5 _ _ _ _
6. fried bean curd, vegetarian chicken, bean curd cake and other kinds of bean products excluding fresh tofu	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-6 _ _ _ _
7. dried soybeans	Every week 2	Every Month 3	Every Year 4		Not at all 5		B3-7 _ _ _ _
8. mung beans, red beans and other dried beans	Every week 2	Every Month 3	Every Year 4		Not at all 5		B3-8 _ _ _ _
9. soybean sprouts	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-9 _ _ _ _
10. mung bean sprouts	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-10 _ _ _ _
11. peanuts	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-11 _ _ _ _
12. black and white edible tree fungi	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-12 _ _ _ _
13. dried Xianggu mushroom	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B3-13 _ _ _ _

B4. In the past year, how many times have you had fresh vegetables of any kind per day or per week?

1 day
 2 week _____ times B4. |_|_|_|_|
 3 Month
 B4_1 _____ liang/time B4_1. |_|_|_|_|

B5. Now, please tell me something about the consumption of fresh vegetables. When these foods are on markets, did you eat them everyday, every week, every month, or every year? Or did you never eat? How much were they if you did, please?

vegetables and other foods	Frequency of food consumption					Amt. consumed (Liang)	Coding
	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		
1. greens, Chinese greens	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-1 _ _ _ _
2. spinach	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-2 _ _ _ _
3. green cabbage	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-3 _ _ _ _
4. Chinese cabbage, bak choi cabbage	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-4 _ _ _ _
5. cauliflower	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-5 _ _ _ _
6. celery	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-6 _ _ _ _
7. eggplant	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-7 _ _ _ _
8. wild rice stems	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-8 _ _ _ _
9. asparagus lettuce	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-9 _ _ _ _
10. potato	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-10 _ _ _ _
11. wax gourd	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-11 _ _ _ _
12. cucumber, luffa	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-12 _ _ _ _
13. fresh mushroom or Xianggu mushroom	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-13 _ _ _ _
14. fresh red and green pepper	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-14 _ _ _ _
15. tomato	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-15 _ _ _ _
16. bamboo shoots	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-16 _ _ _ _
17. lotus root	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-17 _ _ _ _
18. garlic greens and garlic stalk	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-18 _ _ _ _
19. garlic bulb	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-19 _ _ _ _
20. onion	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-20 _ _ _ _
21. Chinese chives	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-21 _ _ _ _
22. Shallot	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-22 _ _ _ _
23. carrot	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-23 _ _ _ _
24. white radish	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-24 _ _ _ _
25. sweet potato	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-25 _ _ _ _
26. young soya bean, fresh spilt pea, fresh broad bean	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-26 _ _ _ _
27. yard long beans	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-27 _ _ _ _
28. kidney beans, sword beans	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-28 _ _ _ _
29. hyacinth bean / snow peas (Dutch peas)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-29 _ _ _ _

30.kelp, laver	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B5-30 _ _ _ _
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B6. In the past year, what was the frequency consuming fresh fruit in on daily, weekly, monthly or yearly bases?

1. Day
 2. Week _____ times. B6 |_|_|_|_|
 3. Month
 4. Year
- B6_1 _____ liang/time B6_1. |_|_|_|_|

B7. Next, please tell me when fruits of various kinds are on markets, did you eat them everyday, every week, every month, or every year? Or did you never eat? And normally how much did you eat if you did?

Name of the fruits	Frequency					Amt. (Liang)	Coding
	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		
1. apples	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-1 _ _ _ _
2. pears	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-2 _ _ _ _
3. tangerines, orange, grape-fruits	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-3 _ _ _ _
4. banana	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-4 _ _ _ _
5. grape	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-5 _ _ _ _
6. watermelon	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-6 _ _ _ _
7. peaches	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-7 _ _ _ _
8. Other fruits (e.g., strawberry, cantaloupe, etc.)	Everyday 1	Every week 2	Every Month 3	Every Year 4	Not at all 5		B7-8 _ _ _ _

B8. In the past year, how much of the following did your family consume (Liang)?

1. vegetable oil: _____ (Liang) B8-1 |_|_|_|_|
2. soy bean oil: _____ (Liang) B8-2 |_|_|_|_|
3. peanut oil: _____ (Liang) B8-3 |_|_|_|_|
4. lard: _____ (Liang) B8-4 |_|_|_|_|
5. brown (bleached) sugar: _____ (Liang) B8-5 |_|_|_|_|
6. salt: _____ (Liang) B8-6 |_|_|_|_|

B9. In the past year, how many people were there in your family, including yourself?

_____ persons B9 |_|_|_|

B10. In the past year, how many meals a month did your (including yourself) not have at home? (Such as in the canteen of the work place or in restaurants) (Not including breakfast)

_____ meals B10 |_|_|_|_|

B11. In the past year, how many meals a month did you not have at home? (Not including breakfast) _____ meals B11 |__|__|__|

Part III Personal Health and Lifestyle and Habits

CS1 Have you ever been diagnosed by a doctor to have acute myocardial infarction?

CS1 |__|

1. Yes. → C2. How old were you when it was diagnosed?
2. No. _____ years old.

CS2 |__|

C1. Have you ever been diagnosed by a doctor to have gastric ulcer or duodenal ulcer (also called alimentary ulcer)?

2. Yes. → C2. Which type?
2. No. 1. Gastric ulcer.
2. Duodenal ulcer.
3. Unknown.

C1 |__|

C2 |__|

C3. How old were you when it was diagnosed?
_____ years old.

C3 |__|__|

C4. Did you ever suffer from cirrhosis which was diagnosed by the doctor?

1. Yes. → C5. How old were you when it was first diagnosed?
2. No.

C4 |__|

C5 |__|__|

C6. Did you ever have bone fracture?

C6 |__|

1. Yes. → C7. Age of the 1st time fracture: _____ years old.
2. No. C8. Location of the 1st time fracture: _____
C9. Age of the last time fracture: _____ years old.
C10. Location of the 1st time fracture: _____
C11. Total times of fracture: _____ times.

C7 |__|__|

C8 |__|__|

C9 |__|__|

C10 |__|__|

C11 |__|__|

C12. Did you ever suffer from hyperthyroidism which was diagnosed by the doctor?

1. Yes. → C13. How old were you when diagnosed?
_____ years old.

C12 |__|

2. No.

C13 |__|__|

C14. Did you ever suffer from hypothyroidism which was diagnosed by the doctor?

1. Yes. → C15. How old were you when diagnosed?
_____ years old.

C14 |__|

2. No.

C15 |__|__|

C16. In the past 3 years, did you ever receive any surgery?

A. Name and location?	B. Reason?	C. Time?	C16A1	C16B1	C16C1
1. _____	_____	___ year ___ month	_ _	_ _ _	_ _ _ _
2. _____	_____	___ year ___ month	_ _	_ _ _	_ _ _ _

C17. In the past year, did you take the following vitamins regularly (at least 3 times a week for at least one month)?

Vitamins	Times per week	How many months
1. Vitamin A + D	_____ C17-1a _ _	_____ C17-1b _ _
2. Vitamin B	_____ C17-2a _ _	_____ C17-2b _ _
3. Vitamin C	_____ C17-3a _ _	_____ C17-3b _ _
4. Vitamin E	_____ C17-4a _ _	_____ C17-4b _ _
5. Multiple vitamins	_____ C17-5a _ _	_____ C17-5b _ _
6. Other vitamins (specify: _____)	_____ C17-6a _ _	_____ C17-6b _ _
7. Calcium tablets	_____ C17-7a _ _	_____ C17-7b _ _
8. (deep ocean) fish oil	_____ C17-8a _ _	_____ C17-8b _ _

C18. Do you still have menstrual periods now?

C18 |_|_|

1. Yes.
2. No. →

C19. When was the last period?
___ year ___ month.

C19 |_|_|_| |_|_|_|

C20. Reason for the cease of periods:
_____ 1 menopause
_____ 2 surgery
_____ 3 breast feeding
_____ 4 others

C20 |_|_|

C21. Are you a twin?

1. Yes. →
2. No.

C22. Are the twins of the same sex?
1. Yes.
2. No.

C21 |_|_|

C22 |_|_|

C23. Do you often drink tea (at least 3 times a week) now?

1. Yes. →
2. No.

C24. In the past year, how much tea did
you consumed per month?
_____ Liang.

C23 |_|_|

C24 |_|_|_|.|_|_|

C25. In the past year, how much ginseng did you yourself consumed?

_____ Liang.

C25 |_|_|_|.|_|_|

C26a. Are there people smoking in front of you before twenty years old?
1. hours/day C26a_1 |__|_|_|.|__|
2. cigarette/day. C26a_2 |__|_|_|

C26b. How many years did this situation last? ____ years C26b |__|_|_|

C27a. Are there people smoking in front of you after twenty years old?
1. hours/day C27a_1 |__|_|_|.|__|
2. cigarette/day. C27a_2 |__|_|_|

C27b. How many years did this situation last after 20 years? __ years C27b |__|_|_|

C28. How old were you when people started to smoking when you presented (at least 1 cigarette a day, and for at least half a year)?
_____ years old. C28 |__|_|_|

C29. Were there people smoking at work and how many hours per day?
_____ hours. C29 |__|_|_|. |__|_|_|

C30. How many years did this kind of situation last? _____ years. C30 |__|_|_|

C31. How old were you when your first exposed to other's smoking at work? (At least 1 cigarette per day for longer than half a year.)
_____ years old. C31 |__|_|_|

C32. In the past 2 years, have you participated in physical activities frequently? (At least 1 time a week for at least 3 months continuously to be "frequent".)
1. Yes. 2. No. (go to question C36.) C32 |__|_|_|

C33. During this period of time, the 3 activities you participated in most frequently were.
And C34. How many hours a week?
Activity 1: _____ C33-1 |__|_|_| _____ hours C34-1 |__|_|_|. |__|_|_|
Activity 2: _____ C33-2 |__|_|_| _____ hours C34-2 |__|_|_|. |__|_|_|
Activity 3: _____ C33-3 |__|_|_| _____ hours C34-3 |__|_|_|. |__|_|_|

C35. When you did exercises, did you:
1. Sweat every time. 2. Sweat most of the times. 3. Normally do not sweat.

C36. Compared to other women of your age, the time you spent on sports activities was:
1. More than average. 4. A little less than the average.
2. A little more than average. 5. Less than average.
3. About the average. 6. Unknown.

Interviewer Postscript

D1. The overall reliability of the interview material:

1. Very reliable.
2. Generally reliable.
3. Unreliable.

D1 |__|

C2. The time when the interview ends:

1. In the morning.
2. In the afternoon, ___ minutes past ___ o'clock.

D2 |__| |__|__|__|__|

D3. Signature of interviewer: _____

D3 |__|__|

D4. Signature of the person interviewed: _____