PHARMACOEPIDEMIOLOGY (PH)

*PH1.	The next questions are about your use of medicines. First, how many different kinds of prescription medicine have you taken during the <u>past seven days</u> ?							
	(IF NEC: A "prescription medicine" is one that you can only obtain from a doctor or by giving a doctor's written approval or "prescription" to a pharmacist.)							
	PROBE INITIAL ZERO/ DK: Please include any prescription medicines, even if you took them only once.							
	PRESCRIPTION MEDS							
	DON'T KNOW							
*PH2.	How many different kinds of <u>non</u> -prescription medicine have you taken during the <u>past seven days</u> ? Please include vitamins, supplements, and any other type of medicine you obtained without a prescription.							
	PROBE INITIAL ZERO/ DK: Please include any non-prescription medicines, even if you took them only once.							
	NON-PRESCRIPTION MEDS							

*PH2.1. (RB, PG 34) Please turn to Page 34 in the booklet. In the past 12 months, did you take any of the following types of prescription medications under the supervision of a doctor, for your emotions or nerves or your use of alcohol or drugs?

INTERVIEWER: READ EXAMPLES IN PARENTHESES ONLY IF R CANNOT READ

INTERVIEWER: (IF VOL) USE FOR PHYSICAL PROBLEM CODE 7

	YES (1)	NO (5)	(IF VOL) FOR PHYS (7)	DK (8)	RF (9)
*PH2.1a. Sleeping pills or other sedatives, (such as ambien or sonata)?	1	5	7	8	9
*PH2.1b. Anti-depressant medications, (such as prozac or zoloft)?	1	5	7	8	9
*PH2.1c. Tranquilizers, (such as xanax or ativan)?	1	5	7	8	9
*PH2.1d. Amphetamines or other stimulants, (such as ritalin or dextroamphetamine)?	1	5	7	8	9
*PH2.1e. Anti-psychotic medications, (such as haldol or risperdal)?	1	5	7	8	9

*PH2.2.	INTERVIEWER	CHECKPOINT:	(SEE	*PH2.1a –	*PH2.1f)

AT LEAST ONE RESPONSE CODED '1	'OR '8'1	GO TO *PH4 INTRO 1
ALL OTHERS	2	

*PH2.3.	Did you take any type of prescription medicine in the past	12 months for problems with your emotions, substance use,
	energy, concentration, sleep, or ability to cope with stress?	Include medicines even if you took them only once.

YES1	GO TO *PH4 INTRO 2
NO5	GO TO *PH100
DON'T KNOW 8	GO TO *PH100
REFUSED 9	GO TO *PH100

*PH4 INTRO 1. (RB, PG 35-37) Which of the medicines on this list
did you take in the past 12 months for any of the
following problems: problems with your emotions,
nerves, mental health, substance use, energy,
concentration, sleep, or ability to cope with stress?
Include medicines even if you took them only once.

*PH4 INTRO 2. (RB, PG 35-37) Which of the medicines on this list did you take for any of those problems in the past 12 months? Include medicines even if you took them only once.

PROBE: Any others?

PROBE: Any others?

INTERVIEWER: IF NEC, ASK R TO CONSULT MEDICATION BOTTLES FOR NAMES. RECORD UP TO 20 MENTIONS. RECORD ID NUMBERS IF THE MEDICATIONS ARE LISTED ON THE NEXT PAGE. IF NOT LISTED, RECORD "998" AS THE ID NUMBER. TAKE CARE TO SPELL MED NAME CORRECTLY AND TO WRITE DISTINCTLY FOR MEDS NOT ON THE LIST.

	MEDICATION NAME	ID NUMBER
4a. (MED #1)		
4b. (MED #2)		
4c. (MED #3)		
4d. (MED #4)		
4e. (MED #5)		
4f. (MED #6)		
4g. (MED #7)		
4h. (MED #8)		
4i. (MED #9)		
4j. (MED #10)		
4k. (MED #11)		
41. (MED #12)		
4m. (MED#13)		
4n. (MED#14)		
4o. (MED #15)		
4p. (MED #16)		
4q. (MED#17)		
4r. (MED #18)		
4s. (MED #19)		
4t. (MED#20)		

ID#	MEDICINE	ID#	MEDICINE	ID#	MEDICINE
1	Acetophenazine	48	Desipramine	95	Librax
2	Adapin	49	Desoxyn	96	Libritabs
3	Adderall	50	Desoxyn Gradumet	97	Librium
4	Alprazolam	51	Desyrel	98	Limbitrol
5	Amantadine	52	Dexedrine	99	Lithium
6	Ambien	53	Dextroamphetamine	100	Lithium Carbonate
7	Amitriptyline	54	Dextrostat	101	Lithium Citrate Syrup
8	Amobarbital	55	Dihydroergotamine Mesylate	102	Lithobid
9	Amoxapine	56	Diazepam	103	Lithonate
10	Amphetamines	57	Diphenhydramine	104	Lithotabs
11	Amytal	58	Disulfiram	105	Lorazepam
12	Anafranil	59	Divalproex	106	Loxapine
13	Antabuse	60	Doral	107	Loxitane
14	Antidepressant	61	Doriden	108	Ludiomil
15	Antipsychotic	62	Doxepin	109	Luminal
16	Aquachloral	63	Droperidol	110	Luvox
17	Artane	64	Duralith	111	Maprotiline
18	Asendin	65	Effexor	112	Marplan
19	Ativan	66	Elavil	113	Mellaril
20	Aventyl	67	Epitol	114	Meprobamate
21	Benadryl	68	Equanil	115	Mesoridazine
22	Benztropine	69	Eskalith	116	Methamphetamine
23	Bupropion	70	Eskalith Cr-450	117	Methotrimeprazine
24	Buspar	71	Estazolam	118	Methyl-Phenidate
25	Buspirone	72	Ethchlorvynol	119	Midazolam
26	Carbamazepine	73	Etrafon	120	Miltown
27	Carbatrol	74	Fluoxetine	121	Mirtazapine
28	Catapres	75	Fluphenazine	122	Mitran
29	Celexa	76	Flurazepam	123	Moban
30	Chloral Hydrate	77	Fluvoxamine	124	Moclobemide
31	Chlordiazepoxide	78	Gabapentin	125	Molindone
32	Chlorpromazine	79	Gen-Xene	126	Nardil
33	Citalopram	80	Glutethimide	127	Navane
34	Clomipramine	81	Halazepam	128	Nefazodone
35	Clonazepam	82	Halcion	129	Nembutal
36	Clonidine	83	Haldol	130	Neuramate
37	Clorazepate	84	Haldol Depot	131	Neurontin
38	Clorazil	85	Haloperidol	132	Norpramine
39	Clorprothixene	86	Hydroxyzine	133	Nortriptyline
40	Clozapine	87	Imipramine	134	Obetrol
41	Clozaril	88	Inapsine	135	Olanzapine
42	Cogentin	89	Inderal	136	Orap
43	Cylert	90	Isocarboxazid	137	Oxazepam
44	Dalmane	91	Janimine	138	Oxybutynin
45	Depacon	92	Klonopin	139	Pamelor
46	Depakene	93	Lamictal	140	Parnate
47	Depakote	94	Lamotrigine	141	Paroxetine

ID	MEDICINE	ID#	MEDICINE	ID#	MEDICINE
142	Paxil	167	Risperidone	192	Tranylcypromine
143	Paxipam	168	Ritalin	193	Trazodone
144	Pemoline	169	Secobarbital	194	Triavil
145	Permitil	170	Seconal	195	Triazolam
146	Perphenazine	171	Serax	196	Trifluoperazine
147	Phenelzine	172	Serentil	197	Triflupromazine
148	Phenergan	173	Seroquel	198	Trihexyphenidyl
149	Phenobarbital	174	Sertraline	199	Trilafon
150	Phenytoin	175	Serzone	200	Trimipramine
151	Pimozide	176	Sinequan	201	Valium
152	Placidyl	177	Sodium Pentobarbital	202	Valproate
153	Prazepam	178	Sodium Valproate	203	Valproic Acid
154	Prolixin	179	Sonata	204	Venlafaxine
155	Prolixin Depot	180	Stelazine	205	Versed
156	Propranolol	181	Surmontil	206	Vesprin
157	Propofol	182	Symmetrel	207	Vistaril
158	Prosom	183	Taractan	208	Vivactil
159	Protriptyline	184	Tegretol	209	Wellbutrin
160	Prozac	185	Temazepam	210	Xanax
161	Quazepam	186	Thioridazine	211	Zaleplon
162	Quetiapine	187	Thiothixene	212	Zoloft
163	Remeron	188	Thorazine	213	Zolpidem
164	Reserpine	189	Tindal	214	Zyban
165	Restoril	190	Tofranil	215	Zyprexa
166	Risperdal	191	Tranxene		

*PH5.1.	About how many days out of the past 30 did you take (MED)?
	DAYS
	DON'T KNOW998
	REFUSED
*PH5.2.	About how many days out of 365 in the past 12 months did you take (MED)?
	DAYS
	DON'T KNOW 998
	REFUSED 999
*PH5.3.	In the past 365 days, what's your best estimate of the month and day you took (MED) for the first time?
	PROBE DON'T KNOWS FOR BEST ESTIMATE OF MONTH AND DAY
	MONTHDAYYEAR
	TODAY997
	DON'T KNOW
	REFUSED
*PH5.4.	What's your best estimate of the month and day you took (MED) most recently?
	PROBE DON'T KNOWS FOR BEST ESTIMATE OF MONTH AND DAY
	MONTHDAYYEAR
	TODAY997
	DON'T KNOW
	REFUSED
*PH5.5.	How much (MED) did you usually take on the days you took it?
	(PROBE: Was that a pill, injection, teaspoon, tablespoon, drops or doses by syringe?)
	INTERVIEWER: CODE FRACTIONS AS DECIMALS:
	1/4 = 0.25
	1/3 = 0.33
	1/2 = 0.50
	NUMBER
	PILLS 1
	INJECTIONS2
	TEASPOONS
	DROPS5
	DOSES BY SYRINGE6
	DON'T KNOW

PH5.6	. How many milligrams of medicine were in each (pill/ injection/ teaspoon/tablespoon/drop/dose by syringe)?
	INTERVIEWER: IF NEC, ASK R TO CONSULT MEDICINE BOTTLE.
	MG
	DON'T KNOW998 REFUSED999
*PH6.	INTERVIEWER CHECKPOINT: (SEE *PH4)
	ONE TO THREE MEDICINES TAKEN1 ASK *PH14.1 - *PH20b SERIES FOR EACH
	FOUR OR MORE MEDICINES TAKEN

ASK *PH14.1 - *PH20b SERIES FOR EACH

*PH14.1.	(RB, PG 38) (Look at page 38 in your booklet.) You	I. MOOD
1	mentioned taking (MED). What problem(s) did you	SADNESS/ DEPRESSION/ CRYING 1
	take the (MED) for?	MANIC MOOD 17
		ANGER OR IRRITABILITY18
	(IF NEC: How did you think it would help you?)	NERVES/ ANXIETY2
		PANIC3
	INTERVIEWER: CIRCLE ALL THAT APPLY.	SUICIDAL THOUGHTS4
	PROBE UNTIL NO MORE MENTIONS: Any other problem	II. PHYSICAL SYMPTOMS
	you took the (MED) for?	LOW ENERGY5
		POOR APPETITE6
		POOR SLEEP7
		PHYSICAL PAIN8
		III.COGNITIVE SYMPTOMS
		POOR CONCENTRATION9
		POOR MEMORY
		TOOK WEWORT
		IV. ROLE FUNCTIONING
		LITTLE OR NO SEXUAL FUNCTIONING 11
		MARITAL PROBLEMS12
		NOT GETTING ALONG WITH OTHERS 13
		POOR WORK PERFORMANCE14
		V. <u>OTHER</u>
		ALCOHOL/ DRUG PROBLEMS
		OTHER (SPECIFY)
		Offick (Si Left 1)
		DON'T KNOW98
		REFUSED 99
		REFUSED99
*PH14.2.	Overall, how effective was (MED) in doing the things	VERY EFFECTIVE1
	you expected it to do – very, somewhat, not very, or not	SOMEWHAT EFFECTIVE
	at all effective?	NOT VERY EFFECTIVE3
		NOT AT ALL EFFECTIVE4
	IF VOL "EFFECTIVE IN SOME WAYS AND NOT	DON'T KNOW8
	OTHERS," PROBE: Taking everything into	REFUSED9
	consideration, how would you rate its overall	KLI OSLD9
	effectiveness? (Was it very, somewhat, not very, or not	
	at all effective?)	
	Did you take/ Are you taking) (MED) under the	WITH SUPERVISION1
	upervision of a health professional? Or, (did you take/ are	ON OWN/WITHOUT SUPERVISION 2 GO TO *PH17
V	ou taking) it on your own without the supervision of a	DON'T KNOW 8 GO TO *PH17
l h	ealth professional?	REFUSED

*PH15.1. Who prescribed the (medication/ MED) – a psychiatrist, a general or family doctor, some other medical doctor, or some other health professional?	PSYCHIATRIST 1 GENERAL OR FAMILY DOCTOR 2 SOME OTHER DOCTOR 3 SOME OTHER HEALTH PROFESSIONAL 4 (IF VOL) NO ONE PRESCRIBED THE MEDICATION 5 (IF VOL) OTHER (SPECIFY) 6 DON'T KNOW 8 REFUSED 9
*PH16. People do not always take their medicine as they are supposed to. Think of a typical month when you took (MED) in the past 12 months. How many days out of 30 did you typically either <u>forget</u> to take it or take <u>less</u> of it than you were supposed to take?	(0-30) NUMBER OF DAYS NOT SUPPOSED TO TAKE REGULARLY
*PH17. Are you still taking (MED)? YES	
*PH16. INTERVIEWER CHECKFOINT. (SEE "FH15) *PH15 EQUALS '1'	
*PH19. Did the health professional who supervised your use tell you to stop taking (MED)?	YES
*PH19a. Did the professional agree with your decision to stop?	YES
*PH20. Did you stop taking (MED) because you felt so much better that you no longer needed it? Or did you stop for some other reason?	FELT BETTER 1 GO TO *PH14.1 FOR NEXT MED OR *PH100 OTHER REASON 2 DON'T KNOW 8 REFUSED 9

*PH20a. (RB, PG 39) (Looking at page 39 in your booklet,) which of these are reasons why you stopped taking (MED): PROBE UNTIL NO MORE MENTIONS: Any other reasons? INTERVIEWER: CIRCLE ALL THAT APPLY. READ LIST ALOUD IF R CANNOT READ.	THE MEDICINE WAS NOT HELPING
	REFUSED999
*PH20a.1. INTERVIEWER CHECKPOINT: (SEE * PH20a)	
*PH20a EQUALS '6'	
*PH20b. What were the side effects that made you stop taking	SLEEP DISTURBANCES 1
(MED)?	VISION DISTURBANCES
PROBE: Any other side effects that made you stop	VOMITING
taking (MED)?	DRY MOUTH5
	ANXIETY AND IRRITABILITY6
	AGITATION
	PROBLEMS IN SEXUAL PERFORMANCE9
	LOSS OF CONCENTRATION
	NOT FEELING WELL
	TREMORS
	FATIGUE AND LOW ENERGY
	ANY OTHER SIDE EFFECT FOR
	STOPPING (SPECIFY)
	DON'T KNOW

PH100. INTERVIEWER CHECKPOINT: (SEE *D24a - *D24c, *D24e - *D24f, *D26a - *D26e, *D26g - *D26i, *D26j, *D26m, *D26m, *D26o, *D26p, *D26r, *D26s, *D26u-*D26w, *D26aa-*D26ee, *M1, *M8, *M5, *M7a-*M7o, *IR8a-*IR8m, *IR11.4, *PD17a, *PD14, *SP16, *SP17, *SO2, *SO16, *SO17, *AG13, *AG14, *AG15, *AG16, *G17.1, *IED16, *IED16a, *SD4, *SD6, *SD17, *SD19, *SR1, *SR2, *SR9.1, *SR10, *SR11, *SR12, *SR13, *SR14, *SR17 SERIES, *PH2.1b-*PH2.1e SERIES)

THE SUM OF THE COUNT EQUALS FIVE OR MORE BASED ON INCREMENTING THE COUNT BY ONE FOR EACH OF THE FOLLOWING NINE SETS OF QUESTIONS IF ONE OR MORE QUESTIONS IN THE SET ARE CODED '1': ONE OR MORE '1' CODES IN *D24a - *D24c, ONE OR MORE '1' CODES IN *D24e - *D24f, ONE OR MORE '1' CODES IN *D26a - *D26e, ONE OR MORE '1' CODES IN *D26g - *D26i, ONE OR MORE '1' CODES IN *D26j, ONE OR MORE '1' CODES IN (*D26m OR *D26o), ONE OR MORE '1' CODES IN (*D26p OR *D26r OR *D26s), ONE OR MORE '1' CODES IN *D26u-*D26w, ONE OR MORE '1' CODES IN *D26aa-*D26ee AND (*D9 EQUALS '1' OR

***D12** EQUALS '1')......1 *M1 EQUALS '1' AND M8 EQUALS '1' AND (*M9 EQUALS '4' or '5' OR *M5 EQUALS '1' AND SUM OF '1' RESPONSES IN *M7a-*M7o IS '4' OR MORE AND (*M9 EQUALS '4' or '5' OR *M9a EQUALS '1' OR '2' OR *M33 EQUALS '1')...3 (SUM OF '1' RESPONSES IN *IR8a-*IR8m EOUALS '4' OR MORE) AND *PD17a EQUALS '2'-'900' AND *PD14 EQUALS '1'5 ***SP16** EQUALS '4'-'5' OR ***SP17** EQUALS '1'......6 *SO2 EQUALS '3' AND (*SO16 EQUALS '4'-'5' OR *SO17 EQUALS '1')......7 *AG13 EQUALS '1' OR *AG14 EQUALS '1' OR *AG15 EQUALS '4'-'5' OR *SD4 EQUALS '1' OR *SD6 EQUALS '1' OR *SD17 EQUALS '1' OR

	*PH100 EQUALS '1'-'15'	THESE ARE "LONG GROUP." GO TO *PEA1			
	ALL OTHERS2				
*PH101.	INTERVIEWER CHECKPOINT: (SEE *D28, *IR11.4, *PD17a, *SP16, *SO16, *SO17, *AG15, *IED9, *IED9a, *SC26.2, *SC26.3, *SC26.4, *SD2, *SD15, *SR9.1, *SR10, *SR11, *SR12, *SR13, *SR14, *SR16)				
	*D28 EQUALS '2'-'9'	1			
	*IR11.4 EQUALS '1'	2			
	*PD17a EQUALS '1'-'900'	3			
	*SP16 EQUALS '2'-'5'	4			
	*SO16 EQUALS '2'-'5' OR *SO17 EQUALS '1'	5			
	*AG15 EQUALS '2'-'3'	6			
	*IED9 EQUALS '5'-'9' OR *IED9a EQUALS '1'	7			
	*SD2 EQUALS '1' OR *SD15 EQUALS '1'	8			
	*SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1'	10			
	(*M1 EQUALS '1' AND *M8 EQUALS '1') OR (*M5 EQUALS '1' AND				
	SUM OF '1' RESPONSES IN *M7a-*M7o IS '4' OR MORE)	12			
	NUMBER OF TYPES ENDORSED IN *SR17 SERIES IS THREE OR MORE	13			
	NUMBER OF '1' RESPONSES IN (*SR9.1, *SR10, *SR11, *SR12, *SR13, *SR14)				
	IS THREE OR MORE	14			
	AT LEAST ONE RESPONSE CODED '1' IN *PH2.1b-*PH2.1e SERIES	15			
	ALL OTHERS	11 GO TO *PH108			
*PH102.	INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)				
	ONE ELLIGIBLE ADULT IN HU1				
	TWO ELLIGIBLE ADULTS IN HU				
	THREE ELLIGIBLE ADULTS IN HU				
	FOUR ELLIGIBLE ADULTS IN HU				
	FIVE OR MORE ELLIGIBLE ADULTS IN HU 5 GO TO *PH107				
*PH103.	INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)				
	RANDOM 27% 1 THESE ARE "LONG GROUP" – GO TO ALL OTHERS 2 GO TO *PH114	*PEA1, PAGE X			
*PH104.	INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)				
	RANDOM 49% 1 THESE ARE "LONG GROUP" – GO TO ALL OTHERS 2 GO TO *PH114	*PEA1, PAGE X			
*PH105.	INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)				
	RANDOM 73%	*PEA1, PAGE X			

*PH106.	INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	100%	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X O *PH114		
*PH107.	. INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	100%	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X O *PH114		
*PH108.	08. INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	ONE ELLIGIBLE ADULT IN HU	1		
	TWO ELLIGIBLE ADULTS IN HU	2 GO TO *PH110		
	THREE ELLIGIBLE ADULTS IN HU	3 GO TO *PH111		
	FOUR ELLIGIBLE ADULTS IN HU	4 GO TO *PH112		
	FIVE OR MORE ELLIGIBLE ADULTS IN HU	5 GO TO *PH113		
*PH109.	99. INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	RANDOM 9% 1 THEST 2 GO T	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X O *PH114		
*PH110.	. INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	RANDOM 18% 1 THEST 2 GO T	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X O *PH114		
*PH111.	. INTERVIEWER CHECKPOINT: (SEE RESPONDE	NT'S ID NUMBER)		
	RANDOM 27% 1 THEST 2 GO T	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X O *PH114		
*PH112.	INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	RANDOM 36% 1 THEST 2 GO T	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X O *PH114		
*PH113.	3. INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER)			
	RANDOM 45% 1 THEST 1 ALL OTHERS 2	SE ARE "LONG GROUP" – GO TO *PEA1, PAGE X		
*PH114.	114. INTERVIEWER CHECKPOINT: (SEE RESPONDENT'S ID NUMBER) R IS PART OF COUPLES SAMPLE			
		E ARE "SHORT GROUP" – GO TO *DM1, NEXT SECTION		