

QUALITY OF LIFE

ID No.
Form Type H Q Q 1

INSTRUCTIONS

This survey asks you about you, aspects of your health, and daily activities and experiences. As you are completing the questions, remember that there are no right or wrong answers. Try to answer the questions as honestly as you can. If you are unsure about how to answer a question, please give the best answer you can. Please use checks inside parenthesis to answer the questions unless you are asked to write the answers.

1. Your initials _ _ _

2. Date you are completing this form _ _ _ F07 -DAYS
Month Day Year

The next several questions ask about your family, friends, and support that is available to you.

3. What is your current marital status? (Check only one answer.) MARSTAT

- Never married (1)
- Presently married; Living in a marriage-like relationship (2)
- Divorced, separated, or widowed (3)

4. What is your current employment status? (Check only one answer.) EMPSTAT

- Currently employed (1)
- Retired, unemployed, full-time homemaker, student (2)

5. Occupation (or most recent occupation if unemployed or retired): OCC

- A. Professional (1)
- B. Technical (2)
- C. Management/administration (3)
- D. Clerical (4)
- E. Sales (5)
- F. Service (6)
- G. Other (7)

6. What is your educational level? (Check only one answer.) EDUC

- Did not complete high school, high school graduate or equivalent (1)
- Post high school training or some college, (2)
- College graduate (3)
- Post graduate degree (4)

CHILDREN

7. A. How many children under 18 years are presently living in your household?

B. How many adults 18 years or older are presently living in your household (including yourself)? ADULTS

8. About how many close friends and close relatives do you have? That is, people you feel at ease with and can talk to about what is on your mind. (Check only one answer.)

- CLOSE
- | | | |
|-------------|-------------|---------------------|
| (01) None | (05) Four | (09) Eight |
| (02) One | (06) Five | (10) Nine |
| (03) Two | (07) Six | (11) Ten |
| (04) Three | (08) Seven | (12) More than ten |

9. How often is each of the following types of support available to you? (Check one answer on each line.)

SUPP AVL A

	None of <u>the time</u>	A little of the <u>time</u>	Some of the <u>time</u>	Most of the <u>time</u>	All of the <u>time</u>
A. Someone you can count on to listen to you when you need to talk	(1)	(2)	(3)	(4)	(5)

SUPP AVL B

B. Someone who shows you love and affection	(1)	(2)	(3)	(4)	(5)
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SUPP AVL C

C. Someone to give you information to help you understand a situation	(1)	(2)	(3)	(4)	(5)
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SUPP AVL D

D. Someone to give you good advice about a crisis	(1)	(2)	(3)	(4)	(5)
---	------	------	------	------	------

SUPP AVL E

E. Someone whose advice you really want	(1)	(2)	(3)	(4)	(5)
---	------	------	------	------	------

SUPP AVL F

F. Someone to help with daily chores	(1)	(2)	(3)	(4)	(5)
--	------	------	------	------	------

SUPP AVL G

G. Someone to share your most private worries and fears with	(1)	(2)	(3)	(4)	(5)
--	------	------	------	------	------

SUPP AVL H

H. Someone to do something enjoyable with	(1)	(2)	(3)	(4)	(5)
---	------	------	------	------	------

10. When you need others for companionship, assistance, or other types of support, do you find that it is:

SUPP NEED

- | | | | |
|--------------------------------------|--|---|---|
| (1) | (2) | (3) | (4) |
| Very easy for you to ask for support | Somewhat easy for you to ask for support | Somewhat difficult for you to ask for support | Very difficult for you to ask for support |

CRIT

11. Does anybody criticize the way you handle things?

- (1) Yes (2) No A. If yes, how many people? CRIT - NO

12. Has anybody withdrawn from you?

- (1) Yes (2) No A. If yes, how many people? WDRAW - NO

WDRAW

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13. Sometimes when you have a medical condition, there are people you expect to be helpful who aren't, or who don't do as much as you thought they would. Have you had that experience?

HELP (1) Yes (2) No A. If yes, how many people? HELA NO

14. We all know people who try to help but wind up making things worse. Has this happened to you?

WORSE (1) Yes (2) No A. If yes, how many people? WORSE NO

15. Is there anyone who seems to be out to make problems for you?

PROB (1) Yes (2) No A. If yes, how many people? PROB NO

16. Do you belong to any organized religion or religious group? (1) Yes (2) No ORG REL

17. How often do you attend church, synagogue or other type of religious service?

(1) Almost never (2) About once or twice a year (3) About once a month (4) About once a week (5) More than once a week RELIG

The next series of questions concern your view of your health. Read each question and check the appropriate answer.

18. How would you rate your mental or emotional health at the present time?

RATEEM (1) Excellent (2) Very good (3) Good (4) Fair (5) Poor

19. How satisfied are you with your mental or emotional health at the present time?

SATISEM (1) Very satisfied (2) Somewhat satisfied (3) Neither (4) Somewhat dissatisfied (5) Very dissatisfied

20. How would you rate your physical health at the present time?

RATEPHY (1) Excellent (2) Very good (3) Good (4) Fair (5) Poor

21. How satisfied are you with your physical health at the present time?

SATISPHY (1) Very satisfied (2) Somewhat satisfied (3) Neither (4) Somewhat dissatisfied (5) Very dissatisfied

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22. In general, would you say your overall health is:

- OVLTH#
- (1) (2) (3) (4) (5)
 Excellent Very good Good Fair Poor

23. How satisfied are you with your overall health at the present time?

- SATHLTH#
- (1) (2) (3) (4) (5)
 Very satisfied Somewhat satisfied Neither Somewhat dissatisfied Very dissatisfied

24. Did you know you had Raynaud's before you started the study? KNOW RAYN. (1) Yes (2) No

A. If yes, how long ago did you find out? KNOW R NK

25. When you first found out you had Raynaud's, did you feel:

		<u>None</u>	<u>A little</u>	<u>Some</u>	<u>A lot</u>
A. Angry?	ANGRY	(1)	(2)	(3)	(4)
B. Nervous?	NERV	(1)	(2)	(3)	(4)
C. Depressed?	DEPRESS	(1)	(2)	(3)	(4)
D. Bitter?	BITTER	(1)	(2)	(3)	(4)
E. Scared?	SCARED	(1)	(2)	(3)	(4)
F. Sad?	SAD	(1)	(2)	(3)	(4)
G. Resentful?	RESENT	(1)	(2)	(3)	(4)
H. Worried?	WORRIED	(1)	(2)	(3)	(4)
I. Down?	DOWN	(1)	(2)	(3)	(4)

26. The following questions are about general activities you might do during a typical day. Does your Raynaud's limit you in these activities? If so, how much? If the activity is something you don't normally do, check the *Don't normally do this* answer.

In the past 4 weeks, have you been limited in any of the following activities by Raynaud's symptoms?

	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
A. <u>Vigorous activities</u> , such as running, lifting heavy objects, participating in strenuous sports?	(1)	(2)	(3)	(4)
B. <u>Moderate activities</u> , such as moving a table, pushing a vacuum cleaner, bowling, or playing golf?	(1)	(2)	(3)	(4)
C. Lifting or carrying groceries?	(1)	(2)	(3)	(4)
D. Climbing <u>several</u> flights of stairs?	(1)	(2)	(3)	(4)
E. Climbing <u>one</u> flight of stairs?	(1)	(2)	(3)	(4)

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	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
F. Bending, kneeling, or stooping? LIMBENE	(1)	(2)	(3)	(4)
G. Walking <u>more than one mile</u> ? WALK 1 MI	(1)	(2)	(3)	(4)
H. Walking <u>several blocks</u> ? WALK SEV	(1)	(2)	(3)	(4)
I. Walking <u>one block</u> ? WALK 1 BLK	(1)	(2)	(3)	(4)
J. Bathing and dressing yourself? LIMBATH	(1)	(2)	(3)	(4)

27. The following questions are about more specific activities you might do during a typical day. In the past 4 weeks has your Raynaud's condition limited you in any of these activities? If so, how much? If the activity is something you don't normally do, check the *Don't normally do this* answer.

	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
A. Going outdoors in cold weather? OUTDOORS	(1)	(2)	(3)	(4)
B. Driving				
1. Holding or gripping the wheel GRIP	(1)	(2)	(3)	(4)
2. Shifting SHIFT	(1)	(2)	(3)	(4)
C. Shopping for refrigerated or frozen food? SHOP	(1)	(2)	(3)	(4)
D. Cooking				
1. Using utensils (chopping, slicing, stirring)? UTENSIL	(1)	(2)	(3)	(4)
2. Using kitchen appliances (can opener, blender, mixer)? APPL	(1)	(2)	(3)	(4)
3. Washing vegetables in cold water? WASH VEG	(1)	(2)	(3)	(4)
4. Removing or handling food from refrigerator or freezer? FREEZER	(1)	(2)	(3)	(4)
E. Laundry				
1. Placing clothes in or removing clothes from washer or dryer? WAS/CLTH	(1)	(2)	(3)	(4)
2. Folding or hanging clothes? HANG CLTH	(1)	(2)	(3)	(4)
F. Eating				
1. Holding cold or frozen foods? HLD FOOD	(1)	(2)	(3)	(4)
2. Swallowing cold or frozen foods? SWL FOOD	(1)	(2)	(3)	(4)
G. Drinking				
1. Holding a cold glass? HLD GLASS	(1)	(2)	(3)	(4)
2. Swallowing cold liquids? SWL LIQ	(1)	(2)	(3)	(4)

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- | | Yes,
limited
a lot | Yes,
limited
a little | No,
not at
all | Don't
normally
do this |
|--|--------------------------|-----------------------------|----------------------|------------------------------|
| H. Exercise and Recreation..... | | | | |
| 1. Swimming in cool water?..... <i>SWIM</i> | (1) | (2) | (3) | (4) |
| 2. Outdoor activity in cold weather?..... <i>OUTACT</i> | (1) | (2) | (3) | (4) |
| 3. Handling sports or recreational equipment (golf clubs, tennis racquets, gardening tools)?..... <i>EQUIP</i> | (1) | (2) | (3) | (4) |
| I. Bathing (wringing washcloth, holding toothbrush, shaving)?..... <i>BATH</i> | (1) | (2) | (3) | (4) |
| J. Dressing | | | | |
| 1. Fastening zippers or buttons?..... <i>ZIPPER</i> | (1) | (2) | (3) | (4) |
| 2. Tying shoelaces?..... <i>SHOELACE</i> | (1) | (2) | (3) | (4) |
| 3. Putting on gloves?..... <i>GLOVES</i> | (1) | (2) | (3) | (4) |
| K. Using a typewriter or computer?..... <i>USE COMP</i> | (1) | (2) | (3) | (4) |
| L. Using a pen or pencil?..... <i>USE PEN</i> | (1) | (2) | (3) | (4) |
| M. Using tools (screwdriver, pliers, saw)?..... <i>USE TOOLS</i> | (1) | (2) | (3) | (4) |
| N. Using machinery (lawnmower, drill, vacuum cleaner)?..... <i>USE MACH</i> | (1) | (2) | (3) | (4) |
| O. Social activities?..... <i>SOC ACT</i> | (1) | (2) | (3) | (4) |
| P. Sexual activity?..... <i>SEX ACT</i> | (1) | (2) | (3) | (4) |
| Q. Going into air-conditioned rooms?..... <i>AIR COND</i> | (1) | (2) | (3) | (4) |
| R. Dealing with emotionally stressful circumstances?..... <i>DEAL STR</i> | (1) | (2) | (3) | (4) |

28. At the present time, how would you rate your Raynaud's condition?

- | | | | | |
|-----------|-----------|-------|-------|-------|
| (1) | (2) | (3) | (4) | (5) |
| Excellent | Very good | Good | Fair | Poor |
- RATE RAY*

29. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your Raynaud's? (Please answer Yes or No for each question by checking the appropriate answer.)

- | | Yes | No |
|--|-------|------------------------|
| A. Cut down on the <u>amount of time</u> you spent on work or other activities | (1) | (2) <i>RAY PROBA</i> |
| B. <u>Accomplished less</u> than you would like | (1) | (2) <i>RAY PROBB</i> |
| C. Were limited in the <u>kind</u> of work or other activities | (1) | (2) <i>RAY PROBC</i> |
| D. Had <u>difficulty</u> performing the work or other activities (for example, it took extra effort) | (1) | (2) <i>RAY PROBD</i> |

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30. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? (Please answer Yes or No for each question by checking the appropriate answer.)

- | | <u>Yes</u> | <u>No</u> |
|--|------------|----------------------|
| A. Cut down on the <u>amount of time</u> you spent on work or other activities | (1) | (2) <i>ENPROBA</i> |
| B. <u>Accomplished less</u> than you would like | (1) | (2) <i>ENPROBB</i> |
| C. Didn't do work or other activities as <u>carefully</u> as usual | (1) | (2) <i>ENPROBC</i> |

31. During the past 4 weeks, to what extent has your physical health interfered with your normal social activities with family, friends, neighbors, or groups? (Check one answer.)

- | | | | | |
|------------|----------|------------|-------------|-----------|
| (1) | (2) | (3) | (4) | (5) |
| Not at all | Slightly | Moderately | Quite a bit | Extremely |
- INTRFER1*

32. During the past 4 weeks, to what extent have emotional problems interfered with your normal social activities with family, friends, neighbors, or groups? (Check one answer.)

- | | | | | |
|------------|----------|------------|-------------|-----------|
| (1) | (2) | (3) | (4) | (5) |
| Not at all | Slightly | Moderately | Quite a bit | Extremely |
- INTRFER2*

33. During the past 4 weeks, how much of the time has your physical health interfered with your social activities (like visiting with friends, relatives, etc.)? (Check one answer.)

- | | | | | |
|-----------------|------------------|------------------|----------------------|------------------|
| (1) | (2) | (3) | (4) | (5) |
| All of the time | Most of the time | Some of the time | A little of the time | None of the time |
- INTRFER3*

34. During the past 4 weeks, how much of the time have emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? (Check one answer.)

- | | | | | |
|-----------------|------------------|------------------|----------------------|------------------|
| (1) | (2) | (3) | (4) | (5) |
| All of the time | Most of the time | Some of the time | A little of the time | None of the time |
- INTRFER4*

35. In the past 4 weeks, how often did you experience pain as a result of your Raynaud's? (Check one answer.)

- | | | | |
|-------|--------|-----------|-------|
| (1) | (2) | (3) | (4) |
| Never | Rarely | Sometimes | Often |
- RAYN PAIN*

36. In the past 4 weeks, how often did you experience pain for any reason (except Raynaud's)? (Check one answer.)

- | | | | |
|-------|--------|-----------|-------|
| (1) | (2) | (3) | (4) |
| Never | Rarely | Sometimes | Often |
- OTHR PAIN*

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37. In the past 4 weeks, how intense was the pain that you experienced as a result of your Raynaud's?
 (Check one answer.)

- (1) Didn't have pain (2) Mild pain (3) Moderate pain (4) Severe pain

INTRAYPN

38. In the past 4 weeks, how intense was the pain from any source (except Raynaud's) that you experienced?
 (Check one answer.)

- (1) Didn't have pain (2) Mild pain (3) Moderate pain (4) Severe pain

INTOTHPN

39. During the past 4 weeks, how much did pain as a result of your Raynaud's interfere with your normal work (including work both outside the home and housework)? (Check one answer.)

- (1) Not at all (2) A little bit (3) Moderately (4) Quite a bit (5) Extremely

INTRAYWK

40. During the past 4 weeks, how much did pain from any source (except Raynaud's) interfere with your normal work (including work both outside the home and housework)? (Check one answer.)

- (1) Not at all (2) A little bit (3) Moderately (4) Quite a bit (5) Extremely

INTOTHWK

41. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please indicate the one answer that comes closest to the way you have been feeling.

How much of the time during the last 4 weeks (Check one answer on each line.)

	All of the Time	Most of the Time	A Good Bit of Time	Some of the Time	A Little of the Time	None of the Time
A. Did you feel full of pep? <u>PEP4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
B. Have you been a very nervous person? <u>NERV4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
C. Have you felt so down in the dumps that nothing could cheer you up? <u>DOWN4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
D. Did you feel tense? <u>TENSE4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
E. Did you feel angry? <u>ANGRY4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
F. Have you felt calm and peaceful? <u>CALM4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
G. Did you have a lot of energy? <u>ENERGY4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
H. Did you feel resentful? <u>RES4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
I. Have you felt down-hearted and blue? <u>BLUE4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
J. Did you feel worn out? <u>WORN4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
K. Did you feel irritable? <u>IRR4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
L. Did you feel worried? <u>WORR4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
M. Have you been a happy person? <u>HAPPY4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
N. Did you feel tired? <u>TIRE4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)
O. Did you feel bitter? <u>BITT4WK</u>	(1)	(2)	(3)	(4)	(5)	(6)

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42. In the past 4 weeks, have you used any of the following special clothing to avoid a Raynaud's attack?

	<u>Yes</u>	<u>No</u>
A. Electric gloves? <u>ELGLOVE</u>	(1)	(2)
B. Electric socks? <u>ELSOCK</u>	(1)	(2)
C. Insulated gloves? <u>INS GLOVE</u>	(1)	(2)
D. Insulated socks? <u>INS SOCK</u>	(1)	(2)
E. Thermal underwear? <u>THERMUND</u>	(1)	(2)
F. Extra sweaters? <u>EXSWEAT</u>	(1)	(2)
G. Chemical hand warmers? <u>HAND WARM</u>	(1)	(2)
H. Other: <u>C LTH OTHER</u>	(1)	(2)

43. In the past 4 weeks, have you had to do any of the following to prevent or alleviate a Raynaud's attack?

	<u>Yes</u>	<u>No</u>
A. Turn up the heat? <u>HEAT UP</u>	(1)	(2)
B. Use a space heater? <u>HEATER</u>	(1)	(2)
C. Use a heating pad? <u>HEAT PAD</u>	(1)	(2)
D. Move work space? <u>MVWKSP</u>	(1)	(2)
E. Get a steering wheel cover? <u>SWCOVER</u>	(1)	(2)
F. Put hands under warm water? <u>WARMWAT</u>	(1)	(2)
G. Put hands over heating vent? <u>HEAT VENT</u>	(1)	(2)
H. Drink warm liquid? <u>WARM LIQ</u>	(1)	(2)
I. Drink alcohol? <u>ALCOHOL</u>	(1)	(2)
J. Rub hands together? <u>RUB HAND</u>	(1)	(2)
K. Put hands in armpits? <u>ARMPITS</u>	(1)	(2)
L. Whirl arms around? <u>WHIRL</u>	(1)	(2)
M. Other: <u>PRVOTHR L</u>	(1)	(2)
N. Other: <u>PRVOTHR R</u>	(1)	(2)

44. During the past 4 weeks, how often did you:

	<u>Never</u>	<u>Rarely</u>	<u>Some- times</u>	<u>Often</u>
A. Feel rested from your night's sleep? <u>OFTENA</u>	(1)	(2)	(3)	(4)
B. Have difficulty falling asleep at night? <u>OFTENB</u>	(1)	(2)	(3)	(4)
C. Awaken earlier than your usual waking time? <u>OFTENC</u>	(1)	(2)	(3)	(4)
D. Have difficulty staying awake during the day? <u>OFTEND</u>	(1)	(2)	(3)	(4)

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45. Currently, are your sexual relations with your spouse or partner:
- SATISSEX*
- (1) Not Applicable (2) Very Unsatisfactory (3) A little Unsatisfactory (4) Somewhat Satisfactory (5) Very Satisfactory
46. Are you satisfied with the FREQUENCY with which you have sexual intercourse, or would you like to have sex more or less often?
- FREQSEX*
- (1) Not applicable (2) Less often (3) Satisfied (4) More often

The following questions ask about your confidence concerning two different treatments for Raynaud's. Please check the answer that corresponds most closely to the way you feel.

- | | Not
<u>at all</u> | A
<u>little</u> | Some-
<u>what</u> | Very | |
|--|----------------------|--------------------|----------------------|------|---------------|
| 47. How confident are you that Raynaud's can be treated successfully with biofeedback? | (1) | (2) | (3) | (4) | <i>CONF 1</i> |
| 48. How confident are you that Raynaud's can be treated successfully with nifedipine? | (1) | (2) | (3) | (4) | <i>CONF 2</i> |
| 49. How confident are you that you will be able to do what is required for your Raynaud's to be successfully treated with biofeedback? | (1) | (2) | (3) | (4) | <i>CONF 3</i> |
| 50. How confident are you that you will be able to do what is required for your Raynaud's to be successfully treated with nifedipine? | (1) | (2) | (3) | (4) | <i>CONF 4</i> |

Think back over the past 4 weeks and indicate if you have had any difficulty in the following areas because of your Raynaud's.

- | | Never had
<u>difficulty</u> | Rarely had
<u>difficulty</u> | Sometimes had
<u>difficulty</u> | Often had
<u>difficulty</u> | Always had
<u>difficulty</u> |
|--|--------------------------------|---------------------------------|------------------------------------|--------------------------------|---------------------------------|
| 51. <i>SOCIAL</i>
Social Activities
(lack of interest, withdrawal, lack of concern for others) | (1) | (2) | (3) | (4) | (5) |
| 52. <i>MEMORY</i>
Memory and Concentration
(easily distracted, lose or forget things, fail to complete tasks, misplace objects, lose train of thought) | (1) | (2) | (3) | (4) | (5) |
| 53. <i>SPATIAL</i>
Spatial Orientation
(become confused about whereabouts, sometimes become disoriented) | (1) | (2) | (3) | (4) | (5) |
| 54. <i>MOODS</i>
Moods and Emotions
(moody, depressed, irritable, cry easily, prolonged periods of laughter, inappropriate emotions, emotionally unresponsive, lack of interest) | (1) | (2) | (3) | (4) | (5) |

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- | | Never had
difficulty | Rarely had
difficulty | Sometimes had
difficulty | Often had
difficulty | Always had
difficulty |
|--|-------------------------|--------------------------|-----------------------------|-------------------------|--------------------------|
| 55. Sleep patterns <u>SLEEP</u>
(trouble getting to sleep, awakening
in the middle of the night, falling
asleep during the day) | (1) | (2) | (3) | (4) | (5) |

We are interested in how people respond when they confront difficult or stressful events in their lives. The following questions ask you to indicate how you are dealing with the stress associated with your Raynaud's Syndrome.

Each of the following items describes a way of reacting to your current situation. Tell us how much each of the items describes your own reactions by checking the appropriate answer to the right of each item. There are no "right" or "wrong" answers, so choose the most accurate answer for YOU -- not what you think "most people" would say or do or what you've been told to say or do. Indicate how much each item describes the way you've been dealing with your Raynaud's.

With respect to my Raynaud's.....

- | | Never | Some
times | Often | Always |
|--|-------|---------------|-------|--------|
| 56. I try to grow as a person as a result of my experience
with Raynaud's <u>REACT 1</u> | (1) | (2) | (3) | (4) |
| 57. I turn to work or other substitute activities to take my mind
off my condition <u>REACT 2</u> | (1) | (2) | (3) | (4) |
| 58. I get upset about my condition and let my emotions out <u>REACT 3</u> | (1) | (2) | (3) | (4) |
| 59. I try to get advice from someone about
what to do about my condition <u>REACT 4</u> | (1) | (2) | (3) | (4) |
| 60. I concentrate my efforts on doing something about my condition <u>REACT 5</u> | (1) | (2) | (3) | (4) |
| 61. I say to myself "this isn't happening to me." <u>REACT 6</u> | (1) | (2) | (3) | (4) |
| 62. I put my trust in God <u>REACT 7</u> | (1) | (2) | (3) | (4) |
| 63. I laugh about my condition <u>REACT 8</u> | (1) | (2) | (3) | (4) |
| 64. I admit to myself that I can't deal with my condition
and stop trying <u>REACT 9</u> | (1) | (2) | (3) | (4) |
| 65. I restrain myself from doing anything about my condition
too quickly <u>REACT 10</u> | (1) | (2) | (3) | (4) |
| 66. I discuss my feelings with someone <u>REACT 11</u> | (1) | (2) | (3) | (4) |
| 67. I use alcohol or drugs to make myself feel better
about my condition <u>REACT 12</u> | (1) | (2) | (3) | (4) |

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		Never	Some times	Often	Always
68.	I get used to the idea that I have Raynaud's REACT 13	(1)	(2)	(3)	(4)
69.	I talk to others to find out more about my situation REACT 14	(1)	(2)	(3)	(4)
70.	I keep myself from getting distracted by other thoughts or activities REACT 15	(1)	(2)	(3)	(4)
71.	I daydream about things other than my condition REACT 16	(1)	(2)	(3)	(4)
72.	I get upset and am really aware of my emotions REACT 17	(1)	(2)	(3)	(4)
73.	I seek God's help REACT 18	(1)	(2)	(3)	(4)
74.	I make a plan of action for dealing with my Raynaud's REACT 19	(1)	(2)	(3)	(4)
75.	I make jokes about my condition REACT 20	(1)	(2)	(3)	(4)
76.	I accept that I have Raynaud's and that it can't be changed REACT 21	(1)	(2)	(3)	(4)
77.	I hold off doing anything about my condition until the situation permits REACT 22	(1)	(2)	(3)	(4)
78.	I try to get emotional support from friends or relatives REACT 23	(1)	(2)	(3)	(4)
79.	I just give up trying to cope with my condition REACT 24	(1)	(2)	(3)	(4)
80.	I take additional action to try to minimize problems associated with my condition REACT 25	(1)	(2)	(3)	(4)
81.	I try to lose myself for a while by drinking alcohol or taking drugs REACT 26	(1)	(2)	(3)	(4)
82.	I just refuse to believe that I have Raynaud's REACT 27	(1)	(2)	(3)	(4)
83.	I let out my feelings concerning my condition REACT 28	(1)	(2)	(3)	(4)
84.	I try to see my condition in a different light, to make it seem more positive REACT 29	(1)	(2)	(3)	(4)
85.	I talk to someone who could do something concrete about problems associated with my condition REACT 30	(1)	(2)	(3)	(4)
86.	I sleep more than usual REACT 31	(1)	(2)	(3)	(4)
87.	I try to come up with a strategy about what to do concerning my condition REACT 32	(1)	(2)	(3)	(4)

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Form Type	H	Q	O	1	

		Never	Some times	Often	Always
88.	I focus on dealing with my condition, and if necessary let other things slide a little REACT 33	(1)	(2)	(3)	(4)
89.	I get sympathy and understanding from someone REACT 34	(1)	(2)	(3)	(4)
90.	I drink alcohol or take drugs, in order to think about my my condition less REACT 35	(1)	(2)	(3)	(4)
91.	I kid around about my condition REACT 36	(1)	(2)	(3)	(4)
92.	I give up the attempt to overcome the problems that result from my condition REACT 37	(1)	(2)	(3)	(4)
93.	I look for something good that is happening as a result of my condition REACT 38	(1)	(2)	(3)	(4)
94.	I think about how I might best handle the problems associated with my condition REACT 39	(1)	(2)	(3)	(4)
95.	I pretend that my condition hasn't really happened REACT 40	(1)	(2)	(3)	(4)
96.	I make sure not to make difficulties caused by my Raynaud's worse by acting too soon REACT 41	(1)	(2)	(3)	(4)
97.	I try hard to prevent other things from interfering with my efforts to handle my condition REACT 42	(1)	(2)	(3)	(4)
98.	I go to movies, or watch TV, to think about my condition less REACT 43	(1)	(2)	(3)	(4)
99.	I accept the reality of the fact that I have Raynaud's REACT 44	(1)	(2)	(3)	(4)
100.	I ask others who have had similar experiences what they did REACT 45	(1)	(2)	(3)	(4)
101.	I feel a lot of emotional distress and I find myself expressing those feelings a lot REACT 46	(1)	(2)	(3)	(4)
102.	I take direct action to get around the problems that result from my condition REACT 47	(1)	(2)	(3)	(4)
103.	I try to find comfort in my religion REACT 48	(1)	(2)	(3)	(4)
104.	I force myself to wait for the right time to do something about my condition REACT 49	(1)	(2)	(3)	(4)
105.	I make fun of my condition REACT 50	(1)	(2)	(3)	(4)
106.	I reduce the amount of time I'm putting into dealing with my condition REACT 51	(1)	(2)	(3)	(4)

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Form Type	H	Q	O	1	

		Never	Some times	Often	Always
107.	I talk to someone about how I feel REACT 52	(1)	(2)	(3)	(4)
108.	I use alcohol or drugs to help me cope with my Raynaud's REACT 53	(1)	(2)	(3)	(4)
109.	I learn to live with my condition REACT 54	(1)	(2)	(3)	(4)
110.	I put aside other activities in order to concentrate on dealing with my condition REACT 55	(1)	(2)	(3)	(4)
111.	I think hard about what steps to take in dealing with my condition REACT 56	(1)	(2)	(3)	(4)
112.	I act as though I never got Raynaud's REACT 57	(1)	(2)	(3)	(4)
113.	I do what has to be done, one step at a time REACT 58	(1)	(2)	(3)	(4)
114.	I try to learn something from my experiences with Raynaud's REACT 59	(1)	(2)	(3)	(4)
115.	I pray more than usual REACT 60	(1)	(2)	(3)	(4)

The next group of questions asks you about your feelings and thoughts during the last 4 weeks. In each case, you will be asked to indicate how often you felt or thought a certain way. Although some of the questions are similar, there are differences among them and you should treat each one as a separate question.

	Never	Almost never	Some-times	Fairly often	Very often	
116.	In the last 4 weeks, how often have you been upset because of something that happened unexpectedly?	(1)	(2)	(3)	(4)	(5) FEEL 1
117.	In the last 4 weeks, how often have you felt that you were unable to control the important things in your life?	(1)	(2)	(3)	(4)	(5) FEEL 2
118.	In the last 4 weeks, how often have you felt nervous and "stressed"?	(1)	(2)	(3)	(4)	(5) FEEL 3
119.	In the last 4 weeks, how often have you dealt successfully with day to day problems and annoyances?	(1)	(2)	(3)	(4)	(5) FEEL 4
120.	In the last 4 weeks, how often have you felt that you were effectively coping with important changes that were occurring in your life?	(1)	(2)	(3)	(4)	(5) FEEL 5
121.	In the last 4 weeks, how often have you felt confident about your ability to handle your personal problems?	(1)	(2)	(3)	(4)	(5) FEEL 6
122.	In the last 4 weeks, how often have you felt that things were going your way?	(1)	(2)	(3)	(4)	(5) FEEL 7
123.	In the last 4 weeks, how often have you found that you could not cope with all the things that you had to do?	(1)	(2)	(3)	(4)	(5) FEEL 8

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	Never	Almost never	Sometimes	Fairly often	Very often
124. In the last 4 weeks, how often have you been able to control irritations in your life?	(1)	(2)	(3)	(4)	(5) <i>FEEL 9</i>
125. In the last 4 weeks, how often have you felt that you were on top of things?	(1)	(2)	(3)	(4)	(5) <i>FEEL 10</i>
126. In the last 4 weeks, how often have you been angered because of things that happened that were outside of your control?	(1)	(2)	(3)	(4)	(5) <i>FEEL 11</i>
127. In the last 4 weeks, how often have you found yourself thinking about things that you have to accomplish?	(1)	(2)	(3)	(4)	(5) <i>FEEL 12</i>
128. In the last 4 weeks, how often have you been able to control the way you spend your time?	(1)	(2)	(3)	(4)	(5) <i>FEEL 13</i>
129. In the last 4 weeks, how often have you felt difficulties were piling up so high that you could not overcome them?	(1)	(2)	(3)	(4)	(5) <i>FEEL 14</i>

The next group of questions asks about you. For each of the statements, indicate the extent of your agreement by checking the appropriate answer.

Try not to let your response to one question influence your response to other questions.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
130. I often feel lonely <i>You 1</i>	(1)	(2)	(3)	(4)	(5)
131. I'm always trying to figure myself out <i>You 2</i>	(1)	(2)	(3)	(4)	(5)
132. In uncertain times, I usually expect the best <i>You 3</i>	(1)	(2)	(3)	(4)	(5)
133. I am quick to sense the hunger contractions of my stomach <i>You 4</i>	(1)	(2)	(3)	(4)	(5)
134. I often feel fed up <i>You 5</i>	(1)	(2)	(3)	(4)	(5)
135. So far I have gotten the important things I want in life <i>You 6</i>	(1)	(2)	(3)	(4)	(5)
136. I think about myself a lot <i>You 7</i>	(1)	(2)	(3)	(4)	(5)
137. If something can go wrong for me it will <i>You 8</i>	(1)	(2)	(3)	(4)	(5)
138. I'm an irritable person <i>You 9</i>	(1)	(2)	(3)	(4)	(5)

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		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
139.	I take a positive attitude toward myself You 10	(1)	(2)	(3)	(4)	(5)
140.	I generally pay attention to my inner feelings You 11	(1)	(2)	(3)	(4)	(5)
141.	I'm very aware of changes in my body temperature You 12	(1)	(2)	(3)	(4)	(5)
142.	I always look on the bright side of things You 13	(1)	(2)	(3)	(4)	(5)
143.	I sometimes feel "just miserable" for no good reason You 14	(1)	(2)	(3)	(4)	(5)
144.	I often daydream about myself You 15	(1)	(2)	(3)	(4)	(5)
145.	I feel that I'm a person of worth, at least as much as others You 16	(1)	(2)	(3)	(4)	(5)
146.	If I could live my life over, I would change almost nothing You 17	(1)	(2)	(3)	(4)	(5)
147.	My mood often goes up and down You 18	(1)	(2)	(3)	(4)	(5)
148.	I'm optimistic about my future You 19	(1)	(2)	(3)	(4)	(5)
149.	I never take a hard look at myself You 20	(1)	(2)	(3)	(4)	(5)
150.	I can often feel my heart beating You 21	(1)	(2)	(3)	(4)	(5)
151.	I'm often troubled about feelings of guilt You 22	(1)	(2)	(3)	(4)	(5)
152.	I am satisfied with my life You 23	(1)	(2)	(3)	(4)	(5)
153.	I hardly ever expect things to go my way You 24	(1)	(2)	(3)	(4)	(5)
154.	I am constantly thinking about my reasons for doing things You 25	(1)	(2)	(3)	(4)	(5)
155.	I'd call myself a nervous person You 26	(1)	(2)	(3)	(4)	(5)
156.	I feel I do not have much to be proud of You 27	(1)	(2)	(3)	(4)	(5)
157.	Things never work out the way I want them to You 28	(1)	(2)	(3)	(4)	(5)
158.	I sometimes step back (in my mind) in order to examine myself from a distance You 29	(1)	(2)	(3)	(4)	(5)
159.	I'd call myself tense or "high-strung" You 30	(1)	(2)	(3)	(4)	(5)
160.	I know immediately when my mouth or throat gets dry You 31	(1)	(2)	(3)	(4)	(5)

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		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
161.	I'm a believer in the idea that "every cloud has a silver lining" You 32	(1)	(2)	(3)	(4)	(5)
162.	The conditions of my life are excellent You 33	(1)	(2)	(3)	(4)	(5)
163.	I'm quick to notice changes in my mood You 34	(1)	(2)	(3)	(4)	(5)
164.	I often feel that life is very dull You 35	(1)	(2)	(3)	(4)	(5)
165.	I rarely count on good things happening to me You 36	(1)	(2)	(3)	(4)	(5)
166.	At times, I think I'm no good at all You 37	(1)	(2)	(3)	(4)	(5)
167.	I know the way my mind works when I work through a problem You 38	(1)	(2)	(3)	(4)	(5)
168.	In most ways my life is close to my ideal You 39	(1)	(2)	(3)	(4)	(5)
169.	I am easily hurt when people find fault with me or my work You 40	(1)	(2)	(3)	(4)	(5)
170.	I am sensitive to internal bodily tensions You 41	(1)	(2)	(3)	(4)	(5)
171.	Overall, I expect more good things to happen to me than bad You 42	(1)	(2)	(3)	(4)	(5)

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172. Here is a ladder representing the "Ladder of Life." The top of the ladder represents the BEST possible life for you. The bottom of the ladder represents the WORST possible life for you. (Answer parts A through C below.)

A. On which step of the ladder do you feel you personally stand at the present time?

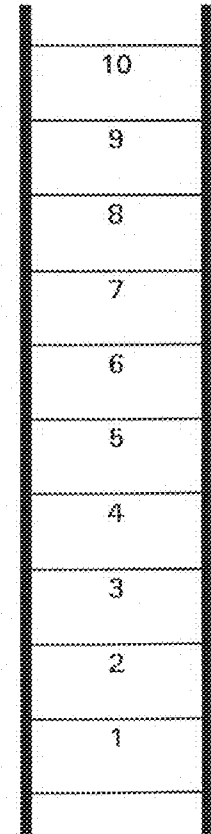
Present time (1 to 10): LOFA

B. On which step would you say you stood 1 year ago?

Before beginning the study (1 to 10): LOFB

C. Thinking about your future, on which step do you think you will be about 1 year from now?

In 1 year (1 to 10): LOFC



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The next group of questions is the same as a group you answered earlier in this questionnaire. In the first group, you were asked to think about how you are responding to difficulties and stressful events related to your Raynaud's. For the next group of questions, we are interested in how you typically respond to difficult or stressful events in general. There are lots of ways to try to deal with stress. In this section, we are interested in what you *usually* do when you are under a lot of stress.

Please try to respond to each item *separately in your mind from each other item*. Choose your answers thoughtfully, and make your answers as true **FOR YOU** as you can. Please answer *every* item. There are not "right" or "wrong" answers, so choose the most accurate answer for **YOU** -- not what you think "most people" would say or do. Indicate what **YOU** usually do when **YOU** experience a stressful event.

When I experience stress

		Never	Some times	Often	Always
173.	I try to grow as a person as a result of the experience <u>USUAL 1</u>	(1)	(2)	(3)	(4)
174.	I turn to work or other substitute activities to take my mind off things <u>USUAL 2</u>	(1)	(2)	(3)	(4)
175.	I get upset and let my emotions out <u>USUAL 3</u>	(1)	(2)	(3)	(4)
176.	I try to get advice from someone about what to do <u>USUAL 4</u>	(1)	(2)	(3)	(4)
177.	I concentrate my efforts on doing something about it <u>USUAL 5</u>	(1)	(2)	(3)	(4)
178.	I say to myself "this isn't real" <u>USUAL 6</u>	(1)	(2)	(3)	(4)
179.	I put my trust in God <u>USUAL 7</u>	(1)	(2)	(3)	(4)
180.	I laugh about the situation <u>USUAL 8</u>	(1)	(2)	(3)	(4)
181.	I admit to myself that I can't deal with it and quit trying <u>USUAL 9</u>	(1)	(2)	(3)	(4)
182.	I restrain myself from doing anything too quickly <u>USUAL 10</u>	(1)	(2)	(3)	(4)
183.	I discuss my feelings with someone <u>USUAL 11</u>	(1)	(2)	(3)	(4)
184.	I use alcohol or drugs to make myself feel better <u>USUAL 12</u>	(1)	(2)	(3)	(4)
185.	I get used to the idea that it happened <u>USUAL 13</u>	(1)	(2)	(3)	(4)
186.	I talk to others to find out more about the situation <u>USUAL 14</u>	(1)	(2)	(3)	(4)
187.	I keep myself from getting distracted by other thoughts or activities <u>USUAL 15</u>	(1)	(2)	(3)	(4)
188.	I daydream about things other than this <u>USUAL 16</u>	(1)	(2)	(3)	(4)

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		Never	Some times	Often	Always
189.	I get upset and am really aware of my emotions	(1)	(2)	(3)	(4)
190.	I seek God's help	(1)	(2)	(3)	(4)
191.	I make a plan of action	(1)	(2)	(3)	(4)
192.	I make jokes about it	(1)	(2)	(3)	(4)
193.	I accept that this has happened and that it can't be changed	(1)	(2)	(3)	(4)
194.	I hold off doing anything about it until the situation permits	(1)	(2)	(3)	(4)
195.	I try to get emotional support from friends or relatives	(1)	(2)	(3)	(4)
196.	I just give up trying to reach my goal	(1)	(2)	(3)	(4)
197.	I take additional action to try to get rid of the problems	(1)	(2)	(3)	(4)
198.	I try to lose myself for a while by drinking alcohol or taking drugs	(1)	(2)	(3)	(4)
199.	I just refuse to believe that it has happened	(1)	(2)	(3)	(4)
200.	I let my feelings out	(1)	(2)	(3)	(4)
201.	I try to see it in a different light, to make it seem more positive	(1)	(2)	(3)	(4)
202.	I talk to someone who could do something concrete about the problem	(1)	(2)	(3)	(4)
203.	I sleep more than usual	(1)	(2)	(3)	(4)
204.	I try to come up with a strategy about what to do	(1)	(2)	(3)	(4)
205.	I focus on dealing with this problem, and if necessary let other things slide a little	(1)	(2)	(3)	(4)
206.	I get sympathy and understanding from someone	(1)	(2)	(3)	(4)
207.	I drink alcohol or take drugs, in order to think about it less	(1)	(2)	(3)	(4)
208.	I kid around about it	(1)	(2)	(3)	(4)
209.	I give up the attempt to get what I want	(1)	(2)	(3)	(4)

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		Never	Some times	Often	Always
210.	I look for something good in what is happening <i>USUAL 38</i>	(1)	(2)	(3)	(4)
211.	I think about how I might best handle the problem <i>USUAL 39</i>	(1)	(2)	(3)	(4)
212.	I pretend that it hasn't really happened <i>USUAL 40</i>	(1)	(2)	(3)	(4)
213.	I make sure not to make matters worse by acting too soon <i>USUAL 41</i>	(1)	(2)	(3)	(4)
214.	I try hard to prevent other things from interfering with my efforts at dealing with this <i>USUAL 42</i>	(1)	(2)	(3)	(4)
215.	I go to movies, or watch TV, to think about it less <i>USUAL 43</i>	(1)	(2)	(3)	(4)
216.	I accept the reality of the fact that it happened <i>USUAL 44</i>	(1)	(2)	(3)	(4)
217.	I ask others who have had similar experiences what they did <i>USUAL 45</i>	(1)	(2)	(3)	(4)
218.	I feel a lot of emotional distress and I find myself expressing those feelings a lot <i>USUAL 46</i>	(1)	(2)	(3)	(4)
219.	I take direct action to get around the problem <i>USUAL 47</i>	(1)	(2)	(3)	(4)
220.	I try to find comfort in my religion <i>USUAL 48</i>	(1)	(2)	(3)	(4)
221.	I force myself to wait for the right time to do something <i>USUAL 49</i>	(1)	(2)	(3)	(4)
222.	I make fun of the situation <i>USUAL 50</i>	(1)	(2)	(3)	(4)
223.	I reduce the amount of time I'm putting into solving the problem <i>USUAL 51</i>	(1)	(2)	(3)	(4)
224.	I talk to someone about how I feel <i>USUAL 52</i>	(1)	(2)	(3)	(4)
225.	I use alcohol or drugs to help me get through it <i>USUAL 53</i>	(1)	(2)	(3)	(4)
226.	I learn to live with it <i>USUAL 54</i>	(1)	(2)	(3)	(4)
227.	I put aside other activities in order to concentrate on this <i>USUAL 55</i>	(1)	(2)	(3)	(4)
228.	I think hard about what steps to take <i>USUAL 56</i>	(1)	(2)	(3)	(4)
229.	I act as though it hasn't even happened <i>USUAL 57</i>	(1)	(2)	(3)	(4)
230.	I do what has to be done, one step at a time <i>USUAL 58</i>	(1)	(2)	(3)	(4)
231.	I try to learn something from the experience <i>USUAL 59</i>	(1)	(2)	(3)	(4)
232.	I pray more than usual <i>USUAL 60</i>	(1)	(2)	(3)	(4)

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The following items list a number of common symptoms that a person might experience. For each item, we are interested in knowing *how much that problem or symptom has bothered you during the past four weeks, including today.* Respond to each item by checking the appropriate response.

How much have you been bothered by

		Not at all	A little bit	Quite a bit	A lot
233.	Weight change (gain or loss of 10 pounds or more in 4 weeks) <u>WEIGHT</u>	(1)	(2)	(3)	(4)
234.	Back pain <u>BACKPAIN</u>	(1)	(2)	(3)	(4)
235.	Constipation <u>CONST</u>	(1)	(2)	(3)	(4)
236.	Dizziness <u>DIZZY</u>	(1)	(2)	(3)	(2)
237.	Diarrhea <u>DIARRHEA</u>	(1)	(2)	(3)	(4)
238.	Faintness <u>FAINT</u>	(1)	(2)	(3)	(4)
239.	Fatigue <u>FATIGUE</u>	(1)	(2)	(3)	(4)
240.	Headache <u>HEAD</u>	(1)	(2)	(3)	(4)
241.	Migraine headache <u>MIGRAINE</u>	(1)	(2)	(3)	(4)
242.	Nausea <u>NAUSEA</u>	(1)	(2)	(3)	(4)
243.	Acid stomach or indigestion <u>INDIGEST</u>	(1)	(2)	(3)	(4)
244.	Stomach pain (e.g., cramps) <u>CRAMPS</u>	(1)	(2)	(3)	(4)
245.	Hot or cold spells <u>SPELLS</u>	(1)	(2)	(3)	(4)
246.	Vomiting <u>VOMIT</u>	(1)	(2)	(3)	(4)
247.	Hands trembling <u>TREMBLE</u>	(1)	(2)	(3)	(4)
248.	Flushing or suddenly feeling hot all over <u>FLUSHED</u>	(1)	(2)	(3)	(4)
249.	Heart pounding or racing <u>RACE+T</u>	(1)	(2)	(3)	(4)
250.	Poor appetite <u>APPETITE</u>	(1)	(2)	(3)	(4)
251.	Shortness of breath <u>BREATH</u>	(1)	(2)	(3)	(4)
252.	Numbness or tingling <u>NUMB</u>	(1)	(2)	(3)	(4)
253.	Weakness <u>WEAK</u>	(1)	(2)	(3)	(4)
254.	Pains in heart or chest <u>CHESTPAIN</u>	(1)	(2)	(3)	(4)

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		Not at all	A little bit	Quite a bit	A lot
255.	Feeling low in energy	(1)	(2)	(3)	(4)
256.	Stuffy head or nose	(1)	(2)	(3)	(4)
257.	Blurred vision	(1)	(2)	(3)	(4)
258.	Muscle tension or soreness	(1)	(2)	(3)	(4)
259.	Muscle cramps	(1)	(2)	(3)	(4)
260.	Menstrual cramps	(1)	(2)	(3)	(4)
261.	Palpitations (fluttering or irregular heartbeat)	(1)	(2)	(3)	(4)
262.	Bruises	(1)	(2)	(3)	(4)
263.	Nosebleed	(1)	(2)	(3)	(4)
264.	Light headedness	(1)	(2)	(3)	(4)
265.	Wheezing	(1)	(2)	(3)	(4)
266.	Cough	(1)	(2)	(3)	(4)
267.	Yeast infection	(1)	(2)	(3)	(4)
268.	Bladder infection	(1)	(2)	(3)	(4)
269.	Tooth/gum problems	(1)	(2)	(3)	(4)
270.	Earaches	(1)	(2)	(3)	(4)
271.	Swelling in hands, feet, arms, or legs	(1)	(2)	(3)	(4)

LOWENER
 STUFFY
 VISION
 MUSC SORE
 MUSC CRAMP
 MENSTRAL
 PALP
 BRUISES
 NOSE BLEED
 LIGHT HEAD
 WHEEZE
 COUGH
 YSTINE
 BLADINE
 TEETH
 EARACHE
 SWELL

The following questions ask you about your opinions concerning treatment in the Raynaud's Study.

* PREFER

272. At this time would you:

- | | | | | |
|---|---|---|--|--------------------------------------|
| (1) | (2) | (3) | (4) | (5) |
| Strongly prefer
biofeedback
treatment | Moderately prefer
biofeedback
treatment | Have no preference
for either
treatment | Moderately prefer
drug
treatment | Strongly prefer
drug
treatment |

EMPHASIS 4
 COME BACK
 PLEASE
 TO 211
 10/16/94

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273. Does the biofeedback treatment make sense to you?

BIO-SENS

- (1) No, not at all (2) Yes, a little (3) Yes, moderately (4) Yes, quite a bit (5) Yes, very much

274. Does the drug treatment make sense to you?

DRUG-SEN

- (1) No, not at all (2) Yes, a little (3) Yes, moderately (4) Yes, quite a bit (5) Yes, very much

The following will be completed by medical staff.

275. Research Coordinator:

Signature: _____ RTS Staff No: _____

276. Date form reviewed: _____
Month Day Year

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QUALITY OF LIFE

ID No.
Form Type H Q Q 1

INSTRUCTIONS

This survey asks you about you, aspects of your health, and daily activities and experiences. As you are completing the questions, remember that there are no right or wrong answers. Try to answer the questions as honestly as you can. If you are unsure about how to answer a question, please give the best answer you can. Please use checks inside parenthesis to answer the questions unless you are asked to write the answers.

1. Your initials _ _ _

2. Date you are completing this form _ _ _ F07 -DAYS
Month Day Year

The next several questions ask about your family, friends, and support that is available to you.

3. What is your current marital status? (Check only one answer.) MARSTAT

- Never married (1)
- Presently married; Living in a marriage-like relationship (2)
- Divorced, separated, or widowed (3)

4. What is your current employment status? (Check only one answer.) EMPSTAT

- Currently employed (1)
- Retired, unemployed, full-time homemaker, student (2)

5. Occupation (or most recent occupation if unemployed or retired): OCC

- A. Professional (1)
- B. Technical (2)
- C. Management/administration (3)
- D. Clerical (4)
- E. Sales (5)
- F. Service (6)
- G. Other (7)

6. What is your educational level? (Check only one answer.) EDUC

- Did not complete high school, high school graduate or equivalent (1)
- Post high school training or some college, (2)
- College graduate (3)
- Post graduate degree (4)

CHILDREN

7. A. How many children under 18 years are presently living in your household? _____
 B. How many adults 18 years or older are presently living in your household (including yourself)? _____ ADULTS

8. About how many close friends and close relatives do you have? That is, people you feel at ease with and can talk to about what is on your mind. (Check only **one** answer.)

- (01) None (05) Four (09) Eight CLOSE
 (02) One (06) Five (10) Nine
 (03) Two (07) Six (11) Ten
 (04) Three (08) Seven (12) More than ten

9. How often is each of the following types of support available to you? (Check **one** answer on each line.)

SUPPORTABLE

SUPPORTABLE

SUPPORTABLE

SUPPORTABLE

SUPPORTABLE

SUPPORTABLE

SUPPORTABLE

SUPPORTABLE

None of the time A little of the time Some of the time Most of the time All of the time

- A. Someone you can count on to listen to you when you need to talk (1) (2) (3) (4) (5)
 B. Someone who shows you love and affection (1) (2) (3) (4) (5)
 C. Someone to give you information to help you understand a situation (1) (2) (3) (4) (5)
 D. Someone to give you good advice about a crisis (1) (2) (3) (4) (5)
 E. Someone whose advice you really want (1) (2) (3) (4) (5)
 F. Someone to help with daily chores (1) (2) (3) (4) (5)
 G. Someone to share your most private worries and fears with (1) (2) (3) (4) (5)
 H. Someone to do something enjoyable with (1) (2) (3) (4) (5)

10. When you need others for companionship, assistance, or other types of support, do you find that it is:

SUPPORT NEEDED

- (1) Very easy for you to ask for support (2) Somewhat easy for you to ask for support (3) Somewhat difficult for you to ask for support (4) Very difficult for you to ask for support

CRIT

11. Does anybody criticize the way you handle things? (1) Yes (2) No A. If yes, how many people? CRIT-NO

WDRWN

12. Has anybody withdrawn from you? (1) Yes (2) No A. If yes, how many people? WDRWN-NO

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13. Sometimes when you have a medical condition, there are people you expect to be helpful who aren't, or who don't do as much as you thought they would. Have you had that experience?
HELP (1) Yes (2) No A. If yes, how many people? *HELP-NO*
14. We all know people who try to help but wind up making things worse. Has this happened to you?
WORSE (1) Yes (2) No A. If yes, how many people? *WORSE-NO*
15. Is there anyone who seems to be out to make problems for you?
PROB (1) Yes (2) No A. If yes, how many people? *PROB-NO*
16. Do you belong to any organized religion or religious group? (1) Yes (2) No *ORG REL*
17. How often do you attend church, synagogue or other type of religious service?
 (1) Almost never (2) About once or twice a year (3) About once a month (4) About once a week (5) More than once a week *RELIG*

The next series of questions concern your view of your health. Read each question and check the appropriate answer.

18. How would you rate your mental or emotional health at the present time?

- RATE EM* (1) Excellent (2) Very good (3) Good (4) Fair (5) Poor

19. How satisfied are you with your mental or emotional health at the present time?

- SATISEM* (1) Very satisfied (2) Somewhat satisfied (3) Neither (4) Somewhat dissatisfied (5) Very dissatisfied

20. How would you rate your physical health at the present time?

- RATE PHY* (1) Excellent (2) Very good (3) Good (4) Fair (5) Poor

21. How satisfied are you with your physical health at the present time?

- SATISPHY* (1) Very satisfied (2) Somewhat satisfied (3) Neither (4) Somewhat dissatisfied (5) Very dissatisfied

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22. In general, would you say your overall health is:

- OVHEALTH
- (1) Excellent (2) Very good (3) Good (4) Fair (5) Poor

23. How satisfied are you with your overall health at the present time?

- SATISFACTION
- (1) Very satisfied (2) Somewhat satisfied (3) Neither (4) Somewhat dissatisfied (5) Very dissatisfied

24. Did you know you had Raynaud's before you started the study? KNOW RAYN (1) Yes (2) No

A. If yes, how long ago did you find out? KNOW RAYN

25. When you first found out you had Raynaud's, did you feel:

	None	A little	Some	A lot
A. Angry? <u>ANGRY</u>	(1)	(2)	(3)	(4)
B. Nervous? <u>NERV</u>	(1)	(2)	(3)	(4)
C. Depressed? <u>DEPRESS</u>	(1)	(2)	(3)	(4)
D. Bitter? <u>BITTER</u>	(1)	(2)	(3)	(4)
E. Scared? <u>SCARED</u>	(1)	(2)	(3)	(4)
F. Sad? <u>SAD</u>	(1)	(2)	(3)	(4)
G. Resentful? <u>RESENT</u>	(1)	(2)	(3)	(4)
H. Worried? <u>WORRIED</u>	(1)	(2)	(3)	(4)
I. Down? <u>DOWN</u>	(1)	(2)	(3)	(4)

26. The following questions are about general activities you might do during a typical day. Does your Raynaud's limit you in these activities? If so, how much? If the activity is something you don't normally do, check the Don't normally do this answer.

In the past 4 weeks, have you been limited in any of the following activities by Raynaud's symptoms?

	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
A. <u>Vigorous activities</u> , such as running, lifting heavy objects, participating in strenuous sports? <u>VIGORACT</u>	(1)	(2)	(3)	(4)
B. <u>Moderate activities</u> , such as moving a table, pushing a vacuum cleaner, bowling, or playing golf? <u>MODACT</u>	(1)	(2)	(3)	(4)
C. Lifting or carrying groceries? <u>GROGERY</u>	(1)	(2)	(3)	(4)
D. Climbing <u>several</u> flights of stairs? <u>CLMBSEV</u>	(1)	(2)	(3)	(4)
E. Climbing <u>one</u> flight of stairs? <u>CLMBONE</u>	(1)	(2)	(3)	(4)

ID No.				
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	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
F. Bending, kneeling, or stooping? <u>LIM BEND</u>	(1)	(2)	(3)	(4)
G. Walking <u>more than one mile?</u> <u>WALK 1 MI</u>	(1)	(2)	(3)	(4)
H. Walking <u>several blocks?</u> <u>WALK SEV</u>	(1)	(2)	(3)	(4)
I. Walking <u>one block?</u> <u>WALK 1 BLK</u>	(1)	(2)	(3)	(4)
J. Bathing and dressing yourself? <u>LIM BATH</u>	(1)	(2)	(3)	(4)

27. The following questions are about more specific activities you might do during a typical day. In the past 4 weeks has your Raynaud's condition limited you in any of these activities? If so, how much? If the activity is something you don't normally do, check the *Don't normally do this* answer.

	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
A. Going outdoors in cold weather? <u>OUTDOORS</u>	(1)	(2)	(3)	(4)
B. Driving				
1. Holding or gripping the wheel? <u>GRIP</u>	(1)	(2)	(3)	(4)
2. Shifting? <u>SHIFT</u>	(1)	(2)	(3)	(4)
C. Shopping for refrigerated or frozen food? <u>SHOP</u>	(1)	(2)	(3)	(4)
D. Cooking				
1. Using utensils (chopping, slicing, stirring)? <u>UTENSIL</u>	(1)	(2)	(3)	(4)
2. Using kitchen appliances (can opener, blender, mixer)? <u>APPL</u>	(1)	(2)	(3)	(4)
3. Washing vegetables in cold water? <u>WASH VEG</u>	(1)	(2)	(3)	(4)
4. Removing or handling food from refrigerator or freezer? <u>FREEZER</u>	(1)	(2)	(3)	(4)
E. Laundry				
1. Placing clothes in or removing clothes from washer or dryer? <u>WASH CETH</u>	(1)	(2)	(3)	(4)
2. Folding or hanging clothes? <u>HANG CETH</u>	(1)	(2)	(3)	(4)
F. Eating				
1. Holding cold or frozen foods? <u>HOLD FOOD</u>	(1)	(2)	(3)	(4)
2. Swallowing cold or frozen foods? <u>SW FOOD</u>	(1)	(2)	(3)	(4)
G. Drinking				
1. Holding a cold glass? <u>HOLD GLASS</u>	(1)	(2)	(3)	(4)
2. Swallowing cold liquids? <u>SW LIQ</u>	(1)	(2)	(3)	(4)

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Form Type	H	Q	O	1

	Yes, limited a lot	Yes, limited a little	No, not at all	Don't normally do this
H. Exercise and Recreation.....				
1. Swimming in cool water? SWIM	(1)	(2)	(3)	(4)
2. Outdoor activity in cold weather? OUTDOOR	(1)	(2)	(3)	(4)
3. Handling sports or recreational equipment (golf clubs, tennis racquets, gardening tools)? EQUIP	(1)	(2)	(3)	(4)
I. Bathing (wringing washcloth, holding toothbrush, shaving)? BATHE	(1)	(2)	(3)	(4)
J. Dressing				
1. Fastening zippers or buttons? ZIPPER	(1)	(2)	(3)	(4)
2. Tying shoelaces? SHOELACE	(1)	(2)	(3)	(4)
3. Putting on gloves? GLOVES	(1)	(2)	(3)	(4)
K. Using a typewriter or computer? USE COMP	(1)	(2)	(3)	(4)
L. Using a pen or pencil? USE PEN	(1)	(2)	(3)	(4)
M. Using tools (screwdriver, pliers, saw)? USE TOOLS	(1)	(2)	(3)	(4)
N. Using machinery (lawnmower, drill, vacuum cleaner)? USE MACH	(1)	(2)	(3)	(4)
O. Social activities? SOCIAL	(1)	(2)	(3)	(4)
P. Sexual activity? SEXUAL	(1)	(2)	(3)	(4)
Q. Going into air-conditioned rooms? AIRCOND	(1)	(2)	(3)	(4)
R. Dealing with emotionally stressful circumstances? DEAL STR	(1)	(2)	(3)	(4)

28. At the present time, how would you rate your Raynaud's condition?

- (1) Excellent (2) Very good (3) Good (4) Fair (5) Poor
- RATE - RAY*

29. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your Raynaud's? (Please answer Yes or No for each question by checking the appropriate answer.)

	Yes	No
A. Cut down on the <u>amount of time</u> you spent on work or other activities	(1)	(2) IMPROB A
B. <u>Accomplished less</u> than you would like	(1)	(2) IMPROB B
C. Were limited in the <u>kind</u> of work or other activities	(1)	(2) IMPROB C
D. Had <u>difficulty</u> performing the work or other activities (for example, it took extra effort)	(1)	(2) IMPROB D

ID No.		-		
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30. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? (Please answer Yes or No for each question by checking the appropriate answer.)

- | | <u>Yes</u> | <u>No</u> |
|--|------------|-----------------------|
| A. Cut down on the <u>amount of time</u> you spent on work or other activities | (1) | (2) <i>EMPROB A</i> |
| B. <u>Accomplished less</u> than you would like | (1) | (2) <i>EMPROB B</i> |
| C. Didn't do work or other activities as <u>carefully</u> as usual | (1) | (2) <i>EMPROB C</i> |

31. During the past 4 weeks, to what extent has your physical health interfered with your normal social activities with family, friends, neighbors, or groups? (Check one answer.)

- | | | | | |
|---------------------|-------------------|---------------------|----------------------|--------------------|
| (1)
Not at all | (2)
Slightly | (3)
Moderately | (4)
Quite a bit | (5)
Extremely |
|---------------------|-------------------|---------------------|----------------------|--------------------|
- INTRFERE 3*

32. During the past 4 weeks, to what extent have emotional problems interfered with your normal social activities with family, friends, neighbors, or groups? (Check one answer.)

- | | | | | |
|---------------------|-------------------|---------------------|----------------------|--------------------|
| (1)
Not at all | (2)
Slightly | (3)
Moderately | (4)
Quite a bit | (5)
Extremely |
|---------------------|-------------------|---------------------|----------------------|--------------------|
- INTRFERE 2*

33. During the past 4 weeks, how much of the time has your physical health interfered with your social activities (like visiting with friends, relatives, etc.)? (Check one answer.)

- | | | | | |
|--------------------------|---------------------------|---------------------------|-------------------------------|---------------------------|
| (1)
All of the time | (2)
Most of the time | (3)
Some of the time | (4)
A little of the time | (5)
None of the time |
|--------------------------|---------------------------|---------------------------|-------------------------------|---------------------------|
- INTRFERE 3*

34. During the past 4 weeks, how much of the time have emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? (Check one answer.)

- | | | | | |
|--------------------------|---------------------------|---------------------------|-------------------------------|---------------------------|
| (1)
All of the time | (2)
Most of the time | (3)
Some of the time | (4)
A little of the time | (5)
None of the time |
|--------------------------|---------------------------|---------------------------|-------------------------------|---------------------------|
- INTRFERE 4*

35. In the past 4 weeks, how often did you experience pain as a result of your Raynaud's? (Check one answer.)

- | | | | |
|----------------|-----------------|--------------------|----------------|
| (1)
Never | (2)
Rarely | (3)
Sometimes | (4)
Often |
|----------------|-----------------|--------------------|----------------|
- RAYNPAIN*

36. In the past 4 weeks, how often did you experience pain for any reason (except Raynaud's)? (Check one answer.)

- | | | | |
|----------------|-----------------|--------------------|----------------|
| (1)
Never | (2)
Rarely | (3)
Sometimes | (4)
Often |
|----------------|-----------------|--------------------|----------------|
- OTHPAIN*

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Form Type	H	Q	O	1

37. In the past 4 weeks, how intense was the pain that you experienced as a result of your Raynaud's?
 (Check **one** answer.)

- (1) Didn't have pain (2) Mild pain (3) Moderate pain (4) Severe pain

INTRAYIN

38. In the past 4 weeks, how intense was the pain from any source (except Raynaud's) that you experienced?
 (Check **one** answer.)

- (1) Didn't have pain (2) Mild pain (3) Moderate pain (4) Severe pain

INTOTHAN

39. During the past 4 weeks, how much did pain as a result of your Raynaud's interfere with your normal work (including work both outside the home and housework)? (Check **one** answer.)

- (1) Not at all (2) A little bit (3) Moderately (4) Quite a bit (5) Extremely

INTRAYWK

40. During the past 4 weeks, how much did pain from any source (except Raynaud's) interfere with your normal work (including work both outside the home and housework)? (Check **one** answer.)

- (1) Not at all (2) A little bit (3) Moderately (4) Quite a bit (5) Extremely

INTOTHWK

41. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please indicate the one answer that comes closest to the way you have been feeling.

How much of the time during the last 4 weeks (Check **one** answer on each line.)

	All of the Time	Most of the Time	A Good Bit of Time	Some of the Time	A Little of the Time	None of the Time
A. Did you feel full of pep? <i>PEP4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
B. Have you been a very nervous person? <i>NERV4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
C. Have you felt so down in the dumps that nothing could cheer you up? <i>DUMB4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
D. Did you feel tense? <i>TENSE4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
E. Did you feel angry? <i>ANGRY4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
F. Have you felt calm and peaceful? <i>CALM4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
G. Did you have a lot of energy? <i>ENERGY4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
H. Did you feel resentful? <i>RES4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
I. Have you felt down-hearted and blue? <i>BLUE4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
J. Did you feel worn out? <i>WORN4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
K. Did you feel irritable? <i>IRRIT4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
L. Did you feel worried? <i>WORRI4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
M. Have you been a happy person? <i>HAPPY4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
N. Did you feel tired? <i>TIRE4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)
O. Did you feel bitter? <i>BITT4WK</i>	(1)	(2)	(3)	(4)	(5)	(6)

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Form Type	H	Q	O	1

US

42. In the past 4 weeks, have you used any of the following special clothing to avoid a Raynaud's attack?

		<u>Yes</u>	<u>No</u>
A. Electric gloves?	ELGLOVE	(1)	(2)
B. Electric socks?	ELSOCK	(1)	(2)
C. Insulated gloves?	INS GLOVE	(1)	(2)
D. Insulated socks?	INS SOCK	(1)	(2)
E. Thermal underwear?	THERMUND	(1)	(2)
F. Extra sweaters?	EXSWEAT	(1)	(2)
G. Chemical hand warmers?	HANDWARM	(1)	(2)
H. Other: <u>CLTHER</u>		(1)	(2)

43. In the past 4 weeks, have you had to do any of the following to prevent or alleviate a Raynaud's attack?

		<u>Yes</u>	<u>No</u>
A. Turn up the heat?	HEATUP	(1)	(2)
B. Use a space heater?	HEATER	(1)	(2)
C. Use a heating pad?	HEATPAD	(1)	(2)
D. Move work space?	MVWKSP	(1)	(2)
E. Get a steering wheel cover?	SWCOVER	(1)	(2)
F. Put hands under warm water?	WARMWAT	(1)	(2)
G. Put hands over heating vent?	HEATVENT	(1)	(2)
H. Drink warm liquid?	WARMLID	(1)	(2)
I. Drink alcohol?	ALCOHOL	(1)	(2)
J. Rub hands together?	RUBHAND	(1)	(2)
K. Put hands in armpits?	ARMPITS	(1)	(2)
L. Whirl arms around?	WHIRL	(1)	(2)
M. Other: <u>CRYOTHER</u>		(1)	(2)
N. Other: <u>CRYOTHER</u>		(1)	(2)

44. During the past 4 weeks, how often did you:

		<u>Never</u>	<u>Rarely</u>	<u>Some- times</u>	<u>Often</u>
A. Feel rested from your night's sleep?	OFTENA	(1)	(2)	(3)	(4)
B. Have difficulty falling asleep at night?	OFTENB	(1)	(2)	(3)	(4)
C. Awaken earlier than your usual waking time?	OFTENC	(1)	(2)	(3)	(4)
D. Have difficulty staying awake during the day?	OFTEND	(1)	(2)	(3)	(4)

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45. Currently, are your sexual relations with your spouse or partner:

- SATIS SEX*
- (1) Not Applicable (2) Very Unsatisfactory (3) A little Unsatisfactory (4) Somewhat Satisfactory (5) Very Satisfactory

46. Are you satisfied with the FREQUENCY with which you have sexual intercourse, or would you like to have sex more or less often?

- (1) Not applicable (2) Less often (3) Satisfied (4) More often
- FREQ SEX*

The following questions ask about your confidence concerning two different treatments for Raynaud's. Please check the answer that corresponds most closely to the way you feel.

- | | <u>Not at all</u> | <u>A little</u> | <u>Some-what</u> | <u>Very</u> | |
|--|-------------------|-----------------|------------------|-------------|--------------|
| 47. How confident are you that Raynaud's can be treated successfully with biofeedback? | (1) | (2) | (3) | (4) | <i>CONF1</i> |
| 48. How confident are you that Raynaud's can be treated successfully with nifedipine? | (1) | (2) | (3) | (4) | <i>CONF2</i> |
| 49. How confident are you that you will be able to do what is required for your Raynaud's to be successfully treated with biofeedback? | (1) | (2) | (3) | (4) | <i>CONF3</i> |
| 50. How confident are you that you will be able to do what is required for your Raynaud's to be successfully treated with nifedipine? | (1) | (2) | (3) | (4) | <i>CONF4</i> |

Think back over the past 4 weeks and indicate if you have had any difficulty in the following areas because of your Raynaud's.

- | | <u>Never had difficulty</u> | <u>Rarely had difficulty</u> | <u>Sometimes had difficulty</u> | <u>Often had difficulty</u> | <u>Always had difficulty</u> |
|--|-----------------------------|------------------------------|---------------------------------|-----------------------------|------------------------------|
| 51. Social Activities <i>SOCIAL 2</i>
(lack of interest, withdrawal, lack of concern for others) | (1) | (2) | (3) | (4) | (5) |
| 52. Memory and Concentration <i>MEMORY</i>
(easily distracted, lose or forget things, fail to complete tasks, misplace objects, lose train of thought) | (1) | (2) | (3) | (4) | (5) |
| 53. Spatial Orientation <i>SPATIAL</i>
(become confused about whereabouts, sometimes become disoriented) | (1) | (2) | (3) | (4) | (5) |
| 54. Moods and Emotions <i>MOODS</i>
(moody, depressed, irritable, cry easily, prolonged periods of laughter, inappropriate emotions, emotionally unresponsive, lack of interest) | (1) | (2) | (3) | (4) | (5) |

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- | | Never had
difficulty | Rarely had
difficulty | Sometimes had
difficulty | Often had
difficulty | Always had
difficulty |
|--|-------------------------|--------------------------|-----------------------------|-------------------------|--------------------------|
| 55. Sleep patterns <u>SLEEP</u>
(trouble getting to sleep, awakening
in the middle of the night, falling
asleep during the day) | (1) | (2) | (3) | (4) | (5) |

We are interested in how people respond when they confront difficult or stressful events in their lives. The following questions ask you to indicate how you are dealing with the stress associated with your Raynaud's Syndrome.

Each of the following items describes a way of reacting to your current situation. Tell us how much each of the items describes your own reactions by checking the appropriate answer to the right of each item. There are no "right" or "wrong" answers, so choose the most accurate answer for YOU – not what you think "most people" would say or do or what you've been told to say or do. Indicate how much each item describes the way you've been dealing with your Raynaud's.

With respect to my Raynaud's.....

- | | Never | Some
times | Often | Always |
|--|-------|---------------|-------|--------|
| 56. I try to grow as a person as a result of my experience
with Raynaud's..... <u>REACT1</u> | (1) | (2) | (3) | (4) |
| 57. I turn to work or other substitute activities to take my mind
off my condition..... <u>REACT2</u> | (1) | (2) | (3) | (4) |
| 58. I get upset about my condition and let my emotions out..... <u>REACT3</u> | (1) | (2) | (3) | (4) |
| 59. I try to get advice from someone about
what to do about my condition..... <u>REACT4</u> | (1) | (2) | (3) | (4) |
| 60. I concentrate my efforts on doing something about my condition..... <u>REACT5</u> | (1) | (2) | (3) | (4) |
| 61. I say to myself "this isn't happening to me."..... <u>REACT6</u> | (1) | (2) | (3) | (4) |
| 62. I put my trust in God..... <u>REACT7</u> | (1) | (2) | (3) | (4) |
| 63. I laugh about my condition..... <u>REACT8</u> | (1) | (2) | (3) | (4) |
| 64. I admit to myself that I can't deal with my condition
and stop trying..... <u>REACT9</u> | (1) | (2) | (3) | (4) |
| 65. I restrain myself from doing anything about my condition
too quickly..... <u>REACT10</u> | (1) | (2) | (3) | (4) |
| 66. I discuss my feelings with someone..... <u>REACT11</u> | (1) | (2) | (3) | (4) |
| 67. I use alcohol or drugs to make myself feel better
about my condition..... <u>REACT12</u> | (1) | (2) | (3) | (4) |

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	<u>Never</u>	<u>Some times</u>	<u>Often</u>	<u>Always</u>
68. I get used to the idea that I have Raynaud's..... <i>REACT13</i>	(1)	(2)	(3)	(4)
69. I talk to others to find out more about my situation..... <i>REACT14</i>	(1)	(2)	(3)	(4)
70. I keep myself from getting distracted by other thoughts or activities..... <i>REACT15</i>	(1)	(2)	(3)	(4)
71. I daydream about things other than my condition..... <i>REACT16</i>	(1)	(2)	(3)	(4)
72. I get upset and am really aware of my emotions..... <i>REACT17</i>	(1)	(2)	(3)	(4)
73. I seek God's help..... <i>REACT18</i>	(1)	(2)	(3)	(4)
74. I make a plan of action for dealing with my Raynaud's..... <i>REACT19</i>	(1)	(2)	(3)	(4)
75. I make jokes about my condition..... <i>REACT20</i>	(1)	(2)	(3)	(4)
76. I accept that I have Raynaud's and that it can't be changed..... <i>REACT21</i>	(1)	(2)	(3)	(4)
77. I hold off doing anything about my condition until the situation permits..... <i>REACT22</i>	(1)	(2)	(3)	(4)
78. I try to get emotional support from friends or relatives..... <i>REACT23</i>	(1)	(2)	(3)	(4)
79. I just give up trying to cope with my condition..... <i>REACT24</i>	(1)	(2)	(3)	(4)
80. I take additional action to try to minimize problems associated with my condition..... <i>REACT25</i>	(1)	(2)	(3)	(4)
81. I try to lose myself for a while by drinking alcohol or taking drugs..... <i>REACT26</i>	(1)	(2)	(3)	(4)
82. I just refuse to believe that I have Raynaud's..... <i>REACT27</i>	(1)	(2)	(3)	(4)
83. I let out my feelings concerning my condition..... <i>REACT28</i>	(1)	(2)	(3)	(4)
84. I try to see my condition in a different light, to make it seem more positive..... <i>REACT29</i>	(1)	(2)	(3)	(4)
85. I talk to someone who could do something concrete about problems associated with my condition..... <i>REACT30</i>	(1)	(2)	(3)	(4)
86. I sleep more than usual..... <i>REACT31</i>	(1)	(2)	(3)	(4)
87. I try to come up with a strategy about what to do concerning my condition..... <i>REACT32</i>	(1)	(2)	(3)	(4)

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		Never	Some times	Often	Always
88.	I focus on dealing with my condition, and if necessary let other things slide a little REACT33	(1)	(2)	(3)	(4)
89.	I get sympathy and understanding from someone REACT34	(1)	(2)	(3)	(4)
90.	I drink alcohol or take drugs, in order to think about my condition less REACT35	(1)	(2)	(3)	(4)
91.	I kid around about my condition REACT36	(1)	(2)	(3)	(4)
92.	I give up the attempt to overcome the problems that result from my condition REACT37	(1)	(2)	(3)	(4)
93.	I look for something good that is happening as a result of my condition REACT38	(1)	(2)	(3)	(4)
94.	I think about how I might best handle the problems associated with my condition REACT39	(1)	(2)	(3)	(4)
95.	I pretend that my condition hasn't really happened REACT40	(1)	(2)	(3)	(4)
96.	I make sure not to make difficulties caused by my Raynaud's worse by acting too soon REACT41	(1)	(2)	(3)	(4)
97.	I try hard to prevent other things from interfering with my efforts to handle my condition REACT42	(1)	(2)	(3)	(4)
98.	I go to movies, or watch TV, to think about my condition less REACT43	(1)	(2)	(3)	(4)
99.	I accept the reality of the fact that I have Raynaud's REACT44	(1)	(2)	(3)	(4)
100.	I ask others who have had similar experiences what they did REACT45	(1)	(2)	(3)	(4)
101.	I feel a lot of emotional distress and I find myself expressing those feelings a lot REACT46	(1)	(2)	(3)	(4)
102.	I take direct action to get around the problems that result from my condition REACT47	(1)	(2)	(3)	(4)
103.	I try to find comfort in my religion REACT48	(1)	(2)	(3)	(4)
104.	I force myself to wait for the right time to do something about my condition REACT49	(1)	(2)	(3)	(4)
105.	I make fun of my condition REACT50	(1)	(2)	(3)	(4)
106.	I reduce the amount of time I'm putting into dealing with my condition REACT51	(1)	(2)	(3)	(4)

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		Never	Some times	Often	Always
107.	I talk to someone about how I feel <i>REACT 52</i>	(1)	(2)	(3)	(4)
108.	I use alcohol or drugs to help me cope with my Raynaud's <i>REACT 53</i>	(1)	(2)	(3)	(4)
109.	I learn to live with my condition <i>REACT 54</i>	(1)	(2)	(3)	(4)
110.	I put aside other activities in order to concentrate on dealing with my condition <i>REACT 55</i>	(1)	(2)	(3)	(4)
111.	I think hard about what steps to take in dealing with my condition <i>REACT 56</i>	(1)	(2)	(3)	(4)
112.	I act as though I never got Raynaud's <i>REACT 57</i>	(1)	(2)	(3)	(4)
113.	I do what has to be done, one step at a time <i>REACT 58</i>	(1)	(2)	(3)	(4)
114.	I try to learn something from my experiences with Raynaud's <i>REACT 59</i>	(1)	(2)	(3)	(4)
115.	I pray more than usual <i>REACT 60</i>	(1)	(2)	(3)	(4)

The next group of questions asks you about your feelings and thoughts during the last 4 weeks. In each case, you will be asked to indicate how often you felt or thought a certain way. Although some of the questions are similar, there are differences among them and you should treat each one as a separate question.

		Never	Almost never	Sometimes	Fairly often	Very often
116.	In the last 4 weeks, how often have you been upset because of something that happened unexpectedly?	(1)	(2)	(3)	(4)	(5) <i>FEEL 1</i>
117.	In the last 4 weeks, how often have you felt that you were unable to control the important things in your life?	(1)	(2)	(3)	(4)	(5) <i>FEEL 2</i>
118.	In the last 4 weeks, how often have you felt nervous and "stressed"?	(1)	(2)	(3)	(4)	(5) <i>FEEL 3</i>
119.	In the last 4 weeks, how often have you dealt successfully with day to day problems and annoyances?	(1)	(2)	(3)	(4)	(5) <i>FEEL 4</i>
120.	In the last 4 weeks, how often have you felt that you were effectively coping with important changes that were occurring in your life?	(1)	(2)	(3)	(4)	(5) <i>FEEL 5</i>
121.	In the last 4 weeks, how often have you felt confident about your ability to handle your personal problems?	(1)	(2)	(3)	(4)	(5) <i>FEEL 6</i>
122.	In the last 4 weeks, how often have you felt that things were going your way?	(1)	(2)	(3)	(4)	(5) <i>FEEL 7</i>
123.	In the last 4 weeks, how often have you found that you could not cope with all the things that you had to do?	(1)	(2)	(3)	(4)	(5) <i>FEEL 8</i>

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	<u>Never</u>	<u>Almost never</u>	<u>Sometimes</u>	<u>Fairly often</u>	<u>Very often</u>
124. In the last 4 weeks, how often have you been able to control irritations in your life?	(1)	(2)	(3)	(4) FEEL 9	(5)
125. In the last 4 weeks, how often have you felt that you were on top of things?	(1)	(2)	(3)	(4) FEEL 10	(5)
126. In the last 4 weeks, how often have you been angered because of things that happened that were outside of your control?	(1)	(2)	(3)	(4) FEEL 11	(5)
127. In the last 4 weeks, how often have you found yourself thinking about things that you have to accomplish?	(1)	(2)	(3)	(4) FEEL 12	(5)
128. In the last 4 weeks, how often have you been able to control the way you spend your time?	(1)	(2)	(3)	(4) FEEL 13	(5)
129. In the last 4 weeks, how often have you felt difficulties were piling up so high that you could not overcome them?	(1)	(2)	(3)	(4) FEEL 14	(5)

The next group of questions asks about you. For each of the statements, indicate the extent of your agreement by checking the appropriate answer.

Try not to let your response to one question influence your response to other questions.

	<u>Strongly Disagree</u>	<u>Disagree</u>	<u>Neutral</u>	<u>Agree</u>	<u>Strongly Agree</u>
130. I often feel lonely You 1	(1)	(2)	(3)	(4)	(5)
131. I'm always trying to figure myself out You 2	(1)	(2)	(3)	(4)	(5)
132. In uncertain times, I usually expect the best You 3	(1)	(2)	(3)	(4)	(5)
133. I am quick to sense the hunger contractions of my stomach You 4	(1)	(2)	(3)	(4)	(5)
134. I often feel fed up You 5	(1)	(2)	(3)	(4)	(5)
135. So far I have gotten the important things I want in life You 6	(1)	(2)	(3)	(4)	(5)
136. I think about myself a lot You 7	(1)	(2)	(3)	(4)	(5)
137. If something can go wrong for me it will You 8	(1)	(2)	(3)	(4)	(5)
138. I'm an irritable person You 9	(1)	(2)	(3)	(4)	(5)
139. I take a positive attitude toward myself You 10	(1)	(2)	(3)	(4)	(5)
140. I generally pay attention to my inner feelings You 11	(1)	(2)	(3)	(4)	(5)
141. I'm very aware of changes in my body temperature You 12	(1)	(2)	(3)	(4)	(5)
142. I always look on the bright side of things You 13	(1)	(2)	(3)	(4)	(5)
143. I sometimes feel "just miserable" for no good reason You 14	(1)	(2)	(3)	(4)	(5)
144. I often daydream about myself You 15	(1)	(2)	(3)	(4)	(5)

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		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
145.	I feel that I'm a person of worth, at least as much as others You 16	(1)	(2)	(3)	(4)	(5)
146.	If I could live my life over, I would change almost nothing You 17	(1)	(2)	(3)	(4)	(5)
147.	My mood often goes up and down You 18	(1)	(2)	(3)	(4)	(5)
148.	I'm optimistic about my future You 19	(1)	(2)	(3)	(4)	(5)
149.	I never take a hard look at myself You 20	(1)	(2)	(3)	(4)	(5)
150.	I can often feel my heart beating You 21	(1)	(2)	(3)	(4)	(5)
151.	I'm often troubled about feelings of guilt You 22	(1)	(2)	(3)	(4)	(5)
152.	I am satisfied with my life You 23	(1)	(2)	(3)	(4)	(5)
153.	I hardly ever expect things to go my way You 24	(1)	(2)	(3)	(4)	(5)
154.	I am constantly thinking about my reasons for doing things You 25	(1)	(2)	(3)	(4)	(5)
155.	I'd call myself a nervous person You 26	(1)	(2)	(3)	(4)	(5)
156.	I feel I do not have much to be proud of You 27	(1)	(2)	(3)	(4)	(5)
157.	Things never work out the way I want them to You 28	(1)	(2)	(3)	(4)	(5)
158.	I sometimes step back (in my mind) in order to examine myself from a distance You 29	(1)	(2)	(3)	(4)	(5)
159.	I'd call myself tense or "high-strung" You 30	(1)	(2)	(3)	(4)	(5)
160.	I know immediately when my mouth or throat gets dry You 31	(1)	(2)	(3)	(4)	(5)
161.	I'm a believer in the idea that "every cloud has a silver lining" You 32	(1)	(2)	(3)	(4)	(5)
162.	The conditions of my life are excellent You 33	(1)	(2)	(3)	(4)	(5)
163.	I'm quick to notice changes in my mood You 34	(1)	(2)	(3)	(4)	(5)
164.	I often feel that life is very dull You 35	(1)	(2)	(3)	(4)	(5)
165.	I rarely count on good things happening to me You 36	(1)	(2)	(3)	(4)	(5)
166.	At times, I think I'm no good at all You 37	(1)	(2)	(3)	(4)	(5)
167.	I know the way my mind works when I work through a problem You 38	(1)	(2)	(3)	(4)	(5)
168.	In most ways my life is close to my ideal You 39	(1)	(2)	(3)	(4)	(5)
169.	I am easily hurt when people find fault with me or my work You 40	(1)	(2)	(3)	(4)	(5)
170.	I am sensitive to internal bodily tensions You 41	(1)	(2)	(3)	(4)	(5)
171.	Overall, I expect more good things to happen to me than bad You 42	(1)	(2)	(3)	(4)	(5)

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172. Here is a ladder representing the "Ladder of Life." The top of the ladder represents the BEST possible life for you. The bottom of the ladder represents the WORST possible life for you. (Answer parts A through C below.)

A. On which step of the ladder do you feel you personally stand at the present time?

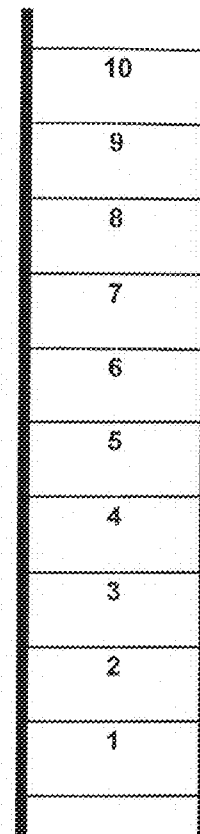
Present time (1 to 10): LOFA

B. On which step would you say you stood 1 year ago?

Before beginning the study (1 to 10): LoFB

C. Thinking about your future, on which step do you think you will be about 1 year from now?

In 1 year (1 to 10): LoFC



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The next group of questions is the same as a group you answered earlier in this questionnaire. In the first group, you were asked to think about how you are responding to difficulties and stressful events related to your Raynaud's. For the next group of questions, we are interested in how you typically respond to difficult or stressful events in general. There are lots of ways to try to deal with stress. In this section, we are interested in what you usually do when you are under a lot of stress.

Please try to respond to each item *separately in your mind from each other item*. Choose your answers thoughtfully, and make your answers as true FOR YOU as you can. Please answer every item. There are not "right" or "wrong" answers, so choose the most accurate answer for YOU – not what you think "most people" would say or do. Indicate what YOU usually do when YOU experience a stressful event.

When I experience stress

		Never	Some times	Often	Always
173.	I try to grow as a person as a result of the experience <u>USUAL 3</u>	(1)	(2)	(3)	(4)
174.	I turn to work or other substitute activities to take my mind off things <u>USUAL 2</u>	(1)	(2)	(3)	(4)
175.	I get upset and let my emotions out <u>USUAL 3</u>	(1)	(2)	(3)	(4)
176.	I try to get advice from someone about what to do <u>USUAL 7</u>	(1)	(2)	(3)	(4)
177.	I concentrate my efforts on doing something about it <u>USUAL 5</u>	(1)	(2)	(3)	(4)
178.	I say to myself "this isn't real" <u>USUAL 6</u>	(1)	(2)	(3)	(4)
179.	I put my trust in God <u>USUAL 7</u>	(1)	(2)	(3)	(4)
180.	I laugh about the situation <u>USUAL 8</u>	(1)	(2)	(3)	(4)
181.	I admit to myself that I can't deal with it and quit trying <u>USUAL 9</u>	(1)	(2)	(3)	(4)
182.	I restrain myself from doing anything too quickly <u>USUAL 10</u>	(1)	(2)	(3)	(4)
183.	I discuss my feelings with someone <u>USUAL 11</u>	(1)	(2)	(3)	(4)
184.	I use alcohol or drugs to make myself feel better <u>USUAL 12</u>	(1)	(2)	(3)	(4)
185.	I get used to the idea that it happened <u>USUAL 13</u>	(1)	(2)	(3)	(4)
186.	I talk to others to find out more about the situation <u>USUAL 14</u>	(1)	(2)	(3)	(4)
187.	I keep myself from getting distracted by other thoughts or activities <u>USUAL 15</u>	(1)	(2)	(3)	(4)
188.	I daydream about things other than this <u>USUAL 16</u>	(1)	(2)	(3)	(4)

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		Never	Some times	Often	Always
189.	I get upset and am really aware of my emotions <i>USUAL 17</i>	(1)	(2)	(3)	(4)
190.	I seek God's help <i>USUAL 18</i>	(1)	(2)	(3)	(4)
191.	I make a plan of action <i>USUAL 19</i>	(1)	(2)	(3)	(4)
192.	I make jokes about it <i>USUAL 20</i>	(1)	(2)	(3)	(4)
193.	I accept that this has happened and that it can't be changed <i>USUAL 21</i>	(1)	(2)	(3)	(4)
194.	I hold off doing anything about it until the situation permits <i>USUAL 22</i>	(1)	(2)	(3)	(4)
195.	I try to get emotional support from friends or relatives <i>USUAL 23</i>	(1)	(2)	(3)	(4)
196.	I just give up trying to reach my goal <i>USUAL 24</i>	(1)	(2)	(3)	(4)
197.	I take additional action to try to get rid of the problems <i>USUAL 25</i>	(1)	(2)	(3)	(4)
198.	I try to lose myself for a while by drinking alcohol or taking drugs <i>USUAL 26</i>	(1)	(2)	(3)	(4)
199.	I just refuse to believe that it has happened <i>USUAL 27</i>	(1)	(2)	(3)	(4)
200.	I let my feelings out <i>USUAL 28</i>	(1)	(2)	(3)	(4)
201.	I try to see it in a different light, to make it seem more positive <i>USUAL 29</i>	(1)	(2)	(3)	(4)
202.	I talk to someone who could do something concrete about the problem <i>USUAL 30</i>	(1)	(2)	(3)	(4)
203.	I sleep more than usual <i>USUAL 31</i>	(1)	(2)	(3)	(4)
204.	I try to come up with a strategy about what to do <i>USUAL 32</i>	(1)	(2)	(3)	(4)
205.	I focus on dealing with this problem, and if necessary let other things slide a little <i>USUAL 33</i>	(1)	(2)	(3)	(4)
206.	I get sympathy and understanding from someone <i>USUAL 34</i>	(1)	(2)	(3)	(4)
207.	I drink alcohol or take drugs, in order to think about it less <i>USUAL 35</i>	(1)	(2)	(3)	(4)
208.	I kid around about it <i>USUAL 36</i>	(1)	(2)	(3)	(4)
209.	I give up the attempt to get what I want <i>USUAL 37</i>	(1)	(2)	(3)	(4)

ID No.		-		
Form Type	H	Q	O	1

		Never	Some times	Often	Always
210.	I look for something good in what is happening <i>USUAL 38</i>	(1)	(2)	(3)	(4)
211.	I think about how I might best handle the problem <i>USUAL 39</i>	(1)	(2)	(3)	(4)
212.	I pretend that it hasn't really happened <i>USUAL 40</i>	(1)	(2)	(3)	(4)
213.	I make sure not to make matters worse by acting too soon <i>USUAL 41</i>	(1)	(2)	(3)	(4)
214.	I try hard to prevent other things from interfering with my efforts at dealing with this <i>USUAL 42</i>	(1)	(2)	(3)	(4)
215.	I go to movies, or watch TV, to think about it less <i>USUAL 43</i>	(1)	(2)	(3)	(4)
216.	I accept the reality of the fact that it happened <i>USUAL 44</i>	(1)	(2)	(3)	(4)
217.	I ask others who have had similar experiences what they did <i>USUAL 45</i>	(1)	(2)	(3)	(4)
218.	I feel a lot of emotional distress and I find myself expressing those feelings a lot <i>USUAL 46</i>	(1)	(2)	(3)	(4)
219.	I take direct action to get around the problem <i>USUAL 47</i>	(1)	(2)	(3)	(4)
220.	I try to find comfort in my religion <i>USUAL 48</i>	(1)	(2)	(3)	(4)
221.	I force myself to wait for the right time to do something <i>USUAL 49</i>	(1)	(2)	(3)	(4)
222.	I make fun of the situation <i>USUAL 50</i>	(1)	(2)	(3)	(4)
223.	I reduce the amount of time I'm putting into solving the problem <i>USUAL 51</i>	(1)	(2)	(3)	(4)
224.	I talk to someone about how I feel <i>USUAL 52</i>	(1)	(2)	(3)	(4)
225.	I use alcohol or drugs to help me get through it <i>USUAL 53</i>	(1)	(2)	(3)	(4)
226.	I learn to live with it <i>USUAL 54</i>	(1)	(2)	(3)	(4)
227.	I put aside other activities in order to concentrate on this <i>USUAL 55</i>	(1)	(2)	(3)	(4)
228.	I think hard about what steps to take <i>USUAL 56</i>	(1)	(2)	(3)	(4)
229.	I act as though it hasn't even happened <i>USUAL 57</i>	(1)	(2)	(3)	(4)
230.	I do what has to be done, one step at a time <i>USUAL 58</i>	(1)	(2)	(3)	(4)
231.	I try to learn something from the experience <i>USUAL 59</i>	(1)	(2)	(3)	(4)
232.	I pray more than usual <i>USUAL 60</i>	(1)	(2)	(3)	(4)

ID No.		-		
Form Type	H	Q	O	1

The following items list a number of common symptoms that a person might experience. For each item, we are interested in knowing *how much that problem or symptom has bothered you during the past four weeks, including today.* Respond to each item by checking the appropriate response.

How much have you been bothered by

		Not at all	A little bit	Quite a bit	A lot
233.	Weight change (gain or loss of 10 pounds or more in 4 weeks) <u>WEIGHT</u>	()	()	()	()
234.	Back pain <u>BACK PAIN</u>	()	()	()	()
235.	Constipation <u>CONST</u>	()	()	()	()
236.	Dizziness <u>DIZZY</u>	()	()	()	()
237.	Diarrhea <u>DIARRHEA</u>	()	()	()	()
238.	Faintness <u>FAINT</u>	()	()	()	()
239.	Fatigue <u>FATIGUE</u>	()	()	()	()
240.	Headache <u>HEAD</u>	()	()	()	()
241.	Migraine headache <u>MIGRAINE</u>	()	()	()	()
242.	Nausea <u>NAUSEA</u>	()	()	()	()
243.	Acid stomach or indigestion <u>INDIGEST</u>	()	()	()	()
244.	Stomach pain (e.g., cramps) <u>CRAMPS</u>	()	()	()	()
245.	Hot or cold spells <u>SPELLS</u>	()	()	()	()
246.	Vomiting <u>VOMIT</u>	()	()	()	()
247.	Hands trembling <u>TREMBLE</u>	()	()	()	()
248.	Flushing or suddenly feeling hot all over <u>FLUSHED</u>	()	()	()	()
249.	Heart pounding or racing <u>RACENT</u>	()	()	()	()
250.	Poor appetite <u>APPETITE</u>	()	()	()	()
251.	Shortness of breath <u>BREATH</u>	()	()	()	()
252.	Numbness or tingling <u>NUMB</u>	()	()	()	()
253.	Weakness <u>WEAK</u>	()	()	()	()
254.	Pains in heart or chest <u>CHEST PAIN</u>	()	()	()	()
255.	Feeling low in energy <u>LOW ENERGY</u>	()	()	()	()
256.	Stuffy head or nose <u>STUFFY</u>	()	()	()	()
257.	Blurred vision <u>VISION</u>	()	()	()	()
258.	Muscle tension or soreness <u>MUSCLE</u>	()	()	()	()
259.	Muscle cramps <u>MUSCLE CRAMP</u>	()	()	()	()

ID No.		-		
Form Type	H	Q	O	1

		Not at all	A little bit	Quite a bit	A lot
260.	Menstrual cramps MENSTRAL	(1)	(2)	(3)	(4)
261.	Palpitations (fluttering or irregular heartbeat) PAMP	(1)	(2)	(3)	(4)
262.	Bruises BRUISES	(1)	(2)	(3)	(4)
263.	Nosebleed NOSEBLEED	(1)	(2)	(3)	(4)
264.	Light headedness LIGHTHEAD	(1)	(2)	(3)	(4)
265.	Wheezing WHEEZE	(1)	(2)	(3)	(4)
266.	Cough COUGH	(1)	(2)	(3)	(4)
267.	Yeast infection YESTINE	(1)	(2)	(3)	(4)
268.	Bladder infection BLADINF	(1)	(2)	(3)	(4)
269.	Tooth/gum problems TEETH	(1)	(2)	(3)	(4)
270.	Earaches EARACHE	(1)	(2)	(3)	(4)
271.	Swelling in hands, feet, arms, or legs SWELL	(1)	(2)	(3)	(4)

The following questions ask you about your expectations concerning treatment in the Raynaud's Study.

272. If you have been assigned to biofeedback treatment, what percent of the days in the next three months do you expect to practice biofeedback? EXPECT 1
 _____ %

273. How effective do you believe the biofeedback treatment will be?
 (1) Not at all effective (2) A little effective (3) Moderately effective (4) Very effective
EXPECT 2

274. If you have been assigned to medication treatment, what percent of days in the next three months do you expect to take your prescribed medication? EXPECT 3
 _____ %

275. How effective do you believe the prescribed medication will be?
 (1) Not at all effective (2) A little effective (3) Moderately effective (4) Very effective
EXPECT 4

ID No.		-			
Form Type	H	Q	O	1	

The following will be completed by medical staff.

276. Research Coordinator:

Signature: _____

RTS Staff No: _____

277. Date form reviewed: _____

Month

Day

Year

ID No.				
Form Type	H	Q	O	1

44

QUALITY OF LIFE FORM

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
HEADER	NEWID	I(4)	Patient ID
2	F07_DAYS	I(4)	Date Form 07 completed Days from Randomization
3	MARSTAT	I(1)	1 = Never married 2 = Presently married 2 = Living in a marriage-like relationship 3 = Divorced/separated 3 = Widowed
4	EMPSTAT	I(1)	1 = Currently employed 2 = Retired 2 = Unemployed 2 = Full-time homemaker 2 = Student
5	OCC	I(1)	1 = Professional 2 = Technical 3 = Management 4 = Clerical 5 = Sales 6 = Service 7 = Other
6	EDUC	I(1)	1 = Did not complete high school 1 = High school graduate or equivalent 2 = Some college or post high school training 2 = College graduate 4 = Post graduate degree
7A	CHILDREN	I(1)	Number of children Number of adults
7B	ADULTS	I(1)	
8	CLOSE	I(2)	1 = None 2 = One 3 = Two 4 = Three 5 = Four 6 = Five 7 = Six 8 = Seven 9 = Eight 10 = Nine 11 = Ten 12 = More than 10

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
9A	SUPPAVLA	I(1)	1 = None of the time 2 = A little of the time 3 = Some of the time 4 = Most of the time 5 = All of the time
9B	SUPPAVLB		
9C	SUPPAVLC		
9D	SUPPAVLD		
9E	SUPPAVLE		
9F	SUPPAVLF		
9G	SUPPAVLG		
9H	SUPPAVLH		
10	SUPPNEED	I(1)	1 = Very easy 2 = Somewhat easy 3 = Somewhat difficult 4 = Very difficult
11	CRIT CRIT_NO	I(1) I(2)	1 = Yes, 2 = No Number of people
12	WDRWN WDRWN_NO	I(1) I(2)	1 = Yes, 2 = No Number of people
13	HELP HELP_NO	I(1) I(2)	1 = Yes, 2 = No Number of people
14	WORSE WORSE_NO	I(1) I(2)	1 = Yes, 2 = No Number of people
15	PROB PROB_NO	I(1) I(2)	1 = Yes, 2 = No Number of people
16	ORGREL	I(1)	1 = Yes, 2 = No
17	RELIG	I(1)	1 = Almost never 2 = Once or twice a year 3 = Once a month 4 = Once a week 5 = More than once a week
18	RATEEM	I(1)	1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor
19	SATISEM	I(1)	1 = Very satisfied 2 = Somewhat satisfied 3 = Neither 4 = Somewhat dissatisfied 5 = Very dissatisfied
20	RATEPHY	I(1)	1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
21	SATISPHY	I(1)	1 = Very satisfied 2 = Somewhat satisfied 3 = Neither 4 = Somewhat dissatisfied 5 = Very dissatisfied
22	OVHLTH	I(1)	1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor
23	SATHLTH	I(1)	1 = Very satisfied 2 = Somewhat satisfied 3 = Neither 4 = Somewhat dissatisfied 5 = Very dissatisfied
24	KNOWRAYN	I(1)	1 = Yes, 2 = No
24A	KNOWRMK	CHAR(1)	1 = Remark written on form
25A	ANGRY	I(1)	1 = None 2 = A little 3 = Some 4 = A lot
25B	NERV		
25C	DEPRESS		
25D	BITTER		
25E	SCARED		
25F	SAD		
25G	RESENT		
25H	WORRIED		
25I	DOWN		
26A	VIGACT	I(1)	1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not at all 4 = Don't normally do
26B	MODACT		
26C	GROCERY		
26D	CLMBSEV		
26E	CLMBONE		
26F	LIMBEND		
26G	WALK1MI		
26H	WALKSEV		
26I	WALK1BLK		
26J	LIMBATH		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
27A	OUTDOORS	I(1)	1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not at all 4 = Don't normally do
27B1	GRIP		
27B2	SHIFT		
27C	SHOP		
27D1	UTENSIL		
27D2	APPL		
27D3	WASHVEG		
27D4	FREEZER		
27E1	WASHCLTH		
27E2	HANGCLTH		
27F1	HLDFOOD		
27F2	SWFOOD		
27G1	HLDGLASS		
27G2	SWLIQ		
27H1	SWIM		
27H2	OUTACT		
27H3	EQUIP		
27I	BATHE		
27J1	ZIPPER		
27J2	SHOELACE		
27J3	GLOVES		
27K	USECOMP		
27L	USEPEN		
27M	USETOOLS		
27N	USEMACH		
27O	SOCACT		
27P	SEXACT		
27Q	AIRCOND		
27R	DEALSTR		
28	RATE_RAY	I(1)	1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor
29A	RAYPROBA	I(1)	1 = Yes, 2 = No
29B	RAYPROBB		
29C	RAYPROBC		
29D	RAYPROBD		
30A	EMPROBA	I(1)	1 = Yes, 2 = No
30B	EMPROBB		
30C	EMPROBC		
31	INTRFER1	I(1)	1 = Not at all 2 = Slightly 3 = Moderately 4 = Quite a bit 5 = Extremely
32	INTRFER2		
33	INTRFER3	I(1)	1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time
34	INTRFER4		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
35	RAYNPAIN	I(1)	1 = Never 2 = Rarely 3 = Sometimes 4 = Often
36	OTHRPAIN		
37	INTRAYPN	I(1)	1 = Didn't have pain 2 = Mild pain 3 = Moderate pain 4 = Severe pain
38	INTOTHPN		
39	INTRAYWK	I(1)	1 = Not at all 2 = A little bit 3 = Moderately 4 = Quite a bit 5 = Extremely
40	INTOTHWK		
41A	PEP4WK	I(1)	1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time
41B	NERV4WK		
41C	DUMP4WK		
41D	TENSE4WK		
41E	ANGRY4WK		
41F	CALM4WK		
41G	ENRGY4WK		
41H	RES4WK		
41I	BLUE4WK		
41J	WORN4WK		
41K	IRR4WK		
41L	WORR4WK		
41M	HAPPY4WK		
41N	TIRED4WK		
41O	BITT4WK		
42A	ELGLOVE	I(1)	1 = Yes, 2 = No
42B	ELSOCK		
42C	INSGLOVE		
42D	INSSOCK		
42E	THERMUND		
42F	EXSWEAT		
42G	HANDWARM		
42H	CLTHOTHR		
43A	HEATUP	I(1)	1 = Yes, 2 = No
43B	HEATER		
43C	HEATPAD		
43D	MVWKSP		
43E	SWCOVER		
43F	WARMWAT		
43G	HEATVENT		
43H	WARMLIQ		
43I	ALCOHOL		
43J	RUBHAND		
43K	ARMPITS		
43L	WHIRL		
43M	PRVOTHR1		
43N	PRVOTHR2		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
44A	OFTENA	I(1)	1 = Never 2 = Rarely 3 = Sometimes 4 = Often
44B	OFTENB		
44C	OFTENC		
44D	OFTEND		
45	SATISSEX	I(1)	1 = Not applicable 2 = Very unsatisfactory 3 = A little unsatisfactory 4 = Somewhat satisfactory 5 = Very satisfactory
46	FREQSEX	I(1)	1 = Not applicable 2 = Less often 3 = Satisfied 4 = More often
47	CONF1	I(1)	1 = Not at all 2 = A little 3 = Somewhat 4 = Very
48	CONF2		
49	CONF3		
50	CONF4		
51	SOACT2	I(1)	1 = Never 2 = Rarely 3 = Sometimes 4 = Often 5 = Always
52	MEMORY		
53	SPATIAL		
54	MOODS		
55	SLEEP		
56	REACT1	I(1)	1 = Never 2 = Sometimes 3 = Often 4 = Always
57	REACT2		
58	REACT3		
59	REACT4		
60	REACT5		
61	REACT6		
62	REACT7		
63	REACT8		
64	REACT9		
65	REACT10		
66	REACT11		
67	REACT12		
68	REACT13		
69	REACT14		
70	REACT15		
71	REACT16		
72	REACT17		
73	REACT18		
74	REACT19		
75	REACT20		
76	REACT21		
77	REACT22		
78	REACT23		
79	REACT24		
80	REACT25		
81	REACT26		
82	REACT27		
83	REACT28		
84	REACT29		
85	REACT30		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
86	REACT31	I(1)	1 = Never 2 = Sometimes 3 = Often 4 = Always
87	REACT32		
88	REACT33		
89	REACT34		
90	REACT35		
91	REACT36		
92	REACT37		
93	REACT38		
94	REACT39		
95	REACT40		
96	REACT41		
97	REACT42		
98	REACT43		
99	REACT44		
100	REACT45		
101	REACT46		
102	REACT47		
103	REACT48		
104	REACT49		
105	REACT50		
106	REACT51		
107	REACT52		
108	REACT53		
109	REACT54		
110	REACT55		
111	REACT56		
112	REACT57		
113	REACT58		
114	REACT59		
115	REACT60		
116	FEEL1	I(1)	1 = Never 2 = Almost never 3 = Sometimes 4 = Fairly often 5 = Very often
117	FEEL2		
118	FEEL3		
119	FEEL4		
120	FEEL5		
121	FEEL6		
122	FEEL7		
123	FEEL8		
124	FEEL9		
125	FEEL10		
126	FEEL11		
127	FEEL12		
128	FEEL13		
129	FEEL14		
130	YOU1	I(1)	1 = Strongly disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly agree
131	YOU2		
132	YOU3		
133	YOU4		
134	YOU5		
135	YOU6		
136	YOU7		
137	YOU8		
138	YOU9		
139	YOU10		
140	YOU11		
141	YOU12		
142	YOU13		
143	YOU14		
144	YOU15		
145	YOU16		
146	YOU17		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
147	YOU18	I(1)	1 = Strongly disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly agree
148	YOU19		
149	YOU20		
150	YOU21		
151	YOU22		
152	YOU23		
153	YOU24		
154	YOU25		
155	YOU26		
156	YOU27		
157	YOU28		
158	YOU29		
159	YOU30		
160	YOU31		
161	YOU32		
162	YOU33		
163	YOU34		
164	YOU35		
165	YOU36		
166	YOU37		
167	YOU38		
168	YOU39		
169	YOU40		
170	YOU41		
171	YOU42		
172A	LOFA	I(2)	1 - 10
172B	LOFB		
172C	LOFC		
173	USUAL1	I(1)	1 = Never 2 = Sometimes 3 = Often 4 = Always
174	USUAL2		
175	USUAL3		
176	USUAL4		
177	USUAL5		
178	USUAL6		
179	USUAL7		
180	USUAL8		
181	USUAL9		
182	USUAL10		
183	USUAL11		
184	USUAL12		
185	USUAL13		
186	USUAL14		
187	USUAL15		
188	USUAL16		
189	USUAL17		
190	USUAL18		
191	USUAL19		
192	USUAL20		
193	USUAL21		
194	USUAL22		
195	USUAL23		
196	USUAL24		
197	USUAL25		
198	USUAL26		
199	USUAL27		
200	USUAL28		
201	USUAL29		
202	USUAL30		
203	USUAL31		
204	USUAL32		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
205	USUAL33	I(1)	1 = Never 2 = Sometimes 3 = Often 4 = Always
206	USUAL34		
207	USUAL35		
208	USUAL36		
209	USUAL37		
210	USUAL38		
211	USUAL39		
212	USUAL40		
213	USUAL41		
214	USUAL42		
215	USUAL43		
216	USUAL44		
217	USUAL45		
218	USUAL46		
219	USUAL47		
220	USUAL48		
221	USUAL49		
222	USUAL50		
223	USUAL51		
224	USUAL52		
225	USUAL53		
226	USUAL54		
227	USUAL55		
228	USUAL56		
229	USUAL57		
230	USUAL58		
231	USUAL59		
232	USUAL60		
233	WEIGHT	I(1)	1 = Not at all 2 = A little bit 3 = Quite a bit 4 = A lot
234	BACKPAIN		
235	CONST		
236	DIZZY		
237	DIARRHEA		
238	FAINT		
239	FATIGUE		
240	HEAD		
241	MIGRANE		
242	NAUSEA		
243	INDIGEST		
244	CRAMPS		
245	SPELLS		
246	VOMIT		
247	TREMBLE		
248	FLUSHED		
249	RACEHT		
250	APPETITE		
251	BREATH		
252	NUMB		
253	WEAK		
254	CHSTPAIN		
255	LOWENER		
256	STUFFY		
257	VISION		
258	MUSCSORE		
259	MUSCCRMP		
260	MENSTRAL		
261	PALP		
262	BRUISES		
263	NOSEBLD		
264	LGHTHEAD		

FORM 07 (Rev. 0, 1)
 QUALITY OF LIFE FORM
 (Continued)

<u>ITEM</u>	<u>NAME</u>	<u>TYPE AND LENGTH</u>	<u>CODES OR UNITS</u>
265	WHEEZE	I(1)	1 = Not at all 2 = A little bit 3 = Quite a bit 4 = A lot
266	COUGH		
267	YSTINF		
268	BLDINF		
269	TEETH		
270	EARACHE		
271	SWELL		
272 (Rev. 0)	EXPECT1	I(3)	0 - 100%
272 (Rev. 1)	PREFER	I(1)	1 = Strongly prefer biofeedback 2 = Moderately prefer biofeedback 3 = Have no preference 4 = Moderately prefer drug 5 = Strongly prefer drug
273 (Rev. 0)	EXPECT2	I(1)	1 = Not at all 2 = A little 3 = Moderately 4 = Very
273 (Rev. 1)	BIO_SENS	I(1)	1 = No, not at all 2 = Yes, a little 3 = Yes, moderately 4 = Yes, quite a lot 5 = Yes, very much
274 (Rev. 0)	EXPECT3	I(3)	0 - 100%
274 (Rev. 1)	DRUG_SEN	I(1)	1 = No, not at all 2 = Yes, a little 3 = Yes, moderately 4 = Yes, quite a lot 5 = Yes, very much
275 (Rev. 0)	EXPECT4	I(1)	1 = Not at all 2 = A little 3 = Moderately 4 = Very

CONTENTS PROCEDURE

Data Set Name:	RTS.FORM07	Observations:	313
Member Type:	DATA	Variables:	380
Engine:	V612	Indexes:	0
Created:	11:06 Thursday, April 27, 2000	Observation Length:	1533
Last Modified:	11:06 Thursday, April 27, 2000	Deleted Observations:	0
Protection:		Compressed:	NO
Data Set Type:		Sorted:	NO
Label:			

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

Data Set Page Size:	15360
Number of Data Set Pages:	35
File Format:	607
First Data Page:	4
Max Obs per Page:	10
Obs in First Data Page:	8

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

#	Variable	Type	Len	Pos	Format	Informat	Label
ff							
6	ADULTS	Num	4	20	2.	BEST22.	f07q7b No. of adults in household
83	AIRCOND	Num	4	325	1.	BEST22.	f07q27q Air-conditioned rooms
134	ALCOHOL	Num	4	529	1.	BEST22.	f07q43i Drink alcohol
37	ANGRY	Num	4	141	1.	BEST22.	f07q25a Felt angry
107	ANGRY4WK	Num	4	421	1.	BEST22.	f07q41e Felt angry
351	APPETITE	Num	4	1397	1.	BEST22.	f07q250 Poor appetite
61	APPL	Num	4	237	1.	BEST22.	f07q27d2 Using kitchen appliances
136	ARMPITS	Num	4	537	1.	BEST22.	f07q43k Put hands in armpits
335	BACKPAIN	Num	4	1333	1.	BEST22.	f07q234 Back pain
73	BATHE	Num	4	285	1.	BEST22.	f07q27i Bathing
378	BIO_SENS	Num	8	1509	1.	BEST22.	f07q273(r1) Biofeedback makes sense
117	BITT4WK	Num	4	461	1.	BEST22.	f07q41o Felt bitter
40	BITTER	Num	4	153	1.	BEST22.	f07q25d Felt bitter
369	BLDINF	Num	4	1469	1.	BEST22.	f07q268 Bladder infection
111	BLUE4WK	Num	4	437	1.	BEST22.	f07q41i Felt down-hearted and blue
352	BREATH	Num	4	1401	1.	BEST22.	f07q251 Shortness of breath
363	BRUISES	Num	4	1445	1.	BEST22.	f07q262 Bruises
108	CALM4WK	Num	4	425	1.	BEST22.	f07q41f Felt calm and peaceful
5	CHILDREN	Num	4	16	2.	BEST22.	f07q7a No. of children in household
355	CHSTPAIN	Num	4	1413	1.	BEST22.	f07q254 Pains in heart or chest
50	CLMBONE	Num	4	193	1.	BEST22.	f07q26e Climb one flight of stairs
49	CLMBSEV	Num	4	189	1.	BEST22.	f07q26d Climbing sev. flights of stairs
7	CLOSE	Num	4	24	2.	BEST22.	f07q8 No. of close friends/relatives
125	CLTHOTHR	Num	4	493	1.	BEST22.	f07q42h Used other means
146	CONF1	Num	4	577	1.	BEST22.	f07q47 Treatment with biofeedback
147	CONF2	Num	4	581	1.	BEST22.	f07q48 Treatment with nifedipine
148	CONF3	Num	4	585	1.	BEST22.	f07q49 Can do biofeedback
149	CONF4	Num	4	589	1.	BEST22.	f07q50 Can do nifedipine
336	CONST	Num	4	1337	1.	BEST22.	f07q235 Constipation
367	COUGH	Num	4	1461	1.	BEST22.	f07q266 Cough
345	CRAMPS	Num	4	1373	1.	BEST22.	f07q244 Stomach pain (e.g. cramps)

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#	Variable	Type	Len	Pos	Format	Informat	Label
ff							
17	CRIT	Num	4	64	1.	BEST22.	f07q11 Others criticize
18	CRIT_NO	Num	4	68	2.	BEST22.	f07q11a How many criticize
84	DEALSTR	Num	4	329	1.	BEST22.	f07q27r Dealing with stress
39	DEPRESS	Num	4	149	1.	BEST22.	f07q25c Felt depressed
338	DIARRHEA	Num	4	1345	1.	BEST22.	f07q237 Diarrhea
337	DIZZY	Num	4	1341	1.	BEST22.	f07q236 Dizziness
45	DOWN	Num	4	173	1.	BEST22.	f07q25i Felt down
379	DRUG_SEN	Num	8	1517	1.	BEST22.	f07q274(r1) Drug makes sense
105	DUMP4WK	Num	4	413	1.	BEST22.	f07q41c Down in the dumps
371	EARACHE	Num	4	1477	1.	BEST22.	f07q270 Earaches
4	EDUC	Num	4	12	1.	BEST22.	f07q6 Educational level
118	ELGLOVE	Num	4	465	1.	BEST22.	f07q42a Used electric gloves
119	ELSOCK	Num	4	469	1.	BEST22.	f07q42b Used electric socks
90	EMPROBA	Num	4	353	1.	BEST22.	f07q30a Cut down time at work
91	EMPROBB	Num	4	357	1.	BEST22.	f07q30b Accomplished less
92	EMPROBC	Num	4	361	1.	BEST22.	f07q30c Not as careful as usual
2	EMPSTAT	Num	4	4	1.	BEST22.	f07q4 Current employment status
109	ENRGY4WK	Num	4	429	1.	BEST22.	f07q41g Had a lot of energy
72	EQUIP	Num	4	281	1.	BEST22.	f07q27h3 Handling sports equipment
373	EXPECT1	Num	4	1485	3.	BEST22.	f07q272(r0) % days practicing bi ofdbk
374	EXPECT2	Num	4	1489	1.	BEST22.	f07q273(r0) Effectiveness of bi of feedback
375	EXPECT3	Num	4	1493	3.	BEST22.	f07q274(r0) % days taking medication
376	EXPECT4	Num	4	1497	1.	BEST22.	f07q275(r0) Effectiveness of medication
123	EXSWEAT	Num	4	485	1.	BEST22.	f07q42f Used extra sweaters
339	FAINT	Num	4	1349	1.	BEST22.	f07q238 Faintness
340	FATIGUE	Num	4	1353	1.	BEST22.	f07q239 Fatigue
215	FEEL1	Num	4	853	1.	BEST22.	f07q116 Upset at unexpected
216	FEEL2	Num	4	857	1.	BEST22.	f07q117 Unable to control life
217	FEEL3	Num	4	861	1.	BEST22.	f07q118 Felt nervous and stressed
218	FEEL4	Num	4	865	1.	BEST22.	f07q119 Successful with problems
219	FEEL5	Num	4	869	1.	BEST22.	f07q120 Coping with changes
220	FEEL6	Num	4	873	1.	BEST22.	f07q121 Felt confident to handle prob.
221	FEEL7	Num	4	877	1.	BEST22.	f07q122 Things going your way
222	FEEL8	Num	4	881	1.	BEST22.	f07q123 Could not cope with all things
223	FEEL9	Num	4	885	1.	BEST22.	f07q124 Able to control irritations
224	FEEL10	Num	4	889	1.	BEST22.	f07q125 Felt on top of things
225	FEEL11	Num	4	893	1.	BEST22.	f07q126 Anger at uncontrolled things
226	FEEL12	Num	4	897	1.	BEST22.	f07q127 Think about things to accomplish
227	FEEL13	Num	4	901	1.	BEST22.	f07q128 Control time
228	FEEL14	Num	4	905	1.	BEST22.	f07q129 Difficulties piling too high
349	FLUSHED	Num	4	1389	1.	BEST22.	f07q248 Flushing
63	FREEZER	Num	4	245	1.	BEST22.	f07q27d4 Removing food from freezer
145	FREQSEX	Num	4	573	1.	BEST22.	f07q46 Satisfied with frequency of sex
76	GLOVES	Num	4	297	1.	BEST22.	f07q27j3 Putting on gloves
57	GRIP	Num	4	221	1.	BEST22.	f07q27b1 Gripping steering wheel
48	GROCERY	Num	4	185	1.	BEST22.	f07q26c Carrying/lifting groceries

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#	Variable	Type	Len	Pos	Format	Informat	Label
ff							
124	HANDWARM	Num	4	489	1.	BEST22.	f07q42g Used chemical hand warmers
65	HANGCLTH	Num	4	253	1.	BEST22.	f07q27e2 Folding or hanging clothes
115	HAPPY4WK	Num	4	453	1.	BEST22.	f07q41m Been a happy person
341	HEAD	Num	4	1357	1.	BEST22.	f07q240 Headache
127	HEATER	Num	4	501	1.	BEST22.	f07q43b Use a space heater
128	HEATPAD	Num	4	505	1.	BEST22.	f07q43c Use a heating pad
126	HEATUP	Num	4	497	1.	BEST22.	f07q43a Turn up the heat
132	HEATVENT	Num	4	521	1.	BEST22.	f07q43g Put hands over heating vent
21	HELP	Num	4	80	1.	BEST22.	f07q13 Less help than expected
22	HELP_NO	Num	4	84	2.	BEST22.	f07q13a How many give less help
66	HLDFOOD	Num	4	257	1.	BEST22.	f07q27f1 Holding cold/frozen food
68	HLGLASS	Num	4	265	1.	BEST22.	f07q27g1 Holding a cold glass
344	INDI GEST	Num	4	1369	1.	BEST22.	f07q243 Acid stomach or indigestion
120	INSGLOVE	Num	4	473	1.	BEST22.	f07q42c Used insulated gloves
121	INSSOCK	Num	4	477	1.	BEST22.	f07q42d Used insulated socks
100	INTOTHPN	Num	4	393	1.	BEST22.	f07q38 Intensity of other pain
102	INTOTHWK	Num	4	401	1.	BEST22.	f07q40 Other pain interfered
99	INTRAYPN	Num	4	389	1.	BEST22.	f07q37 Intensity of pain from Raynauds
101	INTRAYWK	Num	4	397	1.	BEST22.	f07q39 Raynauds pain interfered
93	INTRFER1	Num	4	365	1.	BEST22.	f07q31 Health interfered
94	INTRFER2	Num	4	369	1.	BEST22.	f07q32 Emotional problems interfered
95	INTRFER3	Num	4	373	1.	BEST22.	f07q33 Physical health interfered
96	INTRFER4	Num	4	377	1.	BEST22.	f07q34 Emotional problems interfered
113	IRR4WK	Num	4	445	1.	BEST22.	f07q41k Felt irritable
35	KNOWRAYN	Num	4	136	1.	BEST22.	f07q24 Prior knowledge of Raynauds
36	KNOWRMK	Char	1	140			f07q24a How long ago
365	LGHTHEAD	Num	4	1453	1.	BEST22.	f07q264 Light headedness
55	LIMBATH	Num	4	213	1.	BEST22.	f07q26j Bathing and dressing
51	LIMBEND	Num	4	197	1.	BEST22.	f07q26f Bending, kneeling, stooping
271	LOFA	Num	4	1077	2.	BEST22.	f07q172a Ladder at present time
272	LOFB	Num	4	1081	2.	BEST22.	f07q172b Ladder one year ago
273	LOFC	Num	4	1085	2.	BEST22.	f07q172c Ladder one year from now
356	LOWENER	Num	4	1417	1.	BEST22.	f07q255 Feeling low in energy
1	MARSTAT	Num	4	0	1.	BEST22.	f07q3 Current marital status
151	MEMDRY	Num	4	597	1.	BEST22.	f07q52 Memory and Concentration
361	MENSTRAL	Num	4	1437	1.	BEST22.	f07q260 Menstrual cramps
342	MIGRANE	Num	4	1361	1.	BEST22.	f07q241 Mi graine headache
47	MODACT	Num	4	181	1.	BEST22.	f07q26b Moderate activities
153	MOODS	Num	4	605	1.	BEST22.	f07q54 Moods and emotions
360	MUSCCRMP	Num	4	1433	1.	BEST22.	f07q259 Muscle cramps
359	MUSCSORE	Num	4	1429	1.	BEST22.	f07q258 Muscle tension or soreness
129	MVWKSP	Num	4	509	1.	BEST22.	f07q43d Move work space
343	NAUSEA	Num	4	1365	1.	BEST22.	f07q242 Nausea
38	NERV	Num	4	145	1.	BEST22.	f07q25b Felt nervous
104	NERV4WK	Num	4	409	1.	BEST22.	f07q41b Been nervous
380	NEWID	Num	8	1525	4.		Patient ID
364	NOSEBLD	Num	4	1449	1.	BEST22.	f07q263 Nosebleed
353	NUMB	Num	4	1405	1.	BEST22.	f07q252 Numbness or tingling
3	OCC	Num	4	8	2.	BEST22.	f07q5 Occupation
140	OFTENA	Num	4	553	1.	BEST22.	f07q44a Feel rested from sleep
141	OFTENB	Num	4	557	1.	BEST22.	f07q44b Difficultly falling asleep

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#	Variable	Type	Len	Pos	Format	Informat	Label
ff							
142	OFTENC	Num	4	561	1.	BEST22.	f07q44c Awaken earlier than usual
143	OFTEND	Num	4	565	1.	BEST22.	f07q44d Difficultly staying awake
27	ORGREL	Num	4	104	1.	BEST22.	f07q16 Belong to organized religion
98	OTHPAIN	Num	4	385	1.	BEST22.	f07q36 Other pain
71	OUTACT	Num	4	277	1.	BEST22.	f07q27h2 Outdoor act. in cold weather
56	OUTDOORS	Num	4	217	1.	BEST22.	f07q27a Outdoors in cold weather
33	OVHLTH	Num	4	128	1.	BEST22.	f07q22 Overall health
362	PALP	Num	4	1441	1.	BEST22.	f07q261 Palpitations
103	PEP4WK	Num	4	405	1.	BEST22.	f07q41a Felt full of pep
377	PREFER	Num	8	1501	1.	BEST22.	f07q272(r1) Treatment preference
25	PROB	Num	4	96	1.	BEST22.	f07q15 Others make problems
26	PROB_NO	Num	4	100	2.	BEST22.	f07q15a How many make problems
138	PRVOTHR1	Num	4	545	1.	BEST22.	f07q43m Other action
139	PRVOTHR2	Num	4	549	1.	BEST22.	f07q43n Other action
350	RACEHT	Num	4	1393	1.	BEST22.	f07q249 Heart pounding or racing
29	RATEEM	Num	4	112	1.	BEST22.	f07q18 Rate mental/emotional health
31	RATEPHY	Num	4	120	1.	BEST22.	f07q20 Rate physical health
85	RATE_RAY	Num	4	333	1.	BEST22.	f07q28 Rate Raynauds condition
97	RAYNPAIN	Num	4	381	1.	BEST22.	f07q35 Pain from Raynauds
86	RAYPROBA	Num	4	337	1.	BEST22.	f07q29a Cut down time at work
87	RAYPROBB	Num	4	341	1.	BEST22.	f07q29b Accomplished less
88	RAYPROBC	Num	4	345	1.	BEST22.	f07q29c Limited in kind of work
89	RAYPROBD	Num	4	349	1.	BEST22.	f07q29d Difficultly performing work
155	REACT1	Num	4	613	1.	BEST22.	f07q56 Grow as a person
156	REACT2	Num	4	617	1.	BEST22.	f07q57 Turn to work
157	REACT3	Num	4	621	1.	BEST22.	f07q58 Get upset and let emotions out
158	REACT4	Num	4	625	1.	BEST22.	f07q59 Try to get advice
159	REACT5	Num	4	629	1.	BEST22.	f07q60 Try to do something about it
160	REACT6	Num	4	633	1.	BEST22.	f07q61 Say "This isn't happening"
161	REACT7	Num	4	637	1.	BEST22.	f07q62 Put trust in God
162	REACT8	Num	4	641	1.	BEST22.	f07q63 Laugh about condition
163	REACT9	Num	4	645	1.	BEST22.	f07q64 Stop trying to deal with it
164	REACT10	Num	4	649	1.	BEST22.	f07q65 Keep from acting too quickly
165	REACT11	Num	4	653	1.	BEST22.	f07q66 Discuss feelings with someone
166	REACT12	Num	4	657	1.	BEST22.	f07q67 Use alcohol and drugs
167	REACT13	Num	4	661	1.	BEST22.	f07q68 Get used to the idea
168	REACT14	Num	4	665	1.	BEST22.	f07q69 Talk to others to learn more
169	REACT15	Num	4	669	1.	BEST22.	f07q70 Keep from getting distracted
170	REACT16	Num	4	673	1.	BEST22.	f07q71 Daydream about other things
171	REACT17	Num	4	677	1.	BEST22.	f07q72 Get upset
172	REACT18	Num	4	681	1.	BEST22.	f07q73 Seek God's help
173	REACT19	Num	4	685	1.	BEST22.	f07q74 Make a plan of action
174	REACT20	Num	4	689	1.	BEST22.	f07q75 Make jokes about condition
175	REACT21	Num	4	693	1.	BEST22.	f07q76 Accept it
176	REACT22	Num	4	697	1.	BEST22.	f07q77 Hold off until situation permits
177	REACT23	Num	4	701	1.	BEST22.	f07q78 Try to get emotional support
178	REACT24	Num	4	705	1.	BEST22.	f07q79 Give up trying to cope
179	REACT25	Num	4	709	1.	BEST22.	f07q80 Action to minimize problems
180	REACT26	Num	4	713	1.	BEST22.	f07q81 Lose self in drugs/alcohol
181	REACT27	Num	4	717	1.	BEST22.	f07q82 Refuse to believe
182	REACT28	Num	4	721	1.	BEST22.	f07q83 Try to let out feelings

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#	Variable	Type	Len	Pos	Format	Informat	Label
ff							
183	REACT29	Num	4	725	1.	BEST22.	f07q84 Try to make it more positive
184	REACT30	Num	4	729	1.	BEST22.	f07q85 Talk to one who can do something
185	REACT31	Num	4	733	1.	BEST22.	f07q86 Sleep more than usual
186	REACT32	Num	4	737	1.	BEST22.	f07q87 Try to come up with strategy
187	REACT33	Num	4	741	1.	BEST22.	f07q88 Focus on condition
188	REACT34	Num	4	745	1.	BEST22.	f07q89 Sympathy from someone
189	REACT35	Num	4	749	1.	BEST22.	f07q90 Drink or take drugs
190	REACT36	Num	4	753	1.	BEST22.	f07q91 Kid around
191	REACT37	Num	4	757	1.	BEST22.	f07q92 Give up attempt to overcome
192	REACT38	Num	4	761	1.	BEST22.	f07q93 Look for something good
193	REACT39	Num	4	765	1.	BEST22.	f07q94 Think about how to best handle
194	REACT40	Num	4	769	1.	BEST22.	f07q95 Pretend it hasn't happened
195	REACT41	Num	4	773	1.	BEST22.	f07q96 Don't act too soon
196	REACT42	Num	4	777	1.	BEST22.	f07q97 Prevent interference
197	REACT43	Num	4	781	1.	BEST22.	f07q98 Go to movies or watch TV
198	REACT44	Num	4	785	1.	BEST22.	f07q99 Accept the reality
199	REACT45	Num	4	789	1.	BEST22.	f07q100 Ask others what they did
200	REACT46	Num	4	793	1.	BEST22.	f07q101 Feel and express distress
201	REACT47	Num	4	797	1.	BEST22.	f07q102 Take direct action
202	REACT48	Num	4	801	1.	BEST22.	f07q103 Find comfort in religion
203	REACT49	Num	4	805	1.	BEST22.	f07q104 Wait until the right time
204	REACT50	Num	4	809	1.	BEST22.	f07q105 Make fun of condition
205	REACT51	Num	4	813	1.	BEST22.	f07q106 Reduce time
206	REACT52	Num	4	817	1.	BEST22.	f07q107 Talk to someone about feelings
207	REACT53	Num	4	821	1.	BEST22.	f07q108 Use alcohol or drugs
208	REACT54	Num	4	825	1.	BEST22.	f07q109 Learn to live with
209	REACT55	Num	4	829	1.	BEST22.	f07q110 Put aside other things
210	REACT56	Num	4	833	1.	BEST22.	f07q111 Think hard about steps
211	REACT57	Num	4	837	1.	BEST22.	f07q112 Act as if it doesn't exist
212	REACT58	Num	4	841	1.	BEST22.	f07q113 Do it one step at a time
213	REACT59	Num	4	845	1.	BEST22.	f07q114 Try to learn something
214	REACT60	Num	4	849	1.	BEST22.	f07q115 Pray more than usual
28	RELIG	Num	4	108	1.	BEST22.	f07q17 Attendance at religious services
110	RES4WK	Num	4	433	1.	BEST22.	f07q41h Felt resentful
43	RESENT	Num	4	165	1.	BEST22.	f07q25g Felt resentful
135	RUBHAND	Num	4	533	1.	BEST22.	f07q43j Rub hands together
42	SAD	Num	4	161	1.	BEST22.	f07q25f Felt sad
34	SATHLTH	Num	4	132	1.	BEST22.	f07q23 Satisfied with overall health
30	SATISEM	Num	4	116	1.	BEST22.	f07q19 Satisfied with mental health
32	SATISPHY	Num	4	124	1.	BEST22.	f07q21 Satisfied with physical health
144	SATISSEX	Num	4	569	1.	BEST22.	f07q45 Current sexual relations
41	SCARED	Num	4	157	1.	BEST22.	f07q25e Felt scared
82	SEXACT	Num	4	321	1.	BEST22.	f07q27p Sexual activity
58	SHIFT	Num	4	225	1.	BEST22.	f07q27b2 Shifting car
75	SHOELACE	Num	4	293	1.	BEST22.	f07q27j2 Tying shoelaces
59	SHOP	Num	4	229	1.	BEST22.	f07q27c Shopping for frozen food
154	SLEEP	Num	4	609	1.	BEST22.	f07q55 Sleep patterns
81	SOACT	Num	4	317	1.	BEST22.	f07q27o Social activities
150	SOACT2	Num	4	593	1.	BEST22.	f07q51 Social Activities

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#	Variable	Type	Len	Pos	Format	Informat	Label
ff							
152	SPATIAL	Num	4	601	1.	BEST22.	f07q53 Spatial Orientation
346	SPELLS	Num	4	1377	1.	BEST22.	f07q245 Hot or cold spells
357	STUFFY	Num	4	1421	1.	BEST22.	f07q256 Stuffy head or nose
8	SUPPAVLA	Num	4	28	1.	BEST22.	f07q9a Someone to listen
9	SUPPAVLB	Num	4	32	1.	BEST22.	f07q9b Someone who shows love
10	SUPPAVLC	Num	4	36	1.	BEST22.	f07q9c Someone to give information
11	SUPPAVLD	Num	4	40	1.	BEST22.	f07q9d Someone to give good advice
12	SUPPAVLE	Num	4	44	1.	BEST22.	f07q9e Someone whose advice you want
13	SUPPAVLF	Num	4	48	1.	BEST22.	f07q9f Someone to help with chores
14	SUPPAVLG	Num	4	52	1.	BEST22.	f07q9g Someone to share worries
15	SUPPAVLH	Num	4	56	1.	BEST22.	f07q9h Someone to have fun with
16	SUPPNEED	Num	4	60	1.	BEST22.	f07q10 How easy to ask for support
130	SWCOVER	Num	4	513	1.	BEST22.	f07q43e Get a steering wheel cover
372	SWELL	Num	4	1481	1.	BEST22.	f07q271 Swelling in hands, feet, arms, legs
67	SWFOOD	Num	4	261	1.	BEST22.	f07q27f2 Swallowing cold/frozen food
70	SWIM	Num	4	273	1.	BEST22.	f07q27h1 Swimming in cool water
69	SWLIQ	Num	4	269	1.	BEST22.	f07q27g2 Swallowing cold liquids
370	TEETH	Num	4	1473	1.	BEST22.	f07q269 Tooth/gum problems
106	TENSE4WK	Num	4	417	1.	BEST22.	f07q41d Felt tense
122	THERMUND	Num	4	481	1.	BEST22.	f07q42e Used thermal underwear
116	TIRED4WK	Num	4	457	1.	BEST22.	f07q41n Felt tired
348	TREMBLE	Num	4	1385	1.	BEST22.	f07q247 Hands trembling
77	USECOMP	Num	4	301	1.	BEST22.	f07q27k Using typewriter/computer
80	USEMACH	Num	4	313	1.	BEST22.	f07q27n Using machinery
78	USEPEN	Num	4	305	1.	BEST22.	f07q27l Using pen/pencil
79	USETOOLS	Num	4	309	1.	BEST22.	f07q27m Using tools
274	USUAL1	Num	4	1089	1.	BEST22.	f07q173 Grow as a person
275	USUAL2	Num	4	1093	1.	BEST22.	f07q174 Turn to work
276	USUAL3	Num	4	1097	1.	BEST22.	f07q175 Get upset and let emotions out
277	USUAL4	Num	4	1101	1.	BEST22.	f07q176 Try to get advice
278	USUAL5	Num	4	1105	1.	BEST22.	f07q177 Try to do something about it
279	USUAL6	Num	4	1109	1.	BEST22.	f07q178 Say "This isn't real"
280	USUAL7	Num	4	1113	1.	BEST22.	f07q179 Put trust in God
281	USUAL8	Num	4	1117	1.	BEST22.	f07q180 Laugh about condition
282	USUAL9	Num	4	1121	1.	BEST22.	f07q181 Stop trying to deal with it
283	USUAL10	Num	4	1125	1.	BEST22.	f07q182 Keep from acting too quickly
284	USUAL11	Num	4	1129	1.	BEST22.	f07q183 Discuss feelings with someone
285	USUAL12	Num	4	1133	1.	BEST22.	f07q184 Use alcohol and drugs
286	USUAL13	Num	4	1137	1.	BEST22.	f07q185 Get used to the idea
287	USUAL14	Num	4	1141	1.	BEST22.	f07q186 Talk to others to learn more
288	USUAL15	Num	4	1145	1.	BEST22.	f07q187 Keep from getting distracted
289	USUAL16	Num	4	1149	1.	BEST22.	f07q188 Daydream about other things
290	USUAL17	Num	4	1153	1.	BEST22.	f07q189 Get upset
291	USUAL18	Num	4	1157	1.	BEST22.	f07q190 Seek God's help
292	USUAL19	Num	4	1161	1.	BEST22.	f07q191 Make a plan of action
293	USUAL20	Num	4	1165	1.	BEST22.	f07q192 Make jokes about condition
294	USUAL21	Num	4	1169	1.	BEST22.	f07q193 Accept it
295	USUAL22	Num	4	1173	1.	BEST22.	f07q194 Hold off until situation permits
296	USUAL23	Num	4	1177	1.	BEST22.	f07q195 Try to get emotional support

CONTENTS PROCEDURE

#	Variable	Type	Len	Pos	Format	Informat	Label
297	USUAL24	Num	4	1181	1.	BEST22.	f07q196 Give up trying reach goal
298	USUAL25	Num	4	1185	1.	BEST22.	f07q197 Action to get rid of problem
299	USUAL26	Num	4	1189	1.	BEST22.	f07q198 Lose self in drugs/alcohol
300	USUAL27	Num	4	1193	1.	BEST22.	f07q199 Refuse to believe
301	USUAL28	Num	4	1197	1.	BEST22.	f07q200 Try to let out feelings
302	USUAL29	Num	4	1201	1.	BEST22.	f07q201 Try to make it more positive
303	USUAL30	Num	4	1205	1.	BEST22.	f07q202 Talk to one who can do something
304	USUAL31	Num	4	1209	1.	BEST22.	f07q203 Sleep more than usual
305	USUAL32	Num	4	1213	1.	BEST22.	f07q204 Try to come up with strategy
306	USUAL33	Num	4	1217	1.	BEST22.	f07q205 Focus on problem
307	USUAL34	Num	4	1221	1.	BEST22.	f07q206 Sympathy from someone
308	USUAL35	Num	4	1225	1.	BEST22.	f07q207 Drink or take drugs
309	USUAL36	Num	4	1229	1.	BEST22.	f07q208 Kid around
310	USUAL37	Num	4	1233	1.	BEST22.	f07q209 Give up attempt
311	USUAL38	Num	4	1237	1.	BEST22.	f07q210 Look for something good
312	USUAL39	Num	4	1241	1.	BEST22.	f07q211 Think about how to best handle
313	USUAL40	Num	4	1245	1.	BEST22.	f07q212 Pretend it hasn't happened
314	USUAL41	Num	4	1249	1.	BEST22.	f07q213 Don't act too soon
315	USUAL42	Num	4	1253	1.	BEST22.	f07q214 Prevent interference
316	USUAL43	Num	4	1257	1.	BEST22.	f07q215 Go to movies or watch TV
317	USUAL44	Num	4	1261	1.	BEST22.	f07q216 Accept the reality
318	USUAL45	Num	4	1265	1.	BEST22.	f07q217 Ask others what they did
319	USUAL46	Num	4	1269	1.	BEST22.	f07q218 Feel and express distress
320	USUAL47	Num	4	1273	1.	BEST22.	f07q219 Take direct action
321	USUAL48	Num	4	1277	1.	BEST22.	f07q220 Find comfort in religion
322	USUAL49	Num	4	1281	1.	BEST22.	f07q221 Wait until the right time
323	USUAL50	Num	4	1285	1.	BEST22.	f07q222 Make fun of situation
324	USUAL51	Num	4	1289	1.	BEST22.	f07q223 Reduce time
325	USUAL52	Num	4	1293	1.	BEST22.	f07q224 Talk to someone about feelings
326	USUAL53	Num	4	1297	1.	BEST22.	f07q225 Use alcohol or drugs
327	USUAL54	Num	4	1301	1.	BEST22.	f07q226 Learn to live with
328	USUAL55	Num	4	1305	1.	BEST22.	f07q227 Put aside other things
329	USUAL56	Num	4	1309	1.	BEST22.	f07q228 Think hard about steps
330	USUAL57	Num	4	1313	1.	BEST22.	f07q229 Act as if it hasn't happened
331	USUAL58	Num	4	1317	1.	BEST22.	f07q230 Do it one step at a time
332	USUAL59	Num	4	1321	1.	BEST22.	f07q231 Try to learn something
333	USUAL60	Num	4	1325	1.	BEST22.	f07q232 Pray more than usual
60	UTENSIL	Num	4	233	1.	BEST22.	f07q27d1 Using utensils
46	VIGACT	Num	4	177	1.	BEST22.	f07q26a Vigorous activities
358	VISION	Num	4	1425	1.	BEST22.	f07q257 Blurred vision
347	VOMIT	Num	4	1381	1.	BEST22.	f07q246 Vomiting
54	WALK1BLK	Num	4	209	1.	BEST22.	f07q26i Walking one block
52	WALK1MI	Num	4	201	1.	BEST22.	f07q26g Walking more than 1 mile
53	WALKSEV	Num	4	205	1.	BEST22.	f07q26h Walking several blocks
133	WARMLIQ	Num	4	525	1.	BEST22.	f07q43h Drink warm liquid
131	WARMWAT	Num	4	517	1.	BEST22.	f07q43f Put hands under warm water
64	WASHCLTH	Num	4	249	1.	BEST22.	f07q27e1 Using washer or dryer
62	WASHVEG	Num	4	241	1.	BEST22.	f07q27d3 Washing vegetables in cold water

CONTENTS PROCEDURE

#	Variable	Type	Len	Pos	Format	Informat	Label
19	WDRWN	Num	4	72	1.	BEST22.	f07q12 Others have withdrawn
20	WDRWN_NO	Num	4	76	2.	BEST22.	f07q12a How many have withdrawn
354	WEAK	Num	4	1409	1.	BEST22.	f07q253 Weakness
334	WEIGHT	Num	4	1329	1.	BEST22.	f07q233 Weight change
366	WHEEZE	Num	4	1457	1.	BEST22.	f07q265 Wheezing
137	WHIRL	Num	4	541	1.	BEST22.	f07q43l Whirl arms around
112	WORN4WK	Num	4	441	1.	BEST22.	f07q41j Felt worn out
114	WORR4WK	Num	4	449	1.	BEST22.	f07q41l Felt worried
44	WORRIED	Num	4	169	1.	BEST22.	f07q25h Felt worried
23	WORSE	Num	4	88	1.	BEST22.	f07q14 Others make things worse
24	WORSE_NO	Num	4	92	2.	BEST22.	f07q14a How many make things worse
229	YOU1	Num	4	909	1.	BEST22.	f07q130 Feel lonely
230	YOU2	Num	4	913	1.	BEST22.	f07q131 Try to figure self out
231	YOU3	Num	4	917	1.	BEST22.	f07q132 Usually expect the best
232	YOU4	Num	4	921	1.	BEST22.	f07q133 Quick to sense hunger
233	YOU5	Num	4	925	1.	BEST22.	f07q134 Often feel fed up
234	YOU6	Num	4	929	1.	BEST22.	f07q135 Gotten important things in life
235	YOU7	Num	4	933	1.	BEST22.	f07q136 Think about self a lot
236	YOU8	Num	4	937	1.	BEST22.	f07q137 If it can go wrong it will
237	YOU9	Num	4	941	1.	BEST22.	f07q138 Irritable
238	YOU10	Num	4	945	1.	BEST22.	f07q139 Positive attitude about self
239	YOU11	Num	4	949	1.	BEST22.	f07q140 Pay attention to inner feelings
240	YOU12	Num	4	953	1.	BEST22.	f07q141 Aware of changes in body temp.
241	YOU13	Num	4	957	1.	BEST22.	f07q142 Always look on bright side
242	YOU14	Num	4	961	1.	BEST22.	f07q143 Feel miserable for no reason
243	YOU15	Num	4	965	1.	BEST22.	f07q144 Often daydream about self
244	YOU16	Num	4	969	1.	BEST22.	f07q145 Person of worth
245	YOU17	Num	4	973	1.	BEST22.	f07q146 Would change almost nothing
246	YOU18	Num	4	977	1.	BEST22.	f07q147 Mood goes up and down
247	YOU19	Num	4	981	1.	BEST22.	f07q148 Optimistic about future
248	YOU20	Num	4	985	1.	BEST22.	f07q149 Never look at self hard
249	YOU21	Num	4	989	1.	BEST22.	f07q150 Can feel heart beating
250	YOU22	Num	4	993	1.	BEST22.	f07q151 Troubled by guilt
251	YOU23	Num	4	997	1.	BEST22.	f07q152 Satisfied with life
252	YOU24	Num	4	1001	1.	BEST22.	f07q153 Don't expect things
253	YOU25	Num	4	1005	1.	BEST22.	f07q154 Think about reasons
254	YOU26	Num	4	1009	1.	BEST22.	f07q155 Nervous person
255	YOU27	Num	4	1013	1.	BEST22.	f07q156 Nothing to be proud of
256	YOU28	Num	4	1017	1.	BEST22.	f07q157 Things never work out
257	YOU29	Num	4	1021	1.	BEST22.	f07q158 Step back and examine self
258	YOU30	Num	4	1025	1.	BEST22.	f07q159 High-strung
259	YOU31	Num	4	1029	1.	BEST22.	f07q160 Knows when mouth/throat is dry
260	YOU32	Num	4	1033	1.	BEST22.	f07q161 Clouds have silver lining
261	YOU33	Num	4	1037	1.	BEST22.	f07q162 Life conditions are excellent
262	YOU34	Num	4	1041	1.	BEST22.	f07q163 Quickly notice change in mood
263	YOU35	Num	4	1045	1.	BEST22.	f07q164 Life is very dull
264	YOU36	Num	4	1049	1.	BEST22.	f07q165 Don't count on good things
265	YOU37	Num	4	1053	1.	BEST22.	f07q166 No good at all

CONTENTS PROCEDURE

#	Variable	Type	Len	Pos	Format	Informat	Label
<i>ff</i>							
266	YOU38	Num	4	1057	1.	BEST22.	f07q167 Knows why own mind works
267	YOU39	Num	4	1061	1.	BEST22.	f07q168 Life is close to ideal
268	YOU40	Num	4	1065	1.	BEST22.	f07q169 Easily hurt
269	YOU41	Num	4	1069	1.	BEST22.	f07q170 Sensitive to bodily tensions
270	YOU42	Num	4	1073	1.	BEST22.	f07q171 More good than bad to happen
368	YSTINF	Num	4	1465	1.	BEST22.	f07q267 Yeast infection
74	ZIPPER	Num	4	289	1.	BEST22.	f07q27j1 Fastening zippers/buttons

The MEANS Procedure

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
MARSTAT	f07q3 Current marital status	313	2.0031949	0.6018050	1.0000000	3.0000000
EMPSTAT	f07q4 Current employment status	313	1.1725240	0.3784402	1.0000000	2.0000000
OCC	f07q5 Occupation	313	3.3801917	2.1570971	1.0000000	7.0000000
EDUC	f07q6 Educational level	313	2.6038339	0.9949800	1.0000000	4.0000000
CHILDREN	f07q7a No. of children in household	312	0.4487179	0.7547907	0	2.0000000
ADULTS	f07q7b No. of adults in household	312	1.8974359	0.6230254	1.0000000	3.0000000
CLOSE	f07q8 No. of close friends/relatives	313	8.3961661	3.1033870	2.0000000	12.0000000
SUPPAVLA	f07q9a Someone to listen	313	4.3993610	0.6912453	1.0000000	5.0000000
SUPPAVLB	f07q9b Someone who shows love	313	4.3386581	0.9130504	1.0000000	5.0000000
SUPPAVLC	f07q9c Someone to give information	313	4.1214058	0.8231167	1.0000000	5.0000000
SUPPAVLD	f07q9d Someone to give good advice	313	4.1150160	0.8840819	1.0000000	5.0000000
SUPPAVLE	f07q9e Someone whose advice you want	313	3.9968051	0.9075834	1.0000000	5.0000000
SUPPAVLF	f07q9f Someone to help with chores	312	3.2692308	1.3266797	1.0000000	5.0000000
SUPPAVLG	f07q9g Someone to share worries	313	4.0447284	1.0702471	1.0000000	5.0000000
SUPPAVLH	f07q9h Someone to have fun with	313	4.1341853	0.8922103	1.0000000	5.0000000
SUPPNEED	f07q10 How easy to ask for support	313	2.0223642	0.8638826	1.0000000	4.0000000
CRIT	f07q11 Others criticize	312	1.5160256	0.5005459	1.0000000	2.0000000
CRIT_NO	f07q11a How many criticize	146	2.4178082	2.1869735	1.0000000	15.0000000
WDRWN	f07q12 Others have withdrawn	313	1.7124601	0.4533402	1.0000000	2.0000000
WDRWN_NO	f07q12a How many have withdrawn	90	2.0000000	1.5864596	1.0000000	12.0000000
HELP	f07q13 Less help than expected	313	1.6741214	0.4694527	1.0000000	2.0000000
HELP_NO	f07q13a How many give less help	101	2.2475248	1.6876370	1.0000000	10.0000000
WORSE	f07q14 Others make things worse	313	1.5718850	0.4955979	1.0000000	2.0000000
WORSE_NO	f07q14a How many make things worse	130	1.7923077	1.3100456	1.0000000	10.0000000
PROB	f07q15 Others make problems	313	1.9137380	0.2812001	1.0000000	2.0000000
PROB_NO	f07q15a How many make problems	27	1.6666667	1.0741723	1.0000000	6.0000000
ORGREL	f07q16 Belong to organized religion	313	1.4249201	0.4951224	1.0000000	2.0000000
RELIG	f07q17 Attendance at religious services	313	2.4792332	1.2456527	1.0000000	5.0000000
RATEEM	f07q18 Rate mental/emotional health	313	2.0223642	0.8749422	1.0000000	5.0000000
SATISEM	f07q19 Satisfied with mental health	313	1.7699681	0.9361639	1.0000000	5.0000000
RATEPHY	f07q20 Rate physical health	313	2.1469649	0.8496598	1.0000000	4.0000000
SATISPHY	f07q21 Satisfied with physical health	313	1.9648562	0.9651183	1.0000000	5.0000000
OVHLTH	f07q22 Overall health	313	2.0031949	0.7905629	1.0000000	4.0000000
SATHLTH	f07q23 Satisfied with overall health	313	1.7955272	0.8260846	1.0000000	4.0000000
KNOWRAYN	f07q24 Prior knowledge of Raynauds	312	1.2179487	0.4135156	1.0000000	2.0000000
ANGRY	f07q25a Felt angry	310	1.1516129	0.4474820	1.0000000	3.0000000
NERV	f07q25b Felt nervous	311	1.4405145	0.6735786	1.0000000	4.0000000
DEPRESS	f07q25c Felt depressed	310	1.2064516	0.5238243	1.0000000	4.0000000

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
BITTER	f07q25d Felt bitter	310	1.1	0.3	1.0	3.0
SCARED	f07q25e Felt scared	311	1.4	0.7	1.0	4.0
SAD	f07q25f Felt sad	310	1.2	0.5	1.0	3.0
RESENT	f07q25g Felt resentful	310	1.1	0.4	1.0	3.0
WORRIED	f07q25h Felt worried	312	1.7	0.8	1.0	4.0
DOWN	f07q25i Felt down	310	1.3	0.6	1.0	4.0
VIGACT	f07q26a Vigorous activities	313	3.2	0.7	1.0	4.0
MDDACT	f07q26b Moderate activities	313	2.9	0.5	1.0	4.0
GROCERY	f07q26c Carrying/lifting groceries	313	2.8	0.5	1.0	4.0
CLMBSEV	f07q26d Climbing sev. flights of stairs	313	3.0	0.4	1.0	4.0
CLMBONE	f07q26e Climb one flight of stairs	313	3.0	0.2	1.0	4.0
LIMBEND	f07q26f Bending, kneeling, stooping	313	2.9	0.3	1.0	3.0
WALK1M	f07q26g Walking more than 1 mile	313	3.0	0.6	1.0	4.0
WALKSEV	f07q26h Walking several blocks	313	3.0	0.5	1.0	4.0
WALK1BLK	f07q26i Walking one block	313	3.0	0.3	1.0	4.0
LIMBATH	f07q26j Bathing and dressing	313	2.9	0.3	1.0	3.0
OUTDOORS	f07q27a Outdoors in cold weather	313	2.2	0.7	1.0	3.0
GRIP	f07q27b1 Gripping steering wheel	313	2.3	0.6	1.0	4.0
SHIFT	f07q27b2 Shifting car	311	3.1	0.8	1.0	4.0
SHOP	f07q27c Shopping for frozen food	311	2.4	0.8	1.0	4.0
UTENSIL	f07q27d1 Using utensils	313	2.9	0.5	1.0	4.0
APPL	f07q27d2 Using kitchen appliances	313	3.0	0.4	1.0	4.0
WASHVEG	f07q27d3 Washing vegetables in cold water	313	2.4	0.9	1.0	4.0
FREEZER	f07q27d4 Removing food from freezer	313	2.3	0.8	1.0	4.0
WASHCLTH	f07q27e1 Using washer or dryer	313	3.0	0.4	2.0	4.0
HANGCLTH	f07q27e2 Folding or hanging clothes	313	3.0	0.4	1.0	4.0
HLDFOOD	f07q27f1 Holding cold/frozen food	313	2.3	0.7	1.0	4.0
SWFOOD	f07q27f2 Swallowing cold/frozen food	313	2.9	0.5	1.0	4.0
HLDGLASS	f07q27g1 Holding a cold glass	313	2.2	0.7	1.0	4.0
SWLIQ	f07q27g2 Swallowing cold liquids	313	2.9	0.4	1.0	4.0
SWIM	f07q27h1 Swimming in cool water	313	3.4	1.0	1.0	4.0
OUTACT	f07q27h2 Outdoor act. in cold weather	312	2.2	1.0	1.0	4.0
EQUIP	f07q27h3 Handling sports equipment	313	2.9	0.9	1.0	4.0
BATHE	f07q27i Bathing	313	2.9	0.3	1.0	4.0
ZIPPER	f07q27j 1 Fastening zippers/buttons	313	2.7	0.5	1.0	4.0
SHOELACE	f07q27j 2 Tying shoelaces	313	2.8	0.5	1.0	4.0
GLOVES	f07q27j 3 Putting on gloves	313	2.8	0.4	1.0	4.0
USECOMP	f07q27k Using typewriter/computer	313	2.9	0.7	1.0	4.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
USEPEN	f07q27l Using pen/pencil	313	2.6	0.6	1.0	3.0
USETOOLS	f07q27m Using tools	313	3.1	0.7	1.0	4.0
USEMACH	f07q27n Using machinery	313	3.0	0.5	1.0	4.0
SOCACT	f07q27o Social activities	313	2.8	0.5	1.0	4.0
SEXACT	f07q27p Sexual activity	313	3.0	0.4	1.0	4.0
AIRCOND	f07q27q Air-conditioned rooms	313	2.5	0.7	1.0	4.0
DEALSTR	f07q27r Dealing with stress	313	2.9	0.5	1.0	4.0
RATE_RAY	f07q28 Rate Raynauds condition	311	3.3	0.9	1.0	5.0
RAYPROBA	f07q29a Cut down time at work	313	1.8	0.4	1.0	2.0
RAYPROBB	f07q29b Accomplished less	313	1.7	0.4	1.0	2.0
RAYPROBC	f07q29c Limited in kind of work	313	1.7	0.5	1.0	2.0
RAYPROBD	f07q29d Difficultly performing work	313	1.7	0.5	1.0	2.0
EMPROBA	f07q30a Cut down time at work	312	1.8	0.4	1.0	2.0
EMPROBB	f07q30b Accomplished less	312	1.8	0.4	1.0	2.0
EMPROBC	f07q30c Not as careful as usual	312	1.8	0.4	1.0	2.0
INTRFER1	f07q31 Health interfered	312	1.5	0.7	1.0	4.0
INTRFER2	f07q32 Emotional problems interfered	312	1.3	0.7	1.0	5.0
INTRFER3	f07q33 Physical health interfered	312	4.5	0.9	1.0	5.0
INTRFER4	f07q34 Emotional problems interfered	312	4.7	0.8	1.0	5.0
RAYNPAIN	f07q35 Pain from Raynauds	312	2.7	0.9	1.0	4.0
OTHRPAIN	f07q36 Other pain	312	2.4	0.9	1.0	4.0
INTRAYPN	f07q37 Intensity of pain from Raynauds	312	2.2	0.8	1.0	4.0
INTOTHPN	f07q38 Intensity of other pain	312	2.2	0.8	1.0	4.0
INTRAYWK	f07q39 Raynauds pain interfered	312	1.6	0.8	1.0	5.0
INTOTHWK	f07q40 Other pain interfered	312	1.6	0.8	1.0	5.0
PEP4WK	f07q41a Felt full of pep	312	3.0	1.1	1.0	6.0
NERV4WK	f07q41b Been nervous	312	4.9	1.1	1.0	6.0
DUMP4WK	f07q41c Down in the dumps	312	5.7	0.7	2.0	6.0
TENSE4WK	f07q41d Felt tense	312	4.7	1.1	1.0	6.0
ANGRY4WK	f07q41e Felt angry	312	5.1	0.9	1.0	6.0
CALM4WK	f07q41f Felt calm and peaceful	311	3.0	1.2	1.0	6.0
ENRGY4WK	f07q41g Had a lot of energy	312	3.0	1.2	1.0	6.0
RES4WK	f07q41h Felt resentful	312	5.4	0.9	1.0	6.0
BLUE4WK	f07q41i Felt down-hearted and blue	312	5.4	0.9	1.0	6.0
WORN4WK	f07q41j Felt worn out	312	4.5	1.1	1.0	6.0
IRR4WK	f07q41k Felt irritable	312	4.9	0.9	1.0	6.0
WORR4WK	f07q41l Felt worried	311	4.8	1.0	1.0	6.0
HAPPY4WK	f07q41m Been a happy person	312	2.6	1.0	1.0	6.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
TIRED4WK	f07q41n Felt tired	312	4.3	1.0	1.0	6.0
BITT4WK	f07q41o Felt bitter	311	5.7	0.7	1.0	6.0
ELGLOVE	f07q42a Used electric gloves	313	2.0	0.1	1.0	2.0
ELSOCK	f07q42b Used electric socks	312	2.0	0.1	1.0	2.0
INSGLOVE	f07q42c Used insulated gloves	313	1.4	0.5	1.0	2.0
INSSOCK	f07q42d Used insulated socks	310	1.7	0.5	1.0	2.0
THERMUND	f07q42e Used thermal underwear	311	1.7	0.5	1.0	2.0
EXSWEAT	f07q42f Used extra sweaters	311	1.4	0.5	1.0	2.0
HANDWARM	f07q42g Used chemical hand warmers	313	1.9	0.3	1.0	2.0
CLTHOTHR	f07q42h Used other means	311	1.8	0.4	1.0	2.0
HEATUP	f07q43a Turn up the heat	313	1.3	0.5	1.0	2.0
HEATER	f07q43b Use a space heater	312	1.7	0.4	1.0	2.0
HEATPAD	f07q43c Use a heating pad	311	1.9	0.3	1.0	2.0
MVWKSP	f07q43d Move work space	311	1.7	0.5	1.0	2.0
SWCOVER	f07q43e Get a steering wheel cover	312	2.0	0.2	1.0	2.0
WARMWAT	f07q43f Put hands under warm water	313	1.2	0.4	1.0	2.0
HEATVENT	f07q43g Put hands over heating vent	313	1.2	0.4	1.0	2.0
WARMLIQ	f07q43h Drink warm liquid	313	1.4	0.5	1.0	2.0
ALCOHOL	f07q43i Drink alcohol	311	1.9	0.3	1.0	2.0
RUBHAND	f07q43j Rub hands together	312	1.1	0.3	1.0	2.0
ARMPITS	f07q43k Put hands in armpits	313	1.4	0.5	1.0	2.0
WHIRL	f07q43l Whirl arms around	311	1.7	0.5	1.0	2.0
PRVOTHR1	f07q43m Other action	311	1.6	0.5	1.0	2.0
PRVOTHR2	f07q43n Other action	311	1.9	0.3	1.0	2.0
OFTENA	f07q44a Feel rested from sleep	313	3.4	0.8	1.0	4.0
OFTENB	f07q44b Difficultly falling asleep	313	2.2	0.9	1.0	4.0
OFTENC	f07q44c Awaken earlier than usual	313	2.4	0.9	1.0	4.0
OFTEND	f07q44d Difficultly staying awake	313	1.9	0.8	1.0	4.0
SATISSEX	f07q45 Current sexual relations	313	3.4	1.6	1.0	5.0
FREQSEX	f07q46 Satisfied with frequency of sex	313	2.9	1.1	1.0	4.0
CONF1	f07q47 Treatment with biofeedback	313	2.7	0.9	1.0	4.0
CONF2	f07q48 Treatment with nifedipine	311	2.7	0.7	1.0	4.0
CONF3	f07q49 Can do biofeedback	313	3.2	0.9	1.0	4.0
CONF4	f07q50 Can do nifedipine	311	3.2	0.8	1.0	4.0
SOCACT2	f07q51 Social Activities	313	1.3	0.7	1.0	5.0
MEMORY	f07q52 Memory and Concentration	313	1.5	0.9	1.0	4.0
SPATIAL	f07q53 Spatial Orientation	313	1.1	0.4	1.0	5.0
MODS	f07q54 Moods and emotions	313	1.3	0.7	1.0	5.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
SLEEP	f07q55 Sleep patterns	313	1.9	1.1	1.0	5.0
REACT1	f07q56 Grow as a person	312	2.3	1.2	1.0	4.0
REACT2	f07q57 Turn to work	313	1.9	1.0	1.0	4.0
REACT3	f07q58 Get upset and let emotions out	313	1.2	0.4	1.0	3.0
REACT4	f07q59 Try to get advice	313	1.8	0.8	1.0	4.0
REACT5	f07q60 Try to do something about it	313	2.2	0.9	1.0	4.0
REACT6	f07q61 Say "This isn't happening"	313	1.1	0.3	1.0	3.0
REACT7	f07q62 Put trust in God	313	2.3	1.2	1.0	4.0
REACT8	f07q63 Laugh about condition	313	1.9	0.9	1.0	4.0
REACT9	f07q64 Stop trying to deal with it	313	1.2	0.5	1.0	4.0
REACT10	f07q65 Keep from acting too quickly	313	1.3	0.6	1.0	4.0
REACT11	f07q66 Discuss feelings with someone	313	2.1	0.8	1.0	4.0
REACT12	f07q67 Use alcohol and drugs	313	1.1	0.3	1.0	3.0
REACT13	f07q68 Get used to the idea	313	3.4	0.8	1.0	4.0
REACT14	f07q69 Talk to others to learn more	313	2.0	0.8	1.0	4.0
REACT15	f07q70 Keep from getting distracted	309	1.9	0.9	1.0	4.0
REACT16	f07q71 Daydream about other things	313	1.9	0.9	1.0	4.0
REACT17	f07q72 Get upset	313	1.4	0.6	1.0	4.0
REACT18	f07q73 Seek God's help	313	1.8	1.1	1.0	4.0
REACT19	f07q74 Make a plan of action	313	2.1	1.0	1.0	4.0
REACT20	f07q75 Make jokes about condition	313	1.8	0.8	1.0	4.0
REACT21	f07q76 Accept it	313	2.6	1.0	1.0	4.0
REACT22	f07q77 Hold off until situation permits	312	1.9	0.8	1.0	4.0
REACT23	f07q78 Try to get emotional support	313	1.7	0.8	1.0	4.0
REACT24	f07q79 Give up trying to cope	313	1.2	0.5	1.0	4.0
REACT25	f07q80 Action to minimize problems	313	2.7	0.9	1.0	4.0
REACT26	f07q81 Lose self in drugs/alcohol	313	1.1	0.2	1.0	3.0
REACT27	f07q82 Refuse to believe	313	1.1	0.3	1.0	4.0
REACT28	f07q83 Try to let out feelings	313	1.9	0.8	1.0	4.0
REACT29	f07q84 Try to make it more positive	312	2.2	1.0	1.0	4.0
REACT30	f07q85 Talk to one who can do something	312	1.9	0.8	1.0	4.0
REACT31	f07q86 Sleep more than usual	313	1.3	0.5	1.0	4.0
REACT32	f07q87 Try to come up with strategy	312	2.0	0.8	1.0	4.0
REACT33	f07q88 Focus on condition	312	1.4	0.6	1.0	4.0
REACT34	f07q89 Sympathy from someone	312	1.9	0.8	1.0	4.0
REACT35	f07q90 Drink or take drugs	312	1.0	0.2	1.0	4.0
REACT36	f07q91 Kid around	312	1.9	0.8	1.0	4.0
REACT37	f07q92 Give up attempt to overcome	312	1.2	0.5	1.0	4.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
REACT38	f07q93 Look for something good	312	1.8	0.9	1.0	4.0
REACT39	f07q94 Think about how to best handle	312	2.4	0.9	1.0	4.0
REACT40	f07q95 Pretend it hasn't happened	312	1.1	0.4	1.0	4.0
REACT41	f07q96 Don't act too soon	307	1.8	0.9	1.0	4.0
REACT42	f07q97 Prevent interference	310	2.1	1.0	1.0	4.0
REACT43	f07q98 Go to movies or watch TV	311	1.3	0.6	1.0	4.0
REACT44	f07q99 Accept the reality	312	3.6	0.7	1.0	4.0
REACT45	f07q100 Ask others what they did	310	1.9	0.9	1.0	4.0
REACT46	f07q101 Feel and express distress	312	1.2	0.5	1.0	4.0
REACT47	f07q102 Take direct action	312	2.6	1.0	1.0	4.0
REACT48	f07q103 Find comfort in religion	312	1.8	1.0	1.0	4.0
REACT49	f07q104 Wait until the right time	312	1.5	0.7	1.0	4.0
REACT50	f07q105 Make fun of condition	312	1.7	0.7	1.0	4.0
REACT51	f07q106 Reduce time	309	1.9	1.0	1.0	4.0
REACT52	f07q107 Talk to someone about feelings	313	2.0	0.7	1.0	4.0
REACT53	f07q108 Use alcohol or drugs	313	1.0	0.2	1.0	4.0
REACT54	f07q109 Learn to live with	313	3.6	0.7	1.0	4.0
REACT55	f07q110 Put aside other things	313	1.3	0.6	1.0	4.0
REACT56	f07q111 Think hard about steps	313	1.8	0.8	1.0	4.0
REACT57	f07q112 Act as if it doesn't exist	313	1.9	1.1	1.0	4.0
REACT58	f07q113 Do it one step at a time	313	3.2	0.8	1.0	4.0
REACT59	f07q114 Try to learn something	313	2.6	1.0	1.0	4.0
REACT60	f07q115 Pray more than usual	313	1.4	0.7	1.0	4.0
FEEL1	f07q116 Upset at unexpected	313	2.5	0.8	1.0	5.0
FEEL2	f07q117 Unable to control life	313	2.2	1.0	1.0	5.0
FEEL3	f07q118 Felt nervous and stressed	313	2.7	1.0	1.0	5.0
FEEL4	f07q119 Successful with problems	313	4.3	0.8	2.0	5.0
FEEL5	f07q120 Coping with changes	313	4.1	0.9	1.0	5.0
FEEL6	f07q121 Felt confident to handle prob.	313	4.3	0.8	1.0	5.0
FEEL7	f07q122 Things going your way	313	3.8	0.9	1.0	5.0
FEEL8	f07q123 Could not cope with all things	313	2.2	1.0	1.0	5.0
FEEL9	f07q124 Able to control irritations	311	3.9	0.8	1.0	5.0
FEEL10	f07q125 Felt on top of things	311	3.9	0.9	1.0	5.0
FEEL11	f07q126 Anger at uncontrolled things	311	2.5	0.9	1.0	5.0
FEEL12	f07q127 Think about things to accomplish	311	3.9	0.9	1.0	5.0
FEEL13	f07q128 Control time	311	3.8	0.9	2.0	5.0
FEEL14	f07q129 Difficulties piling too high	311	2.0	1.0	1.0	5.0
YOU1	f07q130 Feel lonely	311	2.0	1.0	1.0	5.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
YOU2	f07q131 Try to figure self out	311	2.7	1.3	1.0	5.0
YOU3	f07q132 Usually expect the best	311	3.4	1.0	1.0	5.0
YOU4	f07q133 Quick to sense hunger	311	3.5	1.0	1.0	5.0
YOU5	f07q134 Often feel fed up	310	2.2	1.0	1.0	5.0
YOU6	f07q135 Gotten important things in life	311	3.8	1.0	1.0	5.0
YOU7	f07q136 Think about self a lot	311	2.8	1.0	1.0	5.0
YOU8	f07q137 If it can go wrong it will	311	2.1	1.0	1.0	5.0
YOU9	f07q138 Irritable	311	2.0	1.0	1.0	5.0
YOU10	f07q139 Positive attitude about self	312	4.0	0.7	2.0	5.0
YOU11	f07q140 Pay attention to inner feelings	311	4.0	0.7	1.0	5.0
YOU12	f07q141 Aware of changes in body temp.	312	3.9	1.0	1.0	5.0
YOU13	f07q142 Always look on bright side	311	3.7	0.8	1.0	5.0
YOU14	f07q143 Feel miserable for no reason	311	2.3	1.1	1.0	5.0
YOU15	f07q144 Often daydream about self	312	2.3	1.0	1.0	5.0
YOU16	f07q145 Person of worth	312	4.3	0.7	1.0	5.0
YOU17	f07q146 Would change almost nothing	313	3.2	1.2	1.0	5.0
YOU18	f07q147 Mood goes up and down	313	2.5	1.1	1.0	5.0
YOU19	f07q148 Optimistic about future	312	3.9	0.8	1.0	5.0
YOU20	f07q149 Never look at self hard	313	2.2	0.8	1.0	5.0
YOU21	f07q150 Can feel heart beating	313	2.7	1.1	1.0	5.0
YOU22	f07q151 Troubled by guilt	312	2.4	1.0	1.0	5.0
YOU23	f07q152 Satisfied with life	312	3.8	0.9	1.0	5.0
YOU24	f07q153 Don't expect things	312	2.0	0.8	1.0	4.0
YOU25	f07q154 Think about reasons	313	2.8	1.0	1.0	5.0
YOU26	f07q155 Nervous person	313	2.2	1.1	1.0	5.0
YOU27	f07q156 Nothing to be proud of	312	1.7	1.0	1.0	5.0
YOU28	f07q157 Things never work out	313	1.9	0.8	1.0	5.0
YOU29	f07q158 Step back and examine self	313	3.2	1.0	1.0	5.0
YOU30	f07q159 High-strung	312	2.2	1.1	1.0	5.0
YOU31	f07q160 Knows when mouth/throat is dry	313	3.5	1.0	1.0	5.0
YOU32	f07q161 Clouds have silver lining	313	3.6	0.9	1.0	5.0
YOU33	f07q162 Life conditions are excellent	313	3.5	0.9	1.0	5.0
YOU34	f07q163 Quickly notice change in mood	313	3.6	0.8	1.0	5.0
YOU35	f07q164 Life is very dull	313	2.0	0.9	1.0	5.0
YOU36	f07q165 Don't count on good things	312	2.0	0.9	1.0	5.0
YOU37	f07q166 No good at all	313	1.7	0.9	1.0	5.0
YOU38	f07q167 Knows why own mind works	313	3.9	0.7	1.0	5.0
YOU39	f07q168 Life is close to ideal	313	3.3	0.9	1.0	5.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
YOU40	f07q169 Easily hurt	313	3.2	1.0	1.0	5.0
YOU41	f07q170 Sensitive to bodily tensions	313	3.3	0.9	1.0	5.0
YOU42	f07q171 More good than bad to happen	313	4.0	0.7	1.0	5.0
LOFA	f07q172a Ladder at present time	313	7.4	1.4	3.0	10.0
LOFB	f07q172b Ladder one year ago	313	6.7	1.8	1.0	10.0
LOFC	f07q172c Ladder one year from now	313	8.4	1.3	3.0	10.0
USUAL1	f07q173 Grow as a person	313	2.8	0.8	1.0	4.0
USUAL2	f07q174 Turn to work	313	2.6	0.7	1.0	4.0
USUAL3	f07q175 Get upset and let emotions out	313	2.1	0.6	1.0	4.0
USUAL4	f07q176 Try to get advice	313	2.4	0.7	1.0	4.0
USUAL5	f07q177 Try to do something about it	313	2.9	0.7	1.0	4.0
USUAL6	f07q178 Say "This isn't real"	313	1.4	0.6	1.0	4.0
USUAL7	f07q179 Put trust in God	313	2.3	1.2	1.0	4.0
USUAL8	f07q180 Laugh about condition	313	2.0	0.7	1.0	4.0
USUAL9	f07q181 Stop trying to deal with it	313	1.3	0.5	1.0	4.0
USUAL10	f07q182 Keep from acting too quickly	313	2.2	0.7	1.0	4.0
USUAL11	f07q183 Discuss feelings with someone	313	2.5	0.7	1.0	4.0
USUAL12	f07q184 Use alcohol and drugs	313	1.2	0.4	1.0	4.0
USUAL13	f07q185 Get used to the idea	313	2.6	0.8	1.0	4.0
USUAL14	f07q186 Talk to others to learn more	313	2.6	0.7	1.0	4.0
USUAL15	f07q187 Keep from getting distracted	312	2.1	0.6	1.0	4.0
USUAL16	f07q188 Daydream about other things	313	1.8	0.7	1.0	4.0
USUAL17	f07q189 Get upset	313	2.2	0.7	1.0	4.0
USUAL18	f07q190 Seek God's help	313	2.1	1.1	1.0	4.0
USUAL19	f07q191 Make a plan of action	312	2.8	0.8	1.0	4.0
USUAL20	f07q192 Make jokes about condition	313	2.0	0.7	1.0	4.0
USUAL21	f07q193 Accept it	312	2.2	0.9	1.0	4.0
USUAL22	f07q194 Hold off until situation permits	313	2.2	0.6	1.0	4.0
USUAL23	f07q195 Try to get emotional support	313	2.5	0.8	1.0	4.0
USUAL24	f07q196 Give up trying reach goal	312	1.3	0.5	1.0	4.0
USUAL25	f07q197 Action to get rid of problem	313	2.7	0.8	1.0	4.0
USUAL26	f07q198 Lose self in drugs/alcohol	313	1.1	0.3	1.0	3.0
USUAL27	f07q199 Refuse to believe	313	1.2	0.5	1.0	4.0
USUAL28	f07q200 Try to let out feelings	313	2.3	0.6	1.0	4.0
USUAL29	f07q201 Try to make it more positive	313	2.6	0.8	1.0	4.0
USUAL30	f07q202 Talk to one who can do something	312	2.4	0.7	1.0	4.0
USUAL31	f07q203 Sleep more than usual	313	1.5	0.6	1.0	4.0
USUAL32	f07q204 Try to come up with strategy	313	2.8	0.8	1.0	4.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
USUAL33	f07q205 Focus on problem	313	2.2	0.7	1.0	4.0
USUAL34	f07q206 Sympathy from someone	313	2.3	0.8	1.0	4.0
USUAL35	f07q207 Drink or take drugs	313	1.1	0.3	1.0	3.0
USUAL36	f07q208 Kid around	313	2.0	0.7	1.0	4.0
USUAL37	f07q209 Give up attempt	313	1.4	0.5	1.0	3.0
USUAL38	f07q210 Look for something good	313	2.7	0.8	1.0	4.0
USUAL39	f07q211 Think about how to best handle	313	3.1	0.7	2.0	4.0
USUAL40	f07q212 Pretend it hasn't happened	313	1.2	0.4	1.0	4.0
USUAL41	f07q213 Don't act too soon	313	2.3	0.7	1.0	4.0
USUAL42	f07q214 Prevent interference	312	2.3	0.7	1.0	4.0
USUAL43	f07q215 Go to movies or watch TV	313	1.7	0.6	1.0	3.0
USUAL44	f07q216 Accept the reality	313	3.1	0.8	1.0	4.0
USUAL45	f07q217 Ask others what they did	313	2.4	0.7	1.0	4.0
USUAL46	f07q218 Feel and express distress	313	1.8	0.7	1.0	4.0
USUAL47	f07q219 Take direct action	312	2.6	0.8	1.0	4.0
USUAL48	f07q220 Find comfort in religion	313	2.0	1.0	1.0	4.0
USUAL49	f07q221 Wait until the right time	313	2.2	0.6	1.0	4.0
USUAL50	f07q222 Make fun of situation	312	1.8	0.7	1.0	4.0
USUAL51	f07q223 Reduce time	311	1.7	0.6	1.0	4.0
USUAL52	f07q224 Talk to someone about feelings	313	2.5	0.7	1.0	4.0
USUAL53	f07q225 Use alcohol or drugs	313	1.1	0.3	1.0	3.0
USUAL54	f07q226 Learn to live with	313	2.7	0.8	1.0	4.0
USUAL55	f07q227 Put aside other things	313	1.9	0.7	1.0	4.0
USUAL56	f07q228 Think hard about steps	313	2.7	0.8	1.0	4.0
USUAL57	f07q229 Act as if it hasn't happened	313	1.3	0.6	1.0	4.0
USUAL58	f07q230 Do it one step at a time	313	3.1	0.7	1.0	4.0
USUAL59	f07q231 Try to learn something	313	3.1	0.8	1.0	4.0
USUAL60	f07q232 Pray more than usual	312	1.8	0.9	1.0	4.0
WEIGHT	f07q233 Weight change	313	1.4	0.8	1.0	4.0
BACKPAIN	f07q234 Back pain	313	1.8	0.8	1.0	4.0
CONST	f07q235 Constipation	313	1.3	0.6	1.0	4.0
DIZZY	f07q236 Dizziness	313	1.2	0.5	1.0	3.0
DIARRHEA	f07q237 Diarrhea	313	1.2	0.4	1.0	3.0
FAINT	f07q238 Faintness	313	1.1	0.4	1.0	3.0
FATIGUE	f07q239 Fatigue	313	1.9	0.8	1.0	4.0
HEAD	f07q240 Headache	313	1.8	0.8	1.0	4.0
MIGRAINE	f07q241 Migraine headache	313	1.2	0.6	1.0	4.0
NAUSEA	f07q242 Nausea	313	1.2	0.4	1.0	4.0

Variable	Label	N	Mean	Std Dev	Minimum	Maximum
INDIGEST	f07q243 Acid stomach or indigestion	313	1.5	0.7	1.0	4.0
CRAMPS	f07q244 Stomach pain (e.g. cramps)	313	1.3	0.5	1.0	4.0
SPELLS	f07q245 Hot or cold spells	313	1.6	0.8	1.0	4.0
VOMIT	f07q246 Vomiting	313	1.0	0.2	1.0	3.0
TREMBLE	f07q247 Hands trembling	313	1.2	0.4	1.0	4.0
FLUSHED	f07q248 Flushing	313	1.4	0.6	1.0	4.0
RACEHT	f07q249 Heart pounding or racing	313	1.3	0.5	1.0	4.0
APPETITE	f07q250 Poor appetite	312	1.2	0.5	1.0	4.0
BREATH	f07q251 Shortness of breath	313	1.2	0.5	1.0	4.0
NUMB	f07q252 Numbness or tingling	312	2.0	0.9	1.0	4.0
WEAK	f07q253 Weakness	312	1.3	0.5	1.0	4.0
CHSTPAIN	f07q254 Pains in heart or chest	313	1.1	0.3	1.0	3.0
LOWENER	f07q255 Feeling low in energy	312	1.9	0.7	1.0	4.0
STUFFY	f07q256 Stuffy head or nose	313	1.9	0.9	1.0	4.0
VISION	f07q257 Blurred vision	312	1.2	0.5	1.0	4.0
MUSCSORE	f07q258 Muscle tension or soreness	312	1.8	0.7	1.0	4.0
MUSCCRMP	f07q259 Muscle cramps	313	1.4	0.6	1.0	4.0
MENSTRAL	f07q260 Menstrual cramps	312	1.4	0.6	1.0	4.0
PALP	f07q261 Palpitations	313	1.2	0.5	1.0	4.0
BRUISES	f07q262 Bruises	313	1.3	0.6	1.0	4.0
NOSEBLD	f07q263 Nosebleed	313	1.1	0.3	1.0	3.0
LGHTHEAD	f07q264 Light headedness	313	1.2	0.5	1.0	4.0
WHEEZE	f07q265 Wheezing	313	1.1	0.3	1.0	3.0
COUGH	f07q266 Cough	313	1.4	0.6	1.0	4.0
YSTINF	f07q267 Yeast infection	312	1.1	0.4	1.0	4.0
BLDINF	f07q268 Bladder infection	313	1.0	0.2	1.0	3.0
TEETH	f07q269 Tooth/gum problems	313	1.3	0.5	1.0	4.0
EARACHE	f07q270 Earaches	312	1.1	0.4	1.0	4.0
SWELL	f07q271 Swelling in hands, feet, arms, legs	313	1.4	0.7	1.0	4.0
EXPECT1	f07q272(r0) % days practicing biofdbk	101	85.7	24.0	5.0	100.0
EXPECT2	f07q273(r0) Effectiveness of biofeedback	103	2.9	0.9	1.0	4.0
EXPECT3	f07q274(r0) % days taking medication	97	97.0	14.3	0.0	100.0
EXPECT4	f07q275(r0) Effectiveness of medication	98	3.0	0.7	1.0	4.0
PREFER	f07q272(r1) Treatment preference	200	2.7	1.3	1.0	5.0
BIO_SENS	f07q273(r1) Biofeedback makes sense	200	3.1	1.2	1.0	5.0
DRUG_SEN	f07q274(r1) Drug makes sense	200	3.1	1.0	1.0	5.0
NEWID	Patient ID	313	157.0	90.5	1.0	313.0

f07q24a How long ago

KNOWRMK	Frequency	Percent	Cumulative Frequency	Cumulative Percent
1	244	100.0	244	100.0

Frequency Missing = 69