Prevalence of Selected Chronic Conditions United States, 1979–81

Estimates of the prevalence of selected chronic conditions are presented by biological system involved, sex, age, and race. The percent of conditions causing limitation of activity, the percent of conditions for which a physician was consulted, and the number of restrictedactivity days and bed-disability days resulting from the conditions are also included.

Data From the National Health Survey Series 10, No. 155

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Cooperation of the U.S. Bureau of the Census

Under the legislation establishing the National Health Interview Survey, the Public Health Service is authorized to use, insofar as possible, the services or facilities of other Federal, State, or private agencies.

In accordance with specifications established by the Division of Health Interview Statistics, the Bureau of the Census, under a contractual arrangement, participated in planning the survey and collecting the data.

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Symbols

- Data not available - - -
- Category not applicable . . .
- -Quantity zero
- 0.0 Quantity more than zero but less than 0.05
- Ζ Quantity more than zero but less than 500 where numbers are rounded to thousands
- * Figure does not meet standard of reliability or precision (more than 30percent relative standard error)
- Figure suppressed to comply with # confidentiality requirements

Prevalence of Selected Chronic Conditions

by John Gary Collins, M.B.A., Division of Health Interview Statistics

Introduction

National estimates of the prevalence of selected reported chronic conditions in the civilian noninstitutionalized population of the United States are presented in this report. These estimates are based on data collected by the National Center for Health Statistics (NCHS) by means of the National Health Interview Survey in 1979, 1980, and 1981. Data on the prevalence of chronic conditions reported in household interviews are shown in terms of number and rate per 1,000 persons cross-tabulated by sex and age, and by race.

In addition, data are provided on the percent of chronic conditions causing limitation of activity and the percent for which a physician was consulted. The number of restrictedactivity days and bed-disability days caused by selected chronic conditions and the associated days per condition are shown by sex and by race. Conditions with the highest prevalence, those causing the most restricted activity and bed disability, and those causing the highest percent of activity limitation are presented in rank order for the 10 highest in each category.

Data are presented on six different categories of chronic conditions:

- Circulatory conditions.
- Respiratory conditions.
- Digestive conditions.
- Impairments and conditions of the nervous system and sense organs.
- Conditions of the skin and subcutaneous tissue and other related conditions, and conditions of the musculoskeletal system and connective tissue.
- Endocrine, nutritional, and metabolic diseases and immunity disorders; diseases of the blood and blood-forming organs; and conditions of the genitourinary system.

The most recent NCHS report that included National Health Interview Survey data on chronic disease prevalence was *Vital and Health Statistics*, Series 10, No. 150,¹ Current Estimates From the National Health Interview Survey, United States, 1982. Other recent publications providing National Health Interview Survey data on the prevalence of chronic conditions are mentioned in the section on related data.

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Highlights

Highlights of the data contained in this report for the 3-year period 1979-81 are summarized in the following statements.

- Chronic sinusitus was the selected chronic condition most frequently reported in the interviews, with an annual average prevalence of more than 30 million conditions, or 137.7 per every 1,000 persons in the civilian noninstitutionalized population.
- Arthritis and hypertensive disease were the second and third most prevalent chronic conditions reported, with annual averages of 27 million and 25 million conditions, respectively.
- Among black persons, hypertensive disease was the most prevalent condition reported, with a rate of 136.8 per 1,000 persons.
- Among persons under 17 years of age, hay fever, with a rate of 54.9 per 1,000 persons, was the most prevalent chronic condition reported.
- Arthritis was the most frequently reported chronic condition among persons 45-64 years of age and those 65 years of age and over, with rates of 255.8 and 458.4 per 1,000 persons, respectively.

- Hearing impairments ranked high among males, with a reported rate of 91.0 per 1,000.
- The selected chronic conditions reported to cause the most restricted-activity days were arthritis (534 million days per year), deformities or orthopedic impairments (469 million days), and heart conditions (444 million days).
- Paralysis, complete or partial, of extremities or parts of extremities caused the highest number of restricted-activity days per condition reported, 56.2 days per year. Cerebrovascular disease ranked second, with 44.7 days per condition, and emphysema was third, with 42.5 days per condition.
- Multiple sclerosis was the selected chronic condition most likely to cause limitation of activity; 77.0 percent of the reported multiple sclerosis conditions caused limitation in major and outside activities. Paralysis, complete or partial, of extremities or parts of extremities caused limitation in a reported 65.7 percent of the people affected. Emphysema caused limitation of activity in 48.2 percent of those with that condition.

Source and limitations of the data

Information from the National Interview Survey (NHIS) of the National Center for Health Statistics is based on data collected in a continuing nationwide survey by household interview. Each week a probability sample of households in the civilian noninstitutionalized population of the United States is interviewed by personnel of the U.S. Bureau of the Census. Information is obtained about the health and other characteristics of the people in each household.

One of the strengths of NHIS is the ability to combine data over multiple years. This increases stability of the estimates because augmenting the sample size leads to smaller sampling errors. Combining data over time is possible because of the sampling design of NHIS and its use of standard questions over several years. Combining data is particularly desirable when making estimates for relatively rare events or population subgroups—in this case, chronic conditions. In addition, in NHIS, each individual condition group constitutes only a one-sixth sample in a given year. Therefore, data for this report are based on information obtained during 1979, 1980, and 1981, and annual averages for these 3 years are presented.

In 1980, because of budgetary limitations, 4 weeks of data collection were deleted from the fourth-quarter sample. The data derived from the remaining weeks were differentially weighted to produce a full quarterly estimate. During 1979 and 1981 there were 52 weeks of data collection.

The sample for the 3 years combined was composed of about 122,000 eligible occupied households, of which about 118,000 were interviewed. These 118,000 households contained about 321,000 persons living at the time of interview. The total noninterview rate was 3.3 percent, of which 1.9 percent was caused by refusal and the remainder was due primarily to failure to find an eligible respondent at home after repeated calls.

The regular NHIS respondent rules are that a person who is either aged 19 years or over or has ever been married is encouraged to respond for himself or herself and may respond for any other related household member. A person aged 17 or 18 years who has never been married may respond for self only. A related household member must respond for a never-married person under age 17. An unrelated person living in a household must be interviewed individually using a separate questionnaire.

Descriptions of the survey design, the methods used in estimation, and general qualification of the data obtained from surveys are presented in appendix I. Because the estimates shown in this report are based on a sample of the population rather than on the entire population, they are subject to sampling error. Therefore, particular attention should be paid to the section in appendix I entitled "Reliability of estimates." Sampling errors for most of the estimates are relatively low. However, where an estimated number, or the numerator or denominator of a rate or percent is small, the sampling error may be large.

The relatively small size of the sample for the chronic condition lists, one-sixth of the total sample per year, limits the number of variables with which the data can be effectively analyzed.

An asterisk is placed beside certain figures to indicate more than 30-percent relative standard error. Figures marked with an asterisk are given primarily to allow the reader to combine them with related estimates, thereby possibly producing a more reliable overall estimate for a broader category. Charts of relative sampling errors and instructions for their use are shown in appendix I.

In addition to errors resulting from sampling, mentioned earlier, response error is also a possibility in interview data. Response errors occur when household respondents do not know the requested information, fail to recall accurately events that occurred during the reference period, report events that actually happened outside the reference period as having occurred during it, or withhold information. Errors may also be introduced by interviewers, coders, and others during the processing and analysis of the data.

Methodological studies have shown that chronic conditions are generally underreported in interview surveys.² Respondents in health interviews tend to report conditions of which they are aware and about which they are willing to report to the interviewer. Reporting is better for conditions that have made a significant impact on the affected individual and his family. Conditions that are severe or costly, or that receive treatment tend to be better reported than conditions having less impact. For instance, a condition that has caused limitation of activity, visits to the doctor, or days in bed is more likely to be reported in the interview than a condition that has had little or no impact on the person.

Methodological studies have also indicated that inclusion of a checklist of descriptive condition titles as part of the interview questionnaire increases the probability that a respondent will recognize the terms and report those of which he is aware. Of course, the diagnostic accuracy of condition reports depends on how well the respondent remembers information that the attending physician has passed on to the family or, in the absence of medical attendance, on the previous experience or education of the family.

During the period 1957–67, data were collected in NHIS on all chronic conditions. From 1968 through 1977, as part of a redesign of the data collection procedure, chronic conditions involving disability days, physician visits, hospitalizations, or limitation of activity were collected. In addition, prevalence information was obtained for only a single system of chronic conditions in each survey year through use of an extended checklist of chronic conditions in that system. A report describing this design and the results of a study comparing the previous method with the revised procedure is presented in *Vital and Health Statistics*, Series 2, No. 48.³

In 1978 a new procedure was established. Currently six categorical lists of selected chronic conditions are included in the questionnaire. Respondents are questioned on only one of these six lists, selected on a predetermined basis. Because only a one-sixth sample is available for any specific chronic condition in a year, data in this report are aggregated over 3 years to reduce the sampling errors. In addition, data on chronic conditions causing impact continue to be collected.

In addition to limitations of data on the prevalence of chronic conditions reported in health interviews, it should be pointed out that the restriction of the survey to the civilian population not confined to institutions affects the estimated prevalence. Omission of the institutionalized population reduces the prevalence estimates, especially for the elderly, because the proportion of persons in institutions who have chronic conditions is high. These estimates do not indicate the prevalence in the total population.

Certain terms used in this report have specialized meanings for the purpose of the survey and are defined in appendix II. It is suggested that the reader become familiar with these definitions.

Appendix III contains the probe questions and recording form used to obtain information about the prevalence of selected chronic conditions. The questionnaires for 1979, 1980, and 1981 are illustrated in their entirety in the Current Estimates reports for these years: Series 10, No. 136,⁴ Series 10, No. 139,⁵ and Series 10, No. 141,⁶ respectively. The portions of the questionnaire shown in appendix III were the same for all 3 years.

Information about the prevalence of chronic conditions was obtained from responses to the six categorical checklists of conditions in question 32 (appendix III). Question 32 was phrased as follows: "During the past 12 months, did anyone in the family (you, your ______, etc.) have _____?" Estimates for days of disability caused by chronic conditions are based on the number of disability days reported for the 2-week reference period. Questions on disability days and on physician contacts for chronic conditions are located on the condition portion of the questionnaire (appendix III).

The population estimates used in this report are based on projections from the 1970 census. A comparison of the 1980 population estimates based on the 1970 census with the 1980 census estimates revealed an error of closure of 2.1 percent; that is, the 1970-consistent estimate was 2.1 percent less than the number of people counted in 1980. The U.S. Bureau of the Census has published revised population estimates for the intercensal years that are consistent with the 1980 census.⁷ In general, the rates and percents presented in this report are affected very little because both the numerator and denominator are derived from the survey. Estimates of the prevalence of chronic conditions will be affected more if they are for a population group for which the error of closure was relatively large. The inclusion of 1981 population data with the 1979 and 1980 data reduces the potential bias.

In this report, terms such as "similar" and "the same" mean that no statistically significant difference exists between the statistics being compared. Terms relating to difference (for example, "greater" or "less") indicate that differences are statistically significant. The t-test, with a critical value of ± 1.96 (0.05 level of significance), was used to test all comparisons discussed. Lack of comment regarding the difference between any two statistics does not mean that the difference was tested and found to be not significant.

Other NCHS programs providing chronic condition data

The National Center for Health Statistics sponsors several programs that provide information on chronic conditions: NHIS, the survey that provides the data for this report: the National Ambulatory Medical Care Survey (NAMCS); the National Medical Care Utilization and Expenditure Survey (NMCUES); the National Health and Nutrition Examination Survey (NHANES); the National Hospital Discharge Survey (NHDS); the National Nursing Home Survey (NNHS); and the vital statistics program. Because of major program differences in objectives, methodology, and definitions, direct comparisons are precluded in the majority of instances. However, when these data sets are used to complement one another, it is possible to obtain a comprehensive overview of the prevalence and effects of chronic conditions in the United States.

NAMCS⁸ is a national probability sample of office-based physicians selected from the master files of the American Medical Association and the American Osteopathic Association. Selected physicians maintain a listing of all patient visits to their offices during a randomly assigned 7-day period. The strength of these data is in the precision and depth of the medical information provided. Reliable data on information such as diagnosis, reason for visit, diagnostic procedures, treatments, and medication therapy are reported by the physicians themselves. However, NAMCS includes only physicians classified as non-Federal, office based, and primarily engaged in patient care activities. Hence the estimates of the numbers of physican visits for chronic condition diagnoses are not reflective of the total population. Because of the high reliability of these data, it is nevertheless important to consider the results of this survey when assessing the impact of chronic conditions. Data from NAMCS for 1979⁹ provide estimates of physician visits for specific conditions cross-tabulated by a large number of variables. This information is a useful complement to the NHIS prevalence estimates for chronic conditions presented in this report.

NMCUES, like NHIS, is designed to measure healthrelated characteristics of the civilian noninstitutionalized population of the United States. There are both similarities and differences between the two surveys. Hence, estimates that appear to be similar do not necessarily mean that both surveys have adequately measured the same phenomenon, nor do different estimates necessarily indicate that one or the other survey is inadequately measuring the phenomenon. NMCUES is a panel survey conducted in 1980.¹⁰ Although its focus is on health care costs, data on health and health care utilization are obtained as a mechanism to collect cost data and as a basis for classifying and understanding health care costs. Information on approximately 17,000 persons was collected in NMCUES in 1980.

Data on conditions causing disability days, limitation of activity, doctor visits, and hospital stays are collected in NMCUES and constitute one of the primary study areas in the survey. Thus, chronic conditions are one of the important elements of NMCUES.

The wording of the questions used to obtain data on conditions is very similar for NHIS and NMCUES, and conditions are coded according to the same basic coding scheme and instructions. However, because of the nature of the two surveys, differences in the estimated number of chronic conditions are expected.

As noted previously, NHIS employs six sets of probe questions to determine prevalence of conditions in the different body sytems, and each set is asked of a one-sixth subsample of persons. Thus, information may be obtained on chronic conditions that did not have any impact on a person during the reference period. NMCUES, however, necessitates impact for the condition to be counted.

In NMCUES and NHIS, conditions are classified as either acute or chronic. This distinction has long been made in NHIS as a basic classification and has been used as a tabulating criterion. For NHIS purposes, acute conditions are defined as those that affected the person during the 2-week period included in the survey and that had an onset less than 3 months before the interview date. (Certain conditions, however, are always considered chronic regardless of the date of onset.) An attempt was made to use the same definition in NMCUES, but the design of the survey resulted in differences.

The design of NMCUES, which allows for referencing a previously reported condition in later rounds, further affects data from that survey. A condition that was coded as acute during one round (onset within 3 months of interview date) was not changed to chronic if it still affected the person during later reference periods. A condition of this nature would appear as a single acute condition in the NMCUES data and as one acute and one chronic condition in the NHIS data.

The net effect of these differences in survey design should lead to lower estimates of the prevalence of chronic conditions in NMCUES than in NHIS. Preliminary analysis of data from the two surveys¹⁰ indicates that some estimates are relatively similar for the two surveys, but for the most part, NHIS estimates are higher. NMCUES data can be used to gain a wider understanding of some topics covered in NHIS data, but direct comparisons of data from the two surveys are not possible.

The NHANES¹¹ design is a stratified, multistage, probability cluster sample of households throughout the United States. The process of selecting a sample of persons to be examined is a cascading one that involves the selection of primary sampling units (counties or small groups of contiguous counties), census enumeration districts, segments (clusters of households), households, eligible persons, and finally sample persons. The sampling plan included 27,803 sample persons and 20,325 examined persons in 64 primary sampling units throughout the United States in the period 1976–80.

NHANES is used to collect a broad range of morbidity data and related health information. The essential differentiating characteristic of NHANES is its primary concern with those kinds of health-related data that can be obtained only (or at least optimally) from specially standardized direct medical examinations, including tests and other procedures used in clinical practice. Because NHANES data come from examinations given to persons selected in the scientifically designed sample, estimates can be made of the prevalence of specifically defined diseases in the U.S. population, including cases not previously identified. Estimates can also be made of the distribution within the population of a broad variety of health-related measurements, including not only physical measurements (such as height, weight, and various skinfolds) but also physiological measurements (such as diastolic blood pressure and serum cholesterol level) and psychological measurements. In addition, this survey provides an assessment of the nutritional status of the U.S. population aged 1-74 years that permits nutritional variables to be related to health measures.

NHANES is a recurring survey and hence permits measurement of changes in health and nutritional status over time. Although information on the range of chronic conditions covered in NHIS is not obtainable through NHANES, extensive physiological and biological information on a number of "target" conditions is available. Conditions for which extensive diagnostic and prevalence data are collected through NHANES include diabetes, kidney disease, liver disease, allergic conditions, arthritis and disc degeneration, cardiovascular disease including hypertension, skin conditions, pulmonary disease, and speech and hearing pathology. For a number of these conditions, diabetes and hypertension in particular, the NHANES prevalence estimates are higher than NHIS estimates because undiagnosed conditions are identified during the NHANES examination. However, when respondents are questioned as to whether or not they suffer from a chronic condition such as hypertension, prevalence estimates are similar for both surveys.¹² Thus it is advantageous to utilize data from both surveys when examining the extent and effects of the prevalence of selected chronic conditions. NHANES data can provide information on undiagnosed conditions. NHIS data can provide information on the prevalence of serious chronic conditions (that is, those which cause limitations) as well as detailed medical and nonmedical information with which the condition prevalence information may be related.

NHDS provides statistics on the utilization on non-Federal short-stay hospitals based on data collected from a national

sample of the hospital records of discharged inpatients.¹³ It is a continuous survey that has been conducted by NCHS since 1965.

Because NHDS focuses on hospital discharges, condition data are available only for those conditions requiring hospitalization during the survey year. These hospitalizations are discharge based and not person based; one person may have multiple discharges during the year. Estimates for this survey are made by "first-listed diagnosis" as well as "all-listed diagnoses." These data are not comparable with NHIS prevalence data, but may be utilized to estimate the number of hospitalizations resulting from selected chronic conditions during a given year as well as to provide a basic demographic profile of the persons hospitalized for the conditions. Thus NHDS data complement the NHIS chronic condition prevalence estimates.

The National Nursing Home Survey (NNHS) is a continuing periodic survey of nursing homes, first conducted by NCHS from August 1973 through April 1974. The survey was repeated in 1977,¹⁴ with data collected from May through December. All types of nursing homes in the conterminous United States were included in the 1977 NNHS regardless of either their intensity of services or their participation in the Medicare or Medicaid programs. Data on nursing home facilities, residents, discharges, and chronic conditions are collected in the survey.

The institutionalized population is not included in NHIS, so chronic conditions reported in NNHS can be used to supplement the NHIS estimates. Unfortunately, NNHS data are classified according to a different revision of the International Classification of Diseases than is used for NHIS, and in some instances NNHS condition data do not conform to the classification structure. Therefore, some NNHS condition data cannot be combined with NHIS data.

The total number of conditions among nursing home residents is quite small when compared with the number for the noninstitutionalized population. However, it should be noted that 88 percent of nursing home residents are 65 years of age and over,¹⁴ so most of the conditions reported are for older people and do have some impact on this group. Table A shows the chronic conditions of highest prevalence as reported in NNHS.

One function of the vital statistics program of NCHS is to report the estimated number of deaths in the United States by cause of death. Data on deaths from chronic conditions are not included in NHIS because only civilian noninstitutionalized persons who are alive at the time of interview are surveyed. To understand the entire spectrum of the problem of chronic conditions in this country, mortality data from the vital statistics program must also be considered. In table B, 10 leading causes of death in the United States in 1980 are shown along with the 10 most prevalent selected chronic conditions reported in NHIS for 1979-81. The list of the leading causes of death contains some conditions that are considered acute, such as pneumonia and influenza, and others that are not collected in their entirety in NHIS, such as malignant neoplasms. Hence these lists are not comparable but are nevertheless a useful complement to one another.

Table A. Chronic conditions and impairments with highest prevalence among nursing home residents, in rank order: United States, 1977

Condition	Rank	Number of conditions in thousands
Arteriosclerosis	1	620.2
Heart trouble	2	449.0
Heart trouble	3	416.4
Chronic brain syndrome	4	324.7
Arthritis and rheumatism	5	320.5
Constipation	6	313.2
Hypertension	7	272.9
Edema	8	233.5
Stroke	9	214.0
Diabetes	10	189.6
Diseases of the eye, includes blindness, glaucoma, and cataracts	11	186.2
Permanent stiffness or deformity of back, arms, legs, or extremities	12	181.5
Mental illness	13	148.3
Kidney trouble	14	131.7
Insomnia	15	125.5
Hip fracture	16	108.8
Deafness	17	90.4
Chronic respiratory disease	18	86.5
Mental retardation.	19	79.8
Anemia	20	70.6

SOURCE: National Center for Health Statistics: National Nursing Home Survey.

Table B. Statistics on selected reported chronic conditions with highest prevalence in civilian noninstitutionalized population and conditions causing the largest number of deaths, in rank order: United States, 1979-81

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Condition ICD code ¹	Rank	Number of conditions in thousands	Rate per 1,000 persons ²	Condition and ICD code ¹	Rank	Number of deaths in thousands	Crude death rate per 100,000 population ³
Chronic conditions				Cause of death			
Chronic sinusitis473	1	30,227	137.7	Diseases of heart390–398, 402, 404, 410–429	1	761.1	336.0
Arthritis not elsewhere classified 711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5-7,9	2	26,958	122.8	Malignant neoplasms 140–208	2	416.5	183.9
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	3	24,728	112.6	Cerebrovascular diseases430–438	3	170.2	75.1
Deformities or orthopedic impairments X70–X76, X78–X89	4	18,427	83.9	Accidents and adverse effectsE800-E949	4	105.7	46.7
Hearing impairments	5	17,565	80.0	Chronic obstructive pulmonary diseases and allied conditions	5	56.1	24.7
Hay fever, without asthma (includes upper respiratory allergy)	6	16,975	77.3	Pneumonia and influenza 480–487	6	54.6	24.1
Heart conditions	7	16,682	76.0	Diabetes mellitus	7	34.9	15.4
Hemorrhoids	8	8,759	39.9	Chronic liver disease and cirrhosis571	8	30.6	13.5
Visual impairmentsX00-X04	9	8,545	38.9	Atherosclerosis440	9	29.4	13.0
Eczerna, dermatitis, and urticaria, not elsewhere classified 277.6, 373.3, 690–692, 693.1, 694.0–3, 708, 995.1,3	10	8,107	36.9	Suicide	10	26.9	11.9

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey. ²Conditions per 1,000 persons in civilian noninstitutionalized population. ³Deaths per 100,000 resident population.

NOTE: Chronic condition data are for 1979-81; cause-of-death data are for 1980.

SOURCE: Mortality data are from the vital statistics program of the National Center for Health Statistics.

Related NHIS data on chronic conditions

Chronic condition data have been collected in NHIS since 1957. As mentioned earlier, the procedures for collecting chronic condition data have changed over the years. From 1957 through 1967 data were collected on all chronic conditions; from 1968 through 1977, the collection of chronic condition data focused on an annual survey of a single system of chronic conditions using an extended checklist of chronic conditions in that system. In 1978, the current procedure was instituted. The total NHIS sample is now divided into six representative subsamples, each of which is administered one of the six chronic condition checklists.

In addition to changes in survey procedures, three versions of the International Classification of Diseases have been utilized over this period. Because of changes in survey procedures and disease classifications, no attempt will be made to examine trends in chronic conditions in this report. Although a large amount of chronic condition data has been published over the years, only material published in about the last 10 years is referenced here. However, many other publications are also cited within those publications listed.

The following is a list of reports on data collected during the period when single systems were surveyed. A good deal of detailed and useful information is available in each of these reports, but the reader should exercise caution in comparing estimates from the following reports with estimates from this report.

- Series 10, No. 84: Prevalence of Selected Chronic Respiratory Conditions, United States, 1970.¹⁵
- Series 10, No. 92: Prevalence of Chronic Skin and Musculoskeletal Conditions, United States, 1969.²
- Series 10, No. 94: Prevalence of Chronic Circulatory Conditions, United States, 1972.¹⁶
- Series 10, No. 109: Prevalence of Chronic Conditions of the Genitourinary, Nervous, Endocrine, Metabolic, and Blood and Blood-forming Systems and of Other Selected Chronic Conditions, United States, 1973.¹⁷
- Series 10, No. 121: Characteristics of Persons with Hypertension, United States, 1974.¹⁸
- Series 10, No. 123: Prevalence of Selected Chronic Digestive Conditions, United States, 1975.¹⁹
- Series 10, No. 124: Prevalence of Chronic Skin and Musculoskeletal Conditions, United States, 1976.²⁰
- Series 10, No. 134: Prevalence of Selected Impairments, United States, 1977.²¹

Data on the prevalence of selected chronic conditions were last presented in the 1982 Current Estimates Report.¹ Information in the Current Estimates Report is not as detailed as the information in this report, and estimates were subject to more variation because data for only 1 year were used as compared with data for 3 years for this report. Prevalence often refers to the number of some item existing at a given point in time; this definition of prevalence is usually referred to as point prevalence. Prevalence can also refer to the average number of some item existing during a specified interval of time. The latter definition is used in NHIS.

Chronic conditions are defined as conditions that either (1) were first noticed 3 months or more before the date of interview or (2) belong to a group of conditions (specified in appendix II) considered chronic regardless of when they began.

For the purpose of estimating the prevalence of reported chronic conditions, the total NHIS sample was divided into six representative subsamples. Each subsample was administered one of six checklists that contained broad categories of types of chronic conditions. Respondents were asked to indicate the presence or absence of each condition specified on the particular list administered to them. Because the presence or absence of many types of chronic conditions is often ambiguous, several "impact" questions were asked about each condition reported. The questions include whether the person had been taking medicine for the condition, had undergone surgery or been hospitalized for the condition, and the number of times he or she had seen a doctor or stayed in bed because of the condition during the 12 months prior to the interview.

The tables in this report are organized primarily by checklist. However, some modifications in the presentation were made for instances in which more than one of the six lists included data from the same disease classification system as listed in the Ninth Revision International Classification of Diseases.²²

Conditions with high prevalence

The selected chronic conditions with the highest prevalence during 1979–81 are presented in table C. Top 10 rankings are presented for all persons, for males and females, for white and black persons, and for four broad age categories.

Chronic sinusitus ranked highest in prevalence for all persons, for both sexes, for white persons, and for persons 17–44 years of age. Hypertensive disease was the most prevalent selected chronic disease among black persons. Hay fever ranked highest among persons under 17 years of age, and arthritis was the most prevalent condition among persons aged 45–64 years and 65 years and over.

No marked differences in prevalence rank existed by sex or race. However, there were rank differences among the age groups, and for young people in particular. Among people under 17 years of age, eczema, dermatitis, and urticaria; asthma; chronic bronchitis; hypertrophy of tonsils and adenoids; and disease of sebaceous glands all ranked in the top 10. For both sexes and for white and black persons, the seven highest ranking conditions were the same, though not in the same order. These were chronic sinusitus; arthritis; hypertensive disease; deformities or orthopedic impairments; hearing impairments; hay fever; and heart conditions. Visual impairments and asthma ranked in the top 10 among males, whereas eczema, dermatitis, and urticaria; and varicose veins ranked in the top 10 among females.

Percent distributions of the three selected chronic conditions with the highest prevalence—chronic sinusitus, arthritis, and hypertensive disease—are presented in figure 1 by sex and age. The proportion of females was much greater than the proportion of males for each of the three conditions. This is not surprising because the life expectancy of females is greater than that of males, and rates for most chronic conditions are higher among the elderly. Among the age groups shown, those 17–44 years of age made up the highest percent of chronic sinusitis conditions, and those in age group 45–64 accounted for the highest percent of hypertensive disease conditions. Of those with arthritis, approximately equal proportions were in the age groups 45–64 years and 65 years of age and over.

Figure 2 shows the six selected chronic conditions with the highest prevalence rates per 1,000 persons by age. The rates for three of the conditions—arthritis, hypertensive disease, and hearing impairments—were much higher in the older age groups. The prevalence rate for deformities or orthopedic impairments was also higher, though not as markedly so, in the older age groups. Chronic sinusitis prevalence rates did not vary appreciably for persons 17 years of age and over, and the prevalence rate for hay fever was highest in the age group 17–44 years.

Figure 3 shows the 10 selected chronic conditions with the highest prevalence rates by the percent of conditions causing limitation in major and outside activity. Although chronic sinusitus was the most prevalent condition, a very small proportion of cases (less than 1 percent) caused limitation in activity. In contrast, deformities or orthopedic impairments and heart conditions caused activity limitation in more than 31 percent of the cases.

The selected reported chronic conditions responsible for the largest proportions of activity limitation are shown in

Table C. Selected re	ported chronic conditions with highest	prevalence, in rank order, b	y sex, race, and ac	e: United States, 1979-81

						Age				
		Sex		Ra	ice	Under 17	17-44	45-64	65 year and	
Chronic condition and ICD code ¹	Total ²	Male	Female	White	Black	years	years	years	over	
Condition					Rank					
Chronic sinusitis	1	1	1	1	3	2	1	3	5	
Arthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5–7,9	2	4	2	2	2		5	1	1	
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	3	2	3	3	1	••••	4	2	2	
Deformities or orthopedic impairments	4	5	4	4	4	8	3	6	6	
Hearing impairments	5	3	7	5	7	10	7	4	3	
Hay fever, without asthma (includes upper respiratory allergy)	6	6	6	6	6	1	2	7	•••	
Heart conditions	7	7	5	7	5	9	10	5	4	
Hemorrhoids	8	9	10	8	• • •		6	8		
Visual impairmentsX00-X04	9	8		9	9	•••	• • •	³ 10	8	
Eczema, dermatitis, and urticaria, not elsewhere classified	10		8	10		3	9	•••		
Asthma, with or without hay fever		10		•••	8	4				
Varicose veins, not elsewhere classified			9							
Diabetes					10			9	10	
Chronic bronchitis						5	• • •			
Hypertrophy of tonsils and adenoids			• • •		•••	6	•••			
Disease of sebaceous glands, not elsewhere classified (acne)			•••	•••	• • •	7	8		•••	
Cataracts, all forms			•••	•••	•••	•••			7	
Arteriosclerosis, not elsewhere classified	•••	•••	•••	•••	•••	•••		•••	9	
Synovitis, bursitis, and tenosynovitis			•••		•••	•••	•••	³ 10		

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey. ²Includes races other than white and black.

³Conditions are tied with same rate.

NOTE: This table shows rank by condition prevalence, not person prevalence. A person may have more than one condition in some groupings, such as deformities, orthopedic impairments, or heart conditions.

... Indicated rank is not in top 10

table D. Multiple sclerosis caused the highest percent of limitation (77 percent). Although not high in prevalence, this condition is very debilitating. Paralysis, complete or partial, of extremities or parts of extremities and emphysema ranked second and third as causes of activity limitation.

Selected circulatory conditions

Prevalence estimates for selected chronic circulatory conditions are shown in table 1, and the corresponding rates per 1,000 persons are presented by age. Tables 2 and 3 show this information for males and females, respectively. Table 4 shows the prevalence estimates and rates for white and black persons. The percent of conditions causing limitation of activity and the percent that resulted in a physician visit are included in tables 1–4.

Data presented in table 1 show that hypertensive disease, estimated at almost 25 million conditions annually, or 112.6 per 1,000 persons, was the most prevalent selected chronic circulatory condition. High on the prevalence list for selected chronic circulatory conditions were heart conditions, estimated at almost 17 million conditions; hemorrhoids, almost 9 million; and varicose veins, 6 million. Among younger persons (under 17 years) heart conditions had the highest prevalence rate. Hypertensive disease had the highest rate of prevalence in the other three age groups.

Limitations in major and outside activity from chronic circulatory conditions ranged from more than 50 percent for some subclasses of heart conditions to only 1 percent for hemorrhoids. A physician was seen at least once in more than 90 percent of the cases for all conditions except hemorrhoids and varicose veins, for which 68.1 percent and 72.5 percent of the conditions, respectively, were seen by a physician.

Data from tables 2 and 3 reveal that hypertensive disease, heart conditions, and hemorrhoids had high prevalence for both sexes. Arteriosclerosis was relatively high in prevalence among males, and among females, varicose vein conditions had high prevalence.

The prevalence rates for selected chronic circulatory diseases among white persons (table 4) were predictably similar to those for all persons. Black persons were reported to have a particularly high rate of hypertensive disease, 136.8 per 1,000 persons.

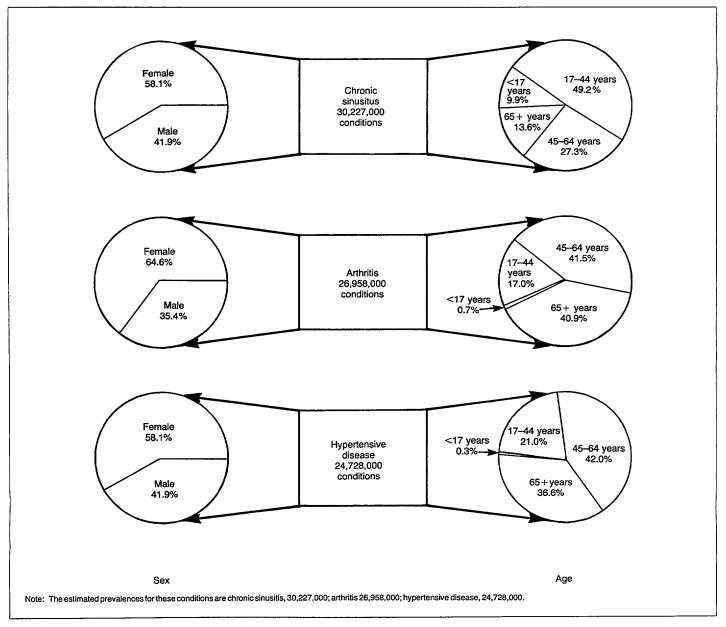


Figure 1. Percent distributions of selected reported chronic conditions with highest prevalence by sex and age: United States, 1979-81

Selected respiratory conditions

Tables 5–7 contain the prevalence estimates for selected chronic respiratory conditions and rates per 1,000 persons by age for all persons, males, and females respectively. Table 8 contains the estimates and rates for white and black persons. The percent of conditions causing limitation of activity and physician visits are included in all four tables.

Chronic sinusitus was the most frequently reported selected chronic respiratory condition, with an annual average prevalence of more than 30 million conditions, or 137.7 conditions per 1,000 persons in the civilian noninstitutionalized population (table 5). Other chronic respiratory conditions of high prevalence included hay fever (almost 17 million conditions), chronic bronchitis (7.8 million conditions), and asthma (6.9 million).

With a rate of 54.9 conditions per 1,000 persons, hay fever was the most prevalent condition among persons under

17 years of age, followed by chronic sinusitus with a rate of 51.1. Chronic sinusitus was by far the most prevalent selected chronic respiratory disease in all of the other age groups.

The chronic respiratory conditions which caused the highest proportions of limitation in major and outside activity were emphysema, which caused limitation in 48.2 percent of the conditions, and pneumoconiosis, which caused limitation in 41.9 percent of the reported conditions. A physician had been consulted at least once for a large proportion of chronic respiratory conditions. Of the reported respiratory conditions, chronic laryngitis, chronic sinusitus, and hay fever were the least likely to have caused a physician visit.

Data in tables 6–8 show that the prevalence patterns for chronic respiratory conditions for males, females, white persons, and black persons were similar to those for the total population. However, some conditions, such as chronic

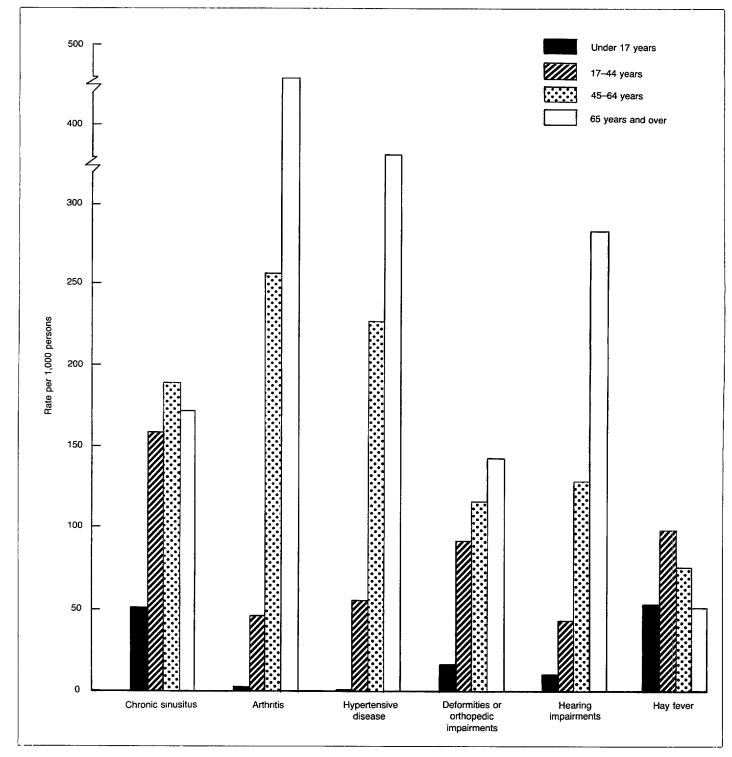


Figure 2. Rate per 1,000 persons per year for selected reported chronic conditions with highest prevalence, by age: United States, 1979-81

sinusitus, were more prevalent among females. Other conditions, such as emphysema, were more prevalent among males. Prevalence rates for most of the conditions were somewhat higher among white than black persons. This higher rate could be attributable to the greater proportion of older white than black persons because most chronic conditions have greater prevalence among the elderly.

Selected digestive conditions

Prevalence estimates for selected chronic digestive conditions and the rates per 1,000 persons by age are shown for all persons in table 9 and for males and females in tables 10 and 11. Prevalence estimates and rates for white and black persons are presented in table 12. The proportions

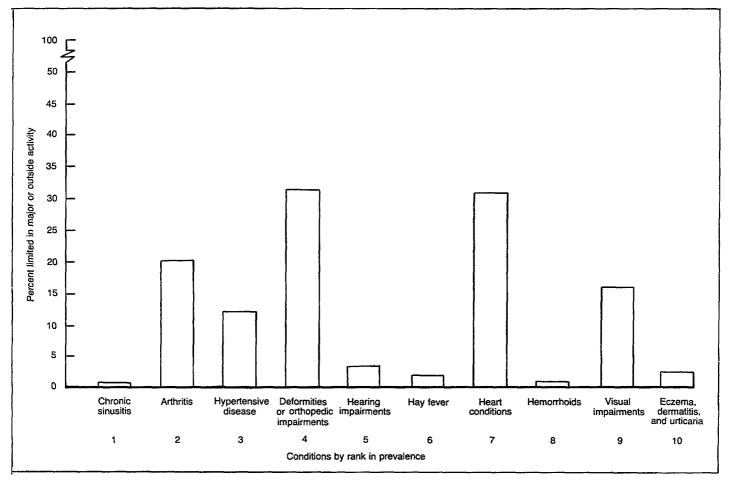


Figure 3. Selected reported chronic conditions with highest prevalence, in rank order, by percent causing limitation in major or outside activity: United States, 1979-81

of conditions that caused limitation of activity or a physician visit are included in tables 9-12.

The most prevalent selected digestive conditions were functional and symptomatic upper gastrointestinal disorders (about 3.9 million conditions annually), hernia of the abdominal cavity (3.9 million), ulcer of the stomach and duodenum (3.8 million), and frequent constipation (3.7 million), as shown in table 9. For persons under 17 years of age, frequent constipation and chronic enteritis and colitis were the most prevalent digestive conditions. Among the age group 17–44 years, ulcer of the stomach and duodenum and functional and symptomatic upper gastrointestinal disorders were highest in prevalence, whereas hernia of the abdominal cavity was predominant among persons 45–64 years of age. Frequent constipation and hernia of the abdominal cavity were the conditions highest in prevalence among those 65 years and over.

Liver conditions were responsible for the highest percent of limitation in major and outside activity (21.8 percent) among all selected digestive conditions. In addition, a physician had been seen for almost all reported liver conditions (99.4 percent).

Data from table 10 indicate that the overall prevalence patterns for digestive conditions were also found for males. However, the pattern varied somewhat for females (table 11), for whom frequent constipation was the most prevalent selected chronic digestive condition reported. Although frequent constipation conditions were most prevalent among females, they accounted for very little limitation of activity.

The prevalence patterns for white persons (table 12) were similar to those for all persons. Black persons, however had a somewhat higher rate of frequent constipation conditions and a somewhat lower rate of hernias of the abdominal cavity.

Selected impairments and nervous system and sense organ conditions

Prevalence estimates for selected impairments and chronic conditions of the nervous system and sense organs, with the accompanying rates per 1,000 persons by age, are presented for all persons in table 13 and for males and females in tables 14 and 15, respectively. Prevalence estimates and rates are shown for white and black persons in table 16. The proportions of conditions causing activity limitation or resulting in a physician visit are shown in all four tables.

Among the selected impairments reported (table 13), the most prevalent overall were deformities or orthopedic impairments and hearing impairments, with annual average estimates of 18.4 million and 17.6 million conditions, respectively. Visual impairments were also fairly common with an estimated annual average of 8.5 million conditions. In the age groups under 17 years and 17–44 years, deformities or orthopedic impairments were highest in prevalence, followed by hearing impairments. In the older age groups, 45–64 years and 65 years and over, the two were reversed, hearing impairments being highest in prevalence and deformities or orthopedic impairments second.

The selected conditions of the nervous system and sense organs with the highest prevalence were migraines and cataracts, with annual averages of 5.7 million and 4.0 million conditions, respectively. Migraines were the most prevalent reported condition in all age groups except among persons 65 years of age and over, for whom cataracts were by far the most prevalent.

Among the selected impairments, paralysis, complete or partial, of extremities or parts of extremities caused limitation in major and outside activity in 65.7 percent of conditions, which was far greater than the amount of limitation caused by any other impairment. Data on physician visits show that, curiously, only 60.2 percent of speech impairment conditions resulted in a doctor visit.

Multiple sclerosis was responsible for the highest proportion of activity limitation (77.0 percent) among the selected conditions of the nervous system and sense organs.

The prevalence patterns for selected impairments noted for all persons also were found for males and females (tables 14 and 15). Males, however, had a higher rate of hearing impairments and visual impairments than females had. Among conditions of nervous system and sense organs, there was some variation in the pattern. The most prevalent condition for males was color vision deficiencies, with an annual average of more than 1.8 million conditions, compared with the estimate of 135,000 color vision deficiencies for females. Migraines and cataracts were high in prevalence for both sexes.

The overall prevalence patterns for selected impairments and for selected conditions of the nervous system and sense organs were also found for both white and black persons (table 16). Black persons, however, had a lower prevalence rate of hearing impairments than white persons had.

Selected skin and subcutaneous tissue and other related conditions, and musculoskeletal system and connective tissue conditions

Tables 17–19 contain prevalence estimates as well as rates per 1,000 persons, by age, for selected chronic conditions of the skin and subcutaneous tissue and other related conditions; and conditions of the musculoskeletal system and connective tissue. Data are shown for all persons and for males and females respectively. Table 20 contains the prevalence estimates and rates for white and black persons. Proportions of conditions causing activity limitation and physician visits are included in all four tables.

Data in table 17 indicate that eczema, dermatitis, and urticaria was the most prevalent condition of the skin and subcutaneous tissue, with an average annual estimate of 8.1 million conditions. Disease of the sebaceous gland was second, with an average annual estimate of 5.7 million conditions. Eczema, dermatitis, and urticaria was the most prevalent condition among persons under 17 years of age. Among the age group 17–44 years, it was virtually tied for the highest prevalence with disease of the sebaceous glands. However, among persons 45–64 years of age and 65 years of age and over, corns and callosities was the most common condition reported. None of the conditions of the skin and subcutaneous tissue caused much limitation of activity.

Among the selected musculoskeletal and connective tissue conditions, arthritis was far and away the most frequently reported, with an average annual prevalence of almost 27 million conditions. Synovitis, bursitis, and tenosynovitis was the second most prevalent condition, with 4.9 million conditions. Arthritis was also the most prevalent condition in all four of the age groups. Displacement of intervertebral disc caused the greatest proportion of limitation in major and outside activity, 45.9 percent.

Table D. Selected reported chronic conditions causing highest percent of limitation in major and outside activity, in rank order, and percent of limitation: United States 1979–81

Chronic condition and ICD code ¹	Rank	Percent with limitation in major and outside activity
Multiple sclerosis	1	77.0
Paralysis, complete or partial, of extremities or parts of extremities	2	65.7
Emphysema	3	48.2
Displacement of intervertebral disc	4	45.9
Epilepsy, all types, or chronic convulsions, cause unknown	5	42.8
Pneumoconiosis	6	41.9
Cerebrovascular disease	7	41.2
Osteomyelitis and other diseases of bone	8	34.3
Diabetes	9	32.1
Deformities or orthopedic impairments	10	31.6
Heart conditions	11	31.4
Phlebitis and thrombophlebitis, not elsewhere classified	12	27.3

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

NOTE: Some chronic condition subcategories have a higher percent of limitation activity than those listed above. However, only the total categorical condition percents are included in this table.

Although the rates in general were somewhat lower for males (table 18), the prevalence patterns for both selected skin and subcutaneous tissue conditions and musculoskeletal and connective tissue conditions were similar to those for all persons. The prevalence rates for females (table 19) also followed the same basic pattern. However, in contrast to males, females had higher than average rates for several conditions, particularly arthritis; eczema, dermatitis and urticaria; and corns and callosities.

Information presented in table 20 shows that the prevalence rates for white persons were similar to those for all persons in both condition systems. The pattern for black persons varied somewhat, however. Among skin and subcutaneous tissue conditions, the highest prevalence estimate for black persons was for corns and callosities.

Selected endocrine, nutritional and metabolic disease and immunity disorders, diseases of the blood and blood-forming organs, and diseases of the genitourinary system

Prevalence estimates as well as the corresponding rates per 1,000 persons by age are presented for selected chronic endocrine, nutritional, and metabolic disease and immunity disorders; chronic diseases of the blood and blood-forming organs; and chronic diseases of the genitourinary system. Information is presented for the total population, males and females, in tables 21–23 and for white and black persons in table 24. Activity limitation and physician visit percents are shown in all four tables. Because these individual systems do not include many conditions, they will be treated as one entity.

For all persons (table 21), the most prevalent conditions were diseases of the urinary system, with an average annual prevalence of 5.6 million conditions; diabetes, 5.5 million conditions; all thyroid conditions, 2.9 million conditions; and anemia, 2.7 million conditions. For persons in the age groups under 17 years and 17–44 years, anemia and diseases of the urinary system were highest in prevalence. Among persons in the age groups 45–64 years and 65 years and over, diabetes was by far the most prevalent condition reported. Diabetes also caused the greatest amount of limitation in major and outside activity, 32.1 percent.

Among males, diabetes was the most prevalent condition (table 22), followed by diseases of the urinary system, diseases of the prostate, and gout. The conditions of highest prevalence among females were diseases of the urinary system, diabetes, and thyroid conditions, in that order. The prevalence patterns for each sex were similar to the overall pattern in most age groups. The exception was males 65 years and over, for whom diseases of the prostate and gout ranked quite high.

There was no apparent variation between the prevalence patterns reported for all persons and those reported for white persons (table 24) in these three condition systems. However, among black persons, the prevalence rates for diabetes and anemia conditions appeared higher than those for all persons, and the rate for thyroid conditions appeared lower.

Restricted-activity days from selected conditions

The estimated number of restricted-activity days and the number of days per selected chronic condition are presented by sex, for white persons, and for black persons in table 25. Only conditions for which the total number of restricted-activity days for all persons exceeded 19.2 million days, which is the cutoff figure for reliability, are included. Table E shows the top 10 rankings for the number of restrictedactivity days and the number of days per condition, by sex. Condition subcategories were not included in the rankings to avoid counting a condition in more than one category.

Of all the selected chronic conditions, arthritis was responsible for the largest number of restricted-activity days, 534.4 million per year. Ranking second and third were deformities or orthopedic impairments and heart conditions, with 469.3 million and 443.8 million days of restricted activity, respectively. These conditions also ranked first, second, and third for both males and females, although the order of rank varied among males. Hypertensive disease caused an inordinately large number of restricted-activity days among black persons.

The rankings for days per condition were quite different. Paralysis, complete or partial, of extremities or parts of extremities ranked first, with an annual average of 56.2 days of restricted activity per reported condition. Cerebrovascular disease ranked second, with 44.7 days per condition, and emphysema ranked third, with 42.5 restricted-activity days per reported condition. These three conditions were also ranked first, second, and third for males and females, although the ranks for cerebrovascular disease and emphysema were reversed for females.

Bed-disability days from selected conditions

Table 26 presents the estimated number of bed-disability days from selected chronic conditions and the number of days per condition by sex and for white and black persons. Only conditions for which the total number of bed-disability days exceeded the variance cutoff of reliability of 19.2 million days were included. Table E presents the top 10 rankings by number of days and by days per condition. Again, condition subcategories were not included in the rankings.

Of the selected reported chronic conditions, heart conditions caused the most bed disability, an average of 147.4 million days annually. Arthritis was second (132.7 million days) and deformities or orthopedic impairments third (101.4 million days). Heart conditions also caused the most beddisability days among males, whereas arthritis caused the most among females (table 26). Conditions causing the largest number of bed-disability days per condition were cerebrovascular disease, 23.6 days; paralysis, complete or partial, of extremities or parts of extremities, 21.7 days; and emphysema 13.4 days.

The population figures used in computing rates in this report are found in table 27.

Table E. Selected chronic conditions with highest number of related restricted-activity days and days per condition, by sex and rank order; and selected chronic conditions with highest number of related bed-disability days and days per condition, by rank order: United States, 1979-81

	Restricted activity days					Bed-disability days		
	N	umber of a	days	Day	s per con	dition	· · · · · · · · · · · · · · · · · · ·	
Chronic condition and ICD code ¹	Both sexes	Male	Female	Both sexes	Male	Female	Number of days	Days per condition
Conditions					Rank			
Arthritis not elsewhere classified	1	3	1	•••	•••	•••	2	•••
Deformities or orthopedic impairments	2	1	2	9	6	9	3	
Heart conditions390, 392–398, 402.1,9, 410–414, 415.0, 416, 417.8,9, 420.0,9, 422.9, 423, 424, 425.0–2,4,9, 426–428, 429.0–3,5,6,8,9, 785.0–3, 794.3	3	2	3	8	5	8	1	5
Hypertensive disease not elsewhere classified	4	4	4	•••	•••	•••	4	
Diabetes	5	8	6		8		6	6
Chronic sinusitus	6	10	5					
Asthma, with or without hay fever	7	7	8				7	10
Displacement of intervertebral disc722.0-7	8	6		6	4	6		4
Emphysema	9	5		3	3	2	9	3
All diseases of urinary system	10		7				10	
Cerebrovascular disease		9		2	2	3	5	1
Migraine			9				8	
Synovitis, bursitis, and tenosynovitis			10					
Paralysis, complete or partial, of extremities or parts of extremitiesX40-X59	•••	•••	•••	1	1	1		2
Phlebitis and thrombophlebitis, not elsewhere classified	 	 	···· ···	4 5	· · · · · · ·	7 5	····	···· ···
Poor circulation, not elsewhere classified		•••		7 10			•••	
Arteriosclerosis, not elsewhere classified					7		•••	
Ulcer of stomach and duodenum	•••	•••	···· ···	•••	9	· · · · · ·	•••	9 7
Gout	•••	•••	•••	•••	10	•••	•••	•••
Hernia of abdominal cavity	•••	••••	•••	•••	· · ·	4	•••	 8

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

NOTE: Only rankings of condition days and days per condition, not person days, are shown. A person may have more than one condition in some groupings such as deformities, or orthopedic impairments, or heart conditions.

... Indicated rank is not in top 10.

References

¹National Center for Health Statistics: Current estimates from the National Health Interview Survey, United States, 1982. *Vital and Health Statistics*. Series 10, No. 150. DHHS Pub. No. (PHS) 85–1578. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1985.

²National Center for Health Statistics, M. H. Wilder: Prevalence of chronic skin and musculoskeletal conditions, United States, 1969. *Vital and Health Statistics*. Series 10, No. 92. DHEW Pub. No. (HRA) 75–1519. Health Resources Administration. Washington. U.S. Government Printing Office, Aug. 1974.

³National Center for Health Statistics, G. A. Gleeson: Interviewing methods in the Health Interview Survey. *Vital and Health Statistics*. Series 2, No. 48. DHEW Pub. No. (HSM) 72–1048. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, Apr. 1972.

⁴National Center for Health Statistics, S. S. Jack and P. W. Ries: Current estimates from the National Health Interview Survey, United States, 1979. *Vital and Health Statistics*. Series 10, No. 136. DHHS Pub. No. (PHS) 81–1564. Public Health Service. Washington. U.S. Government Printing Office, Apr. 1981.

⁵National Center for Health Statistics, S. S. Jack: Current estimates from the National Health Interview Survey, United States, 1980. *Vital and Health Statistics*. Series 10, No. 139. DHHS Pub. No. (PHS) 82–1567. Public Health Service. Washington. U.S. Government Printing Office, Dec. 1981.

⁶National Center for Health Statistics, B. Bloom: Current estimates from the National Health Interview Survey, United States, 1981. *Vital and Health Statistics*. Series 10, No. 141. DHHS Pub. No. (PHS)

82-1569. Public Health Service. Washington, U.S. Government Printing Office, Oct. 1982.

⁷U.S. Bureau of the Census: Preliminary estimates of the population of the United States, by age, sex, and race, 1970–81. *Current Population Reports*. Series P–25, No. 917. Washington. U.S. Government Printing Office, 1982.

⁸National Center for Health Statistics, J. B. Tenney, K. L. White, and J. W. Williamson: National Ambulatory Medical Care Survey, background and methodology, United States, 1967–72. *Vital and Health Statistics*. Series 2, No. 61. DHEW Pub. No. (HRA) 74–1335. Health Resources Administration. Washington. U.S. Government Printing Office, Apr. 1974.

⁹National Center for Health Statistics, R. O. Gagnon, J. E. DeLozier, and T. McLemore: The National Ambulatory Medical Care Survey, United States, 1979 summary. *Vital and Health Statistics*. Series 13, No. 66. DHHS Pub. No. (PHS) 82–1727. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1982.

¹⁰National Center for Health Statistics, G. S. Bonham: Comparison of National Estimates, National Medical Care Utilization and

Expenditure Survey and National Health Interview Survey. Working paper. Nov. 1981.

¹¹National Center for Health Statistics, A. McDowell, A. Engel, J. T. Massey, and K. Maurer: Plan and operation of the Second National Health and Nutrition Examination Survey, 1976–80. *Vital and Health Statistics*. Series 1, No. 15. DHHS Pub. No. (PHS) 81–1317. Public Health Service. Washington. U.S. Government Printing Office, July 1981.

¹²National Center for Health Statistics, T. A. Drizd, A. L. Dannenberg, and A. E. Engel: Blood pressure levels in persons 18–74 years of age in 1976–80 and trends in blood pressure 1960–80. *Vital and Health Statistics*. Series 11, No. 234. Public Health Service, DHHS, Hyattsville, Md. In preparation.

¹³National Center for Health Statistics, B. J. Haupt: Utilization of short-stay hospitals, annual summary for the United States, 1980. *Vital and Health Statistics*. Series 13, No. 64. DHHS Pub. No. (PHS) 82–1725. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1982.

¹⁴National Center for Health Statistics, J. G. Van Nostrand, A. Zappolo, E. Hing, et al.: The National Nursing Home Survey, 1977 Summary for the United States. *Vital and Health Statistics*. Series 13, No. 43. DHEW Pub. No. (PHS) 79–1794. Public Health Service. Washington. U.S. Government Printing Office, July 1979.

¹⁵National Center for Health Statistics, C. S. Wilder: Prevalence of selected chronic respiratory conditions, United States, 1970. *Vital and Health Statistics*. Series 10, No. 84. DHEW Pub. No. (HRA) 74–1511. Health Resources Administration. Washington. U.S. Government Printing Office, Sept. 1973.

¹⁶National Center for Health Statistics, C. S. Wilder: Prevalence of chronic circulatory conditions, United States, 1972. *Vital and Health Statistics*. Series 10, No. 94. DHEW Pub. No. (HRA) 75–1521. Health Resources Administration. Washington. U.S. Government Printing Office, Sept. 1974.

¹⁷National Center for Health Statistics, G. Scott: Prevalence of chronic conditions of the genitourinary, nervous, endocrine, metabolic, and blood and blood-forming systems and of other selected chronic conditions, United States, 1973. *Vital and Health Statistics*. Series 10, No. 109. DHEW Pub. No. (HRA) 77–1536. Health Resources Administration. Washington. U.S. Government Printing Office, Mar. 1977.

¹⁸National Center for Health Statistics, A. J. Moss and G. Scott: Characteristics of persons with hypertension, United States, 1974. *Vital and Health Statistics*. Series 10, No. 121. DHEW Pub. No. (PHS) 79–1549. Public Health Service. Washington. U.S. Government Printing Office, Dec. 1978. ¹⁹National Center for Health Statistics, T. F. Drury and L. J. Howie: Prevalence of selected chronic digestive conditions, United States, 1975. *Vital and Health Statistics*. Series 10, No. 123. DHEW Pub. No. (PHS) 79–1558. Public Health Service. Washington. U.S. Government Printing Office, July 1979.

²⁰National Center for Health Statistics, G. S. Bonham: Prevalence of chronic skin and musculoskeletal conditions, United States, 1976. *Vital and Health Statistics*. Series 10, No. 124. DHEW Pub. No. (PHS) 79–1552. Public Health Service. Washington. U.S. Government Printing Office, Nov. 1979.

²¹National Center for Health Statistics, B. A. Feller: Prevalence of selected impairments, United States, 1977. *Vital and Health Statistics*. Series 10, No. 134. DHHS Pub. No. (PHS) 81–1562. Public Health Service. Washington. U.S. Government Printing Office, Feb. 1981.

²²World Health Organization: *Manual of the International Statistical Classifiction of Diseases, Injuries, and Causes of Death, Based on the Recommendations of the Ninth Revision Conference, 1975.* Geneva, 1977.

²³National Center for Health Statistics: Health survey procedures, concepts, questionnaire development, and definitions in the Health Interview Survey. *Vital and Health Statistics*. Series 1, No. 2. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, May 1964.

²⁴National Center for Health Statistics: Health Interview Survey procedure, 1957–74. *Vital and Health Statistics*. Series 1, No. 11. DHEW Pub. No. (HRA) 75–1311. Health Resources Administration. Washington. U.S. Government Printing Office, Apr. 1975.

²⁵U.S. National Health Survey, W. R. Simmons: The statistical design of the health household interview survey. *Health Statistics*. Series A, No. 2. PHS Pub. No. 584–A2. Public Health Service. Washington. July 1958.

²⁶National Center for Health Statistics, D. A. Koons: Quality control and measurement of nonsampling error in the Health Interview Survey. *Vital and Health Statistics*. Series 2, No. 54. DHEW Pub. No. (HSM) 73–1328. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, March 1973.

²⁷National Center for Health Statistics, E. Balamuth and S. Shapiro: Health interview responses compared with medical records. *Vital and Health Statistics*. Series 2, No.7. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, July 1965.

²⁸National Center for Health Statistics, C. F. Cannell and F. J. Fowler: Comparison of hospitalization reporting in three survey procedures. *Vital and Health Statistics*. Series 2, No. 8. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, July 1965.

²⁹National Center for Health Statistics, W. G. Madow: Interview data on chronic conditions compared with information derived from medical records. *Vital and Health Statistics*. Series 2, No. 23. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, May 1967.

³⁰National Center for Health Statistics, C. F. Cannell, F. J. Fowler, and K. H. Marquis: The influence of interviewer and respondent psychological and behavioral variables on the reporting in household interviews. *Vital and Health Statistics*. Series 2, No. 26. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1968.

³¹National Center for Health Statistics: National Health Interview Survey Medical Coding Manual and Short Index, Hyattsville, Md., 1980.

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Table 1. Average annual number of selected reported chronic circulatory conditions, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Cond	litions causir	ng
	Number of			Age			Activity limit	1 physician	
Chronic circulatory condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17 -44 y e ars	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
			Rate	per 1,000	persons			Percent	
Heart conditions390, 392–398, 402.1,9, 404.1,9, 410–414, 415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423, 424, 425.0–2,4,9, 426–428, 429.0–3,5,6,8,9, 785.0–3, 794.3	16,682	76.0	19.6	37.4	125.3	273.2	31.4	27.4	98.6
Active rheumatic fever390, 392-398, 423.1, 424.1	1,550	7.1	*0.5	7.0	13.4	11.8	19.5	15.1	99.2
Hypertensive heart disease,402.1,9, 404.1,9	125	0.6	*_	*0.0	*1.4	*2.4	60.8	*58.4	100.0
Coronary heart disease410-414, 429.2,6, 794.3	5,448	24.8	*_	3.8	54.1	113.7	45. 9	40.5	99.7
Other specified heart disease415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423.0,2,8,9, 424.0,2,3,9, 425.0,1,2,4,9, 426.0-7,9, 427.0,2-5, 428.0,1, 429.0,1,5	1,126	5.1	*0.3	2.6	9.6	18.4	37.7	34.2	97.4
Unspecified disorders of heart rhythm	5,784	26.3	18.5	21.5	29.4	58.7	8.1	5.9	97.6
Heart trouble, not otherwise specified	2,649	12.1	*0.3	2.5	17.4	68.2	55.7	50.2	98.6
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	24,728	112.6	1.5	55.6	237.3	377.2	12.7	10.8	99.1
Cerebrovascular disease	1,903	8.7	*0.2	1.6	14.5	46.0	41.2	39.1	98.7
Arteriosclerosis, not elsewhere classified440	3,468	15.8	*_	*0.8	20.7	103.8	14.9	13.6	93.2
Varicose veins, not elsewhere classified454, 456	6,030	27.5	*0.2	19.6	51.1	81.2	3.7	2.9	72.5
Hemorrhoids455	8,759	39.9	*0.6	45.1	67.4	64.9	1.0	*0.6	68.1
Phlebitis and thrombophlebitis, not elsewhere classified451	898	4.1	*_	2.3	8.4	13.0	27.3	21.9	99.6
Poor circulation, not otherwise specified459.9	922	4.2	*_	1.2	6.7	21.4	24.0	20.6	93.8
Congenital anomalies of circulatory system	635	2.9	3.4	3.1	2.4	*1.7	27.1	21.4	99.5

¹Ninth revision International Classification of Diseases.

Table 2. Average annual number of selected reported chronic circulatory conditions among males, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

	•1						Cono	litions causir	g
	Number of			Age			Activity limit	tation	1 physician
Chronic circulatory condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
			Rate	per 1,000	persons			Percent	
Heart conditions390, 392–398, 402.1,9, 404.1,9, 410–414, 415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423, 424, 425.0–2,4,9, 426–428, 429.0–3,5,6,8,9, 785.0–3, 794.3	7,484	70.6	22.0	30.0	131.3	276.4	37.2	32.9	98.7
Active rheumatic fever 390, 392-398, 423.1, 424.1	540	5.1	*0.5	5.8	10.2	*5.1	17.2	14.3	98.5
Hypertensive heart disease 402.1,9, 404.1,9	*35	*0.3	*_	*_	*0.7	*2.0	*80.0	*80.0	*100.0
Coronary heart disease410-414, 429.2,6, 794.3	3,100	29.3	*_	5.0	73.3	136.4	50.3	44.4	99.7
Other specified heart disease415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423.0,2,8,9, 424.0,2,3,9, 425.0,1,2,4,9, 426.0-7,9, 427.0,2-5, 428.0,1, 429.0,1,5	567	5.4	*0.4	2.7	9.8	23.3	40.7	39.2	98.4
Unspecified disorders of heart rhythm	2,128	20.1	20.6	14.3	19.2	46.8	8.6	5.7	97.7
Heart trouble, not otherwise specified	1,114	10.5	*0.5	2.2	18.1	62.9	61.8	57.4	98.2
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	10,365	97.8	*1.1	59.6	224.6	297.9	11.0	9.8	98.7
Cerebrovascular disease	951	9.0	*0.4	*1.6	16.3	53.1	47.5	46.1	98.6
Arteriosclerosis, not elsewhere classified440	1,666	15.7	*_	*1.1	26.6	107.7	18.4	17.4	94.3
Varicose veins, not elsewhere classified454, 456	1,071	10.1	*0.3	4.6	20.8	42.5	*2.5	*2.5	75.9
Hemorrhoids	3,817	36.0	*0.8	41.5	66.3	52.8	*1.4	*0.8	65.1
Phlebitis and thrombophlebitis, not elsewhere classified451	235	2.2	*_	*0.7	4.7	10.6	45.5	37.4	98.3
Poor circulation, not otherwise specified459.9	328	3.1	*_	*0.4	5.0	20.6	34.8	30.5	94.5
Congenital anomalies of circulatory system425.3, 745–747	271	2.6	3.1	3.1	*1.5	0.8	*22.9	*18.5	100.0

¹Ninth revision International Classification of Diseases.

Table 3. Average annual number of selected reported chronic circulatory conditions among females, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Cond	litions causir	ng
	Number of			Age			Activity limit	tation	1 physician
Chronic circulatory condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
			Rate	per 1,000	persons			Percent	
Heart conditions390, 392–398, 402.1,9, 404.1,9, 410–414, 415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423, 424, 425.0–2,4,9, 426–428, 429.0–3,5,6,8,9, 785.0–3, 794.3	9,198	80.9	17.0	44.5	119.9	271.0	26.8	22.9	98.4
423.0-3,5,6,8,763.0-3,794.3 Active rheumatic fever390, 392–398, 423.1, 424.1	1,010	8.9	*0.5	8.2	16.2	16.5	20.7	15.6	99.5
Hypertensive heart disease402.1,9, 404.1,9	90	0.8	+_	*0.1	*2.1	*2.7	*53.3	*50.0	100.0
Coronary heart disease410-414, 429.2,6, 794.3	2,348	20.7	*_	2.6	36.5	97.9	39.9	35.3	99.5
Other specified heart disease415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423.0,2,8,9, 424.0,2,3,9, 425.0,1,2,4,9, 426.0-7,9, 427.0,2-5, 428.0,1, 429.0,1,5	559	4.9	*0.2	2.5	9.5	15.0	34.7	29.0	96.4
Unspecified disorders of heart rhythm	3,656	32.2	16.2	28.2	38.7	67.1	7.8	6.0	97.6
Heart trouble, not otherwise specified	1,535	13.5	*_	2.8	16.8	71.9	51.3	45.0	98.9
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	14,363	126.4	*1.9	51.9	248.9	432.6	14.0	11.5	99.4
Cerebrovascular disease	952	8.4	*_	1.6	12.9	41.1	34.8	32.2	98.8
Arteriosclerosis, not elsewhere classified440	1.802	15.9	*_	*0.5	15.3	101.1	11.7	10.0	92.1
Varicose veins, not elsewhere classified454, 456	4,958	43.6	*0.1	33.8	78.8	108.1	4.0	3.0	71.7
Hemorrhoids	4,942	43.5	*0.4	48.4	68.5	73.4	*0.7	*0.5	70.5
Phlebitis and thrombophlebitis, not elsewhere classified451	663	5.8	*-	3.9	11.8	14.6	20.8	16.4	100.0
Poor circulation, not otherwise specified459.9	595	5.2	*_	2.0	8.3	21.8	18.0	15.1	93.3
Congenital anomalies of circulatory system	364	3.2	3.7	3.1	3.3	*2.3	30.2	23.4	98.9

¹Ninth revision International Classification of Diseases.

Table 4. Average annual number of selected reported chronic circulatory conditions, rate per 1,000 persons, and percent of conditions causing activity limitation and physician visits, by race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

			White					Black		
			Co	nditions c	ausing			Co	nditions c	ausing
	Number		Activity i	imitation		Number		Activity	limitation	
Chronic circulatory condition and ICD code ¹	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more
				Percen	t				Percen	t
Heart conditions390, 392–398, 402.1,9, 404.1,9, 410–414, 415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423, 424, 425.0–2,4,9, 426–428, 429.0–3,5,6,8,9, 785.0–3, 794.3	14,960	79.2	30.7	26.8	98.6	1,563	60.5	38.8	32.5	99.0
Active rheumatic fever390, 392–398, 423.1, 424.1	1,380	7.3	20.1	15.5	99.0	142	5.5	*14.1	*11.3	100.0
Hypertensive heart disease402.1,9, 404.1,9 Coronary heart disease410–414, 429.2,6, 794.3	105 5,095	0.6 27 0	*58.1 45.9	*54.3 40.7	100.0 99.8	*20 326	*0.8 12.6	*80.0 46.0	*80.0 37.7	*100.0 100.0
Other specified heart disease415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423.0,2,8,9, 424.0,2,3,9, 425.0,1,2,4,9, 426.0–7,9, 427.0,2–5, 428.0,1, 429.0,1,5	1,031	5.5	37.0	33.1	97.9	87	3.4	*46.0	*46.0	96.6
Unspecified disorders of heart rhythm	5,211	27.6	7.1	5.5	97.4	519	20.1	18.3	*9.6	99.0
Heart trouble, not otherwise specified	2,138	11.3	54.4	48.6	98.6	468	18.1	61.1	56.2	98.5
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	20,916	110.7	11.0	9.3	99.1	3,537	136.8	22.6	19.2	99.4
Cerebrovascular disease	1,588	8.4	40.5	38.5	98.4	282	10.9	41.1	39.7	100.0
Arteriosclerosis, not elsewhere classified440	3,271	17.3	14.3	12.9	92.8	117	6.8	*24.3	*24.3	98.3
Varicose veins, not elsewhere classified	5,665	30.0	3.6	2.8	73.3	317	12.3	*5.7	*5.7	57.1
Hemorrhoids	8,021	42.4	0.9	*0.6	68.1	670	25.9	*1.8	*1.2	68.4
Phlebitis and thrombophlebitis, not elsewhere classified451	815	4.3	26.1	21.1	99.5	83	3.2	*38.6	*28.9	100.0
Poor circulation, not otherwise specified 459.9 Congenital anomalies of circulatory system	822 560	4.3 3.0	22.3 27.3	18.6 21.8	93.1 99.5	100 *51	3.9 *2.0	*37.0 *37.3	*37.0 *27.5	100.0 *100.0

¹Ninth revision International Classification of Diseases.

Table 5. Average annual number of selected reported chronic respiratory conditions, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Cona	litions causin	g	
	Number of			Age			Activity limit	1 physician		
Chronic respiratory condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45-64 years	65 years and over	In major and outside activity	In major activity	visit or more	
			Rate	per 1,000	persons			Percent		
Chronic bronchitis	7,762	35.4	37.5	28.6	39.0	49.4	4.7	3.8	94.9	
Emphysema	2,234	10.2	*0.3	1.5	22.1	46.4	48.2	43.8	96.3	
Asthma, with or without hay fever	6,816	31.0	37.9	27.3	32.3	27.0	21.3	13.1	96.7	
Hypertrophy of tonsils and adenoids 474	3,107	14.2	29.1	13.1	3.5	*1.5	*0.7	*0.3	95.2	
Chronic sinusitis	30,227	137.7	51.1	158.9	189.0	171.6	0.9	0.4	70.4	
Deflected nasal septum	1,121	5.1	*0.8	6.2	9.0	4.3	*0.7	*_	88.1	
Nasal polyp	714	3.3	1.7	3.4	4.2	4.7	*_	*_	84.5	
Chronic laryngitis	923	4.2	2.6	5.2	4.3	4.2	*0.7	*0.7	70.1	
Hay fever, without asthma (includes upper respiratory allergy)	16,975	77.3	54.9	98.7	75.2	52.4	2.1	0.7	72.7	
Pleurisy	449	2.0	*_	2.3	3.4	3.7	*0.7	*_	89.8	
Pneumoconiosis	291	1.3	*_	*0.5	2.1	6.3	41.9	40.5	93.5	
Other chronic interstitial pneumonia515, 516.3	243	1.1	*0.5	*0.6	*1.6	3.6	*10.7	*9.1	98.4	
Bronchiectasis	139	0.6	*0.3	*0.2	*1.3	*1.6	*18.0	*18.0	95.0	

¹Ninth revision International Classification of Diseases.

NOTE: Relative standard errors of estimates for this table are found in appendix I, figures I and III.

Table 6. Average annual number of selected reported chronic respiratory conditions among males, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Conc	litions causin	g
	Number of			Age			Activity limit	tation	1 physician
Chronic respiratory condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
			Rate	per 1,000	persons			Percent	
Chronic bronchitis	3,372	31.8	45.1	21.2	32.1	40.3	3.9	3.5	94.0
Emphysema	1,584	15.0	*0.2	*1.6	34.6	79.3	49.1	45.5	95.5
Asthma, with or without hay fever	3,386	32.0	49.0	23.8	26.4	30.0	21.7	13.1	96.3
Hypertrophy of tonsils and adenoids	1,275	12.0	26.0	10.0	*2.1	*0.4	*0.9	*0.2	94.1
Chronic sinusitis	12,675	119.6	54.5	132.7	167.4	155.1	1.0	*0.5	67.5
Deflected nasal septum	727	6.9	*1.3	8.1	12.4	*6.5	*0.6	*_	86.9
Nasai polyp	306	2.9	*1.7	2.7	4.4	*4.2	*_	*_	83.7
Chronic laryngitis	166	1.6	*1.7	*1.3	*1.3	*3.0	*_	*_	77.1
Hay fever, without asthma (includes upper respiratory allergy)477, 478.8	7,896	74.5	58.2	9 5.4	63.9	49.7	2.3	*0.7	70.5
Pleurisy	147	1.4	*_	*1.5	*2.5	*2.7	*2.0	*_	78.2
Pneumoconiosis	274	2.6	*_	*0.8	4.2	15.4	44.5	43.1	96.7
Other chronic interstitial pneumonia515, 516.3	123	1.2	*0.8	*0.7	*1.6	*3.4	*17.9	*14.6	96.7
Bronchiectasis	*70	*0.7	*0.3	*0.3	*1.6	*1.6	*20.0	*20.0	*100.0

¹Ninth revision International Classification of Diseases.

Table 7. Average annual number of selected reported chronic respiratory conditions among females, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix i. Definitions of terms are given in appendix II]

	Number						Cond	litions causir	g	
	of			Age			Activity limit	1 physician		
Chronic respiratory condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more	
			Rate	per 1,000	persons		Percent			
Chronic bronchitis	4,390	38.6	29.7	35.7	45.3	55.7	5.3	4.1	95.6	
Emphysema	650	5.7	*0.3	*1.3	10.7	23.6	45.8	39.5	98.3	
Asthma, with or without hay fever	3,430	30.2	26.3	30.5	37.6	24.0	20.8	13.1	97.1	
Hypertrophy of tonsils and adenoids 474	1,832	16.1	32.4	16.0	4.8	*2.2	*0.5	*0.4	96.0	
Chronic sinusitis	17,553	154.5	47.6	183.7	208.7	183.1	0.8	*0.4	72.5	
Deflected nasal septum	393	3.5	*0.3	4.4	5.9	*2.8	*1.0	*_	90.8	
Nasal polyp	409	3.6	*1.7	4.1	4.1	*5.1	*_	*_	85.1	
Chronic laryngitis	757	6.7	3.5	8.8	7.0	*5.1	*0.8	*0.8	68.6	
Hay fever, without asthma (includes upper respiratory allergy)	9,079	79.9	51.5	101.7	85.4	54.3	1.9	*0.7	74.6	
Pleurisy	302	2.7	٠_	3.0	4.2	*4.3	•_	*_	07.0	
Pneumoconiosis	*17	*0.1	•_	*0.3	*0.2	4.3	*_	*_	95.0	
Other chronic interstitial pneumonia515, 516.3	120	1.1	*0.1	*0.6	*1.7	*3.6	*3.3	*3.3	*41.2	
Bronchiectasis	*69	*0.6	*0.4	*0.2	*1.1	*1.6	*14.5	*14.5	100.0 *88.4	

¹Ninth revision International Classification of Diseases.

NOTE: Relative standard errors of estimates for this table are found in appendix I, figures I and III.

Table 8. Average annual number of selected reported chronic respiratory conditions, rate per 1,000 persons, and percent of conditions causing activity limitation and physician visits, by race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

			White					Black		
			Co	nditions ca	ausing			Co	nditions c	ausing
	Number		Activity I	limitation		Number		Activity I	imitation	
Chronic respiratory condition and ICD code ¹	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	in major activity	1 physician visit or more	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more
				Percent	t				Percen	t
Chronic bronchitis	7,012	37.1	4.8	3.9	94.9	635	24.6	*3.5	*3.0	94.2
Emphysema	2,129	11.3	47.3	42.9	96.4	83	3.2	*60.2	*60.2	92.8
Asthma, with or without hay fever	5,821	30.8	21.7	13.1	96.9	896	34.7	18.5	14.2	96.3
Hypertrophy of tonsils and adenoids	2,695	14.3	*0.7	*0.4	95.7	375	14.5	*0.8	*_	91.2
Chronic sinusitis	27,235	144.1	0.8	0.4	70.1	2,689	104.0	*1.5	*0.9	73.9
Deflected nasal septum	1,099	5.8	*0.7	*	88.3	*18	*0.7	•_	*_	*100.0
Nasal polyp	618	3.3	•_	*_	87.9	78	3.0	*	*_	*55.1
Chronic laryngitis	818	4.3	*0.4	*0.4	72.0	97	3.8	*3.1	*3.1	*55.7
Hay fever, without asthma (includes upper respiratory allergy)477, 478.8	15,300	81.0	2.0	0.7	73.1	1,309	50.6	*2.4	*0.5	71.7
Pleurisy	427	2.3	*0.7	*_	89.2	*18	*0.7	*_	*_	*100.0
Pneumoconiosis	270	1.4	44.1	42.6	94.4	*21	*0.8	*14.3	*14.3	*81.0
Other chronic interstitial pneumonia	233	1.2	*11.2	*9.4	98.3	*10	*0.4	*_	*_	*100.0
Bronchiectasis	130	0.7	*19.2	*19.2	93.8	*5	*0.2	*_	*_	*100.0

¹Ninth revision International Classification of Diseases.

Table 9. Average annual number of selected reported chronic digestive conditions, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Cond	litions causir	g
	Number of			Age			Activity limit	1 physician	
Chronic digestive condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17-44 years	45-64 years	65 years and over	In major and outside activity	In major activity	visit or more
			Rate	per 1,000	persons			Percent	
Ulcer of stomach and duodenum	3,789	17.3	*0.8	18.3	30.5	29.0	9.4	8.0	97.6
Frequent constipation	3,683	16.8	4.6	10.5	23.2	58.9	*0.1	*0.1	70.2
Hernia of abdominal cavity	3,902	17.8	3.2	8.3	36.5	55.9	14.9	12.1	97.4
Functional and symptomatic upper gastrointestinal disorders	3,908	17.8	2.2	17.4	29.1	36.7	*1.8	*1.5	67.8
Gallbladder conditions574, 575, 576.1–5,8,9, 793.3	1,451	6.6	*0.1	5.0	12.5	18.2	5.9	5.6	97.6
Gastritis and duodenitis535.0-2,4-6	1.733	7.9	1.4	7.1	14.5	14.7	*2.5	*2.1	91.6
Diverticula of Intestine	1,427	6.5	*0.1	*0.5	14.0	31.9	6.1	5.3	97.9
Chronic enteritis and colitis	2,116	9.6	4.1	8.7	14.0	18.7	6.1	4.6	89.9
Intestinal conditions	1,615	7.4	*0.8	6.2	14.9	14.0	4.9	*4.2	92.9
Stomach trouble, not otherwise specified	809	3.7	*0.6	3.6	5.4	8.3	*8.4	*7.9	85.0
Liver conditions	491	2.2	*0.1	2.0	5.3	*2.7	21.8	20.0	99.4

¹Ninth revision International Classification of Diseases.

NOTE: Relative standard errors of estimates for this table are found in appendix I, figures I and III.

Table 10. Average annual number of selected reported chronic digestive conditions among males, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

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[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Cond	litions causir	ŋg
	Number of			Age			Activity limit	tation	1 physician
Chronic digestive condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
		Rate per 1,000 persons			Percent				
Ulcer of stomach and duodenum	1,810	17.1	*0.3	17.5	33.8	30.8	12.4	11.2	98.7
Frequent constipation	858	8.1	3.6	2.8	11.2	39.2	*_	*_	70.7
Hernia of abdominal cavity	2,056	19.4	4.8	8.1	44.9	61.9	14.3	11.1	96.7
Functional and symptomatic upper gastrointestinal disorders 536, 783.0, 787.0.1	2,054	19.4	*2.1	20.7	33.1	36.4	*1.5	*1.1	64.7
Gallbladder conditions574, 575, 576.1–5,8,9, 793.3	307	2.9	*_	*0.7	7.9	11.2	*7.5	*5.9	98.7
Gastritis and duodenitis	717	6.8	*1.2	6.5	13.4	10.7	*2.0	*2.0	91.5
Diverticula of intestine	382	3.6	*0.1	*0.2	9.8	16.6	*8.6	*8.6	95.0
Chronic enteritis and colitis	642	6.1	4.5	5.2	7.9	10.7	*8.3	*5.1	89.9
Intestinal conditions	410	3.9	*0.4	3.4	7.2	9.5	*5.6	*5.6	83.7
Stomach trouble, not otherwise specified	348	3.3	*0.7	2.6	5.9	8.5	*14.9	*14.9	77.6
Liver conditions	276	2.6	*0.1	2.2	6.3	*4.2	*25.0	*23.2	98.9

¹Ninth revision International Classification of Diseases.

Table 11. Average annual number of selected reported chronic digestive conditions among females, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Cona	litions causin	g
	Number of			Age			Activity limit	1 physician	
Chronic digestive condition and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45-64 years	65 years and over	In major and outside activity	In major activity	visit or more
			Rate	per 1,000	persons			Percent	
Ulcer of stomach and duodenum	1,979	17.4	*1.4	19.1	27.4	27.7	6.7	5.2	96.6
Frequent constipation	2,825	24.9	5.6	17.8	34.2	72.6	*0.2	*0.2	70.1
Hernia of abdominal cavity	1,846	16.2	*1.6	8.5	28.8	51.7	15.5	13.2	98.1
Functional and symptomatic upper gastrointestinal disorders	1,854	16.3	*2.2	14.3	25.4	37.0	*2.1	*1.8	71.1
Gallbladder conditions574, 575, 576.1–5,8,9, 793.3	1,144	10.1	*0.1	9.0	16.7	23.0	*5.5	*5.5	97.3
Gastritis and duodenitis	1,016	8.9	*1.6	7.7	15.4	17.5	*3.0	*2.2	91.7
Diverticula of intestine	1,044	9.2	•_	*0.7	17.8	42.5	*5.2	*4.0	99.1
Chronic enteritis and colitis	1,474	13.0	3.7	11.9	19.7	24.2	5.2	*4.3	89.9
Intestinal conditions	1,205	10.6	*1.2	8.9	21.9	17.2	*4.6	*3.7	96.1
Stomach trouble, not otherwise specified	461	4.1	*0.6	4.5	5.0	8.2	*3.5	*2.6	90.7
Liver conditions	215	1.9	•_	1.9	4.3	*1.8	*17.7	*15.8	100.0

¹Ninth revision International Classification of Diseases.

NOTE: Relative standard errors of estimates for this table are found in appendix I, figures I and III.

Table 12. Average ann_al number of selected reported chronic digestive conditions, rate per 1,000 persons, and percent of conditions causing activity limitation and physician visits, by race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

			White					Black		
			Co	nditions c	ausing			Co	nditions c	ausing
	Number		Activity I	imitation		conditions in		Activity I	imitation	
Chronic digestive condition and ICD code ¹	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more		Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more
				Percen	t				Percen	t
Ulcer of stomach and duodenum	3,301	17.5	8.0	7.0	97.5	415	16.1	19.8	*16.1	97.6
Frequent constipation	3,100	16.4	*0.2	*0.2	70.3	529	20.5	*_	*_	72.0
Hernia of abdominal cavity	3,575	18.9	14.7	11.8	97.3	304	11.8	*17.1	*15.8	98.0
Functional and symptomatic upper gastrointestinal disorders 536, 783.0, 787.0,1	3,409	18.0	*1.6	*1.2	67.2	402	15.6	*3.0	*3.0	72.9
Gallbladder conditions	1,315	7.0	*4.9	*4.6	97.6	118	4.6	*17.8	*17.8	96.6
Gastritis and duodenitis	1,473	7.8	*2.9	*2.4	90.6	210	8.1	*_	*	97. 1
Diverticula of intestine	1,393	7.4	6.2	5.4	97.9	*21	*0.8	*_	*_	*100.0
Chronic enteritis and colitis	1,979	10.5	6.5	4.9	90.4	107	4.1	*_	*_	76.6
Intestinal conditions	1,494	7.9	*4.8	*4.0	92.5	108	4.2	*7.4	*7.4	97.2
Stomach trouble, not otherwise specified537.9	684	3.6	*6.7	*6.1	85.2	105	4.1	*21.0	*21.0	81.0
Liver conditions	442	2.3	19.7	17.9	99.1	*45	*1.7	*42.2	*42.2	*100.0

¹Ninth revision International Classification of Diseases.

Table 13. Average annual number of selected reported impairments, and conditions of the nervous system and sense organs, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Conc	litions causir	g
	Number of			Age			Activity limi	tation	1 physician
Impairment, chronic condition of nervous system and sense organs, and ICD code ¹	conditions in thousands	All ages	Under 17 years	17-44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
Impairment			Rate	per 1,000	persons			Percent	
Visual impairments	8,545	38.9	9.6	28.1	53.4	125.8	16.7	12.0	88.5
Hearing impairments	17,565	80.0	16.7	44.2	129.7	282.6	3.9	2.3	73.7
Speech impairments	2,150	9.8	15.9	6.6	8.1	10.8	9.0	6.4	60.2
Absence of extremities or parts of extremities (excludes tips of fingers or	1,715	7.8	1.5	4.1	16.2	22.3	18.2	13.5	99.6
toes only)X20–X29 Absence of entire finger(s) and/or	1,084	4.9	*0.7	2.8	11.0	12.4	*5.7	*2.5	99.6
thumb(s) only									
Other extremities or parts of extremities absentX20, X21, X23, X24, X26-X29	631	2.9	*0.8	1.3	5.2	9.9	39.0	32.3	99.5
Paralysis, complete or partial, of extremities or parts of extremities	1,215	5.5	1.7	3.4	7.8	19.2	65.7	54.4	98.6
Deformities or orthopedic	18,427	83.9	19.8	92.8	118.4	142.4	31.6	22.4	91.2
impairmentsX70–X76, X78–X89 Deformities or orthopedic impairments	11,684	53.2	9.5	62.2	77.5	80.1	25.8	19.6	88.6
of back	2,959	13.5	2.8	13.7	20.2	26.3	25.3	17.0	92.7
upper extremities	5,345	24.3	8.4	23.3	33.3	51.1	43.7	29.1	95.0
Condition of nervous system and sense organs									
Glaucoma, all forms	1,471	6.7	*0.1	1.3	10.4	37.2	12.4	9.2	99.2
Cataracts, all forms	3.964	18.1	*0.7	1.5	16.6	127.0	9.6	7.4	97.4
Color vision deficiencies	1,966	9.0	3.1	10.0	13.6	10.6	*2.2	*1.0	65.5
Multiple sclerosis	113	0.5	*_	*0.5	*1.2	*0.5	77.0	67.3	92.9
Epilepsy, all types, or chronic convulsions, cause unknown	872	4.0	3.1	4.7	4.3	*2.5	42.8	33.6	99.5
Migraine	5.659	25.8	5.6	35.7	36.3	16.7	3.8	2.4	85.7
Sciatica	1,417	6.5	*_	4.1	13.5	18.3	8.3	6.4	83.5
Neuralgia. neuritis, specified sites and types, not elsewhere classified350,1,2, 351, 352.1, 355.1,2,8, 357.0	1,100	5.0	*0.1	2.0	10.0	19.6	10.4	*6.5	88.1

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

Table 14. Average annual number of selected reported impairments, and conditions of the nervous system and sense organs among males, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

Impairment, chronic condition of nervous system and sense organs, and ICD code ¹	Number						Cond	Conditions causing		
	of conditions in thousands	Age					Activity limitation		1 physiciar	
		All ages	Under 17 years	17 -44 years	4 5-6 4 years	65 years and over	In major and outside activity	In major activity	visit or more	
Impairment		Rate per 1,000 persons								
Visual impairmentsX00-X04	4,922	46.5	12.8	39.2	69.3	133.3	15.3	11.1	83.7	
Hearing impairments	9,639	91.0	17.6	57.3	159.3	323.2	3.7	2.3	73.0	
Speech impairmentsX10-X11	1,376	13.0	20.8	9.0	9.7	14.6	9.3	5.9	59.9	
Absence of extremities or parts of extremities (excludes tips of fingers or	1,364	12.9	*2.0	7.3	27.6	40.6	18.7	14.2	99.8	
toes only)										
Absence of entire finger(s) and/or thumb(s) only	898	8.5	*0.8	5.3	19.6	23.1	*5.2	*3.0	99.6	
Other extremities or parts of extremities absent	466	4.4	*1.2	2.0	8.0	17.5	43.8	35.8	100.0	
Paralysis, complete or partial, of extremities or parts of extremities	684	6.5	•1.9	4.5	10.3	21.4	68.9	54.4	98.1	
Deformities or orthopedic impairmentsX70-X76, X78-X89	9,119	86.1	17.9	101.4	125.5	138.0	32.9	23.1	92.1	
Deformities or orthopedic impairments of back	5,236	49.4	6.4	60.0	77.0	72.0	27.3	21.4	89.7	
Deformities or orthopedic impairments of upper extremities or parts of upper extremities	1,757	16.6	3.1	18.8	24.9	29.6	24.7	17.0	93.1	
Deformities or orthopedic impairments of lower extremities or parts of lower extremitiesX75, X76, X78, X85, X86	2,867	27.1	8.8	29.4	37.1	49.9	43.6	28.3	95.8	
Condition of nervous system and sense organs										
Glaucoma, all forms	643	6.1	*0.1	*1.5	10.0	37.1	14.8	*11.5	98.8	
Cataracts, all forms	1,385	13.1	*1.0	2.0	16.3	93.8	10.2	9.0	97.4	
Color vision deficiencies	1,830	17.3	5.8	19.6	26.1	22.7	*2.2	*1.1	66.6	
Multiple sclerosis	*27	*0.3	•	*0.2	*0.8	*0.4	*85.2	*70.4	*100.0	
Epilepsy, all types, or chronic convulsions, cause unknown	452	4.3	3.7	5.4	*3.4	*2.6	52.0	42.7	99.1	
Migraine	1,460	13.8	6.2	19.6	14.9	7.6	*5.0	*4.0	83.3	
Sciatica	442	4.2	•_	2.8	7.9	15.4	*9.5	*6.1	79.4	
Neuralgia, neuritis, specified sites and types, not elsewhere classified350,1,2, 351, 352.1, 355.1,2,8, 357.0	297	2.8	*0.1	*1.2	- 4.5	14.7	*17.8	*11.8	87.9	

¹Ninth revision international Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

NOTE: Relative standard errors of estimates for this table are found in appendix I, figures I and III.

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Table 15. Average annual number of selected reported impairments, and conditions of the nervous system and sense organs among females, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

Impairment, chronic condition of nervous system and sense organs, and ICD code ¹	• • • • •						Cond	1	
	Number of conditions in thousands	Age					Activity limitation		1 physician
		All ages	Under 17 years	17- 44 years	45–64 years	65 years and over	in major and outside activity	In major activity	visit or more
Impairment		Rate per 1,000 persons			Percent				
Visual impairments	3.622	31.9	6.2	17.6	39.0	120.5	18.6	13.3	95.1
Hearing impairments	7,926	69.8	15.8	31.8	102.7	254.4	4.1	2.2	74.5
Speech impairmentsX10-X11	774	6.8	10.8	4.2	6.6	8.1	*8.5	*7.2	60.9
Absence of extremities or parts of extremities (excludes tips of fingers or	351	3.1	*0.9	*1.2	5.8	9.6	*16.2	*10.8	98.9
toes only)									
Absence of entire finger(s) and/or thumb(s) only	186	1.6	*0.6	*0.5	*3.1	*5.1	*8.6	*_	100.0
Other extremities or parts of extremities absentX20, X21, X23, X24, X26-X29	165	1.5	*0.3	*0.6	*2.7	*4.5	*25.5	*23.0	97.6
Paralysis, complete or partial, of extremities or parts of extremities	531	4.7	*1.5	2.3	5.4	17.8	61.6	54.4	99.2
Deformities or orthopedic impairmentsX70–X76, X78–X89	9,308	81.9	21.9	84.6	111.9	145.4	30.4	21.6	90.2
Deformities or orthopedic impairments of backX70, X71, X80	6,448	56.7	12.7	64.2	78.0	85.8	24.5	18.2	87.7
Deformities or orthopedic impairments of upper extremities or parts of upper extremities	1,202	10.6	*2.5	8.8	16.0	24.1	26.3	17.0	92.0
Deformities or orthopedic impairments of lower extremities or parts of lower extremitiesX75, X76, X78, X85, X86	2,478	21.8	7.8	17.5	29.7	51.9	43.7	30.0	94.0
Condition of nervous system and sense organs									
Glaucoma, all forms	828	7.3	*_	*1.2	10.7	37.2	10.5	*7.5	99.6
Cataracts, all forms	2,579	22.7	*0.4	*1.1	17.0	150.2	9.3	6.4	97.4
Color vision deficiencies	135	1.2	*0.2	*1.0	*2.1	*2.3	*3.0	*_	*51.1
Multiple sclerosis	86	0.8	*	*0.9	*1.5	*0.6	*74.4	*65.1	90.7
Epilepsy, all types, or chronic convulsions, cause unknown	420	3.7	*2.5	4.1	5.2	*2.5	32.9	23.6	100.0
Migraine	4,199	37.0	5.0	51.0	55.8	23,1	3.4	1.8	86.5
Sciatica	975	8.6	*_	5.4	18.7	20.3	7.8	*6.5	85.3
Neuralgia, neuritis, specified sites and types, not elsewhere classified350,1,2, 351, 352.1, 355.1,2,8, 357.0	803	7.1	*_ `	2.9	- 14.9	23.0	*7.7	*4.5	88.2

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

Table 16. Average annual number of selected reported impairments and conditions of the nervous system and sense organs, rate per 1,000 persons, and percent of conditions causing activity limitation and physician visits, by race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix II]

			White					Black		
			Co	nditions c	ausing			Co	nditions c	ausing
	Number		Activity	limitation		Number		Activity	limitation	
Impairment, chronic condition of nervous system and sense organs , and ICD code ¹	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more
Impairment				Percen	t				Percen	t
Visual impairments	7.551	40.0	16.8	11.6	88.5	893	34.6	15.8	14.4	88.1
Hearing impairments	16,048	84.9	3.9	2.3	74.2	1,264	48.9	*3.8	*2.5	67.2
Speech impairments	1,564	8.3	9.8	6.6	64.7	550	21.3	*4.7	*4.2	45.6
Absence of extremities or parts of extremities (excludes tips of fingers or	1,531	8.1	16.1	10.8	99.5	178	6.9	*36.5	*36.5	100.0
toes only)X20–X29 Absence of entire finger(s) and/or thumb(s) onlyX22, X25	984	5.2	*6.0	*2.4	99.6	94	3.6	*3.2	*3.2	100.0
Other extremities or parts of extremities absentX20, X21, X23, X24, X26-X29	547	2.9	33.6	26.1	99.3	84	3.3	*73.8	*73.8	100.0
Paralysis, complete or partial, of extremities or parts of extremities	984	5.2	66.4	54.3	98.3	209	8.1	62.2	55.5	100.0
Deformities or orthopedic impairmentsX70-X76, X78-X89	16,351	86.5	31.1	21.4	90.7	1,832	70.9	37.3	30.7	94.4
Deformities or orthopedic impairments of back	10,475	55.4	25.1	18.8	88.0	1,059	41.0	32.9	28.3	93.8
Deformities or orthopedic impairments of upper extremities or parts of upper extremities	2,564	13.6	24.5	15.2	92.8	347	13.4	32.9	30.0	90.5
Deformities or orthopedic impairments of lower extremities or parts of lower extremitiesX75, X76, X78, X85, X86	4,667	24.7	43.6	28.4	95.2	614	23.8	43.8	33.4	93.0
Condition of nervous system and sense organs										
Glaucoma, all forms	1,278	6.8	12.4	9.4	99.4	190	7.4	*13.2	*8.4	97.9
Cataracts, all forms	3,552	18.8	9.9	7.3	98.1	375	14.5	*8.0	*8.0	89.9
Color vision deficiencies	1,876	9.9	*2.3	*1.1	65.6	79	3.1	*_	*_	*60.8
Multiple sclerosis	105	0.6	79.0	72.4	96.2	*8	*0.3	*50.0	*_	*50.0
Epilepsy, all types, or chronic convulsions, cause unknown	758	4.0	41.3	31.9	99.5	114	4.4	*52.6	*44.7	100.0
Migraine	4,927	26.1	3.8	2.2	85.7	664	25.7	*4.4	*3.6	87.3
Sciatica	1,394 1,021	7.4 5.4	8.2 10.3	6.5 *6.7	83.2 88.4	*23 *71	*0.9 *2.7	*21.7 *14.1	*- *4.2	*100.0 *93.0

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

Table 17. Average annual number of selected reported chronic conditions of the skin and subcutaneous tissue and other related conditions, and conditions of the musculoskeletal system and connective tissue, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

	N/						Сопа	ng	
	Number of			Age			Activity limit	tation	1 physician
Chronic condition of skin and subcutaneous tissue, chronic condition of musculoskeletal system and connective tissue, and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
Condition of skin and subcutaneous tissue			Rate	per 1,000	persons			Percent	
Chronic infections of skin and subcutaneous tissue, not elsewhere classified680–682, 684–686, 723.6, 729.3, 771.4	277	1.3	*1.0	1.6	*1.1	*1.0	*7.2	*4.3	92.4
Eczema, dermatitis, and urticaria, not elsewhere classified277.6, 373.3, 690–692, 693.1, 694.0–3, 708, 995.1,3	8,107	36.9	39.1	39.9	33.0	27.4	2.9	1.8	87.5
Psoriasis and similar disorders	1,751	8.0	1.8	8.2	13.3	12.3	*1.8	*1.4	91.3
Other inflammatory conditions of skin and subcutaneous tissue	3,352	15.3	7.9	16.2	17.8	24.7	*1.0	*0.6	58.9
Corns and callosities	4,455	20.3	*1.3	15.5	37.6	53.7	*0.9	*0.8	40.9
Diseases of nail	4,263	19.4	4.8	19.4	25.4	44.0	*0.3	*_	44.8
Disease of sebaceous glands, not elsewhere classified (acne)	5,713	26.0	22.8	40.3	10.5	6.7	*0.8	*0.1	72.6
Other diseases of skin and subcutaneous tissue, not elsewhere classified 694.8,9, 701.5, 702, 704, 705, 707, 709, 782.8	1,533	7.0	2.8	6.6	9.9	13.4	*4.6	*4.1	76.8
Infectious and parasitic diseases									
Dermatophytosis and dermatomycoses110, 111	583	2.7	*1.1	3.3	3.4	2.4	*_	*_	79.8
Neoplasms									
Neoplasms of the skin	1,299	5.9	*0.4	3.7	10.7	19.0	*1.8	*0.9	96.1
Condition of musculoskeletal system and connective tissue									
Arthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5-7,9	26,958	122.8	3.1	48.9	255.8	458.4	20.8	16.8	81.0
Rheumatism, nonarticular and unspecified	692	3.2	* 0.2 .	2.1	4.9	11.0	*7.9	*6.8	71.4
Osteomyelitis and other diseases of bone	1,020	4.6	2.0	3.2	6.7	13.0	34.3	24.9	96.7
Displacement of intervertebral disc722.0-7	2,893	13.2	*0.3	10.8	31.1	21.1	45.9	38.0	96.9
Bunion	1,893	8.6	*0.4	4.8	17.3	27.8	*1.6	*1.2	49.0
Synovitis, bursitis and tenosynovitis	4,915	22.4	1.5	17.7	53.4	34.9	5.8	4.5	89.7 [.]

¹Ninth revision International Classification of Diseases.

Table 18. Average annual number of selected reported chronic conditions of the skin and subcutaneous tissue and other related conditions, and conditions of the musculoskeletal system and connective tissue among males, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979–81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

	Number						Cond	litions causir	ng
	of	_		Age			Activity limit	tation	1 physicia
Chronic condition of skin and subcutaneous tissue, chronic condition of musculoskeletal system and connective tissue, and ICD code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
Condition of skin and subcutaneous tissue			Rate	per 1,000	persons			Percent	
Chronic infections of skin and subcutaneous tissue, not elsewhere classified680-682, 684-686, 723.6, 729.3, 771.4	157	1.5	*0.7	2.0	*1.6	*1.2	*4.5	*_	91.1
Eczema, dermatitis, and urticaria, not elsewhere classified	3,059	28.9	36.0	27.2	23.7	25.8	3.7	*1.7	87.9
Psoriasis and similar disorders	848	8.0	*1.6	8.6	13.5	12.7	*0.9	*0.5	89.0
Other inflammatory conditions of skin and subcutaneous tissue	1,391	13.1	7.3	13.3	17.0	21.9	*0.6	*0.6	60.0
Corns and callosities	1,421	13.4	*0.8	12.3	24.5	33.4	*1.3	*1.3	38.8
Diseases of nail	1,758	16.6	5.6	19.7	19.8	28.7	*_	*_	44.1
Disease of sebaceous glands, not elsewhere classified (acne)	2,647	25.0	22.8	37.0	9.9	8.0	*0.6	*0.1	69.3
Other diseases of skin and subcutaneous tissue, not elsewhere classified694,8,9, 701,5, 702, 704, 705, 707, 709, 782.8	775	7.3	2.8	7.2	11.4	13.0	*4.1	*4.1	75.5
Infectious and parasitic diseases									
Dermatophytosis and dermatomycoses110, 111	346	3.3	*1.1	4.2	4.6	*2.6	*_	*-	72.8
Neoplasms									
Neoplasms of the skin	627	5.9	*0.3	2.3	12.5	25.8	*2.6	*1.3	97.3
Condition of musculoskeletal system and connective tissue									
Arthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5-7,9	9,540	90.1	2.7	36.6	201.4	364.4	19.7	16.3	78.0
Rheumatism, nonarticular and unspecified	275	2.6	*0.2	*1.2	4.3	12.5	*8.7	*8.7	65.5
Osteomyelitls and other diseases of bone	422	4.0	2.5	3.6	5.9	*6.2	33.6	21.1	95.0
Displacement of intervertebral disc722.0-7	1,582	14.9	*0.1	12.1	38.5	22.7	44.8	35.9	96.1
Bunion	409	3.9	*0.1	2.1	9.0	12.5	*5.9	*4.9	53.3
Synovitis, bursitis and tenosynovitis	1,888	17.8	*1.2	14.1	47.3	22.6	4.5	*3.3	85.9

¹Ninth revision International Classification of Diseases.

Table 19. Average annual number of selected reported chronic conditions of the skin and subcutaneous tissue and other related conditions, and conditions of the musculoskeletal system and connective tissue among females, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979–81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

							Conc	litions causir	ng
	Number of			Age			Activity limi	tation	1 physicial
Chronic condition of skin and subcutaneous tissue, chronic condition of musculoskeletal system and connective tissue, and ICD coce ¹	conditions in thousands	All ages	Under 17 years	17 –44 years	45-64 years	65 years and over	In major and outside activity	In major activity	visit or more
Condition of skin and subcutaneous tissue			Rate	per 1,000	persons			Percent	
Chronic infections of skin and subcutaneous tissue, not elsewhere classified680-682, 684-686, 723.6, 729.3, 771.4	119	1.0	*1.3	*1.2	*0.6	*0.9	*10.1	*10.1	95.0
Eczema, dermatitis, and urticaria, not elsewhere classified277.6, 373.3, 690–692, 693.1, 694.0–3, 708, 995.1,3	5,047	44.4	42.3	51.8	41.4	28.5	2.5	1.9	87.3
Psoriasis and similar disorders	903	7.9	•1.9	7.8	13.2	12.1	*2.5	*2.2	93.2
Other inflammatory conditions of skin and subcutaneous tissue	1,961	17.3	8.5	19.0	18.6	26.7	*1.2	*0.6	58.0
Corns and callosities	3,033	26.7	*1.8	18.5	49.6	67.8	*0.8	*0.5	41.9
Diseases of nail	2,505	22.0	4.0	19.1	30.5	54.8	*0.5	*_	45.3
Disease of sebaceous glands, not elsewhere classified (acne)	3,066	27.0	22.7	43.3	11.0	5.9	*0.9	*0.1	75.5
Other diseases of skin and subcutaneous tissue, not elsewhere classified 694.8,9, 701.5, 702, 704, 705, 707, 709, 782.8	758	6.7	2.8 .	6.0	8.6	13.6	*5.0	*4.1	78.1
Infectious and parasitic diseases									
Dermatophytosis and dermatomycoses110, 111	237	2.1	*1.2	2.5	*2.3	*2.2	*_	*_	89.9
Neoplasms									
Neoplasms of the skin	672	5.9	*0.6	5.1	9.1	14.2	*1.2	*0.6	94.8
Condition of musculoskeletal system and connective tissue									
Arthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5–7,9	17,418	153.3	3.6	60.7	305.3	524.0	21.4	17.1	82.6
Rheumatism, nonarticular and unspecified	416	3.7	* 0.3 ·	2.9	. 5.5	10.0	*7.5	*5.5	75.5
Osteomyelitis and other diseases of bone	598	5.3	*1.5	2.8	7.4	17.8	34.8	27.6	97.8
Displacement of intervertebral disc722.0-7	1,310	11.5	*0.5	9.6	24.3	19.9	47.3	40.6	97.7
Bunion	1,484	13.1	*0.8	7.3	24.8	38.4	*0.5	*0.2	47.8
Synovitis, bursitis and tenosynovitis	3,026	26.6	*1.8	21.0	59.0	43.5	6.7	5.2	92.2

¹Ninth revision International Classification of Diseases.

Table 20. Average annual number of selected reported chronic conditions of the skin and subcutaneous tissue and other related conditions, and conditions of the musculoskeletal system and connective tissue, rate per 1,000 persons, and percent of conditions causing activity limitation and physician visits, by race: United States, 1979–81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I Definitions of terms are given in appendix II]

			White					Black		
			Cc	onditions c	ausing			Co	nditions c	ausing
	Number		Activity	limitation		Number		Activity	imitation	
Chronic condition of skin and subcutaneous tissue, chronic condition of musculoskeletal system and connective tissue, and ICD code ¹	of conditions ın thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more
Condition of skin and subcutaneous tissue				Percen	t				Percen	t
Chronic infections of skin and subcutaneous tissue, not elsewhere classified680–682, 684–686, 723.6, 729.3, 771.4	223	1.2	*7.2	*5.4	95.1	*50	*1.9	*8.0	*_	*88.0
Eczema, dermatitis, and unticaria, not elsewhere classified	7,235	38.3	3.0	1.9	87.4	664	25.7	*2.7	*1.7	88.4
Psoriasis and similar disorders	1,695 2,975	9.0 15.7	*1.8 *0.8	*1.4 *0.4	91.4 57.8	*42 298	*1.6 11.5	*_ *3.0	*- *3.0	*90.5 66.8
Corns and callosities	3,670 3,743 5,213	19.4 19.8 27.6	*0.9 *0.2 *0.7	*0.7 *- *0.1	43.1 45.8 72.5	723 445 433	28.0 17.2 16.8	*1.2 *- *2.1	*1.2 *- *0.9	31.3 39.1 76.7
Other diseases of skin and subcutaneous tissue, not elsewhere classified694.8,9, 701.5, 702, 704, 705, 707, 709, 782.8	1,346	7.1	*4.1	*3.6	77.6	172	6.7	*9.3	*9.3	69.2
Infectious and parasitic diseases										
Dermatophytosis and dermatomycoses110, 111	537	2.8	*_	*-	79.0	*37	*1.4	*_	*_	*86.5
Neoplasms										
Neoplasms of the skin	1,276	6.8	*1.9	*0.9	96.0	*23	*0.9	*_	*_	*100.0
Condition of musculoskeletal system and connective tissue										
Arthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5–7,9	24,039	127.2	20.1	16.2	80.8	2,738	105.9	26.7	21.9	82.6
Rheumatism, nonarticular and unspecified	596	3.2	*7.9	*7.2	71.3	91	3.5	*8.8	*4.4	*75.8
Osteomyelitis and other diseases of bone	960	5.1	34.3	24.4	96.5	*50	*1.9	*40.0	*40.0	*100.0
Displacement of intervertebral disc	2,660	14.1	46.2	37.8	97.1	213	8.2	40.8	38.5	93.9
Bunion	1,644 4,583	8.7 24.2	*1.9 5.5	*1.4 4.0	50.2 89.8	233 292	9.0 11.3	*- *12.3	*- *12.3	37.3 89.4

¹Ninth revision International Classification of Diseases.

Table 21. Average annual number of selected reported chronic endocrine, nutritional, and metabolic diseases and immunity disorders; diseases of the blood and blood-forming organs; and genitourinary conditions, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

	Number						Conc	ditions causin	Ig
Chronic endocrine, nutritional, and metabolic	of			Age			Activity limi	tation	1 physiciar
disease and immunity disorder; chronic	conditions		Under			65 years	In major		visit
disease of the blood and blood-forming organs; chronic genitourinary condition; and ICD Code ¹	in thousands	All ages	17 years	17-44 years	45-64 vears	and over	and outside activity	In major activity	or more
Endocrine, nutritional, and metabolic diseases and immunity disorders			Hate	per 1,000	persons		<u> </u>	Percent	
Gout	1,846	8.4	*0.1	3.3	20.3	26.9	9.6	8.0	95.5
All thyroid conditions	2,931	13.3	*0.9	11.7	26.5	26.2	6.4	4.8	99.4
Goiter, all forms	431	2.0	*0.1	2.0	2.6	5.2	*4.4	*3.5	99.3
Thyroid trouble, not otherwise specified	980	4.5	*0.4	3.0	9.4	11.2	*6.3	*6.3	99.4
Other specified diseases of thyroid gland	1,520	6.9	*0.4	6.7	14.5	9.8	7.0	*4.3	99.5
246.0-3,8, 648.1, 775.3 Diabetes	5.466	24.9	*1.1	9.4	56.0	86.3	32.1	25.9	99.7
Cystic fibrosis	77	0.4	*0.2	*0.4	*0.4	*0.3	*27.3	*23.4	100.0
Diseases of the blood and blood forming organs									
All anemia conditions	2,740	12.5	7.9	14.3	10.6	20.1	5.9	4.7	97.7
Iron deficiency anemia	477	2.2	*1.1	3.3	*1.2	*2.2	*2.7	*2.7	100.0
Pemicious and other deficiency anemias	99	0.5	•_	*0.1	*0.4	*2.9	*23.2	*19.2	100.0
Other specified anemias 282-284, 285.0,8	111	0.5	*0.4	*0.7	*0.3	*0.2	*42.3	*33.3	96.4
Anemia, unspecified	2,054	9.4	6.3	10.1	8.7	14.9	3.8	*2.9	97.1
Genitourinary conditions									
All diseases of urinary system 099.4, 344.6, 580-583, 584.5-9, 585, 587, 588.0,8,9, 589-591, 592.0,1, 593.0-9, 595.0-3,8,9, 596-598, 599.0-6,8,9, 619.0, 788.6-8, 793.5, 794.4	5,578	25.4	7.3	26.2	32.6	53.0	11.2	9.0	97.0
Nephritis, not elsewhere classified580-583, 584.6-9, 585, 587	217	1.0	*0.2	1.0	*0.8	*3.0	*32.7	*27.2	100.0
Calculus of kidney and ureter	809	3.7	*0.2	3.5	6.2	8.2	*8.3	*6.8	97.5
Other diseases of kidney and ureter, not elsewhere classified584.5, 588.0,8,9, 589–591, 593.0–8, 794.4	837	3.8	1.6	5.0	3.6	4.9	13.0	10.3	100.0
Kidney trouble or disease, not otherwise	1,066	4.9	*1.1	3.8	7.8	12,7	22.1	18.3	94.0
specified593.9 Diseases of the urinary system,	2,649	12.1	4.1	12.9	14.2	24.3	5.5	4.0	96.9
not elsewhere classified099.4, 344.6, 595.0–3,8,9, 596–598, 599.0–6,8,9, 619.0, 788.6–8, 793.5									
Diseases of prostate 600, 601.0-3,8,9, 602	1,315	6.0	*_	2.1	10.5	27.2	6.9	5.9	96.5
All female troubles except breast614, 615,	2,349	10.7	*1.1	18.6	9.5	5.5	7.0	4.6	95.3
616.0,1,3-5,8,9, 617, 618, 619.1,2,8,9, 620.0,1,3-9, 621.1-9, 622.0-6,8,9, 623.0-6,8,9, 624.0-5,8,9, 625.2-5,8, 626, 627, 628.0,2-4,8,9, 629									
Disease of uterus and ovary,	1,165	5.3	*0.1	9.5	3.9	4.5	8.8	6.9	99.4
not elsewhere classified									
620.0,1,3-9, 621.1-9, 622.0-6,8,9, 625.5,									
627.3,8, 628,0,2 Other specified female genital	919	4.2	*1.0	6.9	4.5	*0.8	*4.1	*2.3	010
disorders	313	4.2	1.0	0.9	4.0	0.0	4. i	2.3	91.0
628.3,4,8,9, 629.0,1,8 Female trouble, not otherwise	264	1.2	*0.1	2.2	*1.2	*0.2	*8.7	*2.7	92.8
specified				660 t 644	1.484	v.£	0.7	2.1	02.0

¹Ninth revision International Classification of Diseases.

Table 22. Average annual number of selected reported chronic endocrine, nutritional, and metabolic diseases and immunity disorders; diseases of the blood and blood-forming organs; and genitourinary conditions among males; rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979–81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the retiability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

	Number							ditions causir	ig
Chronic endocrine, nutritional, and metabolic	of			Age			Activity limi	tation	1 physician
disease and immunity disorder; chronic disease of the blood and blood-forming organs; chronic genitourinary condition; and ICD Code ¹	conditions in thousands	All ages	Under 17 years	17–44 years	45–64 years	65 years and over	In major and outside activity	In major activity	visit or more
Endocrine, nutritional, and metabolic			-	per 1,000					
diseases and immunity disorders			nale		persons			Percent	
Gout	1,310	12.4	*0.1	5.6	30.7	41.9	9.2	7.4	96.0
All thyroid conditions	427	4.0	*0.7	3.4	6.8	11.3	*9.4	*7.0	100.0
Goiter, all forms	*56	*0.5	*0.1	*0.7	*0.4	*1.2	*7.1	*7.1	*100.0
Thyroid trouble, not otherwise specified	151	1.4	*0.3	*0.8	*2.8	*4.8	*12.6	*12.6	100.0
Other specified diseases of thyroid gland	220	2.1	*0.3	1.8	3.6	*5.4	*7.3	*2.7	100.0
Diabetes	2,344	22.1	*0.9	8.2	54.0	82.8	31.8	26.1	99.7
Cystic fibrosis	*14	*0.1	*0.2	*_	*_	*0.8	*71.4	*57.1	*100.0
Diseases of the blood and blood forming organs									
All anemia conditions	511	4.8	9.2	1.8	*2.9	9.3	*8.0	*8.0	96.9
Iron deficiency anemia	*62	*0.6	*1.3	*0.3	*0.3	*0.4	*-	*_	*100.0
Pernicious and other deficiency anemias	*25	*0.2	•-	*0.1	*0.1	*1.8	*24.0	*24.0	*100.0
Other specified anemias282-284, 285.0,8 Anemia, unspecified285.9, 648.2	*44 380	*0.4 3.6	*0.5 7.4	*0.5 *1.1	*0.2 *2.2	*0.4 *6.7	*45.5 *3.9	*45.5 *3.9	*100.0 95.8
Genitourinary conditions									
All diseases of urinary system 099.4, 344.6, 580–583, 584.5–9, 585, 587, 588.0,8,9, 589–591, 592.0,1, 593.0–9, 595.0–3,8,9, 596–598, 599.0–6,8,9, 619.0, 788.6–8, 793.5, 794.4	1,398	13.2	3.2	10.3	21.2	39.8	14.3	10.8	96.5
Nephritis, not elsewhere classified580-583, 584.6-9, 585, 587	92	0.9	*0.4	*1.2	*0.4	*1.8	*38.0	*29.3	100.0
Calculus of kidney and ureter 592.0,1	454	4.3	*0.2	3.8	8.8	8.9	*4.4	*3.5	98.5
Other diseases of kidney and ureter, not elsewhere classified584.5, 588.0,8,9, 589-591, 593.0-8, 794.4	124	1.2	*0.3	*1.2	. *1.1	*3.9	*12.9	*8.1	100.0
Kidney trouble or disease, not otherwise specified	367	3.5	*0.7	2.1	5.4	13.9	24.3	*19.9	92.4
Diseases of the urinary system,	362	3.4	*1.6	1.9	5.6	11.2	*11.0	*6.9	95.9
not elsewhere classified099.4, 344.6, 595.0–3,8,9, 596–598, 599.0–6,8,9, 619.0, 788.6–8, 793.5									
Diseases of prostate 600, 601.0-3,8,9, 602	1,315	12.4	*_	4.4	22.1	66.1	6.9	5.9	96.5
All female troubles except breast614, 615, 616.0, 1,3-5,8,9, 617, 618, 619.1,2,8,9, 620.0, 1,3-9, 621.1-9, 622.0-6,8,9, 623.0-6,8,9, 624.0-5,8,9, 625.2-5,8,		•••					•••	•••	
626, 627, 628.0,2–4,8,9, 629 Disease of uterus and ovary,									
not elsewhere classified614, 615, 616.0,1,3,4,8,9, 617, 618.0–6,8,9, 619.1,2,8,9, 620.0,1,3–9, 621.1–9, 622.0–6,8,9, 625.5, 627.3,8, 628,0,2									
Other specified female genital disorders									•••
Female trouble, not otherwise specified					•••				

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

Table 23. Average annual number of selected reported chronic endocrine, nutritional, and metabolic diseases and immunity disorders; diseases of the blood and blood-forming organs; and genitourinary conditions among females, rate per 1,000 persons by age, and percent of conditions causing activity limitation and physician visits: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

NumberChronic endocrine, nutritional, and metabolic disease and immunity disorder; chronic chronic genitourinary condition; and ICD Code1of conditions inAll chronic genitourinary condition; and ICD Code1inAll thousandsEndocrine, nutritional, and metabolic diseases and immunity disorders	*_ *1.1 *_ *0.6 *0.5 *1.2	Age 17-44 years e per 1,000 *1.1 19.6 3.2 4.9 11.4	45-64 years persons 10.9 44.4 4.6 15.5	65 years and over 16.4 36.6	Activity limi In major and outside activity *10.6 5.9	In major activity Percent *9.3	1 physician visit or more 94.6
$\begin{array}{c c} disease and immunity disorder; chronic conditions in All chronic genitourinary condition; and ICD Code throus ages in thousands ages in the blood and blood-forming organs; chronic genitourinary condition; and ICD Code throus ages in the blood ages ages in the blood code through the blood is ages and immunity disorders in the blood code through the blood co$	17 years Rate *_ *1.1 *_ *0.6 *0.5 *1.2	years e per 1,000 *1.1 19.6 3.2 4.9	years persons 10.9 44.4 4.6	and over 	and outside activity *10.6	activity Percent *9.3	visit or more
chronic genitourinary condition; and ICD Code ¹ thousands ages Endocrine, nutritional, and metabolic diseases and immunity disorders	years Rate *_ *1.1 *_ *0.6 *0.5 *1.2	years e per 1,000 *1.1 19.6 3.2 4.9	years persons 10.9 44.4 4.6	over 	outside activity	activity Percent *9.3	more
diseases and immunity disorders	*_ *1.1 *_ *0.6 *0.5 *1.2	*1.1 19.6 3.2 4.9	10.9 44.4 4.6			*9.3	04.6
Gout	*1.1 *_ *0.6 *0.5 *1.2	19.6 3.2 4.9	44.4 4.6				04 6
All thyroid conditions	*1.1 *_ *0.6 *0.5 *1.2	19.6 3.2 4.9	44.4 4.6				
Thyroid trouble, not otherwise 828 7.3 specified	*0.6 *0.5 *1.2	4.9				4.5	99.3
specified	*0.5 *1.2		15.5	8.1	*4.0	*2.9	98.9
thyroid gland	*1.2	11.4		15.6	*5.2	*5.2	99.4
Cystic fibrosis *63 *0.6 Diseases of the blood and blood forming organs *63 *0.6 All anemia conditions 280-284, 285.0, 1,8,9, 648.2, 776.6 2,229 19.6 Iron deficiency anemia 280, 285.1, 776.6 415 3.7 Pernicious and other deficiency anemias *74 *0.7 *0.7 Other specified anemias 282-284, 285.0, 8 *67 *0.6			24.3	12.9	6.9	*4.5	99.4
and blood forming organs All anemia conditions	*0.1	10.5 *0.9	57.9 *0.8	88.8 *-	32.3 *17.5	25.8 *17.5	99.8 *100.0
648.2, 776.6 Iron deficiency anemia 280, 285.1, 776.6 415 3.7 Pernicious and other deficiency *74 *0.7 anemias							•
Pernicious and other deficiency*74*0.7anemias.281*0.6Other specified anemias*67*0.6	6.4	26.0	17.7	27.6	5.4	3.9	97.9
Other specified anemias 282–284, 285.0,8 *67 *0.6	*0.9 *-	6.1 *0.2	*2.0 *0.7	*3.4 *3.6	*3.1 *23.0	*3.1 *17.6	100.0 *100.0
	*0.4	** 0	*0.4	*_	*00.0	*05.4	
	*0.4 5.1	*1.0 18.8	*0.4 14.6	20.6	*38.8 *3.8	*25.4 *2.7	* 95.5 97.4
Genitourinary conditions							
All diseases of urinary system 099.4, 344.6, 4,180 36.8 580-583, 584.5-9, 585, 587, 588.0,8,9, 589-591, 592.0,1, 593.0-9, 595.0-3,8,9, 596-598, 599.0-6,8,9, 619.0, 788.6-8, 793.5, 794.4	11.5	41.3	43.1	62.2	10.2	8.4	97.2
Nephritis, not elsewhere classified580–583, 125 1.1 584.6–9, 585, 587	*	*0.9	*1.3	*3.8	*28.8	*25.6	100.0
Calculus of kidney and ureter 592.0,1 355 3.1	*0.2	3.2	3.8	7.7	*13.0	*11.0	96.3
Other diseases of kidney and ureter, 713 6.3 not elsewhere classified584.5, 588.0,8,9, 589-591, 593.0-8, 794.4	3.0	8.6	5.9	5.5	13.0	10.7	100.0
Kidney trouble or disease, not otherwise 699 6.2 specified	*1.6	5.3	10.0	11.9	21.0	17.3	94.8
Diseases of the urinary system, 2,287 20.1 not elsewhere classified099.4, 344.6, 595.0-3,8,9, 596-598, 599.0-6,8,9, 619.0, 788.6-8, 793.5	6.6	23.4	22.0	33.0	4.6	3.6	97.0
Diseases of prostate 600, 601.0-3,8,9, 602	*2.2	36.2	18.1	9.3	7.0	4.6	95.3
Disease of uterus and ovary, 1,165 10.3 not elsewhere classified	*0.1	18.4	7.4	7.6	8.8	6.9	99.4
Other specified female genital 919 8.1 disorders	*2.0	13.5	8.5	*1.3	* 4 -	*0.0	91.0
Female trouble, not otherwise 264 2.3 specified	*0.1	4.3	*2.2		*4.1	*2.3 *2.7	31.0

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey.

Table 24. Average annual number of selected reported chronic endocrine, nutritional, and metabolic diseases and immunity disorders; diseases of the blood and blood-forming organs; and genitourinary conditions; rate per 1,000 persons, and percent of conditions causing activity limitation and physician visits, by race: United States, 1979–81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

			White					Black		
			Co	nditions c	ausing			Co	nditions ca	ausing
	Number		Activity	limitation		Number		Activity	imitation	·
Chronic endocrine, nutritional, and metabolic disease and immunity disorder; chronic disease of the blood and blood-forming organs; chronic genitourinary condition; and ICD Code ¹	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more	of conditions in thousands	Rate per 1,000 persons	In major and outside activity	In major activity	1 physician visit or more
Endocrine, nutritional, and metabolic				Percen	t				Percent	
diseases and immunity disorders	4 040									
Gout	1,616 2,721	8.6 14.4	8.0 6.3	6.0 4.8	95.3 99.4	199 190	7.7 7.4	*19.6 *8.4	*19.6 *6.3	96.0 100.0
Goiter, all forms	400	2.1	*3.7	*2.7	99.0	*29	*1.1	*13.8	*13.8	*100.0
Thyroid trouble, not otherwise specified	858	4.5	*6.8	*6.8	99.4	105	4.1	*3.8	*3.8	100.0
Other specified diseases of thyroid gland242.4,8,9, 243–245, 246.0–3,8, 648.1, 775.3	1,464	7.7	6.8	*4.2	99.5	*56	*2.2	*14.3	*7.1	*100.0
Diabetes	4,439 *62	23.5 *0.3	31.1 *33.9	24.7 *29.0	99.8 100.0	887 *15	34.3 *0.6	38.4	34.2 *-	100.0 *100.0
Diseases of the blood and blood forming organs		0.0		20.0	100.0	10	0.0			100.0
All anemia conditions	2,115	11.2	4.9	4.1	97.9	583	22.6	*9.1	*6.5	97.3
Iron deficiency anemia280, 285.1, 776.6 Pernicious and other deficiency	380 95	2.0 0.5	*3.4 *24.2	*3.4 *20.0	100.0 100.0	85 *4	3.3 *0.2	* *	*_ *_	100.0 *100.0
anemias										
Other specified anemias 282–284, 285.0,8 Anemia, unspecified	*30 1,610	*0.2 8.5	*26.7 *3.7	*26.7 *3.0	*100.0 97.2	76 419	2. 9 16.2	*46.1 *4.5	*32.9 *3.1	*94.7 96.7
Genitourinary conditions										
All diseases of urinary system	4,915	26.0	10.3	8.3	96.9	605	23.4	18.5	14.5	97.2
Nephritis, not elsewhere classified580–583, 584.6–9, 585, 587	201	1.1	*32.8	*27.4	100.0	*15	*0.6	*26.7	*26.7	*100.0
Calculus of kidney and ureter	751	4.0	*6.8	*5.2	97.3	*50	*1.9	*30.0	*30.0	*100.0
Other diseases of kidney and ureter, not elsewhere classified	677	3.6	11.7	*9.7	100.0	151	5.8	*19.9	*13.2	100.0
Kidney trouble or disease, not otherwise specified	867	4.6	20.8	17.2	94.0	191	7.4	*27.2	*21.5	93.7
Diseases of the urinary system, not elsewhere classified099.4, 344.6, 595.0-3,8,9, 596-598, 599.0-6,8,9, 619.0, 788.6-8, 793.5	2,419	12.8	5.4	4.0	96.8	199	7.7	*5.5	*3.5	97.5
Diseases of prostate	1,220	6.5	*5.9	*4.8	96.6	82	3.2	*13.4	*13.4	96.3
All female troubles except breast	2,103	11.1	6.8	*4.5	95.9	225	8.7	*7.1	*4.9	91.1
Disease of uterus and ovary, not elsewhere classified614, 615, 616.0,1,3,4,8,9, 617, 618.0–6,8,9, 619.1,2,8,9, 620.0,1,3–9, 621.1–9, 622.0–6,8,9, 625.5,	1,092	5.8	8.4	*6.2	99.3	*60	*2.3	*13.3	*13.3	*100.0
627.3,8, 628,0,2 Other specified female genital disorders616.5, 618.7, 623.0–6,8,9, 624.0–5,8,9, 625.2–4,8, 626.627.0–2,4,9, 622.4.9, 622.0–4,8, 626.627.0–2,4,9,	775	4.1	*4.4	*2.3	92.4	140	5.4	*2.1	*2.1	85.7
628.3,4,8,9, 629.0,1,8 Female trouble, not otherwise specified629.9	236	1.2	*7.6	*3.0	91.5	*24	*0.9	*20.8	*_	*100.0

¹Ninth revision International Classification of Diseases.

Table 25. Average annual number of days of restricted activity from selected reported chronic conditions and number of days per condition, by sex and race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

		-			lex		••••••••••••••••••••••••••••••••••••••		ace	
	All pe	rsons ²	Ma	ale	Fen	nale	Wh	vite	Bla	nck
Chronic condition and ICD code ¹	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition
Circulatory conditions										
Heart conditions	443,829	26.6	199,852	26.7	243,977	26.5	394,038	26.3	46,511	29.8
Active rheumatic fever 390, 392-398, 423.1, 424.1	27,024	17.4	*7,458	*13.8	19,567	*19.4	26,214	19.0	*244	*1.7
Coronary heart	187,964	34.5	110,398	35.6	77,566	33.0	171,677	33.7	*16,287	*50.0
disease	53,588	47.6	27,037	47.7	26,551	47.5	47.862	46.4	*5,726	*65.8
Unspecified disorders of heart rhythm426.8, 427.1,6,8,9, 785.0-2	51,722	8.9	*11,963	*5.6	39,759	10.9	49,536	9.5	*2,186	*4.2
Heart trouble, not otherwise specified	114,034	43.0	39,892	35.8	74,142	48.3	92,032	43.0	19,291	41.2
Hypertensive disease, not elsewhere classified401, 402.0, 403, 404.0, 405, 796.2	274,298	11.1	104,014	10.0	170,284	11.9	187,715	9.0	82,206	23.2
Cerebrovascular disease	85,102	44.7	43,670	45.9	41,432	43.5	70,722	44.5	*13,295	*47.1
Arteriosclerosis, not elsewhere classified440 Varicose veins, not elsewhere classified	67,327 42,185	19.4 7.0	37,569 *10,395	22.6 *9.7	29,758 31,790	16.5 6.4	60,895 37,018	18.6 6.5	*4,561 *5,166	*25.8 *16.3
Hemorrhoids	35,021 31,133	4.0 34.7	*12,093 *10,696	*3.2 *45.5	22,928 20,436	4.6 30.8	28,686 25,259	3.6 31.0	*5,319 *5,874	*7.9 *70.8
classified451 Poor circulation, not otherwise specified459.9	29,039	31.5	*11,313	*34.5	17,726	*29.8	21,350	26.0	*7,689	*76.9
Respiratory conditions										
Chronic bronchitis	73,769	9.5	29,096	8.6	44,673	10.2	63,284	9.0	*10,379	*16.3
Emphysema	94,997	42.5	62,213	39.3	32,784	50.4	84,967	39.9	*10,030	*120.8
Asthma, with or without hay fever	111,210	16.3	50,793	15.0	60,418	17.6	94,723	16.3	*15,025	*16.8
Chronic sinusitis	112,214	3.7	42,400	3.3	69,814	4.0	90,511	3.3	19,403	7.2
Hay fever, without asthma (includes upper respiratory allergy)477, 478.8	59,310	3.5	*15,526	*2.0	- 43,784	4.8	50,100	3.3	*6,594	*5.0
Digestive conditions										
Ulcer of stomach and duodenum531–534	71,794	18.9	33,796	18.7	37,998	19.2	55,297	16.8	*14,229	*34.3
Hernia of abdominal cavity	79,001	20.2	34,343	16.7	44,658	24.2	58,765	16.4	20,236	66.6
Functional and symptomatic	23,754	6.1	*13,072	*6.4	*10,682	*5.8	20,320	6.0	*2,463	*6.1
uppergastrointestinal disorders536, 783.0, 787.0,1							-		-	
Gallbladder condition574, 575, 576.1-5,8,9, 793.3	25,547	17.6	*5,308	*17.3	20,239	17.7	19,590	14.9	*5,957	*50.5
Gastritis and duodenitis535.0-2,4-6	30,803	17.8	*14,323	*20.0	*16,480	*16.2	25,024	17.0	*5,382	*25.6
Chronic enteritis and colitis555, 556, 558	37,412	17.7	*15,972	*24.9	21,439	14.5	34,476	17.4	*2,193	*20.5
Intestinal conditions	27,645	17.1	*5,914	*14.4	21,731	18.0	23,009	15.4	*4,636	*42.9
Impairments			~~~~~		00.400	10.0		-	***	
Visual impairmentsX00–X04	69,990	8.2	30,870	6.3	39,120	10.8	59,314	7.9	*8,797	*9.9
Hearing impairments	31,865 19,421	1.8 11.3	*15,920 *16,262	*1.7 *11.9	*15,945 *3,159	*2.0 *9.0	25,153 *16,035	1.6 *10.5	*3,759 *3,385	*3.0 *19.0
toes only)	68,289	56.2	34,976	51.1	33,313	62.7	49,318	50.1	*17,869	*85.5
Deformities or orthopedic impairmentsX70–X76, X78–X89	469,261	25.5	225,231	24.7	244,030	26.2	394,506	24.1	65,745	35.9
Deformities or orthopedic impairments of back	248,562	21.3	97,892	18.7	150,670	23.4	203,334	19.4	42,527	40.2

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Table 25. Average annual number of days of restricted activity from selected reported chronic conditions and number of days per condition, by sex and race: United States, 1979-81-Con.

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

				S	ex			Ra	ace	
	All per	rsons ²	Ma	ale	Fen	nale	Wł	nite	Bla	ick
Chronic condition and ICD code ¹	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition
Deformities or orthopedic impairments of upper extremities or parts of	61,343	20.7	31,723	18.1	29,620	24.6	50,254	19.6	*10,303	*29.7
upper extremities	201,357	37.7	108,409	37.8	92,948	37.5	175,519	37.6	20,317	33.1
Conditions of nervous system and sense organs										
Cataracts, all forms.	33,538 70,962 35,232 22,235	8.5 12.5 24.9 20.2	*15,682 *11,805 *11,585 *6,505	*11.3 *8.1 *26.2 *21.9	*17,856 59,156 23,647 *15,730	*6.9 14.1 24.3 *19.6	30,455 57,001 34,717 21,073	8.6 11.6 24.9 20.6	*3,083 *11,979 *515 1,162	*8.2 *18.0 *22.4 *16.4
Conditions of skin and subcutaneous tissue										
Eczema, dermatitis, and urticaria, not elsewhere classified	38,700	4.8	*11,181	*3.7	27,519	5.5	34,473	4.8	*4,227	*6.4
Conditions of musculoskeletal system and connective tissue										
Arthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5–7,9	534,426	19.8	155,252	16.3	379,174	21.8	436,085	18.1	93,002	34.0
Osteomyelitis and other diseases of bone	35,117	34.4	*12,259	*29.0	22,859	38.2	33,282	34.7	*1,836	*36.7
Displacement of intervertebral disc722.0-7 Synovitis, bursitis and tenosynovitis	99,306 68,162	34.3 13.9	52,637 *19,216	33.3 *10.2	46,670 48,946	35.6 16.2	83,783 61,199	31.5 13.4	*15,523 *6,963	*72.9 *23.8
Endocrine nutritional and metabolic diseases and immunity disorders										
Gout	37,767 19,725	20.5 6.7	*14,634 *579	*11.2 *1.4	23,133 *19,146	43.2 *7.6	21,779 *16,038	13.5 *5.9	*15,027 *3,687	*75.5 *19.4
Diabetes	114,802	21.0	46,014	19.6	68,788	22.0	78,512	17.7	32,795	37.0
Diseases of the blood and blood-forming organs										
All anemia conditions280–284, 285.0,1,8,9, 648.2, 776.6	31,871	11.6	*8,582	*16.8	23,289	10.4	20,389	9.6	*10,037	*17.2
Anemia, unspecified	20,250	9.9	*3,199	*8.4	*17,051	*10.2	*14,765	*9.2	*4,828	*11.5
Genitourinary conditions										
All diseases of urinary system099.4, 344.6, 580–583, 584.5–9, 585, 587, 588.0,8,9, 589–591, 592.0,1, 593.0–9, 595.0–3,8,9, 596–598, 599.0–6,8,9, 619.0, 788.6–8, 793.5, 794.4	86,381	15.5	21,749	15.6	64,631	15.5	66,509	13.5	*17,905	*29.6
Kidney trouble or disease, not otherwise specified	24,753	23.2	*6,830	*18.6	*17,923	*25.6	*16,945	*19.5	*7,566	*39.6
Diseases of the urinary system, not elsewhere classified099.4, 344.6, 595.0-3,8,9, 596-598, 599.0-6,8,9, 619.0, 788.6-8, 793.5	29,570	11.2	*5,246	*14.5	24,324	10.6	24,273	10.0	*5,297	*26.6
Diseases of prostate	23,052	17.5	23,052	17.5	•••	•••	*18,301	*15.0	*4,751	*57.9

Table 25. Average annual number of days of restricted activity from selected reported chronic conditions and number of days per condition, by sex and race: United States, 1979-81-Con.

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

				S	ex		Race			
	All per	sons ²	Male		Female		White		Black	
Chronic condition and ICD code ¹	Number of days in thousands	Days per condition								
Ali female troubles except breast 614, 615, 616.0,1,3–5,8,9, 617, 618, 619.1,2,8,9, 620.0,1,3–9, 621.1–9, 622.0–6,8,9, 623.0–6,8,9, 624.0–5,8,9, 625.2–5,8, 626, 627, 628.0,2–4.8,9, 629	45,459	19.4			45,459	19.4	37,894	18.0	*5,881	*26.1
Diseases of uterus and ovary, not elsewhere classified	24,387	20.9			24,387	20.9	20,067	18.4	*2,857	*47.6

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey. ²Includes races other than white and black.

molodeb table of the finant white and black.

NOTE: Relative standard errors of estimates for this table are found in appendix I, figures I and II.

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Table 26. Average annual number of days of bed disability from selected reported chronic conditions and number of days per condition, by sex and race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

				S	ex			R	ace	
	All per	sons ²	Ma	le	Ferr	ale	White		Black	
Chronic condition and ICD code ¹	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition	Number of days in thousands	Days per condition
	·	· · ·							·····	
Circulatory conditions Heart conditions390, 392–398, 402.1,9, 404.1,9, 410–414, 415.0, 416, 417.8,9, 420.9, 421.0,9, 422.9, 423, 424, 425.0–2,4,9, 426–428, 429.0–3,5,6,8,9, 785.0–3, 794.3	147,399	8.8	59,173	7.9	88,227	9.6	126,301	8.4	20,531	13.1
Coronary heart disease	49,260	9.0	25,043	8.1	24,218	10.3	43,130	8.5	*6,131	*18.8
Unspecified disorders of heart rhythm	19,407	3.4	*3,304	*1.6	*16,103	*4.4	*17,371	*3.3	*2,036	*3.9
Heart trouble, not otherwise specified	50,976	19.2	*18,118	*16.3	32,857	21.4	42.639	19.9	*8,336	*17.8
typertensive disease, not elsewhere classified 401, 402.0, 403, 404.0, 405, 796.2	85,617	3.5	28,289	2.7	57,328	4.0	53,367	2.6	31,419	8.9
Cerebrovascular disease	44,911	23.6	20,602	21.7	24,310	25.5	33,483	21.1	*10,343	*36.7
Arteriosclerosis, not elsewhere classifled440	21,701	6.3	*18,997	*11.4	*2,704	*1.5	*16,686	*5.1	*3,143	*17.8
Respiratory conditions Chronic bronchitis Emphysema Sthma, with or without hay fever 493 Chronic sinusitis	24,912 29,938 38,296 22,492	3,2 13.4 5.6 0.7	*8,000 *16,702 *15,859 *8,402	*2.4 *10.5 *4.7 *0.7	*16,912 *13,236 22,437 *14,090	*3.9 *20.4 6.5 *0.8	22,459 27,711 32,116 *16,227	3.2 13.0 5.5 *0.6	*2,454 *2,227 *6,180 *6,153	*3.9 *26.8 *6.9 *2.3
Digestive conditions	~~,~~~	0.1	0,402	0.7	14,000	0.0	10,621	0.0	0,100	2.0
llcer of stomach and duodenum531–534 Iernia of abdominal cavity550–553, 750.6	26,226 26,643	6.9 6.8	*13,642 *13,173	*7.5 *6.4	*12,585 *13,470	*6.4 *7.3	20,404 *16.738	6.2 *4.7	*5,822 *9,905	*14.0 *32.6
Impairments										
Paralysis, complete or partial, of extremities or parts of extremities	26,305	21.7	*17,407	*25.4	.*8,898	*16.8	*16,485	*16.8	*8,717	*41.7
eformities or orthopedic impairments	101,389	5.5	49,090	5.4	52,300	5.6	85,423	5.2	*14,766	*8.1
Deformities or orthopedic impairments of back	61,670	5.3	23,774	4.5	37,896	5.9	49,935	4.8	*11,574	*10.9
Deformities or orthopedic impairments of lower extremities or parts of lower extremitiesX75, X76, X78, X85, X86	42,537	8.0	24,900	8.7	*17,637	*7.1	37,458	8.0	*4,040	*6.6
Conditions of nervous system and sense organs										
Aigraine	30,925	5.5	*4,589	*3.1	26,336	6.3	22,978	4.7	*6,745	*10.2
Conditions of musculoskeletal system and connective tissue										
rthritis, not elsewhere classified711.0,9, 712.8,9, 714, 715.0,1,3,8,9, 716, 719.3, 720.0,8,9, 721.0,2,3,5-7,9	132,677	4.9	37,197	3.9	95,480	5.5	101,124	4.2	28,448	10.4
isplacement of intervertebrai disc722.0-7	26,150	9.0	*12,613	*8.0	*13,537	*10.3	24,212	9.1	*1,938	*9.1
Endocrine, nutritional and metabolic diseases and immunity disorders										
Piabetes	40,056	7.3	*17,018	*7.3	23,038	7.4	21,447	4.8	*18,038	*20.3
Genitourinary conditions										
All diseases of urinary system099.4, 344.6, 580–583, 584.5–9, 585, 587, 588.0,8,9, 589–591, 592.0,1, 593.0–9, 595.0–3,8,9, 596–598, 599.0–6,8,9, 619.0, 788.6–8, 793.5, 794.4	28,787	5.2	*7,888	*5.6	20,899	5.0	22,792	4.6	*5,753	*9.5

¹Ninth revision International Classification of Diseases. Impairments are coded according to a special classification system for the National Health Interview Survey ²Includes races other than white and black.

Table 27. Population used in computing rates shown in this report, by sex and age, and by race: United States, 1979-81

[Data are based on household interviews of the civilian noninstitutionalized population. The survey design, general qualifications, and information on the reliability of the estimates are given in appendix I. Definitions of terms are given in appendix II]

	All	Sex		Race	
Age	persons ¹	Male	Female	White	Black
			Population in thousands		
All ages	219,564	105,936	113,628	188,991	25,846
Jnder 17 years	58,302	29,755	28,548		
17-44 years	93,511	45,460	48,051		
45-64 years	43,724	20,847	22,877		
65 years and over	24,028	9,875	14,153		

¹Includes races other than white and black.

NOTES: For official population estimates for more general use, see U.S. Bureau of the Census reports on the civilian population of the United States in Current Population Reports, Series P-20, P-25, and P-60.

Relative standard errors of estimates for this table are found in appendix I, figure 1.

The number of persons in each age-sex category of the total population is adjusted to official U.S. Bureau of the Census figures and is not subject to sampling error.

Appendixes

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Appendix I Technical notes on methods

Background of this report

This report is one of a series of statistical reports prepared by the National Center for Health Statistics (NCHS). It is based on information collected by NCHS in a continuing nationwide sample of households in the National Health Interview Survey (NHIS).

The National Health Interview Survey utilizes a questionnaire for obtaining information on personal and demographic characteristics, illnesses, injuries, impairments, chronic conditions, and other health topics. As data relating to each of these various broad topics are tabulated and analyzed, separate reports are issued that cover one or more of the specific topics.

The population covered by the sample for NHIS is the civilian noninstitutionalized population of the United States living at the time of the interview. The sample does not include members of the Armed Forces or U.S. nationals living in foreign countries. It should also be noted that the estimates shown do not represent a complete measure of any given topic during the specified calendar period because data are not collected in the interview for persons who died during the reference period. For many types of statistics collected in the survey, the reference period covers the 2 weeks prior to the interview week. For such a short period, the contribution by decedents to a total inventory of conditions or services should be very small. However, the contribution by decedents during a long reference period (for example, 1 year) might be sizable, especially for older persons.

Statistical design of the National Health Interview Survey

General plan

The sampling plan of the survey follows a multistage probability design that permits a continuous sampling of the civilian noninstitutionalized population of the United States. The sample is designed in such a way that the sample of households interviewed each week is representative of the target population and that weekly samples are additive over time. This feature of the design permits both continuous measurement of characteristics of samples and more detailed analysis of less common characteristics and smaller categories of health-related items. The continuous collection has administrative and operational advantages as well as technical assets because it permits fieldwork to be handled with an experienced, stable staff. The overall sample was designed so that tabulations can be provided for each of the four major geographic regions and for selected places of residence in the United States.

The first stage of the sample design consists of drawing a sample of 376 primary sampling units (PSU's) from approximately 1,900 geographically defined PSU's. A PSU consists of a county, a small group of contiguous counties, or a standard metropolitan statistical area. The PSU's collectively cover the 50 States and the District of Columbia.

With no loss in general understanding, the remaining stages can be combined and treated in this discussion as an ultimate stage. Within PSU's, then, ultimate stage units called segments are defined in such a manner that each segment contains an expected four households. Three general types of segments are used:

- Area segments, which are defined geographically.
- List segments, using 1970 census registers as the frame.
- Permit segments, using updated lists of building permits issued in sample PSU's since 1970.

Census address listings were used for all areas of the country where addresses were well defined and could be used to locate housing units. In general the list frame included the larger urban areas of the United States, from which about two-thirds of the NHIS sample was selected.

The usual NHIS sample consists of approximately 12,000 segments containing about 50,000 assigned households, of which 9,000 are vacant, demolished, or occupied by persons not in the scope of the survey. The 41,000 eligible occupied households yield a probability sample of about 111,000 persons. During 1979, 1980, and 1981, the sample comprised about 122,000 eligible occupied households, of which about 118,000 were interviewed. (A sample reduction of 4 weeks during the October-December quarter of 1980 accounts for the smaller number of households than usual.) The interviewed households contained about 321,000 persons living at the time of the interview. The total noninterview rate was 3.3 percent, of which 1.9 percent was due to respondent refusal.

Descriptive material on data collection, field procedures, and questionnaire development in NHIS have been published^{23,24} as well as a detailed description of the sample design and report on the estimation procedure.²⁵

NOTE: A list of references follows the text.

Collection of data

Field operations for the survey are performed by the U.S. Bureau of the Census under specifications established by NCHS. In accordance with these specifications, the U.S. Bureau of the Census participates in survey planning, selects the sample, and conducts the field interviewing as an agent of NCHS. The data are coded, edited, and tabulated by NCHS.

Estimating procedures

Because the design of NHIS is a complex multistage probability sample, it is necessary to use complex procedures in the derivation of estimates. Four basic operations are involved:

- Inflation by the reciprocal of the probability of selection— The probability of selection is the product of the probabilities of selection from each step of selection in the design (PSU, segment, and household).
- Nonresponse adjustment—The estimates are inflated by a multiplication factor that has as its numerator the number of sample households in a given segment and as its denominator the number of households interviewed in that segment.
- First-stage ratio adjustment—Sampling theory indicates that the use of auxiliary information that is highly correlated with the variables being estimated improves the reliability of the estimates. To reduce the variability among PSU's within a region, the estimates are ratio adjusted to the 1970 populations within 12 race-residence classes.
- Poststratification by age-sex-race—The estimates are ratio adjusted within each of 60 age-sex-race cells to an independent estimate of the population of each cell for the survey period. These independent estimates are prepared by the U.S. Bureau of the Census. Both the first-stage and poststratified ratio adjustments take the form of multiplication factors applied to the weight of each elementary unit (person, household, condition, and hospitalization).

The effect of the ratio-estimating process is to make the sample more closely representative of the civilian noninstitutionalized population by age, sex, race, and residence, which thereby reduces sampling variance.

As noted, each week's sample represents the population living during that week and characteristics of the population. Consolidation of samples over a time period, for example, a calendar quarter, produces estimates of average characteristics of the U.S. population for the calendar quarter. Similarly, population data for a year are averages of the four quarterly figures.

For prevalence statistics, such as number of selected chronic conditions, figures are first calculated for each calendar quarter by averaging estimates for all weeks of interviewing in the quarter. Prevalence data for a year are then obtained by averaging the four quarterly figures. Similarly, an estimate for 3 years is obtained by averaging 12 quarterly figures.

For other types of statistics—those measuring the number of occurrences during a specified time period, such as incidence of acute conditions, number of disability days, or number of visits to a doctor or dentist—a similar computational procedure is used, but the statistics are interpreted differently. For these items, the interviewer asks for the respondent's experience over the 2 calendar weeks prior to the week of interview. In such instances, the estimated quarterly total for the statistic is 6.5 times the average 2-week estimate produced by the 13 successive samples taken during the period. The annual total is the sum of the four quarters. Thus the experience of persons interviewed during a year—experience that actually occurred for each person in a 2-calendar-week interval prior to week of interview—is treated as though it measured the total of such experience during the year. Such interpretation leads to no significant bias.

When 3 years of data are used, as in this report, the sum of the annual estimates is divided by 3 to obtain an average annual estimate for the statistic.

General qualifications

Nonresponse

Data were adjusted for nonresponse by a procedure that imputes to persons in a household whose members were not interviewed the characteristics of persons in households in the same segment who were interviewed. Interviews were completed in almost 97 percent of the sample households.

The interview process

The statistics presented in this report are based on replies obtained in interviews with persons in the sample households. Each person 19 years of age and over present at the time of interview was interviewed individually. For children and for adults not present in the home at the time of interview, the information was obtained from a related household member such as a spouse or the mother of a child.

There are limitations to the accuracy of diagnostic and other information collected in household interviews. For diagnostic information, the household respondent can usually pass on to the interviewer only the information the physician has given to the family. For conditions not medically attended, diagnostic information is often no more than a description of symptoms. However, other facts, such as the number of disability days caused by the condition, can be obtained more accurately from household members than from any other source because only the persons concerned are in a position to report this information.

Rounding of numbers

The original tabulations on which the data in this report are based show all estimates to the nearest whole unit. All consolidations were made from the original tabulations using the estimates to the nearest unit. In the final published tables, the figures are rounded to the nearest thousand, although they are not necessarily accurate to that detail. Devised statistics such as rates and percent distributions are computed after the estimates on which they are based have been rounded to the nearest thousand.

Population figures

Some of the published tables from NHIS include population figures for specified categories. Except for certain overall totals by age, sex, and race, which are adjusted to independent estimates, these figures are based on the sample of households in NHIS. They are given primarily to provide denominators for rate computation, and for this purpose they are more appropriate for use with the accompanying measures of health characteristics than other population data that may be available. With the exception of the overall totals by age, sex, and race mentioned above, the population figures differ from figures (which are derived from different sources) published in reports of the U.S. Bureau of the Census. Official population estimates are presented in U.S. Bureau of the Census reports in Series P–20, P–25, and P–60.

Reliability of estimates

Because the statistics presented in this report are based on a sample, they differ somewhat from the figures that would have been obtained if a complete census had been taken using the same schedules, instructions, and interviewing personnel and procedures.

As in any survey, the results are also subject to reporting and processing errors and errors due to nonresponse. To the extent possible, these types of errors were kept to a minimum by methods built into survey procedures.²⁶ Although it is very difficult to measure the extent of bias in NHIS, a number of studies have been conducted to study this problem. The results have been published in several reports.²⁷⁻³⁰ The standard errors shown in this report were computed using the balanced half-sample replication procedure.

The standard error is primarily a measure of sampling variability, that is, the variations that might occur by chance because only a sample of the population is surveyed. As calculated for this report, the standard error also reflects part of the variation that arises in the measurement process. It does not include estimates of any biases that might be in the data. The chances are about 68 of every 100 that an estimate from the sample would differ from a complete census by less than the standard error. The chances are about 95 of every 100 that the difference would be less than twice the standard error and about 99 of every 100 that it would be less than 2 1/2 times as large.

Relative standard error charts

The relative standard error of an estimate is obtained by dividing the standard error of the estimate by the estimate itself and is expressed as a percent of the estimate. For this report, asterisks are shown for any cell with more than a 30-percent relative standard error. Included in this appendix are charts from which the relative standard errors can be determined for estimates shown in the report. To derive relative errors that would be applicable to a wide variety of health statistics and that could be prepared at a moderate cost, a number of approximations were required. As a result, the charts provide an estimate of the approximate relative standard error rather than the precise error for any specific aggregate or percent.

Three classes of statistics for the health survey are identified for purposes of estimating variances.

- Narrow range—This class consists of (1) statistics that estimate a population attribute, for example, the number of persons in a particular income group, and (2) statistics for which the measure for a single individual during the reference period used in data collection is usually either 0 to 1 and, on occasion, may take on the value 2 or very rarely 3.
- *Medium range*—This class consists of other statistics for which the measure for a single individual during the reference period used in data collection will rarely lie outside the range 0 to 5.
- Wide range—This class consists of statistics for which the measure for a single individual during the reference period used in data collection can range from 0 to a number in excess of 5, for example, the number of days of bed disability.

In addition to classifying variables according to whether they are narrow-, medium-, or wide-range, statistics in the survey are further classified as to whether they are based on a reference period of 2 weeks, 6 months, or 12 months.

General rules for determining relative standard errors

The following rules will enable the reader to determine approximate relative standard errors from the charts for estimates presented in this report. These charts represent standard errors of NHIS data. They should be used in preference to the charts that have appeared in all previous Series 10 publications.

Rule 1. Estimates of aggregates—Approximate relative standard errors for estimates of aggregates, such as the number of persons with a given characteristic, are obtained from figures I and II. The number of persons in the total U.S. population or in an age-sex-race class of the total population is adjusted to official U.S. Bureau of the Census figures and is not subject to sampling error.

Rule 2. Estimates of percents in a percent distribution— Relative standard errors for percents in a percent distribution of a total are obtained from appropriate curves on figure III. For values that do not fall on one of the curves presented in the chart, visual interpolation will provide a satisfactory approximation.

Rule 3. Estimates of rates where the numerator is a subclass of the denominator—This rule applies for prevalence rates or where a unit of the numerator occurs, with few exceptions, only once in the year for any one unit in the denominator. For example, in computing the rate of visual impairments per 1,000 population, the numerator consisting of persons with the impairment is a subclass of the denominator, which includes all persons in the population. Such rates, if converted to rates per 100, may be treated as though they were percents, and the relative standard errors may be obtained from the

NOTE: A list of references follows the text.

percent charts for population estimates. Rates per 1,000, or on any other base, must first be converted to rates per 100; then the percent chart will provide the relative standard error per 100.

Rule 4. Estimates of rates where the numerator is not a subclass of the denominator—This rule applies where a unit of the numerator often occurs more than once for any one unit in the denominator. For example, in the computation of the number of persons injured per 100 currently employed persons per year, it is possible that a person in the denominator could have sustained more than one of the injuries included in the numerator. Approximate relative standard errors for rates of this kind may be computed as follows:

- a. Where the denominator is the total U.S. population or includes all persons in one or more of the age-sex-race groups of the total population, the relative error of the rate is equivalent to the relative error of the numerator, which can be obtained directly from the appropriate chart.
- b. In other cases the relative standard error of the numerator and of the denominator can be obtained from the appropriate curve. Square each of these relative errors, add the resulting values, and extract the square root of the sum.

This procedure will result in an upper bound on the relative standard error and will overstate the error to the extent that the correlation between numerator and denominator is greater than zero.

Rule 5. Estimates of difference between two statistics (mean, rate, total, and so forth): The standard error of a difference is approximately the square root of the sum of the squares of each standard error considered separately. A formula for the standard error of a difference,

is

$$\sigma_d = \sqrt{(X_1 V_{X1})^2 + (X_2 V_{X2})^2}$$

 $d = X_1 - X_2$

where X_1 is the estimate for class 1, X_2 is the estimate for class 2, and V_{X1} and V_{X2} are the relative errors of X_1 and X_2 , respectively. This formula will represent the actual standard error quite accurately for the difference between separate and uncorrelated characteristics although it is only a rough approximation in most other cases. The relative standard error of each estimate involved in such a difference can be determined by one of the four rules above, whichever is appropriate.

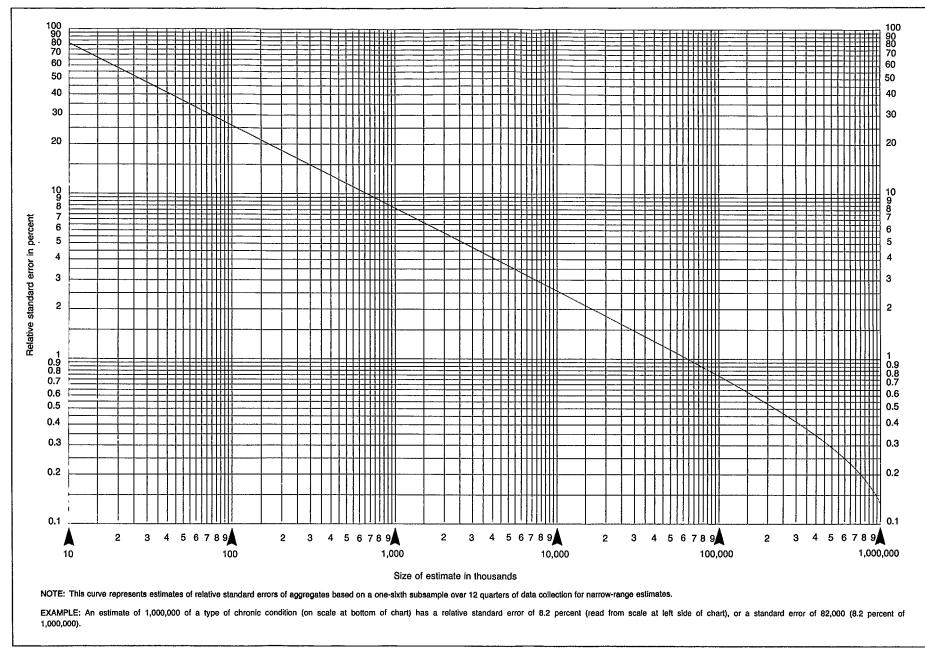
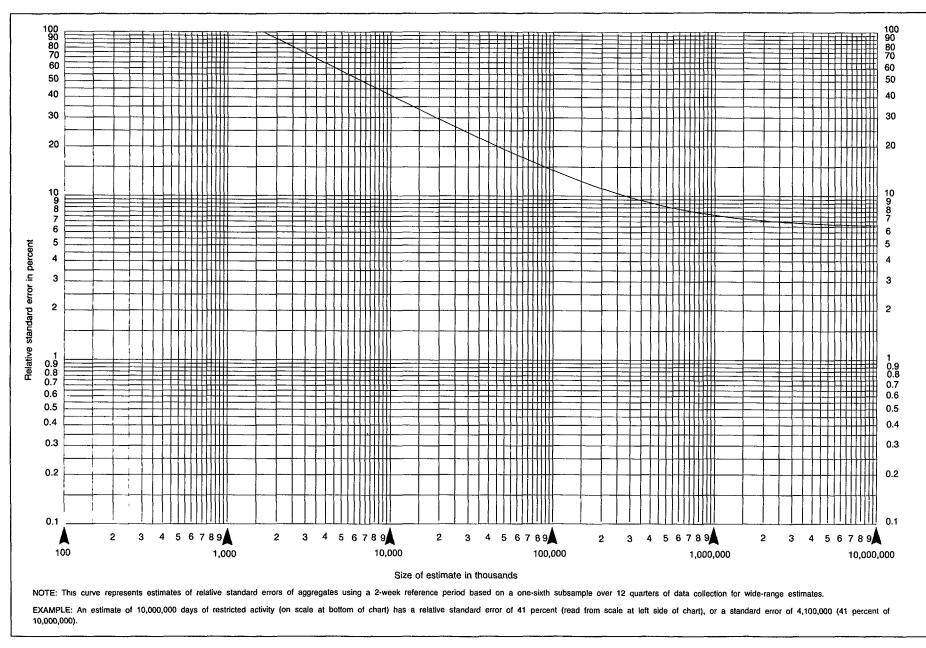
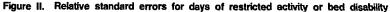
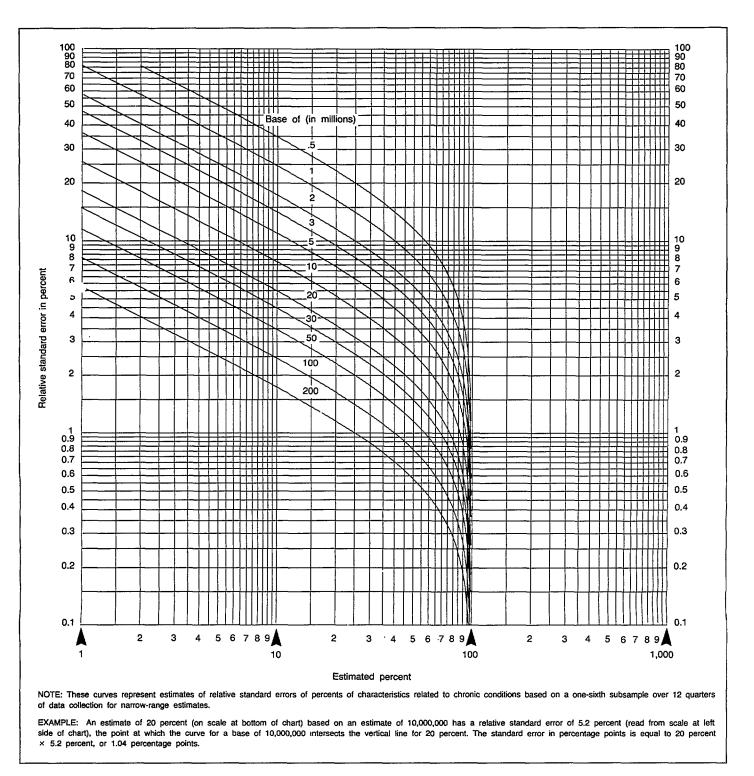
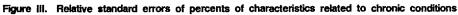


Figure I. Relative standard errors for characteristics related to the prevalence of chronic conditions









Appendix II Definitions of terms

Terms relating to conditions

Condition—A morbidity condition, or simply a condition, is any entry on the questionnaire that describes a departure from a state of physical or mental well being. It results from a positive response to one of a series of "medical-disability impact" or "illness-recall" questions. In the coding and tabulating process, conditions are selected or classified according to a number of different criteria (such as whether they were medically attended, whether they resulted in disability, and whether they were acute or chronic) or according to the type of disease, injury, impairment, or symptom reported. For the purposes of each published report or set of tables, only those conditions recorded on the questionnaire that satisfy certain stated criteria are included.

All conditions except impairments are classified by type according to the ninth revision of the International Classification of Diseases,²² with certain modifications adopted to make the codes more suitable for a household interview survey.

Chronic condition—A condition is considered chronic if (1) the condition is described by the respondent as having been first noticed more than 3 months before the week of the interview, or (2) it is one of the following conditions always classified as chronic regardless of time of onset:

- Tuberculosis.
- Neoplasms (benign and malignant).
- Diseases of the thyroid gland.
- Diabetes.
- Gout.
- Psychoses and certain other mental disorders.
- Multiple sclerosis and certain other diseases of the central nervous system.
- Certain diseases and conditions of the eye.
- Certain diseases of the circulatory system (includes rheumatic fever, hypertension, stroke, and all heart conditions).
- Emphysema, asthma, hay fever, and bronchiectasis.
- Ulcers and certain other diseases of the esophagus, stomach, and duodenum.
- Hernia of abdominal cavity (includes rupture).
- Gastroenteritis and colitis (with exceptions).
- Calculus of kidney, ureter, and other parts of the urinary system.
- Diseases of the prostate.

- Chronic cystic diseases of the breast.
- Eczema and certain other dermatitis.
- Arthritis and rheumatism.
- Cyst of the bone (except jaw).
- All congenital anomalies.

Impairment—Impairments are chronic or permanent defects, usually static in nature, that result from disease, injury, or congenital malformation. They represent decrease or loss of ability to perform various functions, particularly those of the musculoskeletal system and the sense organs. All impairments are classified by means of a special supplementary code. Hence code numbers for impairments in the International Classification of Diseases are not used. In the supplementary code, impairments are grouped according to type of functional impairment and etiology. The impairment classification is shown in an NHIS coding manual.³¹

Prevalence of conditions-In general, prevalence of conditions is the estimated number of conditions of a specified type existing at a specified time or the average number existing during a specified interval of time. The prevalence of chronic conditions is defined as the number of chronic cases reported to be present or assumed to be present at the time of the interview. Those assumed to be present at the time of interview are cases specified by the respondent as present on the selected chronic condition list or described by the respondent in terms of one of the diseases on the list of conditions always considered chronic and reported to have been present at some time during the 12-month period prior to the interview. (See definition of chronic condition.) In this report, chronic condition data are presented in six different categories: (1) circulatory conditions; (2) respiratory conditions; (3) digestive conditions; (4) impairments and conditions of the nervous system and sense organs; (5) conditions of the skin and subcutaneous tissue and other related conditions and conditions of the musculoskeletal system and connective tissue; and (6) endocrine, nutritional, and metabolic diseases and immunity disorders, diseases of the blood and blood-forming organs, and conditions of the genitourinary system.

Onset of condition—A condition is considered to have had its onset when it was first noticed. This could be the time the person first felt sick or became injured, or it could be the time when the person or the person's family was first informed of the previously unknown condition by a physician.

NOTE: A list of references follows the text.

Terms relating to disability

Disability—Disability is the general term used to describe any temporary or long-term reduction of a person's activity as a result of an acute or chronic condition.

Disability day—Short-term disability days are classified according to whether they are days of restricted activity, bed days, hospital days, work-loss days, or school-loss days. All hospital days are, by definition, days of bed disability; all days of bed disability are, by definition, days of restricted activity. The converse form of these statements, of course, is not true. Days lost from work and days lost from school, special terms that apply to the working and school-age populations only, are days of restricted activity. Hence "days of restricted activity" is the most inclusive term used to describe disability days.

Restricted-activity day-A day of restricted activity is one during which a person cuts down on usual activities for the whole of that day because of an illness or an injury. The term "usual activities" for any day means activities the person ordinarily engages in on that day. For preschool children, usual activities depend on the usual pattern for the child's day, which is affected by the age of the child, weather conditions, and so forth. For retired or elderly persons, usual activities might consist of almost no activity, but cutting down on even a small amount of activity for a whole day would constitute restricted activity. On Sundays or holidays, usual activities are activities the person usually engages in on such days-going to church, playing golf, visiting friends or relatives, or staying at home and listening to the radio, reading, looking at television, and so forth. Persons who have permanently reduced their usual activities because of a chronic condition might not report any restricted-activity days during a 2-week period. Therefore absence of restricted-activity days does not imply normal health.

Restricted activity does not imply complete inactivity, but it does imply only the minimum of usual activities. A special nap for an hour after lunch does not constitute cutting down on usual activities, nor does the elimination of a heavy chore, such as cleaning ashes out of the furnace or hanging out the wash. If a farmer or housewife does only the minimum of the day's chores, however, this is a day of restricted activity.

A day spent in bed or a day home from work or school because of illness or injury is a restricted-activity day.

Bed-disability day—A day of bed disability is one during which a person stays in bed for all or most of the day because of a specific illness or injury. All or most of the day is defined as more than one-half of the daylight hours. All hospital days for inpatients are considered to be days of bed disability, even if the patients were not actually in bed at the hospital.

Condition day—Condition days of restricted activity, bed disability, and so forth are days of the various forms of disability associated with any one condition. Any particular day of disability may be associated with more than one condition, so the sum of days for conditions may add to more than the total number of person-days.

Chronic activity limitation—Persons are classified into four categories according to the extent to which their activities are limited at present as a result of chronic conditions. Because the usual activities of preschool children, school-age children, housewives, and workers and other persons differ, a different set of criteria is used for each group. There is a general similarity among them, however, as will be seen in the following descriptions of the four categories.

- 1. Persons unable to carry on major activity for their group (major activity refers to ability to work, keep house, or engage in school or preschool activities), including the following:
 - Preschool children: Inability to take part in ordinary play with other children.
 - School-age children: Inability to go to school.
 - Housewives: Inability to do any housework.
 - Workers and all other persons: Inability to work at a job or business.
- 2. Persons limited in amount or kind of major activity performed (major activity refers to ability to work, keep house, or engage in school or preschool activities), including the following:
 - Preschool children: Limited in amount or kind of play with other children, for example, need special rest periods, cannot play strenuous games, or cannot play for long periods at a time.
 - School-age children: Limited to certain types of schools or in school attendance, for example, need special schools or special teaching or cannot go to school full time or for long periods at a time.
 - Housewives: Limited in amount or kind of housework, for example, cannot lift children, wash or iron, or do housework for long periods at a time.
 - Workers and all other persons: Limited in amount or kind of work, for example, need special working aids or special rest periods at work, cannot work full time or for long periods at a time, or cannot do strenuous work.
- 3. Persons not limited in major activity but otherwise limited (major activity refers to ability to work, keep house, or engage in school or preschool activities), including the following:
 - Preschool children: Not classified in this category.
 - School-age children: Not limited in going to school but limited in participation in athletics or other extracurricular activities.
 - Housewives: Not limited in housework but limited in other activities such as church, clubs, hobbies, civic projects, or shopping.
 - Workers and all other persons: Not limited in regular work activities but limited in other activities such as church, clubs, hobbies, civic projects, sports, or games.
- 4. Persons not limited in activities (includes persons whose activities are not limited in any of the ways described above).

In this report, some conditions are specified as causing "limitation in major and outside activity." This classification includes categories 1–3. The classification "limitation in major activity" includes categories 1 and 2 only.

Terms relating to physician visits

Physician visit—A physician visit is defined as consultation with a physician, in person or by telephone, for examination, diagnosis, treatment, or advice. The visit is considered to be a physician visit if the service is provided directly by the physician or by a nurse or other person acting under a physician's supervision. For the purpose of this definition, "physician" includes doctors of medicine and osteopathic physicians. The term "doctor" is used in the interview rather than "physician" because of popular usage.

Physician visits for services provided on a mass basis are not included in the tabulations. A service received on a mass basis is defined as any service involving only a single test (for example, test for diabetes) or a single procedure (for example, measles inoculation) when this single service was administered identically to all persons who were at the place for this purpose. Hence obtaining a chest x ray in a tuberculosis chest x ray trailer is not included as a physician visit. However, a special chest x ray given in a physician's office or in an outpatient clinic is considered a physician visit.

In this report, some conditions are classified as causing "1 physician visit or more." This means that the person had consulted with a physician regarding the specific condition at any time since the onset of the condition.

Demographic terms

Age—The age recorded for each person is the age at last birthday. Age is recorded in single years and grouped in a variety of distributions depending on the purpose of the table.

Race—In this report, data are presented for two racial groups, white and black. Data for races other than white and black are included when totals are presented. For 1979, racial characterization was based on the interviewer's observation of race. In 1980 and 1981, race characterization was based on the description of racial background given by the respondent.

Appendix III Questionnaire items and flashcards

.

		3.	Month	Date	Year
3. V	What is's date of birth? (Enter date and Age, and circle Race and Sex)				ļ
L	Ask Condition list Use Flashcardto determine Sample persons; mark SP boxes.		BED DAYS		HOSP. None
С	1. Record the number of Bed Days, Doctor Visits, and Hospitalizations	c	(NP)	' (NP) (NP)	'NP)
	2. Record each condition in the person's column, with the question number(s) where it was reported. Reference dates 2-week period,		Q. No.	Conditi	
	Hospital probe		<u> </u>		
		1	1		
	This survey is being conducted to collect information on the Nation's health. I will ask about visits to Joctors and dentists, illness in the family, and other health related items. (Hand calendar) The next few questions refer to the past 2 weeks, the 2 weeks outlined in red on that calendar, beginning Monday, <u>(date)</u> , and ending this past Sunday, <u>(date)</u> . During those 2 weeks, did —— stay in bed because of any illness or injury?	5a.		(5b)	6)
6.1	During that 2-week period, how many days did —— stay in bed all or most of the day?	ь	Day	/s ∫ 6-16 Unde	(7) :r6(9)
6. 1	During those 2 weeks, how many days did illness or injury keep —— from work? For females): not counting work around the house?	6.		days (8) ne (9)	
7.	During those 2 weeks, how many days did illness or injury keep from school?	7.	SL 00 [] Not		
1	f one or more days in 5b, ask 8; otherwise go to 9 On how many of these —— days lost from { work school } did —— stay in bed all or most of the day?	8.	00 🗌 Nor		
.	(NOT COUNTING the day(s) { in bed lost from work }) Were there any (other) days during the post 2 weeks that cut down on the things he usually does because of illness or injury?	9a	. 1 Y z N (10)	
1	(Again, not counting the day(s) {	ь.	Da; 00 No:		
_	If one or more days in 5-9, ask 10; otherwise go to next person.	1	1		
	What condition caused to wiss work miss school cut down wise during the past 2 weeks?	10a		dition in ite Ask 10b	em C
į .	Did any other condition cause him to	ь	N (NP)	
c.	What condition?	<u> </u>	Enter cond	ition in ite	n C (10b)
ł		ŧ	ŧ		

11a. During the past 2 weeks, did anyone in the family, that is you, your – –, etc., have any (other) accidents or injuries?	Y	N (12)		
b. Who was this? - Mark ''Accident or injury'' box in person's column.			11Ь.	[]Accident or injury
c. What was the injury?			с.	Injury
d. Did anyone have any other accidents or injuries during that period?	Y (Reask 11b and c)	N		
If "Accident or injury," ask:. e. As a result of the accident, did see a doctor or did he cut down on the	things he usually does?		e.	Y (Enter injury in item C) N

es did see a medical doctor?	14.	00 None NP Number of visits NP
Y N (16)		
	15ь.	Doctor visit
Y (Reask 15b and c) N		
	d.	Number of visits (NP)
Y N (17)		
	16ь.	Phone call
Y (Reask 16b and c) N		,
	-	
	d.	Number of calls (NP)
		Condition (Item C THEN 17d)
	17a.	Pregnancy (17e) Nu condition
	ь.	Y N (NP)
		Enter condition in item C Ask 17d
•	d.	Y (17c) N (NP)
	e.	Y N (17d)
	۴.	Enter condition in item C (17d)
es did see or	180.	000 Only when in hospital 000 None Number of visits
	 b.	1 2-week DV
		2 Past 2 weeks not reported (14 and 17) 3 2 wks6 mos. 4 Over 6-12 mos. 5 1 year 5 2-4 years 7 5+ years
	Y N (16) Y (Reask 15b and c) Y Y (Reask 16b and c) N	Y N (16) Y (Reask 15b and c) N Y (Reask 15b and c) N Y (Reask 16b and c) N d. Y (Reask 16b and c) N d. 17c. b. c. d. f. es did see or 18a.

Ages 19a. What was doing MOST OF THE PAST 12 MONTHS (For males): working or doing s Ages If "something else," ask: (For females): keeping house, working or doing? 17+ If 45+ years and was not "working," "keeping house," or "going to school," ask: c. Is retired? d. If "retured," ask: Did he retire because of his health?	orking, or doing 20.	 Working (24a) Keeping house (24b) Retired, health (23) Retired, other (23) Going to school (26) 174 something else (23)
Ages 20a. What was doing MOST OF THE PAST 12 MONTHS - going to school or doing somethin 6-16 If "something else," ask: b. What was doing?	ng else?	7 [] 6-16 something else (25)
Ages under 6		0 Under 1 (22)
21a. Is able to take part at all in ordinary play with other children?	210.	Y 1 N (28)
b. Is he limited in the kind of play he can do because of his health?	ь.	2 Y (28) N
c. Is he limited in the amount of play because of his health?	с.	2 Y (28) N (27)
22a. 1s limited in any way because of his health?	220.	1 Y 5 N (NP)
b. In what way is he limited? Record limitation, not condition.	ь.	
23a. Does —— health now keep him from working?	23a.	1 Y (28) N
b. Is he limited in the kind of work he could do because of his health?	ь.	2 Y (28) N
c. Is he limited in the amount of work he could do because of his health?	с.	2 Y (28) N
d. Is he limited in the kind or amount of other activities because of his health?	d.	зү (28) N (27)
24a. Does NOW have a job?	24a.	Y (24c) N
b. In terms of health, is NOW able to (work - keep house) at all?	b.	Y 1 N (28)
c. Is he limited in the kind of (work - housework) he can do because of his health?	с.	2 Y (28) N
d. Is he limited in the amount of (work - housework) he can do because of his health?	d.	2 Y (28) N
e. Is he limited in the kind or amount of other activities because of his health?	е.	3 Y (28) N (27)
25. In terms of health would be able to go to school?	25.	Y 1 N (28)
26a. Does (would) have to go to a certain type of school because of his health?	26 a.	2 Y (28) N
b. Is he (would he be) limited in school attendance because of his health?	ь.	2 Y (28) N
c. Is he limited in the kind or amount of other activities because of his health?	с.	зү (28) N
27a. Is limited in ANY WAY because of a disability or health?	27 a.	4 Y 5 N (NP)
b. In what way is he limited? Record limitation, not condition.	ь.	
28a. About how long has he { been limited in been unable to had to go to a certain type of school?}	28 a.	000 [] Less than I month 1 Mos. 2 Yrs.
b. What (other) condition causes this limitation?	ь.	Enter condition in item C Ask 28c
If "old age" only, ask: Is this limitation caused by any specific condition?		Old age only (NP)
c. Is this limitation caused by any other condition?	с.	Y (Reask N 28b and c)
Mark box or ask:		Only condition
d. Which of these conditions would you say is the MAIN cause of his limitation?	d.	Enter main condition

	32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your, etc.) have -	A. Gallstones?	I. Any disease of the pancreas?
	If "Yes," ask 32b and c.	B. Any other gallbladder trouble?	J. Ulcer?
		C. Cirrhosis of the liver?	K. Hernia or rupture?
1	b. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.	D. Fatty liver?	L. A disease of the esophagus?
	c. During the past 12 months, did anyone else have?	E. Hepatitis?	M. Gastritis?
l	Conditions affecting the digestive system.	F. Yellow jaundice?	N. FREQUENT indigestion?
	Make no entry in item C for cold, flu, or grippe even	G. Any other liver trouble?	0. Any other stomach trouble?
	if reported in question 32.	H. Diabetes?	P. Enteritis?
6	la de la constante de la consta		
	 32a. Does anyone in the family (you, your, etc.) NOW have - If "Yes," ask 32b and c. b. Who is this? Enter name of condition and letter of line where reported in appropriate person's column in item C. 	A. Permanent stiffness or any deform (Permanent stiffness — joints wil	nity of the foot, leg, fingers, arm or back? not move at all)
	c. Does anyone else have?	B. Paralysis of any kind?	
	32d. DURING THE PAST 12 MONTHS, did anyone in the family (you, your, etc.) have - If ''Yes,'' ask 32e and f.	C. Arthritis of any kind or Rheumatism?	I. Trick knee?
2		D. Gout?	J. A slipped or ruptured disc?
	 Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C. 	E. Lumbago?	K. Curvature of the spine?
	f. During the past 12 months, did anyone else have?	F. Osteomyelitis? (os-tee-oh-my-uh-lite-iss)	L. REPEATED trouble with neck, back, or spine?
	Conditions C–N and V are conditions affecting the bone and muscle.	G. A bone cyst or bone spur?	M. Bursitis or Synovitis? (sin-uh-vite-iss)
		H. Any other disease of the bone or cartilage?	N. Any disease of the muscles or tendons?
á.	· · · · · · · · · · · · · · · · · · ·		the first of the second se
	32a. DURING THE PAST 12 MONTHS, did anyone in the	A. Goiter or other thyroid trouble?	
	family (you, your, etc.) have	B. Diabetes?	Glandular disorders
	if "Yes," ask 32b and c.	C. Cystic fibrosis?	
3	b. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.	D. Anemia?	 Blood disorder
	c. During the past 12 months, did anyone else have?	E. Epilepsy?	Conditions affecting
		F. Multiple sclerosis?	the nervous system
		G. Migraine?	<u> </u>

	32a. DURING THE PAST 12 MONTHS, did anyone	Q. Diverticulitis?	W. Cancer of the stomach, colon or rectum?
	in the family have – If "Yes," ask 32b and c.	R. Colitis?	X. During the past 12 months, did anyone in the family
1	 b. Who was this? Enter in item C. c. During the past 12 months, did anyone else have ? Conditions affecting the digestive system. 	S. Spastic colon?	have any other condition of the digestive system? If "Yes," ask: Who was this? — What was the
		T. FREQUENT constipation?	condition? (Enter in item C)
	Make no entry in Item C for cold, flu, or grippe even If reported in question 32.	U. Any other bowel trouble?	
		V. Any other intestinal trouble?	
	32d. DURING THE PAST 12 MONTHS, did anyone in the family have -	O. A tumor, cyst or growth of the skin?	U. Dermatitis or any other skin trouble?
	If "Yes," ask 32e and f. e. Who was this? Enter in item C.	P. Eczema or psoriasis? (so-rye-uh-sis)	V. TROUBLE with fallen arches, flatfeet or clubfoot?
2	 f. During the past 12 months, did anyone else have ? Conditions O-U and W-Z are conditions affecting the skin. 	Q. TROUBLE with dry or itching skin?	W. TROUBLE with ingrown toenails or fingernails?
2		R. TROUBLE with acne?	X. TROUBLE with bunions, carns, or calluses?
		S. A skin ulcer?	Y. A disease of the hair or scalp?
		T. Any kind of skin allergy?	Z. Any disease of the lymph or sweat glands?
		an a	£
	32a. DURING THE PAST 12 MONTHS, did anyone in the family have -	H. Neuralgia or neuritis? I. Sciatica?	Conditions affecting the nervous system
	If "Yes," ask 32b and c.	J. Nephritis?	h
1	b. Who was this? Enter in item C.	K. Kidney stones?	
3	c. During the past 12 months, did anyone	L. Any other kidney trouble?	
	else have ?	M. Bladder trouble?	Genito-urinary
1		N. Prostate trouble?	
		O. Disease of the uterus or ovary?	
		P. Any other female trouble?	

4	 32a. Does anyone in the family (you, your, etc.) NOW have - If "Yes," ask 32b and c. b. Who is this? - Enter name of condition and letter of line where reported in appropriate person's column in item C. c. Does anyone else have? A-L are conditions affecting { hearing vision speech } 	 A. Deafness in one or both ears? B. Any other trouble hearing with one or both ears? C. Tinnitus or ringing in the ears? D. Blindness in one or both eyes? E. Cataracts? F. Glaucoma? G. Color blindness? 	 H. A detached retina or any other condition of the retina? I. Any other trouble seeing with one or both eyes even when wearing glasses? J. A cleft palate or harelip? K. Stammering or stuttering? L. Any other speech defect? M. A missing finger, hand, or arm, toe, foot, or leg? N. A missing (breast), kidney or lung? 			
· ·						
	32a. Has anyone in the family (you, your, etc.) EVER had - if "Yes," ask 32b and c.	A. Rheumatic fever? B. Rheumatic heart disease?	G. Stroke or a cerebrovascular accident? H. Hemorrhage of the brain?			
5	 b. Who was this? - Enter name of condition and letter of line where reported in appropriate person's column in item C. c. Has anyone else ever had? Conditions affecting the heart and circulatory system. 	C. Hardening of the arteries or arteriosclerosis?	I. Angina pectorís?			
		D. Congenital heart disease?	J. Myocardial infarction?			
		E. Coronary heart disease?	K. Any other heart attack?			
		F. High blood pressure?				
	32a. DURING THE PAST 12 MONTHS, did	A. Bronchitis?	F. Sinus trouble?			
	anyone in the family (you, your, etc.) have	B. Bronchiectasis? (brong ke-ek tah-sis)	G. Deflected or deviated nasal septum?			
	if ''Yes,'' ask 32b and c.	C. Asthma?	H. *Tonsillitis or enlargement of the tonsils or adenoids?			
	b. Why was this? - Enter name of condition and letter of line where reported in	D. Hay fever?				
	appropriate person's column in item C.	E. Nasal polyp?	I. *Laryngitis?			
6	c. During the past 12 months did anyone else have? Conditions affecting the respiratory system.	 *If reported in question 32 only, ask: 1. How many times did have in the post 12 months? - If 2+ enter in item C. If only ! time, ask: 2. How long did it last? - If I month or longer, enter in item C. If less than ! month, do not record. If tonsils or adenoids removed during the past 12 months, enter condition causing removal in Make no entry in item C for cold; flu; red, sore, or strep throat; or "virus" reported in answer to question 32. 				

4	 32a. Does anyone in the family NOW have – If "Yes," ask 32b and c. b. Who is this? Enter in item C. c. Does anyone else have? Conditions O-W are impairments. Conditions Y and Z affect the nervous system. 	O. Palsy or cerebral palsy? P. Paralysis of any kind? Q. Curvature of the spine? R. REPEATED trouble with back or spine? S. Any TROUBLE with fallen arches or flatfeet? T. A clubfoot?		U. PERMANENT stiffness or any deformity of the back, foot, or leg? (Fermanent stiffness - joints will not nove at all) V. PERMANENT stiffness or any deformity of the fingers, hand, or arm? W. Mental retardation? X. Any condition caused by an old accident or injury? If "Yes," ask: What is the condition? Y. Epilepsy? Z. REPEATED convulsions, seizures, or blackouts?
		a a construction of the co	1777	
	32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your, etc.) have -	L. Damaged heart valves? M. Tachycardia or rapid heart?		R. Gangrene? S. Varicose veins?
5	If "Yes," ask 32b and c. b. Who was this? Enter in item C. c. During the past 12 months did anyone	N. Heart murmur? O. Any other heart trouble?		T. Hemorrhoids or piles? U. Phlebitis or thrombophlebitis?
	else have? Conditions affecting the heart and circulatory system.	P. Aneurysm? Q. Any blood clots?		V. Any other condition affecting blood circulation?
	32a. DURING THE PAST 12 MONTHS, did anyone in the family have -	J. Tumor, cyst, or growth of the bronchial tube or lung?		O. Tumor, cyst, or growth of the throat, larynx, or trachea?
	If "Yes," ask 32b and c.	K. Emphysema?		P. Any work-related respiratory condition
	b. Who was this? Enter in item C.c. During the past 12 months, did anyone	L. Pleurisy?		such as dust on the lungs, silicosis or pneu-mo-co-ni-o-sis?
	Make no entry in item C for cold; flu; red, sore, or strep throat; or "virus" reported in answer to question 32.	M. Tuberculosis?		Q. During the past 12 months did anyone in the family have any other respiratory, lung, or pulmonary condition?
6		N. Abscess of the lung?		If 'Yes,' ask: Who was this ? - What was the condition? (Enter in item C)
	Conditions affecting the respiratory system.			

CONDITION 1					Except for eyes, ears, or internal organs, ask if there are any of			
1. Person number Name of condition				the following entries in 3a-d: Infection Sore Soreness f. What part of the (part of body in 3e) is offected by the (infection/				
2. When did last see or talk to a doctor about his?					sore/soreness) – the skin, muscle, bone, or some other part? Specify,			
1[] In interview 1[] Past 2 wks. (Item C) s[] 2-4 yrs. week 2[] 2 wks.~6 mos. 6[] 5+ yrs.								•
week 2[] 2 wks6 mos. 6 [] 5 · yrs. (Reask 2) 3 [] Over 6-12 mos. 7 [] Never					Ask if there are any of the following entries in 3a-d:			
	4∐ Hyr.		s[] DK if Dr. seer			Tumor	Cyst Growth	
	11.11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		9[¯] DK when Dr. s	een	-	, -	wth) malignant or benign?	
	name of cond blindness (NC) dent of injury (A		d C (A2)		1 [] Malignant	2 [-] Benign 9	[_] DK
If "Doctor not talked to," transcribe entry from item 1.					A2 Ask remaining questions as appropriate for the condition entered in:			
If "Doctor to	lked to.'' ask					1 🛄 Item I 2 🛄 Q. 3a	³ □ Q. 3b 4 □ Q. 3c	s 🛄 Q. 3d 6 🛄 Q. 3e
3a. What did the doctor say it was? - Did he give it a medical name?						ing the past 2 week out down on the thin	s, did his cause him gs he usually does?	1 Y 2 N (9)
Do not ask f		📋 On Car	d C (A2)		5. During that period, how many days did he cut			Dave
b. What was the cause of? Accident or injury (A2)					down for as much as a day? Days oo [] None (9)			;
If the entry in 3a or 3b includes the words					6. During that 2-week period, how many days did his keep him in bed all or most of the day?			Days
Ailment Anemia	Condition Cyst	D: sorder Growth	Rupture Trouble					oo[] None
Asthma Attack	Defect Disease	Measles Problem	Tumor Ask C Ulcer			cif 17+ years	kaan him fram waak	Days (9)
c. What kind of is it?				7. How many days did his keep him from work during that 2-week period? (For females): not counting work around the house? 00[] None (9)				
For allergy (r stroke, ask					(if 6—16 years: w many days did his	keep him from	Days
d. How does th	allergy (stroke) offect him?				ool during that 2-we	•	00 [_] None
					9. When did first notice his? 1[] Last week 4[] 2 weeks-3 months			
lf in 3a⊸d th	ere is an impairr	nent or any of the	following entries:		2 Week before 5 Over 3–12 months			
Abscess Asha (and	• • • • • • • • • • • • • • • • • • •	Damage	Paralysis		3 [] Past 2 weeks-DK which 6 [] More than 12 months ago			
Bleeding					(Was it during the past 12 months or before that time?) (Was it during the past 3 months or before that time?)			
Blood clot Boil		Infection Inflammation	Stiff(ness) Tumor A	sk e:	(Was it during the past 2 weeks or before that time?)			
Cancer Cramps (ex		Neuralgia Neuritis	Ulcer Varicose veins			1 🛄 Not an ey		t eye cond. (6+ yrs.) (10)
menstrual Cyst		Pain	Weak(ness)		A3	2 🔲 First eye (under 6)		first eye cond. (AA)
e. What part of the body is affected?					10. Co	n see well enoug	h to read ordinary newspape	er print
Show the follow	•	ieu:	Specify		WI	TH GLASSES with h	is∫left eye?1	
Head							{right } eye? 1 }	(2 N
Back/spine/vertebrae upper, middle, lower Side					FOOTI	IOTES		
Ear · · · · · · · · · · · · · · · · · · ·								
Arm								
Leg								
Foot								

1 Missing extremity (A4) 2 Condition in C2 does not have a letter as source (A4)	A4 Accident or injury Other (NC)				
Solution in C2 has a letter as source, Doctor seen (11)	17a. Did the accident happen during the past 2 years or before that time?				
4 Condition in C2 has a letter as source, Doctor not seen (15)	During the past 2 years Before 2 years (18a)				
11a. Does NOW take any medicine or treatment	b. When did the accident happen?				
for his? 2 N (12)	Last week Over 3-12 months				
b. Was any of this medicine or treatment recommended 1 Y	Week before 1-2 years				
by a doctor? 2 N	2 weeks-3 months				
12. Has he ever had surgery for this condition? 1 Y	18a. At the time of the accident what part of the body was hurt?				
2 N	What kind of injury was it? Anything else?				
13. Was he ever hospitalized for this condition? 1 Y	Part(s) of body Kind of injury				
2 N					
14. During the past 12 months, about how many times has seen or talked to a doctor about his? Times					
(Do not count visits while a patient in a hospital.) 000 🗌 None	If accident happened more than 3 months ago, ask:				
15a. About how many days during the past 12 months has	b. What part of the body is affected now?				
this condition kept him in bed all or most of the day? Days	How is his affected? Is he affected in any other way?				
000 🗌 None	Part(s) of body Present effects				
Ask if 17+ years:					
b. About how many days during the past 12 months has Days this condition kept him from work?					
For females: Not counting work around the house? 000 🗌 None					
16a. How often does his bother him – all of the time, often,	 19. Where did the accident happen? 1 At home (inside house) 2 At home (adjacent premises) 3 Street and highway (includes roadway and public sidewalk) 				
once in a while, or never? 1 All the time 2 Often 3 Once in a while					
0 🗌 Never (16c) 8 🗋 Other - Specify	4				
b. When it does bother him, is he bothered a great deal, some, or very little?	6 🗍 School (includes premises)				
1 🗍 Great deal 2 🗋 Some 3 📋 Very little	7 Place of recreation and sports, except at school 8 Other - Specify				
4 Dther - Specify					
All the time in 16a OR condition list 4 asked (A4)					
	20. Was at work at his job or business when the accident happened? 1 Y 3 While in Armed Services				
c. Does still have this condition? 1 Y (A4) N	2 N 4 Under 17 at time of accident				
d. Is this condition completely cured or is it under control?	21a. Was a car, truck, bus, or other motor vehicle				
2 Cured 3 Under control (A4)	involved in the accident in any way? 1 Y 2 N (NC)				
4 _ Other - Specify (A4)	b. Was more than one vehicle involved? Y N				
e. About how long did have this condition before it was cured?					
o 🗋 Less than one month Months Years	c. Was it (either one) moving at the time? 1 Y 2 N				

CARD E2

Show detail in question 3e, Condition page and/or question 6, Hospital page for these IMPAIRMENTS. Deafness

500m0000

Trouble hearing

Other ear condition

Blindness

Trouble seeing

Other eye condition

Missing hand - all or part

Missing arm - all or part

Missing foot -- all or part

Missing leg - all or part

Trouble, stiffness or any deformity of - foot, leg, fingers, arm, or back

CARD R

1. Aleut, Eskimo or American Indian

2. Asian or Pacific Islander

3. Black

4 White

5 Another group not listed - Specify

CARD C

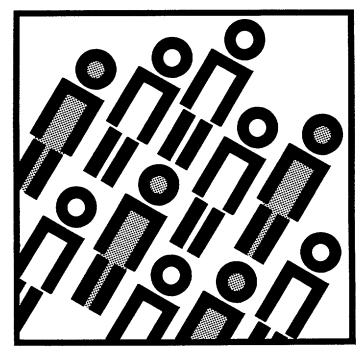
Acne	Hemorrhoids or piles (any kind)		
Appendicitis	Hernia (any type)		
Arteriosclerosis	Kidney stones		
Arthritis (any kind)	Laryngitis		
Athlete's foot	Migraine (any kind)		
Bronchitis (any kind)	Mumps		
Bunions	Normal delivery		
Bursitis	Phlebitis (Thrombophlebitis)		
Calluses	Pneumonia		
Chickenpox	Pregnancy		
Cold	Sciatica		
Corns	Sinus (any kind)		
Croup	Strep (Streptococcus) throat		
Diabetes (any type)	Tonsillitis		
Epilepsy (any kind)	Ulcer (duodenal, stomach, peptic or gastric only) Vasectomy Warts Whooping cough		
Gallstones			
Goiter			
Hardening of the arteries			
Hay fever			

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