



**IMPACT OF CHRONIC CONDITIONS  
AND RISK FACTORS ON  
QUALITY OF LIFE:  
The North West Adelaide Health Study**

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# Organisations involved

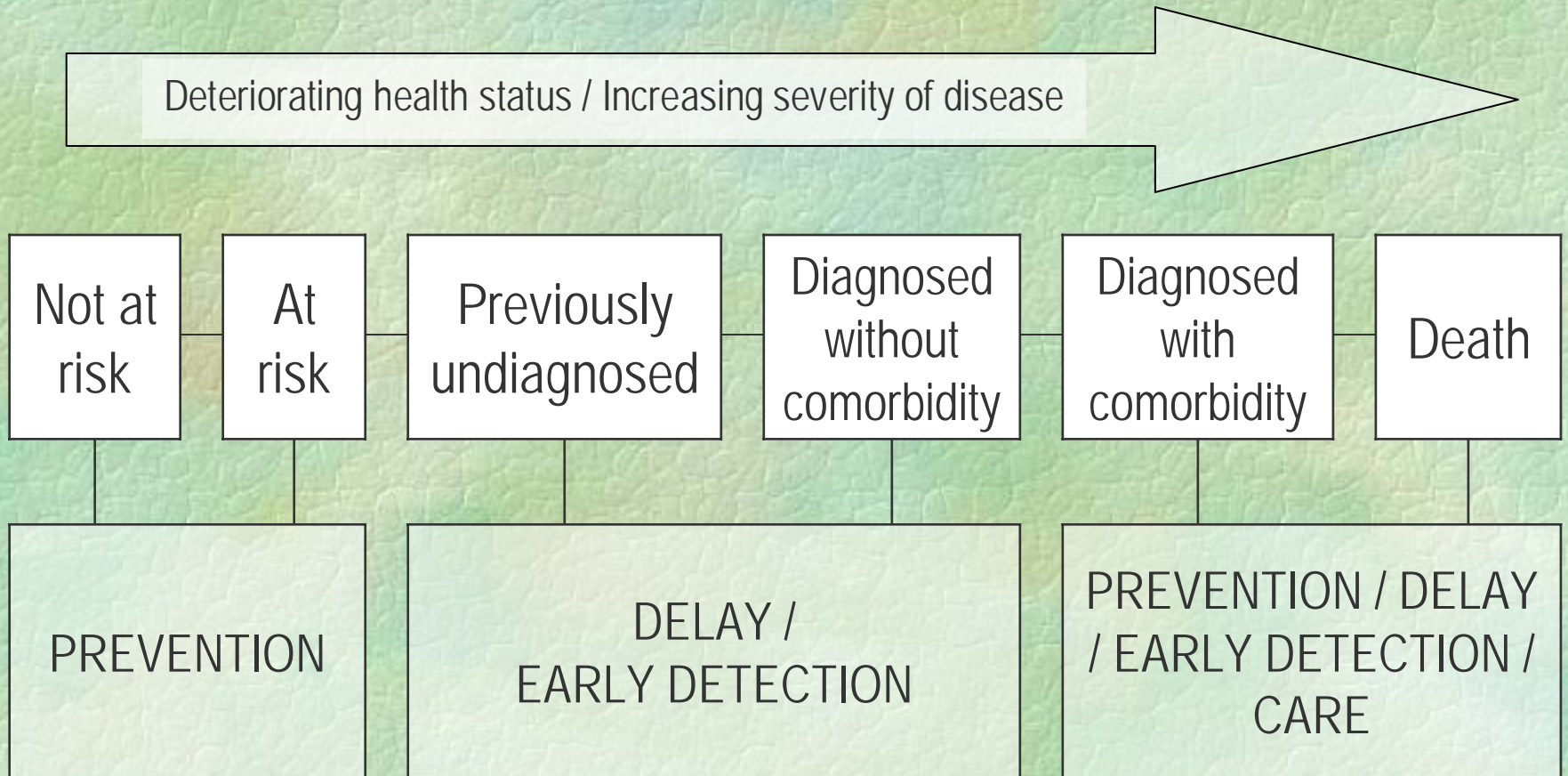
- SA Department of Human Services  
(Centre for Population Studies in Epidemiology)
- The Queen Elizabeth Hospital
- Lyell McEwin Health Service
- The University of Adelaide
- University of South Australia



# Overall study aims

- Assess prevalence of priority health problems (diabetes, asthma and COPD), risk factors and their demographic distributions.
- Segment each chronic condition into subgroups along a continuum
  - More precise targeting.
  - More effective interventions and policy.
- Track cohort over time.

# Chronic disease continuum





# Methods - Overall

- Random, representative sample
- North West region of Adelaide
- n=2523, aged 18+
- CATI recruitment interview
- Self-administered questionnaire
- Attendance at clinic



# Methods - Questionnaire

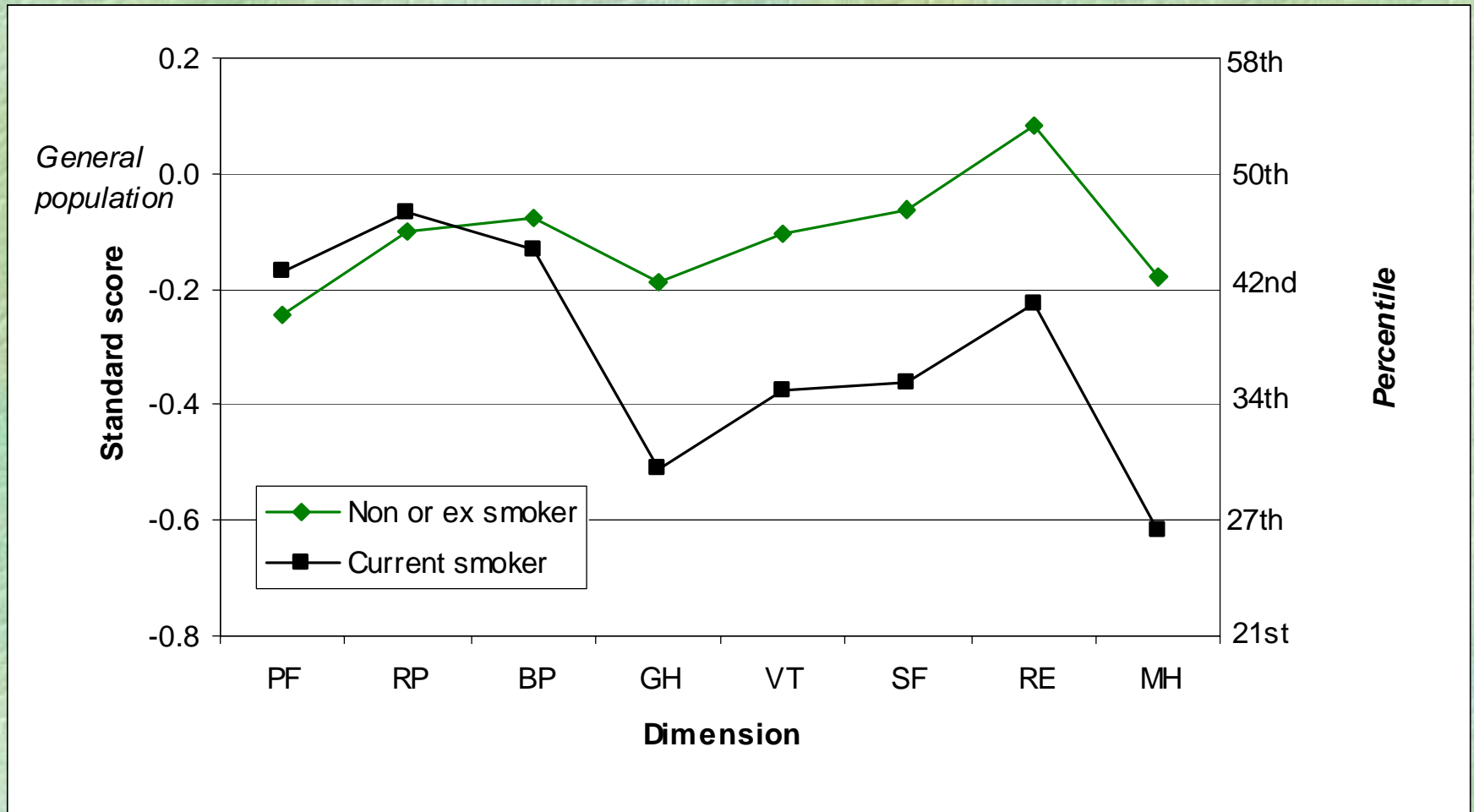
- Self-reported diabetes, asthma, COPD (emphysema and bronchitis)
- Risk factors (smoking, physical activity, alcohol consumption, family history of diabetes, heart disease and stroke)
- Health service use
- Demographics
- SF-36



# Methods – Clinic assessment

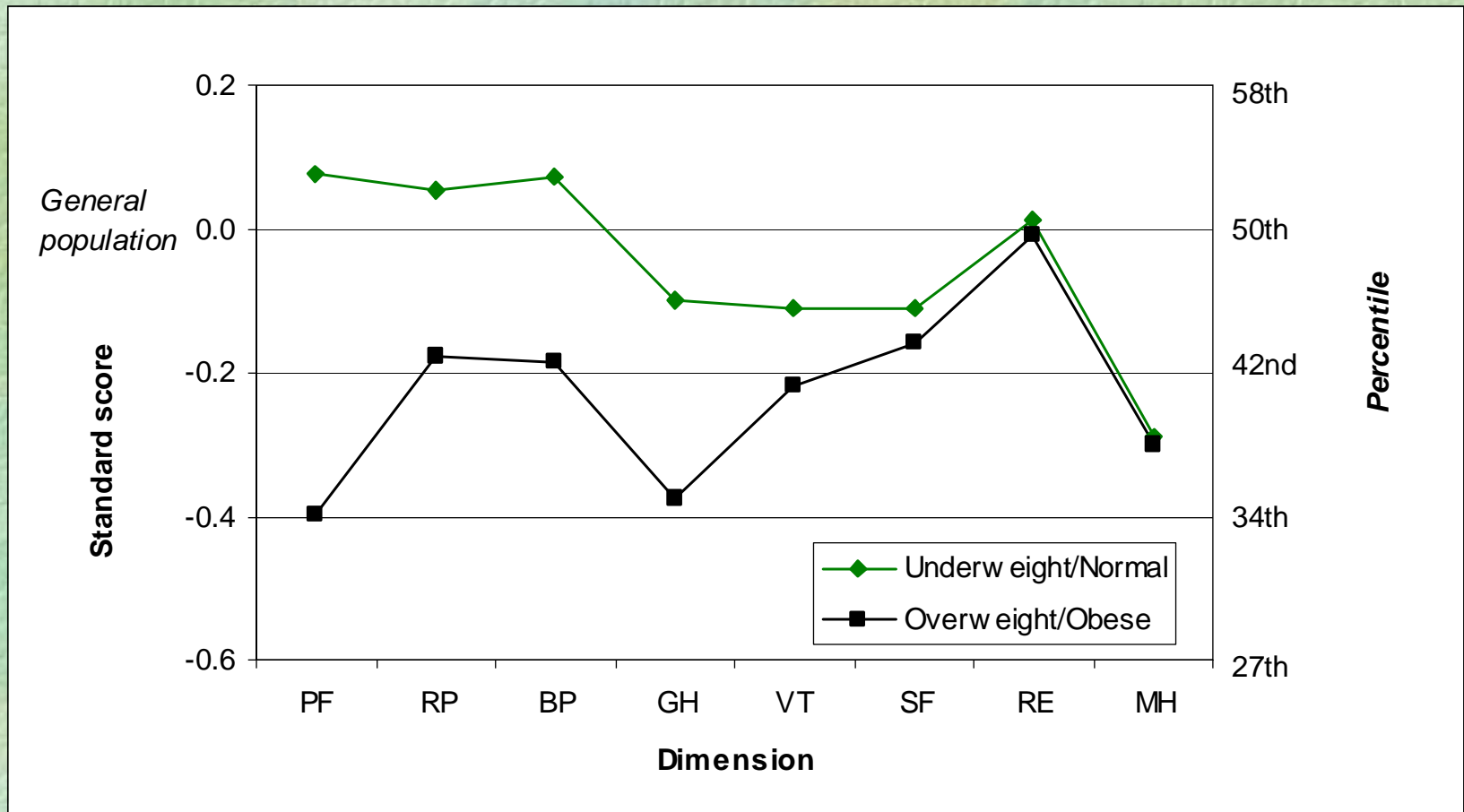
- Blood pressure
- Height and weight measurements
- Waist and hip circumference
- Fasting blood sample (glucose, lipid profile, glycated haemoglobin)
- Allergy skin test (rye grass, cat, house dust mite, alternaria, feather and cockroach)
- Lung function tests (spirometry followed by ventolin inhalation and retesting)

# SF-36 standard scores for people who do and do not smoke, compared to the general SA population

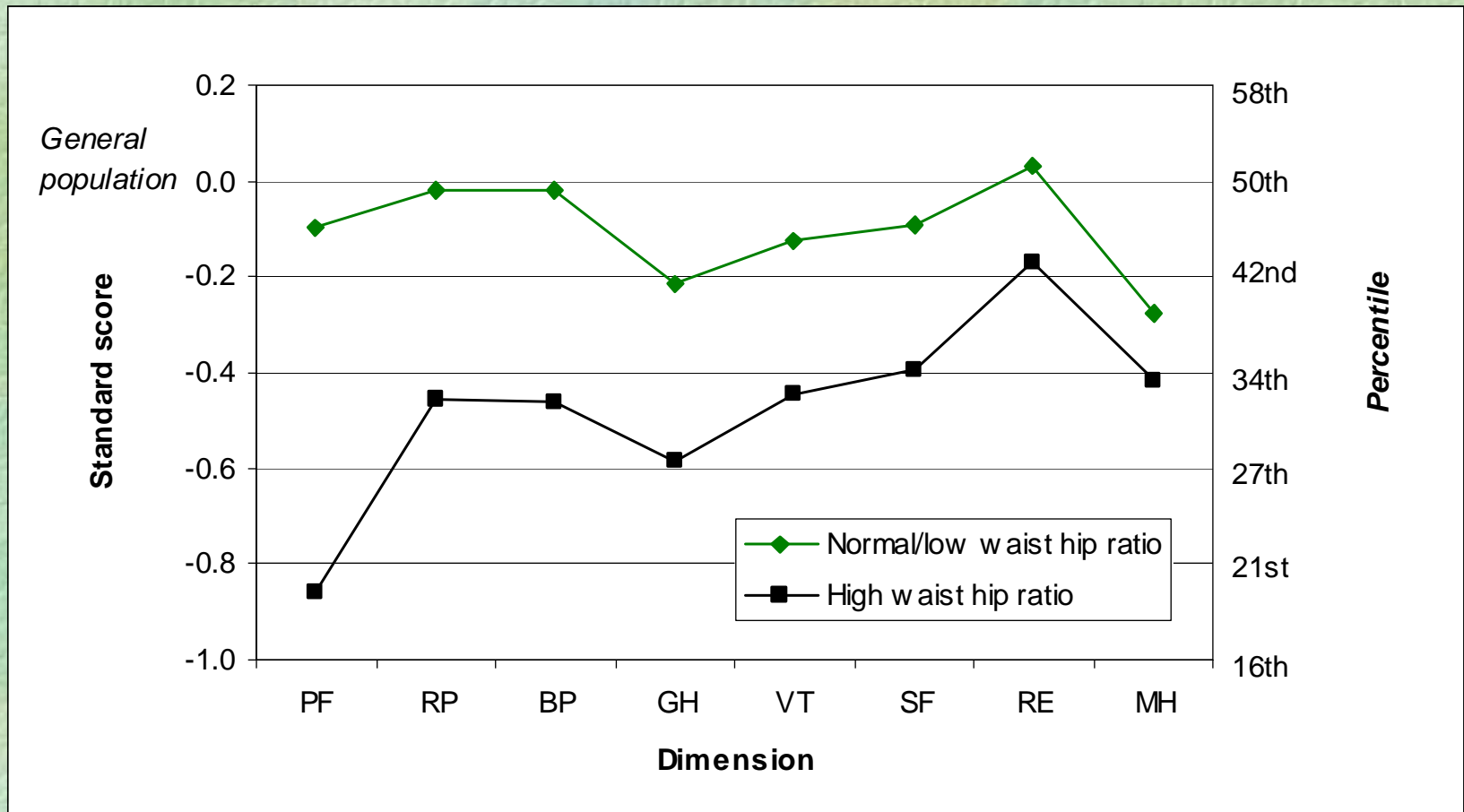




# SF-36 standard scores for people who are underweight/normal and overweight/obese according to BMI, compared to the general SA population

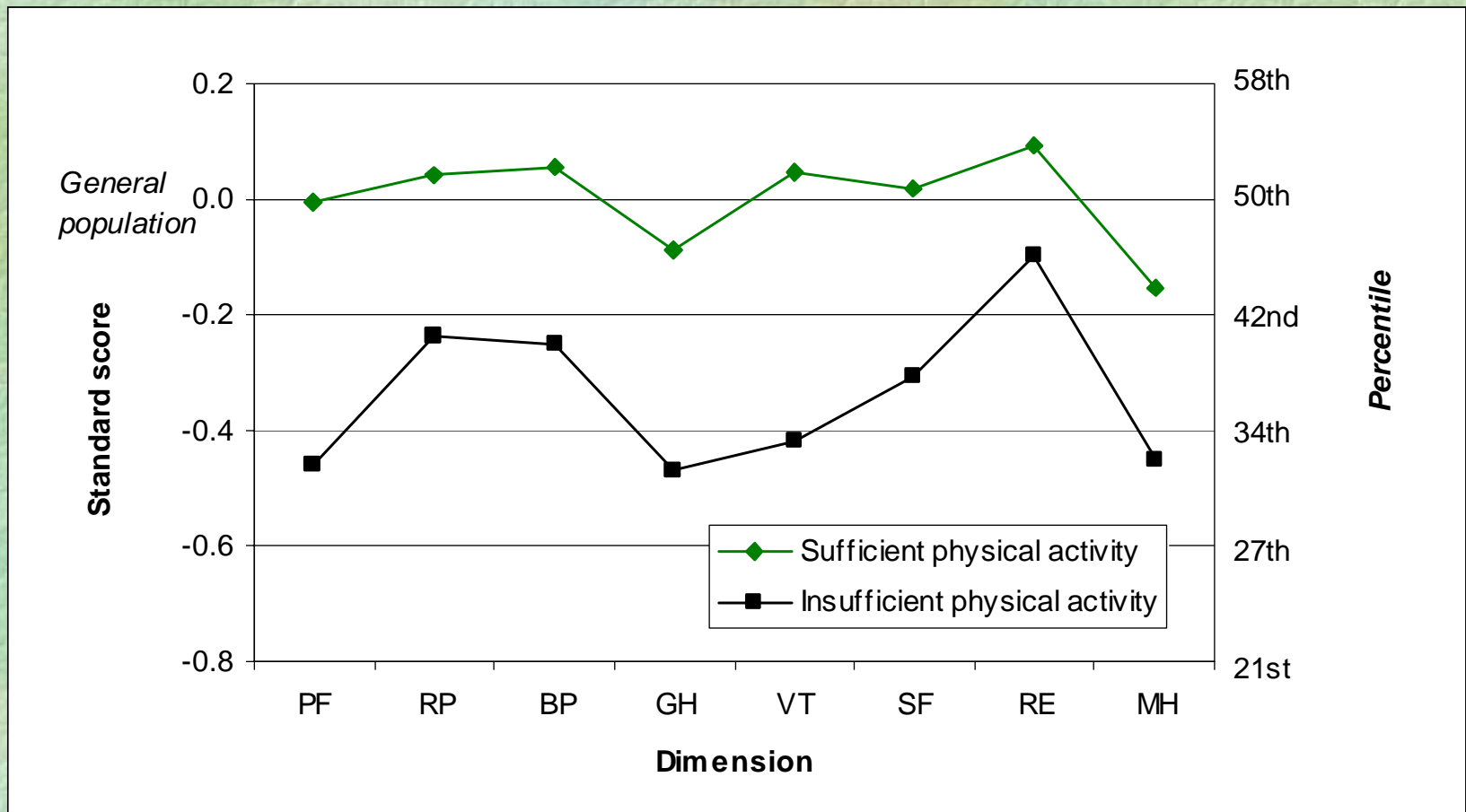


# SF-36 standard scores for people with and without a high WHR, compared to the general SA population

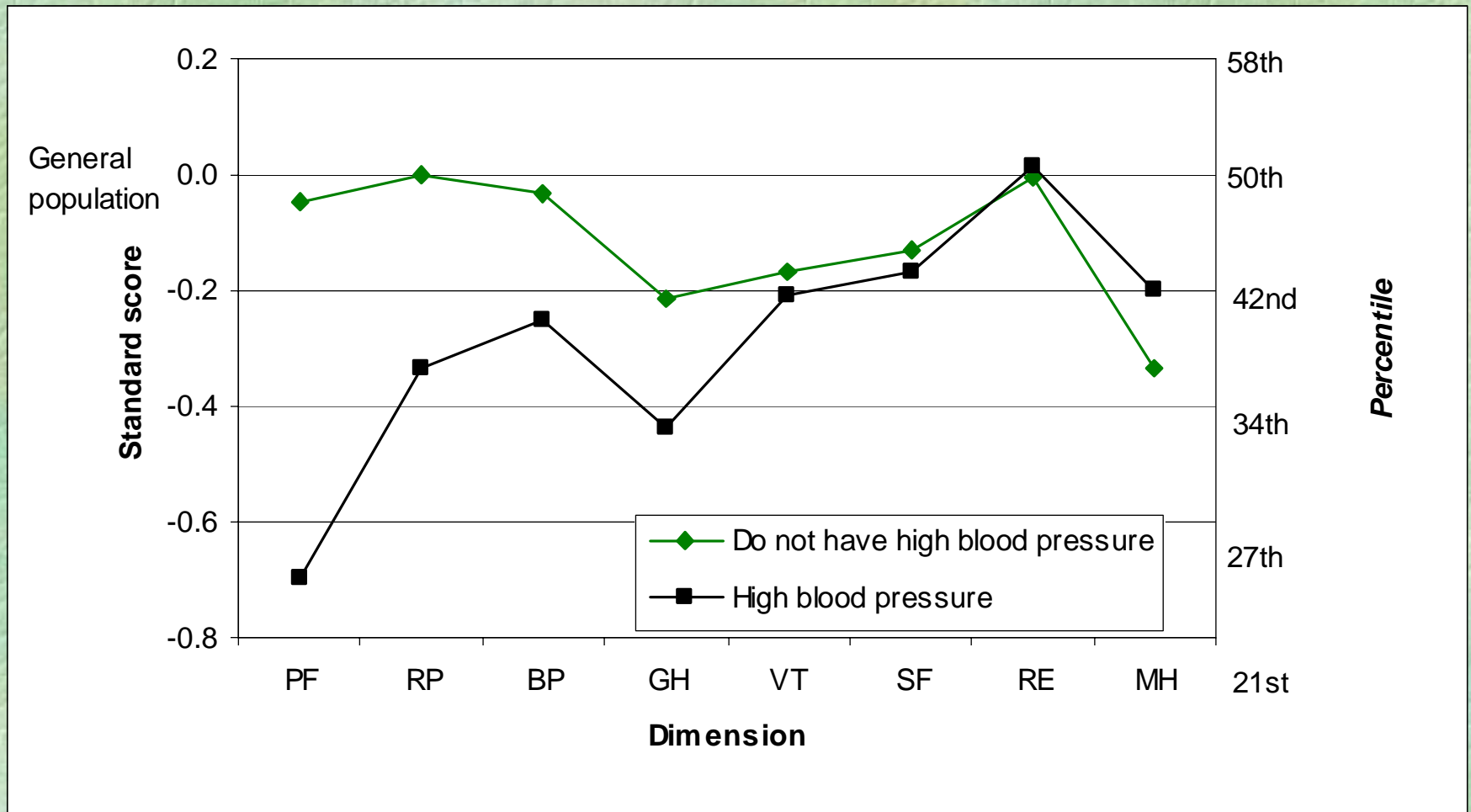




# SF-36 standard scores for people who do and do not perform sufficient physical activity, compared to the general SA population

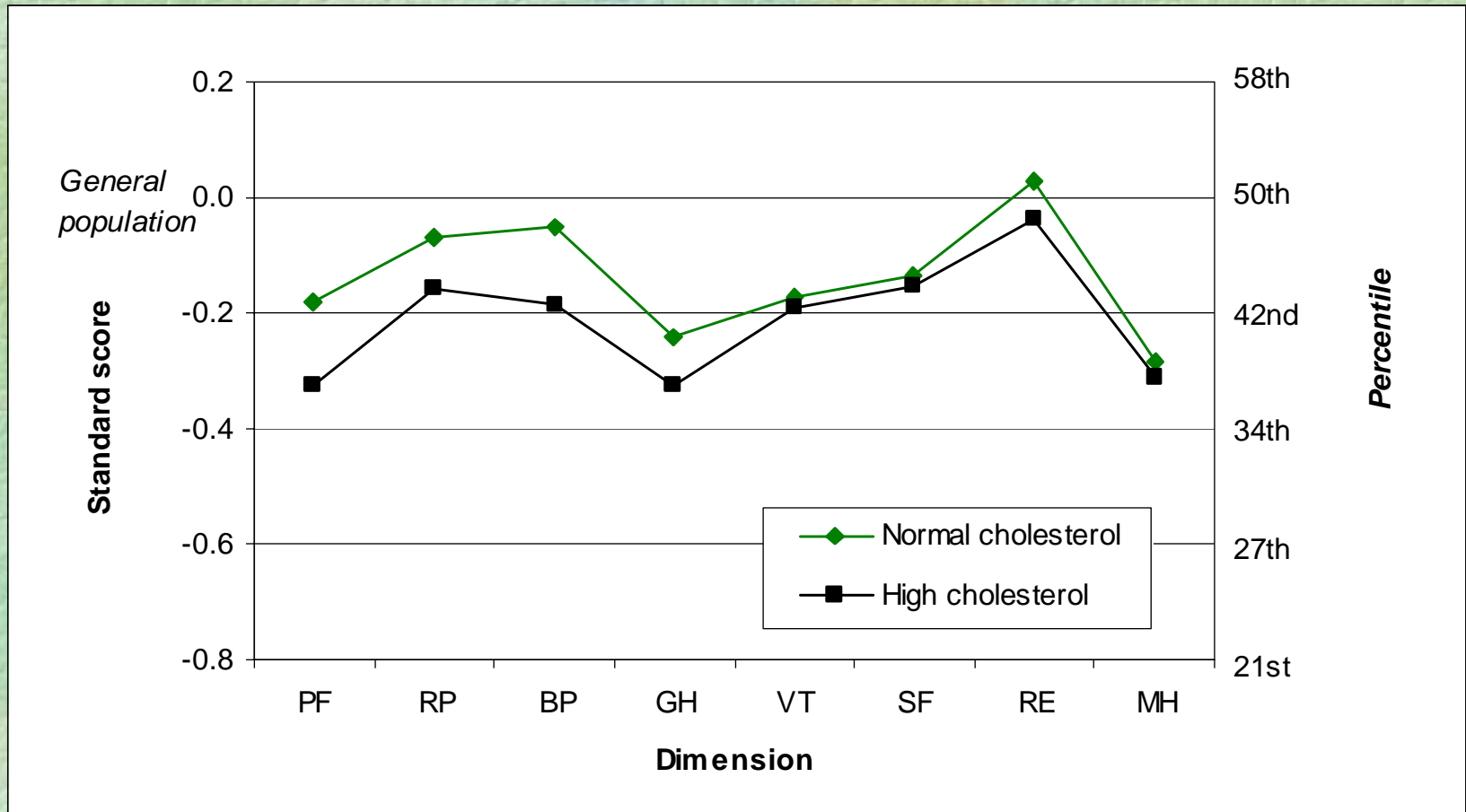


# SF-36 standard scores for people with and without high blood pressure, compared to the general SA population

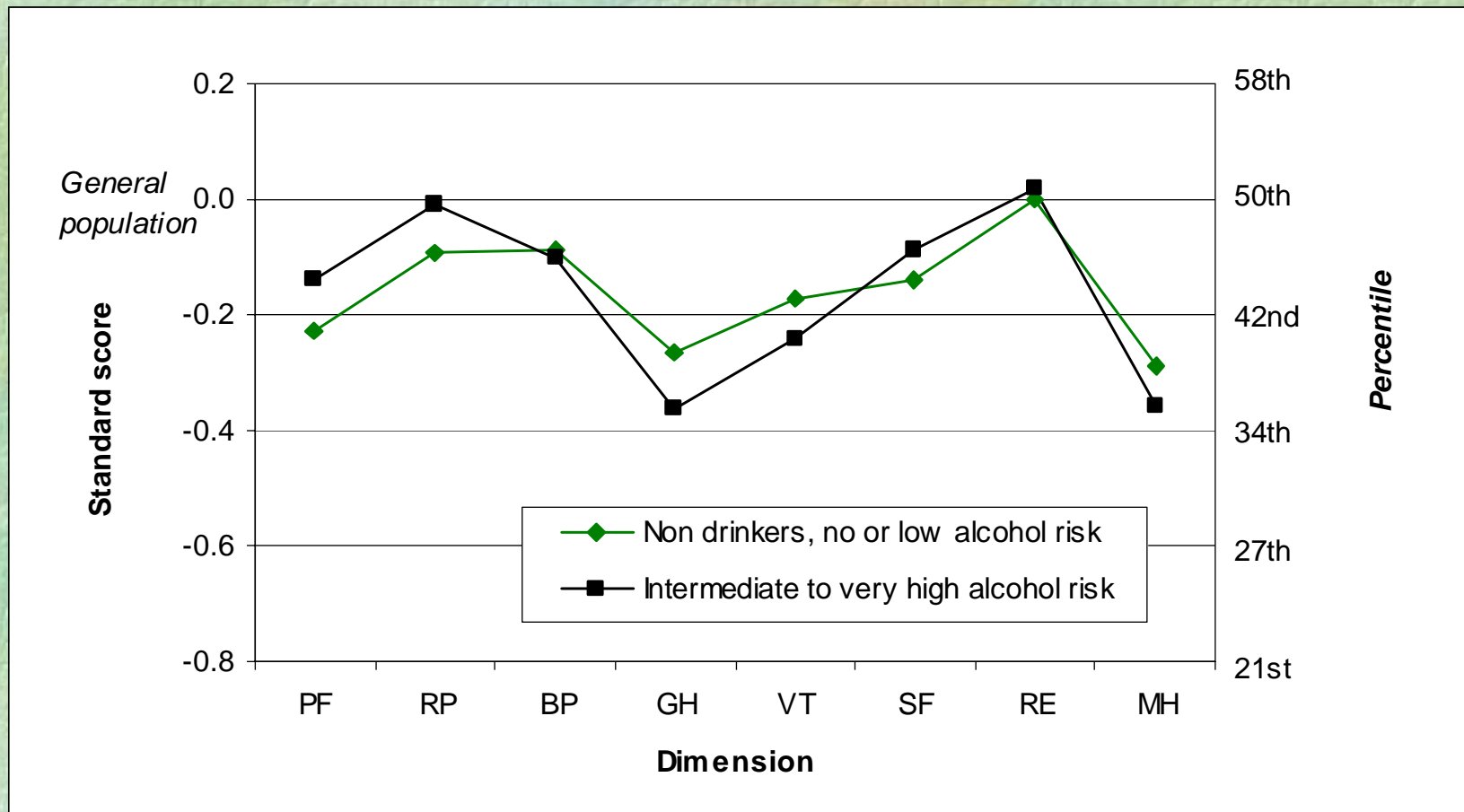




# SF-36 standard scores for people with and without high cholesterol, compared to the general SA population

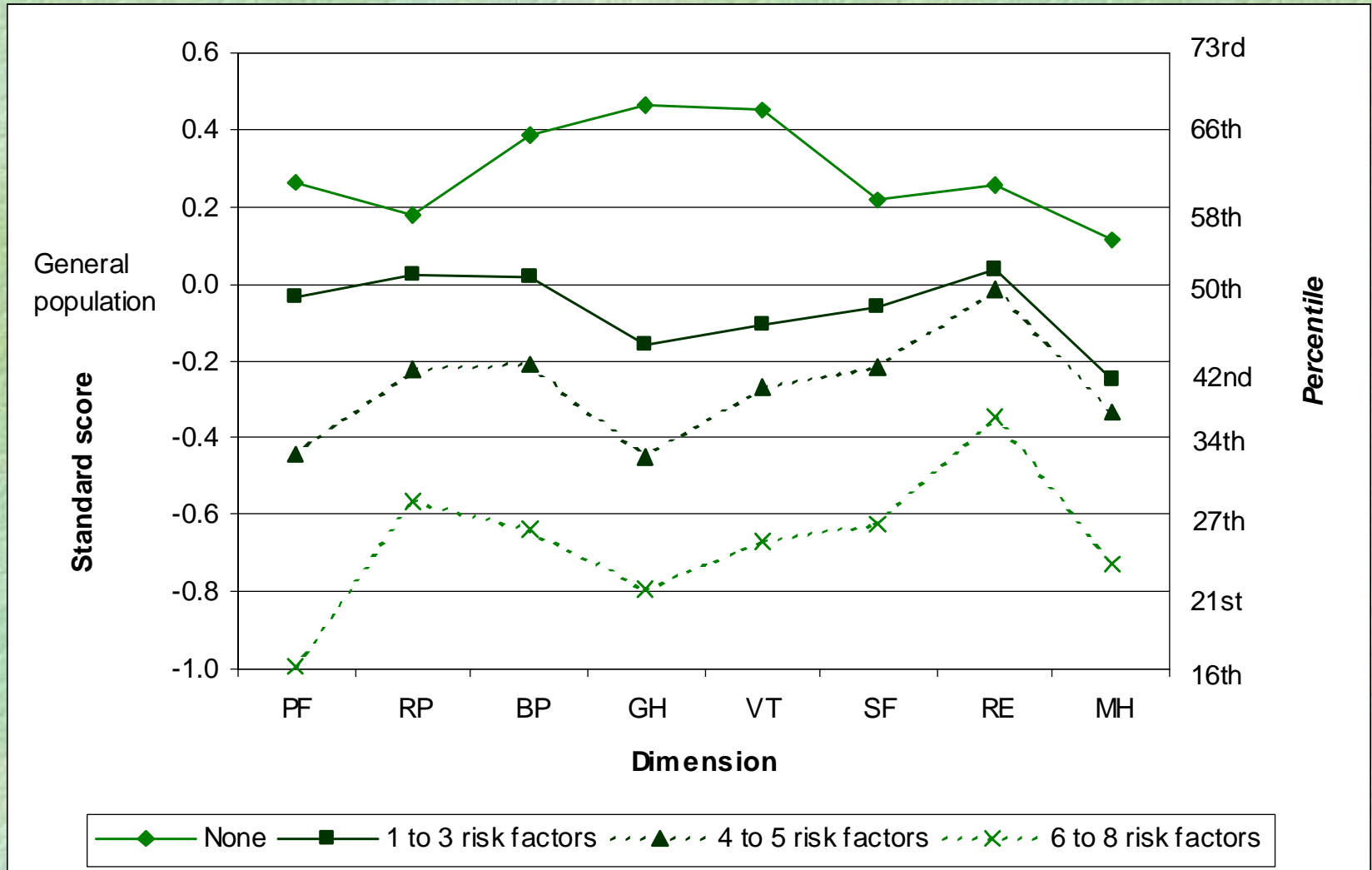


# SF-36 standard scores for people classified as intermediate to very high alcohol risk and non-drinkers/no/low alcohol risk, compared to the general SA population

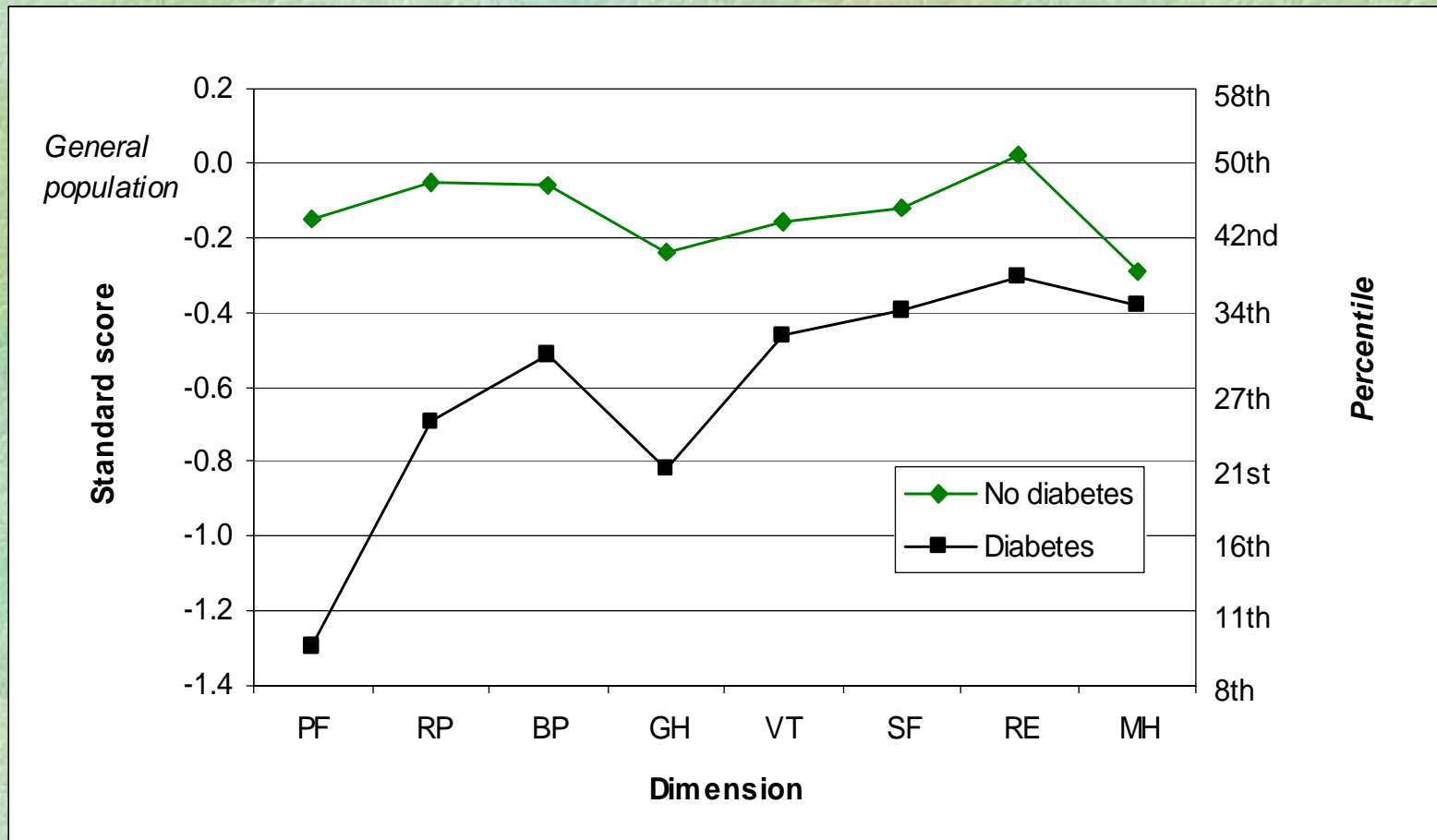




# SF-36 standard scores for people with multiple risk factors compared to the general SA population

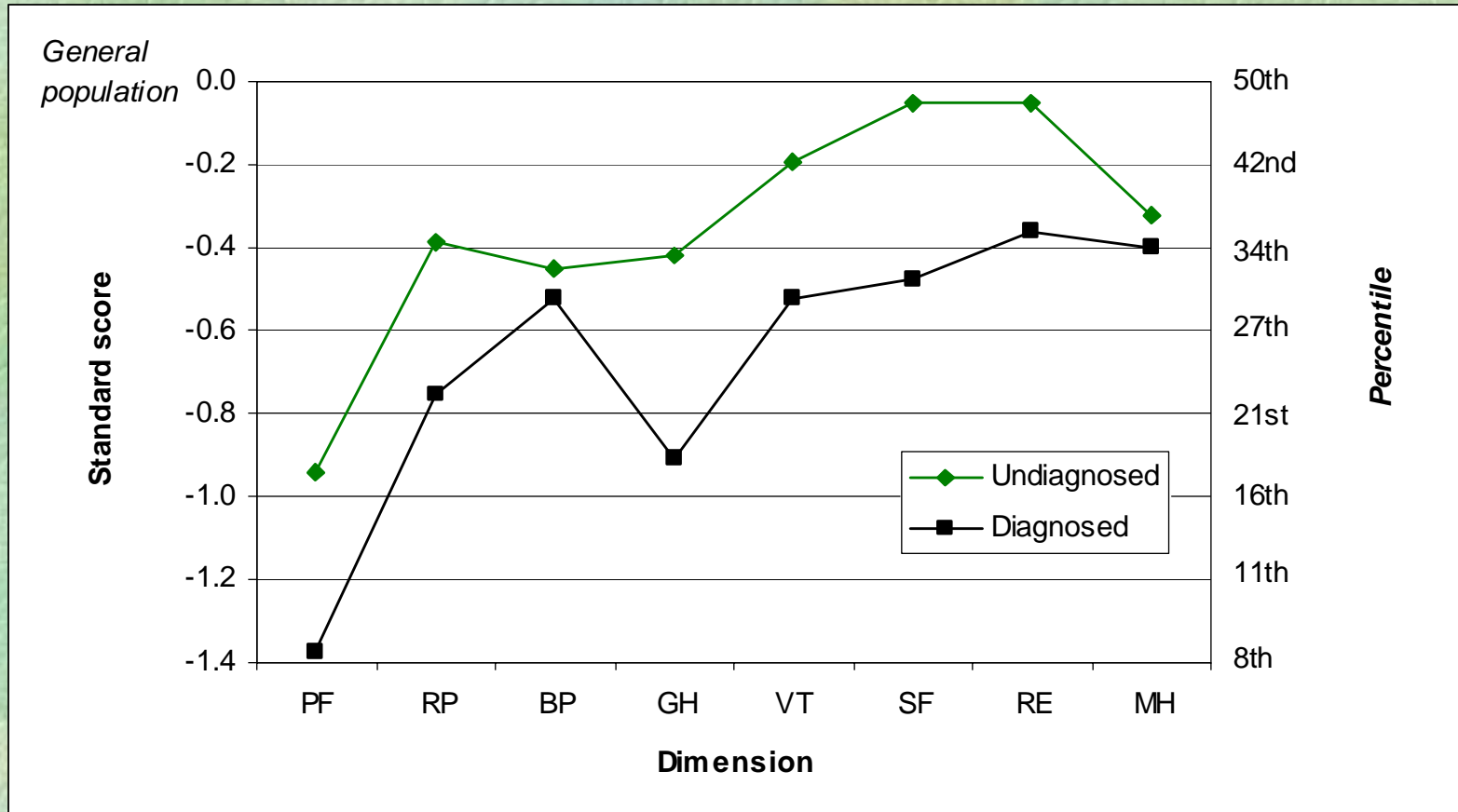


# SF-36 standard scores for people with and without diabetes compared to the general SA population

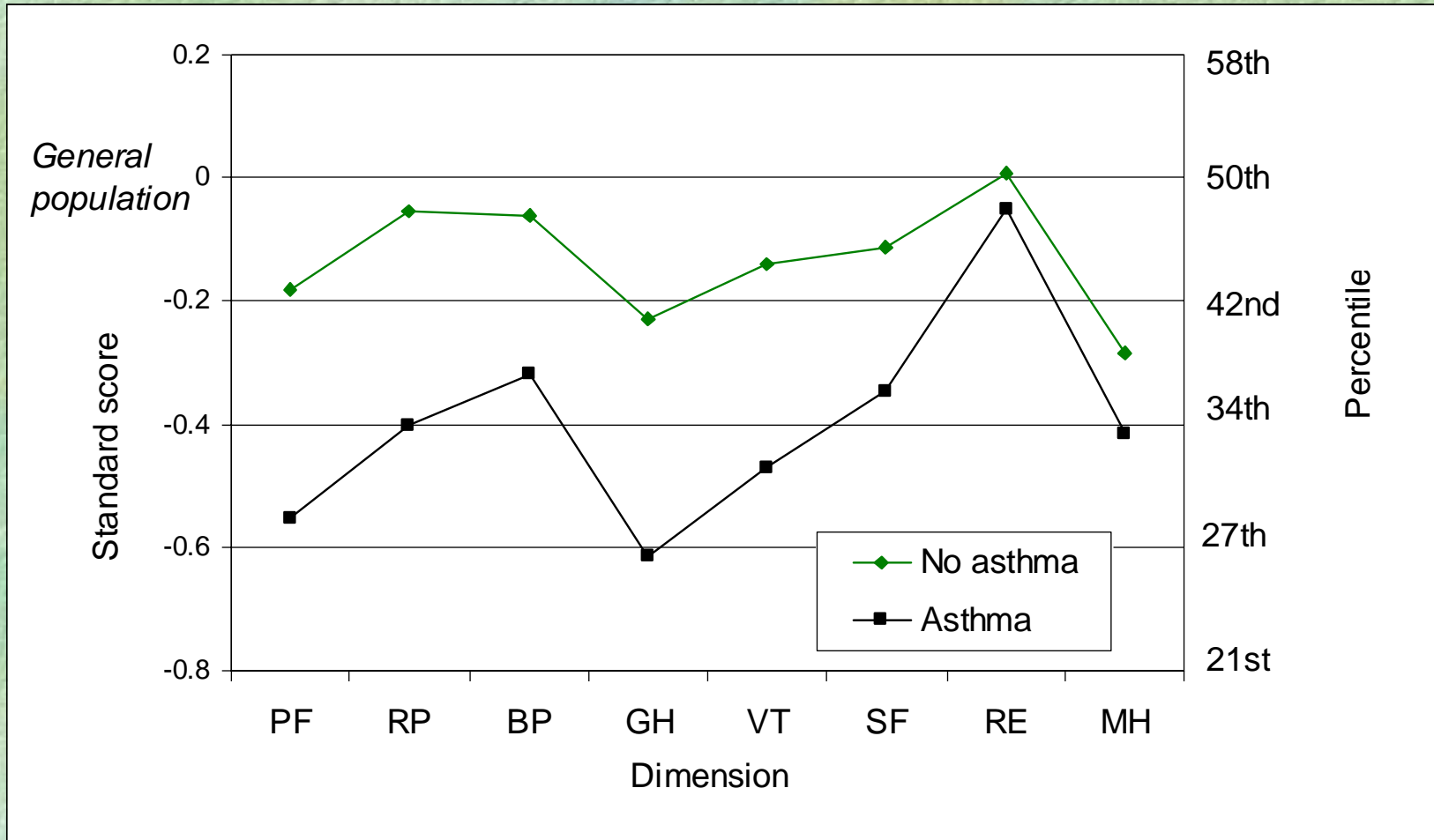




# SF-36 standard scores for people with undiagnosed and diagnosed diabetes compared to the general SA population

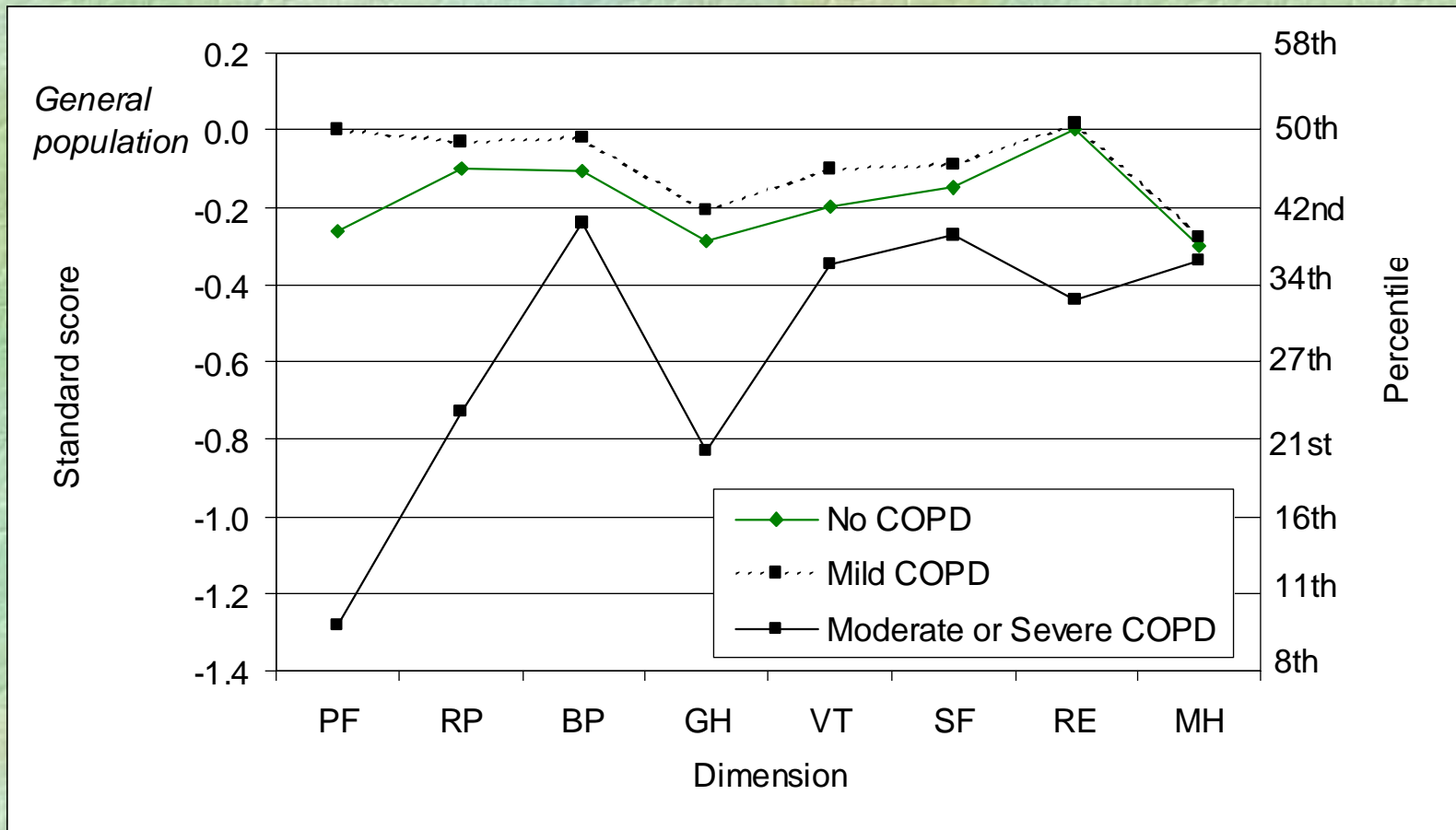


# SF-36 standard scores for people with and without current asthma compared to the general SA population

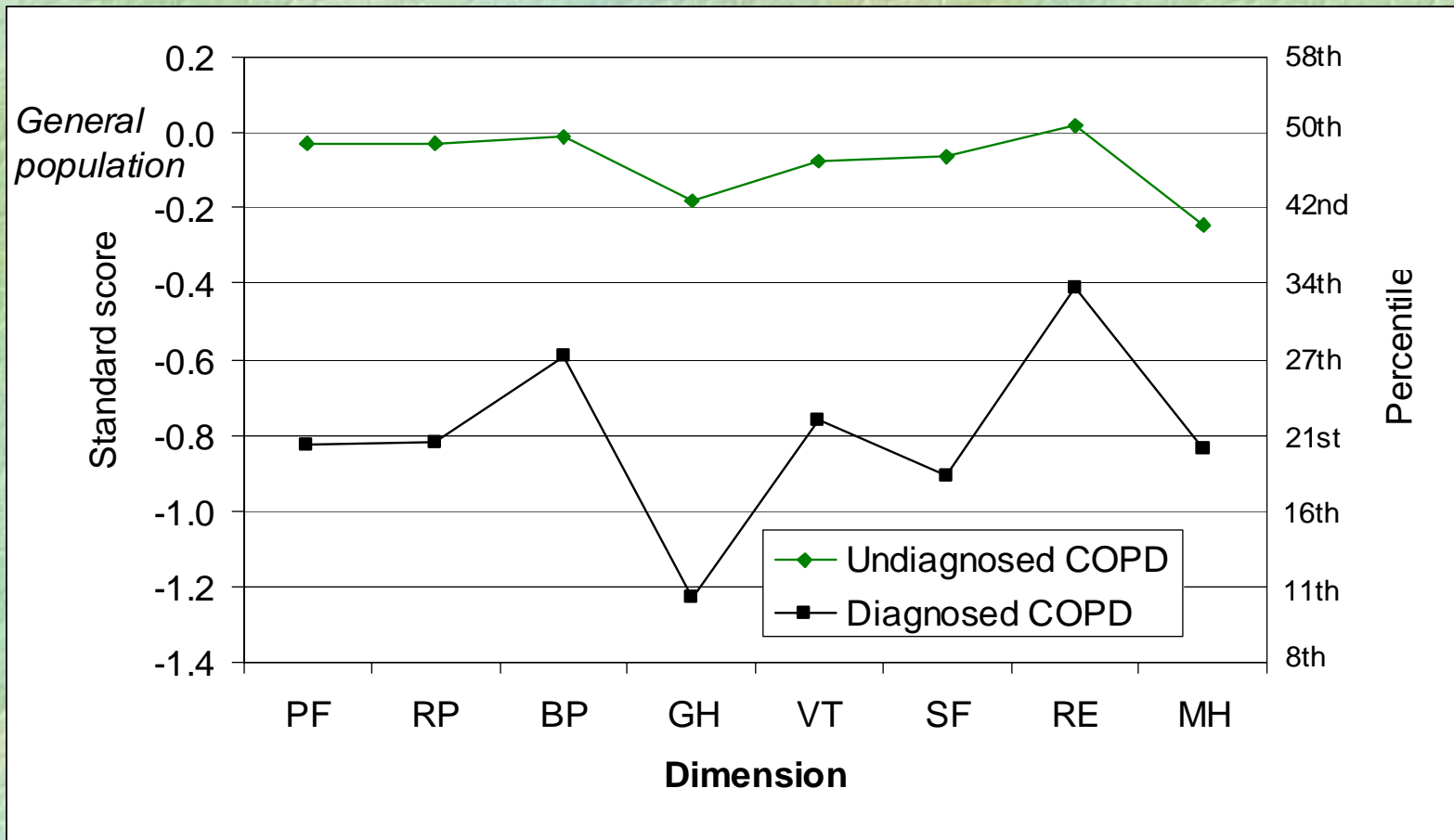




# SF-36 standard scores for people with and without COPD compared to the general SA population



# SF-36 standard scores for people with diagnosed and previously undiagnosed COPD, compared to the general SA population





# Conclusions

- The physical and mental functioning of people with chronic conditions is significantly impaired.
- In addition to clinical symptoms, aspects of social, emotional and mental functioning should be considered in the assessment and clinical management of people with chronic conditions.



# Contact details

- North West Adelaide Health Study website:  
<http://www.nwadelaidehealthstudy.org>
- Centre for Population Studies in Epidemiology:  
<http://www.health.sa.gov.au/pehs/cpse.html>