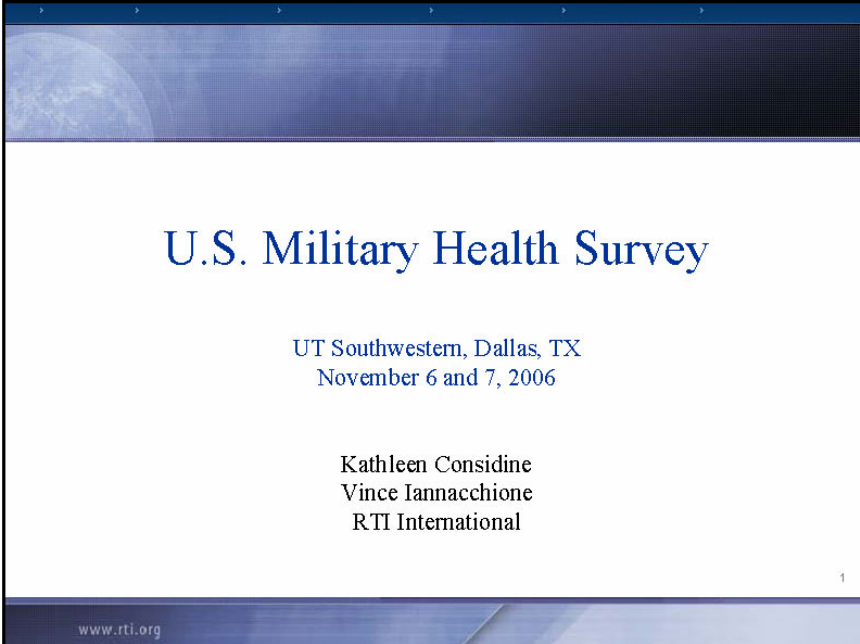


Presentation 2 - Kathleen Considine and Vince Iannacchione



A presentation slide with a blue header and footer. The header features a globe on the left. The main content is centered on a white background. The footer contains the website address www.rti.org and a small number 1 on the right.

U.S. Military Health Survey

UT Southwestern, Dallas, TX
November 6 and 7, 2006

Kathleen Considine
Vince Iannacchione
RTI International

www.rti.org

1



A presentation slide with a blue header and footer. The header features a globe on the left. The main content is centered on a white background. The footer contains the website address www.rti.org, the RTI International logo, and a small number 2 on the right.

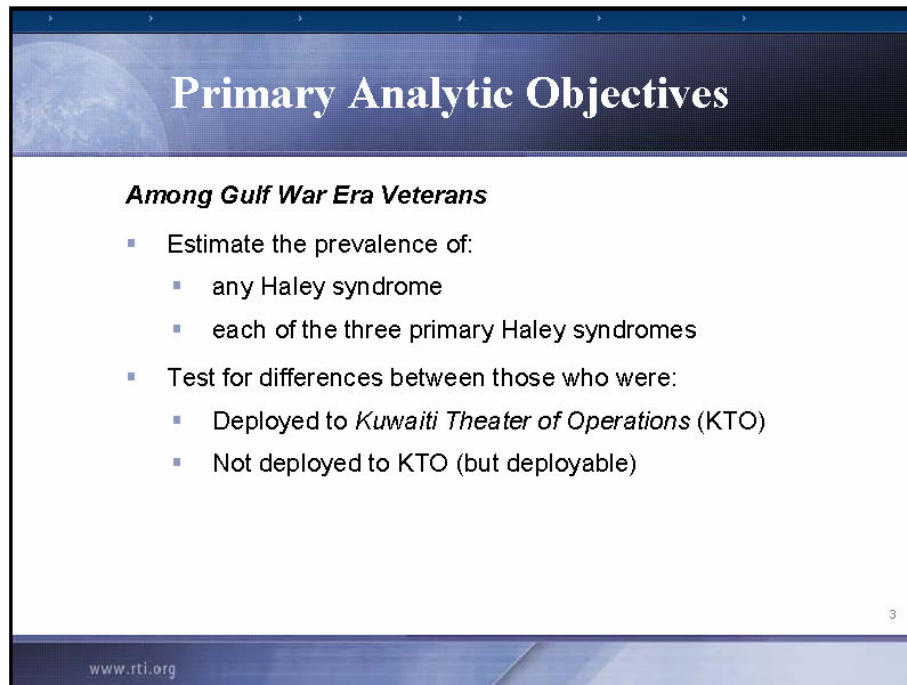
RTI Areas of Expertise

Survey Methodology	Questionnaire Design
CAI Systems	Survey Sampling
GIS Experts	Telephone Interviewing
Database Management	Webpage Design
Project Management	Bio-Specimen Collection
Psychometrics	Statistical Analysis

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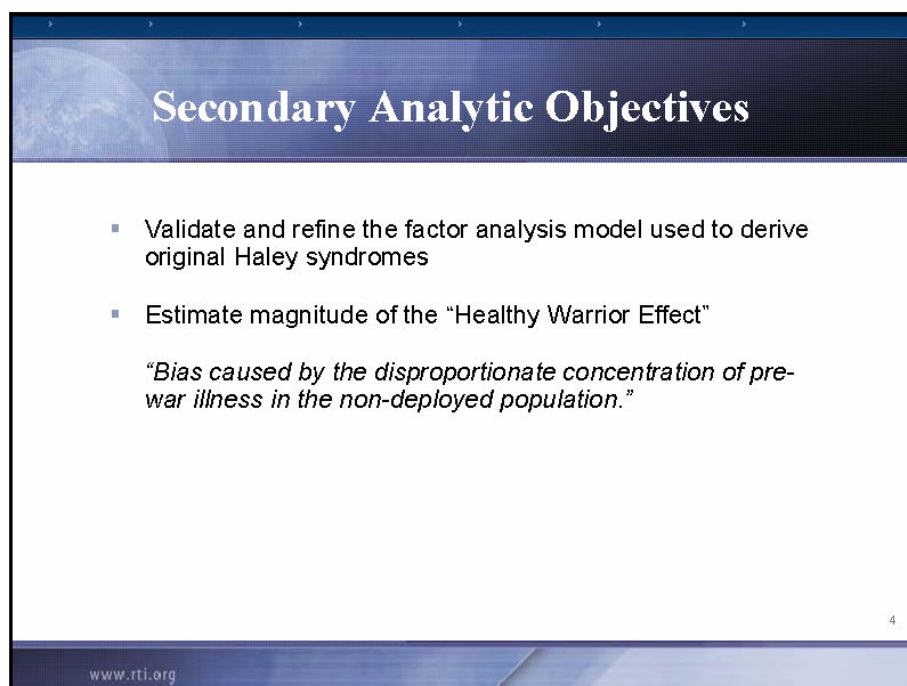
Primary Analytic Objectives

Among Gulf War Era Veterans

- Estimate the prevalence of:
 - any Haley syndrome
 - each of the three primary Haley syndromes
- Test for differences between those who were:
 - Deployed to *Kuwaiti Theater of Operations* (KTO)
 - Not deployed to KTO (but deployable)

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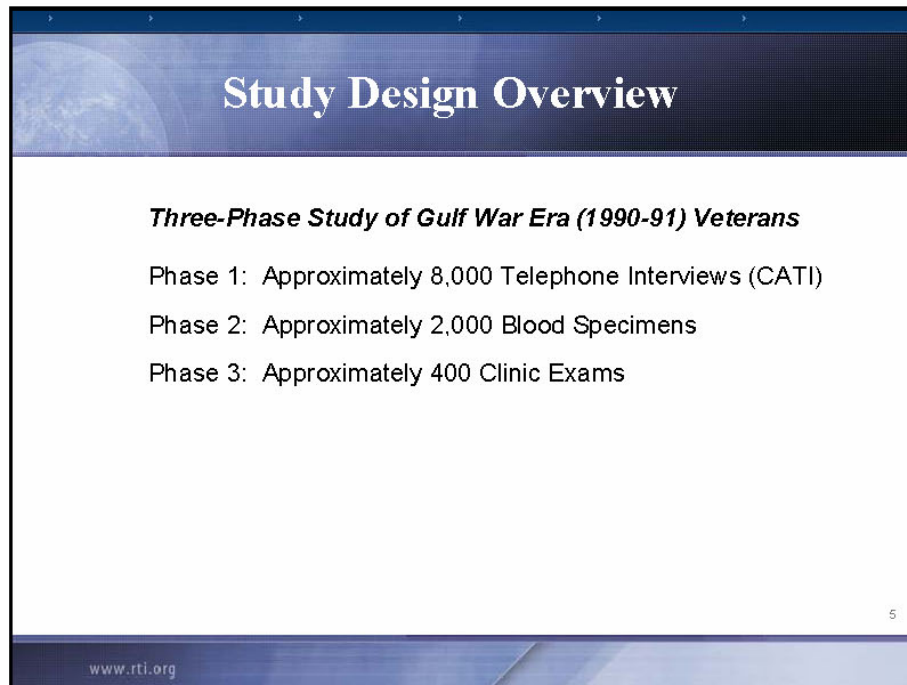
Secondary Analytic Objectives

- Validate and refine the factor analysis model used to derive original Haley syndromes
- Estimate magnitude of the "Healthy Warrior Effect"

"Bias caused by the disproportionate concentration of pre-war illness in the non-deployed population."

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Study Design Overview

Three-Phase Study of Gulf War Era (1990-91) Veterans

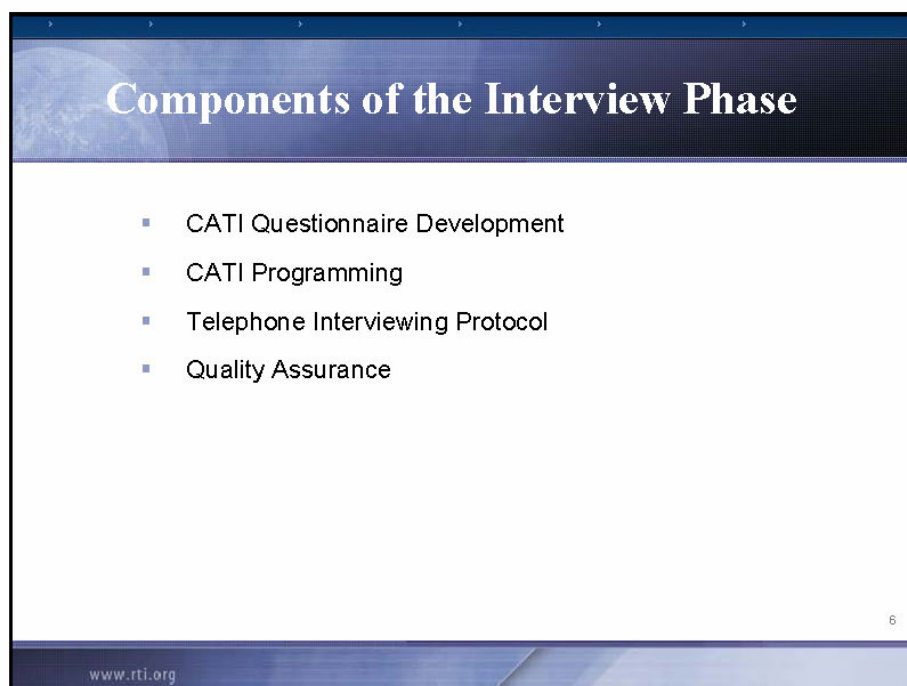
Phase 1: Approximately 8,000 Telephone Interviews (CATI)

Phase 2: Approximately 2,000 Blood Specimens

Phase 3: Approximately 400 Clinic Exams

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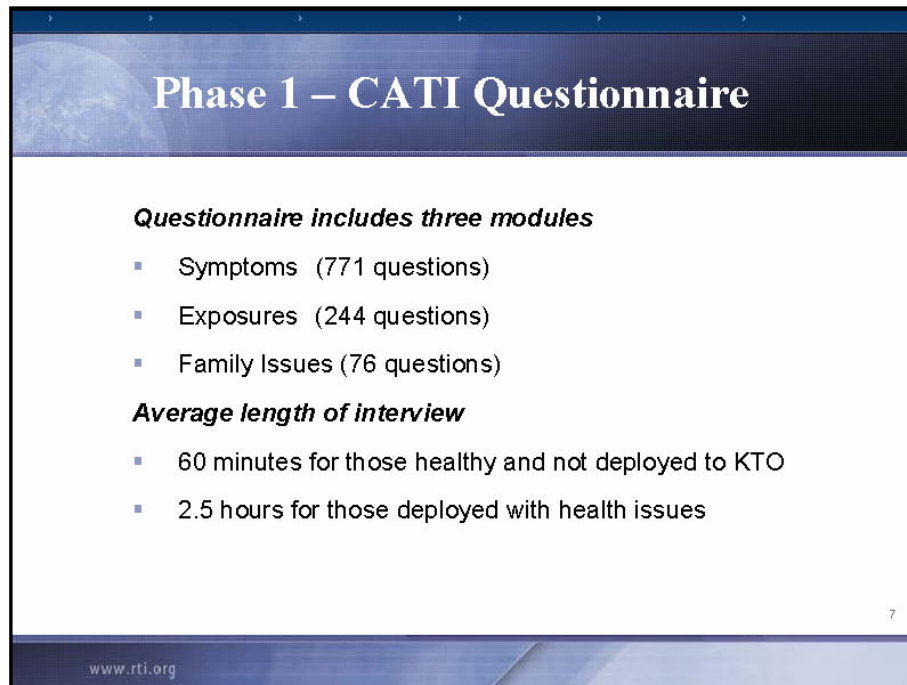


Components of the Interview Phase

- CATI Questionnaire Development
- CATI Programming
- Telephone Interviewing Protocol
- Quality Assurance

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Phase 1 – CATI Questionnaire

Questionnaire includes three modules

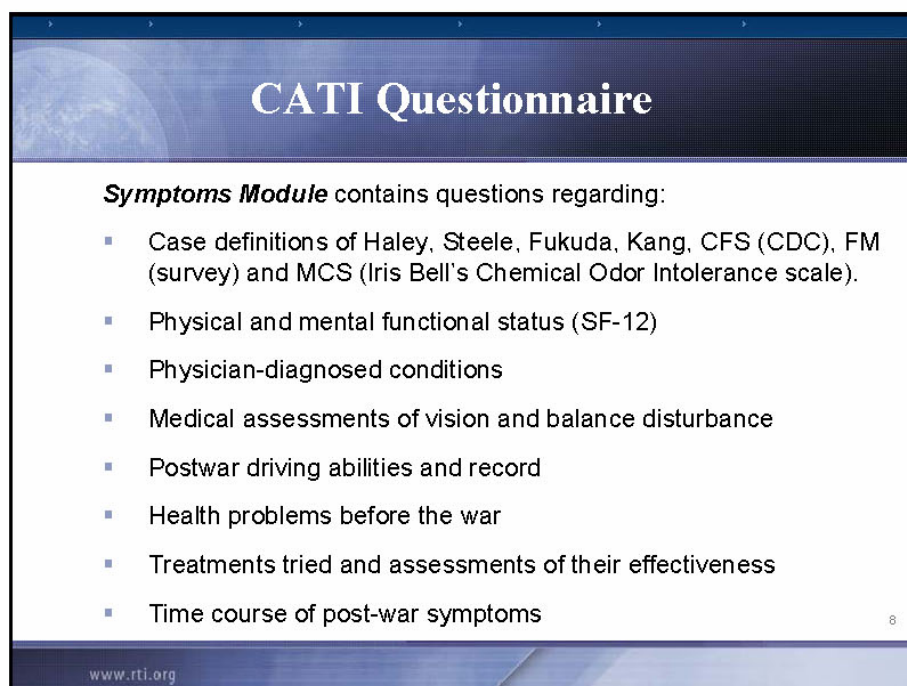
- Symptoms (771 questions)
- Exposures (244 questions)
- Family Issues (76 questions)

Average length of interview

- 60 minutes for those healthy and not deployed to KTO
- 2.5 hours for those deployed with health issues

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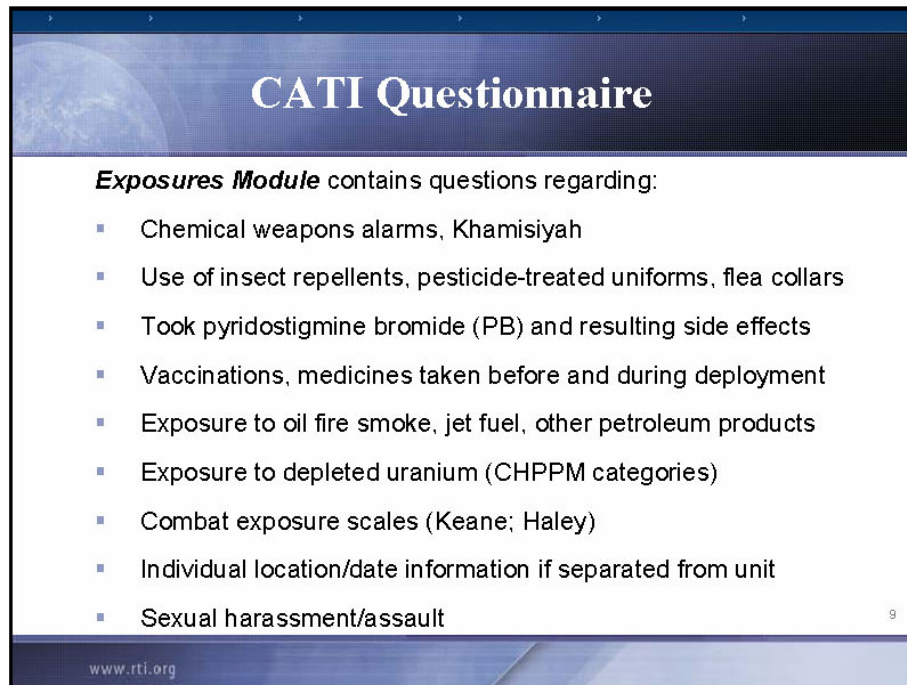
CATI Questionnaire

Symptoms Module contains questions regarding:

- Case definitions of Haley, Steele, Fukuda, Kang, CFS (CDC), FM (survey) and MCS (Iris Bell's Chemical Odor Intolerance scale).
- Physical and mental functional status (SF-12)
- Physician-diagnosed conditions
- Medical assessments of vision and balance disturbance
- Postwar driving abilities and record
- Health problems before the war
- Treatments tried and assessments of their effectiveness
- Time course of post-war symptoms

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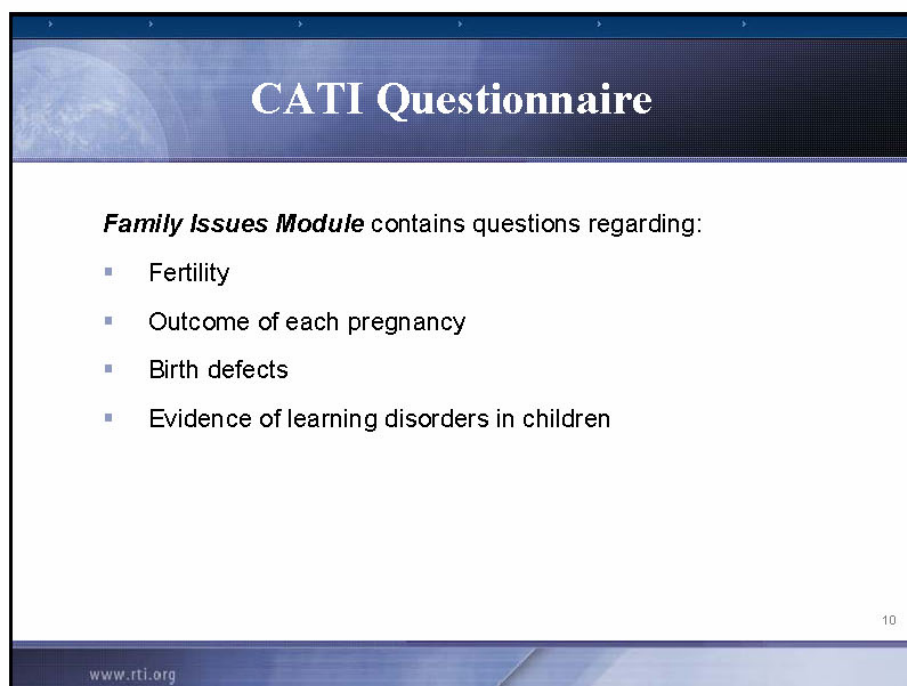
CATI Questionnaire

Exposures Module contains questions regarding:

- Chemical weapons alarms, Khamisiyah
- Use of insect repellents, pesticide-treated uniforms, flea collars
- Took pyridostigmine bromide (PB) and resulting side effects
- Vaccinations, medicines taken before and during deployment
- Exposure to oil fire smoke, jet fuel, other petroleum products
- Exposure to depleted uranium (CHPPM categories)
- Combat exposure scales (Keane; Haley)
- Individual location/date information if separated from unit
- Sexual harassment/assault

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CATI Questionnaire

Family Issues Module contains questions regarding:

- Fertility
- Outcome of each pregnancy
- Birth defects
- Evidence of learning disorders in children

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CATI Questionnaire

Methodological Issues in Questionnaire Development

- Focus groups
- Adapt from paper-and-pencil (PAPI) to CATI
- Revisions based on other validated questions
- Methods for asking sensitive questions
- Techniques to minimize recall bias
- Identify programming and question wording issues
- Timing Test
- Procedures to alleviate mental fatigue

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CATI Programming

During the interview, the CATI program must be able to

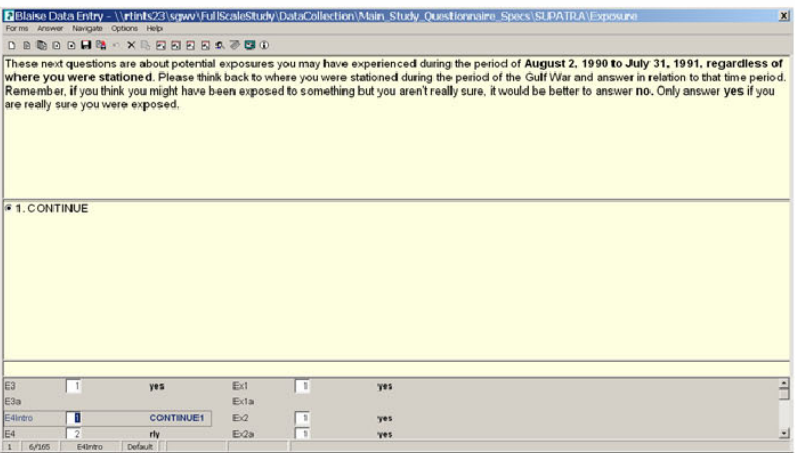
- Calculate Haley, Steele, and Fukuda syndrome scores
- Match a veteran's unit with the Troop Location Data Base
- Schedule a continuation call
- Select a random sub-sample of non-syndromic veterans for blood specimens

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CATI Programming



The screenshot displays a web browser window titled "Blaise Data Entry" with the URL "http://prints231.gwu.edu/FullScaleStudy/DataCollection/Main_Study_Questionnaire_Specs/SLPATRA/Exposure". The main content area contains the following text:

These next questions are about potential exposures you may have experienced during the period of **August 2, 1990 to July 31, 1991, regardless of where you were stationed. Please think back to where you were stationed during the period of the Gulf War and answer in relation to that time period. Remember, if you think you might have been exposed to something but you aren't really sure, it would be better to answer no. Only answer yes if you are really sure you were exposed.**

Below the text is a large yellow rectangular area, likely a placeholder for a question or a list of options. At the bottom of the form, there are several input fields and buttons:

E3	<input type="checkbox"/>	YES	E3a	<input type="checkbox"/>	YES
E4intro	<input type="checkbox"/>	CONTINUE!	E4	<input type="checkbox"/>	YES
E4	<input type="checkbox"/>	NO	E4a	<input type="checkbox"/>	YES


The bottom of the browser window shows the address bar with "http://prints231.gwu.edu/FullScaleStudy/DataCollection/Main_Study_Questionnaire_Specs/SLPATRA/Exposure" and the RTI International logo.

Telephone Interviewing Protocol

- **Locating Veterans**
 - Initial batch tracing for all sample members
 - Interactive tracing for unlocatable sample members
- **Training CATI Interviewers**
 - 4 day-long interviewer trainings
 - Interviewer training on dealing with refusals
 - Interviewers must pass 2 certifications prior to beginning work

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RTI Call Center



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Endorsements and Study Clearances

Endorsements

- Veterans Service Organizations

Clearances

- IRB Approval from RTI and UT-Southwestern
- HSRRB (DoD) clearance from Ft Detrick
- Certificate of Confidentiality from NIEHS

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Telephone Interviewing Protocol

Advance Materials

- Lead Letter
 - Participation is important but voluntary
 - \$50 for completing CATI questionnaire
 - Location of study website
- Letters of Endorsement
- Map of KTO
- Document containing FAQs and Answers

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Study Website



US Military Health Survey



A survey of 8,000 men and women from all branches of the United States Armed Forces serving on active duty, ready reserve, or the National Guard.

[Click here](#) to learn about your rights as a study participant.

Last Modified: November 1, 2006 11:06 AM


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Quality Assurance

- Questionnaire**
 - Real-time silent monitoring
 - Quality circle meetings with interviewers
- Interviewer Retraining**
 - Re-emphasize original training, address new issues
- Pilot Study**
 - Tested all facets of the design including data analysis


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Phase 2 – Blood Specimens

- Purpose**
 - Determine association between Haley syndromes and PON level
- Protocol**
 - Phase 2 participants selected from CATI respondents
 - All identified as syndromic using Haley definition or from groups of special interest
 - A random sub-sample from others
 - Contract with EMSI to collect samples
 - Samples sent to UT-Southwestern for analysis

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Phase 3 – Clinic Exam


Purpose

- *Clinical verification of Haley syndromes*

Protocol

- Phase 3 selected after Phase 2 completed from respondents
 - Case/control sample balanced on characteristics
- RTI will recontact Veterans by phone to gain cooperation
- UTSW will finalize appointments/transportation
- Clinic exam will take place at UTSW and will last 2 full days

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Time Line

Submitted HSRRB clearance for Pilot:	Nov, 2003
Received HSRRB clearance for Pilot:	Oct, 2004
Conducted CATI phase of the Pilot Survey:	Jan, 2005 – Apr, 2006

Conduct blood phase of the Pilot:	Nov – Dec, 2006
Obtain clearances for Main Study:	Dec, 2006
Conduct Main Study:	Jan – Dec, 2007

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Survey Population

Target Population

3.75 million Gulf War Era veterans on active duty or in the reserves

- 752K veterans who were deployed to KTO
- 3M non-deployed veterans

Sampling Frame

- Created by Defense Manpower Data Center (DMDC)
- Updated KTO deployment status from CHPPM

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Stratified Sampling Design

Strata for CATI Phase

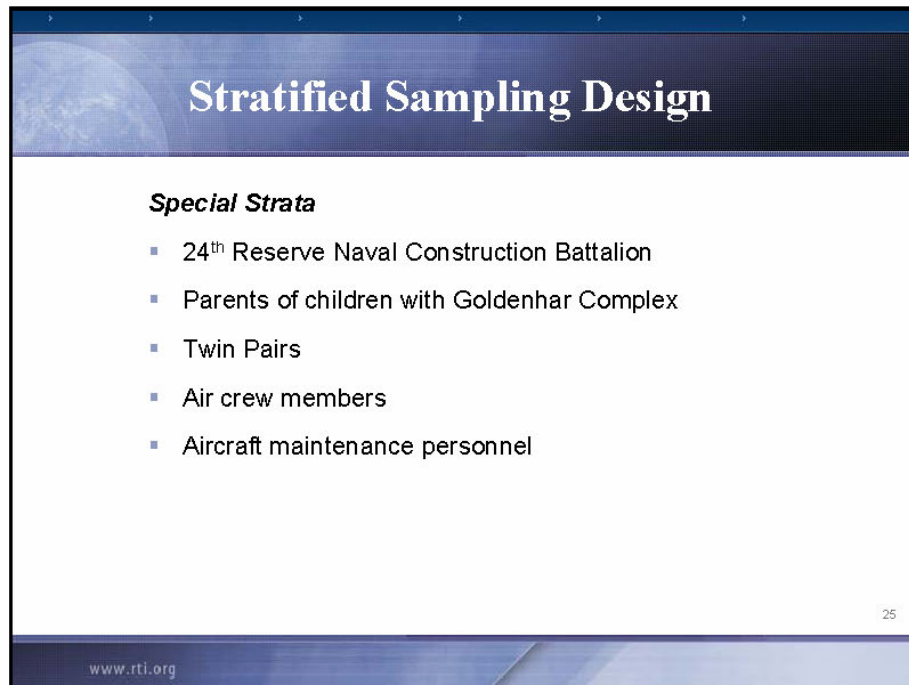
Deployed to KTO	Location in KTO
Age Group	Gender
Race	Active or Reserve status
Special Strata	

Strata for Blood Specimen Phase

Syndromic/Non-Syndromic

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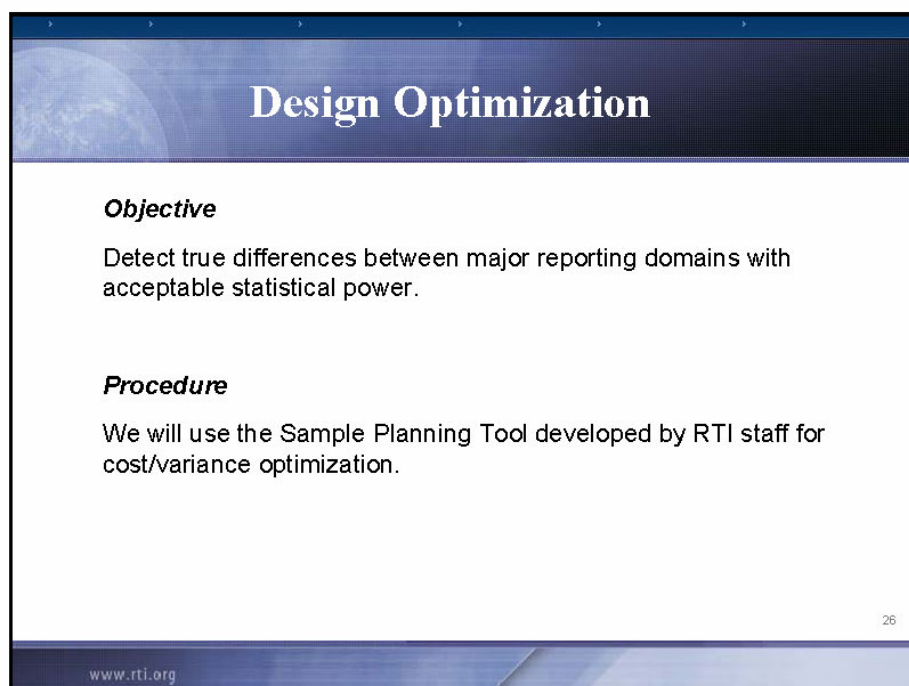
Stratified Sampling Design

Special Strata

- 24th Reserve Naval Construction Battalion
- Parents of children with Goldenhar Complex
- Twin Pairs
- Air crew members
- Aircraft maintenance personnel

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Design Optimization

Objective

Detect true differences between major reporting domains with acceptable statistical power.

Procedure

We will use the Sample Planning Tool developed by RTI staff for cost/variance optimization.

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Sampling Weights

Sampling weights needed to adjust sample estimates for

- Selection bias
- Nonresponse bias

Weights calculated in a two-step process

1. Initial weight = inverse of selection probability
2. Nonresponse adjustment applied to initial weight

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Preliminary Sample Sizes

Selected:	13,000
Located:	11,400 (88%)*
Eligible:	11,000 (97%)*
CATI Participants:	8,000 (73%)*

* Pilot study results

For methodological use only. Estimates are not statistically significant.

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Recommendations to Improve Response Rates

For the main survey, we will

- Use IRS information to help locate veterans
- Remove 'Gulf War' from the study title
- Address legal concerns about participating
- Maintain a web site for the study
- Promote survey in VSO publications
- Welcome other ideas!

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Pilot Study Demographics

118 respondents with a mean age at time of interview of 47 years

Deployment Status

Deployment Status	Percentage
Non-Deployed	49%
Deployed	51%

Race

Race	Percentage
Black	30%
White	64%
Other	6%

Gender

Gender	Percentage
Female	51%
Male	49%

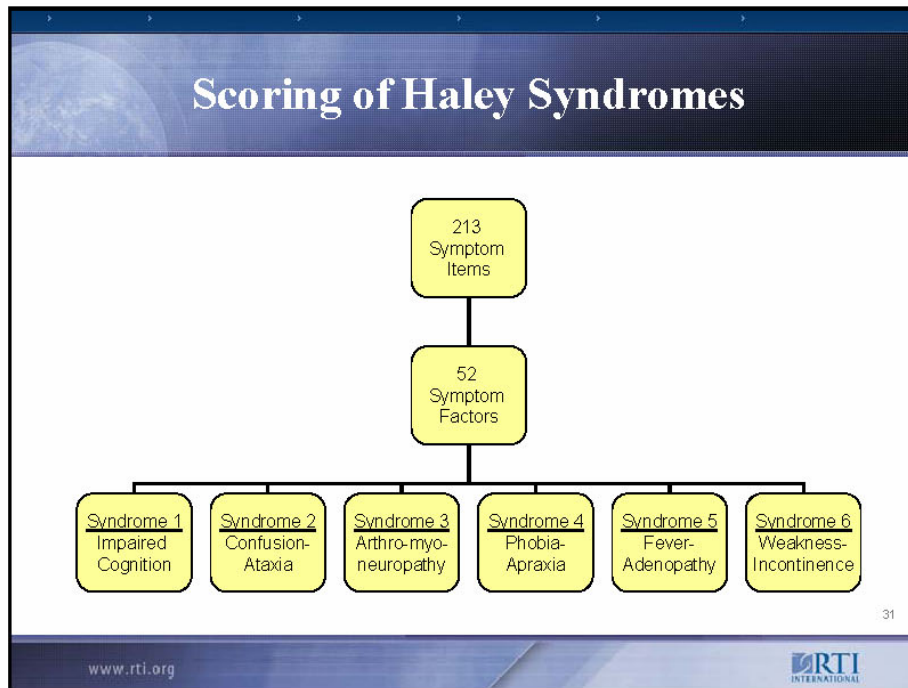
Branch of Service

Branch of Service	Percentage
Air Force	21%
Army	25%
Marines	29%
Navy	25%

For methodological use only. Estimates are not statistically significant.

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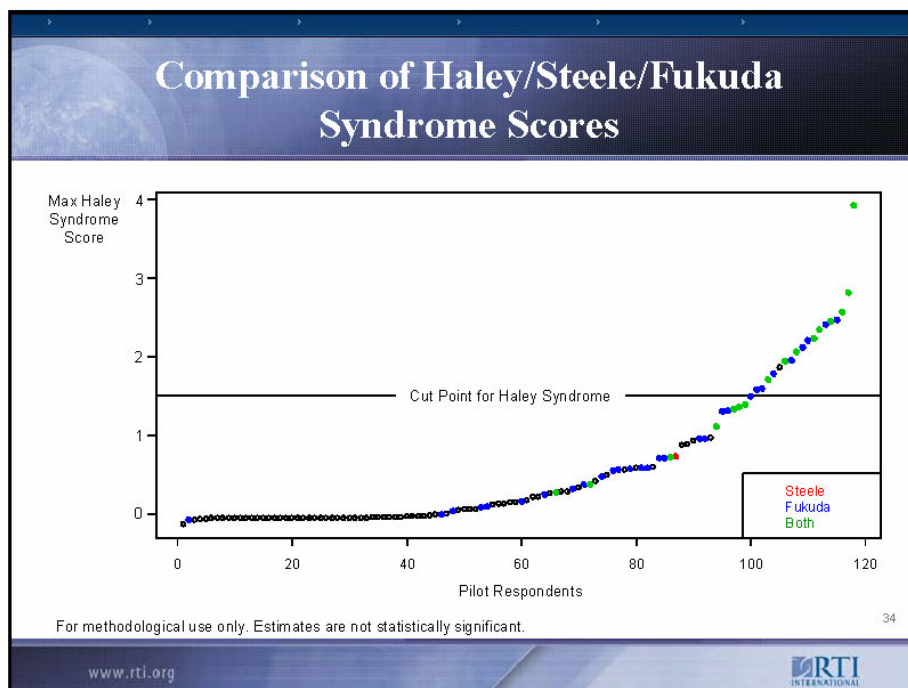
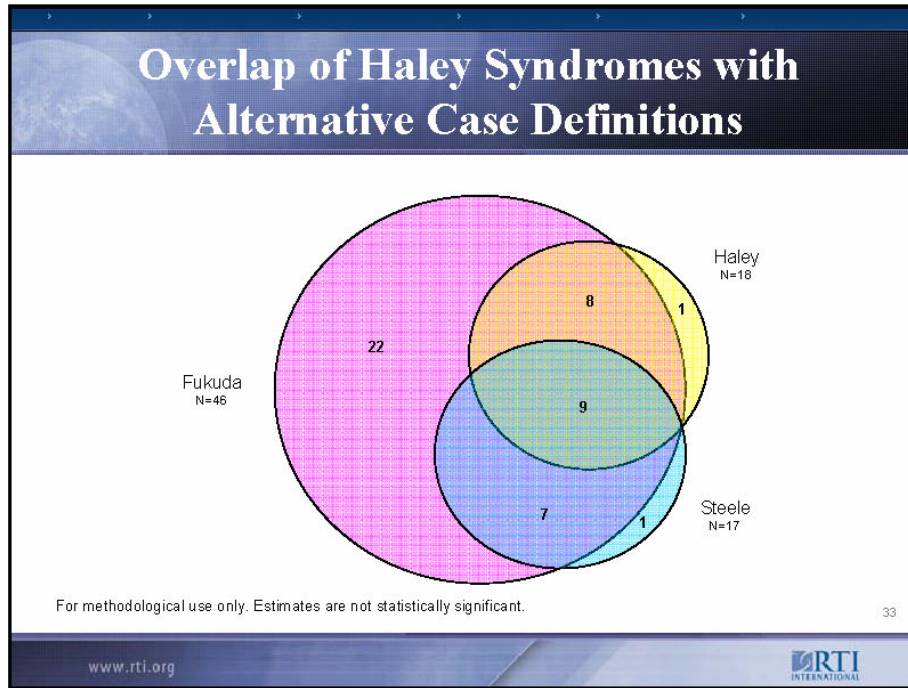
Prevalence of Three Case Definitions by Deployment Status

	Overall	Deployment status	
		Deployed	Non-Dep
Total subjects	118	60	58
Fukuda	39%	53%	24%
Steele	14%	22%	7%
Any Haley Syndrome	15%	22%	9%

For methodological use only. Estimates are not statistically significant.

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Healthy Warrior Effect

Two Reasons for Non-Deployability

1. **Medical:** An illness or physical condition (other than pregnancy) that prevented deployment to KTO.
2. **Job Related:** Military job not usually deployable or unit not fully prepared for deployment.

Pilot Study Respondents Not Deployed to KTO

Deployable:	19 (33%)
Non-Deployable:	
Medical	5 (9%)
Job Related	34 (58%)

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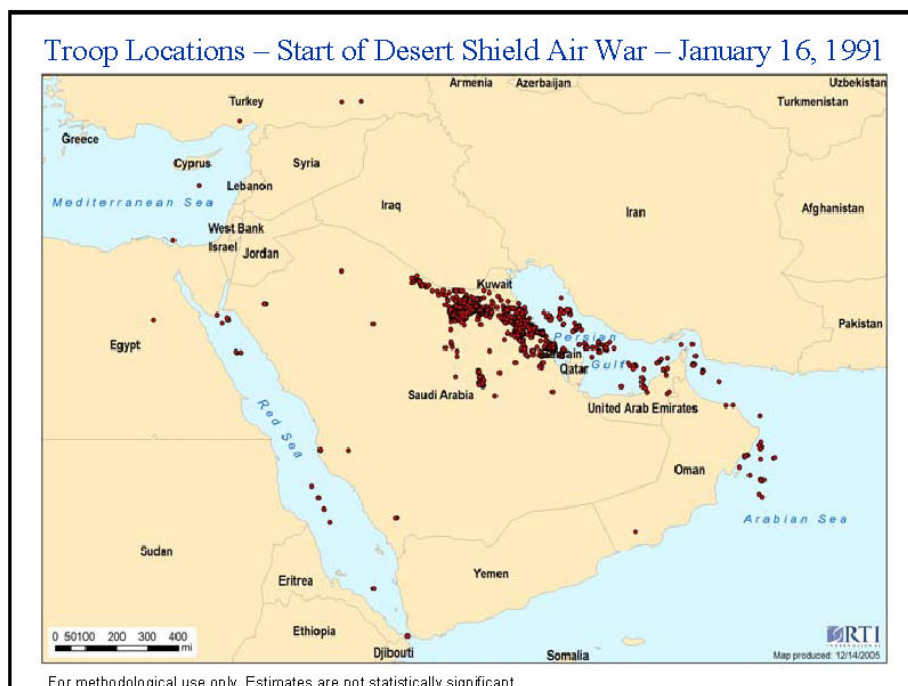
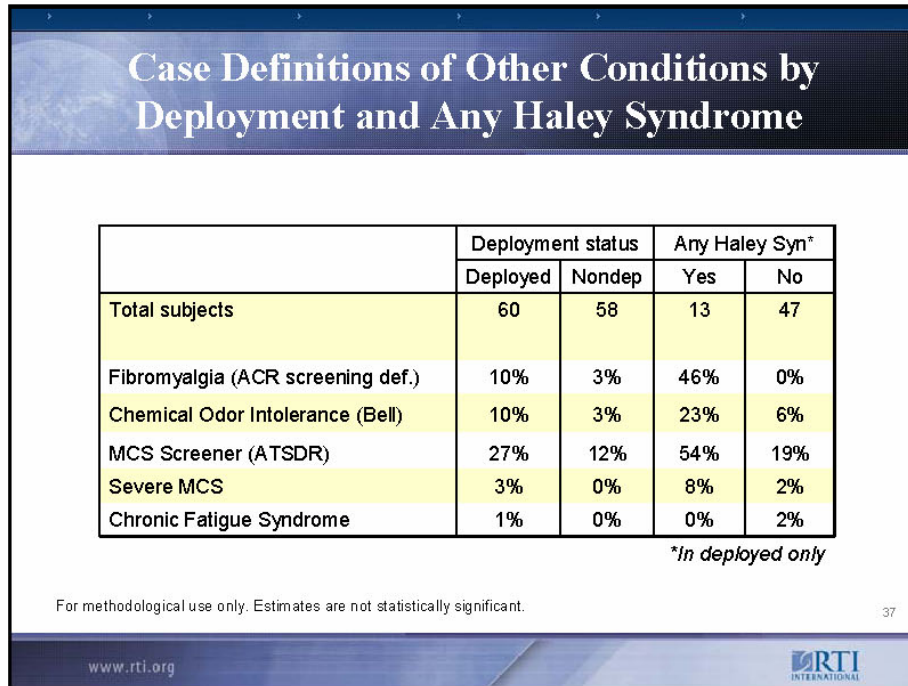
Pilot Respondents with Any Haley Syndrome

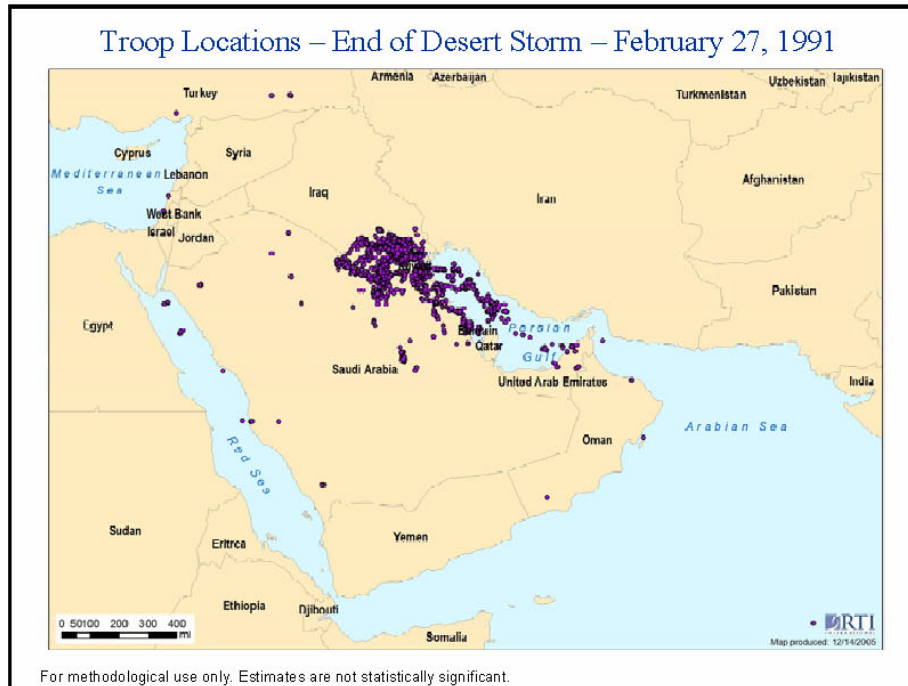
Deployment Status	Total #	Any Haley Syndrome	
		#	% (wgt'd)
Deployed	60	13	17%
Non-Deployed			
Deployable	19	2	5%
Job Non-Dep	34	1	5%
Medical Non-Dep	5	2	15%

For methodological use only. Estimates are not statistically significant.

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Alternative Case Definitions by Location in KTO

Location	# Persons*	Any Haley	Steele	Fukuda
In Iraq/Kuwait	13	49%	43%	56%
Elsewhere in KTO	22	18%	27%	65%

* Army and Marine Corps personnel.

For methodological use only. Estimates are not statistically significant.

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