

Introduction

The Copenhagen City Heart Study (Østerbrounder-søgelsen) is a prospective cardiovascular study of 20 000 women and men of 20 years and older. It was established in 1975 by Dr Peter Schnohr, Dr Gorm Jensen, Professor Anders Tybjærg Hansen and statistician Jørgen Nyboe.

The original purpose of the study was to increase our knowledge on prevention of ischaemic heart disease and stroke. The first examinations took place in 1976–78 and 1981–83. At the third examination in 1991–94, several other aspects were studied, i.e. pulmonary diseases, arthrosis, allergy, dementia, epilepsy, sleep-apnoea and genetics.

The present tables contain breakdowns of data from the third examination according to sex and age groups. It is a successor to our first book of tables, which contained data from the first two examinations (Appleyard M, Hansen AT, Schnohr P, Jensen G,

Nyboe J. The Copenhagen City Heart Study. Østerbroundersøgelsen. A book of tables with data from the first examination (1976–78) and a five year follow-up (1981–83). Scand J Soc Med 1989; 170 (suppl 41): 1–160).

These tables give information on the distribution of a great number of risk factors important for prevention of ischaemic heart disease, stroke and other diseases. It is our hope that these data will provide other researchers with valuable information for more precise study planning, as well as serve as updated reference values. Change in risk factors can be evaluated by comparing these tables with the previous book of tables, covering an age-span of about 15 years.

The study was based at Rigshospitalet from 1975 to 1997. From 1997, the Copenhagen City Heart Study has been based at Bispebjerg University Hospital.

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The Copenhagen City Heart Study

Purpose of the Copenhagen City Heart Study

Aims

- (1) Describing the distribution of known cardiovascular risk factors in a random sample of a population in a well-defined area of Copenhagen.
- (2) Describing the prevalence and incidence of cardio- and cerebrovascular disease, hypertension, lung disease and other diseases.
- (3) Relating morbidity and mortality to the variables collected.
- (4) Forming the background for special studies concerning aetiology, prevention and treatment of various disease entities, especially ischaemic heart disease, stroke and lung diseases.
- (5) At the third examination several new aspects were included: genetics, psychosocial factors, arthritis, epilepsy, dementia, excessive alcohol intake and microalbuminuria.

Study population and methods

Selection procedure

The Copenhagen City Heart Study population now comprises around 23 000 men and women aged 20 years or more. The primary population sample of 19 698 men and women was randomly drawn in January 1976 from the Copenhagen Population Register, by using the special Central-Personal-Register-code, consisting of date of birth and a registration number. The sample was drawn from a population of approximately 90 000 inhabitants 20 years and older living within 10 wards surrounding Rigshospitalet, the National University Hospital of Copenhagen. The random sample was age-stratified within 5-year age groups, with main emphasis on the age groups from 35 to 70 years. At the second examination (1981–83) 5 years later, the population sample was supplemented with a new sample of 500, 20 to 24 years old men and women. When the third examination (1991–94) started 10 years after the second, the study population was furthermore supplemented with 3000 men and women aged 20–49, selected with 250 women and 250 men in each 5-year age group. Number of persons invited to the examination, number of attendees, response rate, and actual age at the time of examination are shown in Table 1.

Invitation procedure

Individuals selected for the study were invited according to their date of birth, converting the date to a six-digit

number (i.e. the first two digits for day, then two for month, and two for year of birth). These numbers were used in ascending order, starting with individuals born on 1 January, 1 February, etc. and ending with the individuals born on 31 December. This order of invitation ensured that subsets of the sample examined during any period of time within the examination period would also constitute a random subsample.

Three weeks prior to the examination, the individuals received an invitation to participate in a health examination at The Copenhagen City Heart Study. Attached to the invitation was a postage-paid postcard, by means of which the person could either confirm the appointment, change the appointment, or decline to participate in the examination. If the postcard had not been returned a week prior to the examination, a second invitation was posted. If there had not been any contact with the person, or the person did not show up at the examination in spite of a confirmed appointment, a new invitation was sent 6 months later.

All individuals from the previous samples, as well as the supplements, who were alive at the time of the third examination, were invited to attend, regardless of whether they had moved to an address outside the study area. The Population Register provided the study with information of deaths and change of address.

Examination procedures

Established procedures for cardiovascular epidemiological surveys were employed (Rose GA, Blackburn H. Cardiovascular Survey Methods. Wld Hlth Org Monogr Ser 56, Geneva 1968). A self-administered questionnaire, concerning symptoms and diseases, familial disposition, education and socio-economic status, smoking and drinking habits, weight and weight changes, physical activity at work and leisure, medication and contact with the healthcare system, was sent along with the invitation and filled in by the participant before arriving for the examination. Examinations were performed at four different work places called 'examination stations'.

At the first station, the reception, the participant was received, and a staff member checked the first part of the questionnaire, to ensure that all questions were answered, and to ascertain whether the person had any queries. Furthermore, it was noted if the person was eligible for any sub-studies (described later).

At the second station, a non-fasting venous blood sample for examination of glucose, asparte amino transferase (ASAT), albumin, creatinine, fibrinogen and lipids was drawn. Height was measured and certain physical characteristics: Xanthelasmata, earlobe crease, arcus cornea, cirrhosis complexion, palmar erythema, Dupuytren contracture and white fingernails were noted. Lung function and a carbon monoxide test were performed.

At the third station, weight, waist, hip and sagittal body diameter were measured to nearest half centimetre. A 12-lead resting ECG was recorded; impedance measurement and presence of spider naevi, abdominal veins, obesity and peripheral oedemas were noted.

At the fourth station, the rest of the questionnaire was checked and the blood pressure was measured. In case of 'chest pain on effort', Rose's questionnaire concerning angina pectoris was filled in with the help of a technician. The participant was asked to sign a Certificate of Consent, which gave the study investigators permission to keep frozen serum and plasma in the biological-bank and to make inquiries about examination results and treatments in the healthcare system. The results from the examinations were explained, and the person was told that the results of the blood analysis would be mailed to him within 2 weeks, with possible recommendation to contact the general practitioner.

If the person was eligible to participate in any sub-studies (see below), this was explained, and if she or he accepted, the procedure in question was started.

Sub-studies

Stroke

In case a person answered affirmatively to any of the following questions: 'previous stroke', 'paresis or difficulties in moving face, arms or legs', 'blindness or loss of vision in one or both eyes', 'speech disorders, trouble finding or pronouncing words', a special questionnaire was used, in order to classify the stroke and get a better description of the event.

Alcohol

In case the average number of drinks (beer + wine + spirits) consumed exceeded 25 per week, a fat tissue biopsy was taken and a piece of toe nail cut off, in order to analyse a possible connection between food composition, alcohol consumption and development of disease of the liver. In this study, blood levels of selenium, zinc, vitamin A and E and fatty acids were analysed.

Job strain/stress

Participants aged between 30 and 60 years, who at the time of the examination were employed, were given a questionnaire concerning job strain and job stress, which was intended for filling in at home and then returned to the study.

Microalbuminuria

All participants aged between 30 and 70 years were asked to collect and deliver a night-urine sample, in

order to study the connection between elevated excretion of albumin and cardiovascular disease. The participant was given a polyethylene plastic receptacle with an instruction for use, and was asked to deliver the overnight collected urine sample within 14 days. When the sample was returned, the receptacle was weighed in order to assess the volume, and the time span in which the sample was collected was noted. The urine was screened for leukocytes, nitrites, haemoglobin and glucose by a standard dipstick method (Nephur-test). Creatinine was measured and albumin concentration was measured by a urine dipstick method (Micral-test) as well as the ELISA method.

Dementia

Participants aged 65 years or more were asked to participate in an interview, assessing possible signs of dementia. The individuals with low scores were later invited to a more thorough investigation and examination by a neurologist.

Bronchial reversibility test

In case of reduced pulmonary function ($FEV_1 < 80\%$ of expected and/or $FEV_1/FVC < 70\%$ of expected), the participant was asked to inhale an asthma medicine (0.5 mg Terbutalin) in order to test possible improvement in the ventilatory function. After 30 min the ventilatory function was re-measured in order to see if there was any change.

Intent to stop smoking

One hundred present and former smokers were asked some additional questions by questionnaire. Present smokers were asked if they had tried to stop, if they intended to stop and if they thought they would succeed. Former smokers were asked why and how they stopped.

Laboratory and non-clinical methods

Laboratory investigations

Using a closed vacutainer system, a non-fasting venous blood sample was drawn into five different tubes from a cubital vein after light stasis:

The blood samples remained at room temperature for 20–60 min. The whole blood from the EDTA tube was placed in a plastic tube and frozen at –20 °C. All the other tubes were centrifuged at 3000 r.p.m. for 10 min. Within 60 min after centrifugation, plasma and serum for analysis of cholesterol, HDL-cholesterol, ASAT,

Amount	Additive	Analyses
10 ml	None	Cholesterol mMol/l HDL-cholesterol mMol/l Aspartate amino transferase (ASAT) IU Albumin g/l Creatinine mMol/l Apolipoprotein _{A1} (Apo _{A1}) mg/dl Apolipoprotein _B (Apo _B) mg/dl Lipoprotein(a) (Lp(a)) mg/l Triglycerides mMol/l Glucose mMol/l Fibrinogen g/l DNA analyses
5 ml	20 mg sodium fluoride	
4.5 ml	0.5 ml 0.129 M buffered sodium citrate	
10 ml	EDTA-k3 (15%): 0.12 ml, 0.34 M	Plasminogen activator (tPA)*
5 ml	0.5 ml, 0.5 M Citrate buffer pH 4.0	Plasminogen activator inhibitor (PAI-1)* Factor VII*

*Placed in biological-bank for later analysis according to protocol.

creatinine, albumin, fibrinogen and glucose were pipetted into tubes and analysed on a Hitachi 705 auto-analyser, or the tubes were frozen at -20°C and analysed the following day. The rest of the serum and plasma were filtered with Porex filter-sampler and stored at -20 °C in 250 ml IMV—straw. Within 2 days, the straws were stored at -80 °C, except the serum for Apo_{A1} and Apo_B, which were stored at 20 °C. Apo_{A1} and Apo_B were analysed once a month on a Hitachi 717 auto-analyser in the Department of Clinical Biochemistry, at Rigshospitalet, the National University Hospital.

Lp(a) and triglycerides were analysed over a period of 1 month (July 1994) right after the end of the examination period, in the Department of Clinical Biochemistry, Herlev University Hospital.

From each individual, total genomic DNA was isolated from 200 µl frozen whole blood by a desalting method. For the purpose of rapid screening for rare mutations, whole blood from each individual was pooled, the blood was mixed thoroughly, and DNA was isolated with a commercially available kit (QIAamp blood kit, QIAGEN GmbH). For PCR amplification, 5 µl isolated DNA was used in a total reaction volume of 30–50 µl. DNA was stored at 4 °C, whereas whole blood was stored frozen at -20 °C.

The biological-bank, which was established during Copenhagen City Heart Study III, consists of: serum in 250 ml red IMV-straws, buffered sodium citrate plasma in 250 ml blue IMV-straws and citrate buffer plasma in 250 ml clear IMV-straws, stored at -80 °C. Thirty straws from each participant were stored.

Methods for analysing the blood samples

The reagent used for the analysis of cholesterol, HDL-cholesterol, ASAT, albumin, creatinine, glucose,

fibrinogen, Apo_{A1} and Apo_B were all from Boehringer Mannheim.

Cholesterol

CHOD-PAP method—High performance—Enzymatic colorimetric test. Siedel J *et al.* (1983), Kattermann R *et al.* (1985), Trinder P.

HDL-cholesterol

Chylomicrons, VLDL (very-low-density lipoprotein) and LDL (low-density lipoprotein) are precipitated by adding phosphotungstic acid and magnesium ions to the sample. Burstein M *et al.* (1970), Lopes-Virella MF *et al.* (1977). Centrifugation leaves only the HDL (high-density lipoprotein) in the supernatant; the HDL-cholesterol was determined as cholesterol.

ASAT

IFCC method. Bergmeyer HU *et al.* (1986).

Albumin

Bromcresol-green method. Doumas BT *et al.* (1971). Formation of an albumin/bromcresol-green complex at pH 4.2 and photometric measurement of absorbance.

Creatinine

Jaffé method (kinetic) without deproteinization. Modified from Bartels H *et al.* (1972). Creatinine forms

a coloured complex with picrate in alkaline solution. The rate of formation of the complex is measured.

Glucose

Hexokinase/G6P-DH assay in plasma. Schmidt FH (1961).

Fibrinogen

Hemker HC *et al.* (1979). Thrombos, Haemostas, Becker U *et al.* (1984). Thromb Res.

Apolipoprotein_{A1} and apolipoprotein_B (Apo_{A1}, Apo_B)

Photometric measurement of the antigen-antibody reaction by the end-point method with sample blank.

Triglycerides

In mMol/l were measured enzymatically (GPO-PAP, Boehringer Mannheim, Mannheim, Germany) using a Technicon Axon autoanalyser (Miles Inc, Diagnostics Division, Tarrytown, NY, U.S.A.). The coefficient of variation at the level of 1.5 mMol/l was 3.5%. Samples were diluted with water at levels above 14 mMol/l.

Lipoprotein(a) (Lp(a))

Lp (a) was measured turbidimetrically in mg/l using a Technicon Axon autoanalyser (Miles Inc., Diagnostics Division, Tarrytown, NY, U.S.A.), rabbit anti-human Lp(a) polyclonal antibodies (DAKO A/S, Glostrup, Denmark) and human serum Lp(a) calibrator (DAKO A/S). These antibodies have been shown not to cross-react with plasminogen or apolipoprotein_B. In order to eliminate interference by triglycerides, the triglycerides were removed during the preincubation period by addition of lipase (Boehringer Mannheim), tween 20 and bovine albumin to the reaction buffer (DAKO A/S). Samples were diluted with water when Lp(a) was above 700 mg/l or triglycerides were above 7 mMol/l. The coefficient of variation at the levels of 90 mg/l, 300 mg/l and 660 mg/l were 11%, 3.3% and 1.7%, respectively.

Control-serum

Precinorm U, Precipath U (BM)

Cholesterol, ASAT, albumin, creatinine, glucose and triglycerides.

Precichrom L, Precipath L (BM)

HDL, Apo_{A1} and Apo_B.

Control-plasma

Precichrom (BM)
Fibrinogen.

Calibration serum (BM)
Cholesterol, ASAT, albumin, creatinine, glucose and triglycerides.

Calibration plasma (BM)
Precimat Chromagen, fibrinogen.

Laboratory quality control and standardization

The Danish Society of Clinical Chemistry, Labquality was involved in quality control. Every second month, plasma samples, corresponding to the blood tests carried out, were received from Labquality. Our staff on our equipment analysed the samples and the results were returned to Labquality and compared with the results from 40–60 other laboratories.

Criteria for referral

Within 14 days examination, the participant received the results of the cholesterol, glucose and ASAT levels. If the levels exceeded: cholesterol >7 mMol/l, glucose >10 mMol/l or ASAT >40 IU, the participant was requested to contact his general practitioner for further examination.

Specific details of measurements

Measured without shoes on a fixed scale to the nearest half centimetre.

Pulmonary function

Measured with a Vitalograph Pulmonary Function Test Printer (Maidenhead, U.K.). The participant was placed in a sitting position and asked to inhale to total lung capacity before beginning the forced expiration abruptly, and without hesitation. Maximum effort was to be exerted throughout the expiration. The measured variables were forced vital capacity (FVC) and forced expiratory volume in the first second of expiration (FEV₁). The percentage expired in the first second was calculated from the best results of at least two measurements FEV₁/FVC %. At least two reproducible measurements that differed less than 5% from each other were made. The values from the highest measurement were used. The values were compared with normal predicted values in relation to height (nearest lower cm), age and sex for each person. The predicted value equations by The European Coal and Steel Union were used [Quanjer PH (compiler and editor)]. Standardizing lung function

testing. Report Working Party 'Standardization of Lung Function tests', European Community for Coal and Steel, Luxembourg. Bull Eur Physiopathol Respir, 1983, 19 (suppl 5), 1–95.] The spirometer was calibrated with a 1-l syringe on a daily basis.

Criteria for referral

If participants without bronchial asthma, chronic bronchitis or other known lung disease did not reach at least 80% of the predicted values of FEV₁ and FVC, or if FEV₁/FVC was less than 0·7, the participant was referred to his general practitioner for further examination.

Bronchial reversibility test

In case of airflow obstruction (FEV₁ <80% of the predicted value and/or FEV₁/FVC <0·7), a bronchial reversibility test was performed. The participant was asked to inhale 0·5 mg terbutaline sulphate from a dry powder inhaler (Bricanyl Turbuhaler). After 30 min, spirometry with measurements of FEV₁ and FVC was repeated in order to assess a possible reversibility.

Carbon monoxide (CO)

Carbon monoxide in the exhaled air was measured with a Mini Smokerlyser EC50 (Carbon monoxide monitor). The participant was asked to take a deep breath, hold it for 15 s, and then exhale steadily and gently through the mouthpiece, emptying the lungs as much as possible. CO readings, measured in parts per million (ppm CO), show the levels of CO exhaled. A rough classification of the results was as follows: 0–10 ppm, non-smoker; 11–20 ppm, light smoker; 21–100 ppm, heavy smoker. For calibration, a Bedfont calibration kit containing a known gas mixture of 50 ppm CO was used at 6-month intervals.

Weight

Measured with indoor clothing on, but without shoes, on a Seca digital scale, to the nearest 0·1 kg.

Electrocardiography recording

A 12-lead (I, II, III, aVR, aVL, aVF, V_{1–6}) resting ECG was recorded in the supine position. For 20 min prior to recording of the ECG, the participant had been in a sitting position, while the questionnaire was checked, having a blood sample drawn and performed a lung function test. The ECG was recorded on a Cardionost EK 56 (pPG Hellige) with automatic measurement and analysis of the recorded ECG. After the recording, the ECG was stored in a computer. The ECGs were later Minnesota coded by two independent coders, and in case of disagreement, a third coder settled the disagreement.

Criteria for referral

Participants with untreated atrial fibrillation, or hypertrophy combined with ST-depression and inverse

T-waves, were told to contact their general practitioner within a few days. Participants with signs of unrecognized myocardial infarction within the last few weeks were brought to the cardiological department at the hospital.

Measurement of electrical impedance

Electrical impedance (R) was measured using a BIA-103 RJL-system-analyser (RJL-system Detroit) with a 30 KHz micro Ampere device, following the instructions given by the manufacturer. The measurement was taken with the subject lying relaxed on a couch, using a tetra polar electrode placement, with electrodes placed on the dorsal surfaces of the left hand and foot, at the distal metacarpals and metatarsals, respectively, and between the distal prominences of the radius and the ulna at the wrist and the medial and lateral malleoli at the ankle. The principle behind electrical impedance, which is described elsewhere (Eur J Clin Nutr 1994; 48: 228–40), is based on the different electric properties of the fat mass and fat-free mass, and is the pure resistance of a biological conductor to the flow of an alternating current.

Waist, hip and sagittal diameter

Measured to the nearest mm by measuring tape and a special calliper, respectively.

Blood pressure

Measured in a sitting position on the left upper arm after 5 min rest. A London School of Hygiene sphygmomanometer was used. Run down of the mercury column was set to 2 mm/s. During the 5 min, the questionnaire was completed and the participant was asked to sign a form of consent. The blood pressure was classified as elevated, if the systolic blood pressure (SBP) was more than 110 mmHg plus the age of the participant, and this figure exceeded 145, or the diastolic blood pressure (DBP) was higher than 100 mmHg regardless of age. If SBP was elevated, but less than 200 mmHg, the participant was told to contact his general practitioner within the next 2 weeks. If SBP was between 200 mmHg and 240 mmHg, the participant was told to contact his general practitioner within the next few days. If SBP exceeded 240 mmHg, or DBP was between 120 mmHg and 140 mmHg, the participant was informed to contact his general practitioner straight away. In case of a DBP greater than or equal to 140 mmHg, the staff doctor decided whether the participant needed immediate treatment or hospitalization.

Training of paramedical staff

All the examinations were performed by paramedical personnel (i.e. nurses and medical laboratory

technicians). Before the examinations started, all members of staff were trained according to the WHO manual for cardiovascular epidemiological studies (Rose GA, Blackburn H. *Cardiovascular Survey Methods*. Wld Hlth Org Monogr Ser 56, Geneva 1968).

The fact that all the examinations were made by paramedical personnel kept the cost per examined participant at a very low level.

List of publications

- [1] Schnohr P, Jensen G, Nyboe J, Tybjærg Hansen A. Østerbroundersøgelsen — Et prospektivt kardiovaskulært populationsstudie af 20 000 mænd og kvinder. Ugeskr Laeger 1977; 139: 1921–3.
- [2] Husholdningslærerstuderende Rasmussen R. En undersøgelse af ernæringsmæssige og sociale forhold hos en mindre gruppe ældre på Nørrebro. Speciale fra Suhrs seminarium 1977.
- [3] Jensen G. København. Fysisk Aktivitet i Norden. Motionsvaner blandt københavnske mænd og kvinder. Pram Gad & Søren Holst-Sørensen, August Krogh Institutet. Marts 1977.
- [4] Schnohr P, Jensen G, Nyboe J, Tybjærg Hansen A. The Copenhagen City Heart Study (Østerbroundersøgelsen). CVD Epidemiology Newsletter. Council on Epidemiology, American Heart Ass., June 1977, p. 46.
- [5] Kjellerup N, Gutheil F. Kapillarering og enzymaktivitet i musculus gastrocnemius hos patienter med claudicatio intermittens. Effekten af fysisk træning. Rapport fra August Krogh Institut januar 1978.
- [6] Molander B, Mygind E. Metabolisk og enzymatisk aktivitet i musculus gastrocnemius hos patienter med claudicatio intermittens. Rapport fra August Krogh Institut maj 1978.
- [7] Boysen G, Jensen G, Schnohr P. Focal cerebral transient ischaemic attacks — a population study from Copenhagen. Acta Neurol Scand 1978; 57 (Suppl 67): 221.
- [8] Schnohr P, Jensen G, Nyboe J, Tybjærg Hansen A. The Copenhagen City Heart Study (Østerbroundersøgelsen). CVD Epidemiology Newsletter. Council on Epidemiology, American Heart Ass. June 1978, p. 24.
- [9] Kjeldsen K, Jensen G, Schnohr P. Sygelighed af akut myokardieinfarkt i forskellige dele af Storkøbenhavn, Østerbroundersøgelsen. Ugeskr Laeger 1979; 141: 2645–7.
- [10] Husholdningslærerstuderende Wahl H, husholdningslærerstuderende Bruun de Neergård R, Schnohr P, Jensen G. Kosten hos 40–49 årige københavnere i 1977 — Østerbroundersøgelsen. Ugeskr Laeger 1979; 141: 51–3.
- [11] Schnohr P. The value of mass-screening for hypertension. Acta Med Scand 1979; Suppl 626.
- [12] Grunnet I, Roldsgaard T. Trænerbarhed og holdning til motion hos patienter med claudicatio intermittens. Rapport fra August Krogh Institut juni 1979.
- [13] Varnek L, Schnohr P, Jensen G. Presenile corneal arcus in healthy persons. A possible cardiovascular risk indicator in younger adults. Acta Ophthalmologica 1979; 57: 755–65.
- [14] Boysen G, Jensen G, Schnohr P. Frequency of focal cerebral transient ischaemic attacks during a 12 month period. (The Copenhagen City Heart Study). Stroke 1979; 10: 533–4.
- [15] Ebbesen P, Due C, Hesse J et al. Elevated titer of antibodies to simian sarcoma virus envelope antigen (GP 70) and normal response to influenza virus in untreated Danish Hodgkin's patients. Int J Cancer 1979; 24: 1–5.
- [16] Jensen G, Schnohr P, Færgemann O, Meinertz H, Nyboe J, Tybjærg Hansen A. HDL-cholesterol and ischaemic cardiovascular disease in The Copenhagen City Heart Study. Dan Med Bull 1980; 27: 139–42.
- [17] Kiens B, Jørgensen I, Lewis S et al. Increased plasma HDL-cholesterol and apo A-1 in sedentary middle-aged men after physical conditioning. Eur J Clin Invest 1980; 10: 203–9.
- [18] Kofod V, Munter J. Muskelstyrke og fysisk præstationsevne hos 78–81 årige mænd og kvinder. Rapport fra August Krogh Institutet 1980.
- [19] Östör E, Schnohr P, Jensen G, Nyboe J, Tybjærg Hansen A. Electrocardiographic findings and their association with mortality in The Copenhagen City Heart Study. Eur Heart J 1981; 2: 317–28.
- [20] Jensen G, Schnohr P, Nyboe J, Tybjærg Hansen A, Forekomsten af højt blodtryk i Østerbroundersøgelsen I: Hypertensionens epidemiologi i Danmark. Dansk Hypertensions Selskab 1981. Gyntelberg F, Hilden T, Ibsen H (eds).
- [21] Ibsen KK. Blood pressure in Danish children and adolescents. Acta Paediatr Scand 1981; 70: 27–31.
- [22] Jensen G. Udviklingstendenser i iskæmisk hjertesydoms epidemiologi. Nord Med 1981; 96: 75–7.
- [23] Ibsen KK. Liquorice consumption and its influence on blood pressure. Dan Med Bull 1981; 28: 124–6.
- [24] Saltin B. Physical training in patients with intermittent claudication. In: Cohen, Mock, Ringquist, eds. Physical Conditioning and Cardiovascular Rehabilitation. New York: Wiley and Sons, 1981: 181–96.
- [25] Soelberg P, Boysen G, Jensen G, Schnohr P. Prevalence of stroke in a district of Copenhagen. Acta Neurol Scand 1982; 66: 68–81.
- [26] Jensen G. Angina Pectoris — epidemiologi og behandlingsbehov. Nord Med 1982; 97: 99–101.
- [27] Ibsen KK, Cohn J, Schnohr P et al. Plasma lipids in Danish schoolchildren from Copenhagen and the Faroe Islands. Scand J Soc Med 1982; Suppl 30: 41–52.
- [28] Jensen G. Akut Myokardieinfarkt: Epidemiologiske aspekter. I: Akut Myokardienfarkt. Sigurd B, ed. FADLS Forlag, 1982.
- [29] Ibsen KK, Hannover Larsen J. The prevalence of antibodies to hemolytic streptocci and to yersinia enterocolitica in Danish schoolchildren and among hospitalized patients. Scand J Inf Dis 1982; 14: 277–82.
- [30] Skinhoj P, Ibsen KK, Kryger P. Viral hepatitis in Danish children. Disappearance of an infection from its previous reservoir. Arch Dis in Childhood 1982; 57: 146–8.
- [31] Eriksen HO, Clemmensen I, Hansen MS, Ibsen KK. Plasma fibronectin concentration in normal subjects. Scand J Clin Lab Invest 1982; 42: 291–5.
- [32] Jensen G, Schnohr P, Nyboe J, Tybjærg Hansen A. The Copenhagen City Heart Study (Østerbroundersøgelsen). CVD Epidemiology Newsletter. Council on Epidemiology, American Heart Assoc. July 1982, p. 56.
- [33] Schnohr P, Jensen G, Nyboe J, Tybjærg Hansen A. Jogging and HDL-cholesterol, glucose and systolic blood pressure. CVD Epidemiology Newsletter. Council on Epidemiology, American Heart Assoc. July 1982, p. 56–7.
- [34] Eriksen HO, Clemmensen I, Sanberg Hansen M, Ibsen KK. Referencoemråde for plasma fibronectin koncentration. Ugeskr Laeger 1982; 144: 3740–1.
- [35] Grimby G, Danneskiold-Samsøe B, Hvid K, Saltin B. Morphology and enzymatic capacity in arm and leg muscles in 78–81 year old men and women. Acta Physiol Scand 1982; 115: 125–34.
- [36] Hegedus L, Perrild H, Poulsen LR et al. The determination of thyroid volume by ultrasound and its relationship to bodyweight, age and sex in normal subjects. J Clin Endocrinol Metab 1983; 56: 260–3.
- [37] Generaldirektoratet for Post-og Telegrafvæsenet. Arbejdssfylogisk analyse i brevomdelingstjenesten. October 1983.
- [38] Nexo E. Variation with age of reference values for P-cobalamins. Scand J Haematol 1983; 30: 430–2.

- [39] Hesse H, Ibsen KK, Krabbe S, Uldall P. Prevalence of antibodies to Epstein-Barr virus (EBV) in childhood and adolescence in Denmark. *Scand J Infect Dis* 1983; 15 (4): 335–8.
- [40] Jensen G. Epidemiology of chest pain and angina pectoris, with special reference to treatment needs. *Acta Med Scand* 1984; Suppl 682. Thesis.
- [41] Danneskjold-Samsøe B, Kofoed V, Munter J, Grimby G, Schnohr P, Jensen G. Muscle strength and functional capacity in 78–81 year old men and women. *Eur J Appl Physiol* 1984; 52: 310–4.
- [42] Jensen G, Hansen PF, Albrechtsen OK. Aorto-koronal by-pass kirurgi. Operativt behov, omkostninger og lønsomhed i Danmark. *Nord Med* 1984; 99: 242–4.
- [43] Milman H, Ibsen KK. Serum ferritin in Danish children and adolescents. *Scand J Haematol* 1984; 33: 260–6.
- [44] Ibsen KK. Blood pressure in offsprings of hypertensive parents. *Acta Paediatr Scand* 1984; 73: 842–7.
- [45] Ibsen KK. Statistical analysis of factors influencing blood pressure in children and adolescents. *Acta Med Scand* 1984; 493 (Suppl): 41–6.
- [46] Schnohr P. Motionsløb. *Ugeskr Laeger* 1984; 147: 41–2.
- [47] Ibsen KK. Blodtrykket hos børn og unge (Blood pressure in children and adolescents). Copenhagen: FADL's Forlag, 1985. Thesis.
- [48] Ibsen KK. Factors influencing blood pressure in children and adolescents. *Acta Paediatr Scand* 1985; 74: 416–22.
- [49] Rasmussen V, Jensen G, Schnohr P, Fischer Hansen J. Premature ventricular beats in healthy adult subjects 20 to 79 years of age. *Eur Heart J* 1985; 6: 335–41.
- [50] Scheibel JH, Ibsen KK. Chlamydial antibodies in Danish children. *Dan Med Bull* 1985; 32: 265–6.
- [51] La Bianca T, La Bianca J, Ibsen KK. Rubella-antibodies in schoolchildren. *Dan Med Bull* 1985; 32: 267–9.
- [52] Groth S, Jensen G, Vilstrup K, Dirksen H, Rossing N. Erfaringer med telefonisk målgruppescræening i epidemiologiske undersøgelser. *Ugeskr Laeger* 1986; 148: 3253–6.
- [53] Sonne-Holm S, Sørensen TIA, Jensen G, Schnohr P. Cardiovascular risk-factors among moderate and extreme overweight young men. Relation to weight changes. *CDV Epidemiology Newsletter*, 1986.
- [54] Meeting of principal investigators of the European risk and incidence, a collaborative analysis (ERICA) study. Heidelberg, October 1986.
- [55] Andersen LI, Schmidt A, Bundgaard A. Pulmonary function and acid application in the oesophagus. *Chest* 1986; 90: 358–63.
- [56] Andersen LI, Vasehus Madsen P, Dalgaard P, Jensen G. Validity of clinical symptoms in benign esophageal disease, assessed by questionnaire. *Acta Med Scand* 1987; 221: 171–7.
- [57] Waaler H, Jensen G, Schnohr P et al. Body mass index in the Nordic countries. *Scand J Soc Med* 1987; 15: 205–9.
- [58] Petersen P, Birk Madsen E, Brun B, Pedersen F, Gyldensted C, Boysen G. Silent cerebral infarction in chronic atrial fibrillation. *Stroke* 1987; 18: 1098–100.
- [59] Lange P, Groth S, Mortensen J et al. Pulmonary function is influenced by heavy alcohol consumption. *Am Rev Respir Dis* 1988; 137: 1119–23.
- [60] Lange P, Schnohr P, Groth S et al. Medfører helbredsproblemer rygeophør? *Ugeskr Laeger* 1988; 150: 2024–6.
- [61] The ERICA research group. The CHD risk-map of Europe. The 1st report of the WHO-ERICA project. *Eur Heart J* 1988; 9 (Suppl 1): 1–36.
- [62] Boysen G, Nyboe J, Appleyard M et al. Stroke incidence and risk factors for stroke in Copenhagen. *Stroke* 1988; 19: 1345–53.
- [63] Lange P, Groth S, Kastrup J et al. Diabetes mellitus, plasma glucose and lung function in a cross-sectional population study. *Eur Respir J* 1989; 2: 14–19.
- [64] Larsen PB, Roed J, Ibsen KK. Kostsammensætning og serum-lipider hos børn. *Ugeskr Laeger* 1989; 151: 686–90.
- [65] Appleyard M, Hansen AT, Schnohr P, Jensen G, Nyboe J. The Copenhagen City Heart Study. Østerbroundersøgelsen. A book of tables with data from the first examination (1976–78) and a five-year follow-up (1981–83). *Scand J Soc Med* 1989; 170 (Suppl 41): 1–160.
- [66] Roed J, Larsen PB, Ibsen KK. Højde hos en population af storkøbenhavnske børn i alderen 7–18 år, 1981 og 1985. *Ugeskr Laeger* 1989; 151: 895–7.
- [67] Eldrup E, Winkel P, Lindholm J et al. Coronary risk factors, development of myocardial infarction and plasma estrogens. A prospective study. *J Int Med* 1989; 225: 367–72.
- [68] Andersen LI, Jensen G. Prevalence of benign esophageal disease in the Danish population with special reference to pulmonary disease. *J Int Med* 1989; 225: 393–402.
- [69] Lange P, Groth S, Nyboe J et al. Chronic obstructive lung disease in Copenhagen. Cross-sectional epidemiological aspects. *J Int Med* 1989; 226: 25–32.
- [70] Sonne-Holm S, Sørensen TIA, Jensen G, Schnohr P. Independent effects of weight change and attained body weight on prevalence of arterial hypertension in obese and non-obese men. *BMJ* 1989; 299: 767–70.
- [71] Nyboe J, Jensen G, Appleyard M, Schnohr P. Risk factors for acute myocardial infarction in Copenhagen. I: Hereditary, Educational and Socioeconomic Factors. *Eur Heart J* 1989; 10: 910–16.
- [72] Lange P, Groth S, Nyboe J et al. Effects of smoking and changes in smoking habits on the decline of FEV₁. *Eur Respir J* 1989; 2: 811–16.
- [73] Vinding T. Age-related macular degeneration: Macular changes, prevalence and sex-ratio. An epidemiological study of 1000 aged individuals. *Acta Ophthalmol* 1989; 67: 609–16.
- [74] Lange P, Groth S, Nyboe J et al. Determinants of chronic mucus hypersecretion in a general population with special reference to the type of tobacco smoked. *Int J Epidemiol* 1989; 18: 882–7.
- [75] Sonne-Holm S, Sørensen TIA, Jensen G, Schnohr P. Influence of fatness, intelligence and sociodemographic factors on response rate in a population study. *J Epidemiol Community Health* 1989; 43: 369–74.
- [76] Lange P, Groth S, Nyboe J et al. Decline of the lung function related to the type of tobacco smoked and inhalation. *Thorax* 1990; 45: 22–6.
- [77] Vinding T. Pigmentation of the eye and hair in relation to age-related macular degeneration. An epidemiological study of 1000 aged individuals. *Acta Ophthalmol* 1990; 68: 53–8.
- [78] Lange P, Nyboe J, Appleyard M, Jensen G, Schnohr P. Ventilatory function and chronic mucus hypersecretion as predictors of death from lung cancer. *Am Rev Respir Dis* 1990; 141: 613–17.
- [79] Lange P, Groth S, Mortensen J et al. Diabetes mellitus and ventilatory capacity. A five-year follow-up study. *Eur Respir J* 1990; 3: 288–92.
- [80] Schnohr P, Appleyard M, Jensen G, Tybjærg Hansen A. Fal d i hjertedødelighed og ændring af risikofaktorniveauet. *Ugeskr Laeger* 1990; 152: 1296–9.
- [81] Vinding T. Visual impairment of age-related macular degeneration. An epidemiological study of 1000 aged individuals. *Acta Ophthalmol* 1990; 68: 162–7.
- [82] Tybjærg Hansen A, Gerdes LU, Overgaard K, Ingerslev J, Færgeman O, Nerup J. Polymorphism in 5' flanking region of human insulin gene. *Arteriosclerosis* 1990; 10: 372–8.
- [83] Gerdes LU. Grænseværdier for hyperkolesterolæmi: Enkelte værdier eller percentiler? *Ugeskr Laeger* 1990; 152: 1736–9.
- [84] Sonne-Holm S, Sørensen TIA, Jensen G, Schnohr P. Long-term changes of body weight in adult obese and non-obese men. *Int J Obesity* 1990; 14: 319–26.
- [85] Lange P, Nyboe J, Appleyard M, Jensen G, Schnohr P. Relation of ventilatory impairment and of chronic mucus hypersecretion to mortality from obstructive lung disease and from all causes. *Thorax* 1990; 45: 579–85.

- [86] Lange P, Groth S, Nyboe J *et al.* Phlegm production in plain cigarette smokers who changed to filter cigarettes or quit smoking. *J Int Med* 1990; 228: 115–20.
- [87] Vinding T. Occurrence of drusen, pigmentary changes and exudative changes in the macula with reference to accelerated macular degeneration. An epidemiological study of 1000 aged individuals. *Acta Ophthalmol* 1990; 68: 410–14.
- [88] Klitgård H, Mantoni M, Schiaffino S *et al.* Function, morphology and protein expression of ageing skeletal muscle: a cross-sectional study of elderly men with different training background. *Acta Physiol Scand* 1990; 140: 41–54.
- [89] Lange P, Nyboe J, Appleyard M, Jensen G, Schnohr P. Spirometric findings and mortality in never-smokers. *J Clin Epidemiol* 1990; 9: 867–73.
- [90] Clausen J, Jensen G. Are blood pressure levels increasing in Denmark? *J Int Med* 1990; 228: 443–50.
- [91] Schnohr P, Lange P, Nyboe J, Appleyard M, Jensen G. Forøger rygning graden af ansigtsrynker? Østerbroundersøgelesen. *Ugeskr Laeger* 1991; 153: 660–2.
- [92] Rasmussen V, Jensen G, Fischer Hansen J. QT interval in 24-hour ambulatory ECG recordings from 60 healthy adult subjects. *J Electrocardiol* 1991; 24: 91–8.
- [93] Jensen G, Nyboe J, Appleyard M, Schnohr P. Risk factors for acute myocardial infarction in Copenhagen. II: Smoking, alcohol intake, oral contraception, obesity, diabetes, physical activity, blood pressure and lipids. *Eur Heart J* 1991; 12: 298–308.
- [94] Bodé SH, Bachmann E, Gudmand-Hoyer E, Jensen G. Stature of adult coeliac patients: No evidence for decreased attained height. *Eur J Clin Nutr* 1991; 45: 145–9.
- [95] Sonne-Holm S. Den overvægtige unge mand. Forekomst og prognose. Copenhagen. Eget forlag. 1991. Thesis.
- [96] Andersen LI, Jensen G. Risk factors for benign oesophageal disease in a random population sample. *J Int Med* 1991; 230: 5–10.
- [97] Lung functions and anthropometric data from children and adolescents. Bach-Mortensen N, Appleyard M, Ibsen KK, eds. Eget forlag, August 1991.
- [98] Vestbo J, Lange P. Forceret expiratorisk volumen i 1 sekund — et respirationsfysiologisk mål af betydelig prediktiv værdi. *Ugeskr Laeger* 1991; 153: 2292–5.
- [99] Tybjærg Hansen A, Nordestgaard BG, Gerdes U, Humphries. Variation of apolipoprotein B gene is associated with myocardial infarction and lipoprotein levels in Danes. *Atherosclerosis* 1991; 89: 69–81.
- [100] Nyboe J, Jensen G, Appleyard M, Schnohr P. Smoking and the risk of a first acute myocardial infarction. *Am Heart J* 1991; 122: 438–47.
- [101] Lange P, Groth S, Mortensen J *et al.* Forskellige slags røgtobak og udvikling af kronisk obstruktiv lungesygdom. Resultater fra Østerbroundersøgelsen. *Ugeskr Laeger* 1991; 153: 2742–5. (Dansk sammendrag af artiklerne nr. 73 & 75).
- [102] Lange P, Nyboe J, Jensen G, Schnohr P, Appleyard M. Ventilatory function impairment and risk of cardiovascular death and fatal or non-fatal myocardial infarction. *Eur Respir J* 1991; 4: 1080–7.
- [103] Lange P. Development and prognosis of chronic obstructive pulmonary disease with special reference to the role of tobacco smoking. *Dan Med Bull* 1992; 39: 30–48. Thesis.
- [104] de Man SA, André J-L, Bachmann H *et al.* Blood pressure in childhood: Pooled findings of six European studies. *J Hypertension* 1991; 9: 109–14.
- [105] Boysen G, Nyboe J, Appleyard M, Schnohr P, Jensen G. Incidence of and risk factors for stroke and AMI in a Copenhagen cohort. In: Meyer JS *et al.*, eds. *Cerebral vascular diseases*. Elsevier Science Publishers B.V., 1991: 31–34.
- [106] Lindenstrøm E, Boysen G, Nyboe J, Appleyard M. Stroke incidence in Copenhagen, 1976–88. *Stroke* 1992; 23: 28–32.
- [107] Andersen LI, Frederiksen H-J, Appleyard M. Prevalence of oesophageal candidiasis in a Danish population, with special reference to oesophageal symptoms, benign oesophageal disorders and pulmonary disease. *J Infect Dis* 1992; 165: 389–92.
- [108] Jensen G. Forebyggelse af iskæmisk hjertesygdom. *Ugeskr Laeger* 1992; 154: 537. (Inviteret leder).
- [109] Vinding T, Appleyard M, Nyboe J, Jensen G. Risk factor analysis for atrophic and exudative age-related macular degeneration. An epidemiological study of 1000 aged individuals. *Acta Ophthalmol* 1992; 70: 66–72.
- [110] Clausen J, Jensen G. Blood pressure and mortality: an epidemiological survey 10 years follow-up. *J Human Hypertension* 1992; 6: 53–9.
- [111] Lange P, Nyboe J, Appleyard M, Jensen G, Schnohr P. Relationship of the type of tobacco and inhalation pattern to pulmonary and total mortality. *Eur Respir J* 1992; 5: 1111–7.
- [112] Lange P. Relation of mucus hypersecretion to morbidity and mortality: Epidemiological aspects. *Eur Respir Rev* 1992; 2: 270–2.
- [113] Tybjærg Hansen A, Humphries SE. Familial defective apolipoprotein B-100: a single mutation that causes hypercholesterolemia and premature coronary artery disease. *Atherosclerosis* 1992; 96: 91–107.
- [114] Clausen J, Jensen G. Blodtryk og dødelighed. Østerbroundersøgelsen. *Ugeskr Laeger* 1993; 155: 561–6. (Inviteret dobbeltpublikation af nr. 110).
- [115] Andersen LI, Frederiksen H-J, Appleyard M. Forekomst af *Candida Albicans* — kolonisation i esophagus. *Ugeskr Laeger* 1993; 155: 642–5. (Inviteret dobbeltpublikation af nr. 107).
- [116] Lindenstrøm E, Boysen G, Nyboe J. Risk factors for Stroke in Copenhagen, Denmark. I. Basic demographic and social factors. *Neuroepidemiology* 1993; 12: 37–42.
- [117] Lindenstrøm E, Boysen G, Nyboe J. Risk factors for Stroke in Copenhagen, Denmark. II. Life-style factors. *Neuroepidemiology* 1993; 12: 43–50.
- [118] Lange P, Nyboe J, Appleyard M, Jensen G, Schnohr P. Tobak, lungekræft og kronisk obstruktiv lungesygdom. Resultater fra Østerbroundersøgelsen. *Ugeskr Laeger* 1993; 155: 2333–7.
- [119] Tybjærg Hansen A, Nordestgaard BG, Gerdes LU, Færgerman O, Humphries SE. Genetic markers in the apo A1-CIII-AIV gene cluster for combined hyperlipidemia, hypertriglyceridemia, and predisposition to atherosclerosis. *Atherosclerosis* 1993; 100: 157–69.
- [120] Jensen G. Remissionsbehandling på hypertension — et nyt behandlingsmål? *Ugeskr Laeger* 1993; 155: 2585–6.
- [121] Vestbo J, Lange P. Ekspektoration — et undervurderet symptom? *Ugeskr Laeger* 1993; 155: 3100–3.
- [122] Lindenstrøm E, Boysen G, Nyboe J. Life-style factors and risk for Stroke in women. The Copenhagen City Heart Study. *Stroke* 1993; 24: 1468–72.
- [123] Feldt-Rasmussen B, Borch-Johnsen K, Deckert T, Jensen G, Jensen JS. Mikroalbuminuri — En værdifuld diagnostisk parameter. *Ugeskr Laeger* 1993; 155: 4149–54.
- [124] Jensen JS, Borch-Johnsen K, Feldt-Rasmussen B, Jensen G. Screening for mikroalbuminuri med Micral-Test. En semikvantitativ urin-stix. *Ugeskr Laeger* 1993; 155: 4155–7.
- [125] Jensen JS, Feldt-Rasmussen B, Borch-Johnsen K, Jensen G, and The Copenhagen City Heart Study Group. Urinary albumin excretion in a population based sample of 1011 middle aged non-diabetic subjects. *Scand J Clin Lab Invest* 1993; 53: 867–72.
- [126] Grønbæk M, Deis A, Sørensen TIA *et al.* Influence of sex, age, body mass index, and smoking on alcohol intake and mortality. *BMJ* 1994; 308: 302–6.
- [127] Lindenstrøm E. Risk factors for cerebrovascular disease. Twelve year follow-up from the Copenhagen City Heart Study. Copenhagen: Eget forlag, 1994. PhD thesis.
- [128] Lindenstrøm E, Boysen G, Nyboe J. Influence of total cholesterol, high density lipoprotein cholesterol, and triglycerides on risk of cerebrovascular disease: The Copenhagen City Heart Study. *BMJ* 1994; 309: 11–15.

- [129] Lange P, Schnohr P. The relation between facial wrinkling and airflow obstruction. *Int J Dermatol* 1994; 33: 123–6.
- [130] Ulrik CS, Lange P. Decline of lung function in adults with bronchial asthma. *Am J Respir Crit Care Med* 1994; 150: 629–34.
- [131] Grønbæk M, Deis A, Sørensen TIA et al. Sammenhængen mellem alkohol og dødelighed. Betydningen af køn, alder, vægt og rygning.. *Ugeskr Laeger* 1994; 156: 7124–18. (Inviteret dobbeltpublikation af nr. 126).
- [132] Mortensen J, Lange P, Nyboe J, Groth S. Lung mucociliary clearance. *Eur J Nucl Med* 1994; 21: 953–61.
- [133] Grønbæk M, Deis A. Druk og død — hvordan hænger tingene sammen? *Indblik* 1994; Juni: 20–21. (Kort sammendrag af 125).
- [134] Truelson T, Lindenstrøm E, Boysen G. Comparison of probability of stroke between the Copenhagen City Heart Study and the Framingham Study. *Stroke* 1994; 25: 802–7.
- [135] Jensen JS, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Atherosclerotic risk factors are increased in clinically healthy subjects with microalbuminuria. *Atherosclerosis* 1995; 112: 245–52.
- [136] Grønbæk M, Henriksen JH, Becker U. Carbohydrate deficient transferrin — a valid marker of alcoholism in population studies? Results from the Copenhagen City Heart Study. *Alcohol Clin Exp Res* 1995; 19: 457–61.
- [137] Grønbæk M, Deis A, Sørensen TIA, Becker U, Schnohr P, Jensen G. Mortality associated with moderate intake of wine, beer and spirits. *BMJ* 1995; 310: 1165–9.
- [138] Avlund K, Thudum D, Davidsen M, Fuglsang-Sørensen B. Are self-ratings of functional ability reliable? *Scand J Occup Ther* 1995; 2: 10–6.
- [139] Grønbæk M. Alcohol and life expectancy. *Br J Hosp Med* 1995; 54: 306–7.
- [140] Becker U, Deis A, Sørensen TIA et al. Alcohol intake in a population study. Assessment and characterization. *Alcologia* 1995; 7: 35–42.
- [141] Prescott E, Lange P, Vestbo J. Chronic mucus hypersecretion in COPD and death from pulmonary infection. *Eur Respir J* 1995; 8: 1333–8.
- [142] Jensen JS, Myrup B, Borch-Johnsen K, Jensen G, Jensen T, Feldt-Rasmussen B. Aspects of haemostatic function in healthy subjects with microalbuminuria — a potential atherosclerotic risk factor. *Thromb Res* 1995; 77: 423–30.
- [143] Jensen JS, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Microalbuminuria reflects a generalized transvascular albumin leaking in clinically healthy subjects. *Clin Sci* 1995; 88: 629–33.
- [144] Jensen JS, Borch-Johnsen K, Deckert T, Deckert M, Jensen G, Feldt-Rasmussen B. Reduced glomerular size- and charge-selectivity in clinically healthy individuals with microalbuminuria. *Eur J Clin Invest* 1995; 25: 608–14.
- [145] Jensen JS. Renal and systemic transvascular albumin leakage in severe atherosclerosis. *Arterioscler Thromb Vasc Biol* 1995; 15: 1324–9.
- [146] Tybjærg Hansen A. Rare and common mutations in hyperlipidemia and atherosclerosis. With special reference to familial defective apolipoprotein B-100. *Scand J Clin Lab Invest* 1995; 55 (Suppl 220): 57–76. Thesis.
- [147] Grønbæk M. Carbohydrate-deficient transferrin — pålidelighed ad testen? *Ugeskr Laeger* 1995; 157: 5261.
- [148] Lange P, Vestbo J, Nyboe J. Risk factors for death and hospitalization from pneumonia. A prospective study of a general population. *Eur Respir J* 1995; 8: 1694–8.
- [149] Grønbæk M. In vino veritas. *Ugeskr Laeger* 1995; 157: 6415.
- [150] Schnohr P, Lange P, Nyboe J, Appleyard M, Jensen G. Grey hair, baldness, and wrinkles in relation to myocardial infarction: The Copenhagen City Heart Study. *Am Heart J* 1995; 130: 1003–10.
- [151] Hertel NT, Scheike T, Juul A et al. Kropsproportioner hos danske børn. Kurver for siddehøjde, siddehøjderatio, subskial benlængde og armlængde. *Ugeskr Laeger* 1995; 157: 6876–81.
- [152] Chen J-W, Gall M-A, Deckert M, Jensen JS, Parving H-H. Increased serum concentration of von Willebrand factor in non-insulin dependent diabetics with and without nephropathy. *BMJ* 1995; 311: 1405–6.
- [153] Jensen JS. Intra-individual variation of overnight urinary albumin excretion in clinically healthy middle-aged individuals. *Clin Chim Acta* 1995; 243: 95–9.
- [154] Lindenstrøm E, Boysen G, Nyboe J. Influence of systolic and diastolic blood pressure on stroke risk: A prospective observational study. *Am J Epidemiol* 1995; 142: 1279–90.
- [155] Nielsen WB, Vestbo J, Jensen G. Isolated systolic hypertension as a major risk factor for stroke and myocardial infarction and an unexploited source of cardiovascular prevention: a prospective population-based study. *J Hum Hypertension* 1995; 9: 175–80.
- [156] Carstensen S, Ali S, Stensgaard-Hanson F, Toft JC, Haunso S, Saunamäki K. Dobutamine-Atropine stress echocardiography in asymptomatic healthy individuals. *Circulation* 1995; 92: 3453–63.
- [157] Bjerrum K. Snake-like chromatin in conjunctival cells of normal elderly persons and of patients with primary Sjögren's syndrome and other connective tissue diseases. *Acta Ophthalmol Scand* 1995; 73: 33–6.
- [158] Troels Vinding. Age related macular degeneration in the Danish population. An epidemiological study of 1000 aged individuals. *Acta Ophthalmol Scand* 1995; 73 (Suppl 217). 1996. Thesis.
- [159] Jensen JS, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Insulin sensitivity in clinically healthy individuals with microalbuminuria. *Atherosclerosis* 1996; 119: 69–76.
- [160] Becker U, Deis A, Sørensen TIA et al. Prediction of risk of liver disease in relation to alcohol intake, sex and age: A prospective population study. *Hepatology* 1996; 23: 1025–9.
- [161] Chen J-W, Gall M-A, Yokoyama H, Jensen JS, Deckert M, Parving H-H. Raised serum sialic acid concentration in NIDDM patients with and without diabetic nephropathy. *Diabetes Care* 1996; 19: 130–4.
- [162] Grønbæk M, Heitmann BL. Validity of self-reported intakes of wine, beer, and spirits in population studies. *Eur J Clin Nutr* 1996; 50: 487–90.
- [163] Grønbæk M. Alcohol and mortality — explanation of the U-shaped risk function. Copenhagen: Eget forlag, 1996. PhD Thesis.
- [164] Lars Ib Andersen. Prevalence of benign esophageal disease in the Danish population, with special reference to pulmonary disease and risk factors. Copenhagen: Lægeforeningens Forlag, 1996. Thesis.
- [165] Lange P, Ulrik CS, Vestbo J, and the Copenhagen City Heart Study Group. Mortality in adults with self-reported asthma. *Lancet* 1996; 347: 1285–9.
- [166] Vestbo J, Prescott E, Lange P, and the Copenhagen City Heart Study group. Association of chronic mucus hypersecretion with FEV₁ and COPD morbidity. *Am J Respir Crit Care Med* 1996; 153: 1530–5.
- [167] Jensen JS. The distribution of urinary albumine excretion and its association to atherosclerotic risk factors. *Dan Med Bull* 1996; 43: 379–80. PhD Thesis.
- [168] Knudsen JH, Gustafsson F, Toft JC, Christensen NJ. Lymphocyte cAMP and ageing: Significance of subset composition, plasma noradrenaline, regular physical training and long-term smoking. *Clin Sci* 1996; 91: 621–6.
- [169] Bjerrum K. Test and symptoms in keratoconjunctivitis sicca and their correlation. *Acta Ophthalmol Scand* 1996; 74: 436–41.
- [170] Nordestgaard BG, Agerholm-Larsen B, Wittrup HH, Tybjærg-Hansen A. A prospective cardiovascular population study used in genetic epidemiology. The Copenhagen City Heart Study. *Scand J Clin Lab Invest* 1996; 56 (Suppl 226): 65–71.
- [171] Grønbæk M, Deis N, Sørensen TIA, Becker U, Schnohr P, Jensen G. Forskel i dødelighed ved moderat forbrug af øl, vin og spiritus. *Ugeskr Laeger* 1995; submitted. (Inviteret dobbeltpublikation af nr. 137).

- [172] Grønbæk M, Sørensen TIA. Alcohol consumption and risk of coronary heart disease. *BMJ* 1996; 313: 365.
- [173] Grønbæk M, Deis A, Sørensen TIA, Becker U, Schnohr P, Jensen G. Reduced mortality from cardiovascular and cerebrovascular disease associated with moderate intake of wine. In: Salonen J, Kumpulainen J, eds. *Natural Antioxidants and Food Quality in Atherosclerosis and Cancer Prevention*. Cambridge: Royal Society of Chemistry, 1996: 262–3.
- [174] Gustafsson F, Ali S, Hanel B, Toft JC, Secher NH. Left ventricular hypertrophy in a senior oarsman: an echocardiographic evaluation. *Med Sci Sports Exer* 1996; 28: 1045–8.
- [175] Nielsen WB, Vestbo J, Jensen G. Isoleret systolisk hypertension; En væsentlig risikofaktor for apopleksia cerebri (stroke) og akut myokardinfarkt (AMI). En prospektiv populationsbaseret undersøgelse. *Ugeskr Laeger* 1996; dobbeltpublikation af 155.
- [176] Netterstrøm B, Kristensen TS, Møller L, Jensen G, Schnohr P. Psykisk arbejdsmiljø og helbred. Resultater fra Østerbroundersøgelsen. *Arbejdsmiljøfonden* 1996.
- [177] Skaarup EØ. En klinisk epidemiologisk tværsnitsundersøgelse af prævalens af epilepsi i en voksen københavnerbefolknings. Copenhagen: Eget Forlag, 1997. PhD Thesis.
- [178] Thudium DL. Senil demens — forekomst og risikofaktorer. En undersøgelse af Østerbropopulationen. Copenhagen: Eget Forlag, 1997. PhD Thesis.
- [179] Toft J, Hesse B, Rabøl A. The occurrence of false-positive technetium-99m sestamibi bull's eye defects in difference databases. *Eur J Nucl Med* 1997; 24: 179–83.
- [180] Toft J, Rasmussen V, Hesse B, Ali S, Carstensen S, Jensen G. Late potentials in healthy subjects: Do we need new criteria for abnormality? *Ann Noninvas Electrocardio* 1997; 2: 27–32.
- [181] Henriksen JH, Grønbæk M, Møller S, Bendtsen F, Becker U. Carbohydrate deficient transferrin (CDT) in alcoholic liver disease. A catheterization study. *Scand J Gastroenterol* 1997; 26: 287–92.
- [182] Grønbæk M, Kondrup J. Alkohol. In: Alstrup A, Garby L, Stender S, eds. *Menneskets ernæring*. Copenhagen: Munksgaard, 1997: 114–22.
- [183] Jensen JS, Borch-Johnsen K, Feldt-Rasmussen B, Appleyard M, Jensen G. Urinary albumin excretion and atherosclerotic vascular disease in a population based sample of 2613 individuals. *J Cardiovasc Risk* 1997; 4: 121–5.
- [184] Grønbæk M, Heitmann B. Hvor gode oplysninger får vi om indtag af øl, vin og spiritus i befolkningsundersøgelser? *Ugeskr Laeger* 1997; 159: 3151–4.
- [185] Nordestgaard BG, Abildgaard S, Wittrup H, Steffensen R, Jensen G, Tybjærg-Hansen A. Heterozygous lipoprotein lipase deficiency. Frequency in the general population, effect on plasma lipid levels, and risk of ischemic heart disease. *Circulation* 1997; 96: 1737–44.
- [186] Jensen JS, Clausen P, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Detecting microalbuminuria by urinary albumin/creatinine concentration ratio. *Nephrol Dial Transplant* 1997; 12 (Suppl 2): 6–9.
- [187] Agerholm-Larsen B, Nordestgaard BG, Steffensen R, Sørensen TIA, Jensen G, Tybjærg-Hansen A. The ACE gene polymorphism: Ischemic heart disease and longevity in 10 150 individuals. A case-referent and a retrospective cohort study based on The Copenhagen City Heart Study. *Circulation* 1997; 95: 2358–67.
- [188] Prescott E, Lange P, Vestbo J. Effect of gender on hospital admissions for asthma and prevalence of self-reported asthma: a prospective study based on a sample of the general population. *Thorax* 1997; 52: 287–9.
- [189] Bjerrum KB. Keratoconjunctivitis sicca and primary Sjögren's syndrome in a Danish population aged 30–60 years. *Acta Ophthalmol Scand* 1997; 75: 281–6.
- [190] Prescott E, Bjerg AM, Andersen PK, Lange P, Vestbo J. Gender difference in smoking effects on lung function and risk of hospitalization for COPD: Results from a Danish longitudinal population study. *Eur Respir J* 1997; 10: 922–7.
- [191] Grønbæk M, Iversen L, Olsen J, Becker U, Hardt F, Sørensen TIA. Genstandsgrenser. *Ugeskr Laeger* 1997; 159: 5939–45.
- [192] Hippe M, Vestbo J, Bjerg AM et al. Cardiovascular risk factor profile in subjects with familial predisposition to myocardial infarction. *J Epidemiol Comm Health* 1997; 51: 266–71.
- [193] Tybjærg-Hansen A, Agerholm-Larsen B, Humphries SE, Abildgaard S, Schnohr P, Nordestgaard BG. A common mutation ($G_{-455} \rightarrow A$) in the B-fibrinogen promoter is an independent predictor of plasma fibrinogen, but not of ischemic heart disease. *J Clin Invest* 1997; 99: 3034–9.
- [194] Wittrup HH, Tybjærg-Hansen A, Abildgaard S, Steffensen R, Schnohr P, Nordestgaard BG. A common substitution (Asn291Ser) in lipoprotein lipase is associated with increased risk of ischemic heart disease. *J Clin Invest* 1997; 99: 1606–13.
- [195] Lange P, Ulrik CS, Vestbo J, Østerbroundersøgelsens Styrringsgruppe. Dødelighed hos voksne med astma. Resultater fra Østerbroundersøgelsen. *Ugeskr Læg* 1997; 159: 4516–20. (Forkortet udgave af 164).
- [196] Truelsen T, Prescott E, Grønbæk M, Schnohr P, Boysen G. Trends in stroke incidence. *The Copenhagen Heart Study. Stroke* 1997; 28: 1903–7.
- [197] Grønbæk M. Wine and mortality. *BioFactors* 1997; 6: 377–83.
- [198] Nielsen WB. Isoleret systolisk hypertension. En kardiovaskulær epidemiologisk undersøgelse. Copenhagen: Eget forlag, 1997. PhD Thesis.
- [199] Agerholm-Larsen B, Tybjærg-Hansen A, Frikkie-Schmidt R, Grønholt M-AM, Jensen G, Nordestgaard BG. ACE gene polymorphism as a risk factor for ischemic cerebrovascular disease. *Ann Intern Med* 1997; 127: 346–55.
- [200] Prescott E, Osler M, Andersen PK et al. Has risk associated with smoking increased? Results from the Copenhagen Center for Prospective Population Studies. *Int J Epidemiol* 1997; 26: 1214–18.
- [201] Jensen JS, Feldt-Rasmussen B, Borch-Johnsen K, Clausen P, Appleyard M, Jensen G. Microalbuminuria in arterial hypertension. Relation to cardiovascular disease and anti-hypertensive agents. *J Human Hypertens* 1997; 11: 727–32.
- [202] Bjerrum KB. The ratio of albumin to lactoferrin in tear fluid as a diagnostic tool in primary Sjögren's syndrome. *Acta Ophthalm Scand* 1997; 75: 507–11.
- [203] Grønbæk M. Positive effekter af alkohol? *Nord Med* 1997; 10: 367–9.
- [204] Nielsen WB, Lindenstrøm E, Vestbo J, Jensen G. Is diastolic hypertension an independent risk factor for stroke in the presence of normal systolic blood pressure in middle-aged and elderly? *Am J Hypertension* 1997; 10: 634–9.
- [205] Toft J, Hesse B, Rabøl A, Carstensen S, Ali S. Myocardial sestamibi single-photon emission tomography: variation in reference values with gender, age and rest versus stress? *Eur J Nucl Med* 1997; 24: 409–14.
- [206] Nielsen WB, Parner J, Vestbo J, Jensen G. Risk factors for isolated systolic hypertension. A prospective population based study. *Am J Hypertension* 1997; 10: 634–9.
- [207] Grønbæk M. Vin og helbred. In: Mønster J, ed. *Fra vand til vin*. Copenhagen: Gyldendal, 1997: 147–61. ISBN 87-00-27018-0.
- [208] Gyntelberg F, Suadicani P, Jensen G et al. Job strain and cardiovascular risk factors among members of the Danish parliament. *Occup Med* 1998; 48: 31–6.
- [209] Agerholm-Larsen B. The ACE gene insertion/deletion polymorphism and ischemic cardiovascular disease. Copenhagen: Eget forlag, 1998. PhD Thesis.

- [210] Prescott E, Osler M, Hein HO *et al.* Prospective cohort study of gender and smoking-related risk of lung cancer. *Epidemiol* 1998; 9: 79–83.
- [211] Dahl M, Tybjærg-Hansen A, Wittrup HH, Lange P, Nordestgaard BG. Cystic fibrosis F508 heterozygotes, smoking, and reproduction. Studies of 9141 individuals from a general population sample. *Genomics* 1998; 50: 89–96.
- [212] Prescott E. Importance of detailed adjustment for smoking when comparing morbidity and mortality in men and women in Danish population study. *Eur J Publ Health* 1998; 8: 166–9.
- [213] Dahl M, Tybjærg-Hansen A, Lange P, Nordestgaard BG, F508 heterozygosity in cystic fibrosis and susceptibility to asthma. *Lancet* 1998; 351: 1911–3.
- [214] Wittrup HH, Tybjærg-Hansen A, Abildgaard S, Steffensen R, Schnohr P, Nordestgaard BG. Hyppig mutation fordobler risikoen for iskæmisk hjertesygdom hos kvinder. *Ugeskr Laeger* 1998; 160: 4067–72. (dobbeltpublikation).
- [215] Bartram P, Toft J, Hanel B *et al.* False-positive defects in technetium-99m sestamibi myocardial single-photon emission tomography in healthy athletes with left ventricular hypertrophy. *Eur J Nucl Med* 1998; 25: 1308–12.
- [216] Clausen P, Jensen JS, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Ambulatory blood pressure and urinary albumin excretion in clinically healthy subjects. *Hypertension* 1998; 32: 71–7.
- [217] Prescott E, Hippe M, Schnohr P, Hein HO, Vestbo J. Smoking and risk of myocardial infarction in women and men: longitudinal population study. *BMJ* 1998; 316: 1043–7.
- [218] Høidrup S. Risk factors for hip fracture. The impact of tobacco smoking, alcohol intake, physical activity, and hormone replacement therapy on risk of hip fracture. Copenhagen: Eget forlag, 1998. PhD Thesis.
- [219] Prescott E, Osler M, Hein HO, Borch-Johnsen K, Schnohr P, Vestbo J. Life expectancy in Danish women and men related to smoking habits: smoking may affect women more. *J Epidemiol Comm Health* 1998; 52: 131–2.
- [220] Vestbo J, Prescott E, Lange P, Schnohr P, Jensen G. Vital prognosis after hospitalization for COPD. A study of a random population sample. *Respir Med* 1998; 92: 772–6.
- [221] Taskiran M, Feldt-Rasmussen B, Jensen G, Jensen JS. Urinary albumin excretion in hospitalized patients with acute myocardial infarction. Prevalence of microalbuminuria and correlation to left ventricle wall thickness. *Scand Cardiovasc J* 1998; 32: 163–6.
- [222] Prescott E, Osler M, Andersen PK *et al.* Mortality in women and men in relation to smoking; results from the Copenhagen center for prospective population studies. *Int J Epidemiol* 1998; 27: 27–32.
- [223] Grønbæk M, Deis A, Becker U *et al.* Alcohol and mortality: is there a U-shaped relation in elderly people? Age and Ageing 1998; 27: 739–44.
- [224] Tybjærg-Hansen A, Steffensen R, Meinertz H, Schnohr P, Nordestgaard BG. Association of mutations in the apolipoprotein B gene with hypercholesterolemia and the risk of ischemic heart disease. *N Engl J Med* 1998; 338: 1577–84.
- [225] Schnohr P, Nyboe J, Lange P, Jensen G. Longevity and gray hair, baldness, facial wrinkles, and arcus senilis in 13 000 men and women. The Copenhagen City Heart Study. *J Gerontol A Biol Sci Med Sci* 1998; 53: M347–M350.
- [226] Osler M, Prescott E. Psychosocial, behavioural and health determinants of successful smoking cessation: a longitudinal study of Danish adults. *Tobacco Control* 1998; 7: 262–7.
- [227] Lange P, Parner J, Vestbo J, Jensen G, Schnohr P. A 15-year follow-up study of lung function in asthma. *N Engl J Med* 1998; 339: 1194–200.
- [228] Martinussen T, Sørensen TIA. Age-dependent U-shaped risk functions and Aalen's additive risk model. *Biometrics* 1998; 54: 989–1001.
- [229] Wittrup HH. Variation in the lipoprotein lipase gene: Influence on lipids and risk of ischemic heart disease. Copenhagen: Eget forlag, 1998. PhD Thesis.
- [230] Grønbæk M, Deis A, Becker U *et al.*, and Copenhagen Centre for Prospective Population Studies. Alcohol and mortality: is there a U-shaped relation in elderly people? Age and ageing 1998; 27: 739–44.
- [231] Truelsen T, Grønbæk M, Schnohr P, Boysen G. Intake of beer, wine and spirits and risk of stroke. The Copenhagen City Heart Study. *Stroke* 1998; 29: 2467–72.
- [232] Grønbæk M, Becker U, Johansen D, Tønnesen H, Jensen G, Sørensen TIA. Population based cohort study of the association between alcohol intake and cancer of the upper digestive tract. *BMJ* 1998; 317: 844–8.
- [233] Urhammer SA, Dalgaard LT, Sørensen TIA *et al.* Organisation of the coding exons and mutational screening of the uncoupling protein 3 gene in subjects with juvenile-onset obesity. *Diabetologia* 1998; 41: 241–4.
- [234] Clausen P, Jensen JS, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Prevalence of positive urinary dipstick analysis (leucocyte esterase, nitrite, haemoglobin, or glucose) in a population of 3645 adult subjects. Consequence for measurement of urinary albumin excretion rate. *Scand J Urol Nephro* 1998; 32: 399–404.
- [235] Hoyer AP, Grandjean P, Jørgensen T, Brock JW, Hartwig HB. Organochlorine exposure and risk of breast cancer. *Lancet* 1998; 352: 1816–20.
- [236] Truelsen T, Bonita R, Grønbæk M, Schnohr M, Boysen G. Stroke incidence and case fatality in two populations: The Auckland Stroke Study and the Copenhagen City Heart Study. *Neuroepidemiology* 1998; 17: 132–8.
- [237] Prescott E, Osler M, Vestbo J. Importance of detailed adjustment for smoking when comparing morbidity and mortality in men and women in a Danish population study. *Eur J Pub Health* 1998; 8: 166–9.
- [238] Andersen LB, Vestbo J, Jeul K *et al.* The Copenhagen Centre for Prospective Population Studies. A comparison of mortality rates in three prospective studies from Copenhagen with mortality rates in the central part of the city and the entire country. *Eur J Epidemiol* 1998; 14: 579–85.
- [239] Netterstrøm B, Kristensen TS, Møller L, Jensen G, Schnohr P. Angina Pectoris, job strain and social status: A cross-sectional study of employed urban citizens. *Int J Behav Med* 1998; 5: 312–22.
- [240] Mosbech H, Vegerby C, Steensen M *et al.* Støvmidealler-gener og mideallergi i københavnske boliger. En tværsnit-sundersøgelse. *Ugeskr Laeger* 1999; 161: 419–23.
- [241] Prescott E, Lange P, Vestbo J. Socioeconomic status, lung function and admission to hospital for COPD. Results from the Copenhagen City Heart Study. *Eur Respir J* 1999; 13: 1109–14.
- [242] Prescott E, Osler M, Andersen PK, Lange P, Vestbo J. A sensitivity analysis of secular trends in risk factors and mortality based on cohort studies. *Epidemiology* 1999; 10: 176–80.
- [243] Vestbo J, Sørensen T, Lange P, Viskum K. Effect of inhaled budesonide on decline of lung function in mild to moderate COPD. *Lancet* 1999; 353: 1819–23.
- [244] Wittrup HH, Tybjærg-Hansen A, Steffensen R *et al.* Mutations in the lipoprotein lipase gene associated with ischemic heart disease in men. The Copenhagen City Heart Study. *Arterioscler Thromb Vasc Biol* 1999; 19: 1535–40.
- [245] Dahl M, Tybjærg-Hansen A, Lange P, Nordestgaard BG. Børere af cystisk fibrose har øget risiko for asthma. *Østerbrounder-søgelsen* Ugeskr Laeger 1999; 161: 4507–9.
- [246] Hippe M. Familial predisposition to myocardial infarction and cardiovascular risk factors. Copenhagen: Eget forlag, 1999. Ph.D. thesis.
- [247] Lange P. Long-term prognosis of adult asthma. The Copenhagen experience. *Critical Care Internat* 1999; 9: 8–9.
- [248] Prospective Studies Collaboration. Collaborative overview ('meta-analysis') of prospective observational studies of the

- associations of usual blood pressure and usual cholesterol cycle of the Prospective Studies Collaboration. *J Cardiovasc Risk* 1999; 6: 315–20.
- [249] Grønbæk M. Type of alcohol and mortality from cardiovascular disease. *Food and Toxicol* 1999; 37: 921.
- [250] Grønbæk M, Becker U, Johansen D, Tønnesen H, Jensen G, Sørensen TIA. Alkohol og øvre gastronintestinal cancer. *Ugeskr Laeger* 1999; 161: 6196–9.
- [251] Prescott E, Hein HO, Schnohr P, Osler M, Vestbo J, Borch-Johnsen K. Rygning og middellevetid blandt danske mænd og kvinder. *Ugeskr Laeger* 1999; 161: 1261–3.
- [252] Wittrup HH, Nordestgaard BG, Tybjærg-Hansen A. Lipoprotein lipase mutations, plasma lipids and lipoproteins, and risk of ischaemic heart disease. A Meta-analyses. *Circulation* 1999; 99: 2901–7.
- [253] Hippé M, Vestbo J, Hein HO, Borch-Johnsen K, Jensen G, Sørensen TIA. The Copenhagen Centre for Prospective Population Studies. Familial predisposition and susceptibility to the effect of other risk factors for myocardial infarction. *J Epidemiol Com Health*. 1999; 53: 269–76.
- [254] Lange P. Prognosis of adult asthma. *Monaldi archives of Chest Dis* 1999; 54: 350–2.
- [255] Landbo C, Prescott E, Lange P, Vestbo J, Almdahl T. Prognostic value of nutritional status in obstructive pulmonary disease. *Am J Respir Crit Care Med* 1999; 160: 1856–61.
- [256] Prescott E, Grønbæk M, Becker U, Sørensen TIA. Alcohol intake and the risk of lung cancer: influence of type of alcoholic beverage. *Am J Epidemiol* 1999; 149: 463–70.
- [257] Højdrup S, Grønbæk M, Gottschau A, Lauritzen JB, Schroll M. Alcohol intake, beverage preference and risk of hip fracture in men and women. Copenhagen Centre for Prospective Population Studies. *Am J Epidemiol* 1999; 149: 993–1001.
- [258] Mikkelsen KL, Heitmann BL, Keiding N, Sørensen TIA. Independent effects of stable and changing body weight on total mortality. *Epidemiology* 1999; 10: 671–8.
- [259] Dreyer L. Atherosclerosis and cancer risk: Register-based Studies. Copenhagen: Eget forlag, 1999. Ph.D. thesis.
- [260] Petri AL, Grønbæk M, Sandstrøm B, Becker U. Antioxidative status in normal healthy subjects with low and high alcohol intake. *Alcologia* 1999; 10: 92–8.
- [261] Ballegaard S, Johannessen A, Karpatschow B, Nyboe J. Addition of acupuncture and self-care education in the treatment of patients with severe angina pectoris may be cost beneficial: An open, prospective study. *J Altern Compl Med* 1999; 5: 405–13.
- [262] Agerholm-Larsen B, Tybjærg-Hansen A, Schnohr P, Nordestgaard BG. ACE gene polymorphism explains 30–40% of variability in serum ACE activity in both women and men in the population at large. The Copenhagen City Heart Study. *Atherosclerosis* 1999; 147: 425–7.
- [263] Nordestgaard BG, Tybjærg-Hansen A. Susceptibility mutations for ischemic heart disease. *Current Atherosclerosis Reports* 1999; 1: 108–14.
- [264] Højdrup S, Grønbæk M, Pedersen AT, Lauritzen JB, Gottschau A, Schroll M. Hormone replacement therapy and hip fracture risk — the effect modification by tobacco smoking, alcohol intake, physical activity and body mass index. *Am J Epidemiol* 1999; 150: 1085–93.
- [265] Vaage-Nilsen M, Rasmussen V, Sorum C, Jensen G. ST-segment deviation during 24-hour ambulatory electrocardiographic monitoring and exercise stress test in healthy male subjects 51 to 75 years of age: the Copenhagen City Heart Study. *Am Heart J* 1999; 137: 1070–4.
- [266] Jens Christian Toft. Fortolkningsproblemer ved myokardiescintigrafi: Valg af referencepopulation, anvendelse af artificiel neutralt netværk og tolkningsproblemer ved udvalget patientgrupper. Copenhagen: Eget forlag, 2000. Ph.D. thesis.
- [267] Lange P, Parner J, Vestbo J, Schnohr P, Jensen G. Forløb af lungefunktion hos voksne med asthma. Østerbrounder-søgelsen. *Ugeskr Laeger* 2000; 162: 487–90.
- [268] Vestbo J, Sørensen T, Lange P, Brix A, Torre P, Viskum K. Langtidsvirkning af inhaleret budesonid hos patienter med mild og moderat kronisk obstruktiv lungesygdom. Østerbro Lunge Studie. *Ugeskr Laeger* 2000; 162: 493–7.
- [269] Jensen JS. Microalbuminuria and the risk of arterosclerosis. Clinical epidemiological and physiological investigations. *Dan Med Bull* 2000; 47: 63–78. Thesis.
- [270] Agerholm-Larsen B, Nordestgaard BG, Tybjærg-Hansen A. ACE gene polymorphism in cardiovascular disease. Meta-analyses of small and large studies in Whites. *Arterioscler Thromb Vasc Biol* 2000; 20: 484–92.
- [270a] Schieffer B, Drexler H. ACE gene polymorphism and coronary artery disease. A question of persuasion or statistical confusion. *Arterioscler Thromb Vasc Biol* 2000; 20: 281–82. (Editorial).
- [271] Prescott E. Tobacco-related diseases: The role of gender. An epidemiological study based on data from the Copenhagen Centre for Prospective Population Studies. *Dan Med Bull* 2000; 47: 115–31. Thesis.
- [272] Clausen P, Jensen JS, Borch-Johnsen K, Jensen G, Feldt-Rasmussen B. Elevated urinary albumin excretion is not linked to the Angiotensin I-converting enzyme gene polymorphism in clinical healthy subjects. *Scand Cardiovasc J* 2000; 34: 159–63.
- [273] Agerholm-Larsen B, Nordestgaard BG, Steffensen R, Jensen G, Tybjærg-Hansen A. Elevated HDL cholesterol is a risk factor for ischemic heart disease in white women when caused by a common mutation in the cholesteryl ester transfer protein gene. *Circulation* 2000; 101: 1907–12.
- [274] Truelsen T. Trends in stroke incidence in the Copenhagen City Heart Study & the effect of beer, wine and spirit consumption on risk of stroke. Copenhagen: Eget forlag, 2000. Ph.D. thesis.
- [275] Frikke-Schmidt R, Tybjærg-Hansen A, Steffensen R, Jensen G, Nordestgaard BG. Apolipoprotein E genotype: 32 women are protected while 43 and 44 men are susceptible to ischemic heart disease. The Copenhagen City Heart Study. *J Am Coll Cardiol* 2000; 35: 1192–9.
- [276] Clausen P, Jensen JS, Jensen G, Feldt-Rasmussen B. The correlation between blood pressure and endothelial vasoactive substances is changed in subjects with elevated urinary albumin excretion. *Scand J Clin Lab Invest* 2000; 60: 133–40.
- [277] Andersen LB, Schnohr P, Schroll M, Hein HO. All-cause mortality associated with physical activity during leisure time, work, sports, and cycling to work. *Arch Intern Med* 2000; 160: 1621–8.
- [278] Grønbæk M. Wine and Mortality. Evidence for causal inference? *Dan Med Bull*. In press. 2000; Thesis.
- [279] Schnohr P, Parner J, Lange P. Mortality in joggers — Population based study of 4658 men. *BMJ* 2000; 321: 602–3.
- [280] Hansen EF, Rappeport Y, Vestbo J, Lange P. Increase in prevalence and severity of asthma in young adults. *Thorax* 2000; 55: 833–6.
- [281] Grønbæk M, Becker U, Johansen D et al. Type of alcohol consumed and mortality from all causes, coronary heart disease, and cancer. *Ann Intern Med* 2000; 133: 411–9.
- [282] Thomsen T. Prediction and prevention of cardiovascular diseases. *Precard®* Copenhagen: Eget forlag 2000. Ph.D. thesis.
- [283] Schnohr P. Østerbrounder-søgelsen — snart 25 år. Kommentar. *Ugeskr Laeger* 2000; 162: 5788–9.
- [283a] Sørensen TIA En dansk forskningssucces. *Ugeskr Laeger* 2000; 162: 5752.
- [284] Andersen AT. Alkoholforbruget 1976–1992. Copenhagen: Eget forlag 2000; Ph.D. thesis.
- [285] Agerholm-Larsen B, Tybjærg-Hansen A, Schnohr P, Steffensen R, Jensen G, Nordestgaard BG. Common cholesteryl ester transfer protein mutations, decreased HDL cholesterol, and possible decreased risk of ischemic heart disease. The Copenhagen City Heart Study. *Circulation* 2000; 102: 2197–203.

- [286] Højdrup S, Prescott E, Sørensen TIA *et al.* and the Copenhagen Center for prospective Population Studies. Tobacco smoking and risk of hip fracture in men and women. *Int J Epidemiol* 2000; 29: 253–9.
- [287] Wittrup HH, Nordestgaard BG, Sillesen H, Schnohr P, Tybjærg-Hansen A. A common mutation in lipoprotein lipase confers a 2-fold increase in risk of ischemic cerebrovascular disease in women, but not in men. *Circulation* 2000; 101: 2393–7.
- [288] Hoyer AP, Jørgensen T, Brock JW, Grandjean P. Organochlorine exposure and breast cancer survival. *J Clin Epidemiol* 2000; 53: 323–30.
- [289] Hoyer AP, Grandjean P, Jørgensen T, Brock JW, Hartvig HB. Organochlorine compounds and breast cancer—is there a connection between environmental pollution and breast cancer? *Ugeskr Laeger* 2000; 162: 922–6.
- [290] Hoyer AP, Jørgensen T, Grandjean P, Hartvig HB. Repeated measurements of organochlorine exposure and breast cancer risk. *Cancer Causes Control* 2000; 11: 177–84.
- [291] Clausen P. Elevated urinary albumin excretion. Association with risk of myocardial infarction in the third Copenhagen City Heart Study and studies of possible pathogenetic mechanisms in clinical healthy subjects. Copenhagen: Eget forlag, 2000. Ph.D. thesis.
- [292] Holstein P, Ellitsgaard N, Bornefeldt Olsen N, Ellitsgaard V. Decreasing incidence of major amputations in people with diabetes. *Diabetologia* 2000; 43: 844–7.
- [293] Frikke-Schmidt R, Nordestgaard BG, Agerholm-Larsen B, Schnohr P, Tybjærg-Hansen A. Context-dependent and invariant associations between lipids, lipoproteins, and apolipoproteins and apolipoprotein E genotype. *J Lipid Res* 2000; 41: 1812–22.
- [294] Frikke-Schmidt R, Wittrup HH, Tybjærg-Hansen A, Meieritz H, Schnohr P, Nordestgaard BG. Apolipoprotein E genotypes predict attendance rates at lipid clinic. *Atherosclerosis* 2000; 153: 461–8.
- [295] Dahl M, Nordestgaard BG, Lange P, Vestbo J, Tybjærg-Hansen A. Molecular diagnosis of intermediate and severe α_1 -antitrypsin deficiency: *MZ* individuals with chronic obstructive pulmonary disease may have lower lung function than *MM* individuals. *Clin Chem* 2001; 47: 56–62.
- [296] Bjerrum KB. Primary Sjögren's syndrome and keratoconjunctivitis sicca: Diagnostic methods, frequency and social disease aspects. *Acta Ophthalmol* 2000; 78 suppl 231: Thesis. (02.02.01).
- [298] Nyman P. Obstruktiv sovnnapnø syndrom hos 30–69 årige deltagere I tradie Øosterbroudersøgelse. Prævalens og prediktive faktorer. Ph.D. Thesis. (05.02.01).
- [297] Andersen LB, Jørgensen T, Bonnevie O, Grønbæk M, Sørensen TIA. Smoking and alcohol intake as risk factors for bleeding and perforated peptic ulcers. *Epidemiology*; in press.
- [299] Frikke-Schmidt R, Nordestgaard BG, Thudium D, Grønholdt MLM, Tybjærg-Hansen A. Apolipoprotein E genotype predicts Alzheimer's Disease and other dementia, but not ischemic cerebrovascular disease. *Neurology* 2001; 56: 194–200.
- [300] Sethi AA, Nordestgaard BG, Agerholm-Larsen B, Frandsen E, Jensen G, Tybjærg-Hansen A. Angiotensinogen mutations and elevated blood pressure in the general population. Large scale examination of 4900 cases and 4200 controls from the Copenhagen City Heart Study. *Hypertension* 2001; 37: 875–81.
- [301] Clausen P, Jensen JS, Jensen G, Borch-Johnsen K, Feldt-Rasmussen B. Elevated urinary albumin excretion is associated with impaired conduit arterial dilatory capacity in clinically healthy subjects. *Circulation* 2001; 103: 1869–74.
- [302] Truelsen T, Prescott E, Lange P, Schnohr P, Boysen G. Lung function and risk of fatal and nonfatal stroke. *Int J Epidemiol* 2001; 30: 145–51.
- [303] Sethi AA, Tybjærg-Hansen A, Grønholdt MLM, Steffensen R, Schnohr P, Nordestgaard BG. Angiotensinogen mutations and risk of ischemic heart disease, myocardial infarction and ischemic cerebrovascular disease. Six case-control studies based on the Copenhagen City Heart Study. *Ann Intern Med* 2001; 154: 941–54.
- [304] Buch H, Nielsen NV, Vinding T. The prevalence and causes of bilateral and unilateral blindness in an elderly urban Danish population. The Copenhagen City Eye Study. *Acta Ophthalmol Scand* 2001; in press.
- [305] Buch H, Nielsen NV, Vinding T. The prevalence and causes of visual impairment in an aged urban Scandinavian population. The Copenhagen City Eye Study. *Ophthalmol* 2001; in press.
- [306] Ellervik C, Mandrup-Poulsen T, Nordestgaard BG, Larsen LE, Appleyard M, Frandsen M, Petersen P, Schlichting P, Saermark T, Tybjærg-Hansen A, Birgens H. Hereditary hemochromatosis in late-onset Type 1 diabetes mellitus. *Lancet* 2001; in press.
- [307] Larsen CT, Dahlin J, Blackburn H, Scharling H, Appleyard M, Sigurd B, Schnohr P. Prevalence and prognosis of electrocardiographic left ventricular hypertrophy, ST segment depression and negative T-wave. The Copenhagen City Heart Study. *Eur Heart Study* 2001; in press.

Table 1 Population/attendance

Sex and age	Population in study area January 1976 <i>N</i>	Random sample selected <i>N</i>	Alive at time of invitation <i>N</i>	Attendees at examination <i>N</i>	Response rate %	Actual age at examination <i>N</i>
Females						
20–24	5468	250	194	126	64·9	64
25–29	4659	250	283	184	65·0	200
30–34	3259	500	449	285	63·5	253
35–39	2039	500	500	331	66·2	308
40–44	2159	500	496	313	63·1	337
45–49	2672	500	488	328	67·2	325
50–54	3415	1000	852	576	67·6	491
55–59	3949	1000	888	589	66·3	578
60–64	4513	1336	1068	678	63·5	640
65–69	4665	1707	1317	822	62·4	797
70–74	4442	1972	1386	828	59·7	830
75–79	3714	1002	725	378	52·1	536
80–	4179	1550	591	260	44·0	339
Females	49 128	12 067	9237	5698	61·7	5698
Males						
20–24	4801	250	201	116	57·7	75
25–29	5338	250	266	161	60·5	151
30–34	3511	500	456	274	60·1	233
35–39	2252	500	496	280	56·5	284
40–44	2144	500	476	281	59·0	270
45–49	2328	500	497	311	62·6	336
50–54	2797	1000	851	545	64·0	463
55–59	3039	1000	783	497	63·5	486
60–64	3173	1164	850	516	60·7	529
65–69	3060	1398	873	550	63·0	525
70–74	2265	1519	800	471	58·9	529
75–79	1706	1000	456	258	56·6	334
80–	1630	1550	321	177	55·1	222
Males	38 044	11 131	7326	4437	60·6	4437
F+M	87 172	23 198	16 563	10 135	61·2	10 135

Table 2 Ischaemic heart disease and symptoms

Sex and age	Chest pain ever %	Chest pain on effort %	Angina pectoris questionnaire-pos %	Chest pain more than $\frac{1}{2}$ an hour %	Previous myocardial infarction %
Females					
20–24	38·1	3·2	0·0	1·6	0·0
25–29	34·2	1·5	0·0	2·5	0·0
30–34	31·5	1·6	1·6	2·4	0·0
35–39	34·1	3·9	3·0	3·9	0·0
40–44	38·0	3·6	2·1	5·7	0·6
45–49	33·6	5·9	2·2	5·9	0·9
50–54	34·4	7·4	5·3	6·1	1·0
55–59	32·2	8·3	5·7	6·9	1·9
60–64	31·9	8·9	6·8	6·4	3·1
65–69	30·6	9·7	6·5	5·3	2·8
70–74	32·4	12·0	8·0	7·9	5·0
75–79	33·1	14·7	9·1	6·9	3·4
80–	31·1	13·5	7·1	7·5	6·3
Males					
20–24	45·3	0·0	0·0	8·0	0·0
25–29	38·3	3·3	2·0	3·4	0·0
30–34	40·5	2·6	0·4	6·0	0·0
35–39	38·4	3·5	1·8	6·3	0·0
40–44	46·2	7·1	4·5	7·9	1·9
45–49	42·5	6·3	2·7	6·3	1·5
50–54	38·3	8·0	5·0	8·4	1·3
55–59	40·6	8·5	4·4	10·3	5·6
60–64	41·0	10·6	5·7	8·5	8·9
65–69	39·4	11·9	9·1	8·8	9·2
70–74	34·6	11·8	8·1	7·4	11·1
75–79	33·6	15·8	11·4	7·6	9·1
80–	36·5	17·3	9·8	8·1	12·7
Number answered	10 076	10 086	10 001	10 088	10 082

Table 3 Stroke

Sex and age	Have ever had stroke %	Have you during the last 10 years had:		
		Paresis, loss of strength/steering %	Blindness, loss of vision %	Speech disorders, difficulty in finding/pronouncing words %
Females				
20–24	0·0	1·6	3·2	3·2
25–29	0·0	1·0	1·5	1·0
30–34	0·0	3·2	2·4	2·4
35–39	0·3	5·0	2·3	2·6
40–44	0·9	1·8	2·7	4·2
45–49	1·2	3·7	2·8	3·1
50–54	1·6	4·7	3·1	3·9
55–59	1·2	4·2	3·0	4·0
60–64	2·7	3·1	2·3	2·0
65–69	3·0	5·7	3·4	3·7
70–74	5·6	5·9	5·3	4·1
75–79	4·9	5·1	7·1	4·3
80–	6·3	7·3	5·1	6·6
Males				
20–24	0·0	2·7	2·7	5·3
25–29	0·7	2·0	1·3	0·7
30–34	0·9	0·9	0·9	2·2
35–39	1·1	2·5	1·1	1·4
40–44	0·8	3·0	0·8	1·5
45–49	1·2	3·0	2·1	2·7
50–54	1·3	4·8	2·4	3·9
55–59	2·7	5·2	4·5	2·1
60–64	4·8	7·2	7·6	5·5
65–69	8·2	8·3	6·7	5·6
70–74	6·1	5·5	5·4	5·3
75–79	7·6	7·3	2·1	4·6
80–	6·9	7·3	6·9	5·9
Number answered	10 062	10 056	10 051	10 056

Table 4 Family history of myocardial infarction (MI) and stroke

Sex and age	Mother: Previous		Father: Previous	
	MI %	Stroke %	MI %	Stroke %
Females				
20–24	0·0	1·6	5·1	1·7
25–29	1·5	1·0	6·5	3·2
30–34	4·1	3·7	11·0	6·9
35–39	3·1	2·8	18·4	7·9
40–44	5·4	7·4	22·3	9·7
45–49	10·4	12·3	19·7	11·6
50–54	13·5	13·7	20·6	14·4
55–59	13·3	16·6	24·4	15·2
60–64	15·4	16·8	21·9	13·1
65–69	13·5	18·4	16·1	14·4
70–74	7·6	14·5	18·5	13·6
75–79	9·4	14·3	13·8	11·6
80–	6·9	16·8	12·1	10·4
Males				
20–24	1·4	1·4	2·9	4·3
25–29	0·7	0·7	5·0	3·6
30–34	2·8	1·4	13·8	4·3
35–39	4·0	1·8	17·1	6·2
40–44	5·0	5·4	19·2	11·3
45–49	4·2	12·2	24·2	10·6
50–54	9·6	13·6	23·1	15·0
55–59	8·3	12·1	22·3	15·5
60–64	10·4	16·3	18·3	14·6
65–69	10·0	15·0	15·9	10·8
70–74	7·6	14·4	15·9	15·9
75–79	3·9	12·7	13·9	8·7
80–	5·5	10·7	10·5	11·1
Number answered	8522	8702	7810	7937

Table 5 Dyspnoea

Sex and age	When walking:			Wake up at night because of dyspnoea %	When getting dressed or washing %	Often bothered by dyspnoea %
	uphill or hurrying %	with somebody your age %	at your own pace %			
Females						
20–24	22·2	1·6	0·0	3·2	0·0	1·6
25–29	28·6	2·0	1·0	6·0	0·0	3·5
30–34	26·8	2·8	1·2	4·8	1·2	3·6
35–39	39·6	4·0	3·3	5·0	1·3	6·0
40–44	38·1	4·5	3·9	3·9	3·0	7·5
45–49	46·0	7·4	3·4	6·5	2·5	6·5
50–54	49·7	11·7	6·3	8·2	5·3	10·0
55–59	49·3	12·3	8·3	7·8	8·0	12·7
60–64	48·9	13·5	8·1	7·8	8·6	11·9
65–69	49·9	15·2	11·3	6·7	7·3	11·2
70–74	50·2	18·5	14·2	6·6	9·4	12·9
75–79	55·3	24·1	20·5	6·3	11·9	17·7
80–	53·1	24·4	20·4	4·5	10·3	12·8
Males						
20–24	12·0	0·0	0·0	5·3	0·0	1·3
25–29	12·2	0·0	0·0	4·7	0·7	3·4
30–34	14·5	2·2	0·0	4·8	1·3	2·6
35–39	19·0	2·5	1·8	5·0	1·1	3·5
40–44	26·5	3·8	2·6	6·8	2·6	4·9
45–49	33·2	4·2	2·1	5·4	2·7	4·5
50–54	34·7	6·3	3·7	5·2	5·0	6·7
55–59	41·4	9·1	6·8	8·2	8·2	9·7
60–64	41·7	13·5	11·2	8·3	10·4	11·8
65–69	48·3	15·8	10·7	7·3	11·3	13·6
70–74	43·8	15·9	13·0	6·0	8·0	11·6
75–79	46·3	19·1	16·7	8·6	15·5	16·7
80–	52·1	24·3	21·4	4·3	12·7	13·2
Number answered	10 034	10 029	10 046	9790	10 054	10 054

Table 6 Cough and bronchitis

Sex and age	Cough on exertion %	Cough at night %	Morning cough %	Cough during the day %	Cough 3 months a year %
Females					
20–24	9.5	12.7	9.5	4.8	27.0
25–29	16.1	17.6	10.1	4.0	27.8
30–34	11.6	17.6	13.2	7.2	22.8
35–39	17.2	22.2	15.2	10.9	29.0
40–44	16.2	21.3	17.4	9.0	27.6
45–49	16.4	21.9	17.3	10.5	24.4
50–54	16.0	27.0	20.9	10.2	29.4
55–59	16.8	26.0	22.9	14.6	29.7
60–64	15.0	26.1	23.3	16.1	30.8
65–69	14.3	23.4	22.0	13.5	27.7
70–74	14.9	22.2	24.4	15.4	22.7
75–79	14.2	16.6	20.5	11.7	25.4
80–	12.1	16.0	23.6	13.7	19.7
Males					
20–24	13.3	9.3	14.7	6.7	22.7
25–29	16.2	10.1	12.8	6.1	27.0
30–34	15.8	13.6	20.6	13.6	24.1
35–39	20.1	19.4	21.2	13.4	23.3
40–44	17.4	19.6	18.1	9.8	27.9
45–49	17.4	21.6	20.7	12.9	27.9
50–54	19.9	24.7	24.0	14.5	28.9
55–59	20.0	23.9	26.3	17.1	28.4
60–64	20.5	29.1	31.4	19.0	32.1
65–69	16.1	24.5	29.5	19.5	32.4
70–74	14.8	20.6	27.4	19.6	25.7
75–79	17.8	19.2	32.1	18.2	29.1
80–	15.0	16.6	35.2	22.8	27.4
Number answered	9790	9788	10 052	10 044	9784

Table 7 Asthma and allergy

Sex and age	Asthma, hayfever or eczema as a child %	Self-reported asthma %	Does food, medicine, grass, animals etc. give you		
			asthma %	hayfever %	eczema %
Females					
20–24	29·0	4·8	6·5	21·0	24·2
25–29	23·2	6·0	5·6	20·8	13·7
30–34	18·0	3·6	5·7	18·2	17·4
35–39	10·6	5·0	5·7	13·8	19·2
40–44	14·8	4·2	4·0	17·9	16·4
45–49	10·2	4·3	5·0	18·5	14·6
50–54	10·7	6·1	8·5	15·9	17·4
55–59	9·4	8·0	7·5	11·7	11·7
60–64	8·6	7·2	3·8	10·4	12·1
65–69	8·2	6·9	4·3	10·2	9·8
70–74	6·6	8·5	4·7	8·3	9·5
75–79	5·9	7·3	4·0	9·5	8·0
80–	4·6	5·4	3·7	6·4	8·6
Males					
20–24	16·0	4·0	5·4	13·5	6·8
25–29	18·4	4·7	4·1	21·1	4·8
30–34	17·0	4·8	5·7	21·8	10·1
35–39	13·1	6·0	6·8	18·8	9·6
40–44	11·7	3·4	3·4	14·1	5·0
45–49	12·0	3·3	3·0	9·4	5·8
50–54	10·0	4·1	4·2	10·0	7·7
55–59	5·8	6·6	5·0	8·8	6·5
60–64	5·7	6·5	3·8	7·5	6·5
65–69	5·5	9·6	4·6	6·2	5·0
70–74	5·0	6·5	2·3	6·9	4·6
75–79	5·5	7·3	2·7	3·6	4·6
80–	4·3	6·4	1·4	4·1	5·0
Number answered	9768	10 059	9986	9991	9981

Table 8 Snoring

Sex and age	Seldom/never %	Sometimes %	Often/always %	Don't know %
Females				
20–24	73·0	19·0	3·2	4·8
25–29	64·6	24·7	6·1	4·5
30–34	51·2	34·0	7·2	7·6
35–39	43·4	42·4	7·6	6·6
40–44	37·2	45·3	9·7	7·9
45–49	36·7	43·5	13·0	6·8
50–54	26·0	48·3	14·7	11·0
55–59	19·3	47·0	19·3	14·4
60–64	19·6	48·5	12·2	19·6
65–69	23·3	42·5	11·1	23·0
70–74	23·3	38·0	9·2	29·6
75–79	24·3	29·0	10·4	36·4
80–	29·2	24·6	9·2	36·9
Males				
20–24	58·7	22·7	1·3	17·3
25–29	44·6	35·1	8·8	11·5
30–34	37·1	41·5	16·6	4·8
35–39	33·6	42·0	21·9	2·5
40–44	20·1	46·6	27·7	5·7
45–49	18·4	42·0	31·4	8·2
50–54	18·7	46·4	26·2	8·7
55–59	14·0	45·9	32·0	8·1
60–64	16·9	47·0	26·2	9·9
65–69	18·2	49·0	20·6	12·3
70–74	19·4	48·8	17·4	14·4
75–79	29·1	42·4	15·2	13·3
80–	30·6	33·3	10·8	25·3
Number answered	9753			

Table 9 Sleep apnoea

Sex and age	Seldom/never %	Sometimes %	Often/always %	Don't know %
Females				
20–24	71·4	0·0	0·0	28·6
25–29	72·4	5·0	0·5	22·1
30–34	66·4	4·0	0·8	28·8
35–39	66·6	5·3	0·3	27·8
40–44	66·2	3·3	0·9	29·6
45–49	59·0	4·0	0·3	36·7
50–54	53·6	6·1	0·6	39·7
55–59	50·7	5·4	0·9	43·0
60–64	44·1	6·0	0·8	49·1
65–69	48·5	3·3	0·4	47·8
70–74	42·4	3·3	0·6	53·6
75–79	37·4	3·8	0·6	58·2
80–	43·9	2·3	0·0	53·8
Males				
20–24	61·3	4·0	0·0	34·7
25–29	59·7	4·0	2·0	34·2
30–34	64·6	8·3	0·9	26·2
35–39	59·0	8·5	3·5	29·0
40–44	57·2	14·8	2·3	25·8
45–49	52·3	12·1	2·7	32·9
50–54	54·4	12·6	2·6	30·4
55–59	49·6	14·0	2·5	33·9
60–64	48·8	14·1	3·0	34·1
65–69	50·4	13·2	1·8	34·6
70–74	54·6	12·4	1·0	31·9
75–79	58·4	8·8	1·3	31·5
80–	51·1	6·5	0·0	42·5
Number answered	9747			

Table 10 Pulmonary problems

Sex and age	Pneumothorax %	Often bronchitis as a child %	Serious acute bronchitis/pneumonia within the last 10 years %	Being exposed to dust/welding smoke %
Females				
20-24	0.0	9.5	14.8	6.3
25-29	2.0	8.0	14.1	6.5
30-34	1.2	7.6	17.7	5.2
35-39	0.3	9.6	26.8	8.3
40-44	0.6	8.5	30.5	5.7
45-49	0.6	10.5	23.5	10.8
50-54	0.6	9.9	25.5	15.7
55-59	0.7	10.6	27.1	15.6
60-64	2.4	8.5	31.1	16.0
65-69	1.0	8.4	27.1	10.0
70-74	1.7	7.0	25.9	10.2
75-79	1.7	5.9	20.2	7.5
80-	1.5	4.9	23.5	9.1
Males				
20-24	1.3	6.7	14.7	12.0
25-29	0.7	6.8	15.0	14.2
30-34	0.4	6.6	14.5	24.1
35-39	1.4	7.1	17.3	20.1
40-44	3.4	6.8	15.9	28.1
45-49	2.1	6.7	14.3	26.6
50-54	1.9	6.1	17.4	26.9
55-59	2.5	6.4	16.7	34.8
60-64	2.1	6.9	22.6	36.1
65-69	4.1	7.5	23.5	33.4
70-74	2.0	5.2	20.3	29.0
75-79	1.6	8.1	18.6	26.7
80-	2.7	4.3	14.4	20.3
Number answered	9776	9746	9714	9772

Table 11 Vision, epilepsy and febrile convulsions

Sex and age	Use glasses or contact lenses %	Able to read newspaper types %	Have or have had epilepsy %	Febrile convulsions as a child %
Females				
20–24	46·0	95·2	1·6	1·6
25–29	48·7	95·0	2·0	2·5
30–34	38·6	91·6	2·0	3·6
35–39	46·2	92·7	1·0	3·0
40–44	50·6	94·9	1·8	2·7
45–49	75·3	96·3	0·9	0·6
50–54	90·0	97·8	2·7	0·8
55–59	92·9	97·4	2·1	1·7
60–64	94·4	98·4	2·7	1·7
65–69	94·2	97·5	2·7	1·1
70–74	94·9	95·8	1·6	1·0
75–79	93·6	96·0	2·1	1·3
80–	94·4	92·5	0·4	0·8
Males				
20–24	33·3	94·7	0·0	0·0
25–29	38·7	92·6	1·4	3·4
30–34	39·1	93·4	2·6	1·3
35–39	37·7	94·4	2·5	2·8
40–44	42·6	92·4	1·9	3·1
45–49	69·8	97·3	2·1	1·2
50–54	80·7	97·4	3·5	1·8
55–59	86·6	97·5	2·7	1·0
60–64	89·3	97·0	3·2	1·5
65–69	90·6	96·3	3·7	0·6
70–74	90·6	98·2	1·4	0·6
75–79	91·3	97·8	1·6	1·0
80–	91·5	93·6	2·7	1·6
Number answered	9799	9795	9778	9725

Table 12 Arthritis, arthrosis, muscles and joints

Sex and age	Rheumatoid arthritis, osteo-arthrosis %	Have you during the last year had:			
		lower back pain %	pain in the buttocks %	pain in the hips %	pain in the groin %
Females					
20-24	1.6	36.5	9.5	6.3	0.0
25-29	1.0	43.2	7.5	12.1	4.5
30-34	6.4	46.4	14.4	12.8	5.2
35-39	5.9	47.5	14.2	13.5	7.0
40-44	13.4	48.0	20.7	22.8	13.8
45-49	17.0	47.1	22.0	21.0	12.0
50-54	34.3	55.4	26.7	28.5	12.7
55-59	40.0	54.4	28.7	29.6	13.7
60-64	42.1	51.2	24.5	28.6	14.2
65-69	47.8	50.3	23.3	26.5	11.0
70-74	46.8	48.0	20.8	26.0	14.0
75-79	55.1	50.2	20.6	29.1	9.5
80-	53.4	51.3	21.0	28.7	13.4
Males					
20-24	0.0	25.3	10.7	1.3	8.0
25-29	0.7	21.6	0.7	4.7	6.8
30-34	4.8	27.2	7.0	10.5	5.3
35-39	7.4	33.0	5.7	7.1	7.1
40-44	10.2	32.4	11.8	8.0	8.7
45-49	14.5	34.4	13.9	12.4	7.9
50-54	21.5	41.7	15.0	17.4	10.7
55-59	23.7	41.2	13.4	16.1	10.9
60-64	29.3	41.3	13.1	18.1	9.7
65-69	26.6	42.0	15.7	20.5	10.4
70-74	31.7	38.1	10.6	18.6	10.4
75-79	25.4	32.7	11.6	19.2	9.3
80-	28.5	31.0	11.8	18.7	8.0
Number answered	9755	9766	9757	9763	9759

Table 13 Muscles and joints I

Sex and age	Have you during the last year had:				
	pain in one or both thighs %	pain in one or both knees %	pain in one or both calves %	pain radiating into one or both legs %	pain in legs accompanied by sensibility change %
Females					
20–24	6·5	31·7	4·8	6·3	1·6
25–29	5·5	26·6	4·0	8·0	1·0
30–34	6·8	24·8	7·6	10·4	3·6
35–39	11·3	30·1	12·9	17·5	5·6
40–44	18·6	35·1	17·1	23·4	8·1
45–49	16·0	34·6	14·2	21·4	9·0
50–54	25·4	38·5	22·4	29·1	10·7
55–59	27·0	46·3	28·6	30·3	12·0
60–64	26·4	39·3	23·2	29·9	10·4
65–69	25·7	39·0	21·2	26·1	11·3
70–74	26·6	37·7	22·0	24·3	9·2
75–79	28·0	39·9	23·0	23·9	8·9
80–	24·9	42·4	27·6	25·2	12·0
Males					
20–24	1·3	21·3	4·0	1·3	0·0
25–29	3·4	22·3	2·0	4·1	0·7
30–34	6·6	25·4	6·2	9·2	4·8
35–39	6·7	23·0	9·9	10·3	5·0
40–44	10·6	29·3	14·4	15·6	6·5
45–49	12·1	23·6	10·9	13·0	6·6
50–54	16·8	30·9	18·3	21·4	11·6
55–59	13·6	31·5	16·1	17·9	10·1
60–64	16·9	30·2	20·7	20·0	10·6
65–69	17·5	27·2	20·1	19·1	8·9
70–74	15·2	28·9	17·4	15·8	7·8
75–79	12·5	26·4	18·4	14·8	7·7
80–	16·6	22·5	25·7	19·8	9·1
Number answered	9757	9762	9755	9753	9746

Table 14 Muscles and joints II

Sex and age	Have you during the last year had:				
	prickling, stabbing pains in one or both legs %	deep, throbbing pain in one or both legs %	oppressive cramp-like pains in one or both legs %	heavy feeling in one or both legs %	warm or swollen knee %
Females					
20-24	3.2	3.2	1.6	0.0	4.8
25-29	5.0	3.0	6.0	5.5	5.5
30-34	6.4	5.6	6.8	5.6	4.4
35-39	13.3	8.6	8.0	9.9	6.3
40-44	13.8	13.5	12.3	16.0	8.7
45-49	17.0	14.8	12.7	14.2	9.9
50-54	21.7	20.1	18.9	18.1	15.4
55-59	21.7	22.3	22.4	18.8	17.0
60-64	21.5	17.7	22.6	16.8	11.3
65-69	19.1	18.2	19.9	18.1	15.1
70-74	20.4	18.6	24.0	19.4	14.5
75-79	17.8	16.0	22.2	17.6	14.8
80-	25.3	20.8	25.2	21.1	19.5
Males					
20-24	1.3	0.0	0.0	0.0	2.7
25-29	6.8	2.0	2.7	1.4	2.7
30-34	6.6	2.6	4.4	4.4	4.8
35-39	10.6	3.2	5.7	3.5	6.0
40-44	12.5	8.7	7.2	4.2	6.1
45-49	18.4	8.5	8.5	8.2	6.7
50-54	19.8	14.0	10.7	8.1	8.5
55-59	16.5	12.2	14.0	7.4	10.5
60-64	21.7	16.5	19.4	10.7	10.3
65-69	17.3	10.6	14.4	8.9	6.7
70-74	15.6	10.8	18.6	9.6	5.4
75-79	14.6	8.4	12.3	7.8	7.7
80-	16.7	14.0	21.5	17.2	5.4
Number answered	9754	9751	9752	9742	9751

Table 15 Muscles and joints III

Sex and age	Have you during the last year had:		Do you get pain in one or both legs	
	pain in legs, hips or back, when getting out of bed in the morning %	pain in legs, hips or back at rest %	when you start to walk %	when you have walked a while %
Females				
20–24	19·0	19·0	0·0	7·9
25–29	20·1	15·6	2·6	4·1
30–34	26·0	21·2	2·4	6·0
35–39	35·8	27·9	5·7	7·7
40–44	35·2	29·8	8·7	13·0
45–49	36·4	27·8	6·8	12·1
50–54	45·6	34·5	14·4	19·7
55–59	45·1	35·3	11·6	18·7
60–64	38·8	33·3	9·3	18·5
65–69	37·6	28·7	14·8	21·3
70–74	37·3	26·4	15·9	20·8
75–79	37·7	26·8	18·5	24·1
80–	38·3	22·4	22·3	27·8
Males				
20–24	13·3	12·0	1·3	0·0
25–29	16·2	14·2	2·1	2·1
30–34	28·5	23·2	1·8	4·9
35–39	25·4	19·6	3·2	4·6
40–44	29·5	18·8	3·9	7·3
45–49	33·5	24·8	4·6	6·7
50–54	35·5	24·2	6·8	12·3
55–59	32·2	24·4	9·1	13·5
60–64	32·3	22·5	11·7	21·9
65–69	30·7	20·3	9·3	19·4
70–74	25·9	18·0	13·1	23·6
75–79	25·1	16·8	12·9	19·7
80–	28·3	17·1	20·2	24·0
Number answered	9756	9733	9945	9937

Table 16 Muscles and joints IV

Sex and age	Pain in legs, hips or back during the night %	Wake up at night because of pain in legs, hips or back %	Walk with a limp %	Take shorter steps than usual %	Difficulty climbing stairs %	Difficulty sitting %
Females						
20-24	6.3	6.3	1.6	0.0	4.8	1.6
25-29	9.5	5.5	0.5	0.5	2.5	3.5
30-34	14.5	12.8	1.6	2.8	4.0	8.0
35-39	17.9	13.6	4.7	4.7	8.0	5.0
40-44	23.5	17.2	5.4	9.0	10.8	9.3
45-49	21.1	18.9	6.2	5.9	16.4	10.8
50-54	33.7	29.0	7.4	15.1	22.5	19.0
55-59	35.3	30.5	6.3	17.2	26.9	14.5
60-64	29.5	26.6	6.6	22.7	28.6	13.5
65-69	27.2	23.4	7.6	26.2	28.7	11.9
70-74	25.9	22.5	9.3	29.1	35.4	13.5
75-79	25.4	19.2	8.9	38.9	42.5	12.2
80-	26.3	22.4	17.3	52.1	50.8	9.3
Males						
20-24	1.3	1.3	1.3	0.0	1.3	2.7
25-29	8.1	4.1	1.4	0.7	1.4	2.7
30-34	9.6	6.1	2.2	0.9	2.6	4.4
35-39	12.7	7.8	3.9	3.5	3.2	3.2
40-44	13.3	7.2	5.7	4.2	7.2	4.2
45-49	17.3	14.6	4.8	5.4	7.6	7.0
50-54	16.9	12.9	7.4	10.5	11.5	6.5
55-59	19.6	16.5	10.1	13.8	16.1	6.6
60-64	20.0	16.0	9.5	21.2	23.8	7.4
65-69	18.2	14.4	8.9	28.3	26.5	5.7
70-74	16.9	13.9	7.4	28.6	31.3	5.0
75-79	16.8	11.7	8.4	37.9	33.3	7.7
80-	16.1	15.5	9.1	54.5	41.2	4.8
Number answered	9721	9725	9738	9731	9748	9746

Table 17 Muscles and joints V

Sex and age	Easier to walk backwards down the stairs %	Can tie shoelaces %	Use walking-stick or crutches %	Bothered at work by tenderness or pain in the feet %	Unable to be physically active because of tenderness or pain in the feet %
Females					
20–24	0·0	88·9	0·0	11·1	3·2
25–29	1·0	92·5	0·5	13·6	3·5
30–34	1·2	94·0	0·4	12·0	5·6
35–39	0·3	96·7	1·0	14·0	8·0
40–44	2·1	95·5	1·5	13·8	7·9
45–49	2·2	95·4	1·5	13·0	9·3
50–54	2·9	94·9	1·8	23·2	18·3
55–59	4·5	95·1	2·3	21·3	19·0
60–64	4·9	94·8	3·1	16·0	15·1
65–69	6·2	93·8	4·5	16·8	17·6
70–74	7·7	94·3	7·1	16·5	19·2
75–79	9·4	94·1	14·0	15·6	18·6
80–	9·8	91·1	32·3	19·1	24·1
Males					
20–24	0·0	92·0	0·0	2·7	2·7
25–29	0·0	95·3	0·0	5·4	2·7
30–34	2·2	93·0	0·4	10·6	6·2
35–39	1·1	93·3	0·0	12·4	6·4
40–44	2·3	94·3	0·8	9·1	7·3
45–49	0·0	96·7	0·3	11·5	10·6
50–54	1·8	93·5	2·0	13·1	10·9
55–59	2·3	94·8	3·3	8·9	8·7
60–64	4·4	94·7	3·8	11·5	12·8
65–69	3·6	93·5	7·1	9·1	13·0
70–74	3·4	93·2	8·8	10·2	13·9
75–79	6·1	94·6	10·6	7·5	13·5
80–	6·5	92·0	25·7	10·2	20·4
Number answered	9709	9755	9756	9733	9734

Table 18 Diabetes and treatment for diabetes

Sex and age	Self-reported diabetes %	Type of treatment:			
		insulin %	tablets %	diet only %	no treatment %
Females					
20–24	0·0	—	—	—	—
25–29	0·0	—	—	—	—
30–34	1·2	100·0	0·0	0·0	0·0
35–39	0·3	0·0	100·0	0·0	0·0
40–44	1·2	50·0	25·0	25·0	0·0
45–49	1·2	25·0	25·0	50·0	0·0
50–54	1·6	25·0	37·5	12·5	25·0
55–59	2·3	15·4	38·5	15·4	30·8
60–64	3·3	4·8	61·9	14·3	19·0
65–69	2·6	19·0	42·9	23·8	14·3
70–74	4·2	5·7	65·7	5·7	22·9
75–79	4·2	22·7	40·9	4·5	31·8
80–	3·6	0·0	66·7	16·7	16·7
Males					
20–24	1·3	100·0	0·0	0·0	0·0
25–29	0·0	—	—	—	—
30–34	0·4	100·0	0·0	0·0	0·0
35–39	0·4	0·0	100·0	0·0	0·0
40–44	1·5	25·0	50·0	25·0	0·0
45–49	1·5	20·0	60·0	20·0	0·0
50–54	3·5	25·0	50·0	6·3	18·8
55–59	6·8	12·1	54·5	15·2	18·2
60–64	6·4	23·5	41·2	20·6	14·7
65–69	6·1	18·8	43·8	18·8	18·8
70–74	8·7	4·3	54·3	15·2	26·1
75–79	7·6	12·0	40·0	16·0	32·0
80–	5·0	0·0	63·6	9·1	27·3
Number answered	10 064	353			

Table 19 Other diseases

Sex and age	Have or have had:					
	liver disease %	jaundice %	cystitis %	kidney disease %	elevated metabolism %	decreased metabolism %
Females						
20–24	0·0	0·0	38·1	4·9	0·0	1·6
25–29	0·5	6·1	48·5	6·6	1·5	0·0
30–34	3·6	5·2	54·4	5·2	1·6	0·8
35–39	3·3	4·0	52·5	5·9	1·3	2·0
40–44	3·3	5·4	48·2	6·1	0·9	3·0
45–49	2·2	4·3	49·7	10·0	2·2	4·0
50–54	3·3	6·4	47·0	9·9	6·0	5·1
55–59	4·9	10·8	46·8	9·8	5·8	4·9
60–64	4·6	12·6	43·4	11·3	5·0	6·3
65–69	2·9	12·1	45·6	11·5	7·0	6·1
70–74	4·3	13·5	48·1	10·4	5·8	7·3
75–79	4·2	12·0	42·2	11·6	5·6	6·2
80–	2·7	10·3	44·1	10·9	8·5	4·2
Males						
20–24	0·0	9·3	4·0	4·1	0·0	0·0
25–29	2·0	5·4	5·4	0·7	0·7	0·0
30–34	1·3	3·5	8·0	0·9	0·4	0·0
35–39	4·3	6·0	6·7	3·2	0·4	0·4
40–44	3·4	6·5	7·3	3·5	0·8	0·8
45–49	5·1	5·7	12·1	4·0	1·5	0·6
50–54	4·8	6·7	11·5	5·5	1·3	0·7
55–59	3·9	9·9	13·4	7·7	0·8	0·8
60–64	5·7	10·4	16·2	10·9	2·1	0·4
65–69	2·9	11·4	14·4	11·3	1·8	1·8
70–74	5·0	14·4	17·5	11·9	1·8	0·8
75–79	3·9	11·0	19·0	8·4	2·3	0·3
80–	2·1	10·2	22·6	10·9	4·4	2·2
Number answered	9767	9746	9758	9685	9695	9697

Table 20 Oesophageal diseases

Sex and age	Difficulty swallowing liquids %	Difficulty swallowing solid food %	Heartburn during the day %	Heartburn at night %	Known oesophageal disease %
Females					
20-24	0.0	0.0	3.2	1.6	1.6
25-29	0.0	0.0	8.5	3.5	0.5
30-34	1.2	0.8	6.4	2.8	1.6
35-39	0.7	0.7	13.6	7.9	3.0
40-44	0.9	1.5	11.8	7.9	2.1
45-49	0.3	0.6	13.0	5.6	2.8
50-54	1.2	2.5	12.5	8.2	4.1
55-59	1.6	2.1	13.6	9.0	3.0
60-64	2.4	3.3	10.8	6.9	4.6
65-69	2.5	3.7	13.1	9.2	6.0
70-74	2.0	2.3	13.4	8.4	5.5
75-79	3.6	4.6	15.2	9.1	7.4
80-	4.2	4.2	15.7	6.9	7.3
Males					
20-24	1.3	0.0	4.0	2.7	0.0
25-29	0.0	2.0	8.2	4.8	0.7
30-34	0.4	0.9	9.7	4.9	1.8
35-39	0.4	0.4	9.9	5.7	1.8
40-44	0.8	3.4	14.1	10.6	4.9
45-49	0.6	0.6	13.0	10.9	3.6
50-54	1.7	3.7	12.2	8.9	4.8
55-59	0.8	2.7	10.7	11.5	5.2
60-64	1.9	3.4	10.9	10.9	5.7
65-69	1.2	3.5	10.6	10.0	4.9
70-74	2.0	3.0	11.6	8.8	4.8
75-79	3.2	4.5	10.0	8.0	6.4
80-	4.3	5.3	16.6	13.4	7.5
Number answered	9755	9753	9753	9752	9746

Table 21 Female hormonal status, etc.

Sex and age	Periods stopped %	Use of oral contraception %	Post menopausal hormones %	Have given birth %
Females				
20-24	0.0	52.4	0.0	6.3
25-29	0.5	33.7	3.1	21.1
30-34	0.8	14.4	1.6	53.8
35-39	1.7	11.6	2.7	65.6
40-44	6.3	8.1	2.7	79.6
45-49	25.4	5.0	15.5	79.6
50-54	76.8	1.2	34.2	84.0
55-59	93.4	0.7	29.4	83.9
60-64	97.5	0.5	22.3	82.0
65-69	98.2	0.3	20.7	77.6
70-74	99.5	0.1	14.4	78.9
75-79	99.8	0.0	7.1	81.9
80-	100.0	0.0	1.8	60.4
Number answered	5648	5607	5617	5654

Table 22 Drinking habits — beer

Sex and age	Never/hardly ever %	Some times each month %	Some times each week %	Every day %
Females				
20–24	30·2	46·0	23·8	0·0
25–29	29·6	47·7	21·1	1·5
30–34	35·6	37·2	24·8	2·4
35–39	35·9	28·9	32·2	3·0
40–44	40·8	32·7	19·8	6·6
45–49	47·2	23·1	23·1	6·5
50–54	46·2	24·3	23·5	5·9
55–59	53·0	23·6	18·0	5·4
60–64	53·8	21·0	18·8	6·3
65–69	57·5	18·4	17·0	7·2
70–74	58·7	20·0	14·7	6·7
75–79	58·5	23·3	10·8	7·4
80–	65·0	18·2	10·3	6·4
Males				
20–24	9·5	45·9	41·9	2·7
25–29	11·3	32·7	51·3	4·7
30–34	14·3	30·0	45·2	10·4
35–39	13·4	28·5	38·7	19·4
40–44	19·1	19·5	37·1	24·3
45–49	21·8	20·5	36·0	21·8
50–54	17·1	18·6	33·5	30·7
55–59	20·6	19·4	29·7	30·3
60–64	16·7	22·2	28·9	32·1
65–69	20·5	20·5	28·2	30·7
70–74	19·4	24·6	27·0	29·0
75–79	21·8	19·6	26·6	32·0
80–	25·0	20·0	23·6	31·4
Number answered	10 056			

Table 23 Drinking habits — wine (red, white+dessert)

Sex and age	Never/hardly ever %	Some times each month %	Some times each week %	Every day %
Females				
20–24	20·6	57·1	22·2	0·0
25–29	13·6	55·3	30·7	0·5
30–34	15·6	45·2	36·8	2·4
35–39	17·9	35·2	40·5	6·3
40–44	18·9	37·5	35·1	8·4
45–49	19·8	33·3	34·9	12·0
50–54	26·8	34·2	31·7	7·4
55–59	29·8	35·9	27·0	7·3
60–64	38·4	34·6	19·4	7·5
65–69	39·7	36·2	17·6	6·4
70–74	43·0	33·7	15·9	7·4
75–79	48·3	31·4	11·9	8·3
80–	56·6	23·2	13·1	7·0
Males				
20–24	28·0	54·7	17·3	0·0
25–29	13·3	57·3	28·7	0·7
30–34	17·9	47·6	32·8	1·7
35–39	23·2	36·3	35·6	4·9
40–44	24·7	39·0	32·2	4·1
45–49	29·0	24·8	37·5	8·8
50–54	28·1	30·7	31·6	9·5
55–59	35·3	30·8	25·2	8·7
60–64	37·1	36·7	19·2	7·0
65–69	39·2	35·3	18·4	7·1
70–74	39·0	35·0	17·9	8·0
75–79	40·5	31·1	18·4	10·0
80–	46·4	28·2	15·0	10·5
Number answered	10 054			

Table 24 Drinking habits — spirits

Sex and age	Never/hardly ever %	Some times each month %	Some times each week %	Every day %
Females				
20–24	66·7	30·2	3·2	0·0
25–29	64·8	29·1	6·0	0·0
30–34	68·8	26·4	4·8	0·0
35–39	74·1	18·6	7·3	0·0
40–44	70·0	25·2	4·2	0·6
45–49	68·5	22·8	6·8	1·9
50–54	66·5	21·7	9·4	2·5
55–59	67·8	22·2	8·1	1·9
60–64	65·6	22·9	8·6	2·8
65–69	64·9	20·1	9·7	5·3
70–74	65·7	17·8	8·8	7·6
75–79	66·9	17·2	7·8	8·1
80–	72·2	13·5	6·4	8·0
Males				
20–24	37·8	56·8	5·4	0·0
25–29	41·3	48·7	9·3	0·7
30–34	54·3	37·0	8·7	0·0
35–39	56·5	36·4	6·7	0·4
40–44	56·0	33·8	9·8	0·4
45–49	54·1	28·7	14·2	3·0
50–54	48·7	33·5	13·6	4·1
55–59	51·9	29·1	15·3	3·7
60–64	47·0	31·9	13·9	7·2
65–69	45·5	30·1	15·4	9·0
70–74	39·9	29·3	17·5	13·3
75–79	43·8	22·4	19·0	14·8
80–	41·4	20·9	15·5	22·3
Number answered	10 052			

Table 25 Smoking habits

Sex and age	Current smokers %	Ex-smokers %	Never smokers %	Smokers in household %	One or both parents smokers %
Females					
20–24	39·7	17·5	42·9	32·8	77·8
25–29	45·2	18·1	36·7	39·4	76·9
30–34	42·6	21·5	35·9	37·9	84·8
35–39	51·0	20·4	28·6	39·9	84·2
40–44	51·1	23·1	25·8	41·7	83·5
45–49	52·2	17·9	29·9	44·6	81·7
50–54	53·4	16·8	29·9	45·5	83·6
55–59	55·8	18·9	25·3	43·6	80·3
60–64	52·9	22·2	24·9	39·8	75·8
65–69	47·7	24·4	27·9	30·3	73·6
70–74	41·0	27·2	31·9	21·8	66·1
75–79	27·9	31·5	40·6	22·7	61·7
80–	23·4	31·8	44·7	13·3	63·2
Males					
20–24	34·7	12·0	53·3	34·7	69·3
25–29	45·6	11·4	43·0	37·0	81·2
30–34	50·4	19·1	30·4	36·2	78·7
35–39	44·0	21·5	34·5	35·9	82·3
40–44	53·6	23·6	22·8	40·5	80·5
45–49	60·8	21·7	17·5	42·6	83·9
50–54	56·1	25·8	18·2	45·5	81·7
55–59	60·1	24·3	15·6	46·0	79·6
60–64	61·2	29·7	9·1	46·7	79·3
65–69	54·4	35·1	10·5	39·6	72·4
70–74	48·9	41·8	9·3	32·3	74·3
75–79	43·9	39·4	16·7	29·6	65·9
80–	40·0	49·5	10·5	21·2	60·9
Number answered	10 074		9618	9702	

Table 26 Current smokers I

Sex and age	Tobacco consumption in g per day (weight equivalents used: 1 cigarette=1 g, 1 cheroot=3 g, 1 cigar=5 g)				
	1-4 g %	5-9 g %	10-19 g %	20-29 g %	≥ 30 g %
Females					
20-24	8.0	28.0	48.0	16.0	0.0
25-29	15.6	8.9	47.8	26.7	1.1
30-34	9.4	13.2	51.9	22.6	2.8
35-39	7.7	11.6	38.7	37.4	4.5
40-44	7.2	9.0	45.8	33.1	4.8
45-49	3.0	12.0	43.7	34.7	6.6
50-54	6.5	8.5	39.2	36.9	8.8
55-59	5.3	9.3	48.0	32.1	5.3
60-64	4.5	17.2	49.0	24.9	4.5
65-69	5.8	16.9	52.5	20.8	4.0
70-74	8.1	22.4	51.9	12.8	4.8
75-79	9.0	33.8	41.4	13.8	2.1
80-	18.9	27.0	48.6	5.4	0.0
Males					
20-24	23.1	11.5	46.2	15.4	3.8
25-29	10.6	13.6	50.0	21.2	4.5
30-34	7.8	10.3	35.3	37.9	8.6
35-39	4.0	8.8	32.0	40.8	14.4
40-44	0.7	11.4	37.1	40.0	10.7
45-49	4.5	6.0	24.9	45.3	19.4
50-54	2.4	4.3	26.0	42.9	24.4
55-59	3.4	7.6	32.8	36.6	19.7
60-64	2.2	7.5	32.9	40.1	17.2
65-69	2.5	9.3	38.4	38.8	11.0
70-74	3.6	19.0	39.1	31.6	6.7
75-79	7.7	18.9	45.5	18.9	9.1
80-	9.3	29.1	44.2	16.3	1.2
Number answered	4860				

Table 27 Current smokers II

Sex and age	Type of smoking:				
	Filtered cigarettes %	Plain cigarettes %	Cheroots %	Cigars %	Pipe %
Females					
20-24	100·0	0·0	0·0	0·0	4·0
25-29	94·4	4·4	0·0	1·1	1·1
30-34	94·3	5·7	0·0	0·0	0·9
35-39	90·3	11·0	0·0	0·0	0·0
40-44	85·5	11·4	1·2	0·6	1·8
45-49	85·6	12·0	2·4	0·0	0·6
50-54	87·7	8·1	5·0	0·0	1·2
55-59	82·6	15·3	3·1	0·0	0·3
60-64	78·0	17·2	6·5	0·0	0·0
65-69	72·3	19·3	9·2	0·0	1·1
70-74	67·5	17·3	16·7	0·0	0·6
75-79	59·3	13·1	30·3	0·0	0·0
80-	44·6	14·9	47·3	0·0	0·0
Males					
20-24	76·9	26·9	0·0	3·8	3·8
25-29	90·9	10·6	0·0	0·0	1·5
30-34	81·9	13·8	0·0	1·7	8·6
35-39	72·0	23·2	0·8	0·0	16·0
40-44	65·0	29·3	2·1	0·7	15·0
45-49	62·2	24·9	7·0	1·0	21·4
50-54	58·3	25·2	8·7	2·4	24·4
55-59	51·7	26·9	11·4	2·8	20·7
60-64	57·4	29·2	11·0	2·8	20·1
65-69	46·6	31·0	14·2	3·2	22·1
70-74	42·7	29·2	15·0	3·6	26·5
75-79	33·6	18·9	29·4	9·8	31·5
80-	24·4	19·8	36·0	14·0	24·4
Number answered	4860				

Table 28 Ex-smokers

Sex and age	Tobacco consumption in g per day (weight equivalents used: 1 cigarette=1 g, 1 cheroot=3 g, 1 cigar=5 g)				
	1-4 g %	5-9 g %	10-19 g %	20-29 g %	≥30 g %
Females					
20-24	0·0	27·3	63·6	9·1	0·0
25-29	11·1	30·6	44·4	13·9	0·0
30-34	24·1	24·1	40·7	11·1	0·0
35-39	14·5	25·8	33·9	21·0	4·8
40-44	19·7	9·2	38·2	27·6	5·3
45-49	24·6	28·1	28·1	14·0	5·3
50-54	22·2	22·2	34·6	14·8	6·2
55-59	15·7	15·7	38·9	22·2	7·4
60-64	13·9	25·5	35·0	19·0	6·6
65-69	17·5	21·9	39·9	15·3	5·5
70-74	24·4	27·6	34·1	9·7	4·1
75-79	27·2	18·5	35·1	11·9	7·3
80-	29·2	31·3	29·2	5·2	5·2
Males					
20-24	11·1	22·2	22·2	44·4	0·0
25-29	5·9	17·6	47·1	29·4	0·0
30-34	9·1	20·5	47·7	20·5	2·3
35-39	4·9	18·0	47·5	21·3	8·2
40-44	6·5	6·5	50·0	25·8	11·3
45-49	1·4	12·9	38·6	31·4	15·7
50-54	7·0	9·6	25·4	34·2	23·7
55-59	2·6	8·8	28·1	28·1	32·5
60-64	2·7	8·7	30·7	32·0	26·0
65-69	2·2	14·8	31·3	29·1	22·5
70-74	3·8	10·9	32·7	35·1	17·5
75-79	2·4	16·9	43·5	23·4	13·7
80-	1·0	17·2	38·4	25·3	18·2
Number answered	2526				

Table 29 School education

Sex and age	Number of years in school		
	<8 years %	8–10 years %	>10 years %
Females			
20–24	0·0	14·5	85·5
25–29	0·0	17·1	82·9
30–34	1·2	21·2	77·6
35–39	3·7	33·6	62·8
40–44	6·4	38·9	54·7
45–49	13·9	47·5	38·6
50–54	35·9	44·1	19·9
55–59	42·8	42·6	14·6
60–64	49·1	40·2	10·6
65–69	44·5	40·5	15·0
70–74	46·2	44·5	9·3
75–79	53·0	38·5	8·6
80–	55·1	34·2	10·8
Males			
20–24	0·0	20·0	80·0
25–29	0·7	25·7	73·6
30–34	0·9	34·5	64·6
35–39	3·5	38·7	57·7
40–44	9·9	41·1	49·0
45–49	16·6	46·8	36·6
50–54	35·7	40·7	23·6
55–59	47·7	36·6	15·7
60–64	47·8	38·9	13·3
65–69	45·7	38·9	15·4
70–74	47·5	36·8	15·6
75–79	49·2	33·0	17·7
80–	52·1	31·3	16·6
Number answered	10 019		

Table 30.1 Education

Sex and age	None %	Semi-skilled worker %	Apprentice %	Short theoretical <1 year %
Females				
20–24	40·5	0·0	8·1	2·7
25–29	16·5	1·2	11·2	3·5
30–34	11·5	0·0	7·8	4·1
35–39	15·5	1·3	2·0	3·7
40–44	10·9	1·5	8·8	3·0
45–49	14·2	2·8	12·7	4·6
50–54	23·1	3·3	17·5	9·7
55–59	27·2	2·4	17·5	10·9
60–64	36·4	5·3	15·8	10·2
65–69	36·8	3·4	14·5	9·6
70–74	38·2	4·2	16·1	7·9
75–79	47·2	4·7	10·8	7·0
80–	45·1	5·4	11·7	7·8
Males				
20–24	39·5	4·7	25·6	2·3
25–29	16·5	2·5	21·5	3·3
30–34	18·8	7·6	14·8	3·6
35–39	13·7	2·9	20·9	2·5
40–44	12·3	7·7	28·0	2·7
45–49	12·5	4·3	31·6	5·8
50–54	17·2	5·0	34·2	5·4
55–59	16·9	8·0	40·6	3·5
60–64	17·4	11·5	40·7	4·8
65–69	22·5	9·1	35·1	6·7
70–74	17·2	8·8	38·0	6·0
75–79	21·8	5·2	35·4	3·6
80–	19·8	9·1	35·3	1·6
Number answered	9597			

Table 30.2 Education

Sex and age	1-3 years %	3 years, e.g. technician nursery teacher %	Theoretical e.g. school-teacher, journalist %	University degree %
Females				
20-24	35.1	2.7	8.1	2.7
25-29	29.4	10.6	10.0	17.6
30-34	23.0	12.3	17.6	23.8
35-39	24.2	17.2	16.8	19.2
40-44	20.0	17.6	19.4	18.8
45-49	26.2	10.5	16.4	12.7
50-54	25.8	5.8	8.2	6.6
55-59	24.1	5.5	7.1	5.2
60-64	23.2	3.0	3.3	2.8
65-69	25.9	3.4	3.3	3.2
70-74	26.0	2.4	2.9	2.2
75-79	23.9	2.5	1.1	2.8
80-	21.8	2.7	2.3	3.1
Males				
20-24	14.0	2.3	2.3	9.3
25-29	17.4	3.3	6.6	28.9
30-34	11.7	4.0	9.4	30.0
35-39	11.9	6.8	10.4	30.9
40-44	9.6	1.9	14.6	23.4
45-49	8.5	4.0	13.1	20.4
50-54	10.5	3.7	7.4	16.6
55-59	11.1	4.3	7.4	8.0
60-64	11.7	3.4	4.6	5.9
65-69	9.9	2.4	4.9	9.5
70-74	13.4	3.6	4.2	8.8
75-79	14.3	2.9	4.9	12.0
80-	15.5	2.1	6.4	10.2
Number answered	9597			

Table 31.1 Longest employment since school

Sex and age	Self-employed — farming, craft, retail trade, etc. %	Self-employed — accountant, estate agent etc. %	Office worker with education and/or with inferiors %	Inferior office worker %	Skilled worker %
Females					
20–24	0·0	0·0	24·3	16·2	10·8
25–29	1·2	1·8	37·8	18·3	10·4
30–34	1·3	1·7	53·2	16·3	10·7
35–39	1·0	4·8	52·4	12·8	6·9
40–44	2·5	3·7	59·9	12·4	6·2
45–49	3·5	3·8	53·0	18·3	4·4
50–54	2·7	3·2	40·6	18·3	6·3
55–59	3·9	2·6	34·4	18·3	6·9
60–64	2·7	2·7	28·9	22·6	4·6
65–69	3·4	1·7	28·4	19·8	6·4
70–74	4·9	2·8	23·0	17·6	6·6
75–79	3·2	3·0	17·3	14·5	6·8
80–	6·0	4·0	20·1	13·3	6·0
Males					
20–24	0·0	0·0	10·5	21·1	18·4
25–29	4·5	2·7	35·1	18·0	13·5
30–34	1·4	5·6	41·8	8·9	16·4
35–39	4·0	6·9	44·5	10·9	12·4
40–44	6·2	5·4	43·4	6·6	19·4
45–49	6·3	7·2	45·0	7·2	18·6
50–54	6·4	9·1	35·8	8·2	19·6
55–59	10·1	9·0	30·3	9·5	23·1
60–64	7·7	8·3	27·1	12·4	24·0
65–69	7·0	6·6	29·4	10·8	20·4
70–74	13·4	7·3	35·0	8·3	20·4
75–79	11·6	7·3	32·0	11·2	21·1
80–	11·5	11·0	34·1	8·2	17·6
Number answered	9418				

Table 31.2 Longest employment since school

Sex and age	Unskilled worker %	Unemployed %	Senior citizen %	Housewife %	Working with spouse %
Females					
20–24	29.7	16.2	0.0	2.7	0.0
25–29	20.1	9.1	0.6	0.6	0.0
30–34	7.7	6.0	1.7	0.9	0.4
35–39	13.4	3.1	1.0	3.4	1.0
40–44	7.8	4.0	0.9	2.2	0.3
45–49	12.0	0.9	1.3	2.5	0.3
50–54	18.7	1.1	1.3	6.9	0.8
55–59	22.9	0.4	1.2	7.4	1.9
60–64	23.4	0.2	1.1	12.0	1.8
65–69	21.2	0.3	1.3	15.1	2.4
70–74	18.5	0.1	4.0	19.4	3.0
75–79	21.5	0.2	5.1	23.9	4.5
80–	19.3	0.0	4.0	24.9	2.4
Males					
20–24	34.2	15.8	0.0	0.0	0.0
25–29	15.3	9.9	0.9	0.0	0.0
30–34	19.7	6.1	0.0	0.0	0.0
35–39	16.1	4.0	0.7	0.4	0.0
40–44	15.1	3.1	0.8	0.0	0.0
45–49	11.6	2.5	1.3	0.0	0.3
50–54	18.1	1.1	1.8	0.0	0.0
55–59	17.2	0.2	0.6	0.0	0.0
60–64	19.1	0.2	1.2	0.0	0.0
65–69	24.6	0.0	1.2	0.0	0.0
70–74	14.8	0.0	0.4	0.2	0.2
75–79	16.2	0.0	0.3	0.0	0.3
80–	13.7	0.0	3.8	0.0	0.0
Number answered	9418				

Table 32 Cohabitation

Sex and age	Living with spouse %	Living alone %	Living with others %
Females			
20–24	38·7	46·8	14·5
25–29	60·8	30·7	8·5
30–34	63·3	19·9	16·7
35–39	63·0	20·5	16·5
40–44	69·0	11·7	19·3
45–49	62·3	25·9	11·7
50–54	60·2	30·7	9·0
55–59	56·7	39·2	4·2
60–64	53·2	42·4	4·4
65–69	44·8	52·6	2·6
70–74	34·5	63·3	2·2
75–79	29·2	67·2	3·6
80–	11·1	80·8	8·1
Males			
20–24	33·8	43·2	23·0
25–29	43·6	40·3	16·1
30–34	69·1	25·2	5·7
35–39	65·8	26·8	7·4
40–44	67·8	27·7	4·5
45–49	66·9	26·2	6·9
50–54	65·8	30·3	3·9
55–59	70·8	27·2	2·1
60–64	68·7	30·0	1·3
65–69	68·8	28·8	2·3
70–74	70·3	28·2	1·5
75–79	65·8	31·8	2·4
80–	53·0	44·3	2·7
Number answered	10 055		

Table 33 Marital status

Sex and age	Married/cohabiting %	Unmarried %	Separated/divorced %	Widow/widower %
Females				
20–24	32·3	67·7	0·0	0·0
25–29	58·8	36·7	4·5	0·0
30–34	63·3	30·7	6·0	0·0
35–39	63·0	24·1	12·2	0·7
40–44	69·9	14·2	15·4	0·6
45–49	62·0	12·3	23·1	2·5
50–54	60·0	11·1	22·5	6·4
55–59	57·0	9·9	20·8	12·3
60–64	53·4	10·3	14·1	22·1
65–69	44·8	13·1	13·8	28·3
70–74	34·4	10·7	15·2	39·6
75–79	30·0	10·6	10·8	48·7
80–	9·3	22·3	11·1	57·2
Males				
20–24	32·0	68·0	0·0	0·0
25–29	40·9	57·7	1·3	0·0
30–34	67·2	26·6	5·7	0·4
35–39	65·1	24·3	10·2	0·4
40–44	66·7	23·1	10·2	0·0
45–49	64·8	19·6	14·2	1·5
50–54	66·5	15·4	17·2	0·9
55–59	70·7	10·7	15·5	3·1
60–64	68·6	9·1	16·7	5·5
65–69	69·4	10·2	13·3	7·1
70–74	69·7	6·9	10·9	12·6
75–79	65·7	5·8	7·0	21·6
80–	53·0	6·9	8·3	31·8
Number answered	10 040			

Table 34 Household income per year before tax-deduction

Sex and age	<100 000 dkr %	100 000 dkr to 150 000 dkr %	150 000 dkr to 200 000 dkr %	200 000 dkr to 300 000 dkr %	300 000 dkr to 400 000 dkr %	≥400 000 dkr %
Females						
20–24	47·5	18·6	10·2	11·9	8·5	3·4
25–29	17·3	10·7	18·4	21·4	16·3	15·8
30–34	9·0	10·6	11·4	19·6	17·1	32·2
35–39	7·0	9·1	14·8	16·1	20·8	32·2
40–44	3·1	6·9	11·2	19·3	15·0	44·5
45–49	4·1	9·4	11·6	21·3	17·6	36·1
50–54	9·1	9·6	16·8	24·0	20·2	20·2
55–59	11·2	11·6	15·7	28·9	17·2	15·4
60–64	18·6	18·9	20·9	24·4	9·9	7·3
65–69	31·2	27·0	16·0	15·1	6·7	4·2
70–74	45·9	26·3	11·8	10·4	2·6	3·1
75–79	55·4	22·6	9·5	7·1	2·1	3·3
80–	70·6	18·0	7·3	3·2	0·9	0·0
Males						
20–24	29·7	25·7	18·9	14·9	6·8	4·1
25–29	17·0	17·0	12·9	21·8	12·9	18·4
30–34	4·4	9·2	11·8	21·5	22·8	30·3
35–39	7·1	6·4	9·9	17·7	18·7	40·3
40–44	6·5	6·9	11·5	18·1	17·7	39·2
45–49	10·7	7·6	6·7	14·0	22·0	39·0
50–54	8·9	8·9	9·4	19·4	21·8	31·6
55–59	8·6	10·5	9·4	28·9	21·6	21·0
60–64	11·9	18·9	16·8	26·2	14·6	11·6
65–69	18·4	27·7	19·0	18·2	10·1	6·8
70–74	29·6	28·8	16·3	14·0	5·6	5·6
75–79	36·6	26·2	11·4	14·2	6·5	5·2
80–	41·6	26·6	12·1	10·3	5·6	3·7
Number answered	9822					

Table 35 Physical activity during work

Sex and age	Mainly sitting %	Sitting/standing %	Walking/lifting %	Heavy activity %
Females				
20–24	44·8	29·3	24·1	1·7
25–29	41·2	26·3	31·4	1·0
30–34	35·1	29·8	34·3	0·8
35–39	23·6	33·8	41·9	0·7
40–44	28·7	39·1	30·6	1·6
45–49	37·3	34·4	27·9	0·3
50–54	29·4	33·0	36·4	1·2
55–59	29·6	42·4	27·3	0·7
60–64	33·5	45·4	20·0	1·2
65–69	29·9	56·7	13·4	0·0
70–74	23·2	69·6	7·1	0·0
75–79	33·3	61·1	5·6	0·0
80–	50·0	50·0	0·0	0·0
Males				
20–24	53·4	24·7	16·4	5·5
25–29	53·8	21·7	15·4	9·1
30–34	44·1	23·6	22·3	10·0
35–39	37·2	27·1	25·6	10·2
40–44	36·3	31·6	22·4	9·7
45–49	41·9	24·7	24·3	9·1
50–54	32·2	28·9	30·2	8·7
55–59	31·9	26·9	28·2	13·1
60–64	29·5	33·6	27·7	9·1
65–69	34·5	37·9	23·0	4·6
70–74	51·7	44·8	3·4	0·0
75–79	43·8	31·3	18·8	6·3
80–	42·9	14·3	28·6	14·3
Number answered	5105			

Table 36 Physical activity at leisure time

Sex and age	Inactive or light activity <2 h/week %	Light activity 2–4 h/week %	Light activity >4 h/week or heavy activity 2–4 h/week %	Heavy activity >4 h/week %
Females				
20–24	4·9	45·9	44·3	4·9
25–29	9·0	40·7	42·7	7·5
30–34	6·0	51·2	40·0	2·8
35–39	8·0	57·7	31·0	3·3
40–44	10·7	56·7	31·1	1·5
45–49	9·6	54·6	34·0	1·9
50–54	10·1	57·8	30·0	2·1
55–59	11·6	62·3	24·7	1·4
60–64	12·8	57·8	27·9	1·6
65–69	12·5	59·9	25·1	2·4
70–74	14·8	63·9	20·0	1·3
75–79	19·8	62·2	17·6	0·4
80–	33·5	55·3	10·6	0·6
Males				
20–24	4·0	22·7	52·0	21·3
25–29	8·1	29·7	41·2	20·9
30–34	5·7	33·0	47·6	13·7
35–39	11·6	43·0	36·3	9·2
40–44	13·3	49·2	33·3	4·2
45–49	15·9	44·2	35·7	4·3
50–54	12·0	51·1	34·3	2·6
55–59	12·2	52·3	31·2	4·3
60–64	12·7	49·0	34·0	4·2
65–69	14·5	44·5	37·2	3·9
70–74	12·8	49·8	34·3	3·1
75–79	19·6	46·2	30·6	3·7
80–	24·7	50·2	23·3	1·8
Number answered	9991			

Table 37 *Jogging*

Sex and age	Jogging %	Amount of jogging:			
		< $\frac{1}{2}$ h per week %	$\frac{1}{2}$ -1 h per week %	1-2 h per week %	>2 h per week %
Females					
20-24	21.3	38.5	30.8	23.1	7.7
25-29	16.6	36.4	33.3	18.2	12.1
30-34	13.3	30.3	30.3	24.2	15.2
35-39	11.0	18.2	30.3	30.3	21.2
40-44	8.2	33.3	22.2	33.3	11.1
45-49	6.5	28.6	47.6	19.0	4.8
50-54	2.9	7.1	50.0	28.6	14.3
55-59	2.8	31.3	37.5	18.8	12.5
60-64	0.5	0.0	33.3	66.7	0.0
65-69	0.1	0.0	0.0	100.0	0.0
70-74	0.1	0.0	0.0	0.0	100.0
75-79	0.2	0.0	0.0	100.0	0.0
80-	0.0	—	—	—	—
Males					
20-24	36.0	14.8	33.3	29.6	22.2
25-29	34.5	21.6	31.4	29.4	17.6
30-34	28.5	18.5	29.2	18.5	33.8
35-39	17.7	18.0	34.0	32.0	16.0
40-44	10.3	18.5	37.0	22.2	22.2
45-49	8.5	14.3	28.6	32.1	25.0
50-54	7.0	15.6	28.1	31.3	25.0
55-59	3.9	0.0	36.8	42.1	21.1
60-64	2.3	33.3	25.0	41.7	0.0
65-69	1.9	40.0	20.0	20.0	20.0
70-74	1.1	16.7	16.7	33.3	33.3
75-79	0.9	0.0	33.3	33.3	33.3
80-	0.5	0.0	100.0	0.0	0.0
Number answered	9984	527			

Table 38 Bicycling — summer

Sex and age	Bicycling %	Amount of bicycling:			
		< $\frac{1}{2}$ h per day %	$\frac{1}{2}$ –1 h per day %	1–2 h per day %	>2 h per day %
Females					
20–24	96.7	8.5	47.5	33.9	10.2
25–29	89.9	19.0	44.1	25.7	11.2
30–34	87.6	31.5	39.3	21.5	7.8
35–39	80.7	28.9	44.2	18.6	8.3
40–44	78.7	29.3	43.2	19.7	7.7
45–49	76.3	27.3	42.0	18.4	12.2
50–54	72.7	23.0	43.5	20.2	13.4
55–59	60.7	25.9	39.4	23.0	11.8
60–64	51.3	23.1	40.4	23.1	13.3
65–69	46.4	22.0	39.9	24.5	13.5
70–74	32.3	32.7	38.4	20.5	8.4
75–79	16.9	27.0	52.8	16.9	3.4
80–	6.3	50.0	20.0	20.0	10.0
Males					
20–24	88.0	7.6	56.1	25.8	10.6
25–29	82.4	29.5	41.0	21.3	8.2
30–34	88.1	36.0	35.0	22.0	7.0
35–39	78.4	39.8	37.1	19.5	3.6
40–44	74.4	37.9	33.8	20.5	7.7
45–49	66.0	41.9	31.8	16.6	9.7
50–54	66.0	38.6	33.7	17.2	10.6
55–59	64.2	32.3	35.2	20.0	12.6
60–64	57.3	26.6	40.2	19.9	13.3
65–69	55.2	24.8	37.1	24.8	13.3
70–74	55.2	24.7	35.5	24.7	15.0
75–79	41.8	26.5	35.3	21.3	16.9
80–	24.3	24.5	52.8	18.9	3.8
Number answered	9961	5659			

Table 39 *Bicycling — winter*

Sex and age	Bicycling %	Amount of bicycling:			
		< $\frac{1}{2}$ h per day %	$\frac{1}{2}$ –1 h per day %	1–2 h per day %	>2 h per day %
Females					
20–24	90·2	21·8	52·7	20·0	5·5
25–29	80·4	38·8	39·4	18·8	3·1
30–34	75·6	40·7	45·0	11·1	3·2
35–39	64·7	40·2	39·7	13·9	6·2
40–44	64·1	38·4	44·1	13·7	3·8
45–49	61·3	35·7	43·4	13·3	7·7
50–54	54·0	32·0	41·7	18·1	8·1
55–59	43·9	34·4	39·6	19·2	6·8
60–64	32·9	39·6	34·8	15·9	9·7
65–69	27·3	41·8	35·2	16·4	6·6
70–74	18·2	44·6	39·9	10·8	4·7
75–79	6·5	32·4	52·9	8·8	5·9
80–	2·8	66·7	11·1	22·2	0·0
Males					
20–24	84·0	31·7	46·0	19·0	3·2
25–29	66·0	42·3	39·2	14·4	4·1
30–34	74·9	48·8	32·4	14·7	4·1
35–39	60·6	56·7	31·6	8·8	2·9
40–44	58·8	49·4	35·7	10·4	4·5
45–49	48·6	52·8	28·9	10·1	8·2
50–54	54·3	43·1	35·9	14·1	6·9
55–59	48·8	43·4	36·6	13·6	6·4
60–64	42·6	38·6	40·4	14·3	6·7
65–69	39·7	41·5	34·6	16·6	7·3
70–74	37·2	37·8	37·8	16·1	8·3
75–79	28·7	41·9	32·3	14·0	11·8
80–	13·8	60·0	30·0	6·7	3·3
Number answered	9932	4166			

Table 40 Weight and weight changes

Sex and age	Do you pay attention to your weight %	Weight increase: >4 kg during 1 year %	Weight loss: >4 kg during 1 year, not caused by slimming treatment %	Do you think that		
				your health would benefit from losing weight %	your present weight is suitable for your health %	your health would benefit from increasing your weight %
Females						
20–24	59·7	59·7	33·3	32·3	66·1	1·6
25–29	57·3	60·6	41·7	21·7	77·3	1·0
30–34	47·2	67·6	43·0	24·2	72·2	3·6
35–39	47·8	62·5	41·3	39·3	59·0	1·7
40–44	50·6	58·5	38·2	37·5	59·8	2·7
45–49	56·7	57·1	31·5	41·0	57·5	1·6
50–54	60·6	55·3	30·2	51·0	46·9	2·1
55–59	63·1	50·6	26·8	50·5	47·0	2·5
60–64	58·3	39·7	26·2	45·6	51·4	3·0
65–69	63·2	31·4	26·7	38·5	57·1	4·4
70–74	60·7	27·4	26·4	37·7	59·1	3·2
75–79	59·4	20·9	23·6	33·7	63·9	2·4
80–	58·4	13·1	23·8	17·6	76·6	5·9
Males						
20–24	34·7	37·3	25·3	6·8	81·1	12·2
25–29	35·8	39·9	26·4	19·7	72·8	7·5
30–34	35·5	47·8	30·0	28·4	66·2	5·3
35–39	29·4	46·5	26·5	37·6	58·2	4·3
40–44	35·0	44·3	24·1	37·8	58·3	3·9
45–49	35·5	42·9	21·8	45·4	50·9	3·7
50–54	34·2	40·7	24·0	42·4	53·9	3·7
55–59	38·6	36·3	23·4	44·5	52·0	3·5
60–64	38·3	31·9	20·3	41·3	55·0	3·7
65–69	41·2	26·1	17·9	34·1	63·1	2·8
70–74	49·1	19·4	16·7	33·8	62·3	3·8
75–79	45·7	12·0	17·9	22·3	75·2	2·6
80–	46·8	6·0	12·5	14·0	81·7	4·3
Number answered	9724	9677	9695	9665		

Table 41 Social relations I

Sex and age	Contact with family members					
	Daily %	A couple of times a week %	A couple of times each month %	At rare intervals %	Never %	Do not have any %
Females						
20–24	25·4	55·6	15·9	3·2	0·0	0·0
25–29	32·7	49·2	14·6	3·5	0·0	0·0
30–34	55·2	27·6	14·0	2·8	0·0	0·4
35–39	68·8	17·9	9·6	2·7	0·7	0·3
40–44	75·5	17·6	5·2	1·2	0·6	0·0
45–49	54·8	32·2	10·5	2·2	0·0	0·3
50–54	41·2	43·6	11·1	3·3	0·2	0·6
55–59	37·9	43·5	13·9	3·7	0·3	0·7
60–64	32·2	43·9	17·6	4·4	1·1	0·8
65–69	27·1	42·3	20·7	6·9	1·5	1·6
70–74	27·5	42·4	20·7	6·4	0·8	2·3
75–79	25·2	46·5	18·9	5·8	1·1	2·6
80–	23·9	38·8	19·6	9·8	1·6	6·3
Males						
20–24	14·7	58·7	20·0	6·7	0·0	0·0
25–29	19·6	43·9	25·0	11·5	0·0	0·0
30–34	46·1	28·9	18·0	7·0	0·0	0·0
35–39	56·7	20·6	13·5	7·8	1·1	0·4
40–44	56·7	20·9	13·7	6·8	1·9	0·0
45–49	49·2	25·2	16·1	7·6	1·5	0·3
50–54	35·2	35·0	18·4	8·3	2·4	0·7
55–59	27·3	36·0	21·7	10·8	2·5	1·7
60–64	21·4	36·3	24·4	12·4	4·2	1·3
65–69	16·5	38·2	24·1	16·1	2·8	2·2
70–74	16·3	38·4	27·4	12·9	2·8	2·2
75–79	16·0	43·8	22·5	12·4	2·3	2·9
80–	17·2	41·9	24·7	9·1	3·2	3·8
Number answered	9700					

Table 42 Social relations II

Sex and age	Contact with friends					
	Daily %	A couple of times a week %	A couple of times each month %	At rare intervals %	Never %	Do not have any %
Females						
20–24	25·4	46·0	25·4	3·2	0·0	0·0
25–29	14·1	54·8	27·1	3·0	1·0	0·0
30–34	7·6	37·2	46·8	6·8	0·4	1·2
35–39	10·0	32·2	42·9	14·0	0·7	0·3
40–44	6·4	27·0	50·6	13·0	1·8	1·2
45–49	5·3	29·7	45·2	18·3	0·3	1·2
50–54	4·7	22·5	46·2	21·4	3·1	2·1
55–59	5·9	23·0	41·5	24·0	3·0	2·6
60–64	5·7	25·7	38·7	20·6	4·3	5·1
65–69	6·9	24·0	40·8	20·7	3·5	4·1
70–74	7·4	30·0	37·9	16·3	2·9	5·5
75–79	5·9	26·3	35·7	20·1	3·7	8·3
80–	7·5	31·7	33·7	14·3	3·6	9·1
Males						
20–24	26·7	38·7	26·7	8·0	0·0	0·0
25–29	18·2	52·0	19·6	8·8	0·7	0·7
30–34	13·2	43·4	33·8	9·2	0·4	0·0
35–39	10·6	31·6	44·3	11·7	1·4	0·4
40–44	9·2	32·8	40·1	15·6	1·5	0·8
45–49	6·1	28·7	41·3	21·1	1·8	0·9
50–54	6·6	21·9	41·0	24·6	2·9	3·1
55–59	6·7	20·6	38·3	26·0	5·2	3·3
60–64	7·1	20·7	36·6	26·8	5·6	3·3
65–69	6·0	18·3	36·7	29·9	4·2	5·0
70–74	6·1	16·8	40·2	25·4	5·5	6·1
75–79	6·6	17·4	28·9	30·9	7·2	8·9
80–	3·3	14·3	31·3	27·5	12·1	11·5
Number answered	9658					

Table 43 Social relations III

Sex and age	Contact with neighbours					
	Daily %	A couple of times a week %	A couple of times each month %	At rare intervals %	Never %	Do not have any %
Females						
20–24	14.3	11.1	11.1	20.6	39.7	3.2
25–29	10.6	18.1	14.1	24.6	31.2	1.5
30–34	10.0	22.0	21.2	20.8	25.6	0.4
35–39	9.7	27.3	20.0	21.7	19.3	2.0
40–44	10.3	25.5	19.1	21.6	21.6	1.8
45–49	8.1	20.2	23.3	23.0	24.2	1.2
50–54	9.9	23.5	14.0	21.6	29.4	1.6
55–59	11.7	20.5	15.6	24.5	24.9	2.8
60–64	13.8	22.0	15.3	21.2	23.7	4.0
65–69	15.3	24.3	15.4	16.5	24.3	4.3
70–74	17.2	21.7	12.6	17.8	25.3	5.4
75–79	18.4	20.9	12.9	16.4	23.3	8.0
80–	18.7	20.6	11.5	11.9	30.6	6.7
Males						
20–24	17.3	12.0	14.7	24.0	30.7	1.3
25–29	9.5	13.5	13.5	24.3	38.5	0.7
30–34	8.8	21.1	25.9	22.8	21.1	0.4
35–39	6.0	24.9	20.3	23.1	24.6	1.1
40–44	11.1	23.7	24.8	22.1	17.9	0.4
45–49	10.4	19.2	22.6	24.7	22.0	1.2
50–54	8.1	22.0	19.8	24.2	24.2	1.8
55–59	11.5	21.3	17.1	21.7	26.3	2.3
60–64	14.5	21.2	16.4	23.5	21.8	2.7
65–69	18.0	21.2	15.6	19.4	22.6	3.4
70–74	14.9	23.2	16.1	19.3	22.0	4.5
75–79	14.2	19.8	10.9	20.8	29.0	5.3
80–	8.8	20.4	14.4	18.8	27.1	10.5
Number answered	9627					

Table 44 Social relations IV

Sex and age	Contact with colleagues or home helpers					
	Daily %	A couple of times a week %	A couple of times each month %	At rare intervals %	Never %	Do not have any %
Females						
20–24	6.3	19.0	27.0	23.8	4.8	19.0
25–29	5.5	14.1	33.2	26.6	8.5	12.1
30–34	0.8	10.8	31.2	34.0	12.8	10.4
35–39	6.0	9.7	29.3	32.3	12.0	10.7
40–44	2.7	9.4	29.4	32.7	13.0	12.7
45–49	3.1	10.8	21.1	38.7	17.3	9.0
50–54	2.7	7.6	17.3	33.4	21.4	17.5
55–59	3.1	5.9	14.6	23.5	26.8	26.0
60–64	1.3	7.6	13.2	17.1	15.5	45.3
65–69	2.8	7.6	11.9	11.5	14.2	52.0
70–74	1.5	14.0	11.8	7.2	9.5	55.9
75–79	2.2	20.3	14.4	5.4	7.3	50.4
80–	5.9	34.0	13.0	3.6	5.5	37.9
Males						
20–24	12.0	22.7	22.7	21.3	6.7	14.7
25–29	7.4	20.3	24.3	23.6	10.1	14.2
30–34	4.8	19.7	24.6	29.4	11.0	10.5
35–39	4.6	12.4	24.5	35.5	14.2	8.9
40–44	6.5	12.6	22.2	33.7	14.2	10.7
45–49	7.3	14.6	20.7	29.2	16.7	11.6
50–54	4.2	11.8	18.0	29.8	21.5	14.7
55–59	4.4	7.1	13.9	25.1	31.5	18.0
60–64	2.9	6.3	10.7	20.0	28.4	31.7
65–69	3.2	7.0	8.8	16.9	19.5	44.6
70–74	2.6	10.1	10.9	14.5	13.9	47.9
75–79	2.0	15.2	8.6	15.6	13.9	44.7
80–	7.1	24.5	12.5	8.7	14.1	33.2
Number answered	9665					

Table 45 Medical treatment I

Sex and age	Antihypertensive medication %	Cardiac medication %	Diuretics %	Cholesterol reducing medication %
Females				
20-24	0·0	0·0	0·0	0·0
25-29	0·0	0·0	0·5	0·0
30-34	0·8	0·0	0·0	0·0
35-39	1·0	0·7	1·6	0·0
40-44	3·0	0·3	1·2	0·6
45-49	5·0	2·5	4·0	0·9
50-54	7·4	2·7	7·5	0·4
55-59	10·1	5·2	10·6	1·0
60-64	16·8	7·5	11·1	0·5
65-69	15·8	9·1	11·9	1·6
70-74	21·4	17·3	17·8	1·1
75-79	20·3	17·8	19·6	1·1
80-	25·0	24·7	27·7	1·2
Males				
20-24	0·0	0·0	0·0	0·0
25-29	0·0	0·0	0·0	0·7
30-34	0·0	0·4	0·0	0·0
35-39	0·7	0·7	0·0	0·0
40-44	3·4	2·3	1·1	0·4
45-49	4·9	1·2	1·2	0·3
50-54	6·8	3·7	2·0	0·4
55-59	12·3	7·7	4·2	1·9
60-64	17·2	11·6	6·3	2·1
65-69	15·5	15·3	10·6	1·7
70-74	18·1	20·8	12·0	1·3
75-79	15·9	24·2	17·9	1·2
80-	15·4	31·5	24·9	0·5
Number answered	10 012	10 024	10 018	10 017

Table 46 Medical treatment II

Sex and age	Rheumatism medication %	Sleeping pills %	Tranquillizers %	Gastric medication %
Females				
20–24	0·0	0·0	0·0	0·0
25–29	1·0	0·5	1·5	1·5
30–34	2·4	1·6	2·4	2·4
35–39	1·6	1·0	3·3	3·9
40–44	1·8	1·8	3·3	3·0
45–49	3·1	2·2	5·9	3·1
50–54	7·5	6·8	9·9	5·0
55–59	8·3	8·4	13·4	7·5
60–64	9·4	10·7	14·3	8·3
65–69	11·5	12·7	15·6	8·3
70–74	14·1	15·4	15·0	10·2
75–79	18·4	21·9	14·6	12·4
80–	19·0	25·7	14·5	8·5
Males				
20–24	0·0	0·0	1·3	1·3
25–29	0·0	0·7	1·4	3·4
30–34	0·4	0·4	1·7	3·9
35–39	1·4	1·8	2·8	3·2
40–44	1·9	1·1	3·8	6·8
45–49	3·3	1·5	3·6	9·4
50–54	5·4	2·6	7·0	6·5
55–59	7·1	2·9	5·6	6·2
60–64	6·5	5·7	7·0	8·0
65–69	9·5	7·2	7·9	9·7
70–74	9·9	11·1	6·9	8·4
75–79	9·7	9·5	6·4	8·5
80–	10·0	12·2	6·8	11·8
Number answered	10 024	10 018	10 024	10 017

Table 47 Medical treatment III

Sex and age	Asthma or bronchitis medication %	Eye disease medication %	Analgesics %	Vitamins or herbal medicine %
Females				
20–24	1·6	0·0	4·9	50·8
25–29	3·0	1·5	3·6	53·3
30–34	3·6	2·0	8·4	56·4
35–39	4·6	0·3	10·2	59·5
40–44	2·4	1·5	12·3	56·5
45–49	4·7	1·9	12·5	54·2
50–54	6·2	1·0	20·7	65·0
55–59	7·0	3·5	21·0	63·2
60–64	7·7	4·9	25·0	69·0
65–69	7·2	5·2	21·7	72·9
70–74	9·3	8·1	23·8	72·6
75–79	8·3	8·6	27·7	72·7
80–	4·8	12·7	32·6	65·9
Males				
20–24	4·0	0·0	4·0	37·3
25–29	3·4	0·7	2·8	33·1
30–34	1·7	0·4	2·6	43·9
35–39	3·5	0·7	6·4	43·1
40–44	1·9	1·9	8·3	41·4
45–49	0·9	1·2	9·1	44·1
50–54	2·6	1·7	12·0	44·3
55–59	4·8	1·5	13·5	48·8
60–64	5·1	2·9	11·4	52·1
65–69	10·1	3·5	15·1	55·6
70–74	7·6	5·3	15·1	55·7
75–79	9·5	7·3	12·2	56·3
80–	8·2	10·0	13·1	53·8
Number answered	10 018	10 013	10 016	9998

Table 48 Contact with the health care system during the last year

Sex and age	General practitioner %	Doctor on duty %	Specialist %	Casualty/out-patient clinic %
Females				
20–24	90·2	8·3	43·3	28·3
25–29	87·3	16·3	41·1	24·0
30–34	81·6	14·5	35·3	21·3
35–39	84·1	12·7	44·5	22·4
40–44	78·3	8·8	41·6	20·2
45–49	79·8	10·6	44·4	15·4
50–54	82·0	11·7	47·0	20·4
55–59	81·2	7·0	41·2	20·9
60–64	77·0	9·8	36·5	21·1
65–69	81·4	8·3	41·6	24·6
70–74	83·6	11·7	41·2	23·6
75–79	83·8	11·0	42·1	23·2
80–	83·9	13·4	37·7	21·0
Males				
20–24	65·3	5·3	28·0	22·7
25–29	67·8	5·5	22·2	22·2
30–34	59·4	7·9	24·1	23·7
35–39	65·4	12·0	26·9	23·0
40–44	64·8	6·5	32·3	24·3
45–49	62·1	8·8	26·4	19·8
50–54	64·2	10·5	31·3	22·9
55–59	71·5	6·4	28·2	22·3
60–64	70·6	10·1	29·7	25·4
65–69	74·2	10·3	30·7	23·5
70–74	78·1	10·6	33·7	26·3
75–79	77·6	9·8	35·4	27·4
80–	77·3	13·1	33·3	24·8
Number answered	10 024	9981	9982	9977

Table 49 *Referred to general practitioner*

Sex and age	Cause of reference to general practitioner			
	Blood pressure %	Lung function %	Electrocardiogram %	Other problems %
Females				
20–24	0·0	1·6	0·0	0·0
25–29	1·5	1·0	1·0	0·0
30–34	2·0	0·8	0·8	0·0
35–39	2·3	3·6	0·3	0·3
40–44	6·0	4·8	0·9	0·0
45–49	7·7	4·9	0·6	0·3
50–54	11·3	6·1	1·8	0·2
55–59	11·6	7·6	3·6	0·2
60–64	13·7	11·7	4·7	0·2
65–69	15·2	12·8	7·0	0·1
70–74	13·8	11·4	7·9	0·1
75–79	14·0	10·6	7·4	0·4
80–	11·3	5·0	13·6	0·0
Males				
20–24	6·7	1·3	0·0	0·0
25–29	9·3	4·0	4·6	0·7
30–34	4·8	5·6	0·9	0·0
35–39	8·2	3·5	1·1	0·0
40–44	13·5	3·4	3·0	0·0
45–49	13·6	6·9	3·6	0·6
50–54	17·1	8·5	5·4	0·2
55–59	22·5	13·3	8·1	0·6
60–64	20·2	15·8	7·0	0·2
65–69	18·3	17·8	10·1	0·4
70–74	17·2	15·0	14·6	1·2
75–79	15·4	18·2	13·7	1·3
80–	7·9	9·3	18·0	0·0
Number answered	10 035	9753	9753	9754

Table 50 Forced vital capacity (FVC) (l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	3.1	3.3	3.7	4.1	4.5	4.7	5.0
25–29	3.0	3.3	3.6	4.0	4.5	5.1	5.5
30–34	3.0	3.2	3.6	4.0	4.5	4.9	5.2
35–39	2.8	3.2	3.5	3.9	4.3	4.7	4.9
40–44	2.6	2.9	3.3	3.7	4.2	4.6	4.8
45–49	2.6	2.8	3.2	3.6	4.0	4.4	4.6
50–54	2.4	2.5	2.8	3.2	3.6	4.0	4.2
55–59	2.0	2.3	2.6	2.9	3.4	3.8	4.0
60–64	1.7	1.9	2.3	2.7	3.1	3.5	3.7
65–69	1.6	1.9	2.2	2.6	3.0	3.3	3.5
70–74	1.5	1.7	2.0	2.4	2.8	3.1	3.3
75–79	1.3	1.5	1.9	2.2	2.5	2.8	3.0
80–	1.1	1.3	1.7	2.0	2.4	2.7	2.9
Males							
20–24	4.7	4.9	5.3	5.7	6.8	7.3	7.7
25–29	4.3	4.5	5.0	5.5	6.1	6.7	7.2
30–34	4.0	4.6	5.0	5.5	6.2	6.7	7.3
35–39	4.1	4.3	4.8	5.3	5.8	6.3	6.5
40–44	3.8	4.0	4.5	5.0	5.7	6.2	6.6
45–49	3.6	3.8	4.4	4.9	5.4	6.0	6.4
50–54	3.2	3.5	3.8	4.4	5.0	5.6	5.9
55–59	2.6	3.0	3.6	4.1	4.7	5.3	5.8
60–64	2.5	2.8	3.3	3.9	4.4	4.9	5.2
65–69	2.2	2.4	3.0	3.5	4.0	4.5	4.9
70–74	2.1	2.4	2.9	3.4	3.8	4.3	4.6
75–79	1.8	2.0	2.6	3.2	3.7	4.2	4.5
80–	1.8	2.1	2.6	2.9	3.4	4.0	4.3
Number answered							
9622							

Table 51 Forced expiratory volume in the first second (FEV₁) (l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	2.8	2.9	3.2	3.6	3.9	4.1	4.3
25–29	2.6	2.8	3.1	3.4	3.8	4.1	4.4
30–34	2.5	2.7	3.0	3.4	3.7	4.0	4.2
35–39	2.2	2.5	2.9	3.2	3.5	3.8	4.0
40–44	2.1	2.3	2.7	3.0	3.4	3.8	3.9
45–49	2.1	2.2	2.5	2.9	3.2	3.5	3.7
50–54	1.6	1.9	2.2	2.6	2.9	3.2	3.4
55–59	1.4	1.7	2.0	2.4	2.7	3.0	3.2
60–64	1.0	1.3	1.8	2.1	2.5	2.7	2.9
65–69	1.1	1.3	1.6	2.0	2.3	2.6	2.7
70–74	0.9	1.2	1.5	1.9	2.2	2.5	2.6
75–79	0.8	1.1	1.4	1.7	2.0	2.2	2.4
80–	0.7	0.9	1.3	1.5	1.8	2.1	2.3
Males							
20–24	4.0	4.2	4.5	4.8	5.7	6.0	6.5
25–29	3.7	3.8	4.1	4.6	5.0	5.6	5.9
30–34	3.4	3.6	4.0	4.5	5.0	5.4	5.8
35–39	3.2	3.6	3.9	4.2	4.7	5.1	5.3
40–44	3.0	3.2	3.6	4.1	4.5	5.0	5.3
45–49	2.8	3.0	3.4	3.8	4.2	4.7	4.9
50–54	2.3	2.6	3.1	3.5	3.9	4.4	4.8
55–59	1.7	2.2	2.7	3.2	3.6	4.1	4.4
60–64	1.5	1.9	2.4	2.9	3.4	3.7	3.9
65–69	1.1	1.5	2.1	2.6	3.1	3.5	3.8
70–74	1.3	1.5	2.1	2.6	3.0	3.3	3.6
75–79	0.9	1.2	1.8	2.3	2.8	3.2	3.4
80–	1.2	1.3	1.7	2.2	2.5	3.0	3.2
Number answered							
9622							

Table 52 FEV₁/FVC (%)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	77	79	83	87	92	93	94
25–29	73	76	81	86	89	93	95
30–34	71	75	80	83	87	91	93
35–39	69	73	78	82	87	89	90
40–44	69	72	78	82	86	89	90
45–49	70	73	77	81	84	88	90
50–54	67	71	75	80	84	87	88
55–59	64	69	75	80	84	87	90
60–64	57	63	71	78	83	87	90
65–69	58	65	71	77	81	85	88
70–74	58	66	72	77	82	87	90
75–79	57	63	71	77	81	86	89
80–	55	62	71	76	81	85	90
Males							
20–24	74	77	81	84	89	93	94
25–29	72	75	79	83	88	91	94
30–34	70	72	78	82	85	88	91
35–39	71	72	76	81	85	87	89
40–44	70	73	77	81	85	88	90
45–49	67	70	75	80	84	87	89
50–54	64	70	75	79	83	87	88
55–59	58	63	71	77	82	86	88
60–64	56	61	69	76	81	84	86
65–69	50	56	66	74	80	84	88
70–74	54	59	69	75	80	85	87
75–79	49	56	66	73	79	83	87
80–	50	55	66	74	80	83	86

Number answered 9622

Table 53 Height (cm)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	158	159	162	168	171	173	177
25–29	157	158	163	168	172	176	179
30–34	157	160	163	168	173	178	179
35–39	156	159	163	167	172	176	177
40–44	155	158	162	166	171	174	177
45–49	155	158	162	166	170	173	175
50–54	154	156	160	164	168	171	174
55–59	153	155	159	163	167	171	174
60–64	152	154	158	161	166	170	172
65–69	151	153	157	161	165	169	171
70–74	150	152	156	159	164	168	171
75–79	149	151	154	158	162	166	169
80–	148	150	152	156	161	164	166
Males							
20–24	169	172	175	181	186	190	194
25–29	170	172	175	181	185	189	192
30–34	169	172	176	180	185	190	192
35–39	168	170	175	179	184	188	190
40–44	167	170	174	179	184	188	190
45–49	167	169	173	178	183	188	190
50–54	167	169	172	176	180	185	187
55–59	165	168	171	175	179	183	186
60–64	163	166	170	174	178	182	185
65–69	163	165	169	173	177	181	184
70–74	163	165	169	173	177	182	184
75–79	161	163	167	171	176	180	182
80–	158	160	165	170	174	179	182

Number answered 9741

Table 54 Weight (kg)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	50	52	55	62	67	76	77
25–29	49	52	57	62	68	74	81
30–34	52	53	57	61	68	76	81
35–39	51	54	59	64	71	78	87
40–44	52	54	58	64	70	80	90
45–49	51	55	59	66	73	80	85
50–54	51	54	60	67	76	85	93
55–59	51	55	61	67	76	87	93
60–64	49	52	58	67	76	84	92
65–69	48	52	58	65	74	83	90
70–74	48	52	57	65	74	83	89
75–79	49	51	56	63	72	82	89
80–	45	50	54	60	68	77	84
Males							
20–24	62	65	68	74	80	85	94
25–29	62	64	69	75	81	86	93
30–34	62	66	72	78	87	94	98
35–39	63	66	72	78	88	97	102
40–44	62	66	73	80	87	96	103
45–49	65	67	74	81	91	99	106
50–54	62	66	73	82	90	100	107
55–59	64	67	74	82	90	100	106
60–64	62	66	74	81	91	99	103
65–69	62	65	72	79	87	99	106
70–74	61	64	72	80	87	95	103
75–79	59	62	69	76	84	91	97
80–	57	61	65	72	79	86	89

Number answered 9721

Table 55 Body mass index (BMI) (kg/m^2)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	19.0	19.2	20.4	22.5	23.8	25.4	26.6
25–29	18.2	19.3	20.5	21.7	23.7	26.2	29.2
30–34	18.5	19.0	20.3	21.7	23.6	26.2	29.1
35–39	19.2	19.9	21.0	22.6	25.3	29.7	32.3
40–44	19.0	19.9	21.2	23.3	25.6	29.8	32.1
45–49	19.4	20.3	21.9	23.6	26.4	29.2	30.7
50–54	19.4	20.3	22.1	24.7	28.2	32.6	35.0
55–59	20.0	21.2	22.9	25.2	28.6	32.5	34.4
60–64	19.1	20.5	22.5	25.4	28.9	32.5	35.2
65–69	19.1	20.3	22.3	25.1	28.4	32.2	34.1
70–74	19.5	20.5	22.8	25.3	28.7	32.5	34.7
75–79	19.4	20.6	22.7	25.5	29.1	32.0	34.7
80–	18.9	20.0	22.5	24.8	27.9	31.3	34.2
Males							
20–24	19.8	20.4	21.3	22.7	23.6	25.3	26.5
25–29	19.3	19.9	21.4	23.2	24.7	25.7	27.3
30–34	19.8	21.1	22.2	23.9	26.0	28.5	30.4
35–39	20.1	21.2	22.7	24.5	26.7	29.7	31.3
40–44	20.2	21.3	23.0	24.8	27.2	29.5	32.1
45–49	21.0	21.8	23.5	25.4	27.9	30.6	33.0
50–54	20.5	21.7	23.6	26.0	28.6	31.9	33.7
55–59	21.0	22.3	24.2	26.6	29.3	31.8	34.2
60–64	20.9	22.4	24.3	26.8	29.6	31.9	33.3
65–69	21.0	22.1	24.2	26.1	29.1	32.4	34.1
70–74	21.1	22.2	24.0	26.5	28.8	31.6	33.2
75–79	20.6	21.8	23.7	26.0	28.4	30.7	33.4
80–	20.0	20.9	22.9	25.0	27.6	30.0	31.3

Number answered 9718

Table 56 Waist/hip

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	0.71	0.72	0.75	0.78	0.81	0.84	0.88
25–29	0.69	0.71	0.74	0.77	0.80	0.84	0.87
30–34	0.71	0.71	0.75	0.78	0.82	0.86	0.89
35–39	0.71	0.73	0.76	0.79	0.84	0.88	0.92
40–44	0.71	0.73	0.76	0.79	0.84	0.89	0.93
45–49	0.71	0.73	0.76	0.80	0.85	0.90	0.94
50–54	0.71	0.73	0.77	0.81	0.87	0.92	0.94
55–59	0.71	0.74	0.78	0.82	0.87	0.92	0.97
60–64	0.72	0.74	0.78	0.83	0.88	0.94	0.99
65–69	0.73	0.75	0.78	0.83	0.88	0.92	0.97
70–74	0.73	0.75	0.79	0.84	0.89	0.94	0.98
75–79	0.74	0.76	0.79	0.84	0.89	0.95	0.99
80–	0.74	0.76	0.80	0.85	0.90	0.96	1.00
Males							
20–24	0.78	0.79	0.81	0.85	0.88	0.91	0.94
25–29	0.78	0.80	0.82	0.86	0.89	0.92	0.95
30–34	0.80	0.82	0.85	0.89	0.93	0.97	0.99
35–39	0.81	0.83	0.87	0.90	0.94	0.97	1.02
40–44	0.82	0.84	0.88	0.91	0.95	1.01	1.04
45–49	0.83	0.85	0.89	0.93	0.97	1.02	1.04
50–54	0.84	0.86	0.90	0.94	0.99	1.03	1.07
55–59	0.84	0.87	0.91	0.96	1.01	1.05	1.08
60–64	0.87	0.89	0.92	0.97	1.02	1.06	1.09
65–69	0.86	0.88	0.92	0.96	1.01	1.06	1.09
70–74	0.87	0.89	0.92	0.97	1.02	1.06	1.09
75–79	0.83	0.87	0.91	0.96	1.01	1.04	1.09
80–	0.83	0.86	0.90	0.96	1.01	1.04	1.08

Number answered 9695

Table 57 Xanthelasmata and ear lobe crease

Sex and age	Xanthelasmata %	Ear lobe crease		
		None %	$\frac{1}{2}$ of the lobe %	$>\frac{1}{2}$ of the lobe %
Females				
20–24	0·0	96·8	3·2	0·0
25–29	0·5	99·5	0·5	0·0
30–34	0·0	99·2	0·8	0·0
35–39	1·0	97·1	2·9	0·0
40–44	0·9	96·1	3·3	0·6
45–49	1·9	90·1	8·0	1·9
50–54	3·9	84·4	10·7	4·9
55–59	2·6	73·9	19·2	6·9
60–64	5·2	72·0	18·2	9·8
65–69	3·6	66·5	19·7	13·8
70–74	4·8	58·0	25·0	17·0
75–79	4·7	56·1	27·1	16·8
80–	3·5	57·0	24·8	18·2
Males				
20–24	0·0	97·3	2·7	0·0
25–29	0·7	98·0	2·0	0·0
30–34	0·0	99·1	0·9	0·0
35–39	0·7	96·1	2·1	1·8
40–44	2·6	93·2	4·9	1·9
45–49	1·8	83·3	11·2	5·5
50–54	3·3	78·2	15·9	5·9
55–59	4·4	68·8	21·2	10·0
60–64	5·7	66·3	21·0	12·6
65–69	5·8	62·4	22·2	15·4
70–74	5·7	55·8	23·7	20·5
75–79	5·4	59·4	20·1	20·4
80–	3·3	59·6	24·0	16·4
Number answered	9744	9734		

Table 58 Corneal arcus

Sex and age	No corneal arcus %	Upper corneal arcus %	Lower corneal arcus %	Complete corneal arcus %
Females				
20-24	100.0	0.0	0.0	0.0
25-29	100.0	0.0	0.0	0.0
30-34	98.8	0.4	0.4	0.4
35-39	98.1	1.9	0.0	0.0
40-44	96.7	2.4	0.0	0.9
45-49	95.0	4.0	0.3	0.6
50-54	89.8	5.9	1.0	3.3
55-59	82.2	9.9	1.0	6.9
60-64	71.1	16.4	0.5	12.0
65-69	63.0	20.6	0.8	15.6
70-74	51.3	25.9	1.0	21.8
75-79	41.7	23.7	1.1	33.5
80-	36.4	28.3	1.6	33.7
Males				
20-24	100.0	0.0	0.0	0.0
25-29	99.3	0.7	0.0	0.0
30-34	99.1	0.9	0.0	0.0
35-39	96.8	1.8	0.7	0.7
40-44	93.6	4.5	0.7	1.1
45-49	92.1	6.4	0.6	0.9
50-54	83.3	11.1	0.4	5.2
55-59	71.3	15.2	1.0	12.5
60-64	61.5	17.7	2.3	18.5
65-69	51.3	22.4	1.6	24.8
70-74	43.5	21.3	2.4	32.7
75-79	31.0	25.2	1.6	42.2
80-	18.0	21.9	1.1	59.0
Number answered	9740			

Table 59 Systolic blood pressure (mmHg)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	95	100	107	113	120	127	130
25–29	100	101	108	115	121	128	130
30–34	95	98	105	111	120	129	131
35–39	98	103	108	118	124	135	140
40–44	102	105	110	119	128	138	148
45–49	100	106	115	124	138	148	154
50–54	105	110	118	130	142	155	165
55–59	110	114	121	132	145	160	170
60–64	110	117	128	140	155	170	181
65–69	113	120	130	144	160	176	190
70–74	115	123	135	148	165	180	188
75–79	120	126	139	151	170	181	190
80–	120	129	140	152	170	185	200
Males							
20–24	105	110	119	125	130	137	141
25–29	106	110	118	125	132	140	148
30–34	105	110	115	125	130	140	145
35–39	108	110	120	127	135	144	151
40–44	110	113	120	129	137	146	156
45–49	110	115	121	132	141	153	164
50–54	110	115	125	135	144	160	170
55–59	112	118	127	140	153	166	175
60–64	115	120	130	144	159	174	184
65–69	115	121	133	148	161	175	185
70–74	120	127	139	150	165	184	192
75–79	118	125	137	150	165	178	190
80–	110	120	130	145	164	180	194

Number answered 10 024

Table 60 Diastolic blood pressure (phase 5) (mmHg)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	60	61	65	72	80	84	87
25–29	58	60	65	71	80	85	87
30–34	60	62	66	74	80	89	92
35–39	60	64	70	75	84	91	96
40–44	63	65	71	78	85	92	100
45–49	62	66	74	81	90	97	102
50–54	65	70	77	83	91	100	105
55–59	68	70	78	85	92	99	104
60–64	69	71	78	85	93	100	107
65–69	65	70	76	85	92	100	105
70–74	65	70	77	85	92	100	104
75–79	65	70	76	85	93	100	105
80–	60	65	74	80	90	95	102
Males							
20–24	65	65	70	78	83	89	94
25–29	60	65	72	78	86	90	99
30–34	62	65	74	80	86	94	96
35–39	65	70	77	84	90	96	102
40–44	68	71	79	86	94	100	105
45–49	70	72	80	88	94	101	105
50–54	70	75	80	87	95	104	108
55–59	72	75	80	89	96	105	110
60–64	70	75	80	88	95	105	110
65–69	70	72	80	87	95	104	110
70–74	68	70	79	86	95	103	107
75–79	65	70	77	84	93	100	105
80–	60	65	72	80	88	95	100

Number answered 10 024

Table 61 Total cholesterol (mmol/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	3.5	4.0	4.5	5.0	5.4	6.2	6.9
25–29	3.6	3.8	4.2	4.8	5.4	6.0	6.6
30–34	3.8	4.0	4.4	4.8	5.5	6.0	6.5
35–39	3.9	4.1	4.6	5.1	5.7	6.5	6.9
40–44	4.0	4.3	4.8	5.4	6.0	6.7	7.2
45–49	4.0	4.5	4.9	5.7	6.5	7.2	7.6
50–54	4.7	5.0	5.4	6.1	7.0	7.8	8.4
55–59	4.8	5.1	5.8	6.4	7.2	8.0	8.7
60–64	4.8	5.3	6.0	6.8	7.7	8.4	9.1
65–69	4.8	5.4	5.9	6.7	7.5	8.4	8.9
70–74	5.0	5.3	5.9	6.7	7.4	8.3	8.9
75–79	5.0	5.3	5.9	6.6	7.4	8.2	8.7
80–	4.7	5.1	5.9	6.5	7.5	8.4	9.0
Males							
20–24	3.5	3.8	4.1	4.6	5.1	5.6	5.9
25–29	3.6	3.9	4.3	4.8	5.6	6.3	6.7
30–34	3.8	4.1	4.7	5.2	5.9	6.7	7.2
35–39	3.9	4.1	4.7	5.3	6.2	7.2	7.6
40–44	4.3	4.6	5.1	5.8	6.6	7.3	8.1
45–49	4.1	4.5	5.1	5.9	6.7	7.7	8.3
50–54	4.4	4.7	5.3	6.0	6.7	7.5	8.1
55–59	4.6	4.9	5.6	6.2	6.9	7.7	8.2
60–64	4.4	4.8	5.4	6.1	6.9	7.7	8.2
65–69	4.5	4.9	5.4	6.1	6.8	7.6	8.2
70–74	4.3	4.8	5.3	6.1	6.8	7.5	8.1
75–79	4.2	4.6	5.2	6.0	6.7	7.5	7.9
80–	4.0	4.5	5.2	5.9	6.5	7.2	7.8

Number answered 9921

Table 62 HDL-cholesterol (mmol/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	1.2	1.3	1.4	1.7	1.9	2.3	2.6
25–29	1.0	1.2	1.4	1.6	1.9	2.3	2.4
30–34	1.1	1.2	1.4	1.7	1.9	2.1	2.3
35–39	1.1	1.2	1.5	1.7	2.0	2.3	2.5
40–44	1.1	1.2	1.4	1.6	1.9	2.3	2.4
45–49	1.1	1.2	1.4	1.7	1.9	2.4	2.6
50–54	1.0	1.1	1.4	1.6	2.0	2.4	2.7
55–59	1.0	1.2	1.4	1.7	2.0	2.4	2.6
60–64	1.0	1.1	1.4	1.6	2.0	2.4	2.7
65–69	1.0	1.2	1.4	1.7	2.1	2.4	2.7
70–74	1.0	1.1	1.3	1.7	2.0	2.4	2.7
75–79	1.0	1.2	1.4	1.7	2.0	2.4	2.7
80–	1.0	1.1	1.3	1.6	2.0	2.3	2.6
Males							
20–24	0.8	1.0	1.2	1.4	1.6	1.7	2.0
25–29	0.9	0.9	1.0	1.3	1.6	1.7	1.9
30–34	0.8	1.0	1.1	1.3	1.5	1.8	2.0
35–39	0.8	0.9	1.1	1.3	1.5	1.7	2.0
40–44	0.8	0.9	1.1	1.3	1.6	1.8	1.9
45–49	0.8	0.9	1.1	1.3	1.6	1.9	2.0
50–54	0.8	0.9	1.1	1.4	1.6	2.0	2.2
55–59	0.8	0.9	1.1	1.3	1.6	2.0	2.2
60–64	0.8	0.9	1.1	1.3	1.6	1.9	2.2
65–69	0.8	0.9	1.1	1.3	1.6	2.0	2.3
70–74	0.8	0.9	1.1	1.4	1.6	2.0	2.2
75–79	0.8	0.9	1.1	1.4	1.7	2.1	2.3
80–	0.8	1.0	1.1	1.4	1.7	2.0	2.2

Number answered 9904

Table 63 Triglycerides (mmol/l) (non-fasting)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	0.47	0.62	0.74	0.97	1.47	1.88	2.62
25–29	0.54	0.63	0.79	1.07	1.44	1.76	2.20
30–34	0.53	0.58	0.71	0.97	1.36	2.00	2.35
35–39	0.56	0.64	0.82	1.07	1.48	2.33	3.03
40–44	0.60	0.68	0.84	1.10	1.59	2.34	2.82
45–49	0.56	0.67	0.87	1.16	1.71	2.54	3.05
50–54	0.70	0.85	1.05	1.47	2.12	3.04	3.75
55–59	0.74	0.86	1.05	1.48	2.14	2.78	3.64
60–64	0.83	0.95	1.22	1.64	2.37	3.38	4.05
65–69	0.83	0.93	1.18	1.57	2.28	2.93	3.69
70–74	0.83	0.96	1.21	1.63	2.30	3.10	3.74
75–79	0.83	0.93	1.21	1.56	2.13	2.80	3.27
80–	0.88	0.99	1.24	1.60	2.22	2.86	3.75
Males							
20–24	0.58	0.67	0.81	1.07	1.44	1.83	2.29
25–29	0.64	0.75	0.94	1.27	1.73	2.87	3.37
30–34	0.73	0.83	1.03	1.44	2.21	3.44	4.20
35–39	0.67	0.83	1.05	1.50	2.23	3.29	4.24
40–44	0.76	0.88	1.23	1.75	2.49	3.46	4.37
45–49	0.79	0.90	1.17	1.74	2.62	4.26	5.84
50–54	0.79	0.95	1.22	1.76	2.50	3.68	5.02
55–59	0.76	0.90	1.25	1.86	2.93	4.21	5.96
60–64	0.78	0.95	1.30	1.82	2.83	3.95	4.89
65–69	0.85	0.96	1.25	1.78	2.44	3.40	4.58
70–74	0.84	0.96	1.24	1.77	2.42	3.43	4.20
75–79	0.76	0.89	1.29	1.71	2.43	3.25	3.88
80–	0.76	0.89	1.19	1.56	2.12	2.95	3.79

Number answered 9832

Table 64 Apolipoprotein A1 (mg/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	108	114	130	144	159	184	208
25–29	102	110	124	140	161	182	191
30–34	104	114	124	139	155	170	176
35–39	110	118	129	142	162	175	191
40–44	110	116	126	143	162	174	181
45–49	107	117	131	145	162	183	199
50–54	109	117	130	150	172	189	202
55–59	110	119	131	149	170	190	201
60–64	108	121	133	151	171	190	202
65–69	109	120	136	153	174	196	210
70–74	108	117	132	153	174	194	205
75–79	107	119	135	153	173	189	201
80–	108	116	129	148	167	189	198
Males							
20–24	93	99	107	119	133	146	166
25–29	89	95	105	120	137	150	154
30–34	96	99	108	122	137	148	163
35–39	93	99	107	119	134	152	165
40–44	92	97	110	125	138	157	162
45–49	94	100	111	126	146	159	171
50–54	94	102	113	131	149	167	176
55–59	96	103	116	132	148	165	177
60–64	96	103	113	128	145	168	180
65–69	96	102	112	127	146	165	180
70–74	97	104	115	130	147	164	175
75–79	97	102	116	131	150	171	178
80–	91	97	111	126	144	163	175

Number answered 9883

Table 65 Apolipoprotein B (mg/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20-24	39	44	53	64	73	82	98
25-29	39	43	49	60	74	84	100
30-34	43	48	53	62	74	86	98
35-39	42	47	54	65	78	94	100
40-44	47	51	59	71	85	98	106
45-49	47	51	65	76	91	106	113
50-54	55	61	72	83	98	117	126
55-59	59	65	76	89	103	122	134
60-64	60	67	79	93	113	128	138
65-69	62	68	79	91	109	124	133
70-74	61	68	78	92	107	122	134
75-79	60	66	76	91	106	119	127
80-	62	67	78	91	108	122	131
Males							
20-24	42	45	50	60	69	80	89
25-29	44	49	56	67	79	93	96
30-34	50	54	61	72	85	97	111
35-39	50	55	63	74	94	107	114
40-44	56	61	71	83	100	114	123
45-49	56	60	72	85	100	116	124
50-54	53	61	72	87	103	115	125
55-59	59	65	79	91	104	119	128
60-64	56	62	75	89	103	118	128
65-69	58	65	74	89	102	118	128
70-74	56	64	76	90	104	117	127
75-79	55	60	74	86	100	114	121
80-	53	59	72	84	100	114	122

Number answered 9885

Table 66 Lipoprotein(a) (mg/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20-24	2	22	46	127	267	532	863
25-29	0	11	42	139	329	615	959
30-34	2	11	42	133	369	736	1037
35-39	6	19	44	130	331	679	1101
40-44	5	13	44	150	384	706	1097
45-49	0	9	46	130	312	698	1058
50-54	2	14	63	181	453	1037	1378
55-59	2	16	70	207	419	914	1256
60-64	2	14	60	185	431	903	1219
65-69	3	11	69	206	440	908	1223
70-74	5	18	90	214	460	1042	1348
75-79	1	20	76	205	478	993	1374
80-	5	12	83	218	474	938	1242
Males							
20-24	0	7	55	130	402	722	944
25-29	0	7	41	131	325	708	818
30-34	0	6	50	163	400	693	952
35-39	0	9	51	146	333	790	1141
40-44	2	15	55	175	442	849	1199
45-49	0	11	54	148	313	696	1084
50-54	0	8	40	139	397	708	1067
55-59	0	5	44	150	383	799	1190
60-64	0	7	52	153	406	824	1138
65-69	0	12	54	151	377	838	1191
70-74	0	10	55	171	361	713	1080
75-79	0	9	47	178	397	801	1145
80-	0	5	57	175	383	890	1278

Number answered 9832

Table 67 Glucose (mmol/l) (non-fasting)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	3.4	4.0	4.3	4.8	5.0	5.5	5.8
25–29	3.8	4.0	4.5	4.9	5.2	5.5	5.8
30–34	4.0	4.2	4.6	5.0	5.4	6.1	6.4
35–39	4.0	4.4	4.7	5.0	5.6	6.1	6.6
40–44	3.9	4.1	4.7	5.0	5.6	6.2	6.7
45–49	4.2	4.5	4.8	5.1	5.7	6.5	7.3
50–54	4.3	4.6	4.9	5.3	5.8	6.6	7.5
55–59	4.3	4.6	5.0	5.4	6.1	7.1	8.2
60–64	4.3	4.6	5.0	5.4	6.1	7.0	8.1
65–69	4.4	4.7	5.0	5.5	6.0	6.9	7.6
70–74	4.4	4.7	5.1	5.5	6.2	7.3	8.7
75–79	4.4	4.6	5.1	5.5	6.1	7.0	8.3
80–	4.6	4.8	5.1	5.6	6.3	7.5	9.0
Males							
20–24	3.6	3.9	4.2	4.8	5.2	5.8	5.9
25–29	4.1	4.2	4.7	5.1	5.5	6.0	6.8
30–34	4.1	4.5	4.9	5.2	5.8	6.6	7.6
35–39	4.1	4.5	4.9	5.3	5.8	6.5	7.1
40–44	4.3	4.6	5.0	5.4	5.9	6.5	7.1
45–49	4.4	4.7	5.1	5.4	6.1	7.5	8.1
50–54	4.4	4.7	5.1	5.5	6.2	7.0	8.5
55–59	4.4	4.7	5.1	5.7	6.6	8.7	11.9
60–64	4.5	4.8	5.3	5.8	6.7	8.1	10.2
65–69	4.5	4.7	5.1	5.7	6.5	8.0	11.5
70–74	4.4	4.7	5.1	5.7	6.7	8.5	11.4
75–79	4.5	4.7	5.1	5.8	6.7	8.5	10.4
80–	4.5	4.7	5.1	5.8	6.5	8.4	9.7

Number answered 9824

Table 68 Fibrinogen (g/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	1.8	1.9	2.2	2.5	3.0	3.3	3.8
25–29	1.7	1.9	2.2	2.5	2.9	3.5	4.0
30–34	1.8	1.9	2.1	2.4	2.9	3.6	4.0
35–39	1.7	1.9	2.1	2.5	3.0	3.4	3.7
40–44	1.7	2.0	2.2	2.6	3.0	3.6	4.0
45–49	1.9	2.0	2.3	2.7	3.2	3.8	4.2
50–54	2.0	2.1	2.5	2.9	3.4	4.0	4.4
55–59	2.1	2.3	2.6	3.1	3.6	4.2	4.7
60–64	2.1	2.3	2.7	3.2	3.8	4.5	4.8
65–69	2.1	2.4	2.8	3.2	3.8	4.6	4.9
70–74	2.2	2.4	2.8	3.2	3.9	4.5	5.0
75–79	2.2	2.4	2.8	3.3	3.9	4.5	4.9
80–	2.3	2.5	2.9	3.4	3.9	4.5	4.9
Males							
20–24	1.6	1.7	1.9	2.2	2.6	2.9	3.1
25–29	1.5	1.7	1.9	2.2	2.4	2.8	3.2
30–34	1.6	1.7	2.0	2.4	2.8	3.2	3.4
35–39	1.7	1.9	2.2	2.5	2.9	3.3	3.7
40–44	1.8	1.9	2.3	2.7	3.2	3.7	4.2
45–49	1.9	2.0	2.4	2.8	3.3	3.8	4.3
50–54	2.0	2.2	2.5	2.9	3.4	4.1	4.6
55–59	2.0	2.2	2.6	3.0	3.5	4.1	4.7
60–64	2.1	2.3	2.6	3.1	3.8	4.5	4.8
65–69	2.2	2.4	2.7	3.3	3.8	4.6	5.1
70–74	2.2	2.4	2.8	3.3	3.9	4.5	5.1
75–79	2.0	2.3	2.7	3.2	4.0	4.9	5.5
80–	2.1	2.3	2.7	3.2	4.0	4.8	5.0

Number answered 9392

Table 69 ASAT (IU)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	14	14	16	18	21	23	25
25–29	12	13	15	18	20	24	28
30–34	12	13	14	16	20	24	26
35–39	12	13	15	17	20	24	28
40–44	12	13	15	18	21	25	29
45–49	12	13	15	18	21	26	31
50–54	12	14	16	20	24	31	44
55–59	13	14	17	20	23	29	37
60–64	14	15	17	20	24	29	34
65–69	14	15	17	20	24	30	38
70–74	13	15	17	21	25	30	34
75–79	14	15	18	21	26	31	35
80–	14	15	18	21	25	30	33
Males							
20–24	16	16	18	20	24	31	37
25–29	14	15	17	21	27	31	36
30–34	14	15	18	21	26	33	42
35–39	14	16	19	22	27	38	51
40–44	14	16	18	23	28	35	43
45–49	15	16	19	22	27	33	42
50–54	15	16	19	23	29	40	52
55–59	14	16	19	23	30	41	49
60–64	14	15	18	22	28	40	49
65–69	14	15	18	21	26	36	48
70–74	14	15	18	21	26	33	44
75–79	14	15	17	21	25	31	34
80–	13	15	17	21	25	32	36
Number answered	9918						

Table 70 Albumin (g/l)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	449	454	474	489	513	533	536
25–29	438	449	472	490	510	521	533
30–34	426	451	467	486	505	519	527
35–39	448	456	471	489	504	517	526
40–44	443	452	467	482	498	514	525
45–49	444	451	466	482	497	511	523
50–54	439	449	467	486	501	514	522
55–59	438	450	465	482	500	517	525
60–64	440	449	463	479	497	509	521
65–69	434	440	457	474	491	507	518
70–74	429	440	455	471	487	503	512
75–79	429	437	453	468	485	500	508
80–	421	431	446	464	481	498	508
Males							
20–24	486	491	501	518	533	549	558
25–29	470	478	497	511	528	542	556
30–34	466	475	488	506	524	536	540
35–39	461	471	483	502	519	532	545
40–44	455	470	480	495	514	529	536
45–49	458	467	480	494	513	526	535
50–54	447	456	473	489	505	517	526
55–59	440	455	469	486	502	518	526
60–64	437	447	462	480	496	511	518
65–69	435	445	458	475	491	511	521
70–74	431	441	457	474	492	505	515
75–79	428	436	453	470	484	499	511
80–	422	431	447	467	485	504	519
Number answered	9920						

Table 71 Creatinine ($\mu\text{mol/l}$)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	67	69	78	82	87	91	94
25–29	68	70	75	82	89	95	97
30–34	64	69	74	80	86	93	96
35–39	67	70	75	81	88	93	98
40–44	69	72	76	82	87	93	100
45–49	67	70	76	82	88	93	98
50–54	68	71	76	82	88	95	99
55–59	69	72	77	84	90	97	103
60–64	68	71	77	84	90	98	105
65–69	66	71	77	84	92	100	108
70–74	70	73	79	86	96	104	111
75–79	70	74	80	88	97	109	120
80–	69	74	82	92	105	122	134
Males							
20–24	83	84	90	94	100	104	106
25–29	83	88	92	97	103	109	113
30–34	81	85	89	94	102	109	112
35–39	80	84	90	97	104	111	114
40–44	78	84	90	97	104	109	112
45–49	78	82	87	93	100	107	113
50–54	80	83	89	95	101	109	115
55–59	78	83	89	96	103	112	119
60–64	78	82	88	96	104	112	119
65–69	80	83	90	98	108	118	127
70–74	82	86	93	101	111	123	133
75–79	83	88	95	103	115	130	142
80–	82	86	97	110	127	146	158
Number answered	8082						

Table 72 Resting pulse rate (beats per minute)

Sex and age	5%	10%	25%	50%	75%	90%	95%
Females							
20–24	47	55	59	67	77	81	83
25–29	51	56	62	70	77	83	87
30–34	50	56	63	69	78	85	91
35–39	53	57	63	71	78	86	94
40–44	54	58	64	70	78	86	90
45–49	56	60	66	72	80	89	94
50–54	56	60	64	72	80	88	94
55–59	55	58	64	71	80	90	96
60–64	56	59	66	73	83	93	99
65–69	56	58	66	73	81	90	94
70–74	55	59	65	72	81	90	96
75–79	55	60	65	72	81	92	95
80–	53	58	66	74	82	92	95
Males							
20–24	50	53	58	66	75	84	92
25–29	47	50	58	65	75	81	87
30–34	49	52	59	67	76	85	91
35–39	50	54	61	69	77	84	90
40–44	53	56	62	68	76	84	91
45–49	55	59	64	72	79	89	95
50–54	54	58	64	71	80	89	95
55–59	55	58	63	72	81	95	101
60–64	55	59	65	73	82	92	101
65–69	53	58	64	72	82	92	99
70–74	51	56	63	71	83	94	99
75–79	52	57	64	72	83	90	95
80–	53	56	65	71	82	88	95
Number answered	9741						

Table 73 Minnesota code — Q-waves, axis deviation and R-wave

Sex and age	1.1 %	1.2 %	1.3 %	2.1+2.4 %	2.2+2.3 %	3.1 %	3.2 %	3.3 %
Females								
20–24	0.0	1.6	0.0	1.6	1.6	0.0	1.6	0.0
25–29	0.0	0.5	0.0	0.0	0.5	1.5	0.0	0.5
30–34	0.0	2.0	0.0	0.0	2.4	0.4	0.0	1.6
35–39	0.0	1.3	0.3	1.0	1.3	0.6	0.0	1.9
40–44	0.0	1.5	0.3	1.2	0.9	0.6	0.0	1.5
45–49	0.0	2.5	0.6	0.6	0.9	1.2	0.0	0.6
50–54	0.2	1.0	0.4	2.1	0.4	2.3	0.0	2.7
55–59	0.5	2.3	0.5	2.8	0.3	2.8	0.0	2.3
60–64	0.5	3.0	1.7	3.0	0.5	3.5	0.0	4.3
65–69	0.5	3.0	1.7	4.0	0.5	4.0	0.1	3.4
70–74	1.0	2.2	1.8	5.6	0.4	5.4	0.5	3.3
75–79	0.9	3.0	1.3	7.1	0.6	8.3	0.4	4.5
80–	0.8	1.6	5.2	8.7	0.0	15.1	0.4	5.2
Males								
20–24	0.0	0.0	0.0	1.3	9.3	17.3	0.0	13.3
25–29	0.0	2.6	0.0	1.3	1.3	14.6	0.0	11.3
30–34	0.0	0.9	0.0	1.7	2.6	9.6	0.4	5.7
35–39	0.7	0.0	1.4	2.5	2.5	6.8	0.0	4.6
40–44	0.4	0.0	0.0	1.5	0.8	5.3	0.0	4.5
45–49	0.0	1.2	1.5	2.4	0.9	4.2	0.0	4.8
50–54	0.7	1.5	0.7	3.1	0.7	5.4	0.4	3.9
55–59	1.5	1.9	0.6	6.5	0.2	4.4	0.0	3.8
60–64	1.9	3.6	1.9	7.3	0.2	4.8	0.0	3.4
65–69	2.4	3.2	3.4	9.0	0.2	3.4	0.2	3.6
70–74	1.7	2.9	2.9	11.6	0.4	6.2	0.0	2.7
75–79	2.9	3.9	2.3	11.3	0.6	5.2	0.0	3.9
80–	2.8	6.2	3.4	12.9	0.6	9.0	0.6	1.7
Number answered	9690		9679		9697			

Table 74 Minnesota code — ST depression and T-wave

Sex and age	4.1 %	4.2 %	4.3 %	4.4 %	5.1 %	5.2 %	5.3 %
Females							
20–24	0·0	0·0	0·0	0·0	0·0	1·6	0·0
25–29	0·0	0·0	0·5	0·0	0·0	0·5	0·5
30–34	0·0	0·0	0·0	0·0	0·0	0·4	0·0
35–39	0·3	1·0	0·0	0·0	0·0	0·6	1·6
40–44	0·0	0·9	0·3	0·0	0·0	0·0	1·5
45–49	0·0	0·6	0·0	0·0	0·0	0·3	0·9
50–54	0·0	0·8	0·8	0·0	0·2	1·0	3·7
55–59	0·5	1·7	2·4	0·2	0·3	2·1	4·9
60–64	1·0	4·1	2·9	0·0	0·3	4·3	9·2
65–69	1·5	4·4	2·4	0·3	0·0	5·8	6·9
70–74	2·6	8·2	4·1	0·0	0·3	8·0	11·9
75–79	2·1	9·4	2·8	0·2	0·2	9·4	12·6
80–	6·0	9·5	5·6	0·8	1·2	12·3	15·1
Males							
20–24	0·0	0·0	0·0	0·0	0·0	0·0	0·0
25–29	0·0	0·0	0·7	0·0	0·0	1·3	0·0
30–34	0·0	0·4	0·4	0·0	0·0	1·3	0·0
35–39	0·0	0·7	0·0	0·0	0·0	0·7	0·7
40–44	0·0	1·1	0·0	0·0	0·0	1·1	1·1
45–49	0·0	0·3	0·6	0·0	0·0	1·2	1·2
50–54	0·4	1·3	1·3	0·4	0·0	1·7	3·3
55–59	1·7	3·3	1·3	0·2	0·2	5·2	5·2
60–64	1·3	5·2	3·1	0·2	0·0	6·5	9·0
65–69	2·2	6·2	3·6	0·2	0·0	7·6	10·4
70–74	2·7	10·3	4·8	0·0	0·2	12·0	12·8
75–79	4·9	7·1	4·9	1·0	0·0	9·4	14·6
80–	5·1	13·5	5·1	0·6	0·6	18·0	11·2
Number answered	9691			9691			

Table 75 Minnesota code — A-V conduction defects

Sex and age	6.1 third degree A-V block %	6.2 second degree A-V block %	6.3 first degree A-V block %	6.4 WPW %	6.5 P-Q <0.12 s %
Females					
20–24	0·0	0·0	0·0	1·6	6·3
25–29	0·0	0·0	0·0	0·0	5·0
30–34	0·0	0·0	0·0	0·8	4·4
35–39	0·0	0·0	0·0	0·0	4·9
40–44	0·0	0·0	0·6	0·0	3·6
45–49	0·0	0·0	0·0	0·0	4·6
50–54	0·0	0·0	0·2	0·0	2·7
55–59	0·0	0·0	0·2	0·0	1·7
60–64	0·2	0·0	0·5	0·0	1·4
65–69	0·0	0·0	0·7	0·3	2·2
70–74	0·1	0·1	0·8	0·0	2·0
75–79	0·0	0·0	2·4	0·0	0·9
80–	0·0	0·4	1·2	0·4	0·0
Males					
20–24	0·0	0·0	0·0	0·0	2·7
25–29	0·0	0·0	2·0	0·0	2·0
30–34	0·0	0·0	0·0	0·0	1·3
35–39	0·0	0·0	0·4	0·0	0·7
40–44	0·0	0·0	0·0	0·0	0·8
45–49	0·0	0·0	1·2	0·0	1·5
50–54	0·0	0·0	0·4	0·2	0·4
55–59	0·0	0·0	1·3	0·0	0·8
60–64	0·0	0·0	1·9	0·0	0·8
65–69	0·0	0·0	2·2	0·0	0·4
70–74	0·4	0·2	3·5	0·0	0·8
75–79	0·0	0·0	4·5	0·0	1·0
80–	0·0	0·0	11·2	0·0	1·1
Number answered	9696				

Table 76 Minnesota code — Ventricular conduction defects

Sex and age	7.1 left bundle branch block %	7.2 right bundle branch block %	7.3 incomplete right bundle branch block %	7.4 %	7.5 %	7.6 incomplete left bundle branch block %
Females						
20–24	1·6	0·0	1·6	0·0	3·2	0·0
25–29	0·0	0·0	2·0	0·0	3·0	0·5
30–34	0·0	0·0	1·2	0·0	2·0	0·0
35–39	0·0	0·0	1·3	0·0	3·2	0·0
40–44	0·0	0·0	0·6	0·0	4·2	0·3
45–49	0·3	0·0	0·9	0·3	2·2	0·0
50–54	0·4	0·8	2·7	0·0	3·5	0·0
55–59	0·9	0·0	1·9	0·3	2·1	0·2
60–64	1·1	0·6	2·1	0·0	2·5	0·9
65–69	0·8	1·3	2·8	0·7	2·6	0·0
70–74	1·1	1·4	3·1	0·4	1·5	0·8
75–79	1·9	2·4	3·0	0·6	3·4	1·9
80–	2·4	4·0	2·0	1·2	2·0	0·8
Males						
20–24	0·0	0·0	6·7	0·0	12·0	1·3
25–29	0·0	1·3	2·6	0·7	4·0	2·0
30–34	0·0	0·0	3·9	0·4	4·3	0·9
35–39	0·0	0·0	2·9	0·7	4·3	0·7
40–44	0·8	0·8	1·1	0·4	4·9	1·5
45–49	0·0	0·3	3·0	0·9	2·4	0·6
50–54	0·7	0·9	3·1	0·9	4·6	0·4
55–59	0·4	1·7	1·7	0·8	2·9	1·0
60–64	1·0	2·1	3·4	0·8	3·3	1·0
65–69	1·8	2·8	3·2	1·4	3·0	1·2
70–74	1·4	3·9	2·5	1·4	2·9	2·5
75–79	1·3	6·5	1·6	3·9	1·6	1·9
80–	1·7	9·6	5·1	2·8	2·8	2·2
Number answered	9697					

Table 77 Minnesota code — Arrhythmias

Sex and age	8.1 %	8.3 atrial fibrillation %	8.4 %	8.5 %	8.6 %	8.7 %	8.8 %	8.9 %	8.0 %
Females									
20–24	1.6	0.0	0.0	0.0	0.0	1.6	4.8	6.3	0.0
25–29	0.0	0.0	0.0	0.0	0.0	0.5	1.0	8.0	0.0
30–34	0.0	0.0	0.0	0.0	0.0	2.0	2.8	3.2	0.0
35–39	0.6	0.0	0.0	0.0	0.0	1.6	1.3	1.6	0.0
40–44	0.9	0.0	0.0	0.0	0.0	0.6	0.9	1.2	0.0
45–49	0.6	0.0	0.0	0.0	0.0	1.5	0.6	1.5	0.0
50–54	0.2	0.0	0.0	0.0	0.0	2.9	1.0	0.6	0.0
55–59	1.6	0.0	0.0	0.0	0.0	2.3	0.9	0.2	0.0
60–64	1.9	0.3	0.0	0.0	0.0	3.5	0.6	0.3	0.0
65–69	1.5	1.2	0.0	0.0	0.0	1.9	0.7	0.8	0.1
70–74	1.4	2.6	0.0	0.1	0.0	2.9	0.6	1.1	0.1
75–79	3.4	2.4	0.2	0.0	0.0	2.1	0.2	1.5	0.2
80–	3.6	4.8	0.0	0.0	0.0	1.2	1.6	2.0	1.2
Males									
20–24	0.0	0.0	0.0	0.0	0.0	2.7	2.7	0.0	0.0
25–29	0.0	0.0	0.0	0.0	0.0	1.3	7.9	3.3	0.0
30–34	0.4	0.0	0.0	0.0	0.0	1.7	5.7	3.5	0.0
35–39	0.0	0.0	0.0	0.0	0.0	0.7	3.2	2.9	0.0
40–44	0.4	0.4	0.0	0.0	0.0	1.5	1.9	0.8	0.0
45–49	0.9	0.3	0.0	0.0	0.0	2.4	0.9	1.5	0.0
50–54	0.7	0.0	0.0	0.0	0.0	2.6	2.2	0.2	0.0
55–59	1.0	1.5	0.0	0.0	0.0	4.2	1.0	1.0	0.2
60–64	1.3	2.5	0.2	0.0	0.0	4.2	1.1	1.1	0.0
65–69	2.2	2.4	0.0	0.0	0.0	3.6	2.2	1.2	0.2
70–74	3.5	5.6	0.0	0.0	0.0	3.9	2.5	1.2	0.2
75–79	5.2	8.4	0.0	0.0	0.0	1.3	1.6	1.6	0.3
80–	6.2	11.8	0.0	0.0	0.0	1.7	2.2	2.8	0.0
Number answered	9700								

Table 78 Minnesota code — Miscellaneous items at rest

Sex and age	9.1 %	9.2 %	9.3 %	9.4.1 %	9.4.2 %	9.5 %	9.0 %
Females							
20–24	0·0	0·0	0·0	4·8	57·1	0·0	3·2
25–29	0·0	0·0	0·0	7·5	46·2	0·5	1·0
30–34	0·4	0·4	0·0	4·4	56·3	0·0	0·0
35–39	0·3	0·0	0·3	6·2	51·9	0·6	1·3
40–44	0·0	0·0	0·0	4·8	53·5	0·0	2·1
45–49	0·0	0·0	0·0	3·4	55·2	0·3	1·5
50–54	0·6	0·0	0·0	5·8	52·3	0·0	1·6
55–59	0·0	0·0	0·3	7·8	52·5	0·0	2·1
60–64	0·3	0·0	0·3	8·5	52·0	0·2	2·1
65–69	0·0	0·0	0·7	8·2	47·0	0·1	3·0
70–74	0·1	0·0	0·3	12·2	44·5	0·1	3·7
75–79	0·0	0·2	0·2	13·8	43·8	0·4	3·0
80–	0·0	0·4	0·0	12·9	41·0	0·0	5·9
Males							
20–24	0·0	1·3	0·0	4·0	40·0	2·7	37·3
25–29	0·0	3·3	0·7	1·3	43·7	4·6	15·9
30–34	0·0	0·4	0·0	7·0	53·0	2·2	9·1
35–39	0·7	0·0	0·0	4·3	51·8	1·4	8·2
40–44	0·0	0·4	0·0	5·3	47·7	1·5	4·9
45–49	0·0	0·0	0·0	8·8	47·3	2·1	4·8
50–54	0·0	0·2	0·0	10·0	47·8	0·9	4·6
55–59	0·0	0·0	0·0	12·9	46·8	0·2	4·6
60–64	0·4	0·2	0·2	11·3	46·4	0·4	4·0
65–69	0·2	0·0	0·6	12·7	45·6	0·2	5·4
70–74	0·8	0·0	0·0	12·8	44·4	0·4	4·5
75–79	0·0	0·3	0·3	12·2	41·5	1·0	5·5
80–	0·5	0·5	0·0	12·1	39·6	0·0	7·1

Number answered 9723