The webinar, “The Canadian Longitudinal Study on Aging: A National Platform and Infrastructure for Researchers and Trainees” will begin shortly.

For first-time WebEx users:

- Follow the instructions that appear on your screen and choose your audio preference (VoIP, or computer). To change your audio settings at any point during the webinar, select Audio>Audio Conference from the main toolbar.

- The only people in the session who can speak and be heard are the host and panelists.

- If you have questions/comments, you can type them into the chat box in the bottom right of the WebEx window. Ensure “All Participants” is selected from the dropdown menu before you press “send.” Mobile users must select “Chat with Everyone.” Questions will be visible to all attendees.

- You can type your questions at any point during the session, but they won’t be answered until the end of the presentation.

- At the conclusion of the webinar, please remember to exit the WebEx session.
CLSA Webinar Series

The Canadian Longitudinal Study on Aging:
A National Platform and Infrastructure for Researchers and Trainees

12 to 1 P.M. ET | September 26, 2017

This webinar, jointly organized with the Canadian Institutes of Health Research (CIHR), will provide an overview of the Canadian Longitudinal Study on Aging (CLSA) for researchers and trainees. With an introduction by Yves Joanette, scientific director of the CIHR Institute of Aging, and presented by Dr. Lauren Griffith, associate scientific director of the CLSA, the presentation will review the platform design and data collection process, describe the available data, and explain the data access application process for researchers, including graduate students and postdoctoral fellows. Christy Costanian, doctoral student in the school of Kinesiology and Health Science at York University, will also share her experience using CLSA data as a trainee, followed by a Q&A session.

Register online at http://bit.ly/clsawebinars

Webinars will be broadcast using WebEx
Further instructions will be sent by email
Introducing today’s speakers:

**Dr. Yves Joanette**
Scientific Director, Institute of Aging (IA),
Canadian Institutes of Health Research (CIHR)

**Dr. Lauren Griffith**
Associate Scientific Director, Canadian Longitudinal Study on Aging (CLSA)

**Christy Costanian**
Doctoral Student (Epidemiology), York University School of Kinesiology and Health Science
The Canadian Longitudinal Study on Aging
A national platform and infrastructure for researchers and trainees.

Lauren Griffith, PhD, McMaster University, CLSA Associate Scientific Director

on behalf of
CLSA PIs: Parminder Raina, Christina Wolfson and Susan Kirkland
and the CLSA Research Team across Canada

CLSA Webinar Series
September 26th, 2017
Learning Objectives

1. To understand the CLSA study design and become familiar with the CLSA data access process

2. To be inspired to use the CLSA research platform
Overview

- Background
- Study Design
- Study Content and Data Collection
- Current Status
- Sample demographics
- Data Access
The CLSA

• Strategic initiative of CIHR; on the Canadian research agenda since 2001

• 3 co-principal investigators supported by more than 160 co-investigators from 26 institutions

• Multidisciplinary - biology, genetics, medicine, psychology, sociology, demography, nursing, economics, epidemiology, nutrition, health services

• Largest study of its kind to date in Canada for breadth and depth: following 50,000 participants for ≥20 years
Aim and Vision

- **AIM**: To examine life/health transitions and capture trajectories to enable the identification of modifiable factors with the potential to inform interventions (prevention/treatment/impact) to improve the health of populations as they age.

- **VISION**: To create a research platform infrastructure to enable state-of-the-art, interdisciplinary population-based research and evidenced-based decision-making that will lead to better health and quality of life for Canadians as they age.
The Journey so far...

Team Design Objectives Content
Protocol Development
Acceptability Bio-specimens Recruitment Data Linkage
Phase I Feasibility Studies
Phase II Validation, Pilot
Pilot work
Recruitment and Baseline Data Collection
First Follow Up Data Collection

2001 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 2017

International peer review
Study Design
CLSA Research Platform

50,000 women and men aged 45 - 85 at baseline

Target: 20,000
Randomly selected within provinces

Target: 30,000
Randomly selected within 25-50 km of 11 sites

Questionnaire
• By telephone (CATI)

Questionnaire
• In person, in home (CAPI)

Clinical/physical tests
Blood, urine
• @ Data Collection Site

2010 - 2015
2015
2018

Participants aged 45 to 85 at baseline (51,338)

20 Years

Baseline FU-1 FU-2 FU-3 FU-4 FU-5 FU-6

Active follow-up every 3 years

Data Linkage
Defining the cohort

• Men and women living in any of 10 provinces in Canada aged 45-85 at recruitment
  – Capturing baby boomers (born between 1946-1964) plus members of the “silent” generation (i.e. those born before 1945)
Recruiting the Cohort

1. Partnership with Statistics Canada
   - Canadian Community Health Survey 4.2 Healthy Aging (2008-09) CCHS 4.2
     • CCHS participant agreement to share contact information with the CLSA – *a first for Statistics Canada*

2. Partnership with provincial Ministries of Health (MOH)
   • Health Card Registration databases
   • Mailouts, return Consent-to-Contact form, CLSA follow up

3. Random Digit Dialing
   • Leger Marketing and CLSA CATI
Cohort Exclusion Criteria at Baseline

Driven by CCHS 4.2 exclusion criteria 1. to 5.

1. Residents of the 3 territories
   – Northwest Territories, Nunavut, Yukon
2. Living in an institution
3. Living on a First Nation Reserve
4. Full time members of the armed forces
5. Temporary visa holders

CLSA Added Criteria

• Cognitively impaired (at baseline)
• Unable to communicate in French or English

1 to 5 exclude <4% of the target population
Terminology

• Tracking Cohort
  • Target - 20,000 participants from all 10 provinces, followed through Computer Assisted Telephone Interviews (60 minutes at baseline)
  • **21,241 recruited***

• Comprehensive Cohort
  • Target - 30,000 participants living within 25 km (or 50 km) of a CLSA Data Collection Site (DCS)
  • Followed through in-home interviews (60 minute) and physical assessments (2-3 hours) at a DCS
  • **30,097 recruited***
Study Content and Data Collection
CLSA Questionnaire modules

All 51,338 participants

Demographic/Lifestyle
- Age
- Gender
- Education
- Marital status
- Sexual orientation
- Language
- Ethnicity
- Wealth/income
- Veteran Identifier
- Smoking, alcohol
- Nutritional risk
- Physical activity
- Health care utilization
- Medication use
- Supplement use

Health
- General health
- Women’s health
- Chronic conditions
- Disease symptoms
- Sleep
- Oral health
- Injuries, falls
- Mobility
- Pain, discomfort
- Functional status
- ADL, IADL
- Cognition
- Depression
- PTSD
- Life Satisfaction

Social
- Social
- networks
- support
- participation
- inequality
- Online communication
- Care receiving
- Care giving
- Retirement status
- Labour force participation
- Retirement planning
- Transportation
- Mobility, Migration
- Built environments
- Home ownership
CLSA Data Collection

Data Collection Site

Physical Assessments:
- Height, Weight, BMI
- Bone Density, Body Composition, Aortic Calcification
- Blood Pressure, ECG, c-IMT
- Pulmonary Function
- Vision & Hearing
- Performance testing

Cognitive Assessments:
- Neuropsychological Battery
  - Memory
  - Executive function
  - Reaction time

Biospecimen Collection:
- Blood
- Urine
# CORE BIOMARKERS: Baseline

<table>
<thead>
<tr>
<th>Category</th>
<th>N</th>
<th>Biomarkers</th>
</tr>
</thead>
</table>
| **HEMATOLOGY**  
Data Collection Sites (DCS) | 25,425 | • Erythrocytes  
• Granulocytes  
• Hematocrit  
• Hemoglobin  
• Lymphocytes  
• Platelets  
• MCHC  
• MPV  
• RDW |
| **CHEMISTRY**  
Calgary Laboratory Services (CLS) | 27,170 | • Albumin  
• Alanine aminotransferase (ALT)  
• C-reactive protein (CRP)  
• Creatinine  
• Cholesterol  
• Ferritin  
• Free T4  
• HDL  
• LDL  
• Non-HDL  
• Thyroid stimulating hormone (TSH)  
• Triglycerides  
• 25-Hydroxyvitamin D  
• Hemoglobin A1c (n = 26961) |
| **GENETICS**  
Genetic and Epigenetic Centre (GEC) | 10,000 | • Genome-wide genotyping  
• DNA extracted from buffy coat on samples (n = 26,884)  
• 820K UK Biobank Axiom Array (Affymetrix) |
| **EPIGENETICS**  
Genetic and Epigenetic Centre (GEC) | 1,500 | • DNA methylation  
• DNA extracted from PBMCs  
• 850K Infinium MethylationEPIC BeadChip (Illumina) |
| **METABOLICOMICS**  
Kyoto, Japan | 1,000 | • Mass spectrometry |

Updated July 14, 2017
Baseline Demographics
## Socio-demographic Characteristics unweighted

<table>
<thead>
<tr>
<th></th>
<th>Tracking</th>
<th>Comprehensive</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td>N=51,338</td>
</tr>
<tr>
<td>45-54</td>
<td>5,832 (27.5)</td>
<td>7,595 (25.2)</td>
<td>13,427 (26.2)</td>
</tr>
<tr>
<td>55-64</td>
<td>6,564 (30.0)</td>
<td>9,856 (32.7)</td>
<td>16,420 (32.0)</td>
</tr>
<tr>
<td>65-74</td>
<td>4,634 (21.8)</td>
<td>7,362 (24.5)</td>
<td>11,996 (23.4)</td>
</tr>
<tr>
<td>75-85</td>
<td>4,211 (19.8)</td>
<td>5,284 (17.6)</td>
<td>9,495 (18.5)</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>10,835 (51.0)</td>
<td>15,320 (50.9)</td>
<td>26,155 (50.9)</td>
</tr>
<tr>
<td>Male</td>
<td>10,406 (49.0)</td>
<td>14,777 (49.1)</td>
<td>25,183 (49.1)</td>
</tr>
<tr>
<td><strong>Language</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>English</td>
<td>17,483 (82.3)</td>
<td>24,291 (80.7)</td>
<td>41,774 (81.4)</td>
</tr>
<tr>
<td>French</td>
<td>3,758 (17.7)</td>
<td>5,806 (19.3)</td>
<td>9,564 (18.6)</td>
</tr>
<tr>
<td>Born in Canada</td>
<td>18,513 (87.2)</td>
<td>24,644 (81.9)</td>
<td>43,099 (84.1)</td>
</tr>
<tr>
<td>Province</td>
<td>Tracking</td>
<td>Comprehensive</td>
<td>Total</td>
</tr>
<tr>
<td>---------------------</td>
<td>-----------</td>
<td>---------------</td>
<td>---------</td>
</tr>
<tr>
<td>British Columbia</td>
<td>2613 (12.3)</td>
<td>6254 (20.8)</td>
<td>8867 (17.3)</td>
</tr>
<tr>
<td>Alberta</td>
<td>2103 (9.9)</td>
<td>2958 (9.8)</td>
<td>5061 (9.9)</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>1382 (2.7)</td>
<td>0</td>
<td>1382 (2.7)</td>
</tr>
<tr>
<td>Manitoba</td>
<td>1477 (7.0)</td>
<td>3114 (10.4)</td>
<td>4591 (9.0)</td>
</tr>
<tr>
<td>Ontario</td>
<td>4705 (22.2)</td>
<td>6417 (21.3)</td>
<td>11122 (21.7)</td>
</tr>
<tr>
<td>Quebec</td>
<td>3601 (17.0)</td>
<td>6057 (20.1)</td>
<td>9658 (18.8)</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>1355 (2.6)</td>
<td>0</td>
<td>1355 (2.6)</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>1546 (7.3)</td>
<td>3075 (10.2)</td>
<td>4621 (9.0)</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>1138 (2.2)</td>
<td>0</td>
<td>1138 (2.2)</td>
</tr>
<tr>
<td>Newfoundland</td>
<td>1251 (5.9)</td>
<td>2219 (7.4)</td>
<td>3470 (6.8)</td>
</tr>
</tbody>
</table>
Data Access - Baseline Data
Data and Biospecimen Access

- The CLSA was designed as a research study but is funded as a research platform.
- Data and biospecimens available to the research community.
  - **Who:**
    - Researchers based in academic settings and research institutes in Canada and *elsewhere* can apply.
    - Graduate students and postdoctoral fellows based at Canadian institutions or trainees studying elsewhere funded by a Canadian agency.
  - *As yet, biospecimens cannot be released to researchers outside Canada.*
What do you get?

• Alphanumeric data on all 51,338 participants
  – Additional raw data on certain variables may be requested (cognition, ECG, spirometry, etc.)
• De-identified open text for selected variables
• Sampling weights
• Additional data (i.e. linked Air Pollution, Meteorological data, Forward Sortation Areas) may be requested
Data Access Steps

Application process via access@clsa-elcv.ca

1. Submit application (pre-set deadlines) Next deadline is October 16, 2017
2. Administrative and Statistical Review
3. Review by Data and Biospecimen Access Committee
4. Notification of applicant
5. CLSA Access Agreement preparation and signatures, ethics approval
   – Security, confidentiality and scientific requirements
6. Raw data provided to approved applicant
**Data Access Timeline**

- **Submission**
  - Administrative & Statistical Review
  - 6-9 weeks

- **DSA Committee Review**

- **Access Agreement Signed; Ethics Approval**
  - Variable Time Frame
  - Up to 12 weeks

- **Dataset Preparation & Release**
  - 5-7 days

- **Monitoring (CLSA) - Annual Report**
  - 1 year

- **Final Report**

- **Plan on a receiving data 6 months after submission deadline**
How much does it cost?

- Costing
  - *Partial Cost Recovery Model*

- Alphanumeric data
  - $3,000 for a straightforward alphanumeric dataset
  - Graduate student - No cost for dataset to be used solely for thesis research
  - Postdoctoral fellow – No cost for one dataset to be used solely for the postdoctoral project

- Bio specimen costing
  - In development
Data Access – Resources for Researchers & Trainees
www.clsa-elcv.ca
Information for Researchers & Trainees

Researchers

The CLSA provides documents online to facilitate understanding of the study and how we are gathering and managing the data.

Protocols

CLSA Protocol – Executive Summary
CLSA Protocol – First Follow-up (2016)

The protocols listed are based on the applications CLSA submits to CIHR for each funding cycle. As the CLSA data collection progresses, occasionally, some measurements are changed. Updated versions of the protocols will be posted as necessary. Please refer to the Data Collection Tools section to review the specific questions and measurements gathered at each phase of the study.

Data Collection Tools

Over the course of 20 years, the CLSA will be conducting full data collection every three years. At each major data collection event, the questionnaires and physical assessments remain largely the same for consistency, but there will be some additions to the data collection to further enhance the CLSA platform.

Physical Assessments

To ensure that physical assessment data are collected, processed, and stored in a consistent, professional, and structured manner at all CLSA sites across the country, Standard Operating Procedures (SOPs) help maintain the integrity of the data collection and data management.
# Data Preview Portal

**SMART TIPS**
- Click the 'Help' button on the right to see a step-by-step guide to using the DPP.
- Use the main Search Bar on this page to search for predetermined **Areas of Information** or **Scales** only.
- For a more detailed search, select 'Variable Properties' under the 'Variable' tab on the left. Expand 'Name' and 'Label' to view search boxes for **Variable Names** and **Variable Labels**.

## Variables (32) & Datasets (2)

<table>
<thead>
<tr>
<th>Name</th>
<th>Label</th>
<th>Dataset</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLS_CONDNEG_COM</td>
<td>SWLS scale: Disagree life conditions excellent</td>
<td>COM</td>
</tr>
<tr>
<td>SLS_CONDNEG_TRM</td>
<td>SWLS scale: Disagree life conditions excellent</td>
<td>TRM</td>
</tr>
<tr>
<td>SLS_CONDPPOS_COM</td>
<td>SWLS scale: Agree life conditions excellent</td>
<td>COM</td>
</tr>
<tr>
<td>SLS_CONDPPOS_TRM</td>
<td>SWLS scale: Agree life conditions excellent</td>
<td>TRM</td>
</tr>
<tr>
<td>SLS_COND_COM</td>
<td>SWLS scale: Life conditions excellent</td>
<td>COM</td>
</tr>
</tbody>
</table>

**Areas of Information**
- Socio-demographic and economic characteristics
- Lifestyle and health behaviours
- Health status and functional limitations
- Diseases
- Symptoms and signs
- Medication and supplements
Need More Information?

Still have questions? Email us: access@clsa-elcv.ca
CLSA Approved Projects
Selected Approved Trainee Projects 2017

- **A Model of Health: Using data modelling techniques to improve health outcomes for older Canadian adults by optimizing the development and delivery of physical activity interventions**
  Simon Fraser University

- **Potential metabolic and functional benefits of a comprehensive evaluation of physical activities for Canadian adults**
  University of New Brunswick

- **Impact of the Lifestyle Factors on the Health Aging of Individual**
  Simon Fraser University

- **Examining multimorbidity among middle-aged Canadians**
  University of Manitoba

- **Frailty and mobility limitations in older Canadians with musculoskeletal diseases compared to other chronic medical conditions**
  McMaster University

- **Characterization of cardiovascular disease burden and health of Canadian cancer survivors**
  University of Alberta

- **Exploring the complexity, management and health-related outcomes of disability, frailty and multimorbidity among community-dwelling older adults in Canada**
  McMaster University
Keywords – All projects
Take Home Messages

• This large cohort was designed, assembled and data collection is ongoing
  – Baseline data and biospecimens have been collected
• Alphanumeric data from questionnaires, physical assessments and basic hematology results on 51,338 participants from across Canada are now available
  – These data are free for student thesis research and for postdoctoral fellow projects
CLSA Funders and Partners
Extra Slides
First Follow Up
2015-2018
First Follow-Up: New Content Added

- *Child maltreatment
- **Elder abuse
- Epilepsy screening
- Decedent interview
- Unmet health-care needs
- Preventive health behaviours (screening, vaccination, etc)
- Enhanced hearing, oral health and transportation modules
- Gender identity questions
- Subjective cognitive decline
- Loneliness

*Childhood Experiences of Violence Questionnaire. Walsh et al 2012
**National Initiative for the Care of the Elderly (NICE)
Follow up considerations

• Keeping participants engaged
• Tracing participants who have moved
• Attention to changes in life circumstances that may affect ability to participate
  – Cognitive, sensory, mobility impairment
• Ensuring that changes in content permit the ongoing examination of transitions and trajectories
Passive Data Collection  Work in progress

• Linkage is an important CLSA strategy
  – Great potential for collecting information that is difficult to get from participants due to time, accuracy limitations; and/or may even be unknown to participants
  – Potential to obtain historical data prior to CLSA entry

• Types of databases
  – Individual level administrative provincial health databases
  – Vital statistics/disease registries
  – Population level databases of community characteristics, climate, pollution
Leveraging Big Data:

The Canadian Longitudinal Study on Aging (CLSA)

Christy Costanian
York University, Toronto, Canada
Outline

• Background

• Project Objectives

• CLSA Data Access Procedure and Timeline

• Outputs

• Take Home Messages
Background

RESEARCH INTERESTS:
• Chronic Disease and Aging
• Women’s Health (Menopause, Intersection of reproductive and later health outcomes)
• Life Course Epidemiology
• Health Behavior
• Survival and Longitudinal Data Analysis

EDUCATION:

Ph.D. in Epidemiology 2018 (expected)
York University, Canada

M.Sc. in Epidemiology and Biostatistics 2012
American University of Beirut (AUB), Lebanon

B.Sc. in Biology (pre-med) 2010
American University of Beirut (AUB), Lebanon
Background

MENTORS:

A. Sibai  
H. Tamim  
C. Ardern  
H. Edgell  
A. Zeki Al-Hazzouri

MOST CITED RESEARCH:

Physical activity in adults with and without diabetes: from the ‘high-risk’ approach to the ‘population-based’ approach of prevention

Abla Mehio Sibai , Christy Costanian, Rania Tohme, Shafika Assaad and Nahla Hwalla

Received: 24 April 2013  Accepted: 11 October 2013  Published: 24 October 2013

Prevalence, correlates and management of type 2 diabetes mellitus in Lebanon: Findings from a national population-based study

Christy Costanian a, b, c , Kathleen Bennett b, Nahla Hwalla a, c , Shafika Assaad d, Abla M. Sibai a, c, b

https://doi.org/10.1016/j.diabres.2014.06.005  Get rights and content
Project Objectives

Hormone Therapy (HT) use

Age at Natural Menopause (ANM)

Study 1: Prevalence and factors associated with HT use in Canada

Study 2: ANM and its associated factors in Canada

CLSA PLATFORM
Submit Application

1. Submit Application

2. Data and Sample Access Committee (DSAC) Review
   - 4 – 5 weeks

3. Data & Sample Access Agreement Signed; Proof of Ethics Approval Provided
   - ~ 6 weeks

4. Dataset Preparation & Delivery (SAC)
   - 1 - 2 weeks

5. Monitoring (CLSA) Annual Report
   - 1 year

Final Report

*Slide obtained from the CLSA webinar series on Advancing Opportunities for Research on Health and Aging: An Update on the Canadian Longitudinal Study on Aging, delivered by Dr. S. Kirkland on June 21, 2016.
Preparing the Application

• Assign research team members and roles: PI vs. trainee - sent application as PI when actually trainee (oops)!

• PI is the one who has to submit application and follow up on correspondence with CLSA

• Obtain ethics approval for project from your institution BEFORE submitting application (this takes more time than you think!)
Preparing the Application (Cont’d)

• Straightforward; have to be certain which variables are needed and will be used

• Ensure application is complete and signed before submitting to CLSA

A3. Project Timeline / Échéancier du projet

What is the anticipated time frame for this proposed project? In planning for your project, please consider in your time frame at least six (6) months from the application submission deadline to the time you receive your dataset.

Anticipated start date / Date prévue de début: 15/06/2016

Proposed project duration / Durée proposée du projet: 1 year (e.g. 6 months/mois, 1 year/an)

A4. Project Description / Description du projet

Project Title / Titre du projet:
Epidemiology of Menopause in Canada

Lay Summary / Résumé non scientifique
Please provide a lay language summary of your project (maximum 150 words) suitable for posting on the CLSA website if your application is approved. Please ensure that the lay summary provides a stand-alone, informative description of your project.

Monopause is a common, important event in every woman’s life. The age at natural menopause (AMN) is critical for women’s health, given the physiological consequences of earlier and later timing of menopause. Although hormone replacement therapy (HRT) has a clear role in the treatment of vasomotor symptoms (VMS) that occur during menopause, debate on its risks and benefits persists. More than a decade ago, HRT use rates have plummeted, however few data exists on its current rates in Canada. The predictors of age at menopause and HRT use vary across populations, however little is known about them in Canada. Using data from the CLSA, this study will 1) determine the prevalence and characteristics of women who have used HRT...

Word Count / Nombre de mots: 150

Keywords / Mots clés:
Menopause, HRT usage, Women’s Health
CLSA Data Access Procedure and Timeline

1. Submit Application
   - March 9, 2016

2. Data and Sample Access Committee (DSAC) Review
   - 4 – 5 weeks

3. Administrative (NCC) & Statistical (SAC) Review
   - DSAC approval of application! (with some recommendations)
   - July 10, 2016
CLSA Data Access Procedure and Timeline

1) Application revised
2) Administrative coordinator (Roxanne) sent access agreement to be reviewed and completed by the approved user’s institution
3) PI then forwarded to office of research services for institutional completion
4) Obtained PI and institutional signature
5) Forwarded access agreement to McMaster
6) Data access agreement finalized
CLSA Data Access Procedure and Timeline

- CLSA Data Access Officer, Dr. Istvan Molnar-Szakacs (Ish), shared download link for dataset containing data in .csv format and data dictionary in excel format

- Link expires in 7 days

- Folder with data can be downloaded as many times as the number of research team members who sign the CLSA Access Agreement

TIP: Data dictionary is clear, however better to personalize dataset by labelling variables used in analysis

- WHO_HRTYR_YR_TRM
- WHO_HRT_TRM
- HRT_USE_DURATION
- EVER_HRT_USE
CLSA Data Access Procedure and Timeline

December 2016- June 2017: Data handling and analysis

February 17, 2017:
Received CLSA Data release update: “We have added sampling weight strata variables to be used in conjunction with the existing weights as outlined in the sampling weights documentation available on our website.”

WGHTS_GEOSTRAT_TRM
Variable for sampling strata weights had become available.
Contacted Data Access Officer on Feb 25, 2017, and Ish provided sampling strata variable as data release update within a couple of days.

TIP: Manuscripts for publication must be submitted to the CLSA prior to submitting to the journal for review by CLSA Scientific Management Team.
Hormone therapy use in the Canadian Longitudinal Study on Aging: a cross-sectional analysis

Christy Costanian, MSc, Heather Edgell, PhD, Chris I. Ardern, PhD, and Hala Tamim, PhD

Abstract

Objective: The aim of the study was to assess the prevalence and factors associated with hormone therapy (HT) use among Canadian women.

Methods: Baseline data from the Tracking cohort of the Canadian Longitudinal Study on Aging (CLSA) was used for this analysis. The main outcome was HT use among women aged 45-85 years, defined as current, past, and never users. Multinomial logistic regression models were used to examine the differences between current, past, and never HT users in terms of sociodemographic, health behavior, and health-related variables.

Results: Overall, 9.5% of the sample reported current use of HT, whereas 21.9% reported past use. The main factors associated with a lower likelihood of current HT use were older age (>80 y), nonwhite ethnic background, current employment, regular smoking, obesity, and breast cancer. By contrast, alcohol consumption, and the presence of allergies or mood disorders were positively associated with current HT use.

Conclusions: These findings provide a recent national picture of HT use in Canada that may be used to inform opportunities for improved physician–patient communication regarding menopause management.

Key Words: Canada – Hormone therapy – Menopause – Prevalence.
Age at natural menopause and its associated factors in Canada: cross-sectional analyses from the Canadian Longitudinal Study on Aging

Christy Costanian, MSc,¹ Hugh McCague, PhD,² and Hala Tamim, PhD¹

Abstract

Background: Early onset of menopause is associated with long-term disease and higher mortality risks. Research suggests that age at natural menopause (ANM) varies across populations. Little is known about factors that affect ANM in Canadian women.

Objective: This study aims to estimate the median ANM and examine factors associated with earlier ANM among Canadian women.

Methods: Baseline data from the Tracking cohort of the Canadian Longitudinal Study on Aging was used for this analysis. The relation of sociodemographic, lifestyle, and health-related factors with ANM was examined among 7,719 women aged 40 and above. Nonparametric Kaplan-Meier cumulative survivorship estimates were used to assess the timing of natural menopause. Univariate and multivariate Cox proportional hazard regression models were used to characterize ANM and its association with relevant covariates.

Results: Overall, median ANM was 51 years. Having no partner, low household income and education levels, current and former smoking, and cardiovascular disease were all associated with an earlier ANM, whereas current employment, alcohol consumption, and obesity were associated with later ANM.

Conclusions: These findings provide a national estimate of ANM in Canada. These findings show the importance of lifestyle factors and health conditions in determining menopausal age. These factors might help in risk assessment, prevention and early management of chronic disease risk during the menopausal transition.

Key Words: Canada – Education – Factors – Menopause – Smoking – Weight.
Take Home Messages

• Ensure that research team’s roles are clearly assigned

• Follow data release update emails

• Ensure that ethics approval is valid throughout study duration

• Be mindful of project timeframe and deadlines (final report)

• CLSA: a great platform to use with a rewarding trainee experience
Acknowledgements

- **CLSA Scientific Management Team:** Drs. Parminder Raina, Susan Kirkland and Christina Wolfson

- **CLSA Operations Committee**

- **Ms. Roxanne Cheeseman**

- **Dr. Istvan Molnar-Szakacs**, CLSA Data Access Officer

- **Ms. Katherine Galley**, CLSA Interim Communications Manager

- **Ms. Laura Lawson**, CLSA Communications Manager

- **CLSA participants**
Thank you!

- Email: chc01@yorku.ca
Upcoming CLSA Webinars

Osteoarthritis – Not Just a Nuisance Condition of Old Age: An Overview of Findings from the Canadian Longitudinal Study on Aging

Dr. Elizabeth Badley and Dr. Anthony Perruccio

October 12, 2017 | 12 p.m. ET

Register: bit.ly/clsaawebinars