

P8796

Serial	C	Person	First name:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
201-209	210	211-212	CARD 02 (213-214)

Health and lifestyles of people aged 50 and over

Home Logbook

WHY ARE THE SALIVA SAMPLES AND THE LOGBOOK IMPORTANT?

On a weekday, we would like you to provide four samples of your saliva – as soon as you wake up, half an hour later, at 7pm and just before you go to bed. The samples will be analysed to see how the level of cortisol in your body varies through the day. This is of particular interest because cortisol tells us about stress, and stress may be related to heart disease. The logbook contains questions that will help us understand your activities and levels of stress throughout the day of your saliva collection.

HOW TO USE THIS LOGBOOK

Please use this logbook which explains how and when to take each sample. It also contains questions we would like you to answer at the time you take your samples, so please carry it with you on the day.

Although this may look a bit daunting to begin with, all the step-by-step information you need is here. It really is quite straightforward once you get the hang of it! **And if you have any questions, please call Chris Shaw on the ELSA freephone number 0800 652 4574 between 9.00am – 5.30pm Monday to Friday.**

THANK YOU FOR YOUR HELP

ATTACH BARCODE LABEL

WHEN TO TAKE YOUR SALIVA SAMPLES

- The samples should be taken on a weekday but if this is not possible take the samples on a Saturday or Sunday.
- The first sample is important so if you forget this, start afresh on the next convenient weekday.
- All four samples should be taken on the same day so if you forget any of them, ring **Chris Shaw on freephone 0800 652 4574** and she will send you another pack so you can start again. Chris is available 9.00am – 5.30pm Monday to Friday; at other times you can leave a message.
- The four samples should be taken at the following times:
 - Sample 1 - ORANGE** As soon as you wake up and your eyes open and you are ready to get up for the day (and not go back to sleep).
 - Sample 2 - PINK** 30 minutes after taking the **ORANGE** sample.
 - Sample 3 - BLUE** As close as possible to 7pm.
 - Sample 4 - GREEN** Right before getting into bed.
- We would like you to take the sample as close as you can to the recommended time, but if you are late taking a sample, don't worry, make sure you write the actual time that you took the sample on the tube.
- If you are working a night shift on your saliva sample collection day, please ring **Chris Shaw on freephone 0800 652 4574** who will advise you what time you should take each sample. Chris is available 9.00am – 5.30pm Monday to Friday; at other times you can leave a message.

HOW TO TAKE A SAMPLE

- Please follow the instructions for taking each sample that are outlined in this logbook.
- Do not eat, drink or brush your teeth for at least 15 minutes before you take a sample.
- To take a sample:
 - Take the lid off the tube - try not to handle the cotton swab.
 - Remove the cotton swab and chew gently until the cotton is soaked (usually around 1 minute).
 - While it is soaking in your mouth answer the questions in the logbook by ticking or writing in a box.
 - Place the cotton swab back into the tube and put the lid on securely.
 - Put the tube in the transparent plastic bag with your name on it and store the tube safely, if possible in a cold place, ideally a refrigerator.

HOW TO START

The night before your sample collection day, please put the **ORANGE** tube, a pen and this logbook by your bed so that you can take the first sample as soon as you wake up. You are ready to begin!

Sample 1- ORANGE

- Take the ORANGE sample as soon as you wake up and your eyes open and you are ready to get up for the day (and not go back to sleep).
- If you forget to take the ORANGE sample, STOP now, do not take any other samples - start afresh the following weekday morning.

INSTRUCTIONS FOR WHEN YOU WAKE UP:

1 Make sure you are fully awake. Sit up in bed.

Stay in bed; do not eat, drink or brush your teeth.

Take the lid off the tube – try not to handle the cotton swab.

Remove the cotton swab and chew gently until the cotton is soaked (usually around 1 minute).

While letting it soak in your mouth please do the following:

2 Write the date and time on the ORANGE tube label now.

3 Write the approximate time you fell asleep last night here

		:			Please circle	
				am	pm	
215-216	217-218		219-220	1	2	

4 Write the approximate time you woke up today here

		:			Please circle	
				am	pm	
221-222	223-224		225-226	1	2	

5 Before taking the sample did you...

Tick all that apply

	227-230
...brush your teeth?	<input type="checkbox"/> 1
...eat?	<input type="checkbox"/> 2
...drink?	<input type="checkbox"/> 3
...exercise?	<input type="checkbox"/> 4
...or do none of these?	<input type="checkbox"/> 5

231 spare

6**When you woke up, to what extent did you feel...**Tick one box on each line

	Not at all	Somewhat	Very much	Extremely
...happy?	²³² <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
...tired?	²³³ <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
...content?	²³⁴ <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
...worried?	²³⁵ <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
...anxious?	²³⁶ <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
...fearful?	²³⁷ <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

NOW PLEASE DO THE FOLLOWING:**7**

Place the cotton swab back into the tube and put the lid back on securely.

Put the tube in the transparent plastic bag with your name on it and store the tube safely, if possible in a cold place, ideally a refrigerator.

8**Please take the PINK sample in 30 minutes, which will be at...**

Please circle

<input type="checkbox"/>	<input type="checkbox"/>	:	<input type="checkbox"/>	<input type="checkbox"/>	am	pm
<small>238-239</small>			<small>240-241</small>		<small>1</small>	<small>2</small>

242-243

IN THE NEXT FIFTEEN MINUTES, IF YOU WOULD LIKE YOU CAN:

- Brush your teeth
- Drink water or milk - but do NOT drink fruit juice or caffeinated drinks such as tea, coffee or cola
- Eat a snack such as a slice of bread, a bowl of cereal or a biscuit – but do NOT eat any fruit.

IN THE FIFTEEN MINUTES BEFORE THE PINK SAMPLE:

- Do not eat, drink or brush your teeth.

Sample 2- PINK

- Take the PINK sample 30 minutes after taking the ORANGE sample.
- DO NOT eat, drink or brush your teeth for at least 15 minutes before you take the sample.

INSTRUCTIONS FOR TAKING THE PINK SAMPLE:

9 Take the lid off the tube – try not to handle the cotton swab.
 Remove the cotton swab and chew gently until the cotton is soaked (usually around 1 minute).
 While letting it soak in your mouth please do the following:

10 Write the date and time on the PINK tube label now.

11 What time did you last eat before taking this sample?

:

Please circle

am	pm
1	2

244-245
246-247
248-249

12 Right now, to what extent do you feel...

Tick one box on each line

	Not at all <small>250</small>	Somewhat	Very much	Extremely
...happy?	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>1</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>2</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>3</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>4</small>
...tired?	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>1</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>2</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>3</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>4</small>
...content?	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>1</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>2</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>3</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>4</small>
...worried?	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>1</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>2</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>3</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>4</small>
...anxious?	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>1</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>2</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>3</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>4</small>
...fearful?	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>1</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>2</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>3</small>	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 5px;"> </div> <small>4</small>

NOW PLEASE DO THE FOLLOWING:

13 Place the cotton swab back into the tube and put the lid back on securely.

Put the tube in the transparent plastic bag with your name on it and store the tube safely, if possible in a cold place, ideally a refrigerator.

14 Please take the BLUE sample at 7pm.

YOU CAN:

- Eat and drink as usual for the rest of the day.

BUT PLEASE DO NOT: Eat, drink or brush your teeth for at least 15 minutes before the **BLUE** sample.

Sample 3- BLUE

- Take the BLUE sample at 7pm.
- DO NOT eat, drink or brush your teeth for at least 15 minutes before you take the sample.

INSTRUCTIONS FOR TAKING THE BLUE SAMPLE:

- 15** Take the lid off the tube - try not to handle the cotton swab.
Remove the cotton swab and chew gently until the cotton is soaked (usually around 1 minute).
While letting it soak in your mouth please do the following:

- 16** Write the date and time on the BLUE tube label now.

- 17** What time did you last eat before taking this sample?

Please circle

		:			am	pm
256-257			258-259		260-261	1 2

- 18** Right now, to what extent do you feel...

Tick one box on each line

	Not at all	Somewhat	Very much	Extremely
...happy?	<small>262</small> <input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...tired?	<small>263</small> <input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...content?	<small>264</small> <input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...worried?	<small>265</small> <input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...anxious?	<small>266</small> <input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...fearful?	<small>267</small> <input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 25px; border: 1px solid black;" type="checkbox"/> <small>4</small>

NOW PLEASE DO THE FOLLOWING:

- 19** Place the cotton swab back into the tube and put the lid back on securely.
Put the tube in the transparent plastic bag with your name on it and store the tube safely, if possible in a cold place, ideally a refrigerator.

- 20** Please take the GREEN sample just before getting into bed.

PLEASE DO NOT:

- Eat, drink or brush your teeth for at least 15 minutes before the GREEN sample.

Sample 4- GREEN

- Take the GREEN sample right before getting into bed.
- DO NOT eat, drink or brush your teeth for at least 15 minutes before you take the sample.

INSTRUCTIONS FOR TAKING THE GREEN SAMPLE:

21 Take the lid off the tube - try not to handle the cotton swab.
 Remove the cotton swab and chew gently until the cotton is soaked (usually around 1 minute).
 While letting it soak in your mouth please do the following:

22 Write the date and time on the GREEN tube label now.

23 What time did you last eat before taking this sample?

		:		
268-269	270-271		272-273	

Please circle	
am	pm
1	2

24 Right now, to what extent do you feel...
 Tick one box on each line

	Not at all	Somewhat	Very much	Extremely
...happy?	<small>274</small> <input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...tired?	<small>275</small> <input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...content?	<small>276</small> <input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...worried?	<small>277</small> <input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...anxious?	<small>278</small> <input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>4</small>
...fearful?	<small>279</small> <input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>1</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>2</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>3</small>	<input style="width: 40px; height: 30px; border: 1px solid black;" type="checkbox"/> <small>4</small>

NOW PLEASE DO THE FOLLOWING:

25 Place the cotton swab back into the tube and put the lid back on securely.
 Put all four tubes in the transparent plastic bag with your name on it and store all four tubes safely in a cold place, ideally a refrigerator, until you post them back.

Now please complete the logbook by answering these final questions.

The following questions are about your activities today, that is the day of your sample collection.

26 Today, did you...

Tick one box on each line

		280		1-9	10-19	20+
... smoke any cigarettes?	Yes	<input type="checkbox"/>	→ How many?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>				
		282		1-2	3-4	5+
... smoke any cigars?	Yes	<input type="checkbox"/>	→ How many?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>				
		284		less than ¼ oz	between ¼ and ½ oz	½ oz or more
... smoke tobacco for hand rolled cigarettes?	Yes	<input type="checkbox"/>	→ How much?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>				
		286		less than ¼ oz	between ¼ and ½ oz	½ oz or more
... smoke tobacco in a pipe?	Yes	<input type="checkbox"/>	→ How much?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>				

27 How many of the following types of drinks did you have today?

(remember: a drink poured at home could be equivalent to two or three pub measures)

	None	1	2	3	4	5+
Pints of beer, lager and cider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard glasses of wine, including babycham and champagne	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard measures of fortified wine, including sherry and port	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard measures of spirits, including whisky, rum and liqueurs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottles of soft alcoholic drinks, including alcopops such as Bacardi Breezers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28

Did you do any physical activity today which increased your heart rate and/or caused you to sweat? This might include sport, walking at a brisk pace, vigorous housework or home repairs, or gardening.

Tick one box

293

Yes

₁



If you did more than one physical activity today, please tell us about the most vigorous activity you did.

What time did you begin this activity?

: am pm _{1 2}

294-295

296-297

298-299

And how long did this activity last?

hours minutes

300-301

302-303

No

₂

29

Please describe the most stressful event of your day today.

304-754

[Large empty text box for describing the most stressful event]

30

What time did this event begin?

: am pm _{1 2}

Please circle

755-756

757-758

759-760

31

How long did this event last?

hours minutes

761-762

763-764

32

Did this event make you feel...

Tick one box

765

...not at all stressed

₁

...somewhat stressed

₂

...moderately stressed

₃

...very stressed

₄

...or the most stressed you've ever felt?

₅

33

Compared to a typical weekday, were you...

Tick one box

766

...as busy as usual

₁

...more busy than usual

₂

...or less busy than usual?

₃

34

Compared to a typical weekday, were you...

Tick one box

767

...as pressured or stressed as usual 1

...more pressured or stressed than usual 2

...or less pressured or stressed than usual? 3

35

Approximately what time do you usually wake up on a typical weekday?

Please circle

		:			am	pm
				1		

768-769 770-771 772-773

36

If there is anything else you would like to tell us about taking your samples today, please write it here.

774-974

You have now finished the saliva collection!

NOW PLEASE DO THE FOLLOWING:

- Place all four tubes into the transparent plastic bag. Place the bag along with this logbook in the pre-paid padded envelope addressed to Dr Meena Kumari.
- Store the envelope (with the four tubes and this logbook inside) in a cold place, ideally a refrigerator, until you post them back.
- Please post the envelope back as soon as you can. You do not need a stamp.

IF YOU HAVE ANY QUESTIONS:

- If you have any questions please ring **Chris Shaw on freephone 0800 652 4574** between 9.00am – 5.30pm Monday to Friday.

THANK YOU VERY MUCH FOR YOUR HELP