**Proposal for definitions of the risk factors**

The definitions are graded in levels between one to tree, and one is meant as minimum requirements. The purpose is to standardize our definitions so that future merging of data will be more homogenous giving better opportunities for stratification and so on. It is up to the Registry to choose to which level it wants to collect data, ex. only collect LEVEL 1-data or more detailed LEVEL 2 or even LEVEL 3 data. On the last page are the VQI definition, which is for most variables still more detailed.

The definitions have been updated according to our discussion in Copenhagen in September.

**The following minimum core variable has been agreed on:**

**Definitions**

_Diabetes_: Defined as Fasting ≥ 7 mmol/L or Post glucose ≥ 11.1 mmol/L and/or HbA1c ≥ 6.5% [1], or on antidiabetic medication.

Diabetes:     LEVEL 1:     -   No
                             -   Yes
                             -   Unknown

              LEVEL2:      Medication: if level I = yes,
                                        -   Insulin
                                        -   Oral antidiabetic
                                        -   Both
                                        -   Diet
                                        -   No treatment
              LEVEL 3:     HbA1c
                                        -

*Heart disease*: Three separate variables; Ischemic heart disease, Congestive heart failure and Arrhythmia

Ischemic heart disease, defined as either symptoms as below or previous revascularization.

LEVEL 1:
- No
- Asymptomatic (Previous angina but without symptoms > 3 months, or revascularized)
- Angina pectoris
- Previous Acute coronary syndrome
- Unknown

And in a separate field

- Previous PCI/CABG

LEVEL 2: Canadian Cardiovascular Society grading of angina pectoris

- Class 0 asymptomatic.
- Class I – Angina only during strenuous or prolonged physical activity
- Class II – Slight limitation, with angina only during vigorous physical activity
- Class III – Symptoms with everyday living activities, i.e., moderate limitation
- Class IV – Inability to perform any activity without angina or angina at rest, i.e., severe limitation

Congestive heart disease, defined as a diagnosis of congestive heart failure or a systolic ejection fraction < 40%

LEVEL 1      Yes
No
Unknown

LEVEL 2: New York Heart association classification for heart failure

| | |
|---|---|
| Class I | No limitations. Ordinary physical activity does not cause undue fatigue, dyspnoea or palpitations (asymptomatic LV dysfunction). |
| Class II | Slight limitation of physical activity. Ordinary physical activity results in fatigue, palpitation, dyspnoea or angina pectoris (mild CHF). |
| Class III | Marked limitation of physical activity. Less than ordinary physical activity leads to symptoms (moderate CHF). |
| Class IV | Unable to carry on any physical activity without discomfort. Symptoms of CHF present at rest (severe CHF). |

Heart arrhythmia:      LEVEL 1:      No
Previous ablation
Pacemaker/ICD
Previous ablation and Pacemaker/ICD
Unknown

*Pulmonary disease:*  A diagnosis of Chronic obstructive pulmonary disease or pulmonary medical treatment.

LEVEL 1:     No
No treatment
Medical treatment,
Home oxygen
Unknown

*Cerebrovascular disease*

Cerebrovascular disease (both ischemic and hemorrhagi) defined as a diagnosis or symptoms.

LEVEL 1:    No

Transient ischemic attack (Incl amaurosis fugax)

Stroke

Unknown.

LEVEL 2: Modified Rankin Score

**Suggested version of Modified Rankin Score to be used**

0 No symptoms at all

1 No significant disability despite symptoms; able to carry out all usual duties and activities

2 Slight disability; unable to carry out all previous activities, but able to look after own affairs without assistance

3 Moderate disability; requiring some help, but able to walk without assistance

4 Moderately severe disability; unable to walk without assistance and unable to attend to own bodily needs without assistance

5 Severe disability; bedridden, incontinent and requiring constant nursing care and attention

6 Dead

*Hypertension:*

|  |  |  |
|---|---|---|
| | LEVEL 1: | No |
| | | Yes (bp>140/90 or medical treatment) |
| | LEVEL 2: | Treated controlled, |
| | | Treated uncontrolled |
| | | (bloodpressure bp>140/90 despite treatment) |
| | LEVEL 3: | |
| cause of hypertension: | | Essential |
| | | Renal sclerotic |
| | | Fibro muscular dysplasia |
| | | Other (endocriologic) |

**_Should be collected:_**

*Renal disease*

|  |  |  |
|---|---|---|
| | LEVEL 1: | No |
| | | Dialysis |
| | | Functional Renal transplant |
| | | Unknown |
| Independent | | Creatinine level |
| | LEVEL 3: | eGFR |

We will collect data on definition of renal disease depending on national recommendations, and national unites.

*Smoking*                                    LEVEL 1: current smoker, previous smoker, never smoked
Former smoker defined as more than 3 months since smoking cessation

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