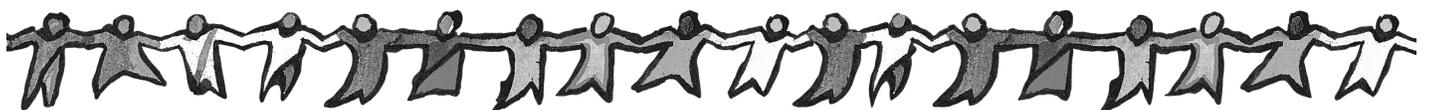




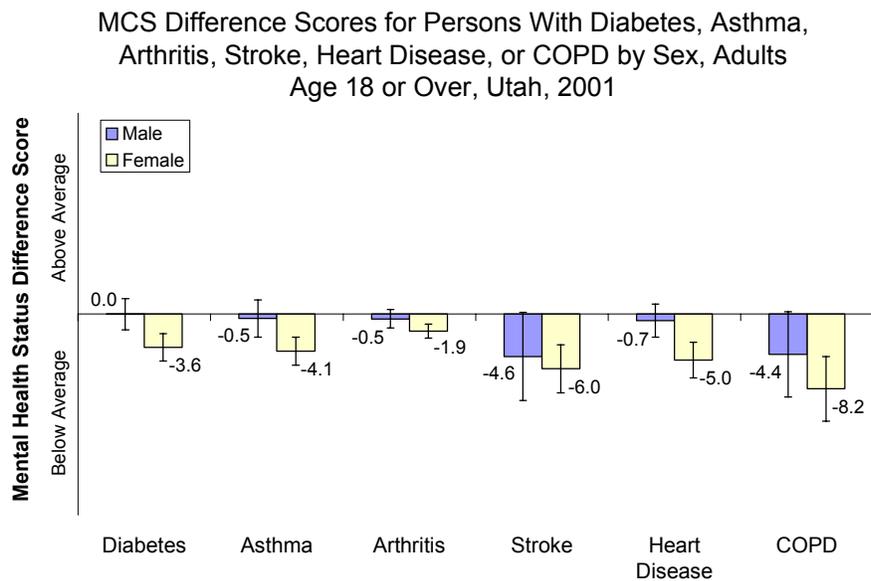
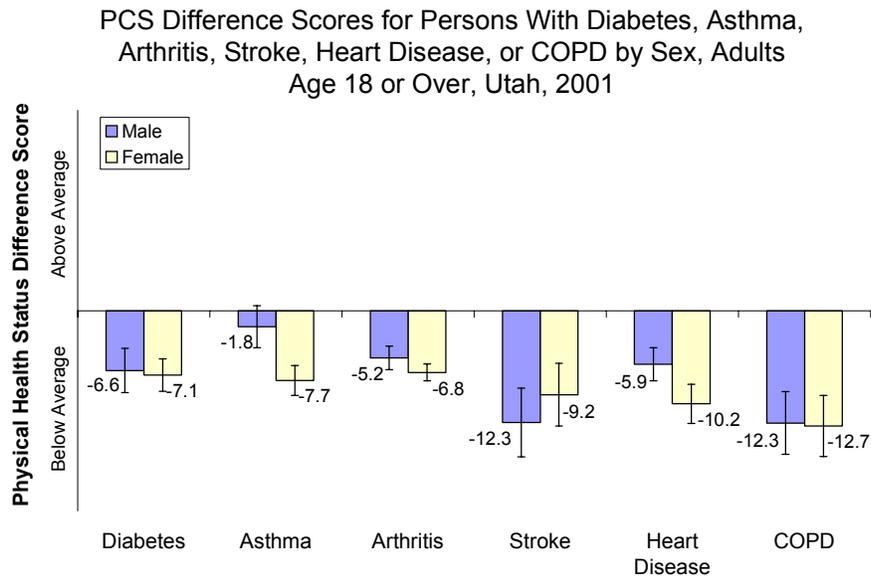
The Influence of Disease and Lifestyle on Quality of Life

This section uses the age-specific difference scores for the PCS and MCS, and averages them across groups of persons with various health conditions. For each group mean, a confidence interval has been computed and presented in the figures. If the confidence interval for a group's mean difference score does not include zero (the age-specific average score) that group can be considered to be statistically different from the average.

Some large differences in health outcomes emerge for persons with health problems. Something that must be considered when examining all the data in this report is that the results are based on cross-sectional, or one-point-in-time data. Using these data, we cannot say, for example, that a lifestyle characteristic, such as regular moderate exercise, caused better health outcomes. An alternative explanation is that persons who are ill or have some physical limitation find it difficult to exercise regularly. Either explanation is plausible, but the data can only tell us if there is an association, and cannot tell us the direction of the association.



The Influence of Disease and Lifestyle on Quality of Life



- The presence of a chronic health condition was associated with below average physical and mental health, regardless of sex.
- However, women with a given chronic illness tended to have poorer physical and mental health than men with the same health condition. An exception to this was incidence of stroke. Men with a stroke had poorer physical health but better mental health than women with a stroke.
- The presence of chronic obstructive pulmonary disease (COPD) had the strongest association with poor physical health for both men and women. It also had the strongest association with poor mental health for women.

The Influence of Disease and Lifestyle on Quality of Life



Table 2. The Influence of Diseases and Lifestyle Factors on Quality of Life, Physical and Mental Health Status Summary Means and Difference Scores for Six Chronic Diseases by Sex, Utah Residents, Age 18 and Over, 2001.

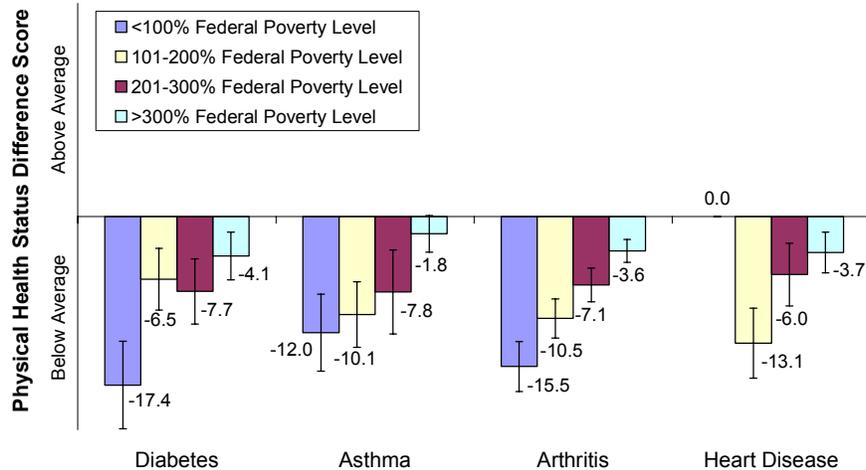
Demographic Subgroup	Physical Composite Scale (PCS)		Mental Composite Scale (MCS)	
	Mean Scale Score	Difference Score	Mean Scale Score	Difference Score
Diabetes Diagnosed by a Doctor				
Male	41.1	-6.56 ± 2.43	53.1	-0.02 ± 1.72
Female	40.6	-7.06 ± 1.79	49.2	-3.65 ± 1.51
Currently Under Medical Care for Asthma				
Male	48.3	-1.76 ± 2.33	51.7	-0.49 ± 2.04
Female	42.6	-7.65 ± 1.64	48.3	-4.06 ± 1.52
Currenty Under Medical Care for Arthritis				
Male	42.9	-5.19 ± 1.29	52.4	-0.52 ± 1.01
Female	41.2	-6.78 ± 0.93	51.0	-1.87 ± 0.76
Stroke Diagnosed by a Doctor				
Male	33.2	-12.28 ± 3.77	48.8	-4.64 ± 4.81
Female	36.6	-9.23 ± 3.44	47.2	-5.99 ± 2.63
Heart Disease Diagnosed by a Doctor				
Male	40.2	-5.89 ± 1.81	52.6	-0.72 ± 1.82
Female	35.8	-10.22 ± 2.16	48.3	-5.03 ± 1.95
Currently Under Medical Care for Chronic Obstructive Pulmonary Disease				
Male	35.8	-12.33 ± 3.43	48.4	-4.41 ± 4.67
Female	35.2	-12.66 ± 3.36	44.5	-8.18 ± 3.54

Note: If the confidence interval is greater than the point estimate, results should be interpreted cautiously.
2001 Utah Health Status Survey, Utah Department of Health

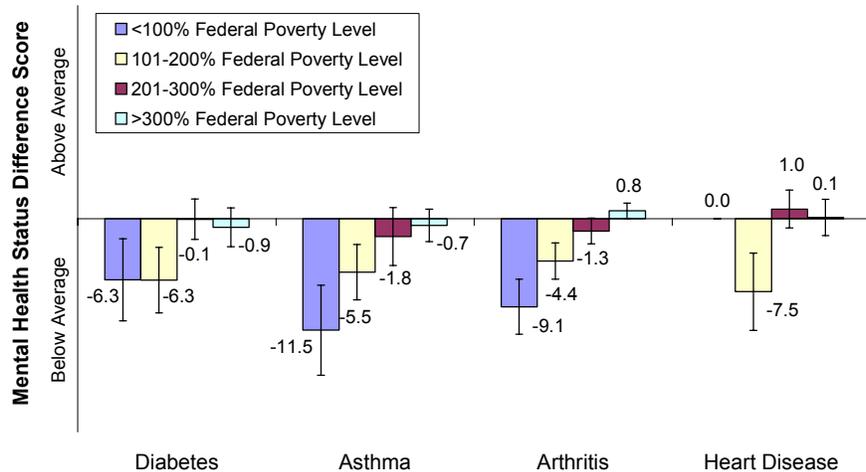
The Influence of Disease and Lifestyle on Quality of Life



PCS Difference Scores for Persons With Diabetes, Asthma, Arthritis, or Heart Disease by Poverty Level, Adults Age 18 or Over, Utah, 2001



MCS Difference Scores for Persons With Diabetes, Asthma, Arthritis, or Heart Disease by Poverty Level, Adults Age 18 or Over, Utah, 2001



- Poverty adds an extra dimension of difficulty for persons with chronic health conditions. Regardless of the condition being considered, those in households with incomes less than 100% of the Federal Poverty Level reported poorer physical and mental health than those living at higher levels of the poverty threshold.
- These differences could be due, in part, to a lack of resources (medical, financial, social) among persons living at lower levels of poverty, exacerbating the effects of chronic conditions.

The Influence of Disease and Lifestyle on Quality of Life



Table 3. The Influence of Diseases and Lifestyle Factors on Quality of Life, Physical and Mental Health Status Summary Means and Difference Scores for Four Chronic Diseases by Poverty Status, Utah Residents, Age 18 and Over, 2001.

Demographic Subgroup	Physical Composite Scale (PCS)		Mental Composite Scale (MCS)	
	Mean Scale Score	Difference Score	Mean Scale Score	Difference Score
Diabetes Diagnosed by a Doctor				
<100% Federal Poverty Level	30.0	-17.39 ± 4.51	46.3	-6.32 ± 4.23
101-200% Federal Poverty Level	42.0	-6.45 ± 3.18	46.7	-6.32 ± 3.38
201-300% Federal Poverty Level	40.5	-7.71 ± 3.37	52.9	-0.05 ± 2.10
>300% Federal Poverty Level	44.1	-4.08 ± 2.45	52.1	-0.87 ± 2.01
Currently Under Medical Care for Asthma				
<100% Federal Poverty Level	38.7	-11.99 ± 3.96	40.5	-11.50 ± 4.64
101-200% Federal Poverty Level	39.6	-10.12 ± 3.37	46.7	-5.52 ± 2.86
201-300% Federal Poverty Level	43.2	-7.78 ± 4.33	50.2	-1.83 ± 3.00
>300% Federal Poverty Level	48.5	-1.79 ± 1.89	51.5	-0.69 ± 1.69
Currently Under Medical Care for Arthritis				
<100% Federal Poverty Level	33.6	-15.47 ± 2.57	43.3	-9.08 ± 2.85
101-200% Federal Poverty Level	38.1	-10.52 ± 2.02	48.3	-4.37 ± 1.86
201-300% Federal Poverty Level	41.5	-7.07 ± 1.74	51.5	-1.27 ± 1.33
>300% Federal Poverty Level	44.9	-3.55 ± 1.19	53.6	+0.82 ± 0.81
Heart Disease Diagnosed by a Doctor				
<100% Federal Poverty Level	***	*** ± ***	***	*** ± ***
101-200% Federal Poverty Level	32.6	-13.06 ± 3.60	45.8	-7.52 ± 3.99
201-300% Federal Poverty Level	39.9	-5.99 ± 3.22	54.3	+1.00 ± 1.95
>300% Federal Poverty Level	42.9	-3.71 ± 2.10	53.5	+0.13 ± 1.88

Note: If the confidence interval is greater than the point estimate, results should be interpreted cautiously.

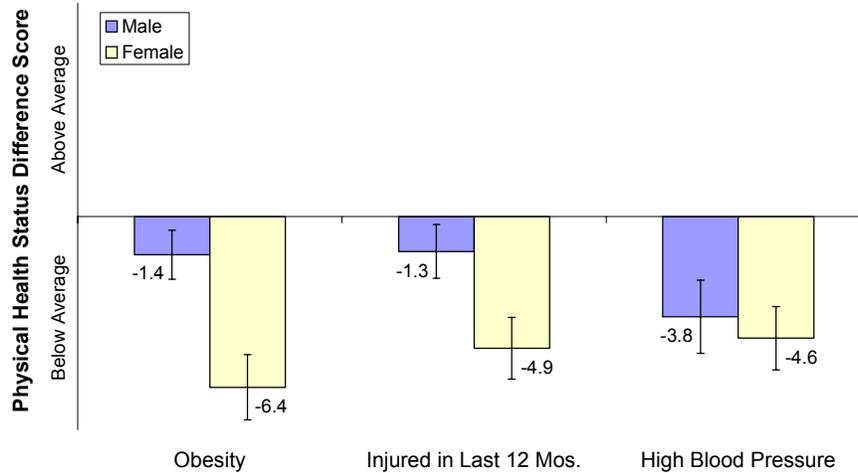
*** Insufficient sample size for calculation of population estimates

2001 Utah Health Status Survey, Utah Department of Health

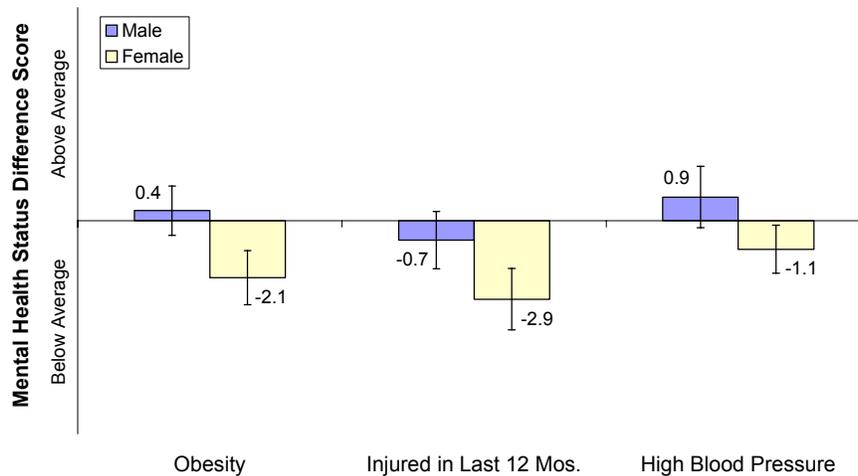
The Influence of Disease and Lifestyle on Quality of Life



PCS Difference Scores for Persons With Three Health Problems by Sex, Adults Age 18 or Over, Utah, 2001



MCS Difference Scores for Persons With Three Health Problems by Sex, Adults Age 18 or Over, Utah, 2001



- The presence of a medical condition was also associated with poor physical health for both men and women. However, women experienced greater physical and mental problems than men, due to obesity, injury, or high blood pressure.

The Influence of Disease and Lifestyle on Quality of Life



Table 4. The Influence of Diseases and Lifestyle Factors on Quality of Life, Physical and Mental Health Status Summary Means and Difference Scores for Three Health Problems by Sex, Utah Residents, Age 18 and Over, 2001.

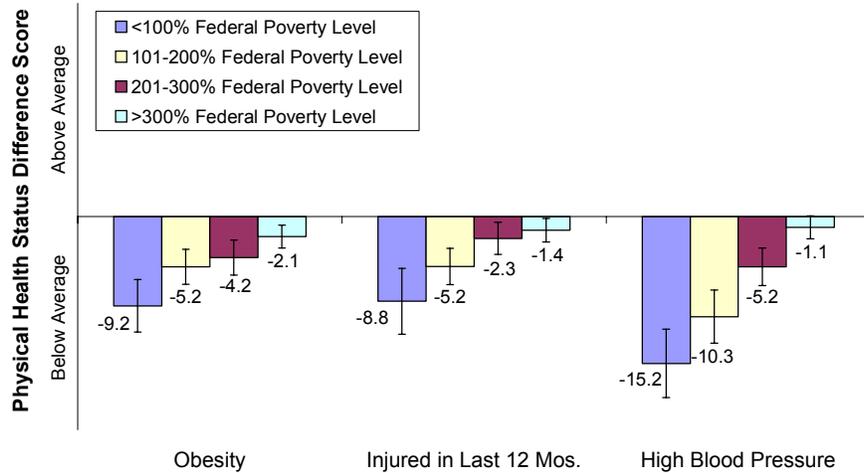
Demographic Subgroup	Physical Composite Scale (PCS)		Mental Composite Scale (MCS)	
	Mean Scale Score	Difference Score	Mean Scale Score	Difference Score
Obesity (Body Mass Index \geq 27.8 for Males and 27.3 for Females)				
Male	48.9	-1.43 \pm 0.92	52.7	+0.38 \pm 0.93
Female	43.3	-6.41 \pm 1.22	50.2	-2.14 \pm 1.02
Injured During the Last 12 Months				
Male	50.5	-1.31 \pm 1.01	51.2	-0.73 \pm 1.08
Female	45.5	-4.94 \pm 1.16	49.2	-2.95 \pm 1.15
High Blood Pressure Diagnosed by a Doctor				
Male	43.2	-3.76 \pm 1.37	54.1	+0.89 \pm 1.15
Female	41.8	-4.57 \pm 1.19	52.2	-1.07 \pm 0.90

Note: If the confidence interval is greater than the point estimate, results should be interpreted cautiously.
 2001 Utah Health Status Survey, Utah Department of Health

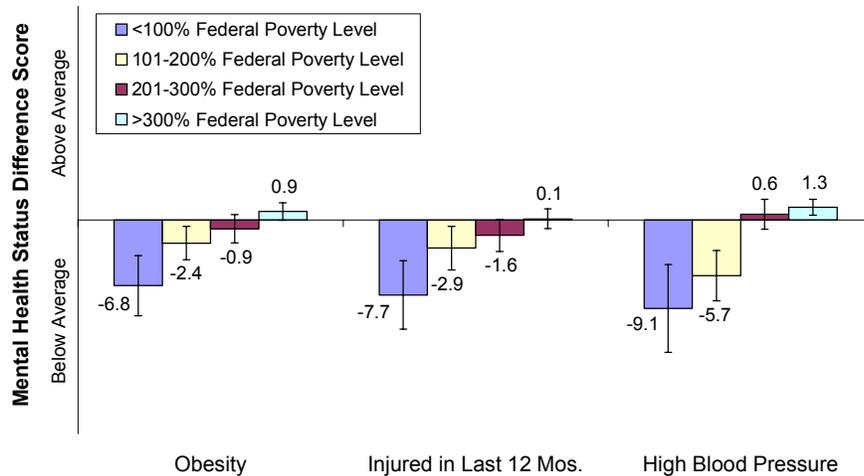
The Influence of Disease and Lifestyle on Quality of Life



PCS Difference Scores for Persons With Three Health Problems by Poverty Level, Adults Age 18 or Over, Utah, 2001



MCS Difference Scores for Persons With Three Health Problems by Poverty Level, Adults Age 18 or Over, Utah, 2001



- Persons living in households with incomes less than 100% of the Federal Poverty Level who also had any of the three medical problems above had significantly poorer physical and mental health outcomes than persons with the same health problems living above 100% of poverty.

The Influence of Disease and Lifestyle on Quality of Life

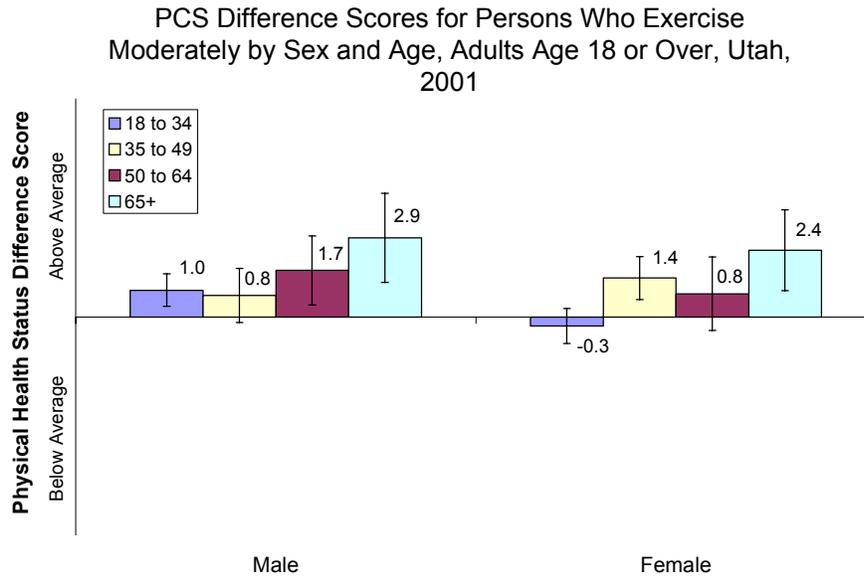


Table 5. The Influence of Diseases and Lifestyle Factors on Quality of Life, Physical and Mental Health Status Summary Means and Difference Scores for Three Health Problems by Poverty Status, Utah Residents, Age 18 and Over, 2001.

Demographic Subgroup	Physical Composite Scale (PCS)		Mental Composite Scale (MCS)	
	Mean Scale Score	Difference Score	Mean Scale Score	Difference Score
Obesity (Body Mass Index \geq 27.8 for Males and 27.3 for Females)				
<100% Federal Poverty Level	40.8	-9.20 \pm 2.71	45.3	-6.76 \pm 3.08
101-200% Federal Poverty Level	45.7	-5.19 \pm 1.81	49.8	-2.38 \pm 1.73
201-300% Federal Poverty Level	46.2	-4.23 \pm 1.80	51.4	-0.91 \pm 1.46
>300% Federal Poverty Level	47.8	-2.06 \pm 1.18	53.3	+0.88 \pm 0.90
Injured During the Last 12 Months				
<100% Federal Poverty Level	42.6	-8.75 \pm 3.40	44.3	-7.72 \pm 3.51
101-200% Federal Poverty Level	46.6	-5.16 \pm 1.89	49.0	-2.89 \pm 2.25
201-300% Federal Poverty Level	49.4	-2.26 \pm 1.65	50.4	-1.59 \pm 1.66
>300% Federal Poverty Level	49.8	-1.42 \pm 1.22	52.2	+0.11 \pm 1.01
High Blood Pressure Diagnosed by a Doctor				
<100% Federal Poverty Level	31.1	-15.16 \pm 3.53	43.9	-9.10 \pm 4.51
101-200% Federal Poverty Level	36.1	-10.33 \pm 2.74	47.4	-5.72 \pm 2.59
201-300% Federal Poverty Level	42.1	-5.18 \pm 1.93	53.7	+0.58 \pm 1.54
>300% Federal Poverty Level	46.1	-1.13 \pm 1.19	54.5	+1.31 \pm 0.81

Note: If the confidence interval is greater than the point estimate, results should be interpreted cautiously.
 2001 Utah Health Status Survey, Utah Department of Health

The Influence of Disease and Lifestyle on Quality of Life



- Regular moderate exercise is associated with better physical and mental health for men across different age groups, with the strongest association for men who are aged 65 and over.
- Regular moderate exercise is also associated with good physical and mental health for women.
- Higher scores on the physical and mental health scales across age groups could come from the health benefits of regular exercise, however, it is also possible that as people age, those in good health are simply able to maintain regular exercise in their lifestyles.

The Influence of Disease and Lifestyle on Quality of Life



Table 6. The Influence of Diseases and Lifestyle Factors on Quality of Life, Physical and Mental Health Status Summary Means and Difference Scores for Persons Who Exercise Moderately

by Selected Demographic Characteristics, Utah Residents, Age 18 and Over, 2001.

Demographic Subgroup	Physical Composite Scale (PCS)		Mental Composite Scale (MCS)	
	Mean Scale Score	Difference Score	Mean Scale Score	Difference Score
Sex				
Male	52.2	+1.27 ± 0.47	54.0	+1.83 ± 0.45
Female	51.5	+0.63 ± 0.46	52.0	-0.19 ± 0.44
Age Group				
18 to 34	53.6	+0.36 ± 0.44	52.4	+0.66 ± 0.51
35 to 49	52.4	+1.11 ± 0.63	52.6	+1.05 ± 0.59
50 to 64	49.5	+1.27 ± 0.93	53.7	+0.49 ± 0.73
65+	46.4	+2.70 ± 1.12	55.8	+1.67 ± 0.75
Sex and Age				
Males, 18 to 34	54.2	+0.98 ± 0.59	53.6	+1.84 ± 0.73
Males, 35 to 49	52.1	+0.79 ± 0.99	53.2	+1.70 ± 0.83
Males, 50 to 64	50.0	+1.70 ± 1.27	54.4	+1.31 ± 1.04
Males, 65+	46.7	+2.90 ± 1.63	56.9	+2.69 ± 1.00
Females, 18 to 34	52.9	-0.33 ± 0.64	51.1	-0.65 ± 0.69
Females, 35 to 49	52.7	+1.43 ± 0.79	52.0	+0.42 ± 0.83
Females, 50 to 64	49.0	+0.85 ± 1.35	52.9	-0.29 ± 1.00
Females, 65+	46.1	+2.45 ± 1.48	54.6	+0.44 ± 1.07

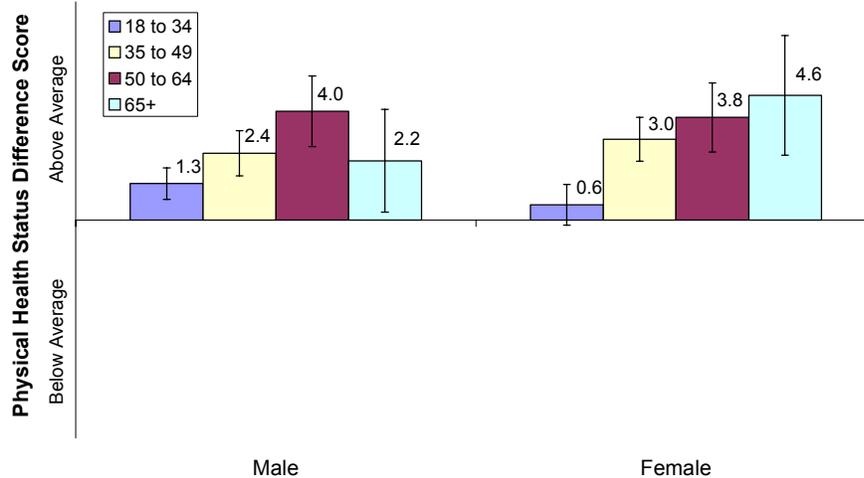
Note: If the confidence interval is greater than the point estimate, results should be interpreted cautiously.

2001 Utah Health Status Survey, Utah Department of Health

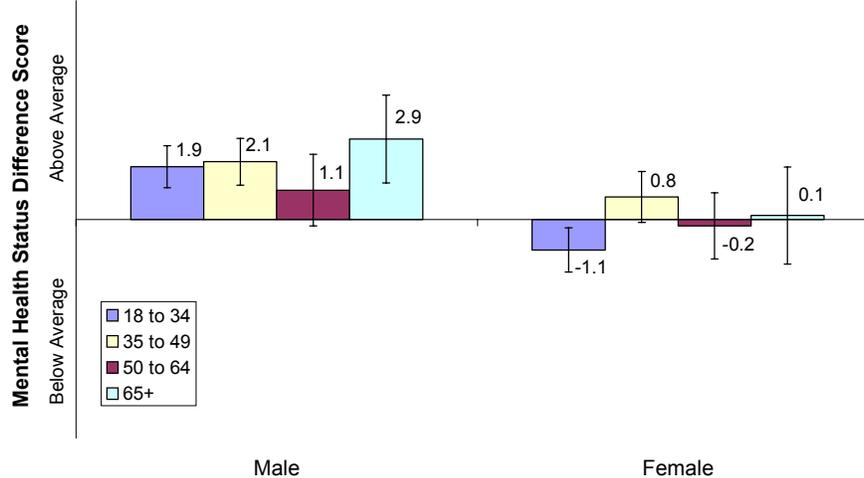
The Influence of Disease and Lifestyle on Quality of Life



PCS Difference Scores for Persons Who Exercise Vigorously by Sex and Age, Adults Age 18 or Over, Utah, 2001



MCS Difference Scores for Persons Who Exercise Vigorously by Sex and Age, Adults Age 18 or Over, Utah, 2001



- Regular vigorous exercise was strongly associated with above average physical health for both men and women across age groups.
- Regular vigorous exercise was also associated with above average mental health for men, across age groups. However, this association was not true for women.
- There does not seem to be a strong association between regular vigorous exercise and above average mental health for women. In fact women 18-34 years who get regular vigorous exercise, had mental health below the average compared to their peers who did not exercise vigorously. This finding was statistically significant.

The Influence of Disease and Lifestyle on Quality of Life



Table 7. The Influence of Diseases and Lifestyle Factors on Quality of Life, Physical and Mental Health Status Summary Means and Difference Scores for Persons Who Exercise Vigorously by Selected Demographic Characteristics, Utah Residents, Age 18 and Over, 2001.

Demographic Subgroup	Physical Composite Scale (PCS)		Mental Composite Scale (MCS)	
	Mean Scale Score	Difference Score	Mean Scale Score	Difference Score
Sex				
Male	53.5	+1.98 ± 0.44	54.0	+1.96 ± 0.52
Female	53.3	+1.90 ± 0.52	51.7	-0.41 ± 0.54
Age Group				
18 to 34	54.3	+1.01 ± 0.46	52.4	+0.66 ± 0.57
35 to 49	54.1	+2.66 ± 0.59	53.1	+1.57 ± 0.64
50 to 64	52.2	+3.88 ± 0.91	53.5	+0.42 ± 0.90
65+	46.8	+3.06 ± 1.46	56.1	+1.90 ± 1.24
Sex and Age				
Males, 18 to 34	54.6	+1.33 ± 0.57	53.7	+1.92 ± 0.77
Males, 35 to 49	53.9	+2.45 ± 0.83	53.6	+2.10 ± 0.86
Males, 50 to 64	52.3	+3.99 ± 1.30	54.1	+1.07 ± 1.31
Males, 65+	46.0	+2.17 ± 1.88	57.2	+2.94 ± 1.61
Females, 18 to 34	53.8	+0.55 ± 0.74	50.6	-1.12 ± 0.81
Females, 35 to 49	54.3	+2.96 ± 0.80	52.3	+0.82 ± 0.93
Females, 50 to 64	52.0	+3.76 ± 1.27	52.9	-0.24 ± 1.21
Females, 65+	48.1	+4.57 ± 2.20	54.2	+0.14 ± 1.78

Note: If the confidence interval is greater than the point estimate, results should be interpreted cautiously.

2001 Utah Health Status Survey, Utah Department of Health