

Table S1: Medication Survey. This questionnaire reported the medication of the last two weeks prior to the questionnaire.

Medication		t0	t3	t6
High Blood Pressure	Yes	24	20	16
	No	15	15	16
	Unknown / MV	0 / 0	0 / 4	0 / 7
High Blood Cholesterol	Yes	6	5	7
	No	24	26	23
	Unknown / MV	1 / 8	0 / 10	1 / 8
Angina or Chest Pain	Yes	0	0	0
	No	30	30	27
	Unknown / MV	0 / 9	0 / 9	0 / 12
Control of Heart Rhythm	Yes	2	0	0
	No	27	29	27
	Unknown / MV	1 / 9	1 / 9	0 / 12
Heart Failure	Yes	0	0	0
	No	28	29	27
	Unknown / MV	1 / 10	1 / 9	0 / 12
Blood Thinning	Yes	4	4	3
	No	27	27	26
	Unknown / MV	0 / 8	0 / 8	0 / 10
Diabetes or High Blood Sugar	Yes	3	3	2
	No	28	28	25
	Unknown / MV	0 / 8	0 / 8	0 / 12
Stroke	Yes	0	0	0
	No	30	30	27
	Unknown / MV	0 / 9	0 / 9	0 / 12
Leg pain when walking	Yes	4	2	3
	No	26	28	25
	Unknown / MV	0 / 9	1 / 8	0 / 11
Aspirin, Alka-Seltzer, cold medicine or headache powder	Yes	10	11	10
	No	29	25	22
	Unknown / MV	0 / 0	0 / 3	0 / 7
Medication for Arthritis, fever, or muscle aches and pains, (or menstrual cramps)	Yes	3	8	6
	No	35	28	26
	Unknown / MV	1 / 0	0 / 3	0 / 7
Non-steroidal anti-inflammatory drugs	Yes	6	4	3
	No	32	31	28
	Unknown / MV	1 / 0	1 / 3	1 / 7

Medication survey according to ARIC Medication survey form [1]

1. Investigators, T.A. The Atherosclerosis Risk in Communities (ARIC) Study: design and objectives. The ARIC investigators. *Am J Epidemiol* **1989**, 129, 687-702.