The following questions concern the occurrence of common urinary symptoms, as well as some questions related to your general health. These questions are a follow-up to the information that you provided for us in 1994–1995. Please complete the questionnaire even if you do not currently have any urinary symptoms.

Please copy your ID from page 2 to here.

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1. During the past month, please indicate how frequently you had these urinary symptoms and how large of a problem they were to you:

- Sensation of incomplete bladder emptying
- Having to urinate again after less than 2 hours
- Stopping and starting several times during urination
- Found it difficult to postpone urinating
- Weak urinary stream
- Had to push to begin urination

   % OF TIME EXPERIENCED SYMPTOMS
   0% 10% 25% 50% 75% Almost 100%

   HOW LARGE A PROBLEM?
   None Very Small Small Medium Big

2. a. Over the past month, how many times per night did you typically get up to urinate?
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6 or more times per night

   b. How large of a problem was this to you?
   - None
   - Very small
   - Small
   - Medium
   - Big

3. Over the past month, how much physical discomfort did any urinary problems cause you?
   - None
   - Only a little
   - Some
   - A lot

4. Over the past month, how much did you worry about your health because of urinary problems?
   - None
   - Only a little
   - Some
   - A lot

5. Overall, how bothersome has any trouble with urination been during the past month?
   - Not at all bothersome
   - Bothers me a little
   - Bothers me some
   - Bothers me a lot

6. Over the past month, how much of the time has any urinary problem kept you from doing the kinds of things you would usually do?
   - None of the time
   - A little of the time
   - Some of the time
   - Most of the time
   - All of the time

7. In general, would you say your health is:
   - Excellent
   - Very good
   - Good
   - Fair
   - Poor

8. Since January 1, 1994, have you had an enlarged prostate detected by rectal exam?
   - No
   - Yes

9. Since January 1, 1994, has a physician told you that you have benign prostatic hyperplasia (BPH)?
   - No
   - Yes

10. Since January 1, 1994, have you had an episode of acute urinary retention requiring catheterization?
    - No
    - Yes

11. Do you currently use the following medications regularly for prostate problems?
    - Hytrin (terazosin)
    - Minipress (prazosin)
    - Cardura (doxazosin)

12. During the past month, how often have your urinary problems interfered in the following activities?
    - Drinking fluids before you travel
    - Drinking fluids before you go to bed
    - Driving for two hours without stopping
    - Getting enough sleep at night
    - Going to places that may not have a toilet
    - Playing sports outdoors such as golf
    - Going to movies, shows, church, etc.
13. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

How much of your time during the past 4 weeks... (Mark one response on each line.)

- Did you feel full of pep?
- Have you been a very nervous person?
- Have you felt so down in the dumps nothing could cheer you up?
- Have you felt calm and peaceful?
- Did you have a lot of energy?
- Have you felt downhearted and blue?
- Did you feel worn out?
- Have you been a happy person?
- Did you feel tired?

14. During the past 4 weeks, how much of the time have your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?

- All of the time
- Most of the time
- Some of the time
- A little of the time
- None of the time

15. Please choose the answer that best describes how true or false each of the following statements is for you. (Mark one response on each line.)

- I seem to get sick a lot easier than other people.
- I am as healthy as anybody I know.
- I expect my health to get worse.
- My health is excellent.

16. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? (Mark one response on each line.)

a) Cut down the amount of time you spent on work or other activities
b) Accomplished less than you would like
c) Didn't do work or other activities as carefully as usual

17. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?

- Not at all
- Slightly
- Moderately
- Quite a bit
- Extremely

18. How much bodily pain have you had during the past 4 weeks?

- None
- Very mild
- Mild
- Moderate
- Severe
- Very severe

19. During the past 4 weeks, how much did bodily pain interfere with your normal work (including both work outside the home and housework)?

- Not at all
- A little bit
- Moderately
- Quite a bit
- Extremely

20. During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? (Mark one response on each line.)

a) Cut down the amount of time you spent on work or other activities
b) Accomplished less than you would like
c) Were limited in the kind of work or other activities
d) Had difficulty performing the work or other activities (for example, it took extra effort)

21. Do you have an unreasonable fear of being in enclosed spaces such as stores, elevators, etc.?

- Often
- Sometimes
- Never

22. Do you find yourself worrying about getting some incurable illness?

- Often
- Sometimes
- Never

23. Are you scared of heights?

- Very
- Moderately
- Not at all

24. Do you feel panicky in crowds?

- Always
- Sometimes
- Never

25. Do you worry unduly when relatives are late coming home?

- Yes
- No

26. Do you feel more relaxed indoors?

- Definitely
- Sometimes
- Not particularly

27. Do you dislike going out alone?

- Yes
- No

28. Do you feel uneasy traveling on buses or trains, even if they are not crowded?

- Very
- A little
- Not at all

Thank You Very Much!