



UNIVERSITY OF COSTA RICA

A Joint Project of the Central American Center on Population (CCP) and the Institute for Health Research (INISA)

CRELES

Costa Rican Longevity and Healthy Aging Study

DIET QUESTIONNAIRE

Round 1

The information provided is completely confidential and voluntary

Name of Senior:		Subject code: _ _ _ _	
Name of substitute (if applicable):		Canton and district:: _ _ _ _ _	
Segment: _ _ _ _		Housing: _ _ _	
Now we are going to talk about some foods and vitamins. I would like you to tell me if in the last 12 months you have eaten these and, on average, how much.			
D1	Interviewer	Giovanni	3
		Jorge	4
		Mabelyn	5
		Marcela	6
		Maritza	7
		Jenny	8
		María	9
		Julio	10
		César	11
VITAMINS			
DV1	Do you take multivitamins?	Yes	1
		No	2→ DVv1
		DK/NR	9→ DVv1
DV2	How many pills or tablespoon do you take per week?	2 or less	1
		3-5	2
		6-9	3
		10 or more	4
		DK/NR	9
DV3	What is the brand and type of the one you take most often?	Brand: _____	
		Type: _____	
Speaking specifically of some vitamins, please indicate what is the daily dose you take for each			
DVv1	Vitamin A	Does not take	0
		Less than 80000 IU	1
		8000-12000 IU	2
		13000-22000 IU	3
		23000 or more IU	4
		DK/NR	9
DVv2	Vitamin C	Does not take	0
		Less than 400 mg	1
		400-700 mg	2
		750-1250 mg	3
		1300 or more mg	4
		DK /NR	9

DVv3	Vitamin B6	Does not take	0																		
		Less than 10 mg	1																		
		10-39 mg	2																		
		40-79 mg	3																		
		80 or more mg	4																		
		DK /NR	9																		
DVv4	Vitamin E	Does not take	0																		
		Less than 100 IU	1																		
		100-250 IU	2																		
		300-500 IU	3																		
		600 or more IU	4																		
		DK /NR	9																		
DVv5	Calcium	Does not take	0																		
		Less than 400 mg	1																		
		400-900 mg	2																		
		901-1300 mg	3																		
		1301 or more mg	4																		
		DK /NR	9																		
DVv6	Iron	Does not take	0																		
		Less than 51 mg	1																		
		51-200 mg	2																		
		201-400 mg	3																		
		401 or more mg	4																		
		DK /NR	9																		
DVv7	Fish Oil	Does not take	0																		
		Less than 2500mg	1																		
		2500-4999 mg	2																		
		5000-9999 mg	3																		
		10000 or more mg	4																		
		DK /NR	9																		
OTHER SUPPLEMENTS																					
		Supplement	Yes	No	DK /NR																
	Which of the following supplements do you take?	DVs1. Vitamins Complex B	1	2	9																
		DVs2. Cod liver oil	1	2	9																
		DVs3. Folic Acid	1	2	9																
		DVs4. Vitamin D	1	2	9																
		DVs5. Sustagen / Sustamento	1	2	9																
D2	How many teaspoons of sugar do you add to your beverages or meals per day? Do not include the sugar added to natural fresh fruit juices (<i>fresco</i>).	Teaspoons	_ _																		
During the last 12 months, how often did you drink or eat, ON AVERAGE, the food that I am going to mention to you?																					
	Dairy	Other portion	% Portion	Never or < 1 time per month	1-3 per mo.	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day									

DLa1	Milk (1 glass of 8 oz)			1	2	3	4	5	6	7	8	9
DLa3	Cream (1 tablespoon)			1	2	3	4	5	6	7	8	9
DLa5	Fresh white cheese (1 slice or 1 oz)			1	2	3	4	5	6	7	8	9
DLa7	Processed white or yellow cheese alone, with bread or tortilla or as part of a dish (1 slice)			1	2	3	4	5	6	7	8	9
DLa9	Margarine with bread or with meals (1 tablespoon)			1	2	3	4	5	6	7	8	9
DLa11	Form of margarine	Stick		1								
		Tub		2								
		Liquid		3								
		None		4								
DLa12	Type of margarine	Regular		1								
		Light		2								
		Smooth		3								
DLa13	Brand of margarine Ex: Numar, siempre suave	Clover Brand		1								
		Sabemas		2								
		Corona		3								
		Numar		4								
		Other: _____										
	FRUITS	Other portion	% portion	Never or < 1 Time per month	1-3 per mo.	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
DLb1	Bananas (1)			1	2	3	4	5	6	7	8	9
DLb3	Avocado (1/2)			1	2	3	4	5	6	7	8	9
DLb5	Mango (1)			1	2	3	4	5	6	7	8	9
DLb7	Oranges (1)			1	2	3	4	5	6	7	8	9
	VEGETABLES											
DLb9	Black or red beans (1/3 cup)			1	2	3	4	5	6	7	8	9
	EGGS-MEAT											
DLc1	Egg (1)			1	2	3	4	5	6	7	8	9
DLc3	Chicken with skin (4-6 oz. 1 Portion)			1	2	3	4	5	6	7	8	9
DLc5	Meatballs (1)			1	2	3	4	5	6	7	8	9
DLc7	Beef as a main dish I (Ex: <i>steak</i> (4-6 oz)).			1	2	3	4	5	6	7	8	9
DLc9	Fish (scallops, sea bass, other) (3-5 oz)			1	2	3	4	5	6	7	8	9
	BREAD, CEREAL, FLOUR	Other portion	% portion	Never or < de 1 time per month	1-3 mos	1 per week	2-4 per week	5-6 per week	1 per day	2-3 per day	4-5 per day	6+ per day
DLd1	White bread (Baguette or rolls) (1 portion)			1	2	3	4	5	6	7	8	9
DLd3	Potato chips or corn chips, (1 bag of 1 oz.)			1	2	3	4	5	6	7	8	9
DLd5	White rice (2/3 cup)			1	2	3	4	5	6	7	8	9

	DRINKS												
DLe1	Coca-cola or Pepsi (1 glass)			1	2	3	4	5	6	7	8	9	
DLe3	Fresh fruit drinks (lemonade, berry, pineapple, etc) (1 glass, 8 oz)			1	2	3	4	5	6	7	8	9	
DLe5	Beer (1 glass, bottle or can)			1	2	3	4	5	6	7	8	9	
DLe7	Rum, <i>guaro</i> rum, Whisky, Gin, Vodka (1 drink)			1	2	3	4	5	6	7	8	9	
	SWEETS, CONFECTIONS, VARIOUS												
DLf1	Cookies (1 packet of 4 units)			1	2	3	4	5	6	7	8	9	
DLf3	Confections (baked goods, pastries, sweet rolls, <i>coffee cake</i>) (1 unit)			1	2	3	4	5	6	7	8	9	
DLf5	Mayonnaise (1 tablespoon)			1	2	3	4	5	6	7	8	9	
DLf7	Olive oil with bread or salad (1 tablespoon)			1	2	3	4	5	6	7	8	9	
D3	What brand and type of fat do you most often use to cook?	Oil		1 → Oil									
		Lard		2 → Lard									
		Oil				Lard							
		D4. Brand		D5a. Type		D6a. Brand			D7a. Type				
		Clover Brand	1										
		Sabemas	2										
		Corona	3	Soy	1								
		Capullo	4	Vegetable	2	Clover Brand	1		Soy	1			
		Girol	5	Corn	3	Sabemas	2		Palm	2			
		Mazola	6	Sunflower	4	Corona	3		D7. Other: _____				
		Crisol	7	D5. Other: _____		D6 Other: _____							
		Numar	8										
		Other: _____											
D8	How often do you eat fried foods prepared away from your home?	< 1 time per week		1									
		1-3 times per week		2									
		4-6 times per week		3									
		1 time per day		4									
		2-3 times per day		5									
		4 times per day		6									
		Does not eat		7									
		Ending Hour											
		_ : _											