

Resource Summary Report

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Framingham Heart Study

RRID:SCR_008963

Type: Tool

Proper Citation

Framingham Heart Study (RRID:SCR_008963)

Resource Information

URL: <http://www.framinghamheartstudy.org/>

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Description: A longitudinal, epidemiologic study to identify the common risk factors or characteristics that contribute to cardiovascular disease by following its development over a long period of time in a large group of participants who had not yet developed overt symptoms or suffered a heart attack or stroke. Since that time the FHS has studied three generations of participants resulting in biological specimens and data from nearly 15,000 participants. Since 1994, two groups from minority populations, including related individuals have been added to the FHS. FHS welcomes proposals from outside investigators for data and biospecimens. The researchers recruited 5,209 men and women between the ages of 30 and 62 from the town of Framingham, Massachusetts, and began the first round of extensive physical examinations and lifestyle interviews that they would later analyze for common patterns related to CVD development. Since 1948, the subjects have continued to return to the study every two years for a detailed medical history, physical examination, and laboratory tests, and in 1971, the Study enrolled a second generation - 5,124 of the original participants' adult children and their spouses - to participate in similar examinations. In 1994, the need to establish a new study reflecting a more diverse community of Framingham was recognized, and the first Omni cohort of the Framingham Heart Study was enrolled. In April 2002 the Study entered a new phase, the enrollment of a third generation of participants, the grandchildren of the Original Cohort. In 2003, a second group of Omni participants was enrolled. Over the years, careful monitoring of the Framingham Study population has led to the identification of major CVD risk factors, as well as valuable information on the effects of these factors such as blood pressure, blood triglyceride and cholesterol levels, age, gender, and psychosocial issues. Risk factors for other physiological conditions such as dementia have been and continue to be investigated. In addition, the relationships between physical traits and genetic patterns are being studied. FHS clinical and research data is stored in the dbGaP and NHLBI Repository repositories and may be accessed by application. Please check the following repositories before applying for data through FHS. Investigators seeking data that is not available through dbGaP or BioLINCC or seeking biological

specimens may submit a proposal through the FHS web-based research application. The FHS data repository may be accessed through this FHS website, under the For Researchers link, then Description of Data, in order to determine if and how the desired data is stored. Proposals may involve the use of existing data, the collection of new data, either directly from participants or from previously collected samples, images, or other materials (e.g., medical records). The FHS Repository also has biological specimens available for genetic and non-genetic research proposals. Specimens include urine, blood and blood products, as well as DNA.

Abbreviations: FHS

Resource Type: biomaterial supply resource, material resource

Keywords: clinical study, longitudinal study, heart, cardiac, adult human, male, female, risk factor, blood pressure, blood triglyceride, cholesterol level, age, gender, psychosocial, dementia, physical trait, genetic trait, minority, clinical, genotype, phenotype, urine, blood, blood product, dna, FASEB list

Related Condition: Cardiovascular disease, Normal, Aging

Funding: NHLBI Division of Prevention and Population Sciences

Availability: Public / Collaboration preferred: FHS welcomes proposals from outside investigators. Collaboration with FHS investigators is encouraged as it helps to maximize the scientific potential of the unique data.

Resource Name: Framingham Heart Study

Resource ID: SCR_008963

Alternate IDs: nlx_151991

Record Creation Time: 20220129T080250+0000

Record Last Update: 20260905T133241+0000

Ratings and Alerts

No rating or validation information has been found for Framingham Heart Study.

No alerts have been found for Framingham Heart Study.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 164 mentions in open access literature.

Listed below are recent publications. The full list is available at [PRECISE-TBI](#) .

Li J, et al. (2026) Circulating metabolites, genetics and lifestyle factors in relation to future risk of type 2 diabetes. *Nature medicine*, 32(2), 660.

Mirjalili SR, et al. (2026) AI-CVD-HF: A heart failure risk prediction model based on coronary artery calcium scans compared with PREVENT-HF. *American journal of preventive cardiology*, 27, 101464.

Davis DN, et al. (2026) Refined Heart Failure Stages Incorporating Cardiorespiratory Fitness Are Differentially Associated With Heart Failure Risk in the Community. *Journal of the American Heart Association*, 15(4), e045791.

Mirjalili SR, et al. (2026) Comparing incidence of heart failure in individuals with enlarged cardiac chambers versus diabetes. *American journal of preventive cardiology*, 29, 101656.

Yiannakou I, et al. (2025) Eggs, Dietary Choline, and Nonalcoholic Fatty Liver Disease in the Framingham Heart Study. *The Journal of nutrition*, 155(3), 923.

Hamel-Sellman DJ, et al. (2025) Relations of Artificial Intelligence Vascular Age With Cardiometabolic Disease Progression: The Framingham Heart Study. *Journal of the American Heart Association*, 14(24), e044872.

Lei Y, et al. (2025) Cardiometabolic Risk Assessment in Transgender Individuals- Differential Effect of Sex Hormones and Sex Chromosomes. *The Journal of clinical endocrinology and metabolism*, 110(7), e2273.

Cooper LL, et al. (2025) Interrelations of aortic spring function, cardiovascular disease risk factors, and left ventricular diastolic function: The Framingham Heart Study. *medRxiv : the preprint server for health sciences*.

Jasodanand VH, et al. (2025) AI-driven fusion of multimodal data for Alzheimer's disease biomarker assessment. *Nature communications*, 16(1), 7407.

Avouac J, et al. (2025) The Cardiovascular Safety of Tumour Necrosis Factor Inhibitors in Arthritic Conditions: A Structured Review with Recommendations. *Rheumatology and therapy*, 12(2), 211.

Wang L, et al. (2025) Novel loci for triglyceride/HDL-C ratio longitudinal change among subjects without T2D. *Journal of lipid research*, 66(1), 100702.

El-Sabawi B, et al. (2025) Circulating Proteomics Identifies a Dynamic Profile of Hepatic Steatosis During Metabolic Intervention. *Journal of the American Heart Association*, 14(10), e037100.

Nomura S, et al. (2025) Lipoprotein(a) and Heart Failure Among Black and White Participants in Atherosclerosis Risk in Communities Study, Framingham Offspring Study, and Multi-Ethnic Study of Atherosclerosis: The Pooling Project. *Journal of the American Heart Association*, 14(11), e038608.

van Lent DM, et al. (2025) Association between dietary inflammatory index score and incident dementia. *Alzheimer's & dementia : the journal of the Alzheimer's Association*,

21(1), e14390.

Wang L, et al. (2024) Novel Loci (EIF4A2, ADIPOQ, TPRG1) for Triglyceride / High-density Lipoprotein Cholesterol Ratio Longitudinal Change (??THR) among Subjects without Type 2 Diabetes: Evidence from the Long Life Family Study (LLFS) and the Framingham Heart Study (FHS) Offspring Cohort (OS). medRxiv : the preprint server for health sciences.

Ye C, et al. (2024) Association of vertebral fractures with worsening degenerative changes of the spine: a longitudinal study. Journal of bone and mineral research : the official journal of the American Society for Bone and Mineral Research, 39(12), 1744.

Perry AS, et al. (2024) Clinical-transcriptional prioritization of the circulating proteome in human heart failure. Cell reports. Medicine, 5(9), 101704.

Weinstein G, et al. (2024) Association of Neurotrophic Factors at Midlife With In Vivo Measures of ??-Amyloid and Tau Burden 15 Years Later in Dementia-Free Adults. Neurology, 102(7), e209198.

Zhou Z, et al. (2024) Digital Health Platform for Improving the Effect of the Active Health Management of Chronic Diseases in the Community: Mixed Methods Exploratory Study. Journal of medical Internet research, 26, e50959.

Landolfo M, et al. (2024) Validation of the Novel Web-Based Application HUMTELEMED for a Comprehensive Assessment of Cardiovascular Risk Based on the 2021 European Society of Cardiology Guidelines. Journal of clinical medicine, 13(8).