

## **AUTHORS' REPLY**

Dear Sir,

Regarding your first point, different obesity measures reflect different aetiologies and body composition. Moreover, the Indian population is heterogeneous with a large number of ethnic groups. So, the relationship between dependent and independent variables may not be similar in all ethnic groups. For example, WC may be strongly associated with hypertension in ethnic group "A", but may not be in ethnic group "B". That is why we have taken all variables instead of selecting a single variable, which may be strongly associated with hypertension in another population. The best way to deal with the problem of colinearity is PCA. However, it is suitable for larger number of different types of variables and the present study have only six variables. Furthermore, for probable colinearity among anthropometric variables, we have given multiple logistic regression along with simple logistic regression. Additionally, when two variables have a close corelation, it is difficult to separate the effects that each may have on health.

On your second point, you are correct that the OR of WSR is 1.12 instead of 1.22. This is a typographical error which we have overlooked.

On your third point, we had mentioned in Methods that individuals under medication were excluded from the present study, i.e. those who have previously been diagnosed with hypertension, as well as those taking anti-hypertensive medication.

On your final point, we believe that a longitudinal study is essential. The present study is cross-sectional in nature, thus only an association could be known.

Yours sincerely,

Jyoti Ratan Ghosh  
Arup Ratan Bandyopadhyay

Department of Anthropology  
University of Calcutta  
35 Ballygunge Circular Road  
Kolkata 700019  
West Bengal  
India  
Tel: (91) 33 2552 4557  
Fax: (91) 33 2476 4419  
Email: jrghosh@rediffmail.com