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LIES, DAMNED LIES AND ... STATISTICS

By Judith Hatton

We are told that 120,000 people in Britain die a year as a result of their

death certificates, which don't include any information about 'smoking status'. It doesn't come from inquiry among relatives of the deceased,

except in certain exceptional circumstances when a few of these people

are asked a series of questions which may include 'did she eat chicken

mother/sister/wife/daughter sleep with, and did they smoke?' Imagine

the sort of answer you'd have got if you'd asked that question in her

smoking. Where does this figure come from? It doesn't come from

with the skin on?' and 'how many men did your

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It doesn't, except in very exceptional circumstances, come from doctors. So where does it come from?

Let us look at the authority on this: the OFFICE OF NATIONAL STATISTICS 1993 (revised) and 1994 MORTALITY STATISTICS.

"From 1993 an automated coding system has been used to assign the cause of death...Most of the changes in numbers of deaths for particular conditions arise from a revised interpretation of WHO coding rule 3, and from the absence of medical enquiries (emphasis added)...

"In the coding of underlying the cause of death certain conditions, as reported on the death certificate, can be assigned only to very broad categories. Up to 1992 OPCS handled these cases by applying to the certifier" [the doctor signing the death certificate] "for further information, in order to assign a more definite code. This

deal with these deaths in a timely way...

"Coders used a standard list of certain diseases and conditions which would generate a medical enquiry if found on a death certificate. No follow-up was sent if the ME produced no reply (emphasis added)...

procedure has not been used from 1993 because we were unable to

"Coders were not generally required to send Mes concerning deaths at ages 75 or over. (NB: the largest number of deaths from cancer and heart disease, the two chief "smoking related" diseases, occur in this age group. So there has never been any check on the diagnoses in these deaths, nor now it seems, on any others, because "we were unable to deal with these deaths...").

A joint report by the Royal Colleges of Pathologists Surgeons and Physicians ("The Autopsy and Audit", 1991), says: "In autopsies (post-mortems) performed on patients thought to have died of malignant disease (cancer) there was only 75% agreement that malignancy was the cause of the death and in only 56% was the



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