Life after ninety. By Michael Bury and Anthea Holme. Routledge, London, 1991. 198pp. £35.00

In those halcyon days when the College Research Unit was first established, we selected longevity as an interesting research problem that needed collaborative research between several disciplines. We were encouraged to proceed with this project when Buckingham Palace rapidly responded to our enquiry telling us of the great increase in the numbers of the Queen’s famous centenarian telegrams, mostly to women, from about 200 in 1950 to around 2,000 in the early 80s. Progress then became easy, because Professor Margot Jefferys, the distinguished sociologist, and the authors of this book all agreed that a survey of the life style of a sample of ninety-year olds and over would give useful information about the very old, since there would be plenty of subjects, the numbers in England being over 150,000.

The object of the book was to present a picture of the health, quality of life and social circumstances of a sample of these very old people, taking into account how the changes in the 20th century had influenced survival.

The authors set out to interview a total of about 260 randomly selected old people in eight geographical areas. Because of the not unexpected high death rate—particularly for men aged 95 and over—and unavoidable delays in arranging interviews, the final number interviewed was 183, 93 women and 90 men.

The aim was to conduct the fieldwork simultaneously in all areas, and the 13 trained interviewers carried out the bulk of the research in about eight weeks, using questionnaires and tape recordings. As might be expected, the most obvious difficulty overall was deafness, and this is where research should be directed as a matter of urgency; other important problems were partial confusion and memory loss. A reassuring feature of the interviews was that on the whole the carers were devoted to their charges and the old people extremely grateful, though there were some exceptions.

Some general comments were that the men often looked back on their life with more satisfaction than the women, though the latter had a more serene outlook, and both sexes had a strong belief in an after life. The social classes tended to be more ‘middle’ and ‘higher’ than ‘working’, and though there was much heterogeneity, the authors feel that what makes this sample unique is its shared experience of the First World War. As this is necessarily a waning situation the very old increasingly feel that they are members of a residual and disappearing category. This can disturb them more than inadequate provision of care—which the interviewers feel does not present such an overwhelming problem as is generally thought.

The authors examined genetic and environmental factors on longevity. Female sibs tended to live longer than controls—brothers would have been more informative but the carnage of the First World War meant that masculine data were inadequate. Nevertheless, the female data support a genetic component to long life.

It is well known that a decrease in infant mortality contributes greatly to longevity, but the epidemics at the time of the childhood of these old people were also highly detrimental. For the most part however, this particular group of old people had escaped their ravages—not likely to have been a class-related phenomenon, the better-off avoiding the widespread malnutrition among the lower-paid.
This is a most useful book for putting on a scientific basis the quality of life for the over-nineties. The sad feature is that their competitive life had come to a standstill and though many of the old are happy, they have nothing to strive for and (as yet) no career. Twenty years ago the same would have been said for the 80+s but nowadays this is not necessarily so, there can still be jobs with rows and sackings providing great stimuli. Maybe the day of the 90+s with all their experiences is yet to come.

At £35 the book sounds expensive but there is much detail in it and it provides a scientifically accurate survey. It seems churlish to end by suggesting that one could have guessed much of it, and to recollect that the media, within about a month, interviewed 100 of the very old—they simply advertised for them and gave them a fee. Thus, bureaucracy was marvellously bypassed and the stories collected were much the same as those told by the book’s authors—but they would never make a reliable background for subsequent comparisons, and the authors should be congratulated for their immense stamina.

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Medical statistics on microcomputers. By R. A. Brown and J. Swanson Beck. BMJ. London, 1990. 103pp. £8.95.

This latest addition to the BMJ’s occasional series of statistics books comprises reprinted articles from the Journal of Clinical Pathology. The articles were written to illustrate how microcomputers are used to facilitate data analysis. Although the intended audience was primarily workers in pathology laboratories, the book will be of value to a wider readership.

Perhaps the most obvious feature of the book is that it is almost completely devoid of mathematical formulae. The idea is that the computer performs the calculations, and so the details of how they are performed is not of prime importance. (This approach is appropriate here, but it would not be for a proper textbook.) The authors thus have more space for discussing the principles behind the statistical approaches to data, and they generally do this very well. The methods covered are the usual simple techniques for comparing two groups (including t tests, Mann-Whitney tests, chi squared tests), as well as correlation and linear regression. Methods for comparing more than two groups of data are also considered, but tests for trend are not described. The authors are firmly in sympathy with the recent move towards greater emphasis on estimation and confidence intervals and less on hypothesis testing. There are useful sections on common clinical issues such as diagnostic tests, reference ranges, and comparison of methods of measurement. There could have been more on problems of measurement error, observer comparisons, and repeatability of measurements.

The examples in the book are analysed in Minitab and Statgraphics, and thus the book will be of most value to users of those particular packages. However, the principles adopted are quite general. One omission is any mention of the use of input files containing instructions. The text is written in an easy style and clearly benefits from being a collaboration between a statistician and a pathologist. While the data sets appear to be genuine, the sources of the data are not given. There does not seem to have been any augmentation of the original articles, which is perhaps a pity.

In book form there would have been room for more extensive introduction to the use of computers and statistical packages in particular. Also some simple statistical tables would have been useful.

It would be unreasonable to expect a book of this length to give a comprehensive introduction to medical statistics and the use of computers, and so it proves. Nevertheless, there is so much to statistical analysis that it is beneficial to have more than one book available. This one has a pleasantly different style to most, is statistically correct, and is modestly priced. It would be a useful addition to a personal collection, but readers should not expect it to provide all that they need to know.

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