

late 1970s and is now rising. After allowing for the proportion of births to mothers over 35 years, the trend with year remains significant at the 5% level, $OR=0.9996$, (95%CI: 0.9995, 0.9997). Over the period there has also been a steady increase in the proportion of single mothers. As single mothers are more likely to have boys,⁴ it is likely that the decline in the sex ratio of children born to other women is even greater.

This decline in the sex ratio remains unexplained. Possibilities are a general fall in the frequency of intercourse, perhaps due to the increasing stress of society or changes in male or female hormone levels. The latter could be consequence of air pollution which was shown by Williams *et al*⁵ to be associated with a lower sex ratio.

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Comparing measures of variation

Sir - We recently reported levels of geographical variation in hospital admission rates in the Oxford region.¹ In discussing our results, we briefly compared systematic component of variation (SCV) values from our data with those published by Wennberg *et al*² for hospital service areas in Maine, USA. Wennberg *et al* described their method by citing an earlier paper in which SCVs had been calculated using a multiplication constant of 100.³ We now believe that in the 1984 study² they in fact used a multiplication factor of 1000, although it is impossible to discover this from their paper.

The reported differences between our results and those from Maine persist, however, after taking account of the 10-fold multiplication factor. Only 10% of admissions in Maine were for conditions with an SCV (100)

of less than 5.0, compared with 44% of surgical workload in Oxford.

Our conclusion remains unchanged. There was substantially less variation in admission rates in the Oxford region than in Maine, USA.

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Perinatal mortality in a first generation immigrant population and its relation to unemployment in The Netherlands

Sir - In the introduction of the above article¹ we stated in error that a previous study by Doornbos and Nordbeck of the same population² showed an odds ratio of 1.50 for perinatal mortality for infants of Surinam origin and of 1.42 for infants of other non-Dutch origin. In fact, these authors reported crude odds ratios of 1.23 and 1.22 for the two groups. The error resulted from a misreading of data provided by these authors.

Our re-analysis of the role of various factors associated with perinatal mortality and ethnic origin therefore confirms the simpler Doornbos/Nordbeck analysis with respect to the marginal role of infant origin itself.

The main finding of our report regarding the important role of parental employment status as a predictor of perinatal mortality is not affected.

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NOTICES

European Journal of Public Health (1996;6)

The contents of the *European Journal of Public Health* for June 1996 are as follows.

Looking back and ahead: a bright view for the journal (ed) Palm J, Svensson P-G.

ORIGINAL ARTICLES:

Sharing syringes in Madrid: a social phenomenon Rodrigues-Arenas MA, Zunzunegui Pastor MV, Friedman SR, *et al*.

Prevalence and trends of cigarette smoking in different occupational groups: results of the Minnesota heart survey 1980-1982 and 1985-1987 Knutsson A, Luepker RV, Sprafka JM, Virnig B.

The effectiveness of treatment for the prolapsed lumbar intervertebral disc: a review of the literature Deane M, Moore AJ, Long AF, Harrison S.

Working in the field: the psychiatric nurse as a libero in the community health services Hummelvoll JK.

Proposals for collaboration in European public health training Köhler L, Bury JA, de Leeuw E, Vaughan P.

Health expectancy in the Netherlands 1983-1990 van de Water HPA, Boshuizen HC, Perenboom RJM.

Functional ability scales for the elderly. A validation study Avlund K, Kreiner S, Schultz-Larsen K.

Detection of depressive complaints in children Kroesbergen HT, de Wit C, Stijnen T.

The French breast cancer screening programme: epidemiological and economic results of the first round of screening Wait SH, Allemand HM.

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Uncertainty and lack of trust with Parkinson's disease Nijhof G.

Book reviews, Calendar of Events, EIPHA pages