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Description Notes

Comments on "Proportionate Mortality Study of Army and
Marine Corp Veterans of the Vietnam War" by P. Breslin et al.
Marilyn Fingerhut
September 6, 1987

- . Use of BIRLS for a PMR study is reasonable.
- . Structure of PMR study is reasonable: Random sample of complete file of BIRLS, with Vietnam exposure confirmed; death certificates obtained (96.9% followup), adequate size (at least for Army).
- . PMR studies are usually used to generate, not test hypotheses. The article appropriately recommends further work to evaluate etiological factors. The media reports have not conveyed this information.
- . The problem at hand results from the timing of the release of the article, and the inclusion of a sentence in the Abstract (inappropriately) referring to Agent Orange exposure.
- . The structure of the study is appropriate; the scientific weakness of the article lies in the analysis and interpretation of the results. The authors can revise the article for submission to a journal.
- . The weakness of the article results from 1) the absence of data evaluating elevations in other smoking related diseases in the Marines, 2) absence of latency evaluations for the malignancy outcomes, 3) lack of data evaluating the adequacy of the marine comparison group, and 4) inadequate evaluation of the limitations of the PMR study design.
- . No evaluation of latency is presented for lymphoma or lung outcomes. Service was '64-'73, deaths were '65-'82. The article does not evaluate the relationship of time of exposure to time of death.
- . No data are provided to show whether other circulatory or respiratory deaths were elevated in army and marines for conditions associated with smoking.
- . It is unclear whether the cancer outcomes were obtained in the overall PMR, or in a separate Proportionate Cancer Mortality Ratio (PCMR).
- . The results for deaths from external causes and accidental poisonings are consistent with other studies of veterans and point out problems for veterans following this war.
- . The nonVietnam comparison group for the Army is large, so the numbers can be expected to be stable; the same may not be true for the marines. It would have been helpful if, 1) the authors had carefully presented data to show that the marine Vietnam vs. nonVietnam populations were truly comparable, and 2) the authors had provided a table showing the expected numbers for each cause of death if the national population had been used as the comparison.