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Personal & Confidential

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Chris Howson, Ph.D.
Project Director
National Academy of Science
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2101 Constitution Avenue
Washington, D.C. 20418

Dear Chris:

Your central edit of the Chapters I have seen have made a significant improvement in readability of the document. But it has also resulted in the interjection of new and serious errors. I am afraid that most of the burden of another review of this will lie in your office. Obviously we will do our best to pick up errors in the modified versions of "our" chapters, but it will require scrupulous attention on the part of your office to readdress and recorrect these changes. I return chapter 28 now with numerous examples.

For example, there is a mistaken assignment of a 2% decrease in "all cancers" when it was actually "2% decrease in all deaths" in your central attempt to reduce my section using the MRFIT data as a model. See line 4 on page 72.

Also see line 4 from the bottom on page 70 in which "100,000 deaths annually" became 10,000! These sorts of transcription errors at the center put an inordinate burden on those that produced the document. They simply shouldn't happen and if they happen, shouldn't fail to be detected on careful proofing.

I was particularly distressed to see a modification of the figures and terms I used in paragraph 2 on page 72. My draft of May 15th reads: "roughly 3% difference in CHD incidence for each 1% difference in entry cholesterol level". Your draft reads "In other words, a 2-3% reduction in incidence for each 1% reduction in the average serum cholesterol level." It is a serious distortion when an editor talks about "reduction" (in the active tense, as would occur in an experiment) when I talk about observations of differences in long term observational studies. These kind of liberties simply can't be taken.

Changes from singular to plural are less serious but puzzling. My version "for example, these data are usually based on relatively short periods of observation." Your version, the 5th of May, "for example the data on the disease risk are based on relatively short periods of observations". A qualifying statement I made "based on entry levels of risk" to explain the different effects of change was simply completely removed and is an important qualifying concept.

I'm concerned that a paragraph has been put in, on page 73, on the distribution in nutrient intake and public health impact in an inappropriate place, in the midst of outlining a whole series of population data. In addition, though I did not write the inserted paragraph, I have the impression the original meaning has been distorted. For example, in paragraph 2 on page 73 "nutrient requirements for individuals vary". This suggests that they vary over time in individuals, when what is meant is that individuals have different nutrient requirements!

On page 48, paragraph 2, despite some overall editorial improvements, there are significant editorial omissions and errors. For example, my statement "concordance or discordance in mortality rates and their trends from cardiovascular disease, with those for cancer and other major causes of death, within countries and between countries" now reads "examining concordance between rates of mortality from cardiovascular disease, cancer and other major causes of death, both within and among countries." I agree that discordance is redundant, but omitting "and their trends" is an editorial liberty. The consistent change of my term from "diet related" to "diet induced" risk factors is also a serious editorial liberty that I can't accept.

I maintain at the end of the second paragraph on page 48 that your edit: "examining the evidence on disease clustering, risk factors and precursors of disease in the same individuals" is a significant editorial departure from the meaning of the statements --- examining "evidence of clustering in the same individuals of disease, precursors and risk factors". My language is more precise and correct (and elegant!)

I can't understand in a generally favorable attempt to use common English why you continue to reinsert your jargon "inter and intra-population studies" when we are in fact talking about studies between and within populations.

I am concerned with the editorial change in meaning from my version: "despite the severe limitations of these ecologic correlations, this finding too does not support a causal relationship between low serum cholesterol levels and cancer, because population TC levels are predominately determined by the proportion of calories habitually consumed as saturated fat". The meaning of this as well as the language, is obscured by your edited version of May 5th: "such ecologic correlations are meaningful despite their many limitations because total cholesterol levels in the population are predominately determined by the average proportion of calories from saturated fat consumed". Not so! This is a serious distortion of meaning and of language. In addition, you will not find me using the word "meaningful" in regard to anything perhaps except personal relationships and I don't even like it there. And it is certainly not "the average proportion of calories from saturated fat consumed", but the "average proportion of calories consumed as saturated fat, as initially stated. I protest editorial changes in which meaning is distorted and something replaced with statements without meaning.

My statement of May 18, "Seventh Day Adventists in the U.S. have low rates of cardiovascular disease in parallel with low rates of colon cancer and all cancer is in your version of May 5th, "within populations such as the Seventh Day Adventists, which consume vegetarian diets, the rates of cardiovascular disease, total cancers and colon cancer are all low." I was not talking about populations such as the Seventh Day Adventists, but rather about Seventh Day Adventists!

I am concerned by an editorial change in my statement "even if this were causal association, presumably it would be possible to identify such individuals at special stroke risk by their combined hypertension plus low serum cholesterol levels and to reduce their risk by medical control of their blood pressure", to your vague and imprecise edit: "presumably, however it would be possible to identify these individuals at special risk by their blood pressure and serum cholesterol levels and to reduce their risk by controlling hypertension or by other measures." What would such "other measures" be? Why add vagueness and speculation to precision?

I am upset with your version on page 66: "moreover, the validity of the only mechanism postulated for the potential protective effect of alcohol, that is, increased plasma high density lipoprotein levels, is questionable." My version, of 4/18: "moreover, there are unresolved questions about the validity of the only plausible protective mechanism so far postulated for alcohol, that is, increased HDL levels." I was not questioning the validity of the overall relationship, I was pointing out unresolved questions about the validity, in other words, what HDL subfraction is responsible, etc. A fine point, but an important one.

I am particularly unhappy to see an editor adding back terms such as the Committee "feels", the Committee "believes", when we had made efforts consistently throughout to use terms as, the changes the Committee "considers", the Committee "finds", etc. in other words, more direct terms; less "touchy-feely" terms.

I much prefer my statement as follows: "if the association between very moderate alcohol intake and low CHD risk were eventually demonstrated to be causal, the Committee considers a recommendation that an individual add drinking to a non-drinking lifestyle or that a population adopt moderate drinking habits when alcohol use is uncommon would create more risks than it might alleviate." This expression received multiple and repeated support in several full Committee reviews. The editor returns to an older terminology "the Committee believes that the potential benefits, etc."

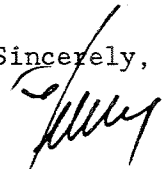
I am especially upset that an editor would selectively remove materials that the Committee had used by consensus. Read my statement of April 18 and then see your version: "The Committee recommends that fatty meats be replaced with poultry (skin removed), fish and sources of plant protein such as dried beans." It is inexcusable editing to remove "lean meats".

I think that the summary on page 78-82 has many strong points and I will send along detailed editorial criticism. But, the last sentence, as edited centrally, is against the whole thrust of the report: "however, among dietary factors, modifications in the intake of saturated fat, total fat, and polyunsaturated fats are likely to have the most impact." Nowhere have we recommended modification of polyunsaturated fat intake; to the contrary! That should read "intake of saturated fat, total fat and dietary cholesterol are likely to have the most impact."

The reduced length of the sections on pages 82-85 is excellent.

I will go on with details, but if meaning has been similarly distorted throughout the whole document, I fear you will have a Committee "up in arms"!

Sincerely,



Henry Blackburn, M.D.
Professor and Director

Enclosure

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