B.A.J. **5**, I, 273-275 (1999)

ARTICLES, PAPERS AND PUBLICATIONS OF ACTUARIAL INTEREST

AGE AND AGEING
25, 5

LAAKE, K. & SVERRE, J. M. *Winter excess mortality: a comparison between Norway and England plus Wales.* In England and Wales the winter excess mortality (WEM) amongst old people was almost double that of the middle aged (markedly higher than in Norway), and there was a significant negative correlation between outdoor temperature and WEM, and between influenza and WEM.

BRITISH MEDICAL JOURNAL
315, 7115

Special issue denoted to health and ageing.

315, 7123

DOLL, R. *One for the heart.* This review of the literature says that the beneficial effect of moderate alcohol consumption on vascular disease amongst mature British men and women is not completely offset by increased death risks from causes aggravated by alcohol. The benefit comes from the ethanol content rather than from the particular type of drink.

CENTRE FOR POPULATION STUDIES
(London School of Hygiene and Tropical Medicine)
Research paper **94**-2

ZABA, B. *The demographic impact of AIDS: some stable population simulation results.* Develops model and formula for predicting impact of HIV incidence, sensitive to fertility factors.

INSTITUT NATIONALE DE LA STATISTIQUE
ET DES ETUDES ECONOMIQUES
Statistique publique **9**

Suivi annuel des retraites: resultats 1995 [an annual review of the retired, 1995]. This (first) volume analyses five of the largest French pension systems.

INTERNATIONAL UNION FOR THE SCIENTIFIC STUDY OF POPULATION
BEIJING CONFERENCE 1997

Volume 1 includes some papers on trends in mortality, morbidity and disability. One, using U.S. data, suggests that there may be future cyclical changes in the proportion of active life which is disability-free. Another sets out various measures and indicators of good health in the elderly, using Italian data.

https://doi.org/10.1017/S1357321700000453 Published online by Cambridge University Press

JOSEPH ROWNTREE FOUNDATION

DORLING, D. *Death in Britain. How local mortality rates have changed 1950s-1990s.* Crude rates (by age and gender) have generally fallen, but differences between areas have increased over time.

JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION
279, 10

NOTZON, F. C. *et al. Causes of declining life expectancy in Russia.* Between 1990 and 1994, average life expectancy fell by five years, probably due to economic and social instability (especially health care), poor nutrition and high alcohol and tobacco usage.

279, 13

DAVIS, D. L. *et al. Reduced ratio of male to female births in several industrial countries.* Fall in sex ratio at birth is reported for Denmark and the Netherlands 1950-94, North America 1970-90, and also in Germany and Scandinavia.

MEDICINE SOCIALE ET PREVENTIVE
42, 3

BOVET, J. *et al. Mortalité et anniversaire de naissance.* Deaths from natural causes in Switzerland showed an excess of 17% above average of persons dying on the anniversary of their birth; the excess was higher among the over-eighties.

MONOGRAPHS ON POPULATION AGEING
(Odense University Press, Denmark)
3

KANNISTO, V. *The advancing frontier of survival: life tables for old age.* Mortality of the elderly in 28 developed countries over the years 1950-1990 were analysed by life tables based on 52 million deaths (including 122,000 over the age of 100). Death rates fell at every age (most rapidly at the younger ages). Any given rate has shifted upwards by 2-3 years of age in the last two decades, and there is no sign of a plateau in death rates at age 110. The modal length of life (81 men, 87 women) is estimated on present trends to rise to 85 and 92 by 2050.

POPULATION
53, 1-2

A special double issue on population and history (*Population et histoire*) dealing with past demographic thought and enquiry (including a paper on Cyrano de Bergerac as a distorting mirror of seventeenth-century knowledge and ideas), INED's new historical survey and analyses, and the 1662-1759 debate on whether London or Paris had the larger population.

https://doi.org/10.1017/S1357321700000453 Published online by Cambridge University Press

POPULATION TRENDS

90

CHRISTOPHERSON, O. *Mortality during the 1996/7 winter.* The sharp peak in deaths is examined (in terms of age, sex and cause) and compared with the previous three winters. The relationship between influenza, mean temperature and excess mortality is explored, in particular comparing them with the previous influenza epidemic in 1989/90. There were significant differences in the duration of the excess mortality and in the extent of the immediately preceding and succeeding periods of low mortality.

SHAW, C. *et al. Latest population projections of the European Union.* Summarises Eurostat's latest results. Compared with the E.U. as a whole, the United Kingdom is assumed to have lower mortality and slightly less net migration, but slightly lower than average fertility in future. By 2020, the U.K. is expected to have a relatively younger working age population and fewer old people than the E.U. average.

91

SHAW, C, *1996-based national population projections for the United Kingdom and constituent countries.* A summary of the Population Monitor PP2 98/1. Compared with the 1994 basis, overall fertility in future is assumed to continue at a total family size of 1.8 children per woman (but higher in Northern Ireland and lower in Scotland). Initial mortality rates are based on the 1996/7 experience, and the rate of improvement will reduce to one-half of one per cent for all ages by 2032/3. Recent trends and levels of migration are reflected in an assumption of 65,000 net migration a year in future, instead of 50,000 tapering to zero.

92

CRAIG, J. *To be or not to be — what are the odds*? Using English Life Tables No. 15, the author studies the variation in lifetimes around the average. He points out that two-thirds of deaths are expected to occur five or more years from the average, and gives figures for one and ten per cent alive and dead of an initial group by age, sex and year of birth.

PUBLIC HEALTH

110

PRITCHARD, C. & EVANS, B. *Comparison of cancer deaths in England and Wales and the developed world by age and gender 1973-92, and new malignancies in England and Wales 1971-88.* The increase in overall mortality is linked mainly to increased longevity; substantial decreases were recorded amongst those under 55, particularly in England and Wales. In the latter countries new cases have increased significantly, especially amongst women under 35 and in certain sites.

111

PRITCHARD, C. & EVANS, B. *Population density and cancer mortality by gender and age in England and Wales and the Western World 1963-93.* Demonstrates a significant correlation between these factors for those over 74.

https://doi.org/10.1017/S1357321700000453 Published online by Cambridge University Press