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## **Letters**

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### **The Authors Respond**

The January 5, 2008, articles by Neil Munro and Carl M. Cannon ["Data Bomb," p. 12, and "Counting Corpses," p. 16] contain many innuendos, assumptions, and untruths that should be addressed.

[Editor's Note: The articles raised questions about a 2006 study published in The Lancet that estimated that 655,000 Iraqis had died in the war. The writers of this letter were authors of the study.]

To start with, at no time did either Les Roberts or Gilbert Burnham say that the study's release was timed to affect the outcome of the election. Roberts indicated that he wanted to promote discussion of the results, and Burnham said that he was anxious that the 2006 study be released well before the election to dispel any notion of trying to influence outcomes.

Dr. Riyadh Lafta [the researcher who did the fieldwork] has a long record as a solid partner for international research studies. In late 2004, when the World Health Organization feared that there was a polio outbreak in Iraq, a disease that after billions of dollars spent has almost been eradicated under United Nations leadership, Lafta was chosen to investigate and guide the U.N. on improving polio surveillance. Four population-based studies have now shown a consistent pattern of mortality in Iraq. There are multiple points of internal consistency, which point to the solidity of the data collected by Lafta and his team. Lafta has asked that the media do not contact him in Iraq, because of concerns for his safety and that of his family.

The collection of data by locally trained and supervised teams is standard for international surveys. The Johns Hopkins data on reduction of deaths in Afghanistan, quoted both by Munro and President Bush, were collected in the same way -- using cluster surveys managed by skilled local public health staff.

In the ethical review process conducted with the Bloomberg School of

Public Health's Institutional Review Board, we indicated that we would not record unique identifiers, such as full names, street addresses, or any data (including details from death certificates) that might identify the subjects and put them at risk. Although we planned from the beginning to release mortality data (we were not "under pressure," as Munro and Cannon state), it has never been our intent to release data at the household, street, or neighborhood level that might identify and put study participants at risk. Children were not a part of the study. Onlookers -- both adults and children -- were told of the purpose of the project by the surveyors and asked to inform their neighbors, a common practice used by study investigators throughout the world, including the U.S. Census Bureau. Since most households were located within walled compounds, conducting interviews on the doorstep was judged to be best from the point of security and cultural acceptability.

The statement on missing certificates is wrong. Three clusters did not have the presence of certificates noted, and in all, there were 120 deaths in which the interviewers neglected to note their presence. It is also wrong to state that the survey was scheduled to end on July 1 and to suggest that clusters with deaths were added later. The survey took several months to complete and finished when it did. High mortality was found in some of the clusters done earlier as well as some of those done later.

It is inaccurate to suggest that funding sources played some role in our research in Iraq. In 2004 and 2006, very modest levels of funding were sought after the projects were initiated. The fact that some of MIT's financial support in 2006 came from the Open Society Institute had no effect on these reports; the researchers knew nothing of funding origins. MIT played no role in the study design, implementation, analysis, or writing of the Lancet report.

Although frequent mention is made of the Iraq Body Count data, these data are based on media reports and not statistics. So it is not surprising that car bombs, which consistently make headlines, are considerably over-represented in IBC data. A recent review of four major U.S. newspapers for articles on deaths in Iraq found that 12 percent of the deaths reported in these papers were not included in IBC's data set. This would suggest that many and perhaps most of the press reports of deaths have not been captured by IBC, if 12 percent were missing from all of IBC's 200 sources. A soon-to-be-released study shows that even in Baghdad the vast majority of violent fatal events are not in IBC's database.

The overwhelming confirmatory evidence of the Lancet study findings, the conventional nature of our survey procedures, and the abundance of

internal consistencies in the data suggest that *National Journal's* critique of our work should itself be examined for political motivations.

--Gilbert Burnham, M.D., Ph.D., Professor and Director, Center for Refugee and Disaster Response, Bloomberg School of Public Health, Johns Hopkins University

--Les Roberts, Ph.D., Associate Professor, Mailman School of Public Health, Columbia University

Editor's Note: *National Journal* stands by its articles on the Lancet study and rejects any suggestions that the stories contain "innuendos, assumptions, and untruths" or were politically motivated. The articles can be accessed online at  
<http://news.nationaljournal.com/articles/databomb>.