

I am an epidemiologist specializing in the study of cancer and other diseases caused by toxic chemicals and environmental exposures. I received my MPH degree from the Harvard School of Public Health in 1974 and my Doctor of Science degree from Boston University School of Public Health in 1989. My doctorate was in Epidemiology with a specialization in cancer epidemiology. My dissertation was entitled "Methods of Cancer Surveillance," and was based upon data from the Massachusetts Cancer Registry which I directed from 1980 to 1989.

In my role as Director of the Massachusetts Cancer Registry, I conducted over fifty evaluations of cancer in communities, among workers, veterans and, school employees and I calculated expected numbers based on state and national cancer incidence rates. I have published scientific articles and made presentations at scientific meetings on the methods and results of these analyses of cancer incidence. I was a founding member of what is now the North American Association of Central Cancer Registries and was asked to speak at the founding meeting in Chicago. Over the past fifteen years, I have taught courses at B.U. School of Public Health in environmental epidemiology and disease surveillance, and I am very familiar with the data available from the National Cancer Institute and other cancer resources. I am currently Professor of Public Health at B.U. and Adjunct Professor at the University of Massachusetts - Lowell.

This report describes the statistical methods and results of the analysis of cancer incidence in Beverly Hills High School graduates during the period 1975-2001, focusing specifically on Hodgkin's Disease, thyroid cancer and testicular cancer. The basic comparison was between the cases identified among the BHHS graduates to the number that would have been expected if the corresponding age and period-specific rates in the National Cancer Institute's Surveillance, Epidemiology and End Results (SEER) program had applied. The summary tables for each type of give the observed and expected cases for each type of cancer, the Standardized Incidence Ratio (SIR), which is the ratio of the observed and expected cases multiplied by 100, and the upper and lower 95% confidence intervals for each SIR. The confidence intervals were calculated according to the method described by Breslow & Day (1987).

The interpretation of the SIR is the excess (or deficit) of cancer in the BHHS graduates compared to the numbers of cases that would have been expected if national rates had applied. The confidence interval is a measure of the precision of the SIR estimate; if the Lower CI is above 100, this means that the SIR for that time period and cancer is statistically significantly elevated. If the Lower CI is below 100, this means that chance cannot be excluded as the reason for the result at the usual significance level of  $p < .05$ .

## HODGKIN'S DISEASE

### Methodology:

Cases are students who graduated from BHHS between 1975-1999. All cases have a pathology report confirming their diagnosis and the date of diagnosis. Cases were not included who: were diagnosed while in school (2), were diagnosed after 2001 (4), and did not graduate from BHHS (3). There were 30 total cases (extrapolated through 2001, the last year for which SEER cancer data is available).

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