

Vitamin C and the common cold

To the Editor:

Professor Linus Pauling has drawn our attention to certain inconsistencies in some of the figures that appeared in our recent paper "Vitamin C and the common cold: a double-blind trial" (*Can Med Assoc J* 107: 503, 1972). We have re-

analysed all our data and as a result Tables III and VIII in which the episodes of illness were subdivided according to symptoms have been revised. The errors were of a minor nature and in no way affect our conclusions but we apologize for having allowed them to occur. The revised tables follow.

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Table III

The mean number of episodes of illness, days on which symptoms were present, and days confined to the house per subject in each group, classified according to site of predominant symptoms on day of onset

Site of predominant symptoms	Episodes per subject			Days per subject					
				Symptoms present			Confined to house		
	V	P	V/P*	V	P	V/P*	V	P	V/P*
Nose	0.82	0.84	98 (94)	2.99	3.24	92 (95)	0.64	0.79	81 (82)
Throat	0.34	0.43	79 (84)	1.56	2.02	77 (83)	0.44	0.73	60 (64)
Other:									
a) Respiratory	0.10	0.10	100 (100)	0.41	0.47	87 (87)	0.14	0.23	61 (62)
b) Non-respiratory	0.12	0.10	120 (109)	0.30	0.29	103 (103)	0.79	0.13	62 (67)

*V/P figures are percentages. The numbers in parentheses are the percentages that appeared in the original published version of the paper.

Table VIII

The mean number of episodes and days sick per subject in each group, for episodes during which there were symptoms affecting the nose or throat

Symptoms	Episodes per subject			Days of symptoms (per subject)		
	V	P	V/P*	V	P	V/P*
Predominant on day of onset:						
Nose	0.82	0.84	98 (94)	2.99	3.24	92 (95)
Nose or throat	1.16	1.27	91 (91)	4.55	5.26	87 (86)
Present at any time:						
Nose	1.11	1.19	93 (91)	4.51	5.17	87 (87)
Nose or throat	1.24	1.35	92 (92)	4.88	5.66	86 (86)

*V/P figures are percentages. The numbers in parentheses are the percentages that appeared in the original published version of the paper.

Economics of community health centres

To the Editor:

In the article "Economics of community health centres" (*Can Med Assoc J* 107: 789, 1972) certain statements attributed to Dr. A. P. Ruderman, Professor of Health Administration at the University of Toronto School of Hygiene, prompt a few observations.

Dr. Ruderman seems to be making two main points. First, he quotes a number of figures on health spending said to emanate from the Department of National Health and