

Changing life expectancy throughout history

Rowbotham and Clayton (*JRSM* 2008;101:454–62) make a very important point when they draw attention to the life expectancy at birth compared to life expectancy at 5+ years of age.<sup>1</sup> They state ‘... life expectancy in the mid-Victorian period was not markedly different from what it is today. Once infant mortality is stripped out, life expectancy at 5 years was 75 for men and 73 for women.’ In 1995 Griffin<sup>2</sup> produced a comparison of life expectancy of mature men (15+years of age) at different points in history over the last 3000 years (Table 1).

Montagu<sup>3</sup> excluded from his calculations any who died violently; no such exclusion was made from any of the other figures presented in Table 1. Montagu noted a dip in life expectancy in Roman figures and attributed this to lead plumbing. The change in life expectancy of mature men has not changed as dramatically over 3000 years as might be expected, although this data must of necessity refer to privileged members of society.

Life expectancy of women at the age of 15 years has however changed dramatically over the last 600 years (Table 2) and by a decade and a half since the mid-Victorian period. For men, Rowbotham and Clayton have a point but are incorrect as far as women’s life expectancy is concerned.

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Conflicting interests  
None declared

References

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Table 2

Life expectancy of mature women taken from Hollingsworth<sup>8</sup> and OPCS data for England and Wales

Date	Life expectancy of women at 15 years (years)
1480–1679	48.2
1680–1779	56.6
1780–1879	64.6
1891	61.6
1901	62.6
1911	66.4
1921	68.1
1951	73.4
1961	75.7
1971	76.8
1981	78.0
1989	79.2

EBM and CAM

How wonderful to have ‘Confusion in equal measure’,<sup>1</sup> ‘Evidence-based medicine’<sup>2</sup> and ‘How the public is being misled about complementary/alternative medicine’<sup>3</sup> all published close together. A couple of years ago Ecas, a charity working with people with physical disabilities, did some work using aromatherapy on the long-stay wards of a hospital. I have no evidence to explain why it made people feel and sleep better; all I know is that the patients said they felt relaxed afterwards and they slept better. So it was not EBM.

However, we encouraged the NHS to use endowment funds, not public funds, to expand the service as it made patients feel better. The response from the medical profession was depressing and contradicts Edzard Ernst’s assertion that there is no evidence that the establishment wishes to suppress CAM. An FRS, no less, wrote to a national paper thus ‘Of course some people will be cheered up by nice smells, but where do you stop? I expect some people would love Chanel Number 5 on the NHS too.’ And from a Consultant Clinical Scientist, ‘The truth is that virtually no scientists believe aromatherapy works, because the evidence does not exist’ and ‘I do not doubt for a moment that having one’s feet massaged is a distraction from the effects of illness, in which case let us admit court jesters to the wards’. Hardly ringing endorsements from the professionals.

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Conflicting interests  
None declared

References

1 Barrie M. Confusion in equal measure. *J R Soc Med* 2008;101:527

Table 1

Calculations of life expectancy throughout history

	Date	Mean age ± SD	Sample (n)
Kings of Judah <sup>4</sup>	1000–6000 BC	52 ± 15.29	15
Greek philosophers, poets and politicians <sup>3</sup>	450–150 BC	68 ± 13.3	29
	Post 100 BC	71.5	30
Roman philosophers, poets and politicians <sup>3</sup>	30 BC– 120 AD	56.2 ± 15.5	39
Christian Church Fathers <sup>5</sup>	150–400 AD	63.4 ± 10.7	18
Italian painters <sup>6</sup>	1300–1570 AD	62.7 ± 17.4	21
Italian philosophers <sup>7</sup>	1300–1600 AD	68.9 ± 15.2	27
Monks Roll of Fellow of the Royal College of Physicians	1500–1640 AD	67 ± 8.8	37
	1720–1800 AD	62.8 ± 16.6	99
	1800–1840 AD	71.2 ± 9.8	109
OPCS life span at 15 years	1931	66.2	
	1951	68.9	
	1981	72.0	