

tries, it is clearly necessary to examine the possibility that the differences are simply attributable to variation in the reliability of reporting. If reliability of reporting varied from one country to another, one might suppose that a suicide would be more likely in some countries than others to be reported as a death from undetermined cause. If this were so, then countries with high reported rates of suicide would be expected to have low reported death rates from undetermined cause, and vice versa. In other words, there would be a negative correlation between reported suicide rates and reported rates of death from undetermined cause.

This was the idea underlying Dr. Barraclough's note (*Journal*, January 1973, 122, p. 95). Unfortunately he correlated the reported rates of suicide with the reported rates of suicide + death from undetermined cause. Now if x and y are two independent random variables, then x will correlate positively with $(x + y)$. So it is not surprising that Dr. Barraclough found a significant positive correlation. What he should have done was to correlate suicide rates against rates of death from undetermined cause.

On the data he presents, the Spearman's rank correlation between these last-mentioned two variables takes a value of -0.24 , $p > .05$. Though not significant at conventional levels, this value might be thought suggestive. Indeed, it would surely be very odd if there were *not* some variation from country to country in the reliability of reporting of suicide. The question which needs answering is not whether reliability differs from country to country, but whether the differences in reliability which may be presumed to exist could possibly account for the differences between reported suicide rates.

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STENDEL PRIZE

DEAR SIR,

I wish to draw the attention of your readers to the award of the Stengel Prize due to be made in July

1973. This prize was established from contributions by Professor Stengel's colleagues to mark his retirement from the Chair of Psychiatry at the University of Sheffield.

The prize of £100 is to be awarded every three years to any doctor or group of doctors who have worked in the Sheffield Region (i.e. geographical area covered by the Regional Hospital Board) for a piece of research in a field related to clinical psychiatry and carried out during tenure of an appointment in the Sheffield region, whether in hospital, university, general practice or local authority service. Preference will be given to doctors who have been qualified for not more than eight years. The prize may be shared at the discretion of the assessors.

The entry should consist of two typed copies of the study written in a manner suitable for publication in a scientific journal. The closing date will be 30 June 1973. Any enquiries concerning the suitability of a project, or eligibility of a candidate should be made to the Board of Assessors.

C. P. SEAGER.
Hon. Secretary,

Board of Assessors for the Stengel Prize.

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A CORRECTION

DEAR SIR,

I wish to point out an omission in my paper, 'Skin melanin concentrations in schizophrenia', which was published in the *Journal*, December 1972, 121, pp. 613-7.

Line 1 on page 617 should read '(except at the Caucasian male unexposed areas)' instead of '(except at the male unexposed areas)'. The word 'Caucasian' has been omitted.

This error is entirely due to an oversight on my part and I apologize for the inconvenience caused.

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