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Letters to the Editor

ALCOHOL CONSUMPTION IN RUSSIA: IS MONITORING HEALTH CONDITIONS IN THE RUSSIAN FEDERATION (RLMS) TRUSTWORTHY?

Sir—I have written previously (Nemtsov 2003) about the quality of alcohol consumption indicators in the *Russian Longitudinal Monitoring Survey, 1992–2001, Health Conditions in the Russian Federation (RLMS)*. The above many-sided survey is based on interviews with members of more than 4000 households in many regions of the country (Zohoori *et al*. 1996, 2002). An examination showed that the survey's mean figures are unreliable estimates of the actual alcohol consumption in Russia. In some years they were lower than those of official statistics, which failed to account for illicit alcohol consumption (4.8 vv. 5.0 l; 1992). Furthermore, the RLMS estimate is lower than two other estimates of the actual consumption in 1992, namely 13.81 l (Treml 1997) and 13.23 l (Nemtsov 2000). To understand the trustworthiness of the RLMS mean alcohol consumption indicators it is important to note that in 1992 the alcohol-dependent variables (alcoholic psychoses, alcoholic poisoning mortality and others) were close to the 1984 level, when official consumption figures of the State Statistics Committee of the Russian Federation was 10.5 l per annum, and the mean estimation from three different sources was 14.2 l per capita (Nemtsov 2000).

Still less reliable are the raw data presented on the RLMS site (http://www.cpc.unc.edu/rlms/home.html), which have already been cited as a source in a number of publications (e.g. Cockerhan 2000; Carlson, 2001; Cockerhan *et al*. 2002).

To bear out the above, let us examine the main element, that is, the table of individual alcohol consumption (Round X, 2001), which presents the data of a poll of 10 078 people. The main result of this part of the survey presented by variable I7 (intake per day) claims that 42% of the subjects were absolute teetotallers. This is a substantially higher figure than those in European countries, ranging from 4% in Denmark to 36% in Spain. Indeed, the claim is considerably higher than the number of abstainers recorded in Moscow in 1994 (9%; Simpura *et al*. 1997).

If RLMS data were trustworthy one could be proud of the sobriety of the Russian population. Living in Russia, however, it is hard to overlook the surrounding drunkenness. Hard, also, to believe the RLMS data in face of the official statistics of the consequences of alcohol consumption in the country: in 2001 as many as 41 091 people died of alcohol poisoning and 161 442 suffered from alcoholic psychoses (28.5 and 111.9, respectively, per 100 000 population).

Some of the gross RLMS mistakes stem from reasons common in any interview (the psychology of the respondents, forgetfulness, and mechanisms of defence and compensation are possibly more distinct among the Russian population). RLMS, however, has the source of the mistakes of a particular nature as well. Above all, they derive from a formal and uncritical treatment of the results of the survey.

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REFERENCES

Carlson, P. (2001) Risk behavior and self rated health in Russia 1998. *Journal of Epidemiology and Community Health*, **55**, 806–817.

Cockerhan, W. (2000) Health lifestyles in Russia. *Social Science and Medicine*, **5**, 1313–1324.

Cockerhan, W., Snead, M. C. & Dewaal, D. F. (2002) Health lifestyles in Russia and the socialist heritage. *Journal of Health and Social Behavior*, **43**, 42–55.

Nemtsov, A. (2000) Estimation of total alcohol consumption in Russia, 1980–94. *Drug and Alcohol Dependence*, **58**, 133–142.

Nemtsov, A. V. (2003) Alcohol consumption level in Russia: a viewpoint on Monitoring Health Conditions in the Russian Federation (RLMS). *Addiction*, **98**, 369–370.

Simpura, J., Levin, B. M. & Mustonen, H. (1997) Russian drinking in the 1990s. Patterns and trends in international comparison In: Simpura J. & Levin B. M., eds. *Demystifying Russian Drinking.* Research Report 85, pp. 79–107. Saarijärvi: National Research and Development Centre for Welfare and Health.

Treml, V. (1997) Soviet and Russian statistics on alcohol consumption and abuse. In: Bobsdilla J. L., Costello C. A. & Mitchell F., eds. *Premature Death in the New Independent States*. pp. 220–238. Washington: National Academy Press.

Zohoori, N., Gleiter, K. & Popkin, B. M. (2002) Monitoring economic conditions in the Russian Federation: the Russian Longitudinal Monitoring Survey 1992–2001. Report submitted

to the US Agency for International Development. Chapel Hill, NC: North Carolina Carolina Population Center, University of North Carolina.

Zohoori, N., Kline, L., Broom, S., Popkin, B. & Kohlmeier, L. (1996) Monitoring economic conditions in the Russian Federation: The Russian Longitudinal Monitoring Survey 1992–95. Report submitted to the US Agency for International Development. Chapel Hill, NC: North Carolina Carolina Population Center, University of North Carolina.

CITATION COUNT ANALYSIS IN *ADDICTION* (2001)

Sir—Journal citation analysis of a particular area gives an overview of the most consulted sources and of the characteristics that shape the use of scientific information. This is useful for scientists when deciding where to publish their work. A recent paper published in *Addiction* examined the relationship between the number of citations that a paper receives and its peer rating of quality. It concluded that there is no relation between the two concepts (West & McIlwaine 2002).

This study aims to complement the data provided by the *Journal Citation Report* by identifying the characteristics of the sources used by professionals in substance abuse who publish their research work in *Addiction*. A total of 3216 bibliographic references included in research articles (original and review articles), contained in volume 96 of *Addiction* (2001), are analysed.

Most citations correspond to articles from journals (76%), followed by books and chapters (23.25%). There are very few references from other document types: conference presentations (seven citations), doctoral theses (two citations) and other miscellaneous documents (14 citations). Web pages, databases (e.g. the Cochrane Systematic Review Database), press articles and other documents (e.g. the Helsinki Declaration of the World Medical Association) are included in the latter group. The high percentage of journal article references confirms the importance of scientific journals in the field of addiction studies. However, this percentage is lower than the 90% rate found generally in most other health sciences. This may be due to the interdisciplinary nature of addiction studies. For example, the common utilization of social science themes results in a greater number of book rather than journal references. The reference percentage for other document types, such as conference presentations and doctoral theses, is much lower due to the lack of accessibility to this type of literature, known in the document sphere as 'grey literature'. As can be noted from the yearly reference distribution, most citations were from 1998 and 1999 publications (331 and 320, respectively), while only 48 were from publications of the same year as this analysis (2001).

The journal with most citations is *Addiction*, with 306 references, followed by the *Journal of Studies on Alcohol*, with 103, and the *British Medical Journal*, with 66. Of the 50 most quoted journals, 16 (32%) are specific to addictions, 10 (20%) from psychology and nine (18%) of a general nature. From the remaining journals, six are from psychiatry, four from epidemiology and public health, three from pharmacology and two from infectious diseases (AIDS, to be precise). The percentage of self-citation, that is, citations from the source journal itself, is 9.5%. This percentage can be considered as moderate and, although it is sometimes evidence of a certain tendency to inbreeding, it is due mainly to the need to refer to previous works that sustain more recent lines of work, often published in the same journal (Fassoulaki *et al.* 2000).

Only 14 of the 1764 authors cited received 10 or more references, while 53 received more than five and 1374 authors (77.9%) received only one citation. The five most-quoted authors were Darke ($n = 29$), Schuckit ($n = 20$), McLellan ($n = 17$), Hall ($n = 15$) and Strang ($n = 15$).

There is an extremely small percentage of citations from non-English publications, which does not correspond to the importance that health sciences have in non-English speaking countries. The reason for this phenomenon, which affects most countries, must be the current tendency to consider English as an international language of medicine. Another explanation for the low rate of non-English citations is that non-American or British authors who publish in English rarely cite publications from their own countries (Egghe, Rousseau & Yitzhaki 1999). Currently, we are carrying out a citation analysis of drug-abuse publications from other language areas, and calculating potential impact factors that include journals not in the *Journal Citation Report*.

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