A Self-assesment Test on Statistics Revisited Articles

The following questions are based on the series of four statistics articles that have been published in the *Journal of Family Planning and Reproductive Health Care* in recent months. Readers might like to complete this self-assessment exercise to test their knowledge and understanding of the topic, before checking back to the original articles for clarification of specific points where necessary.

Questions

Indicate your answer by ticking the appropriate box for each question	***True***	***False***
1. Stage of cancer can be considered an ordinal variable.	☐	☐
2. A Normally distributed continuous variable is usually summarised using the median and interquartile range.	☐	☐
3. A 95% confidence interval represents the range of values obtained in a sample.	☐	☐
4. A trial has been carried out to compare the effectiveness of two intrauterine devices (IUDs) with respect to expulsion rates. Women were randomly allocated to receive one of the two IUDs. Therefore, the appropriate statistical test to compare expulsion rates in the two groups is an independent groups *t*-test.	☐	☐
5. A study has been conducted to compare the mean age at diagnosis of coronary heart disease by smoking status. The age at diagnosis for smokers was 51.8 years and 53.3 years in non-smokers. The 95% confidence interval for the difference in age at diagnosis was found to be –1.9 years to 5.0 years.		
The statistical test applied to the data returned a significant p value at the 5% significance level (i.e. $p \leq 0.05$).	☐	☐
6. The relative risk is defined as the incidence of risk in an exposed group minus the incidence of risk in an unexposed group.	☐	☐
7. A study was conducted to investigate the association between the oral contraception pill (OCP) and cervical cancer. It was found that the relative risk for those ever having used compared to never users was 1.7 (0.9–3.2).		
The statistical test did not identify a statistically significant association between OCP use and cervical cancer at the 5% significance level.	☐	☐
8. The relative risk can be computed when a case-control design is adopted.	☐	☐
9. A Type II error occurs when the null hypothesis is rejected although in fact the null hypothesis is true.	☐	☐
10. Increasing the power of a study means that important associations are missed on fewer occasions.	☐	☐

Journal of Family Planning and Reproductive Health Care

CALL FOR PAPERS AND CONTRIBUTIONS

2003 onwards will see each issue having an emphasis based around the topic of the CEU contribution for that issue. Original papers, brief reports, case reports, personal views, letters or other contributions are welcome. Publication will be subject to the usual peer review and editorial processes.

April 2003 – Emergency contraception

July 2003 – Hormonal contraception and inflammatory bowel disease

October 2003 – Combined oral contraceptive pill

January 2004 – Intrauterine devices for long-term contraception

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