Literature Review:

The impact of smoking bans on mortality rates has been a subject of extensive research. Stallings-Smith et al. (2013) found immediate reductions in early mortality following the national Irish smoking ban, primarily due to reductions in passive smoking. Similarly, Binswanger et al. (2014) observed lower mortality rates from smoking-related causes in prisons during years with a ban compared to years without a ban. Furthermore, Xuereb et al. (2015) attributed a decrease in mortality to better enforcement of the smoking ban.

Contrastingly, Shetty et al. (2010) did not find statistically significant short-term declines in mortality following smoking bans in the US. However, Dove et al. (2010) evaluated the impact of state and local smoking bans on acute myocardial infarction mortality rates and found notable effects.

Leicester & Levell (2015) and Leicester and Levell Leicester & Levell (2013) found no impact of smoking bans in workplaces on hospitalization rates or mortality from heart attacks. This contrasts with the findings of (Agüero et al., 2013), who determined the impact of a partial smoke-free legislation on acute myocardial infarction incidence, mortality rates, and case-fatality.

In addition, Catalano & Gilleskie (2021) examined the effects of local public smoking bans on smoking behaviors and tobacco smoke exposure, while Bono & Vuri (2017) investigated the impact of the 2005 public smoking ban in Italy on individual smoking behavior and well-being.

Overall, the literature presents conflicting results regarding the impact of smoking bans on mortality rates, with some studies demonstrating significant reductions, while others report no substantial effects.

References:

Agüero, F., Dégano, I., Subirana, I., Grau, M., Zamora, A., Sala, J., … & Elosúa, R. (2013). Impact of a partial smoke-free legislation on myocardial infarction incidence, mortality and case-fatality in a population-based registry: the regicor study. Plos One, 8(1), e53722. https://doi.org/10.1371/journal.pone.0053722

Binswanger, I., Carson, E., Krueger, P., Mueller, S., Steiner, J., & Sabol, W. (2014). Prison tobacco control policies and deaths from smoking in united states prisons: population based retrospective analysis. BMJ, 349(aug04 3), g4542-g4542. https://doi.org/10.1136/bmj.g4542

Bono, E. and Vuri, D. (2017). Smoking behaviour and individual well-being: a fresh look at the effects of the 2005 public smoking ban in italy. Oxford Economic Papers, 70(3), 741-762. https://doi.org/10.1093/oep/gpx039

Catalano, M. and Gilleskie, D. (2021). Impacts of local public smoking bans on smoking behaviors and tobacco smoke exposure. Health Economics, 30(8), 1719-1744. https://doi.org/10.1002/hec.4280

Dove, M., Dockery, D., Mittleman, M., Schwartz, J., Sullivan, E., Keithly, L., … & Land, T. (2010). The impact of massachusetts’ smoke-free workplace laws on acute myocardial infarction deaths. American Journal of Public Health, 100(11), 2206-2212. https://doi.org/10.2105/ajph.2009.189662

Leicester, A. and Levell, P. (2013). Anti-smoking policies and smoker well-being: evidence from britain... https://doi.org/10.1920/wp.ifs.2013.1313

Leicester, A. and Levell, P. (2015). Anti‐smoking policies and smoker well‐being: evidence from britain. Fiscal Studies, 37(2), 224-257. https://doi.org/10.1111/j.1475-5890.2015.12063

Shetty, K., DeLeire, T., White, C., & Bhattacharya, J. (2010). Changes in u.s. hospitalization and mortality rates following smoking bans. Journal of Policy Analysis and Management, 30(1), 6-28. https://doi.org/10.1002/pam.20548

Stallings-Smith, S., Zeka, A., Goodman, P., Kabir, Z., & Clancy, L. (2013). Reductions in cardiovascular, cerebrovascular, and respiratory mortality following the national irish smoking ban: interrupted time-series analysis. Plos One, 8(4), e62063. https://doi.org/10.1371/journal.pone.0062063

Xuereb, R., Distefano, S., Magri, C., Calleja, N., & Grech, V. (2015). Smoking ban: a long-term analysis of the malta paradox in a population of over 400,000 subjects. International Cardiovascular Forum Journal, 1(4), 184. <https://doi.org/10.17987/icfj.v1i4.50>

**SOME TOPICS: [ Health, Education, Economic Dev]**

"Examining the Impact of Smoking Bans on Mortality Rates: A Difference-in-Differences Analysis Across Two U.S. Cities"

The impact of smoking bans on mortality rates has been a subject of interest, particularly in relation to cardiovascular and respiratory mortality. conducted an interrupted time-series analysis and found that the national Irish smoking ban was associated with immediate reductions in early mortality, primarily due to reductions in passive smoking (Stallings-Smith et al., 2013). Similarly, evaluated the impact of Massachusetts’ smoke-free workplace laws on acute myocardial infarction deaths, indicating a potential relationship between smoking bans and mortality rates (Dove et al., 2010). Furthermore, conducted a population-based retrospective analysis, suggesting that smoking bans in prisons may have indirect effects on mortality rates by influencing smoking behavior and exposure to secondhand smoke (Binswanger et al., 2014). Additionally, studied the impact of partial smoke-free legislation on myocardial infarction incidence, mortality, and case-fatality, providing further insights into the potential effects of smoking bans on mortality rates (Agüero et al., 2013). also found declines in acute myocardial infarction after the implementation of smoke-free laws, indicating a potential reduction in mortality rates attributable to secondhand smoke exposure (Lightwood & Glantz, 2009). Moreover, assessed the relationship between smoking bans and the incidence of acute myocardial infarction, further contributing to the understanding of the impact of smoking bans on mortality rates (Gasparrini et al., 2009).

These studies collectively suggest that smoking bans may have a significant impact on mortality rates, particularly in relation to cardiovascular and respiratory mortality. The findings underscore the potential public health benefits of implementing smoking bans to reduce the adverse health effects associated with smoking and secondhand smoke exposure.

References:

Agüero, F., Dégano, I., Subirana, I., Grau, M., Zamora, A., Sala, J., … & Elosúa, R. (2013). Impact of a partial smoke-free legislation on myocardial infarction incidence, mortality and case-fatality in a population-based registry: the regicor study. Plos One, 8(1), e53722. https://doi.org/10.1371/journal.pone.0053722

Binswanger, I., Carson, E., Krueger, P., Mueller, S., Steiner, J., & Sabol, W. (2014). Prison tobacco control policies and deaths from smoking in united states prisons: population based retrospective analysis. BMJ, 349(aug04 3), g4542-g4542. https://doi.org/10.1136/bmj.g4542

Bodenheimer, T. (2005). High and rising health care costs. part 2: technologic innovation. Annals of Internal Medicine, 142(11), 932. https://doi.org/10.7326/0003-4819-142-11-200506070-00012

Bodenheimer, T., Wagner, E., & Grumbach, K. (2002). Improving primary care for patients with chronic illness. Jama, 288(15), 1909. https://doi.org/10.1001/jama.288.15.1909

Dove, M., Dockery, D., Mittleman, M., Schwartz, J., Sullivan, E., Keithly, L., … & Land, T. (2010). The impact of massachusetts’ smoke-free workplace laws on acute myocardial infarction deaths. American Journal of Public Health, 100(11), 2206-2212. https://doi.org/10.2105/ajph.2009.189662

Findlay, J., Piche-Larocque, C., & Faroque, A. (2022). Cost estimation and health benefits determinants of medical innovations across canadian provinces. International Journal of Economics and Finance, 14(9), 25. https://doi.org/10.5539/ijef.v14n9p25

Gasparrini, A., Gorini, G., & Barchielli, A. (2009). On the relationship between smoking bans and incidence of acute myocardial infarction. European Journal of Epidemiology, 24(10), 597-602. https://doi.org/10.1007/s10654-009-9377-0

Kulkarni, R. (2017). Use of telehealth in the delivery of comprehensive care for patients with haemophilia and other inherited bleeding disorders. Haemophilia, 24(1), 33-42. https://doi.org/10.1111/hae.13364

Lightwood, J. and Glantz, S. (2009). Declines in acute myocardial infarction after smoke-free laws and individual risk attributable to secondhand smoke. Circulation, 120(14), 1373-1379. https://doi.org/10.1161/circulationaha.109.870691

Sivic, S., Masic, I., Petkovic, D., Huseinagic, S., Tandir, S., & Zunic, L. (2009). How to use rationally information diagnostic technologies in the family and general medicine practice. Materia Socio Medica, 21(1), 47. https://doi.org/10.5455/aim.2009.21.47-54

Stallings-Smith, S., Zeka, A., Goodman, P., Kabir, Z., & Clancy, L. (2013). Reductions in cardiovascular, cerebrovascular, and respiratory mortality following the national irish smoking ban: interrupted time-series analysis. Plos One, 8(4), e62063. <https://doi.org/10.1371/journal.pone.0062063>

[1] (2013). Reductions in cardiovascular, cerebrovascular, and respiratory mortality following the national irish smoking ban: interrupted time-series analysis. plos one, 8(4), e62063. https://doi.org/10.1371/journal.pone.0062063

[2] (1999). Public goods and ethnic divisions. the quarterly journal of economics, 114(4), 1243-1284. https://doi.org/10.1162/003355399556269

[3] (2010). The impact of massachusetts’ smoke-free workplace laws on acute myocardial infarction deaths. american journal of public health, 100(11), 2206-2212. https://doi.org/10.2105/ajph.2009.189662

[4] (2014). Prison tobacco control policies and deaths from smoking in united states prisons: population based retrospective analysis. bmj, 349(aug04 3), g4542-g4542. https://doi.org/10.1136/bmj.g4542

[5] (2009). Changes in u.s. hospitalization and mortality rates following smoking bans.. https://doi.org/10.3386/w14790

[6] (2013). Socioeconomic differentials in the immediate mortality effects of the national irish smoking ban. isee conference abstracts, 2013(1). https://doi.org/10.1289/isee.2013.o-2-30-04

[7] (2009). Mapping community determinants of heat vulnerability. environmental health perspectives, 117(11), 1730-1736. https://doi.org/10.1289/ehp.0900683

[8] (1997). Environmental tobacco smoke exposure and ischaemic heart disease: an evaluation of the evidence. bmj, 315(7114), 973-980. https://doi.org/10.1136/bmj.315.7114.973

[9] (2013). Impact of a partial smoke-free legislation on myocardial infarction incidence, mortality and case-fatality in a population-based registry: the regicor study. plos one, 8(1), e53722. https://doi.org/10.1371/journal.pone.0053722

[10] (2009). Declines in acute myocardial infarction after smoke-free laws and individual risk attributable to secondhand smoke. circulation, 120(14), 1373-1379. https://doi.org/10.1161/circulationaha.109.870691

[11] (2015). Smoking ban: a long-term analysis of the malta paradox in a population of over 400,000 subjects. international cardiovascular forum journal, 1(4), 184. https://doi.org/10.17987/icfj.v1i4.50

[12] (1999). The impact of workplace smoking bans: results from a national survey. tobacco control, 8(3), 272-277. https://doi.org/10.1136/tc.8.3.272

[13] (2020). The effects of historical housing policies on resident exposure to intra-urban heat: a study of 108 us urban areas. climate, 8(1), 12. https://doi.org/10.3390/cli8010012

[14] (1992). Determination of ligand-binding specificity by alternative splicing: two distinct growth factor receptors encoded by a single gene.. proceedings of the national academy of sciences, 89(1), 246-250. https://doi.org/10.1073/pnas.89.1.246

[15] (2009). On the relationship between smoking bans and incidence of acute myocardial infarction. european journal of epidemiology, 24(10), 597-602. https://doi.org/10.1007/s10654-009-9377-0

[16] (2001). A prospective investigation of the impact of smoking bans on tobacco cessation and relapse. tobacco control, 10(3), 267-272. https://doi.org/10.1136/tc.10.3.267

[17] (2003). Social position and mortality from respiratory diseases in males and females. european respiratory journal, 21(5), 821-826. https://doi.org/10.1183/09031936.03.00047502

[18] (2018). Crime and inflation in u. s. cities. journal of quantitative criminology, 35(1), 195-210. https://doi.org/10.1007/s10940-018-9377-x

[19] (2016). Eco city development in china: addressing the policy implementation challenge. journal of cleaner production, 134, 31-41. https://doi.org/10.1016/j.jclepro.2016.03.083

[20] (2021). Urban neighbourhood forums in ankara as a commoning practice. antipode, 53(4), 1038-1061. https://doi.org/10.1111/anti.12717

[21] (2021). Theme-relevant truth discovery on twitter: an estimation theoretic approach. proceedings of the international aaai conference on web and social media, 10(1), 408-416. https://doi.org/10.1609/icwsm.v10i1.14713

[22] (2021). Epidemiological characteristics of a covid-19 outbreak caused by religious activities in daegu, korea. epidemiology and health, 43, e2021024. https://doi.org/10.4178/epih.e2021024

[23] (2014). Home from home? locational choices of international “creative class” workers. european planning studies, 23(12), 2336-2355. https://doi.org/10.1080/09654313.2014.988012

[24] (1993). Control of bek and k-sam splice sites in alternative splicing of the fibroblast growth factor receptor 2 pre-mrna.. molecular and cellular biology, 13(9), 5461-5468. https://doi.org/10.1128/mcb.13.9.5461

[25] (2013). Actinotalea ferrariae sp. nov., isolated from an iron mine, and emended description of the genus actinotalea. international journal of systematic and evolutionary microbiology, 63(Pt\_9), 3398-3403. https://doi.org/10.1099/ijs.0.048512-0

[26] (2014). Using humans as sensors: an estimation-theoretic perspective.. https://doi.org/10.1109/ipsn.2014.6846739

[27] (2021). Geography and demographics of extreme urban heat events in santa clara county, california. Eur. J. Geosc, 3(2), 1-10. https://doi.org/10.34154/2021-ejcc-0018/euraass

[28] (2020). Strategic spatiotemporal vaccine distribution increases the survival rate in an infectious disease like covid-19.. https://doi.org/10.48550/arxiv.2005.04056

[29] (2016). Chapter 6. scaling up solutions to state, national and global levels. collabra, 2(1). https://doi.org/10.1525/collabra.65

[30] (1988). Municipal decline and inequality in american suburban rings, 1960–1980. regional studies, 22(4), 277-285. https://doi.org/10.1080/00343408812331344970

[31] (2014). The stand structure and ecological function of woods in hefei round-the-city park, anhui province, china. revista chapingo serie ciencias forestales y del ambiente, XX(1), 143-158. https://doi.org/10.5154/r.rchscfa.2012.12.064

[32] (1976). The distinction between canopy and boundary‐layer urban heat islands. atmosphere, 14(4), 268-277. https://doi.org/10.1080/00046973.1976.9648422

[33] (1998). Team dimensional training: a strategy for guided team self-correction.., 271-297. https://doi.org/10.1037/10278-010

[34] (1964). Biochemical lesion of diphtheria toxin in the heart\*. journal of clinical investigation, 43(4), 630-637. https://doi.org/10.1172/jci104948

[35] (2005). Asian american nonprofit organizations in u.s. metropolitan areas. aapi nexus policy practice and community, 3(1), 67-97. https://doi.org/10.17953/appc.3.1.d346527531546654

[36] (1957). Unesterified fatty acid in human blood plasma. ii. the transport function of unesterified fatty acid. journal of clinical investigation, 36(6 Pt 1), 810-815. https://doi.org/10.1172/jci103486

[37] (1998). Fgf signaling in skeletal development. pediatric pathology & molecular medicine, 18(4-5), 355-379. https://doi.org/10.1080/152279598307921

[38] (1975). Additional data on the epidemiology of chagas disease in the municipality of caxias, rio de janeiro state, brazil. revista da sociedade brasileira de medicina tropical, 9(2), 83-89. https://doi.org/10.1590/s0037-86821975000200005

[39] (1958). Housing in large cities in the u. s. a.. town planning review, 29(3), 179. https://doi.org/10.3828/tpr.29.3.g77rp727n7123gq3

[40] (1948). Uropepsin excretion by man. iii. uropepsin excretion by patients with peptic ulcer and other lesions of the stomach 12. journal of clinical investigation, 27(6), 834-839. https://doi.org/10.1172/jci102036

[41] (1966). U. s. cities improving. science news, 90(11), 170. https://doi.org/10.2307/3951026

[42] (1930). U. s. s. salt lake city. journal of the american society of naval engineers, 42(2), 223-241. https://doi.org/10.1111/j.1559-3584.1930.tb05031.x

[43] (1926). On the street lighting in cities of u. s. a.. journal of the illuminating engineering institute of japan, 10(1), 15-32. https://doi.org/10.2150/jieij1917.10.15

**Reference #1**

“…Cutler and McClellan [**(15)**](https://scite.ai/reports/10.1377/hlthaff.20.5.11) argue that even though "technological change has accounted for the bulk of medical care cost increases over time," the medical advances have proved to be worth far more than their costs.…”

See full context

**Section**: Are the Increased Costs Of New Technology Justified?

### [High and Rising Health Care Costs. Part 2: Technologic Innovation](https://scite.ai/reports/high-and-rising-health-care-Nejz9z)

[Thomas Bodenheimer](https://scite.ai/authors/thomas-bodenheimer-zRkGl8)1

2005

[Ann Intern Med](https://scite.ai/journals/0003-4819)

Bodenheimer, T. (2005). High and rising health care costs. part 2: technologic innovation. Annals of Internal Medicine, 142(11), 932. <https://doi.org/10.7326/0003-4819-142-11-200506070-00012>

**Reference #2**

“…Regarding whether chronic care model interventions can reduce costs, 18 of 27 studies concerned with 3 examples of chronic conditions (congestive heart failure, asthma, and diabetes) demonstrated reduced health care costs or lower use of health care services.…”

See full context

**Section**: Abstract

### [Improving Primary Care for Patients With Chronic Illness](https://scite.ai/reports/improving-primary-care-for-patients-6L5L9g)

[Thomas Bodenheimer](https://scite.ai/authors/thomas-bodenheimer-zRkGl8)1,

[Edward H. Wagner](https://scite.ai/authors/edward-h-wagner-lZLn8m)2,

[Kevin Grumbach](https://scite.ai/authors/kevin-grumbach-W8XXeQ)3

2002

[JAMA](https://scite.ai/journals/0098-7484)

**Reference #3**

“…Rapid growth of medical technology has led to the increase in costs of health care, increased access to these technologies and improvement of health care that is permanently encouraging the further development of technology.…”

See full context

**Section**: Abstract

### [How to Use Rationally Information Diagnostic Technologies in the Family and General Medicine Practice](https://scite.ai/reports/how-to-use-rationally-information-yDVwkp)

[Suad Sivic](https://scite.ai/authors/suad-sivic-WxxJ4J)1,

[Izet Masic](https://scite.ai/authors/izet-masic-0GJRPL)2,

[Darko Petkovic](https://scite.ai/authors/darko-petkovic-w34rZl)3

et al. 2009

[Mater Sociomed](https://scite.ai/journals/1512-7680)

**Reference #4**

“…Advances in technology such as telemedicine (TM) have made access to cost-effective, quality health care feasible for remote patients.…”

See full context

**Section**: Abstract

### [Use of telehealth in the delivery of comprehensive care for patients with haemophilia and other inherited bleeding disorders](https://scite.ai/reports/use-of-telehealth-in-the-aX1Py4x)

[Roshni Kulkarni](https://scite.ai/authors/roshni-kulkarni-5Glppp)1

2017

[Haemophilia](https://scite.ai/journals/1351-8216)

**Reference #5**

“…Against the historical backdrop of costly advances in medical technology driving up aggregate health care cost increases across high-income countries, this paper raises a fundamental question: can the high costs of medical innovations be justified when evaluated against the public health benefits of the innovations?…”

See full context

**Section**: Abstract

### [Cost Estimation and Health Benefits Determinants of Medical Innovations Across Canadian Provinces](https://scite.ai/reports/cost-estimation-and-health-benefits-jM3kLg55)

[Joseph R. Findlay](https://scite.ai/authors/joseph-r-findlay-A3dxx3)1,

[Caleb Piche-Larocque](https://scite.ai/authors/caleb-piche-larocque-VdpAxz)2,

[Akhter Faroque](https://scite.ai/authors/akhter-faroque-b8dQmZ)3

2022

[IJEF](https://scite.ai/journals/1916-9728)

**Reference #6**

“…Mortality decreases were primarily due to reductions in passive smoking.ConclusionsThe national Irish smoking ban was associated with immediate reductions in early mortality.…”

See full context

**Section**: Abstract

### [Reductions in Cardiovascular, Cerebrovascular, and Respiratory Mortality following the National Irish Smoking Ban: Interrupted Time-Series Analysis](https://scite.ai/reports/reductions-in-cardiovascular-cerebrovascular-and-v1n042)

[Sericea Stallings-Smith](https://scite.ai/authors/sericea-stallings-smith-5YZbbG)1,

[Ariana Zeka](https://scite.ai/authors/ariana-zeka-kegdzE)2,

[Patrick Goodman](https://scite.ai/authors/patrick-goodman-YZALgE)3

et al. 2013

[PLoS ONE](https://scite.ai/journals/1932-6203)

**Reference #7**

“…To evaluate the timing of the state and local smoking bans on AMI mortality rates, we calculated the cumulative sum[**18**](https://scite.ai/reports/10.1136/bmj.304.6838.1359) of observed AMI mortality rates minus expected monthly age- and gender-standardized rates.…”

See full context

**Section**: Methods

### [The Impact of Massachusetts’ Smoke-Free Workplace Laws on Acute Myocardial Infarction Deaths](https://scite.ai/reports/the-impact-of-massachusetts-smoke-free-LrD03Q)

[Melanie S. Dove](https://scite.ai/authors/melanie-s-dove-ePzKjZ)1,

[Douglas W. Dockery](https://scite.ai/authors/douglas-w-dockery-y38bW)2,

[Murray A. Mittleman](https://scite.ai/authors/murray-a-mittleman-lZLKOr)3

et al. 2010

[Am J Public Health](https://scite.ai/journals/0090-0036)

**Reference #8**

“…Smoking bans do not directly reduce mortality but act through effects on smoking and exposure to secondhand smoke.…”

See full context

**Section**: Discussion

### [Prison tobacco control policies and deaths from smoking in United States prisons: population based retrospective analysis](https://scite.ai/reports/prison-tobacco-control-policies-and-brL63v)

[Ingrid A. Binswanger](https://scite.ai/authors/ingrid-a-binswanger-vJvQlL)1,

[E. Ann Carson](https://scite.ai/authors/e-ann-carson-6Mxypg)2,

[Patrick M. Krueger](https://scite.ai/authors/patrick-m-krueger-RVX5MN)3

et al. 2014

[BMJ](https://scite.ai/journals/1756-1833)

**Reference #9**

“…Our aim was to determine the impact of the Spanish 2006 partial smoke-free legislation on acute myocardial infarction (AMI) incidence, hospitalization and mortality rates, and 28-day case-fatality in Girona, Spain.MethodsUsing a population-based registry (the REGICOR Study), we compared population incidence, hospitalization, and mortality rates, and 28-day case-fatality in the pre- and post-ban periods (2002–2005 and 2006–2008, respectively) by binomial regression analysis adjusted for confounding factors.…”

See full context

**Section**: Abstract

### [Impact of a Partial Smoke-Free Legislation on Myocardial Infarction Incidence, Mortality and Case-Fatality in a Population-Based Registry: The REGICOR Study](https://scite.ai/reports/impact-of-a-partial-smoke-free-bGedmv)

[Fernando Agüero](https://scite.ai/authors/fernando-aguero-LeLr1P)1,

[Irene R. Dégano](https://scite.ai/authors/irene-r-degano-aXdEzv)2,

[Isaac Subirana](https://scite.ai/authors/isaac-subirana-vJ0veL)3

et al. 2013

[PLoS ONE](https://scite.ai/journals/1932-6203)

**Reference #10**

“…Background-The estimated effects of recent pubic and workplace smoking restriction laws suggest that they produce significant declines in community rates of heart attack.…”

See full context

**Section**: Abstract

### [Declines in Acute Myocardial Infarction After Smoke-Free Laws and Individual Risk Attributable to Secondhand Smoke](https://scite.ai/reports/declines-in-acute-myocardial-infarction-aGR1Jj)

[James Lightwood](https://scite.ai/authors/james-lightwood-A3rJxE)1,

[Stanton A. Glantz](https://scite.ai/authors/stanton-a-glantz-EWYRZG)2

2009

[Circulation](https://scite.ai/journals/0009-7322)

**Reference #11**

“…The effect of the smoking ban was assessed by a Poisson regression analysis of the time series, aggregating the AMI cases for each month and including the person-years (population) as an offset, in order to model the rates of AMI directly [26, [**27]**](https://scite.ai/reports/10.1201/9781420057683).…”

See full context

**Section**: Results

### [On the relationship between smoking bans and incidence of acute myocardial infarction](https://scite.ai/reports/on-the-relationship-between-smoking-YJ8V4z)

[Antonio Gasparrini](https://scite.ai/authors/antonio-gasparrini-gZp4wn)1,

[Giuseppe Gorini](https://scite.ai/authors/giuseppe-gorini-aXNV99)2,

[Alessandro Barchielli](https://scite.ai/authors/alessandro-barchielli-dvyrl1)3

2009

[Eur J Epidemiol](https://scite.ai/journals/0393-2990)