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Website: www.ijaweb.org

DOI: 10.4103/0019-5049.177881

Quick response code



Firstborn female offsprings are significantly more common among Indian anaesthesiologists as compared to national child sex ratio

Sir,

I sincerely appreciate Nagella *et al.*^[1] for accomplishing comprehensive analysis into reproductive outcomes of anaesthesia practice among Indian anaesthesiologists. Similarly, our team, Gupta *et al.*,^[2] had completed clinical survey few years ago that had primarily focused on firstborn offspring ratio investigation among American anaesthesia providers. However, contrary to their statement in their paper's discussion, their survey results do not contradict our results according to my review and *post hoc* analysis of their results. As elicited below, the reason for their incorrect interpretation of their own results in regard to firstborn offspring sex ratio is most likely due to their incorrect analysis based on misquoted national sex ratios. Among their survey respondents, male to female (firstborn) offspring ratio was 0.94 meaning that 458 firstborn female children and 430 firstborn male children were born to their 888 respondents who successfully conceived. This ratio effectively means 1065 firstborn female children born to Indian anaesthesiologists per 1000 firstborn male children born to Indian anaesthesiologists. Comparatively, as per the census of India for the year 2011 (a) child sex ratio (CSR) for 0–6 years age group in India was 919 (and NOT 940 as misquoted by them) female children per 1000 male children which equals male to female offspring ratio as 1.09 (and not 1.4 as miscalculated by them)^[3] and (b) sex ratio at birth (SRB) was based on the Annual Health Survey of only Empowered Action Group States and Assam (total of nine states).^[4] As per the census of India, low SRB reflected low CSR in the surveyed nine states and hence, it can be safely said that a national CSR can be expected to correspond to a matched SRB nationally even though national SRB was not assessed in the census. Therefore, effectively, CSR is the authentic national sex ratio that should be

used for comparing with their paper's results. Herein, the Chi-square test shows significant value of $P = 0.03$ (and not 0.14 as misinterpreted by them) when applied to observed frequency of 458 female children/430 male children and expected frequency (based on CSR) of 425.259 female children/462.741 male children. In summary, I personally think that Nagella *et al.*^[1] should submit an erratum to their paper and take the credit in their paper for eliciting that firstborn female offspring is significantly more common among Indian anaesthesiologists as compared to national CSR.

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How to cite this article: Gupta D. Firstborn female offsprings are significantly more common among Indian anaesthesiologists as compared to national child sex ratio. *Indian J Anaesth* 2016;60:224.