

OBITUARY	
Michael Goitein, 1939-2016: A Giant of Modern	
Medical Physics Herman Suit, MD DPhil,* George Chen, PhD,† Thomas Bortfeld, PhD,*	
Alfred Smith, PhD, Jay Loeffler, MD, * Edward Epp, PhD, † Andrzej Niemierko, PhD, * and Gudrun Goitein, MD †	
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"He considered not only the science of the developments he led but also their ethical	
implications."	
'It's unethical to carry out bad scientific experiments.	
However praiseworthy a study may be from other	
point of view, if the statistical aspects are substandard then the research is unethical."	
nen the research is unethical.	
O.G.Altman, "Statistics and ethics in medical research", in Statistics in Practice (British Med. Assn., London, 1982) pp. 1-21.	
The combination of some data and an aching desire	
or an answer does not ensure that a reasonable	
answer can be extracted from a given body of data."	
ohn Tukey (1986), "Sunset salvo". The American Statistician, 40(1).	
ohn Tukey (1986), "Sunset salvo". The American Statistician, 40(1).	
ohn Tukey (1986), "Sunset salvo". The American Statistician, 40(1).	

"If you torture your data long enough, they will tell you whatever you want to hear."	
Mills, J. L. 1993. Data torturing. New England Journal of Medicine 329, (16): 1196.	
"TI 11 (11)	
"The problem of poor research documentation and statistical reporting in the biomedical literature is	
long-standing, world-wide, pervasive, potentially serious, and not at all apparent to many readers."	
Schor S, Karten I. Statistical evaluation of medical journal manuscripts. JAMA. 1966;195:1123-8.	
Franchischer Bergereit und der Gestellte der Gestellte der Gestellte der Gestellte der Gestellte der Gestellte	
"These reviews [of statistical errors] reveal a remarkable and	
depressing consistency, with typically around 50% of reviewed papers being found to contain clear statistical errors. A large	
portion of these errors are so great as to cast doubts on the validity of the paper's conclusions."	
Yancy JM. Ten rules for reading clinical research reports [Editorial]. Br J Surg. 1990;159:553-9.	

"Half of published research is in fact unreliable at best, if not completely false"	
Richard Horton, Editor-in Chief of the Lancet. Vol 385, April 11, 2015.	
"Much of the scientific literature, perhaps half, may simply be untrue. Afflicted by studies with small sample sizes, tiny effects, invalid exploratory analyses, and flagrant conflicts of interest, together with an obsession for pursuing fashionable trends of dubious importance, science has taken a turn towards darkness.	
Richard Horton, Editor-in Chief of the Lancet. Vol 385, April 11, 2015.	
"It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of the New England Journal of Medicine"	
Marcia Angell MD, Editor-in Chief of the NEJM, 2010. (first woman to have served as Editor-in-Chief of the journal since it was founded in 1812)	

Analysis of clinical outcomes	
Table of patient and treatment characteristics	

2. Univariate analysis

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3. Multivariate analysis

(variable selection based on p values from univariate analysis)

1. Table of patient and treatment characteristics

Factor	Value
N	1000
Modality Proton IMRT	481 (48.1%) 519 (51.9%)
Stage Stage I Stage II	513 (51.3%) 487 (48.7%)
Age, mean (SD)	41 (7)
Local Control No Yes	383 (38.3%) 617 (61.7%)

2. Univariate analysis (modality)

	Local Con	trol	
Modality	No	Yes	Total
Proton		303 52.99	481 100.00
IMRT		314 60.50	519 100.00
Total		617 61.70	1,000

Pearson chi2(1) = 0.6565 P = 0.418

2. Univariate analysis (stage)

1	Local	Control	
Stage	No	Yes	Total
Stage I	183	330	513
	35.67	64.33	100.00
Stage II	200	287	487
1	41.07	58.93	100.00
Total	383	617	1,000
i	38.30	61.70	100.00

2. Univariate analysis (age)

Logi	stic regre	ssion			Number o		-	1,000
					Prob > c		=	0.0129
Log	likelihood	= -662.41893	3		Pseudo R	2	=	0.0047
	outcome	Odds Ratio	Std. Err.	z	P> z	[95%	Conf.	Interval]
			Std. Err.					Interval]

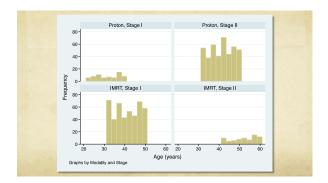
3. Multivariate analysis

ogistic regr	ession			Number of		=	7.7
				Prob > 0	chi2	=	0.020
og likelihoo	d = -661.6268	7		Pseudo I	R2	-	0.0058
	Odds Ratio	Std. Err.	z	P> z	[95%	Conf.	Interval
outcome Stage	+	Std. Err.	-1.26	P> z 0.208	. 6507		
	.8453733					7893	1.09813 .998090

ogistic regr	ession			Number o	of obs		1,000
.,				LR chi2	(3)	-	12.65
				Prob > 0	chi2	=	0.0055
og likelihoo	d = -659.1903	2		Pseudo I	32	=	0.0095
	Odds Ratio	Std. Err.	z	P> z	[95%	Conf.	Interval]
	Odds Ratio 						Interval]
Modality	+	.1375534	-2.19	0.029	. 39	2859	.9497361
Modality Stage Age	.6108293 .5694603	.1375534 .1284304 .0110427	-2.19 -2.50	0.029 0.013	. 39:	2859	.9497361

	3.	Multiva	riate a	anaiysi	S	
Model 1	Odds Ratio	C+d Pro		P> z	[95% Conf.	Intownil
	+		-			
Stage	.8453733	.1128303	-1.26	0.208	.6507893	1.098137
					.9614935	.9980907
_cons	4.081972	1.594108	3.60	0.000	1.898696	8.775757
			10.70			
Model 2	Odds Ratio	Std. Err.	z	P> z	[95% Conf.	Interval]
		.1375534	-2.19	0.029	.392859	.9497361
Stage	.5694603	.1284304	-2.50	0.013	.3660092	.8860024
Age	.9920646	.0110427	-0.72	0.474	.9706556	1.013946
cons	3.817514	1.502867	3.40	0.001	1.764746	8.258079

)	. Multiva	riate a	maivsi	<	
				illulyon	0	
Model 3		o Std. Err.			[95% Conr.	Interval
Modality		.1091502			.38467	.8229155
		.1015535				
cons	1 2.99178	.5872344	5.58	0.000	2.036359	4.395478
The Truth (mo	a - 1000 cas	ses):	Probab		f local contr	
generate data		ses):		True	Data-e	stimated
generate data	Odds Rati	ses):		True		stimated
generate data	Odds Rati	ses):	Stage II	True +	Data-e	stimated CI: 42-60%



Closing remarks	
to Andrewy for the many means of free stup as collaboration that we've should (inhal)	