National Longitudinal Mortality Study

RRID:SCR_008946
Type: Tool

Proper Citation

National Longitudinal Mortality Study (RRID:SCR_008946)

Resource Information

URL: http://www.census.gov/did/www/nlms/

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Description: A database based on a random sample of the noninstitutionalized population of the United States, developed for the purpose of studying the effects of demographic and socio-economic characteristics on differentials in mortality rates. It consists of data from 26 U.S. Current Population Surveys (CPS) cohorts, annual Social and Economic Supplements, and the 1980 Census cohort, combined with death certificate information to identify mortality status and cause of death covering the time interval, 1979 to 1998. The Current Population Surveys are March Supplements selected from the time period from March 1973 to March 1998. The NLMS routinely links geographical and demographic information from Census Bureau surveys and censuses to the NLMS database, and other available sources upon request. The Census Bureau and CMS have approved the linkage protocol and data acquisition is currently underway. The plan for the NLMS is to link information on mortality to the NLMS every two years from 1998 through 2006 with research on the resulting database to continue, at least, through 2009. The NLMS will continue to incorporate data from the yearly Annual Social and Economic Supplement into the study as the data become available. Based on the expected size of the Annual Social and Economic Supplements to be conducted, the expected number of deaths to be added to the NLMS through the updating process will increase the mortality content of the study to nearly 500,000 cases out of a total number of approximately 3.3 million records. This effort would also include expanding the NLMS population base by incorporating new March Supplement Current Population Survey data into the study as they become available. Linkages to the SEER and CMS datasets are also available. Data Availability: Due to the confidential nature of the data used in the NLMS, the public use dataset consists of a reduced number of CPS cohorts with a fixed follow-up period of five years. NIA does not make the data available directly. Research access to the entire NLMS database can be obtained through the NIA program contact listed. Interested investigators should email the NIA contact and send in a one page prospectus of the
proposed project. NIA will approve projects based on their relevance to NIA/BSR”s areas of emphasis. Approved projects are then assigned to NLMS statisticians at the Census Bureau who work directly with the researcher to interface with the database. A modified version of the public use data files is available also through the Census restricted Data Centers. However, since the database is quite complex, many investigators have found that the most efficient way to access it is through the Census programmers. * Dates of Study: 1973-2009 * Study Features: Longitudinal * Sample Size: ~3.3 Million Link: *ICPSR: http://www.icpsr.umich.edu/icpsrweb/ICPSR/studies/00134

Abbreviations: NLMS

Synonyms: National Longitudinal Mortality Study (NLMS)

Resource Type: data or information resource, data set

Keywords: national, longitudinal, mortality, demographic, socio-economic, age, cause of death, death, death record, ethnicity, mortality rate, gender, marital status, race, late adult human, FASEB list

Related Condition: Aging

Funding Agency: NCI, NHLBI, NIA, National Center for Health Statistics, U.S. Census Bureau

Availability: Public

Resource Name: National Longitudinal Mortality Study

Resource ID: SCR_008946

Alternate IDs: nlx_151861

Ratings and Alerts

No rating or validation information has been found for National Longitudinal Mortality Study.

No alerts have been found for National Longitudinal Mortality Study.

Data and Source Information

Source: SciCrunch Registry

Usage and Citation Metrics

We found 32 mentions in open access literature.
Listed below are recent publications. The full list is available at RRID.


Haddow AD, et al. (2009) Assessing risk in focal arboviral infections: are we missing the big or little picture? PloS one, 4(9), e6954.


