

# Comparing two groups: categorical data

**Tuan V. Nguyen**

**Professor and NHMRC Senior Research Fellow**

**Garvan Institute of Medical Research**

**University of New South Wales**

**Sydney, Australia**

# What we are going to learn ...

- **Examples (RCT, CC, Cohort)**
- **Two proportions**
- **Metrics of effect: d, RR, OR**
- **Applicability of d, RR, OR**
- **D and z-test**
- **NNT**
- **Measure of association: OR**
- **Small sample size: Fisher's exact test**

# Zoledronate and fracture

**Table 2.** Rates of Fracture and Death in the Study Groups.\*

Variable	Placebo	Zoledronic Acid	Hazard Ratio (95% CI)	P Value
Fracture — no. (cumulative %)				
Any	139 (13.9)	92 (8.6)	0.65 (0.50–0.84)	0.001
Nonvertebral	107 (10.7)	79 (7.6)	0.73 (0.55–0.98)	0.03
Hip	33 (3.5)	23 (2.0)	0.70 (0.41–1.19)	0.18
Vertebral	39 (3.8)	21 (1.7)	0.54 (0.32–0.92)	0.02
Death — no. (%)	141 (13.3)	101 (9.6)	0.72 (0.56–0.93)	0.01

\* Rates of clinical fracture were calculated by Kaplan–Meier methods at 24 months and therefore are not simple percentages. There were 1062 patients in the placebo group, and 1065 in the zoledronic acid group. Because of variable follow-up, the number and percentage of patients who died are provided on the basis of 1057 patients in the placebo group and 1054 patients in the zoledronic acid group in the safety population.

**Randomized controlled clinical trial**

**Placebo n = 1062, Zoledronate n = 1065**

**Length of follow-up: 3 years**

**Lyles KW, et al. Zoledronic acid and clinical fractures and mortality after hip fracture. *N Engl J Med* 2007;357. DOI: 10.1056/NEJMoa074941**

# Smoking and lung cancer

	<b>Lung Cancer</b>	<b>Controls</b>
<b>Smokers</b>	647	622
<b>Non-smokers</b>	2	27

**R Doll and B Hill. BMJ 1950; ii:739-748**



Sir Richard Doll (1912 – 2005)

[http://en.wikipedia.org/wiki/Richard\\_Doll](http://en.wikipedia.org/wiki/Richard_Doll)

**Is there an association between smoking and lung cancer?**

# Mortality in the Titanic incident



<b>Class</b>	<b>Dead</b>	<b>Survived</b>	<b>Total</b>
<b>I</b>	<b>123</b>	<b>200 (62%)</b>	<b>323</b>
<b>II</b>	<b>158</b>	<b>119 (43%)</b>	<b>277</b>
<b>III</b>	<b>528</b>	<b>181 (26%)</b>	<b>709</b>
<b>Total</b>	<b>809</b>	<b>500 (38%)</b>	<b>1309</b>

<http://lib.stat.cmu.edu/S/Harrell/data/descriptions/titanic3info.txt>

**Is there an association between passenger class and and death?**

# What are common characteristics of these data?

- **Binary outcome: yes/no; dead / survived**
- **Proportion / percent / probability**

# Sample vs population

	Sample		Population	
	Group 1	Group 2	Group 1	Group 2
<b>N</b>	$n_1$	$n_2$	Infinite	Infinite
<b>Probability of outcome</b>	$p_1$	$p_2$	$\pi_1 = ?$	$\pi_2 = ?$
<b>Difference</b>	$d = p_1 - p_1$		$\delta = \pi_1 - \pi_2$	
<b>Status</b>	Known		Unknown	

**Aim: use sample data  $d$  to estimate population parameter  $\delta$**

# Metrics of effect

- Absolute difference (d)
- Relative risk (RR; risk ratio)
- Odds ratio (OR)
- Number needed to treat (NNT)

The choice is dependent on study design

# Absolute difference $d$

Outcome	Placebo	Treatment
Any fracture	139	92
Non-fracture	923	973
N	1062	1065

Outcome	Group 1	Group 2
Bad	a	b
Good	c	D
N	$N_1$	$N_2$

## Absolute difference

$$p_1 = 139 / 1062 = 0.131$$

$$p_2 = 92 / 1065 = 0.086$$

$$d = p_2 - p_1 = -0.044$$

$$p_1 = a / N_1$$

$$p_2 = b / N_2$$

$$d = p_2 - p_1$$

# Number needed to treat – NNT

Outcome	Placebo	Treatment
Any fracture	139	92
Non-fracture	923	973
N	1062	1065

Outcome	Group 1	Group 2
Bad	a	b
Good	c	D
N	N <sub>1</sub>	N <sub>2</sub>

## Number needed to treat

$$p_1 = 139 / 1062 = 0.131$$

$$p_2 = 92 / 1065 = 0.086$$

$$d = p_2 - p_1 = -0.044$$

$$NNT = 1 / d = 22$$

$$p_1 = a / N_1$$

$$p_2 = b / N_2$$

$$d = p_2 - p_1$$

$$NNT = 1 / d$$

# Relative risk - *RR*

Outcome	Placebo	Treatment
Any fracture	139	92
Non-fracture	923	973
N	1062	1065

Outcome	Group 1	Group 2
Bad	a	b
Good	c	D
N	N <sub>1</sub>	N <sub>2</sub>

## Relative risk

$$p_1 = 139 / 1062 = 0.131$$

$$p_2 = 92 / 1065 = 0.086$$

$$RR = p_2 / p_1 = 0.66$$

$$p_1 = a / N_1$$

$$p_2 = b / N_2$$

$$RR = p_2 / p_1$$

# Meaning of RR

- Risk of developing disease

Treatment:  $p_1 = a / N_1$

Placebo:  $p_2 = b / N_2$

- **Relative risk**

$$RR = p_1 / p_2$$

- **Implications:**

RR = 1, there is no effect

RR < 1, the treatment is beneficial.

RR > 1, the treatment is harmful.

# Odds ratio - *OR*

Outcome	Placebo	Treatment
Any fracture	139	92
Non-fracture	923	973
N	1062	1065

Outcome	Group 1	Group 2
Bad	a	b
Good	c	d
N	N <sub>1</sub>	N <sub>2</sub>

## Odds ratio

$$\text{odds}_1 = 139 / 923 = 0.140$$

$$\text{odds}_2 = 92 / 973 = 0.094$$

$$\text{OR} = \text{odds}_2 / \text{odds}_1 = 0.68$$

$$\text{odds}_1 = a / c$$

$$\text{odds}_2 = b / d$$

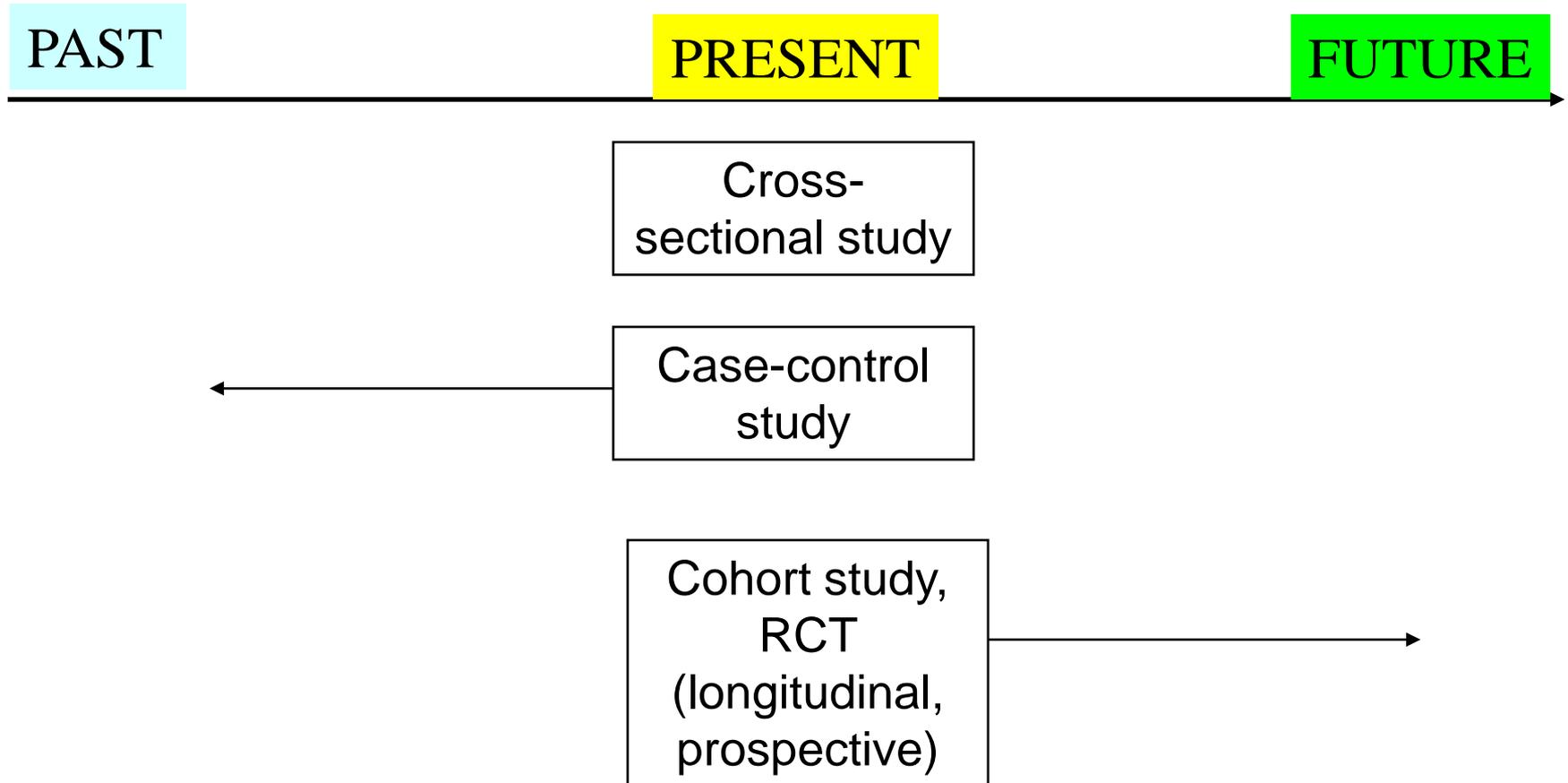
$$\text{OR} = \text{odds}_2 / \text{odds}_1$$

$$\text{OR} = (a \times d) / (b \times c)$$

# Meaning of OR

- OR = 1, there is no association
- OR < 1, the risk factor is associated with *reduced* disease risk
- OR > 1, the risk factor is associated with *increased* disease risk

# Study design – time aspect



# Appropriateness of effect size

**RCT / prospective study**



**Relative risk**

**Odds ratio**

**NNT**

**D**

**Cross-sectional study**



**Odds ratio**

**Prevalence ratio**

**D**

**Case-control study**



**Odds ratio**

# Problem and solution

- Finding an estimate for  $d$ , OR, RR is easy
- Finding the 95% confidence interval is harder
- We can however use R

# Example of $d$

	Treatment	Control
Disease	$a$	$b$
No disease	$c$	$d$
Sample size	$N_1$	$N_2$

	Zole	Placebo
Fracture	92	139
No fracture	973	923
Sample size	1065	1062

$$p_1 = \frac{a}{N_1} \quad p_2 = \frac{b}{N_2}$$

$$d = p_1 - p_2$$

$$SE(d) = \sqrt{\frac{p_1(1-p_1)}{N_1} + \frac{p_2(1-p_2)}{N_2}}$$

$$95\% CI = d \mp 1.96SE(d)$$

$$d = \frac{92}{1065} - \frac{139}{1062} = 0.131 - 0.086 = 0.044$$

$$SE(d) = \sqrt{\frac{0.131(0.869)}{1065} + \frac{0.044(0.956)}{1062}} = 0.0134$$

$$95\% CI(d) = 0.044 \mp 1.96 \times 0.0134$$

$$95\% CI(d) = 0.018, 0.081$$

# Example of NNT

$$d = \frac{92}{1065} - \frac{139}{1062} = 0.131 - 0.086 = 0.044$$

$$SE(d) = \sqrt{\frac{0.131(0.869)}{1065} + \frac{0.044(0.956)}{1062}} = 0.0134$$

$$95\% CI(d) = 0.044 \mp 1.96 \times 0.0134$$

$$95\% CI(d) = 0.018, 0.081$$

- **NNT = 1 / 0.044 = 22**
- **95% CI for NNT:**
  - 1 / 0.018 = 55
  - 1 / 0.081 = 14

# Example of RR

	Treatment	Control
Disease	<i>a</i>	<i>b</i>
No disease	<i>c</i>	<i>d</i>
Sample size	$N_1$	$N_2$

	Zole	Placebo
Fracture	92	139
No fracture	973	923
Sample size	1065	1062

$$RR = \frac{a / N_1}{b / N_2}$$

$$LRR = \log(RR)$$

$$SE(LRR) = \sqrt{\frac{1}{a} - \frac{1}{N_1} + \frac{1}{b} - \frac{1}{N_2}}$$

$$95\% CI(LRR) = LRR \mp 1.96 SE(LRR)$$

$$95\% CI(RR) = e^{LRR \mp 1.96 SE(LRR)}$$

$$RR = \frac{92/1065}{139/1062} = \frac{0.086}{0.131} = 0.66$$

$$LRR = \log(0.66) = -0.4155$$

$$SE(LRR) = \sqrt{\frac{1}{92} - \frac{1}{1065} + \frac{1}{139} - \frac{1}{1062}} = 0.127$$

$$95\% CI(LRR) = -0.416 \mp 1.96 \times 0.127$$

$$95\% CI(RR) = e^{-0.416 \mp 1.96 \times 0.127} \\ = 0.514 \text{ to } 0.847$$

# Example of OR

	Disease	No disease
Risk +ve	<i>a</i>	<i>b</i>
Risk -ve	<i>c</i>	<i>d</i>

$$OR = \frac{ad}{bc}$$

$$LOR = \log(OR)$$

$$SE(LOR) = \sqrt{\frac{1}{a} + \frac{1}{b} + \frac{1}{c} + \frac{1}{d}}$$

$$95\% CI(LOR) = LOR \mp 1.96SE(LOR)$$

$$95\% CI(OR) = e^{LOR \mp 1.96SE(LOR)}$$

	Lung K	Control
Smoking	647	622
No smoking	2	27

$$OR = \frac{647 \times 27}{622 \times 2} = 14.04$$

$$LOR = \log(14.04) = 2.64$$

$$SE(LOR) = \sqrt{\frac{1}{647} + \frac{1}{622} + \frac{1}{2} + \frac{1}{27}} = 0.735$$

$$95\% CI(LOR) = 2.642 \mp 1.96 \times 0.735$$

$$95\% CI(OR) = e^{2.64 \mp 1.96 \times 0.735}$$

$$= \mathbf{3.32 \text{ to } 59.03}$$

# Introducing epiR package

	Disease	No disease
Exposed (treatment)	<i>a</i>	<i>b</i>
Not exposed (control)	<i>c</i>	<i>d</i>

`epi.2by2(a, b, c, d, method = "xxx", conf.level = 0.95)`

Where `method = "cohort.count"`

`"case.control"`

`"cross.sectional"`

# Application of epiR – RCT study

	Fracture	No fracture
Zoleronate	92	973
Placebo	139	923

```
library(epiR)
```

```
epi.2by2(92, 973, 139, 923, method="cohort.count",
conf.level=0.95)
```

```
> epi.2by2(92, 973, 139, 923, method = "cohort.count", conf.level = 0.95)
      Disease +      Disease -      Total      Inc risk *      Odds
Exposed +           92           973           1065           8.64           0.0946
Exposed -           139           923           1062           13.09           0.1506
Total                231          1896           2127           10.86           0.1218
```

Point estimates and 95 % CIs:

```
-----
Inc risk ratio           0.66 (0.51, 0.85)
Odds ratio               0.63 (0.48, 0.83)
Attrib risk *           -4.45 (-7.09, -1.81)
Attrib risk in population * -2.23 (-4.65, 0.19)
Attrib fraction in exposed (%) -51.51 (-94.42, -18.08)
Attrib fraction in population (%) -20.52 (-33.15, -9.08)
-----
```

\* Cases per 100 population units

# Application of epiR – Case-control study

	K	Not K
Smoking	647	622
No smoking	2	27

```
> epi.2by2(647,622,2,27, method="case.control", conf.level=0.95)
```

	Disease +	Disease -	Total	Prevalence *	Odds
Exposed +	647	622	1269	51.0	1.040
Exposed -	2	27	29	6.9	0.074
Total	649	649	1298	50.0	1.000

Point estimates and 95 % CIs:

```
-----
Odds ratio                14.04 (3.33, 59.3)
Attrib prevalence *       44.09 (34.46, 53.71)
Attrib prevalence in population * 43.1 (33.49, 52.72)
Attrib fraction (est) in exposed (%) 92.88 (69.93, 98.31)
Attrib fraction (est) in population (%) 92.59 (68.98, 98.23)
-----
```

# Application of epiR – Titanic accident

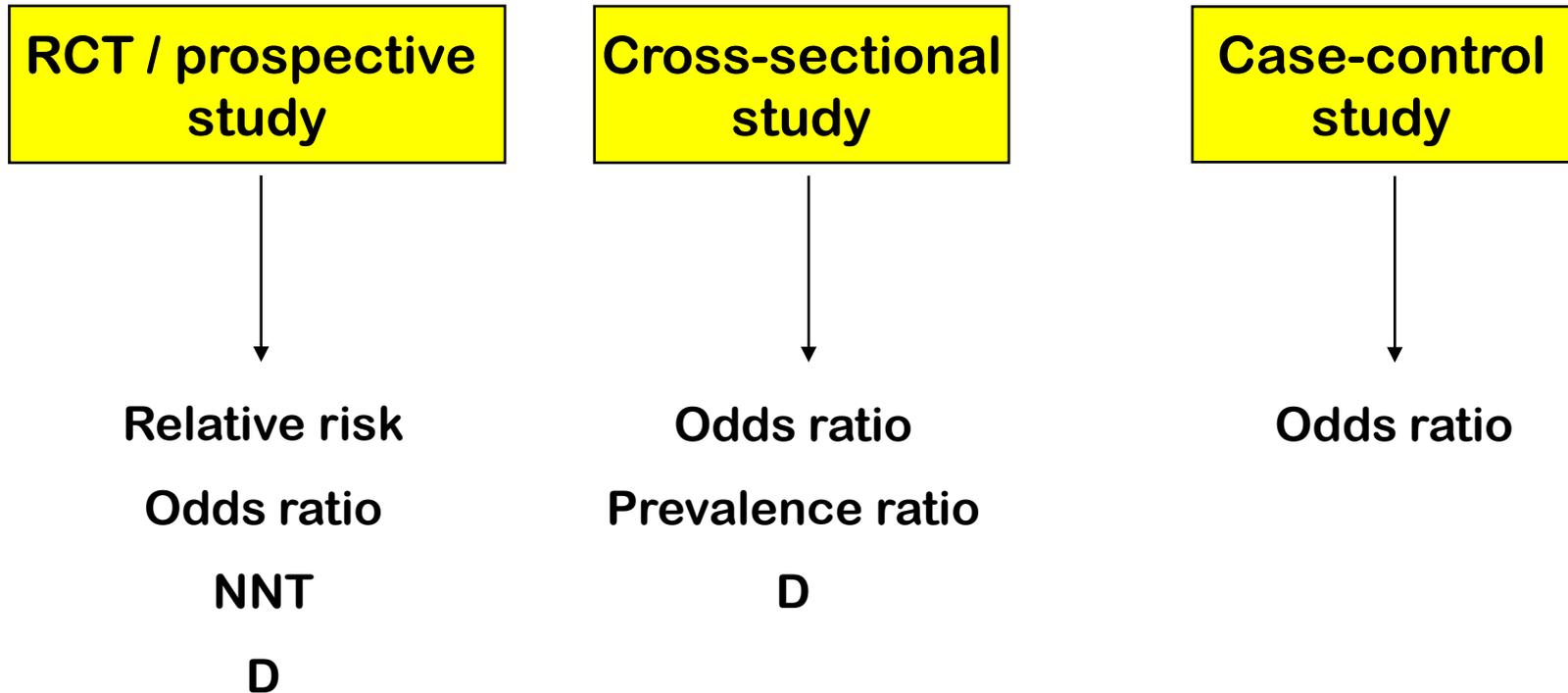
Passenger class	Dead	Survived
Economy	528	181
Not economy	281	319

```
> epi.2by2(528,181,281,319, method="cross.sectional", conf.level=0.95)
```

Point estimates and 95 % CIs:

```
-----  
Prevalence ratio                1.59 (1.45, 1.75)  
Odds ratio                      3.31 (2.62, 4.18)  
Attrib prevalence *            27.64 (22.51, 32.76)  
Attrib prevalence in population * 14.97 (10.19, 19.75)  
Attrib fraction in exposed (%)  37.11 (30.81, 42.84)  
Attrib fraction in population (%) 24.22 (19.25, 28.88)  
-----
```

# Summary



# Optional – Bayesian analysis of 2 proportions

	Side effects	None
Drug A	11	9
Drug B	5	15

- Are the effects the same for the 2 groups?

# Frequentist analysis

- Let  $X \sim \text{Binomial}(n_1, \pi_1)$  and  $p_1 = X / n_1$
- Let  $Y \sim \text{Binomial}(n_2, \pi_2)$  and  $p_2 = Y / n_2$
- Consider the hypothesis  $\pi_1 = \pi_2$
- The score statistic is:

$$TS = \frac{\hat{p}_1 - \hat{p}_2}{\sqrt{\hat{p}(1 - \hat{p})\left(\frac{1}{n_1} + \frac{1}{n_2}\right)}}$$

where  $\hat{p} = \frac{X+Y}{n_1+n_2}$  is the estimate of the common proportion under the null hypothesis

This statistic is normally distributed for large  $n_1$  and  $n_2$ .

# Frequentist analysis

- $p_1 = 0.55$ ,  $p_2 = 5/20 = 0.25$ ,  $p = 16/40 = 0.4$

Test statistic

$$\frac{.55 - .25}{\sqrt{.4 \times .6 \times (1/20 + 1/20)}} = 1.61$$

# Bayesian analysis

- Consider putting independent  $\text{Beta}(\alpha_1, \beta_1)$  and  $\text{Beta}(\alpha_2, \beta_2)$  priors on  $p_1$  and  $p_2$  respectively
- Then the posterior is

$$\pi(p_1, p_2) \propto p_1^{x+\alpha_1-1} (1-p_1)^{n_1+\beta_1-1} \times p_2^{y+\alpha_2-1} (1-p_2)^{n_2+\beta_2-1}$$

- Hence under this (potentially naive) prior, the posterior for  $p_1$  and  $p_2$  are independent betas
- The easiest way to explore this posterior is via Monte Carlo simulation

# R analysis

```
x = 11; n1 = 20; alpha1 = 1; beta1 = 1
```

```
y = 5; n2 = 20; alpha2 = 1; beta2 = 1
```

```
p1 = rbeta(1000, x + alpha1, n - x + beta1)
```

```
p2 = rbeta(1000, y + alpha2, n - y + beta2)
```

```
rd = p2 - p1
```

```
plot(density(rd))
```

```
quantile(rd, c(.025, .975))
```

```
mean(rd)
```

```
median(rd)
```