## Descriptive analysis of categorical variables

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#### What we are going to learn

- Categorical data
- Probability
- Statistical description of
  - Prevalence
  - Incidence
  - Rate

### **Measurement and comparison**

## To find out whether a community is healthy or unhealthy:

- first measure one or more indicators of health (deaths, new cases of disease, etc)
- compare the results with another community or group.

#### **Measures of Disease Occurrence**

- Incidence proportion (risk)
- Incidence rate (density)
- Prevalence

# All three are *loosely* called "**rates**" (but only the second is a *true* rate)

### **Types of populations**

We measure disease occurrence in two types of populations:

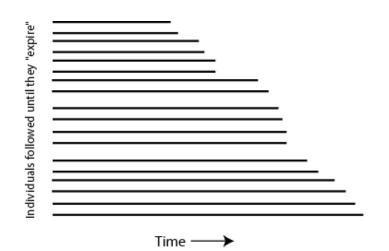
- Closed populations  $\Rightarrow$  "cohorts"
- Open populations

### **Closed population = cohort**

#### **Cohort** word origin (Latin *cohors*) basic tactical unit of a <u>Roman</u> <u>legion</u>

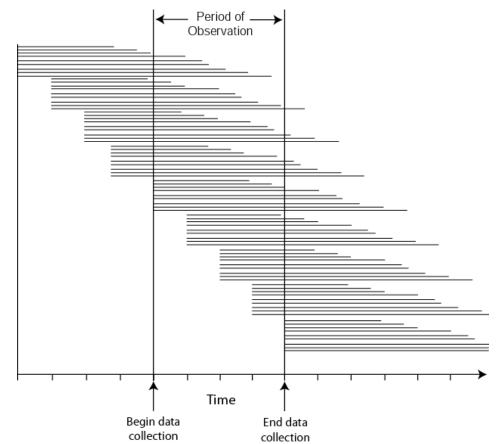
Epi cohort ≡ a group of individuals followed over time





### **Open population**

- Inflow (immigration, births)
- Outflow (emigration, death)
- An open population in "steady state" (constant size) is said to be stationary



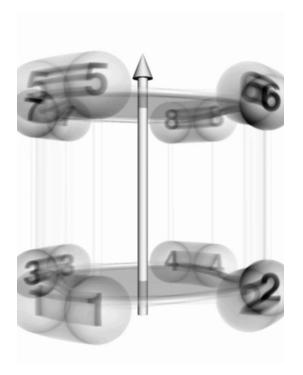
#### **Numerators and denominators**

- "Rates" are composed of numerators and denominators
- **Numerator**  $\Rightarrow$  case count

Incidence count  $\Rightarrow$  onsets

**Prevalence count**  $\Rightarrow$  old + new cases

 Denominators ⇒ reflection of population size



## Denominators

**Denominators:** reflection of population size



#### **Incidence** proportion

#### Can be calculated *only* in cohorts

 $IP = \frac{\text{no. of onsets over time}}{\text{no. @ risk at beginning of study}}$ 

- Synonyms: risk, cumulative incidence, attack rate
- Interpretation: average risk

### **Example of IP**

- Objective: estimate risk of uterine cancer
- Recruit cohort of 1000 women
- 100 had hysterectomies, leaving 900 at risk
- Follow at risk individuals for 10 years
- Observe 10 onsets of uterine cancer

$$IP = \frac{\text{no. of onsets}}{\text{no. @ risk}} = \frac{10 \text{ women}}{900 \text{ women}} = 0.0111$$
$$10 \text{ -year average risk is .011 or 1.1\%.}$$

#### **Incidence rate**

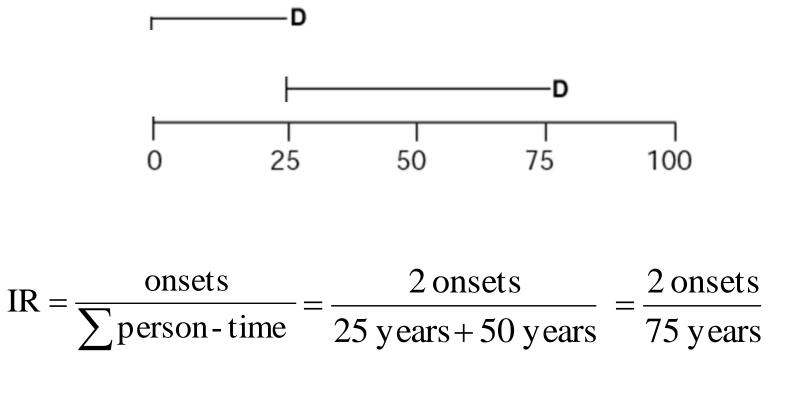
# $IR = \frac{\text{no. onsets}}{\text{Sum of person-time @ risk}}$

- Synonyms: incidence density, person-time rate
- Interpretation A: "Speed" at which events occur
- Interpretation B: When disease is rare: rate per person-year ≈ one-year risk
- Calculated differently in closed and open populations

- Objective: estimate rate of uterine cancer
- Recruit cohort of 1000 women
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- Follow at risk individuals for 10 years
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$$IR = \frac{\text{no. of onsets}}{\text{person-time}} = \frac{10 \text{ women}}{900 \text{ women} \times 10 \text{ years}} = \frac{10}{9000 \text{ years}}$$
$$= \frac{.00111}{\text{ year}}$$
Rate is .00111 per year or 11.1 per 10,000 years

#### Individual follow-up over time



= 0.0267 per person - years = 2.67 per 100 person - years

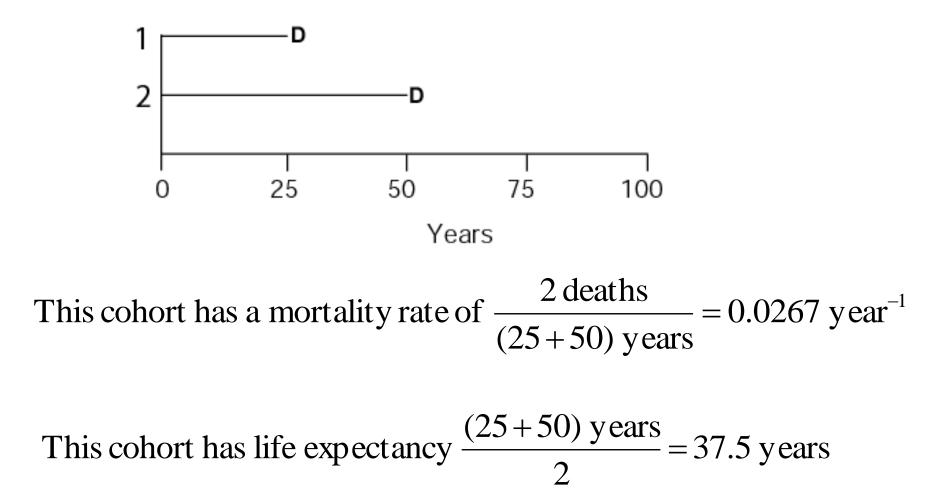
#### Mortality and life expectancy

In stationary populations, and in cohorts with complete follow-up, the mortality rate is the reciprocal of life expectancy (and vice versa).

Life expectacy = 
$$\frac{1}{MortalityRate}$$

Example: for a mortality rate of .0267 per year

Life expectacy = 
$$\frac{1}{.0267/\text{year}}$$
 = 37.5 years



#### Incidence rate in open population

#### onsets

## $IR = \frac{1}{Avg population size \times duration of observation}$

#### Example: 2,391,630 deaths in 1999 (one year) Population size = 272,705,815

# $IR = \frac{2,391,630 \text{ deaths}}{272,705,815 \text{ persons} \times 1 \text{ year}} = 0.008770 \text{ deaths year}^{-1}$

= 877 per 100,000 person - years

#### Prevalence

# $Prevalence = \frac{no. old and new cases}{no. of people}$

- Point prevalence ≡ prevalence at a particular point in time
- Period prevalence ≡ prevalence over a period of time
- Interpretation A: proportion with condition
- Interpretation B: probability a person selected at random will have the condition

#### **Example of prevalence**

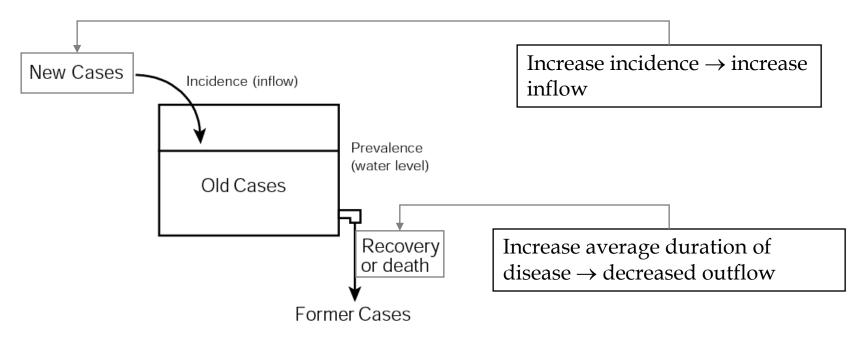
- Recruit 1000 women
- Ascertain: 100 with hysterectomies

Prevalence = 
$$\frac{\text{no. cases}}{\text{no. of people}} = \frac{100 \text{ people}}{1000 \text{ people}} = 0.10$$

#### Prevalence in sample is 10%

#### **Dynamic prevalence**

#### Ways to increase prevalence



### When disease rare & population stationary prevalence ≈ (incidence rate) × (average duration)

Example:

- Incidence rate = 0.01 / year
- Average duration of the illness = 2 years.
- Prevalence  $\approx 0.01$  / year  $\times 2$  years = 0.02

#### **Estimation of 95% confidence interval**

### Proportions

• **Proportion** of event in the sample, denoted "p hat":

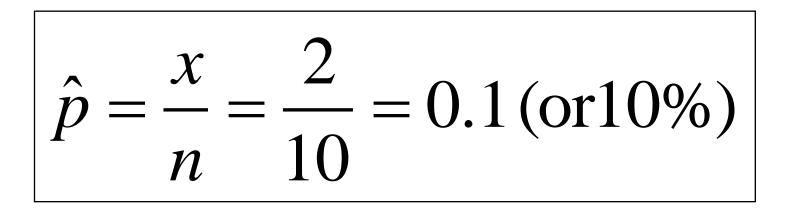
$$\hat{p} = \frac{x}{n}$$

#### where *x* = no. of events and *n* = sample size

#### **Proportion, cont**

Two of 10 individuals in the sample have a risk factor for disease X

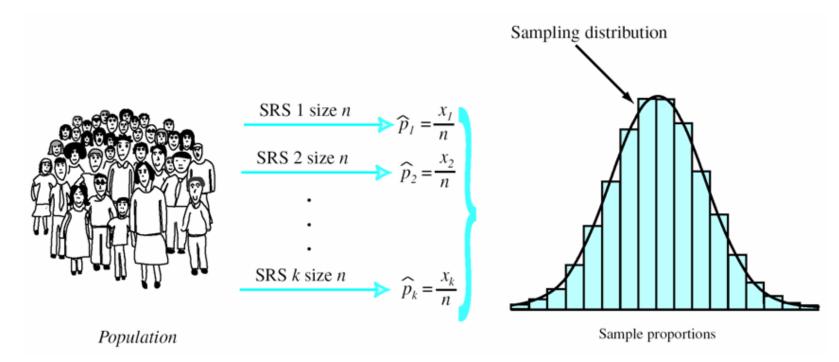
The prevalence of this risk factor in the sample is:



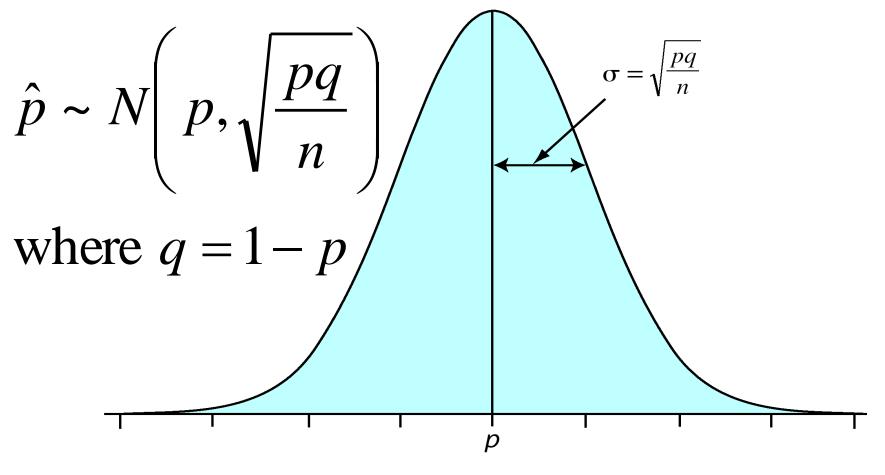
#### **Inference about a Proportion**

How good is sample proportion at estimating population proportion *p*?

Consider what would happen if we took repeated samples, each of size *n*, from the population? How would sample proportions be distributed?



### Normal Approximation for Proportions



Potential values of  $\hat{p}$ 

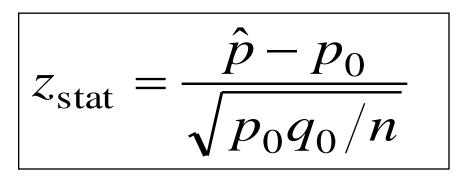
FIGURE 16.4 Sampling distribution of a proportion, Normal approximation.

Wd

#### **Normal approximation**

 $H_0$ :  $p = p_0$  vs.  $H_a$ :  $p \neq p_0$  where  $p_0$  represents the proportion specified by the null hypothesis

**Test statistic** 



#### Example

*n* = 57 finds 17 smokers (*p*-hat = 17 / 57 = 0.2982).

The national average for smoking prevalence is 0.25. Is the proportion in the sample significantly different than the national average?

 $H_0: p = 0.25 \text{ vs. } H_a: p \neq 0.25$  $z_{\text{stat}} = \frac{\hat{p} - p_0}{\sqrt{p_0 q_0 / n}} = \frac{.2982 - .25}{\sqrt{.25 \cdot .75/57}} = 0.84$ 

## The sample proportion is *not* significantly different than the national average.

### **Confidence Interval for Proportion**

This method is called the "plus four method" because it adds four imaginary points during calculations. It is much more accurate than the traditional Normal method.

A 1– $\alpha$ (100%) confidence interval for *p* is:

$$\tilde{p} \pm z_{1-\frac{a}{2}} \times \sqrt{\frac{\tilde{p}\tilde{q}}{\tilde{n}}} \quad \text{where}$$
$$\tilde{x} = \tilde{x} + 2, \quad \tilde{n} = n + 4, \quad \tilde{p} = \frac{\tilde{x}}{\tilde{n}}, \quad \text{and} \quad \tilde{q} = 1 - \tilde{p}$$

### **Confidence Interval, example**

Based on n = 57 and x = 17, the 95% CI for the prevalence of smoking in the population is:

$$\widetilde{x} = x + 2 = 17 + 2 = 19; \quad \widetilde{n} = n + 4 = 57 + 4 = 61$$
  

$$\widetilde{p} = \frac{19}{61} = .3115; \quad \widetilde{q} = 1 - .3115 = .6885$$
  

$$SE_{\widetilde{p}} = \sqrt{\frac{\widetilde{p}\widetilde{q}}{\widetilde{n}}} = \sqrt{\frac{(.3115)(.6885)}{61}} = .0593$$
  

$$z = 1.96 \text{ for } 95\% \text{ confidence}$$
  

$$95\% \text{ CI for } p = \widetilde{p} \pm z \cdot SE_{\widetilde{p}} = .3115 \pm (1.96)(.0593)$$
  

$$= .3115 \pm .1162 = (.1953, .4277)$$

#### **Sample Size and Power**

**Three approaches:** 

- *n* needed to estimate *p* with margin of error *m* (for confidence interval)
- *n* needed to test  $H_0$  at given  $\alpha$  level and power
- The power of testing  $H_0$  under stated conditions

#### n need to achieve margin of error m

$$n = \frac{z_{1-\frac{\alpha}{2}}^2 p^* q^*}{m^2}$$

- where p\* represent an educated guess for population proportion p (when no educated guess for p\* is available, let p\* = .5)
- Round up to next integer to ensure stated precision

#### n need to achieve m, example

Suppose our educated guess for the proportion is  $p^* = 0.30$ 

For margin of error of .05, use:

$$n = \frac{(1.96^2)(.30)(.70)}{.05^2} = 322.7 \Longrightarrow 323$$

For margin of error of .03, use:

$$n = \frac{(1.96^2)(.30)(.70)}{.03^2} = 896.4 \Longrightarrow 897$$

*n* to test  $H_0$ :  $p = p_0$ 

$$n = \left(\frac{z_{1-\frac{\alpha}{2}}\sqrt{p_0q_0} + z_{1-\beta}\sqrt{p_1q_1}}{p_1 - p_0}\right)^2$$

#### where

- $\alpha \equiv$  alpha level of the test (two-sided)
- $1 \beta \equiv$  power of the test
- $p_0 \equiv$  proportion under the null hypothesis
- $p_1 \equiv$  proportion under the alternative hypothesis

#### *n* to test $H_0$ : $p = p_0$ , example

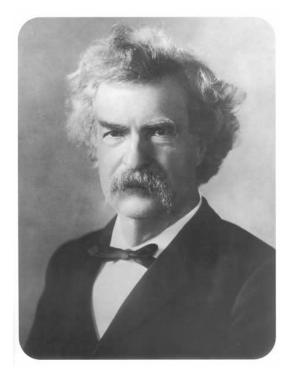
How large a sample is needed to test  $H_0$ : p = 0.21 against  $H_a$ : p = 0.31 at  $\alpha = 0.05$  (two-sided) with 90% power?

 $n = \left(\frac{1.96\sqrt{(0.21)(0.79)} + 1.28\sqrt{(0.31)(0.69)}}{0.31 - 0.21}\right)^2$  $= 193.3 \Rightarrow 194$ 

#### $\Rightarrow$ means round up to ensure stated power

#### **Conditions for Inference**

- Sampling independence
- Valid information
- The plus-four confidence interval requires at least 10 observations
- The *z* test of  $H_0$ :  $p = p_0$  requires  $np_0q_0 \ge 5$



I'd rather have a sound judgment than a talent. Mark Twain

# **Bayesian analysis of proportion**

## Review

- When  $X \sim \text{Binomial}(n, \pi)$  we know that
- p = X/n is the MLE for  $\pi$
- Var(p) = p(1 p)/n
- Wald interval for  $\pi$

$$p \pm Z_{1-a/2}\sqrt{p(1-p)}$$

## **Problems of Wald Cl**

- The Wald interval performs terribly
- Coverage probability varies wildly, sometimes being quite low for certain values of n even when p is not near the boundaries
  - Example, when p = .5 and n = 40 the actual coverage of a 95% interval is only 92%
- When p is small or large, coverage can be quite poor even for extremely large values of n
  - Example, when p = .005 and n = 1, 876 the actual coverage rate of a 95% interval is only 90%

## Simple adjustment

- A simple fix for the problem is to add 2 successes and 2 failures
- That is let p = (X + 2) / (n + 4)
- Lead to the Agresti-Coull interval

$$p \pm Z_{1-a/2}\sqrt{p(1-p)}$$

# **Bayesian analysis**

- Bayesian statistics posits a prior on the parameter of interest
- All inferences are then performed on the distribution of the parameter given the data, called the **posterior**
- In general

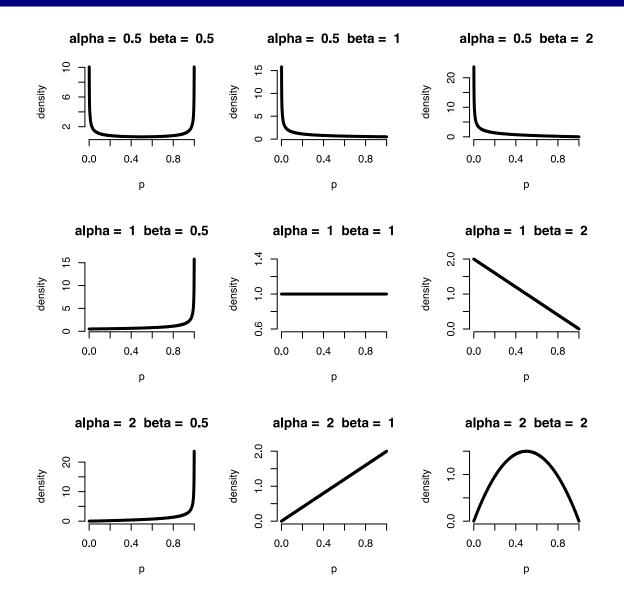
#### **Posterior** $\propto$ **Likelihood** $\times$ **Prior**

 The likelihood is the factor by which our prior beliefs are updated to produce conclusions in the light of the data

# **Beta priors**

- The beta distribution is the default prior for parameters between 0 and 1
- The beta density depends on two parameters  $\alpha$  and  $\beta$
- The mean of the beta density is  $\alpha/(\alpha + \beta)$
- The variance of the beta density is
- $\frac{\alpha\beta}{(\alpha+\beta)^2(\alpha+\beta+1)}$  The uniform density is the special case where  $\alpha = \beta = 1$

### Some beta distributions



## Posterior

- Suppose that we chose values of α and β so that the beta prior is indicative of our degree of belief regarding p in the absence of data
- Then using the rule that

**Posterior**  $\propto$  Likelihood  $\times$  Prior

and throwing out anything that doesn't depend on p, we have that

Posterior 
$$\propto p^x (1-p)^{n-x} \times p^{\alpha-1} (1-p)^{\beta-1}$$
  
=  $p^{x+\alpha-1} (1-p)^{n-x+\beta-1}$ 

## **Posterior mean**

This density is just another beta density with parameters α\* =x+α and β =n-x+β

$$E[p \mid X] = \frac{\alpha}{\tilde{\alpha} + \tilde{\beta}}$$

$$=\frac{x+\alpha}{x+\alpha+n-x+\beta}$$

$$=\frac{x+\alpha}{n+\alpha+\beta}$$

$$= \frac{x}{n} \times \frac{n}{n+\alpha+\beta} + \frac{\alpha}{\alpha+\beta} \times \frac{\alpha+\beta}{n+\alpha+\beta}$$

= MLE 
$$\times \pi$$
 + Prior Mean  $\times (1 - \pi)$ 

### **Posterior variance**

• Posterior variance is

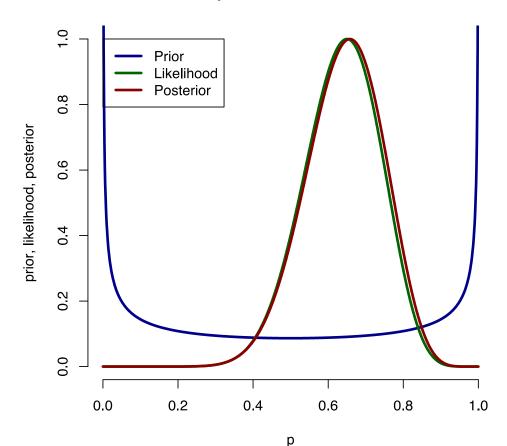
$$\operatorname{Var}(p \mid x) = \frac{\tilde{\alpha}\tilde{\beta}}{(\tilde{\alpha} + \tilde{\beta})^2(\tilde{\alpha} + \tilde{\beta} + 1)} = \frac{(x + \alpha)(n - x + \beta)}{(n + \alpha + \beta)^2(n + \alpha + \beta + 1)}$$

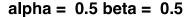
Let p\* = (x + α)/(n + α + β) and n\* = n + α + β then we have

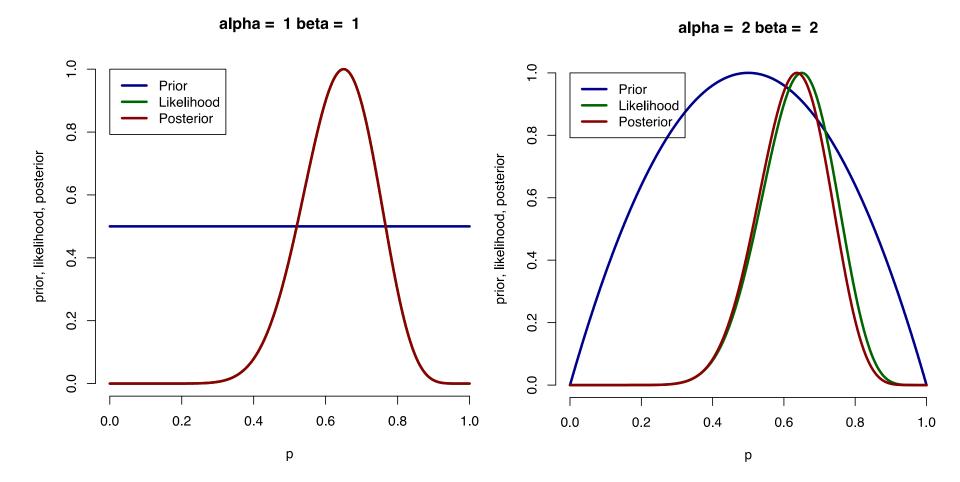
$$Var(p | x) = p^{*}(1 - p^{*}) / (n^{*} + 1)$$

# **Jeffreys prior**

 The "Jeffrey's prior" has some theoretical benefits puts α = β = 0.5







## **R** code

• Install the binom package, then the command

library(binom)

binom.bayes(13, 20, type = "highest")

gives the HPD interval. The default credible level is 95% and the default prior is the Jeffrey's prior.