#### Introduction

This course describes statistical methods for the analysis of longitudinal data, with a strong emphasis on applications in the biological and health sciences

- Univariate statistics: each subject gives rise to a single measurement, termed *response*.
- Multivariate statistics: each subject gives rise to to a vector of measurements, or different responses.
- Longitudinal data: each subject gives rise to a vector of measurements, but these represent the same response measured at a sequence of observation times.
- Repeated responses over time on independent units (persons)

#### Topics

• Basic issues and exploratory analyses

Definition and examples of LDA Approaches to LDA Exploring correlation

- Statistical methods for continuous measurements
- General Linear model with correlated data
   Weighted Least Squares estimation
   Maximum Likelihood estimation
   Parametric models for covariance structure
- Generalized linear models for continuous/discrete responses
- Marginal Models
- Random Effects Models
- Transition Models

Log Linear Model and Poisson Model for count responses Logistic model for binary responses GEE estimation methods Estimation techniques

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#### Introduction

- Longitudinal study: people are measured repeatedly over time;
- Cross-sectional study: a single outcome is measured for each individual
- In a LDA we can investigate:
  - changes over time within individuals (age effects)
  - differences among people in their baseline levels (cohort effects)
- LDA requires special statistical methods because the set of observations on one subject tends to be intercorrelated.

#### Characteristics

- Repeated observations on individuals
- Scientific questions  $\rightarrow$  regression methods
- response = f(predictors)
- discrete/continuous responses and predictors

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## Why special methods?

Repeated observations  $y_{i1}, y_{i2}, \dots, y_{in_i}$  are likely correlated, assumption of independence is violated

What if we use standard regression methods anyway (ignore correlation)?

- Correlation may be of scientific focus
- Incorrect Inference
- ullet Inefficient estimates of eta

# Examples

- 1. CD4 + cell numbers (continuous)
- 2. Growth of Sitka spruce tree size (continuous)
- 3. Protein contents of milk (continuous)
- 4. Indonesian Children's health study (binary)
- 5. Analgesic Crossover trial (binary)
- 6. Epileptic seizures (count)
- 7. Health Effects of air Pollution

#### What is special about longitudinal data?

- Opportunities
- Distinguish "longitudinal" from "cross sectional" effects
- Choose several targets of estimation

# **Challenges**

- Repeated observations tend to be autocorrelated  $(Y_{ij} \text{ more like } Y_{i'j} \text{ than like } Y_{i'j'})$
- Correlation must be modeled

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# CD4+ cell numbers

- HIV attack CD4+ cell which regulates the body's immunosreponse to infectious agent
- 2376 values of CD4+ cell number plotted against time since sieroconversion for 369 infected men enrolled in the MACS
- **Q**: What is the impact of HIV infection on CD4 counts over time?
- Goals:
- 1. characterize the typical time course of CD4+ cell depletion
- 2. identify factors which predict CD4+ cell changes
- 3. estimate the average time course of CD4+ cell depletion
- 4. characterize the degree of heterogeneity across men in the rate of progression

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#### Growth of tree

- Data for 79 trees over two growing seasons
- 54 trees were grown with ozone exposure at 70 ppb
- 25 trees were grown under control conditions
- Goal: compare the growth patterns of trees under the two conditions

#### Protein content of milk

- Milk was collected weekly for 79 Australian cows and analyzed for its protein content
- Cows were maintained on one of three diets
- Goal: to determine how diet affects the protein milk
- **Problem**: about half of the 79 sequences are incomplete missing data

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### Indonesian Children's Health Study

- Dr. Sommer conducted a study to determine effects of vitamin A deficiency in pre-school children
- Over 3000 children examined for up to six visits to assess whether they suffered from respiratory infection, an ocular manifestation of vitamin A deficiency.
   Weight and height are also measured.
- Q: predictors of infection?
- Goals:
- Estimate the increase in risk of respiratory infection for children who are vitamin A deficient while controlling for other demographic factors
- 2. Estimate the degree of heterogeneity in the risk of disease among children

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# **Analgesic Cross over trial**

- 3 period crossover trial of an analgesic drug for relieving pain for primary dysmenorrhea
- 3 levels of analgesic (control, low, and high) were given to each of the 86 women
- Women were randomized to one of the six possible orders for administering the three treatment levels
- $\bullet$  Pain was relieved for 26% with placebo, 71% with low dose, and 80% with high dose
- Q: treatment effect?

# **Epileptic seizures**

- Clinical Trail of 59 epileptics
- For each patient, the number of epileptic seizures was recorded during a baseline period of eight weeks
- patient were randomized to treatment with the antiepileptic drug progabide or placebo
- Number of seizures was then recorded in four consecutive two weeks intervals
- Question: is progabide reduces the rate of epileptic seizures?

#### **Health Effects of Air Pollution**

• daily time series data for Baltimore

• primary outcome: daily mortality

 $\bullet$  covariates: time, season,  $PM_{10}$ 

• Q: association between mortality and air pollution?

What these examples have in common?

• there are repeated observations on each experimental unit:

• units can be assumed independent of one other;

 multiple responses within each unit are likely to be correlated;

 the objectives can be formulate as regression problems whose purpose is to describe the dependence of the response on explanatory variables;

• the choice of the statistical model must depend on the type of the outcome variable.

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#### **Course Overview**

Scientific objectives include
 Characterize change

Component of variation

Hypothesis testing

• We will focus on regression methods

• We will consider (up to 6) cases-studies in detail.

• Computing using **Stata** will be introduced

#### **Notation**

 $\bullet Y_{ij} = \text{response variable}$ 

ullet  $x_{ij}=$  explanatory variable observed at time  $t_{ij}$ 

•  $j = 1, \ldots, n_i$  observations

•  $i = 1, \dots, m$  subject

 $\bullet E(Y_{ij}) = \mu_{ij}, \ V(Y_{ij}) = v_{ij}$ 

 $\bullet \mathbf{Y}_i = (Y_{i1}, \dots, Y_{in_i})$ 

 $\bullet E(Y_i) = \mu_i, \ V(Y_i) = V_i, \ [V_i]_{ik} = cov(Y_{ij}, Y_{ik})$ 

• Regression Model

 $\bullet \, \boldsymbol{Y}_i = X_i \boldsymbol{\beta} + \boldsymbol{\epsilon}_i$ 

# Cross sectional versus longitudinal study

- Cross-sectional study  $(n_i = 1)$
- 1.  $Y_{i1} = \beta_c x_{i1} + \epsilon_{i1}, i = 1, \dots, m$
- ullet  $eta_c$  represents the difference in average Y across two sub-populations which differ by one unit in x.
- With repeated observations we can extend the model
- 2.  $Y_{ij} = \beta_c x_{i1} + \beta_L (x_{ij} x_{i1}) + \epsilon_{ij}$  $j = 1, \dots, n_i, i = 1, \dots, m$
- 3.  $(Y_{ij} Y_{i1}) = \beta_L(x_{ij} x_{i1}) + \epsilon_{ij} \epsilon_{i1}, (2. 1.)$
- ullet  $eta_L$  represents the expected change in Y over time per one unit change in x for a given subject.
- $\bullet$  if  $n=1 \to \mathsf{model}\ 1$ . =  $\mathsf{model}\ 2$ .

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Example

- ullet Suppose that we want to estimate a man's immune status as reflected in his CD4+ level
- ullet in CS, one man's estimate must draw upon the data from others to overcome measurement error. But averaging across people ignores the natural differences in CD4+ among persons
- in LS we can borrow strength across time for the persons of interest as well as across people
- little variability among people, then one man's estimate can rely on data for others as in the CS case
- large variability among people, we might prefer use only the data for the individuals

### Cross sectional versus longitudinal study

- In CS the basis is a comparison of individuals with a particular value of x to others with a different value
- ullet in LDA each person is his or her control.  $eta_L$  is estimated by comparing a person's response at two times assuming that x changes over time
- in LS we can distinguish the degree of variation of Y across time for one individual from the variation of Y across people.

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# Approaches to LDA

- If we have one observation on each experimental unit, we are confined to modeling the population average of Y called marginal mean response
- If we have repeated measurements, there are several approaches that can be adopted
- 1. reduce the repeated values into one or two summary variables
- 2. analyze each summary variable as a function of covariates  $oldsymbol{x}_i$

### Where does correlation come from?

• Past causing present

$$\mathsf{logit} Pr(Y_{ij} = 1 \mid \mathsf{past}) = x_{ij}\beta + \alpha y_{ij-1}$$

• Latent variables

$$\log \frac{Pr(Y_{ij} = 1 \mid U_i)}{Pr(Y_{ij} = 0 \mid U_i)} = \beta_0 + U_i + \beta_1 x_{ij}$$

ullet  $U_i$  are unobserved

### Approaches to LDA

Marginal Model

$$E(\mathbf{Y}_i) = X_i \boldsymbol{\beta}, \ V(\mathbf{Y}_i) = V_i(\boldsymbol{\alpha})$$

• Random Effects Model

$$E(Y_{ij} | \boldsymbol{\beta}_i) = \boldsymbol{x}'_{ij} \boldsymbol{\beta}_i$$
$$\boldsymbol{\beta}_i = \boldsymbol{\beta} + \boldsymbol{U}_i$$

• Transition Models

$$E(Y_{ij} | Y_{ij-1}, \dots, Y_{i1}, \boldsymbol{x}_{ij})$$

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# Marginal model - ICHS example

$$ullet Y_{ij} = \left\{ egin{array}{ll} 1 & {\sf Resp infection} \ 0 & {\sf Not} \end{array} 
ight.$$
  $ullet x_{ij} = \left\{ egin{array}{ll} 1 & {\sf Vit A deficiency} \ 0 & {\sf Not} \end{array} 
ight.$ 

• Mean model

$$\log \frac{Pr(Y_{ij} = 1)}{Pr(Y_{ij} = 0)} = \beta_0 + \beta_1 x_{ij}$$

- coefficients describe/compare subpopulations
- $\bullet \exp(\beta_1) = \mathsf{ratio} \ \mathsf{of} \ \mathsf{odds} \ \mathsf{of} \ \mathsf{RI} \ \mathsf{for} \ \mathsf{two} \ \mathsf{vitamin} \ \mathsf{A} \ \mathsf{groups}$
- with binary responses, models for odds ratios preferred to correlations

#### **Random Effects models**

ullet Idea - correlations among  $Y_{ij}$  caused by a latent variable  $U_i$ 

$$\log \frac{Pr(Y_{ij} = 1 \mid U_i)}{Pr(Y_{ij} = 0 \mid U_i)} = \beta_0 + U_i + \beta_1 x_{ij}$$

- ullet  $eta_0 + U_i = {
  m child} \ i \ {
  m intercept}$
- ullet  $eta_1 x_{ij} = \mathsf{common}$  vitamin A effect
- $\bullet$   $\beta_1$  is the log odds of RI for given child when he is vitamin A deficient versus when he is not

#### **Transition models**

• Idea - past responses have an effect on current responses

$$\log \frac{Pr(Y_{ij} = 1 \mid \mathsf{past}_i)}{Pr(Y_{ij} = 0 \mid \mathsf{past}_i)} = x_{ij}\beta + \alpha y_{ij-1}$$