

This work is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike License](https://creativecommons.org/licenses/by-nc-sa/4.0/). Your use of this material constitutes acceptance of that license and the conditions of use of materials on this site.



Copyright 2009, The Johns Hopkins University and John McGready. All rights reserved. Use of these materials permitted only in accordance with license rights granted. Materials provided "AS IS"; no representations or warranties provided. User assumes all responsibility for use, and all liability related thereto, and must independently review all materials for accuracy and efficacy. May contain materials owned by others. User is responsible for obtaining permissions for use from third parties as needed.



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Study Design

John McGready
Johns Hopkins University

Lecture Topics

- Randomized/controlled study design
- Methods of randomization
- Natural experiments
- Observational studies
- Case/control studies



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section A

Making the Case for Randomized Controlled Studies

Clofibrate Trial

- A study was performed to look at the effect of a drug, Clofibrate, on mortality rates for individuals with heart disease
 - Individuals were followed for five years after administration of the drug

Results: Clofibrate Group

- Coronary heart disease
 - Results from group randomized to take Clofibrate

	Five Year Mortality	
Clofibrate Group (p < .01)	Compliers	.15
	Non-compliers	.25

Results: Clofibrate Group

- Coronary heart disease
 - Results from group randomized to take Clofibrate

	Five Year Mortality	
Clofibrate Group (p < .01)	Compliers	.15
	Non-compliers	.25

- Question: Do these results strongly demonstrate the efficacy of Clofibrate in reducing the mortality in subjects with CHD?

Results: Placebo Group

- Coronary heart disease
 - Results from group randomized to take placebo

	Five Year Mortality	
Placebo Group (p < .01)	Compliers	.15
	Non-compliers	.25

The Dangers of Self-Selection

- Overall mortality in each of the groups in this randomized trial

	Five Year Mortality	
Clofibrate	n = 1,103	.0.20 (20%)
Placebo	n = 2,789	0.21 (21%)

The Dangers of Self-Selection

- Randomized trial
 - No significant difference ($p > .20$) between the treatment and placebo groups!
- No difference between TX groups
 - The compliers and non-compliers were similar with respect to other variables (age, etc.)
 - There were no apparent harsh side effects of Clofibrate relative to placebo that may have resulted in differential compliance between the Clofibrate and placebo groups

A Randomized Control Group

- Important for accounting for many kinds of biases
- Randomization, done correctly on a large number of subjects nearly ensures that the only systematic difference in the groups being compared is the exposure(s) of interest

Note

- A very famous randomized trial (once again)
 - 200,745 vaccinated for polio
 - \approx 400,000 school children randomized
 - 201,229 given a placebo

1954 Salk Polio Vaccine Trial

- At the end of the follow-up period there were 82 cases in the vaccine group and 162 in the placebo group
- Subsequently analyses report slightly different numbers because some false positives were discovered in each of the two groups

1954 Salk Polio Vaccine Trial

- Results

	Vaccine	Placebo	Total
Polio	82	162	
No Polio	200,663	201,067	

Results in 2x2 Table Format

- How to test for an association between vaccine and polio?
(Flashback to 611!)
 - $H_0: p_{\text{vaccine}} = p_{\text{placebo}}$
 - $H_A: p_{\text{vaccine}} \neq p_{\text{placebo}}$
- Where p_{vaccine} is the percentage of children with polio in vaccine group, p_{placebo} is the percentage in the placebo group
- How to test for an association between vaccine and polio?
(Flashback to 611!)
 - You can use either Fisher's Exact test or Chi-Squared test
(Why?)
- With FET, $p < .001$

Randomized Study Design

- Prospective cohort studies
 - Choose a fixed number with and without exposure
 - Follow subjects for set time period and determine who has disease/outcome of interest

- Measures of association
 - Difference in proportions
 - Relative risk (ratio of proportions)
 - Odds ratio

Benefits of Randomization

- Randomization helps protect against self selection biases
 - Examples:
 - ▶ Males are more likely to volunteer for placebo than females
 - ▶ Smokers are less likely to be in the exposed group
 - ▶ Healthier persons sign up for the intervention
- The goal of randomization is to eliminate any systematic differences in characteristics of subjects in each of the exposure groups under study, save for the exposure itself

Randomized Study Design

- Many epidemiological studies are concerned with estimating an association between two dichotomous (binary) variables
 - Example: exposure-disease association
- Randomized study design with control group is a type of **prospective cohort study**

Randomized Study Design

- Prospective cohort studies
 - Choose a fixed number with and without exposure
 - Follow subjects for set time period and determine who has disease/outcome of interest
- Measures of association
 - Difference in proportions
 - Relative risk (ratio of proportions)
 - Odds ratio