

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 2006, 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

Comparing Proportions Between Two Independent Populations

John McGready
Johns Hopkins University

Lecture Topics

- ◆ CI's for difference in proportions between two independent populations
- ◆ Large sample methods for comparing proportions between two populations
 - Normal method
 - Chi-squared test
- ◆ Fisher's exact test
- ◆ Relative risk



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section A

***The Two Sample Z-Test for
Comparing Proportions Between
Two Independent Populations***

Comparing Two Proportions

- ◆ We will motivate by using data from the Pediatric AIDS Clinical Trial Group (ACTG) Protocol 076 Study Group¹

¹ Conner, E., et al. *Reduction of Maternal-Infant Transmission of Human Immunodeficiency Virus Type 1 with Zidovudine Treatment*, New England Journal of Medicine 331: 18

Comparing Two Proportions

- ◆ Study Design
 - “We conducted a randomized, double-blinded, placebo-controlled trial of the efficacy and safety of zidovudine (AZT) in reducing the risk of maternal-infant HIV transmission”
 - 363 HIV infected pregnant women were randomized to AZT or placebo

Comparing Two Proportions

- ◆ Results
 - Of the 180 women randomized to AZT group, 13 gave birth to children who tested positive for HIV within 18 months of birth

Comparing Two Proportions

- ◆ Result
 - Of the 183 women randomized to the placebo group, 40 gave birth to children who tested positive for HIV within 18 months of birth

Notes on Design

- ◆ Random assignment of Tx
 - Helps insure two groups are comparable
 - Patient and physician could not request particular Tx

Notes on Design

- ◆ Double blind
 - Patient and physician did not know Tx assignment

HIV Transmission Rates

- ◆ AZT $\hat{p}_{AZT} = \frac{13}{180} = 0.072$
- ◆ Placebo $\hat{p}_{PLAC} = \frac{40}{183} = 0.219$

HIV Transmission Rates

- ◆ Note—these are NOT the true population parameters for the transmission rates, they are estimates based on our two samples

HIV Transmission Rates

- ◆ There is sampling variability
- ◆ 95% confidence intervals
 - AZT 95% CI .04 - .12
 - Placebo 95% CI .16 - .28

95% CIs for HIV Transmission Rates

- ◆ AZT $n_{AZT} \times \hat{p}_{AZT} \times (1 - \hat{p}_{AZT}) = 180 \times 0.072 \times .928 = 12$
- ◆ Placebo $n_{PLAC} \times \hat{p}_{PLAC} \times (1 - \hat{p}_{PLAC}) = 183 \times 0.22 \times .78 = 31$

HIV Transmission Rates

```
. cii 180 13
```

Variable	Obs	Mean	Std. Err.	-- Binomial Exact -- [95% Conf. Interval]	
	180	.0722222	.019294	.0390137	.1203358

```
. cii 183 40
```

Variable	Obs	Mean	Std. Err.	-- Binomial Exact -- [95% Conf. Interval]	
	183	.2185792	.0305507	.160984	.2855248

Notes on HIV Transmission Rates

- ◆ Is the difference significant, or can it be explained by chance?
- ◆ Since CI's do not overlap suggests significant difference
 - Can we compute a confidence interval on the difference in proportions?
 - Can we compute a p-value?

Sampling Distribution of the Difference in Sample Means

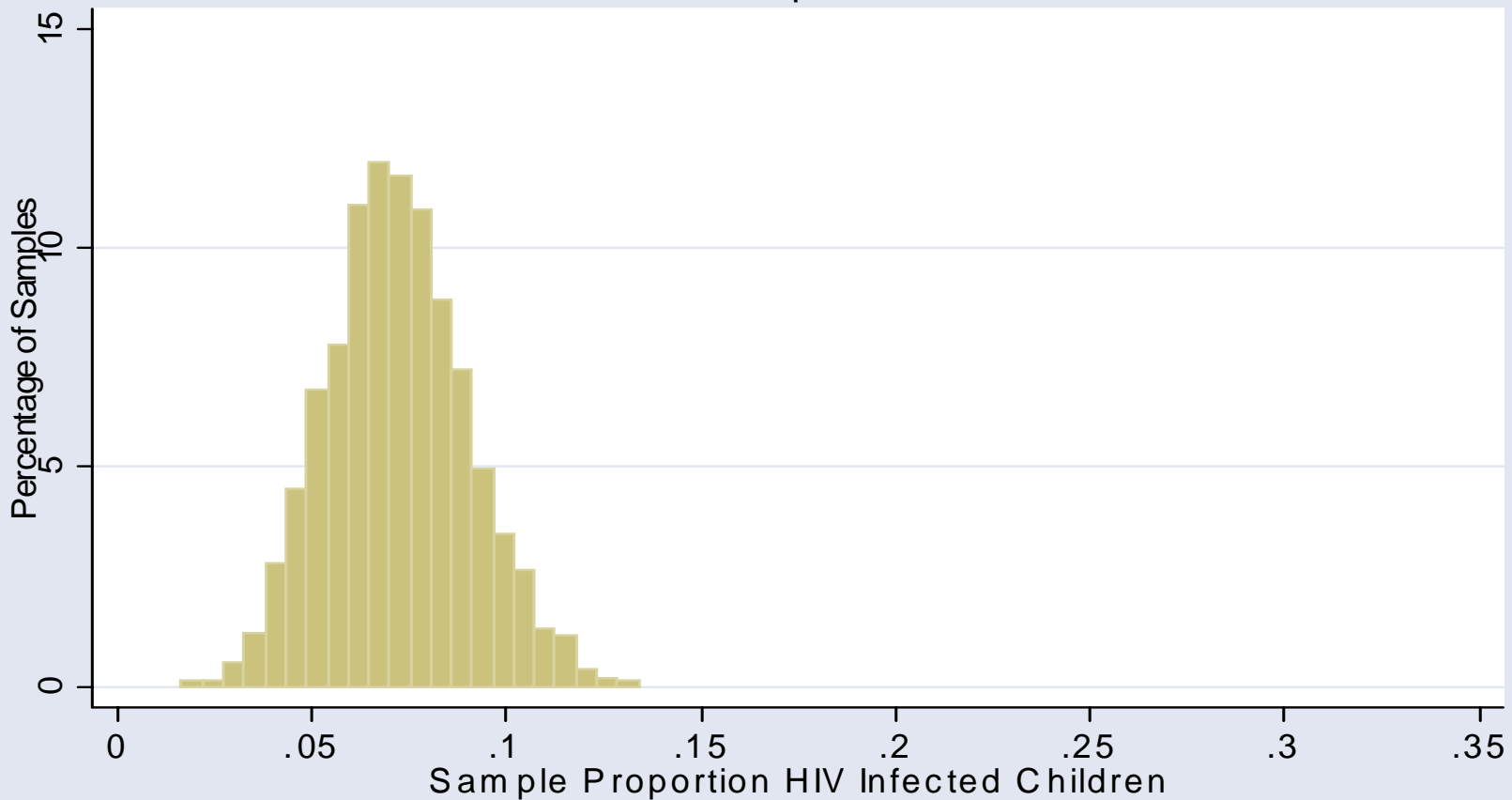
- ◆ Since we have large samples we know the sampling distributions of the sample proportions in both groups are approximately normal
- ◆ It turns out the difference of quantities, which are (approximately) normally distributed, are also normally distributed

Sampling Distribution of the Difference in Sample Means

- ◆ So, the big news is . . .
 - The sampling distribution of the difference of two sample proportions, each based on large samples, approximates a normal distribution
 - This sampling distribution is centered at the true (population) difference, $P_1 - P_2$

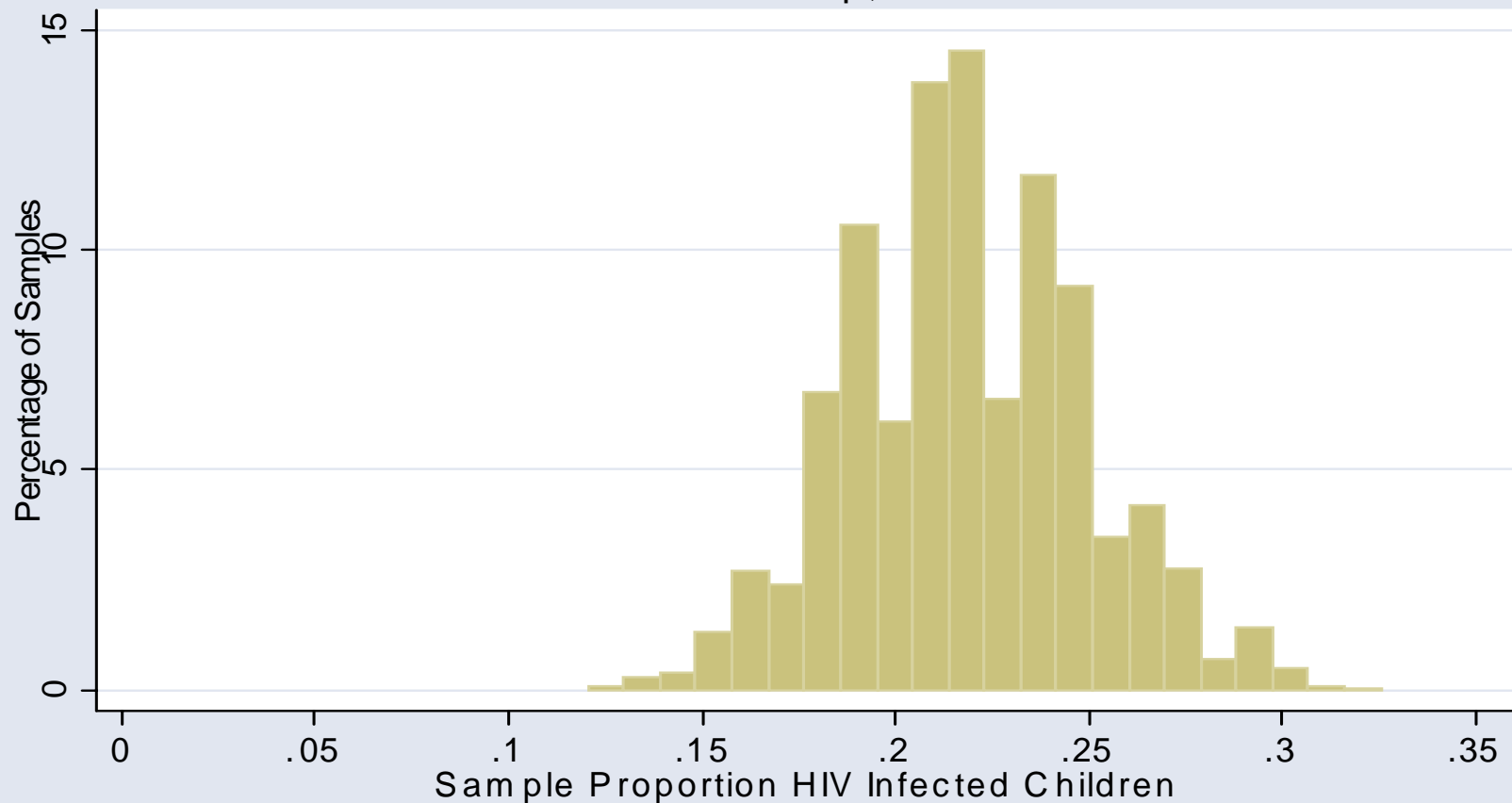
Simulated Sampling Distribution of Sample Proportion

Simulated Sampling Distribution, Proportion HIV Infected Children
AZT Group, $n = 180$



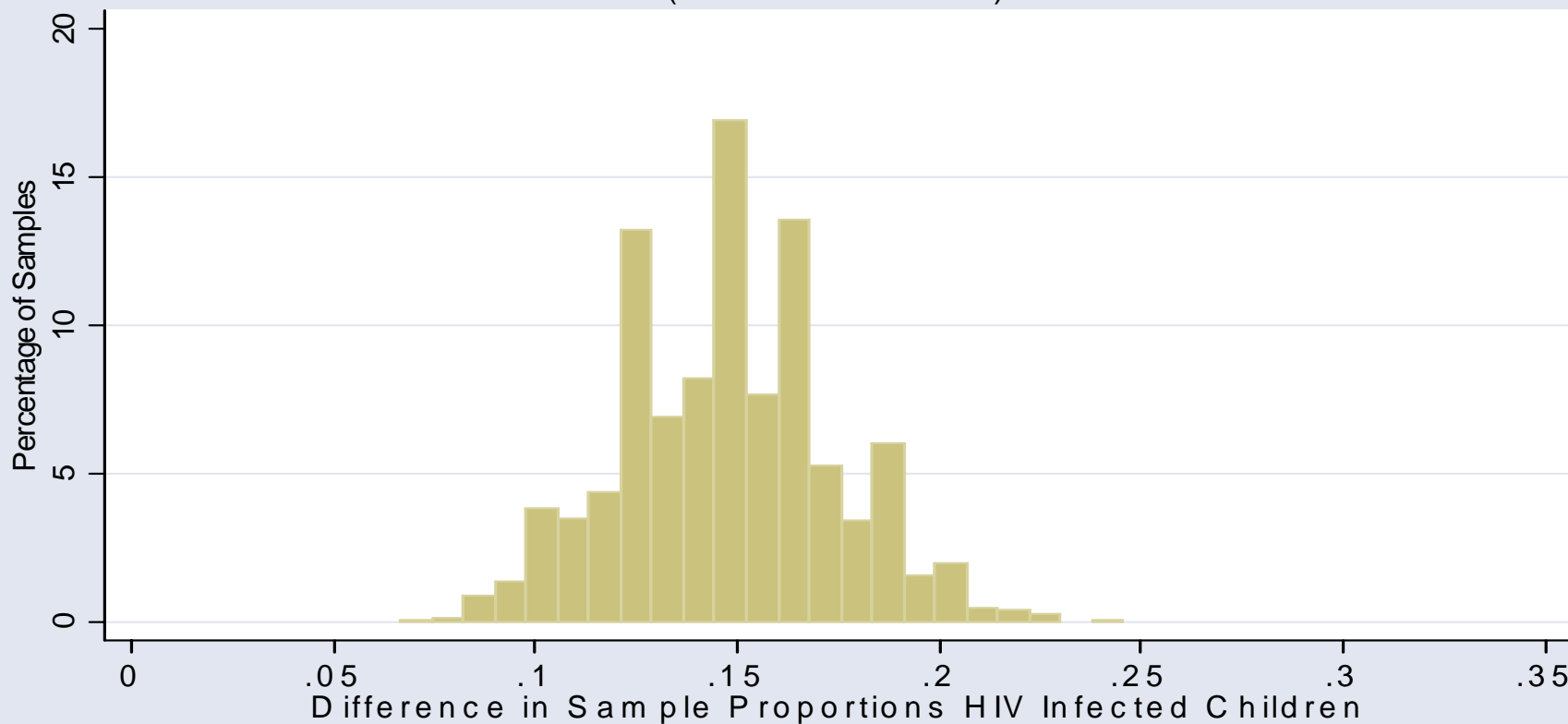
Simulated Sampling Distribution of Sample Proportion

Simulated Sampling Distribution, Proportion HIV Infected Children
Placebo Group, n = 183



Simulated Sampling Distribution Difference in Sample Proportions

Simulated Sampling Distribution, Difference in Proportions
(Placebo - AZT)



95% Confidence Interval for Difference in Proportions

- ◆ Our most general formula:

(our best estimate) $\pm 2^*$ (SE of our best estimate)

95% Confidence Interval for Difference in Means

- ◆ Well, our best estimate for the mean difference would be :

$$\hat{p}_1 - \hat{p}_2$$

- ◆ Where . . .
 - \hat{p}_1 = proportion HIV infected children in AZT group
 - \hat{p}_2 = proportion HIV infected children in placebo group

95% Confidence Interval for Difference in Means

- ◆ Since $\hat{p}_1 - \hat{p}_2 = 0.07 - .22 = -0.15$, our formula is . . .

$$-.15 \pm 2 SE(\hat{p}_1 - \hat{p}_2)$$

- ◆ $SE(\hat{p}_1 - \hat{p}_2)$ = standard error of the difference of two sample means

Two Independent Groups

- ◆ Statisticians have developed formulas for the standard error of the difference
 - These formulas depend on sample sizes in both groups and sample proportion in both groups

Two Independent Groups

- ◆ The $SE(\hat{p}_1 - \hat{p}_2)$ is greater than either the $SE(\hat{p}_1)$ or $SE(\hat{p}_2)$
- ◆ Why do you think this is?

Two Independent Groups

- ◆ In the example . . .

$$SE (\hat{p}_1 - \hat{p}_2) = .036$$

$$SE (\hat{p}_1) = .019$$

$$SE (\hat{p}_2) = .031$$

Example

- ◆ 95% confidence interval for difference in proportions $SE(\hat{p}_1 - \hat{p}_2)$
 - $.15 \pm 2$
 - $.15 \pm 2 * .036$
 - $.15 \pm .07$

 - 0.22 to - 0.08

Note

- ◆ The confidence interval does not include 0

The SE of the Difference in Sample Proportions

- ◆ Variation from independent sources can be added

$$\text{Variance}(\hat{p}_1 - \hat{p}_2) = [SE(\hat{p}_1)]^2 + [SE(\hat{p}_2)]^2$$

$$\text{Variance}(\hat{p}_1 - \hat{p}_2) = \frac{\hat{p}_1(1 - \hat{p}_1)}{n_1} + \frac{\hat{p}_2(1 - \hat{p}_2)}{n_2}$$

- ◆ Why do you think we add?

The SE of the Difference in Sample Proportions

- ◆ Variation from independent sources can be added

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

Principle

- ◆ Formula depends on $n_1, n_2, \hat{p}_1, \hat{p}_2$
- ◆ There are other slightly different equations for (e.g. Altman, p.234) $SE(\hat{p}_1 - \hat{p}_2)$
- ◆ But they all give similar answers

Simple Approximation Method to Compare Proportions

◆ Hypotheses

$$H_0: P_1 = P_2$$

$$H_a: P_1 \neq P_2$$

Simple Approximation Method to Compare Proportions

◆ Hypotheses

$$H_0: P_1 - P_2 = 0$$

$$\underline{H_a: P_1 - P_2 \neq 0}$$

Simple Approximation Method to Compare Proportions

- ◆ Recall the general “recipe” for hypothesis testing:
 1. State null and alternative hypotheses
 2. Calculate test statistic based on sample
 3. Compare test statistic to appropriate distribution to get p-value

Simple Approximation Method to Compare Proportions

◆ Principle

- General formula for test statistic . . .

$$test = \frac{(\text{observed diff}) - (\text{null diff})}{\text{SE of the difference}}$$

Comparing Proportions

- ◆ But since null difference is zero, this reduces to . . .

$$test = \frac{\text{(observed diff)}}{\text{SE of the difference}}$$

Comparing Proportions

◆ Principle

- Estimate parameter (the difference) divide by SE of estimate

$$Z = \frac{\hat{p}_1 - \hat{p}_2}{SE(\hat{p}_1 - \hat{p}_2)}$$

Two-Sample z-test for Comparing Proportions

- ◆ Which is just . . .

$$Z = \frac{\hat{p}_1 - \hat{p}_2}{SE(\hat{p}_1 - \hat{p}_2)}$$

$$z = \frac{.07 - (.22)}{.036} = \frac{-.15}{.036} = -4.2$$

Note

- ◆ This is a two sample z-test for comparing two proportions
 - The value $z = -4.2$ is the test statistic
- ◆ We calculate a p-value which is the probability of obtaining a test statistic as extreme as we did if H_0 was true

How Are p-values Calculated?

- ◆ Is a result 4.2 standard errors below 0 unusual?
 - It depends on what kind of distribution we are dealing with

How Are p-values Calculated?

- ◆ The p-value is the probability of getting a test statistic as or more extreme than what you observed (- 4.2) by chance if H_0 was true
- ◆ The p-value comes from the sampling distribution of *the difference in two sample proportions*

Sampling Distribution

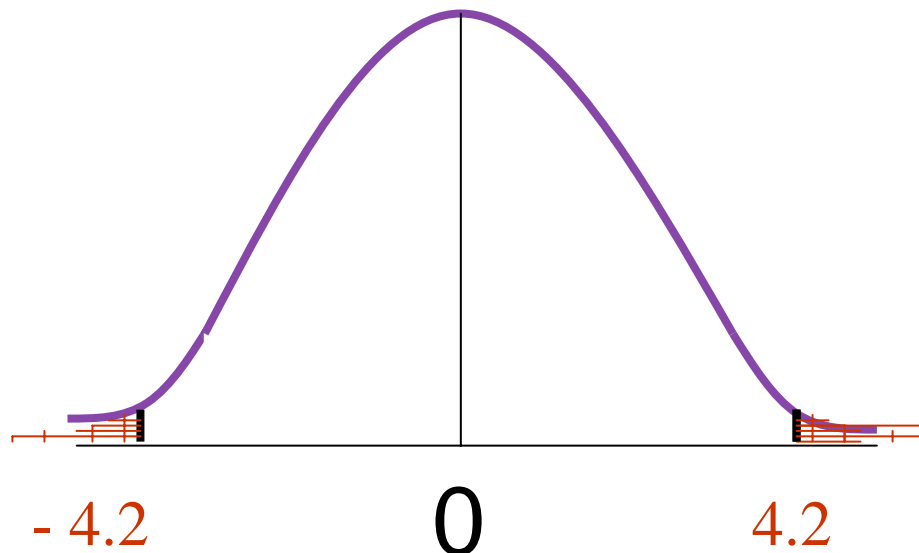
- ◆ What is sampling distribution of the difference in sample proportions?
 - If both groups are large then this distribution is approximately normal

AZT Study

- ◆ So, since both our samples are large our sampling distribution will be approximately normal
 - This sampling distribution will be centered at true difference, $P_1 - P_2$
 - Under null hypothesis, this true difference is 0

AZT Study

- ◆ To compute a p-value, we would need to compute the probability of being 4.2 or more standard errors away from 0 on a standard normal curve



AZT Study

- ◆ If we were to look this up on a normal table, we would find a very low p-value ($p < .001$)

Notes

- ◆ This method is also essentially equivalent to the chi-square (χ^2) method
 - Gives about the same answer
 - (p-value)
 - We will discuss chi-square method next

Display Data in a 2x2 Table

- ◆ Two rows and two columns
- ◆ Contingency table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

Display Data in a 2x2 Table

- ◆ Grand total

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

Display Data in a 2x2 Table

- ◆ Column totals

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

Display Data in a 2x2 Table

- ◆ Row totals

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

Display Data in a 2x2 Table

- ◆ Cell counts

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

Using Stata

- ◆ We can get Stata to give us a 95% CI for the difference in proportions, and a p-value by using the `csi` command

Using Stata

- ◆ Syntax—if we create a 2x2 table using our sample results as such

		Exposure	
		Yes	No
Outcome	Yes	a	b
	No	c	d

Using Stata

- ◆ Syntax:

- `csi a b c d`

Using Stata

- ◆ 2x2 table formed using results from a Maternal-Infant Transmission Study

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	210
		180	183	263

Using Stata

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
	chi2(1) =	15.59	Pr>chi2 = 0.0001	

Using Stata

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
chi2(1) = 15.59 Pr>chi2 = 0.0001				

Using Stata

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
	chi2(1) =	15.59	Pr>chi2 = 0.0001	

Using Stata

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
	chi2(1) =		15.59	Pr>chi2 = 0.0001

Summary: AZT Study

◆ **Statistical Method**

- “We conducted a randomized, double-blind, placebo-controlled trial of the efficacy and safety of zidovudine (AZT) in reducing the risk of maternal-infant HIV transmission”

Summary: AZT Study

◆ **Statistical Method**

- The proportion of infants diagnosed as HIV positive within 18 months of birth was compared between the AZT and placebo groups using a two-sample z-test of proportions
- 95% confidence intervals were computed for the 18-month infection proportion in each group, and for the difference in proportions between both groups

Summary: AZT Study

◆ Results

- The proportion of infants who tested positive for HIV within 18 months of birth was seven percent (95% CI 4 - 12%) in the AZT group and twenty-two percent in the placebo group (95% CI 16 - 28%)
- This difference is statistically significant ($p < .001$)

Summary: AZT Study

◆ Results

- The study results estimate the decrease in the proportion of HIV positive infants born to HIV positive mothers attributable to AZT to possibly be as low as 8% and as high as 22%



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section A

Practice Problems

Practice Problems

- ◆ A study was performed on a representative sample of 258 intravenous drug users (IVDUs)
- ◆ Of particular interest to the researchers were factors which may influence the risk of contracting tuberculosis amongst IVDUs¹

Source: ¹ Based on data reported in: Graham, N., et al. Prevalence of Tuberculin Positivity and Skin Test Anergy in HIV-1-Seropositive and Seronegative Intravenous Drug Users, Journal of the American Medical Association 267: 3.

Continued

Practice Problems

- ◆ Ninety seven of the study subjects admitted to sharing needles to shoot drugs
- ◆ Of these 97, 24 had a positive tuberculin test result
- ◆ The other 161 subjects denied having shared needles—of these 161 subjects, 28 had a positive tuberculin test result

Practice Problems

- a) Using the study results, construct a 95% confidence interval for the difference in the proportion of tuberculosis infected IVDUS who shared needles as compared to IVDUS who did not share needles

Practice Problems

- b) What is the p-value for testing the null hypothesis that the proportions of individuals testing positive for tuberculosis are the same between the two groups of IVUDUs?

Practice Problems

- c) Does this study suggest a relationship between tuberculosis infection and needle sharing in IVDUs?



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section A

Practice Problems Solutions

Practice Problems

- ◆ A study was performed on a representative sample of 258 intravenous drug users (IVDUs)
- ◆ Of particular interest to the researchers were factors which may influence the risk of contracting tuberculosis amongst IVDUs¹

Source: ¹ Based on data reported in: Graham, N., et al. Prevalence of Tuberculin Positivity and Skin Test Anergy in HIV-1-Seropositive and Seronegative Intravenous Drug Users, Journal of the American Medical Association 267: 3.

Continued

Practice Problems

- ◆ Ninety seven of the study subjects admitted to sharing needles to shoot drugs
- ◆ Of these 97, 24 had a positive tuberculin test result
- ◆ The other 161 subjects denied having shared needles—of these 161 subjects, 28 had a positive tuberculin test result

Practice Problems

- a) Using the study results, construct a 95% confidence interval for the difference in the proportion of tuberculosis infected IVDUS who shared needles as compared to IVDUS who did not share needles

Practice Problems

- ◆ First, it may prove helpful to arrange the study results in a 2x2 contingency table

		Share Needles?		
		Yes	No	
TB Positive?	Yes	24	28	52
	No	73	133	206
		97	161	258

Practice Problems

```
. csi 24 28 73 133
```

	Exposed	Unexposed	Total	
Cases	24	28	52	
Noncases	73	133	206	
Total	97	161	258	
Risk	.2474227	.173913	.2015504	
	Point estimate		[95% Conf. Interval]	
Risk difference	.0735096		-.0304235	.1774428
Risk ratio	1.42268		.8772363	2.307268
Attr. frac. ex.	.2971014		-.1399437	.566587
Attr. frac. pop	.1371237			
	chi2(1) =		2.03	Pr>chi2 = 0.1540

Practice Problems

- b) What is the p-value for testing the null hypothesis that the proportions of individuals testing positive for tuberculosis are the same between the two groups of IVUDUs?

Practice Problems

```
. csi 24 28 73 133
```

	Exposed	Unexposed	Total	
Cases	24	28	52	
Noncases	73	133	206	
Total	97	161	258	
Risk	.2474227	.173913	.2015504	
	Point estimate		[95% Conf. Interval]	
Risk difference	.0735096		-.0304235	.1774428
Risk ratio	1.42268		.8772363	2.307268
Attr. frac. ex.	.2971014		-.1399437	.566587
Attr. frac. pop	.1371237			
chi2(1) = 2.03 Pr>chi2 = 0.1540				

Practice Problems

- c) Does this study suggest a relationship between tuberculosis infection and needle sharing in IVDUs?



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section B

The Chi-Squared Test

Hypothesis Testing Problem

- ◆ $H_0: P_1 = P_2 \quad (P_1 - P_2 = 0)$
- ◆ $H_a: P_1 \neq P_2 \quad (P_1 - P_2 \neq 0)$
 - In the context of the 2x2 table, this is testing whether there is a relationship between the rows (HIV status) and columns (treatment type)

Statistical Test Procedures

- ◆ **(Pearson's) Chi-Square Test (χ^2)**
 - Calculation is easy (can be done by hand)
- ◆ Works well for big sample sizes

The Chi-Square Approximate Method

- ◆ Gives (essentially) same p-value as z-test for comparing two proportions
- ◆ Can be extended to compare proportions between more than two independent groups in one test

The Chi-Square Approximate Method

- ◆ Looks at discrepancies between observed and expected cell counts

O = observed

$$E = \text{expected} = \frac{\text{row total} \times \text{column total}}{\text{grand total}}$$

The Chi-Square Approximate Method

- ◆ Expected refers to the values for the cell counts that would be expected if the null hypothesis is true
 - The expected values if the proportions are equal

The Chi-Square Approximate Method

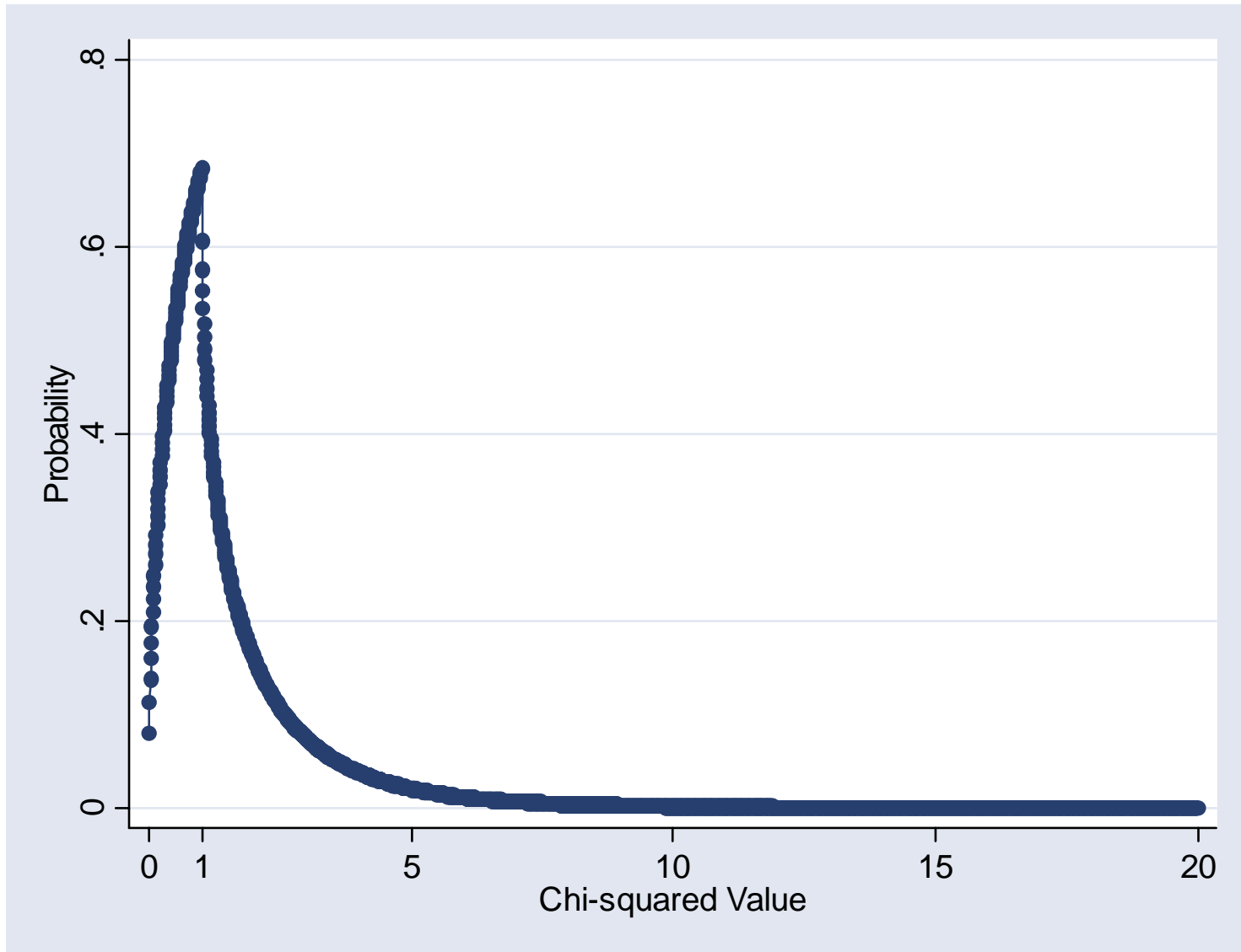
- ◆ Test statistic

$$\chi^2 = \sum_{4 \text{ cells}} \frac{(O - E)^2}{E}$$

The Chi-Square Approximate Method

- ◆ The sampling distribution of this statistic when the null is a chi-square distribution with one degree of freedom
- ◆ We can use this to determine how likely it was to get such a big discrepancy between the observed and expected by chance alone

Sampling Distribution: Chi-Square with One Degree of Freedom



Display Data in a 2x2 Table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

- ◆ The observed value for cell one is 13
- ◆ Let's calculate its expected value

Example of Calculations of Chi-Square 2x2 Contingency Table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

- ◆ Take row one total

Example of Calculations of Chi-Square 2x2 Contingency Table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

- ◆ Take row one total, multiply by column one total

Example of Calculations of Chi-Square 2x2 Contingency Table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

- ◆ Take row one total, multiply by column one total, and divide by grand total

Example of Calculations of Chi-Square 2x2 Contingency Table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

◆ Expected = $\frac{53 * 180}{363} = 26.3$

Example of Calculations of Chi-Square 2x2 Contingency Table

		Drug Group		
		AZT	Placebo	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

- ◆ We could do the same for the other three cells; the above table has expected counts

Example of Calculations of Chi-Square 2x2 Contingency Table

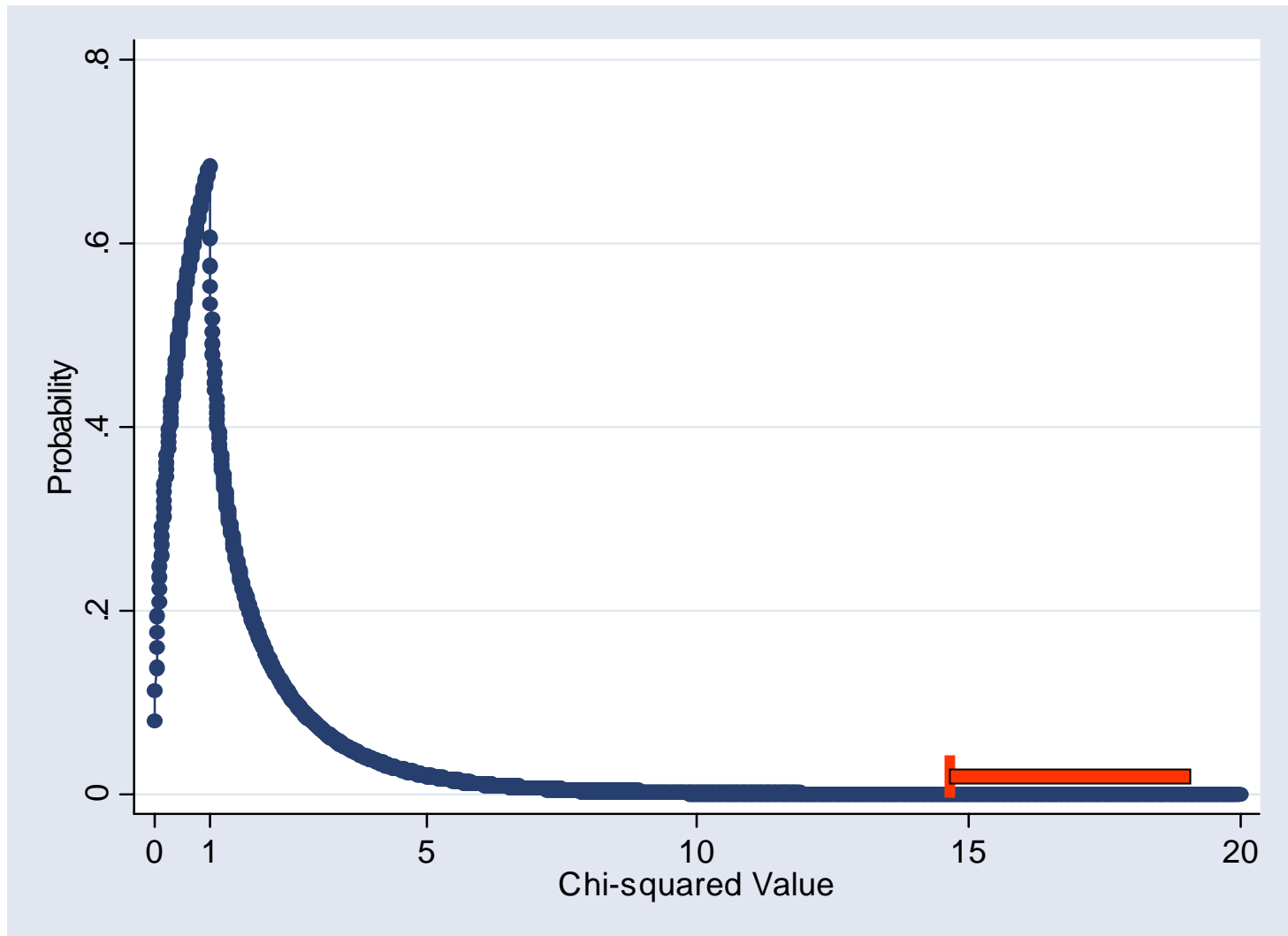
- ◆ Test statistic

$$\chi^2 = \sum_{4 \text{ cells}} \frac{(O - E)^2}{E}$$

- ◆ In our table

$$\chi^2 = 15.6$$

Sampling Distribution: Chi-Square with One Degree of Freedom



Using Stata to Compute Chi-Squared

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
<div style="border: 2px solid red; padding: 5px; display: inline-block;"> chi2(1) = 15.59 Pr>chi2 = 0.0001 </div>				

Summary: Large Sample Procedures for Comparing Proportions Between Two Independent Populations

- ◆ To create a 95% confidence interval for the difference in two proportions

$$\hat{p}_1 - \hat{p}_2 \pm 2SE (\hat{p}_1 - \hat{p}_2)$$

Summary: Large Sample Procedures for Comparing Proportions Between Two Independent Populations

- ◆ To get a p-value for testing:
 - $H_0: P_1 = P_2$ vs.
 - $H_a: P_1 \neq P_2$
- ◆ Two sample z-test or Chi-Squared Test (give same p-value)

Extendability of Chi-Squared

- ◆ Chi-squared test can be extended to test for differences in proportions across more than two independent populations
 - Proportion analogue to ANOVA



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section C

Fisher's Exact Test

Hypothesis Testing Problem

- ◆ $H_0: P_1 = P_2$

- ◆ $H_a: P_1 \neq P_2$

- Where

P_1 = Proportion infected on AZT

P_2 = Proportion infected on placebo

Hypothesis Testing Problem

- ◆ $H_0: P_1 - P_2 = 0$

- ◆ $H_a: P_1 - P_2 \neq 0$

- Where:

- P_1 = Proportion infected on AZT

- P_2 = Proportion infected on placebo

Hypothesis Testing Problem

- ◆ $H_0: P_1 = P_2$
- ◆ $H_a: P_1 \neq P_2$
 - In the context of the 2x2 table, this is testing whether there is a relationship between the rows (HIV status) and columns (treatment type)

Statistical Test Procedures

◆ Fisher's Exact Test

- Calculations are difficult
- Always appropriate to test equality of two proportions
- Computers are usually used
- Exact p-value (no approximations): no minimum sample size requirements

Statistical Test Procedures

- ◆ **(Pearson's) Chi-Square Test (χ^2)/
Two-sample z-test**
- Both based on central limit theorem
“kicking in”
- Both results are “approximate,” but are excellent approximations if sample sizes are large
- These do not perform so well in smaller samples

Fisher's Exact Test

◆ Rationale

- Suppose H_0 is true: AZT is not effective
- Imagine putting 53 red balls (the infected) and 310 blue balls (non-infected) in a jar
- Shake it up

Fisher's Exact Test

- ◆ Now choose 180 balls (that's AZT group)
 - The remaining balls are the placebo group
- ◆ We calculate the probability you get 13 or fewer red balls among the 180
 - That is the one-sided p-value

Fisher's Exact Test

- ◆ The two-sided p-value is just about (but not exactly) twice the one-sided
- ◆ P-value
 - It accounts for the probability of getting either extremely few red balls or a lot of red balls in the AZT group

Fisher's Exact Test

- ◆ The p-value is the probability of obtaining a result as or more extreme (more imbalance) than you did by chance alone

How to Use STATA to Calculate Fisher's Exact Test

◆ Command syntax

– `tabi a b \ c d`

		Exposure		
		Yes	No	
Outcome	Yes	a	b	a+b
	No	c	d	c+d
		a+c	b+d	

How to Use STATA to Calculate Fisher's Exact Test

◆ With HIV example

– `tabi 13 40 \ 167 143`

		Drug Group		
		Placebo	AZT	
HIV Transmission	Yes	13	40	53
	No	167	143	310
		180	183	363

How to Use STATA to Calculate Fisher's Exact Test

```
tabi 13 40 \ 167 143
```

row	col 1	2	Total
1	13	40	53
2	167	143	310
Total	180	183	363

```
          Fisher's exact =          0.000  
1-sided Fisher's exact =          0.000
```

How to Use STATA to Calculate Fisher's Exact Test

```
tabi 13 40 \ 167 143
```

row	col 1	2	Total
1	13	40	53
2	167	143	310
Total	180	183	363

```
Fisher's exact = 0.000  
1-sided Fisher's exact = 0.000
```

- ◆ (p-value not really 0, just $< .001$)

How to Use STATA to Calculate Fisher's Exact Test

- ◆ However, the `tabi` command did not give a confidence interval for the difference in proportions!
- ◆ Can also use `csi` command with "exact" option

How to Use STATA to Calculate Fisher's Exact Test

```
. csi 13 40 167 143, exact
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
	1-sided Fisher's exact P = 0.0001			
	2-sided Fisher's exact P = 0.0001			

How to Use STATA to Calculate Fisher's Exact Test

```
. csi 13 40 167 143, exact
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
	1-sided Fisher's exact P = 0.0001			
	2-sided Fisher's exact P = 0.0001			

How to Use STATA to Calculate Fisher's Exact Test

```
. csi 13 40 167 143, exact
```

	Exposed	Unexposed	Total
Cases	13	40	53
Noncases	167	143	310
Total	180	183	363
Risk	.0722222	.2185792	.1460055
	Point estimate	[95% Conf. Interval]	
Risk difference	-.146357	-.2171766	-.0755374
Risk ratio	.3304167	.1829884	.5966235
Prev. frac. ex.	.6695833	.4033765	.8170116
Prev. frac. pop	.3320248		

1-sided Fisher's exact P = 0.0001
2-sided Fisher's exact P = 0.0001

Small Sample Application

- ◆ Sixty-five pregnant women, all who were classified as having a high risk of pregnancy induced hypertension, were recruited to participate in a study of the effects of aspirin on hypertension
- ◆ The women were randomized to receive either 100 mg of aspirin daily, or a placebo during the third trimester of pregnancy

1. Schiff, E. et al; The use of aspirin to prevent pregnancy-induced hypertension and lower the ratio of thromboxane A2 to prostacyclin in relatively high risk pregnancies, New England Journal of Medicine 321;6

Small Sample Application

◆ Results

		Drug Group		
		Aspirin	Placebo	
Hypertension	Yes	4	11	15
	No	30	20	50
		34	31	65

Sample Proportions

$$\hat{p}_{\text{aspirin}} = \frac{4}{34} = .12$$

$$\hat{p}_{\text{placebo}} = \frac{11}{31} = .35$$

Smaller Sample

- ◆ In this example:

$$n_{\text{aspirin}} * \hat{p}_{\text{aspirin}} * (1 - \hat{p}_{\text{aspirin}}) = 34 * .12 * .88 = 3.6$$

$$n_{\text{placebo}} * \hat{p}_{\text{placebo}} * (1 - \hat{p}_{\text{placebo}}) = 31 * .35 * .65 = 7.1$$

Fisher's Exact Test

```
. csi 4 11 30 20, exact
```

	Exposed	Unexposed	Total	
Cases	4	11	15	
Noncases	30	20	50	
Total	34	31	65	
Risk	.1176471	.3548387	.2307692	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.2371917		-.4374335	-.0369498
Risk ratio	.3315508		.1176925	.9340096
Prev. frac. ex.	.6684492		.0659904	.8823075
Prev. frac. pop	.3496503			

```
1-sided Fisher's exact P = 0.0236
2-sided Fisher's exact P = 0.0378
```

Chi-Squared Test

```
. csi 4 11 30 20
```

	Exposed	Unexposed	Total	
Cases	4	11	15	
Noncases	30	20	50	
Total	34	31	65	
Risk	.1176471	.3548387	.2307692	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.2371917		-.4374335	-.0369498
Risk ratio	.3315508		.1176925	.9340096
Prev. frac. ex.	.6684492		.0659904	.8823075
Prev. frac. pop	.3496503			
	chi2(1) =		5.14	Pr>chi2 = 0.0234

95% Confidence Interval (not quite correct)

```
. csi 4 11 30 20
```

	Exposed	Unexposed	Total
Cases	4	11	15
Noncases	30	20	50
Total	34	31	65
Risk	.1176471	.3548387	.2307692
	Point estimate	[95% Conf. Interval]	
Risk difference	-.2371917	-.4374335	-.0369498
Risk ratio	.3315508	.1176925	.9340096
Prev. frac. ex.	.6684492	.0659904	.8823075
Prev. frac. pop	.3496503		
chi2(1) =		5.14	Pr>chi2 = 0.0234

Summary: Large Sample Procedures for Comparing Proportions between Two Independent Populations

- ◆ To create a 95% confidence interval for the difference in two proportions

$$\hat{p}_1 - \hat{p}_2 \pm 2SE(\hat{p}_1 - \hat{p}_2)$$

Summary: Large Sample Procedures for Comparing Proportions Between Two Independent Populations

- ◆ To get a p-value for testing:
 - $H_0: P_1 = P_2$ vs.
 - $H_a: P_1 \neq P_2$
- ◆ Two Sample z-test or Chi-Squared Test (give same p-value)
- ◆ Fisher's exact

Small Sample Procedures for Comparing Proportions Between Two Independent Populations

- ◆ To create a 95% confidence interval for the difference in two proportions, can use this result as a guideline:

$$\hat{p}_1 - \hat{p}_2 \pm 2SE (\hat{p}_1 - \hat{p}_2)$$

- ◆ Not quite correct but will give you a good sense of width/range of CI

Summary: Large Sample Procedures for Comparing Proportions Between Two Independent Populations

- ◆ To get a p-value for testing:
 - $H_0: P_1 = P_2$ vs.
 - $H_a: P_1 \neq P_2$

- ◆ Fisher's exact test



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section C

Practice Problems

Practice Problems

- ◆ Researchers are interested in studying the relationship between salt in a diet and high blood pressure in men in their early 50s
- ◆ A random sample is taken of 58 men between the ages of 50–54
- ◆ Each subject keeps a food diary for a one-month period, and is evaluated for high blood pressure

Practice Problems

- ◆ Seven of the 58 men have high salt diets
 - Of these seven men, one had high blood pressure at the time of the study
- ◆ 51 of the 58 men have low salt diets
 - Of these 58 men, 28 have high blood pressure at the time of the study

Practice Problems

1. Construct a 2x2 contingency table which summarizes the study data
2. Estimate a 95% confidence interval for the difference in the proportion of men with high blood pressure in the two diet groups (use the large sample approach, even if not appropriate)

Practice Problems

3. Perform (using computer) both a Fisher's exact test and a chi-squared test
 - If you were using a strict .05 level cutoff for statistical significance, how would your conclusions from each of the two tests compare?



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section C

Practice Problem Solutions

Practice Problems

- ◆ Researchers are interested in studying the relationship between salt in a diet and high blood pressure in men in their early 50s
- ◆ A random sample is taken of 58 men between the ages of 50–54
- ◆ Each subject keeps a food diary for a one-month period and is evaluated for high blood pressure

Practice Problems

- ◆ Seven of the 58 men have high salt diets
 - Of these seven men, one had high blood pressure at the time of the study
- ◆ 51 of the 58 men have low salt diets
 - Of these 58 men, 28 have high blood pressure at the time of the study

Practice Problems

1. Construct a 2x2 contingency table which summarizes the study data

		High Salt Diet?		
		Yes	No	
High Blood Pressure?	Yes	1	28	29
	No	6	23	29
		7	51	

Practice Problems

2. Estimate a 95% confidence interval for the difference in the proportion of men with high blood pressure in the two diet groups (use the large sample approach, even if not appropriate)

Practice Problems

◆ 95% confidence interval

```
. csi 1 28 6 23
```

	Exposed	Unexposed	Total	
Cases	1	28	29	
Noncases	6	23	29	
Total	7	51	58	
Risk	.1428571	.5490196	.5	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.4061625		-.6991594	-.1131655
Risk ratio	.2602041		.0416759	1.624588
Prev. frac. ex.	.7397959		-.6245882	.9583241
Prev. frac. pop	.0892857			
	chi2(1) =		4.06	Pr>chi2 = 0.0439

Practice Problems

3. Perform (using computer) both a Fisher's exact test and a chi-squared test
 - If you were using a strict .05 level cutoff for statistical significances, how would your conclusions from each of the two tests compare?

Practice Problems

◆ Chi-Squared

```
. csi 1 28 6 23
```

	Exposed	Unexposed	Total	
Cases	1	28	29	
Noncases	6	23	29	
Total	7	51	58	
Risk	.1428571	.5490196	.5	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.4061625		-.6991594	-.1131655
Risk ratio	.2602041		.0416759	1.624588
Prev. frac. ex.	.7397959		-.6245882	.9583241
Prev. frac. pop	.0892857			
	chi2(1) =	4.06	Pr>chi2 = 0.0439	

Practice Problems

◆ Fisher's Exact

```
. csi 1 28 6 23, exact
```

	Exposed	Unexposed	Total	
Cases	1	28	29	
Noncases	6	23	29	
Total	7	51	58	
Risk	.1428571	.5490196	.5	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.4061625		-.6991594	-.1131655
Risk ratio	.2602041		.0416759	1.624588
Prev. frac. ex.	.7397959		-.6245882	.9583241
Prev. frac. pop	.0892857			

1-sided Fisher's exact P = 0.0510
2-sided Fisher's exact P = 0.1020



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section D

***Measures of Association:
Risk Difference, Relative Risk and
the Odds Ratio***

Risk Difference

- ◆ Risk difference (attributable risk)—difference in proportions
 - Sample (estimated) risk difference

$$\hat{p}_1 - \hat{p}_2$$

Risk Difference

- ◆ The difference in risk of HIV for children born to HIV+ mothers taking AZT relative to HIV+ mothers taking placebo

$$\hat{p}_1 - \hat{p}_2 = .07 - .22 = -.15$$

Risk Difference

- ◆ Interpretation
 - If AZT was given to 1,000 HIV infected pregnant women, this would reduce the number of HIV positive infants by 150 relative the number of HIV positive infants born to 1,000 women not treated with AZT

Risk Difference

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total
Cases	13	40	53
Noncases	167	143	310
Total	180	183	363
Risk	.0722222	.2185792	.1460055
	Point estimate	[95% Conf. Interval]	
Risk difference	-.146357	-.2171766	-.0755374
Risk ratio	.3304167	.1829884	.5966235
Prev. frac. ex.	.6695833	.4033765	.8170116
Prev. frac. pop	.3320248		
chi2(1) = 15.59 Pr>chi2 = 0.0001			

Risk Difference

- ◆ Interpretation

- Study results suggest that the reduction in HIV positive births from 1,000 HIV positive pregnant women treated with AZT could range from 75 to 220 fewer than the number occurring if the 1,000 women were not treated

Measures of Association

- ◆ Relative risk (risk ratio)—ratio of proportions
 - Sample (estimated) relative risk

$$\frac{\hat{p}_1}{\hat{p}_2}$$

AZT/Mother-Infant Transmission Example

- ◆ The risk of HIV with AZT relative to placebo
 - Relative risk = $\frac{\hat{p}_1}{\hat{p}_2} = \frac{.07}{.22} = .32$
 - The risk of HIV transmission with AZT is about 1/3 the risk of transmission with placebo

Relative Risk

- ◆ Interpretation
 - An HIV positive pregnant woman could reduce her personal risk of giving birth to an HIV positive child by nearly 70% if she takes AZT during her pregnancy

Relative Risk

```
. csi 13 40 167 143
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
	chi2(1) =		15.59	Pr>chi2 = 0.0001

Relative Risk

- ◆ Interpretation
 - Study results suggest that this reduction in risk could be as small as 40% and as large as 82%

Note about Relative Risk

- ◆ The RR could be computed in the other direction as well
- ◆ (ie: RR of transmission for placebo compared to AZT group)

$$= \frac{\hat{p}_2}{\hat{p}_1} = \frac{.22}{.07} = 3.1$$

Relative Risk

- ◆ Interpretation
 - An HIV positive pregnant woman increases her personal risk of giving birth to an HIV positive child by slightly more than 3 times if she does not take AZT during her pregnancy

Relative Risk

```
. csi 40 13 143 167
```

	Exposed	Unexposed	Total	
Cases	40	13	53	
Noncases	143	167	310	
Total	183	180	363	
Risk	.2185792	.0722222	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	.146357		.0755374	.2171766
Risk ratio	3.026482		1.676099	5.464827
Attr. frac. ex.	.6695833		.4033765	.8170116
Attr. frac. pop	.5053459			
	chi2(1) =		15.59	Pr>chi2 = 0.0001

Relative Risk

- ◆ Interpretation
 - Study results suggest that this increase in risk could be as small as 1.7 times and as large as 5.5 times

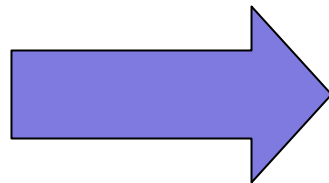
Relative Risk

- ◆ Direction of comparison is somewhat arbitrary
- ◆ Does not affect results as long as interpreted correctly!!

Hypothesis of Equal Proportions Expressed by RR

$$H_0: P_1 - P_2 = 0$$

$$H_0: \frac{P_1}{P_2} = 1$$



$$H_a: P_1 - P_2 \neq 0$$

$$H_a: \frac{P_1}{P_2} \neq 1$$

The Risk Difference vs. Relative Risk

- ◆ The **risk difference** (attributable) risk provides a measure of the public health impact of an exposure (assuming causality)
- ◆ The **relative risk** provides a measure of the magnitude of the disease-exposure association for an individual

The Risk Difference vs. Relative Risk

- ◆ AZT example—in this study 22% of the untreated mothers gave birth to children with HIV
 - Relative Risk : .32
 - Risk Difference : -15%

The Risk Difference vs. Relative Risk

- ◆ Suppose that only 2% of the children born to untreated HIV positive women became HIV positive
- ◆ Suppose the percentage in AZT treated women is .6%
 - Relative Risk : .32
 - Risk Difference : -1.4 %

The Risk Difference vs. Relative Risk

- ◆ Suppose that 90% of the children born to untreated HIV positive women became HIV positive
- ◆ Suppose this percentage was 75% for mothers taking AZT treatment during pregnancy
 - Risk Difference : 15%
 - Relative Risk : .83

The Odds Ratio

- ◆ Like the relative risk, the odds ratio provides a measure of association in a ratio (as opposed to difference)

What is an Odds?

- ◆ Odds is a function of risk (prevalence).
- ◆ Odds is the ratio of risk of having an outcome to risk of not having an outcome.
 - If p represents risk of an outcome, then the odds is given by:

$$Odds = \frac{p}{1 - p}$$

Example

- ◆ In the AZT example, the estimate risk of giving birth to an HIV infected child among mothers treated with AZT was

$$\hat{p}_1 = .07.$$

- ◆ The corresponding odds estimate is

$$Odds = \frac{\hat{p}_1}{1 - \hat{p}_1} = \frac{.07}{1 - .07} = \frac{.07}{.93} \approx .08$$

Example

- ◆ In the AZT example, the estimate risk of giving birth to an HIV infected child among mothers not treated (on the placebo) was $\hat{p}_2 = .22$.
- ◆ The corresponding odds estimate is

$$Odds = \frac{\hat{p}_2}{1 - \hat{p}_2} = \frac{.22}{1 - .22} = \frac{.22}{.78} \approx .28$$

AZT/Mother-Infant Transmission Example

- ◆ The estimated odds ratio of an HIV birth with AZT relative to placebo

- Odds Ratio =
$$\hat{OR} = \frac{\hat{p}_1 / (1 - \hat{p}_1)}{\hat{p}_2 / (1 - \hat{p}_2)} = \frac{.08}{.28} = .29$$

- The odds of HIV transmission with AZT is .29 (about 1/3) the odds of transmission with placebo

Estimating Odds Ratio With Stata

```
. csi 13 40 167 143, or
```

	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
Odds ratio	.2782934		.1445784	.5363045 (Cornfield)

chi2(1) = 15.59 Pr>chi2 = 0.0001

Odds Ratio

◆ Interpretation

- AZT is associated with an estimated 71% (estimated OR = .29) reduction in odds of giving birth to an HIV infected child among HIV infected pregnant women
- Study results suggest that this reduction in odds could be as small as 46% and as large as 86% (95% CI on odds ratio, .14-.54)

Odds Ratio

- ◆ What about a p-value?
- ◆ What value of odds ratio indicates no difference in risk?
 - If $p_1 = p_2$, then

$$OR = \frac{p_1 / (1 - p_1)}{p_2 / (1 - p_2)} = 1$$

Odds Ratio

- ◆ Hence we need to test

$$H_0: OR=1$$

vs.

$$H_a: OR \neq 1$$

But, from previous slide $OR = 1$ only if $p_1 = p_2$: so same test from before applies!

Hypothesis Testing with Odds Ratio

. csi 13 40 167 143, or

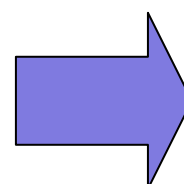
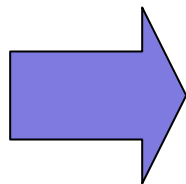
	Exposed	Unexposed	Total	
Cases	13	40	53	
Noncases	167	143	310	
Total	180	183	363	
Risk	.0722222	.2185792	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	-.146357		-.2171766	-.0755374
Risk ratio	.3304167		.1829884	.5966235
Prev. frac. ex.	.6695833		.4033765	.8170116
Prev. frac. pop	.3320248			
Odds ratio	.2782934		.1445784	.5363045 (Cornfield)
		chi2(1) =	15.59	Pr>chi2 = 0.0001

Hypothesis of Equal Proportions Expressed by RR or OR

$$H_0: P_1 - P_2 = 0$$

$$H_0: RR=1$$

$$H_0: OR=1$$



$$H_a: P_1 - P_2 \neq 0$$

$$H_a: RR \neq 1$$

$$H_a: OR \neq 1$$

How Does OR Compare to RR?

- ◆ Always will estimate same direction of association

$$\hat{OR} < 1 \Leftrightarrow \hat{RR} < 1$$

$$\hat{OR} > 1 \Leftrightarrow \hat{RR} > 1$$

$$\hat{OR} = 1 \Leftrightarrow \hat{RR} = 1$$

How Does OR Compare to RR?

- ◆ If CI for OR does not include 1, CI for RR will not include 1
- ◆ If CI for OR includes 1, CI for RR will include 1

$$OR < 1 \Leftrightarrow RR < 1$$

$$OR > 1 \Leftrightarrow RR > 1$$

$$OR = 1 \Leftrightarrow RR = 1$$

How Does OR Compare to RR?

- ◆ The lower the risk in both groups being compared, the more similar the *OR* and *RR* will be in magnitude

The Odds Ratio vs. Relative Risk

- ◆ AZT example—in this study 7% of AZT treated mothers and 22% of the untreated mothers gave birth to children with HIV
 - Relative Risk : .32
 - Odds Ratio : .28

The Risk Difference vs. Relative Risk

- ◆ Suppose that only 2% of the children born to untreated HIV positive women became HIV positive
- ◆ Suppose the percentage in AZT treated women is .6%
 - Relative Risk : .32
 - Odds Ratio : .30

The Risk Difference vs. Relative Risk

- ◆ Suppose that 90% of the children born to untreated HIV positive women became HIV positive
- ◆ Suppose this percentage was 75% for mothers taking AZT treatment during pregnancy
 - Relative Risk : .83
 - Odds Ratio : .33

Why Even Bother With Odds Ratio?

- ◆ It is less “intuitively interpretable” than relative risk
- ◆ However, we will see in SR2 that with certain types of non-randomized study designs we can not get a valid estimate of *RR* but can still get a valid estimate of *OR*



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section D

Practice Problems

Practice Problems

1. Define relative risk for an outcome when comparing two groups. Why is the p-value for testing the equality of the proportion of subjects with the outcome across the two groups equivalent to the p-value for testing:

$$\begin{array}{l} H_0: RR = 1 \\ \text{vs. } H_a: RR \neq 1, \end{array}$$

Where RR = relative risk?

Practice Problems

2. What can one conclude about the 95% confidence interval for a relative risk if the p-value for the test described in question one is less than .05?

Practice Problems

3. In the maternal HIV transmission example, the relative risk of transmission for mothers on AZT as compared with mothers on placebo is about .30. This estimate was statistically and significantly different than one. How can this estimate be interpreted scientifically? What would the estimate be for the relative risk of transmission for mothers on placebo as compared to mothers on AZT?

Practice Problems

4. What is the relationship between a relative risk and an odds ratio? Why do we even bother with odds ratios?

Practice Problems

5. In the maternal/child HIV transmission example, the estimated odds ratio of HIV transmission for mothers on AZT compared to mothers in the placebo group is .28, with 95% CI of .14 – .54. Suppose we wanted to estimate the odds ratio in the other direction, i.e.: odds for mothers on placebo to mothers on AZT? Based on the given information can you provide an odds ratio estimate and 95% CI for this comparison?



JOHNS HOPKINS
BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Section D

Practice Problem Solutions

Question

1. Define relative risk for an outcome when comparing two groups. Why is the p-value for testing the equality of the proportion of subjects with the outcome across the two groups equivalent to the p-value for testing:

$$H_0: RR = 1$$

$$\text{vs. } H_a: RR \neq 1,$$

Where $RR =$ relative risk?

Answer

- ◆ The relative risk is P_1/P_2 , where P_1 = proportion of subjects in group one with the outcome and P_2 = proportion of subjects in group two with the outcome.
- ◆ This ratio, the relative risk, would be statistically different than one if P_1 is statistically different from P_2 .
- ◆ Therefore, testing the equality of P_1 and P_2 is equivalent to testing $RR = 1$.

Answer

2. What can one conclude about the 95% confidence interval for a relative risk, if the p-value for the test described in question one is less than .05?
 - 95% CI would not include one.

Question

3. In the maternal HIV transmission example, the relative risk of transmission for mothers on AZT as compared with mothers on placebo is about .30. This estimate was statistically and significantly different than one. How can this estimate be interpreted scientifically? What would the estimate be for the relative risk of transmission for mothers on placebo as compared to mothers on AZT?

Answer

- ◆ A relative risk of .30 indicates that in this sample, mothers on AZT have .30 times the risk of transmission that mothers on placebo have (30% of the risk)
- ◆ Because this number is statistically significant (different than one), researchers could conclude that mothers on AZT have less risk of transmitting the virus to their children

Answer

- ◆ If, instead, the relative risk of transmission for mothers on placebo, as compared to mothers on AZT was computed, this estimate would be 3.3, indicating that mother's on placebo have over three times the risk of transmission as compared to mothers on AZT
- ◆ This can be easily computed by taking the reciprocal of .30 ($1/.30 = 3.3$)
- ◆ The p-value for testing the significance of this estimate would be exactly the same as computing the relative risk in the other direction

Question

4. What is the relationship between a relative risk and an odds ratio? Why do we even bother with odds ratios?

Answer

- ◆ The relative risk and odds ratio both provide a measure of association between an outcome and a predictor: the two measures will always concur on the direction and statistical significance of the association, but the estimates and confidence limits of the two may differ.

Answer

- ◆ While odds ratio are less easily interpreted than relative risk, they can be estimated in situations where a valid estimate of the relative risk cannot be obtained. This will be explored further in 612.

Question

5. In the maternal/child HIV transmission example, the estimated odds ratio of HIV transmission for mothers on AZT compared to mothers in the placebo group is .28, with 95% CI of .15 – .54. Suppose we wanted to estimate the odds ratio in the other direction, i.e.: odds for mothers on placebo to mothers on AZT? Based on the given information can you provide an odds ratio estimate and 95% CI for this comparison?

Answer

- ◆ To get the odds ratio estimate, all we need to do is take the reciprocal of the results, $1/.28 \approx 3.6$. In other words, mother's in the placebo have odds of giving birth to an HIV infected child of 3.6 times the odds of mothers taking AZT.

Answer

- ◆ To get the endpoints for the 95% CI, we could take the reciprocal of the endpoints for the OR comparing mothers on AZT to placebo. This would yield a 95% CI for the true odds ratio of 1.9–6.7.

Answer

- ◆ Here's the result using Stata (results slightly different because I rounded)

csi 40 13 143 167, or

	Exposed	Unexposed	Total	
Cases	40	13	53	
Noncases	143	167	310	
Total	183	180	363	
Risk	.2185792	.0722222	.1460055	
	Point estimate		[95% Conf. Interval]	
Risk difference	.146357		.0755374	.2171766
Risk ratio	3.026482		1.676099	5.464827
Attr. frac. ex.	.6695833		.4033765	.8170116
Attr. frac. pop	.5053459			
Odds ratio	3.59333		1.864612	6.916661 (Cornfield)
chi2(1) =		15.59	Pr>chi2 = 0.0001	