

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 2008, The Johns Hopkins University and Sukon Kanchanaraksa. 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

Interaction

Sukon Kanchanaraksa, PhD
Johns Hopkins University

What Is (Biological) Interaction?

- **Interaction** involves two risk factors (and their effect on one disease outcome)
- If the effect of one risk factor is the same within strata defined by the other, then there is NO interaction
- When the effect of one risk factor is different within strata defined by the other, then there is an interaction (biological)

Example of (Biological) Interaction

- Cigarette smoking and radon exposure are two possible risk factors for lung cancer
 - Is there an interaction (biological) between cigarette smoking and radon exposure with regard to lung cancer?
 - If the risk of lung cancer from cigarette smoking is the same among those who were exposed to radon and those who were not exposed to radon, then there is no interaction (biological) between the two risk factors
 - If the risk differs in the two groups, then there is an interaction
- How do we measure or check for the presence/absence of an interaction?

Measures of Interaction

- There are two ways that we measure risk
 1. Ratio of risks
 2. Difference of risks
- (Statistical) interaction can be measured based on the ways that risks are calculated (modeling)
 - When ratio is used, risks are considered to act in a multiplicative way
 - When difference is used, risks are considered to act in an additive way
- The presence of interaction based on measurements is called **statistical interaction**, and inherently it may not reflect the true biological interaction

(Statistical) Interaction or Effect Measure Modification

- (Statistical) interaction occurs when the incidence of disease in the presence of two or more risk factors **differs** from the incidence **expected** to result from their individual effects

Implications of Interaction

- **Synergism** increases disease risk beyond expected; persons with one exposure (smoking) are more susceptible to another exposure (radon)
- **Antagonism** decreases disease risk beyond expected; persons with one exposure (smoking) are less susceptible to another (radon)

Hypothetical Data in an Additive Model

| | | Incidence | |
|----------|---|-----------|---|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | ? |

Subtracting Baseline Risk from Each Category

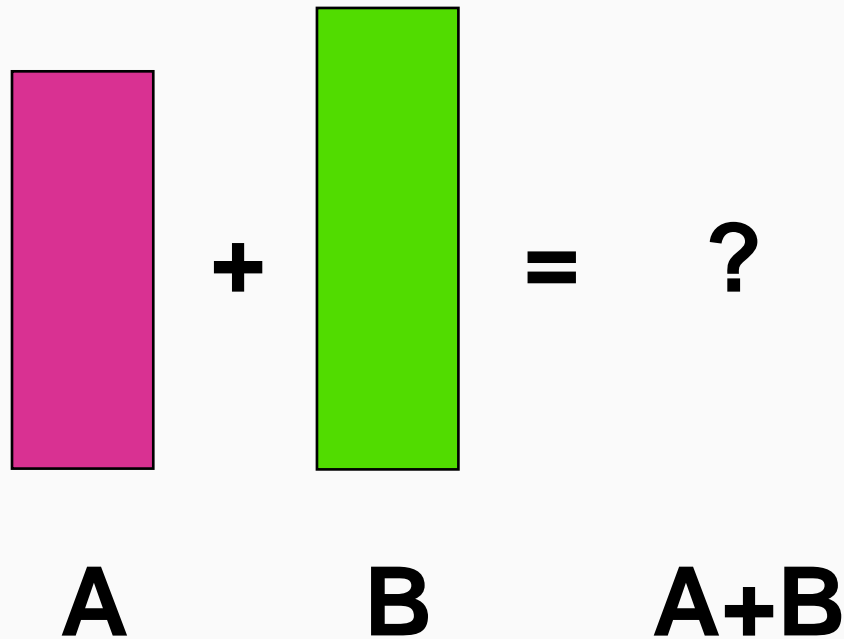
| Incidence | | Factor A | |
|-----------|---|-----------|----------|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | ? |

Risk Difference
(Attributable
Risk)

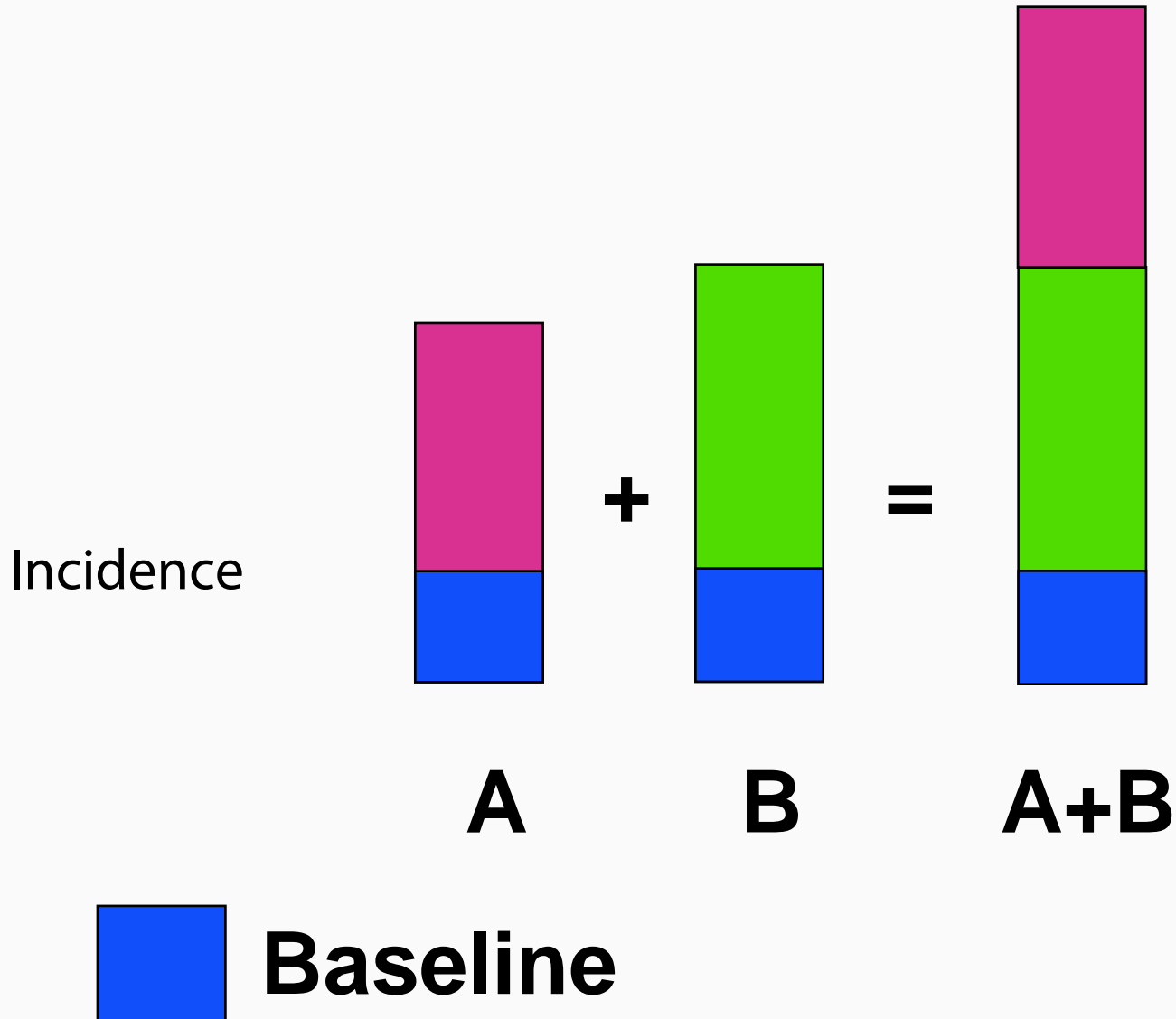
| | | Factor A | |
|----------|---|-----------|----------|
| | | - | + |
| Factor B | - | 0 | 6 |
| | + | 12 | ? |

What Is the Expected Incidence of A+B in an Additive Model?

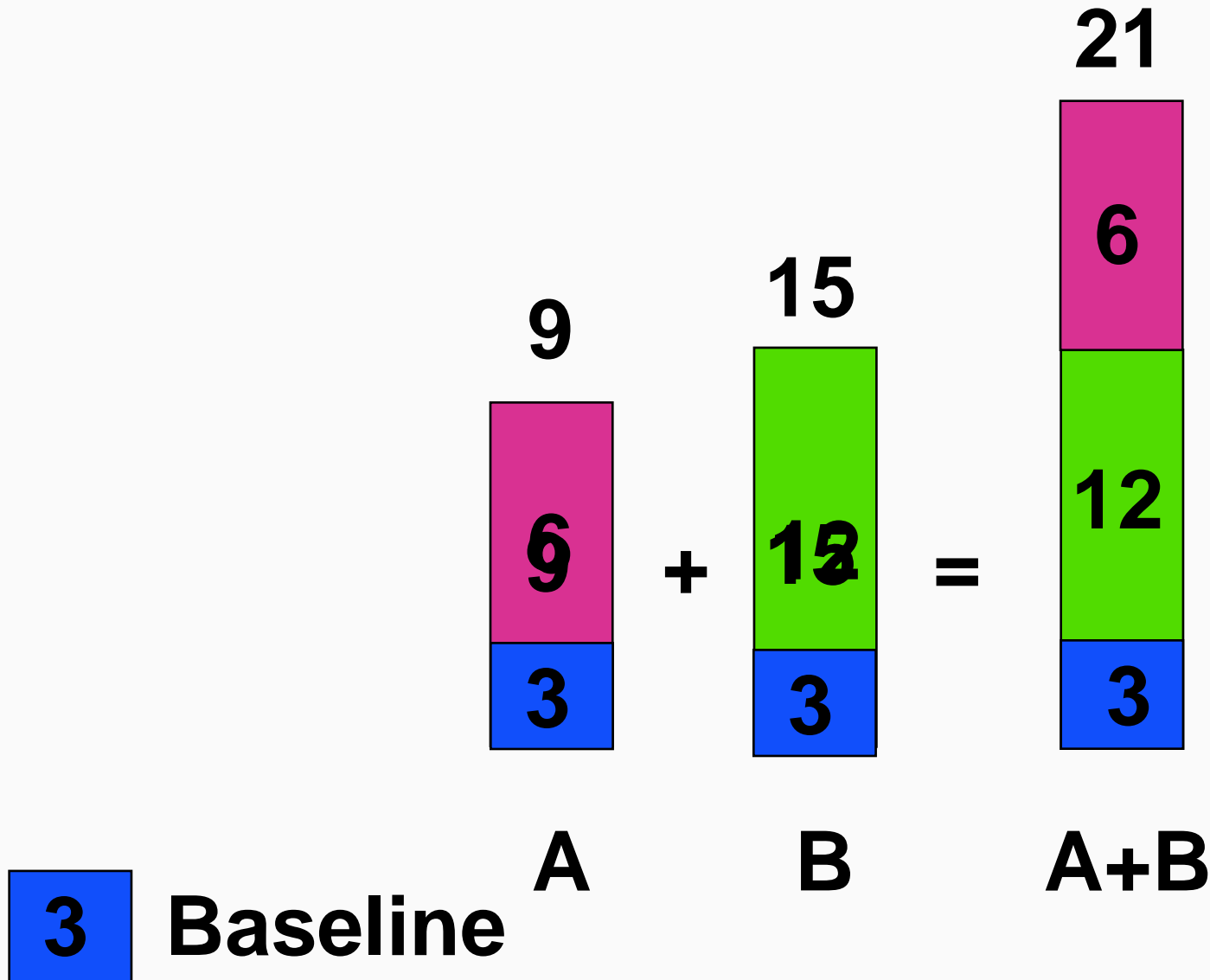
Incidence



What Is the Expected Incidence of A+B in an Additive Model?



What Is the Expected Incidence of A+B in an Additive Model?



Expected Incidence in an Additive Model

Expected incidence of A and B = Attributable risk of A alone
+ attributable risk of B alone
+ baseline

= Incidence of A alone
+ incidence of B alone
– baseline

Hypothetical Data in an Additive Model

| | | Incidence | |
|----------|---|-----------|----|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | 21 |

- If there is no interaction between Factors A and B, the incidence of having A and B is expected to be 21
- If the observed incidence in the group having A and B differs from 21, then there is an interaction (statistical) under the additive model

Test for the Presence/Absence of Interaction

| Incidence | | Factor A | |
|-----------|---|----------------------------|----------------------------|
| | | - | + |
| Factor B | - | I_{00} | I_{10} |
| | + | I_{01} | I_{11} |

- No interaction: **$I_{11} - I_{01} = I_{10} - I_{00}$**
- Synergistic interaction: **$I_{11} - I_{01} > I_{10} - I_{00}$**
- Antagonistic interaction: **$I_{11} - I_{01} < I_{10} - I_{00}$**

Smoking and Radon Exposure In Uranium Miners

| Smoking | Radon | Lung Cancer Incidence |
|---------|-------|-----------------------|
| No | No | 1/1000 |
| No | Yes | 5/1000 |
| Yes | No | 10/1000 |
| Yes | Yes | 50/1000 |

Smoking and Radon Exposure in Uranium Miners

| Incidence | | Smoking | |
|-----------|---|----------|-----------|
| | | - | + |
| Radon | - | 1 | 10 |
| | + | 5 | 50 |

- If there is no interaction between smoking and radon exposure, the incidence of having both is expected to be:
 $(5-1)+(10-1) + 1 = 14$ (or, $5 + 10 - 1 = 14$)
- But observed incidence is 50/1000; therefore, there is a synergistic interaction in the additive model

Using the Test Equations

| Incidence | | Smoking | |
|-----------|---|----------|-----------|
| | | - | + |
| Radon | - | 1 | 10 |
| | + | 5 | 50 |

$$I_{11} - I_{01} > I_{10} - I_{00}$$

$$50 - 5 > 10 - 1$$

Suggests synergistic interaction

Same Hypothetical Data in a Multiplicative Model

| | | Incidence | |
|----------|---|-----------|---|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | ? |

Calculating Ratio of Risk or Relative Risk in a Multiplicative Model

| Incidence | | Factor A | |
|-----------|---|-----------|----------|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | ? |

Dividing by baseline incidence of 3

| Relative Risk | | Factor A | |
|---------------|---|------------|------------|
| | | - | + |
| Factor B | - | 1.0 | 3.0 |
| | + | 5.0 | ? |

Expected Relative Risk for A+B in a Multiplicative Model

Expected RR for A+B = RR for A only x RR for B only

The Expected RR for Having Factors A and B in a Multiplicative Model

| Relative Risk | | Factor A | |
|---------------|---|----------|-------------|
| | | - | + |
| Factor B | - | 1.0 | 3.0 |
| | + | 5.0 | 15.0 |

The expected RR for having both A and B = $3.0 \times 5.0 = \mathbf{15.0}$

The incidence of having both A and B = baseline I x RR
= $3 \times 15.0 = 45$

Types of Interaction

- If the observed risk (or incidence) for having both A and B is equal to the expected, then there is **no interaction**
- If the observed risk (or incidence) for having both A and B is greater than the expected risk (or incidence), then there is a **synergistic interaction**
- If the observed risk (or incidence) for having both A and B is less than the expected risk (or incidence), then there is an **antagonistic interaction**

Test for the Presence/Absence of Interaction in a Multiplicative Model

| Relative Risk | | Factor A | |
|---------------|---|------------------------|------------------------|
| | | - | + |
| Factor B | - | RR₀₀ | RR₁₀ |
| | + | RR₀₁ | RR₁₁ |

No interaction : $RR_{11} = RR_{10} \times RR_{01}$

Synergistic Interaction : $RR_{11} > RR_{10} \times RR_{01}$

Antagonistic interaction : $RR_{11} < RR_{10} \times RR_{01}$

Example: Relative Risk of Oral Cancer from Smoking and Alcohol Consumption

| Relative Risk | | Smoking | |
|---------------------|-----|---------|------|
| | | No | Yes |
| Alcohol Consumption | No | 1.00 | 1.53 |
| | Yes | 1.23 | 5.71 |

Example: Relative Risk of Oral Cancer From Smoking and Alcohol Consumption

| Relative Risk | | Smoking | |
|---------------|-----|---------|------|
| | | No | Yes |
| Alcohol | No | 1.00 | 1.53 |
| | Yes | 1.23 | 5.71 |

1. The expected RR for smoking and drinking alcohol
 $= 1.53 \times 1.23 = 1.88$
2. Using the test equation to check for interaction
 $5.71 > 1.53 \times 1.23$

Suggest synergistic interaction in the multiplicative model

Use of Relative Risk in an Additive Model

| 1. Incidence | | Factor A | |
|--------------|---|-----------|-----------|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | 21 |

| 2. Attributable Risk | | Factor A | |
|----------------------|---|-----------|-----------|
| | | - | + |
| Factor B | - | 0 | 6 |
| | + | 12 | 18 |

| 3. Relative Risk | | Factor A | |
|------------------|---|------------|------------|
| | | - | + |
| Factor B | - | 1.0 | 3.0 |
| | + | 5.0 | 7.0 |

Use of Relative Risk in an Additive Model

| 1. Incidence | | Factor A | |
|--------------|---|-----------|-----------|
| | | - | + |
| Factor B | - | 3 | 9 |
| | + | 15 | 21 |

| 2. Attributable Risk | | Factor A | |
|----------------------|---|-----------|-----------|
| | | - | + |
| Factor B | - | 0 | 6 |
| | + | 12 | 18 |

| 3. Relative Risk | | Factor A | |
|------------------|---|------------|------------|
| | | - | + |
| Factor B | - | 1.0 | 3.0 |
| | + | 5.0 | 7.0 |

No interaction :

$$(1) \quad I_{11} - I_{01} = I_{10} - I_{00}$$

No interaction :

$$(2) \quad RR_{11} - RR_{01} = RR_{10} - RR_{00}$$

$$(3) \quad RR_{11} - RR_{01} = RR_{10} - 1$$

$$(4) \quad RR_{11} = RR_{01} + RR_{10} - 1$$

Example of Interaction

- Effect of aflatoxin in chronic hepatitis B patient on the development of liver cancer
 - RR of liver cancer from hepatitis B infection alone was 7.3
 - RR of liver cancer from aflatoxin exposure alone was 3.4
 - RR of liver cancer from both was 59.4

Statistical Interaction versus Biological Interaction

- Is the presence of a biological interaction between two risk factors based on the expectation that the risk factors should interact following an additive or a multiplicative model? Or, should it be based on a special law of biology that is more complex than the measurement tools (modeling) available?
- The answer will likely require a better understanding of the underlying biological mechanisms of disease causation and the causal (or risk) factors
- Since several factors play a role in disease causation, it is important to understand the concept of interaction—especially in individuals with multiple risk factors