Homework 5 Solutions

1)

a) Here is the stata output

The interpretation of the odds ratio for tob is that 1.0413 is the odds of oesophageal cancer associated with a one gram/day increase in tobacco consumption, after adjusting for age and alcohol consumption. The OR for alc indicates that the odds of oesophageal cancer increases by a factor of 1.0263 for each one gram/day increase in alcohol consumption, after adjusting for age and tobacco use.

b) Stata output for adding TOB²:

The Wald test for TOB² has p-value equal to .21 suggesting that a quadratic term is not necessary for tobacco.

Stata output for adding ALC²:

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The Wald test for ALC² has p-value equal to .55 suggesting that a quadratic term is not necessary for alcohol.

c) Since both individuals are 60 years old, I can ignore the age term in the model in calculating the OR (a reasonable estimate of the RR). After refitting the model in (a) (to make it the current model) I can do

Given that oesophageal cancer risk is rare, I estimate that the *risk* of oesophageal cancer for the drunken smoker is 14.6 times the risk of the clean-livin' teetotaler.

2)

An equivalent null hypothesis in terms of odds ratios is

Ho: $1 = OR_2 = OR_3 = OR_4$ (i.e., take Ho: odds₁=odds₂=odds₃=odds₄ and divide by odds₁ to get Ho as OR's.)

where $OR_i = p_i/(1-p_i)/[p_1/(1-p_1)]$ and $p_i = Pr(disease \mid alcohol level i)$. Each odds is compared to the lowest alcohol group. You could, of course, choose any of the alcohol groups as the reference category and get an equivalent null hypothesis.

The stata output is

. tabodds y alc [freq=count]

alc	cases	controls	odds	[95% Conf.	Interval]
<40g/day	29	386	0.07513	0.05151	0.10957
40-79g/~y	75	280	0.26786	0.20760	0.34560
80-119g~y	51	87	0.58621	0.41489	0.82826
120+g/day	45	22	2.04545	1.22843	3.40587

Test of homogeneity (equal odds): chi2(3) = 158.79 Pr>chi2 = 0.0000

Score test for trend of odds: chi2(1) = 152.97Pr>chi2 = 0.0000

We conclude there is a highly significant (p < .001) trend in the odds of disease with level of alcohol exposure.

b) The stata output for a logistic regression is

. logit y alc [freq=count]

Number of obs = 975 LR chi2(1) = 144.64 Prob > chi2 = 0.0000 Pseudo R2 = 0.1462 Logit estimates Log likelihood = -422.4246y | Coef. Std. Err. z P>|z| [95% Conf. Interval]

alc | 1.046772 .0935048 11.19 0.000 .8635064 1.230038 _cons | -3.530124 .2279715 -15.48 0.000 -3.976939 -3.083308

The test of Ho: $\beta_1 = 0$ is rejected with p < .001. We estimate that the log odds of disease increases by 1.05 (95% CI 0.86 - 1.23) for each categorical increase of alcohol consumption.

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c) Here's the stata output

Point estimates and confidence intervals for each level of alcohol use are given. For instance, the coefficient for $_$ Ialc $_$ 3 is 2.05 (95% CI 1.54 - 2.57) indicating that the logodds for disease associated with 80 - 119 gms/day alcohol consumption is 2.05 greater than the logodds for disease associated with 0 - 39 gms/day alcohol consumption.

d) Here is the relevant stata output

- . generate alc3=0
- . replace alc3=1 if alc==3
- . generate alc4=0
- . replace alc4=1 if alc==4
- . xi: logit y alc alc3 alc4 [freq=count]

Logit estimate	es			LR ch	er of obs ni2(3) > chi2	= = =	975 146.50 0.0000
Log likelihood	d = -421.49545			Pseud	lo R2	=	0.1481
У	Coef.	Std. Err.	z	P> z	[95% (Conf.	Interval]
alc alc3 alc4 _cons	1.27124 488021 5095586 -3.859782	.232332 .3685031 .6067233 .406446	5.47 -1.32 -0.84 -9.50	0.000 0.185 0.401 0.000	.8158 -1.210 -1.698 -4.656	274 714	1.726602 .2342318 .6795972 -3.063162

			Predicted probabilities			
	likelihood	π(ALC=1)	π(ALC=2)	π(ALC=3)	π(ALC=4)	
Model (c)	-421.495	.0699	.2112	.3695	.6716	
Model (d)	-421.495	.0699	.2112	.3695	.6716	

I conclude that models (c) and (d) are equivalent.

Since it is clear that the model

$$logit[\pi(X)] = \beta_0 + \beta_1 ALC$$

is nested within the model

$$logit[\pi(X)] = \beta_0 + \beta_1 ALC + \beta_2 ALC(3) + \beta_3 ALC(4)$$

and we have shown that the models

$$\begin{aligned} logit[\pi(X)] &= \beta_0 + \beta_1 ALC + \beta_2 ALC(3) + \beta_3 ALC(4) \\ logit[\pi(X)] &= \beta_0 + \beta_1 ALC(2) + \beta_2 ALC(3) + \beta_3 ALC(4) \end{aligned}$$

are equivalent, that means that

$$logit[\pi(X)] = \beta_0 + \beta_1 ALC$$

is nested within the model

$$logit[\pi(X)] = \beta_0 + \beta_1 ALC(2) + \beta_2 ALC(3) + \beta_3 ALC(4).$$

- e) The likelihood ratio chi square is equal to 1.86 (2 df) and the p-value is 0.39. Thus we would conclude that the logistic linear model in part b gives an adequate fit to these data.
- f) The stata output is

The odds ratio for alc in this model is $\exp(1.09) = 2.98$ (95% CI = 2.44 – 3.66). We interpret this as the adjusted (for age) relative increase in the odds of disease for each categorical increase in alcohol consumption.

- g) The likelihood ratio test comparing a model with age categories versus a model with age as a linear term has a chi-square statistic equal to 17.77 with 4 df. The p value is 0.0014 so we would conclude that the linear model for age is not adequate.
- h) I would reason like this: each of the categories of alcohol consumption in our current model represents about a 40g/day increase in alcohol consumption. The coefficient in this model is 1.046. So if we had a model with actual grams of alcohol consumption, I might expect that the value of the coefficient would be about 1.046/40 = 0.026.