431 Class 09

Thomas E. Love

2018-09-25

Today's Agenda

- Silver, Chapters 2 and 3
- Associations, Using Linear Models (Notes: Ch 11)
 - A study of von Hippel-Lindau disease
 - Associations, Correlation and Scatterplots
 - Fitting a Linear Model
- Setting Up Project Groups for Study 1 (Class Survey)

The Signal and The Noise

Chapter 2: Political Predictions

When forecasting political events,

- Pundits and experts usually do no better than chance
- Pundits and experts usually do worse than crude statistical models.

What are the characteristics of experts who **are** substantially more accurate? How can you tell a *fox* from a *hedgehog*?

Chapter 3: Baseball

When you have a whole lot of data, that's one thing. But what if you have a truly **rich** collection of data?

- How can you build a simple model to describe how the performance of a baseball player varies with age?
- Why is age such an important predictor of future performance?

The Signal and The Noise: Coming Up

Read by October 2

- Chapter 4: Weather Predictions
- Chapter 5: Earthquake Predictions

Read by October 25

- Chapter 6: Economic Forecasts
- Chapter 7: Disease Outbreaks
- Chapter 8: Bayes' Theorem
- Chapter 9: Chess computers
- Chapter 10: Poker
- Chapter 11: The stock market

Studying the Association of Quantities

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R setup for Today

```
library(tidyverse)

VHL <- read.csv("vonHippel-Lindau.csv") %>% tbl_df
```

The vonHippel-Lindau.csv data set is (newly) available on our Data Page.

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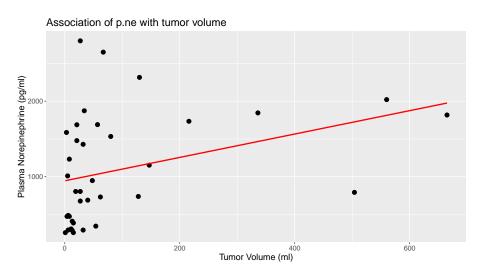
Von Hippel - Lindau study Codebook

- p.ne = plasma norepinephrine (pg/ml)
- tumorvol = tumor volume (ml)
- disease = 1 for patients with multiple endocrine neoplasia type 2
- disease = 0 for patients with von Hippel-Lindau disease

head(VHL)

```
A tibble: 6 x 4
     id disease p.ne tumorvol
  <int>
          <int> <int> <int>
    101
                             13
              0
                  289
2
   102
                             32
              1 294
3
    103
                 2799
                             27
4
   104
                             67
                 2649
5
    105
              0
                 346
                             54
6
    106
                 1690
                             57
```

A Linear Model for the p.ne - volume relationship



```
model1 <- lm(p.ne ~ tumorvol, data = VHL)
model1</pre>
```

Call:

lm(formula = p.ne ~ tumorvol, data = VHL)

Coefficients:

(Intercept) tumorvol 946.185 1.547

The (simple regression / prediction / ordinary least squares) model is

• p.ne = 946.2 + 1.55 * tumorvol.

Using the model to make predictions (PI)

To predict the p.ne for a subject with tumor volume 200 ml, we have

```
• p.ne = 946.2 + 1.55 * 200
```

A 95% prediction interval for a single subject with volume 200 ml...

```
fit lwr upr
1 1255.666 -162.3308 2673.662
```

Using the model to make predictions (CI)

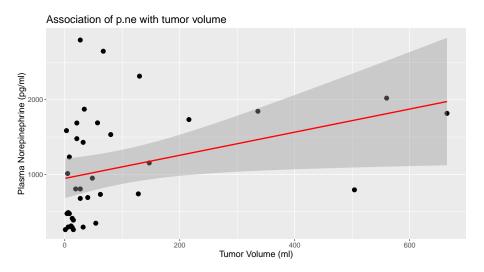
To predict the p.ne for the average of many subjects each with tumor volume 200 ml, we have

```
• p.ne = 946.2 + 1.55 * 200
```

A 95% **confidence interval** for the population average of all subjects with volume 200 ml. . .

```
fit lwr upr
1 1255.666 980.1149 1531.217
```

Adding a Confidence Interval to the Scatterplot



```
> summary(model1)
Call:
lm(formula = p.ne ~ tumorvol, data = VHL)
Residuals:
  Min 10 Median 30 Max
-933.1 -555.3 -170.6 453.6 1811.0
Coefficients:
           Estimate Std. Error t value Pr(>|t|)
(Intercept) 946.1846 130.4810 7.252 1.81e-08 ***
tumorvol 1.5474 0.7079 2.186 0.0356 *
Signif. codes: 0 '*** 0.001 '** 0.01 '* 0.05 '.' 0.1 ' 1
Residual standard error: 685.2 on 35 degrees of freedom
Multiple R-squared: 0.1201, Adjusted R-squared: 0.09497
F-statistic: 4.778 on 1 and 35 DF, p-value: 0.03561
```

Key Elements of the Summary (1)

- The straight line model for these data fitted by ordinary least squares is p.ne = 946 + 1.55 tumorvol.
- The slope of tumorvol is positive, which indicates that as tumorvol increases, we expect that p.ne will also increase.
- Specifically, we expect that for every additional ml of tumorvol, the p.ne is increased by 1.55 pg/ml.

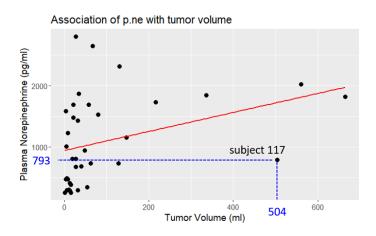
Tidying the Model 1 coefficients, with broom

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Key Elements of the Summary (2)

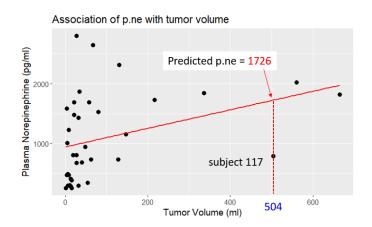
- Here, the outcome is p.ne, and the predictor is tumorvol.
- The residuals are the observed p.ne values minus the model's predicted p.ne. The sample residuals are the prediction errors.
 - The biggest miss is for a subject whose observed p.ne was 1,811 pg/nl higher than the model predicts based on the subject's tumor volume.
 - The mean residual will always be zero in an OLS model.

Understanding Regression Residuals (A)



Subject 117 has tumorvol = 504, and observed p.ne = 793 pg/nl.

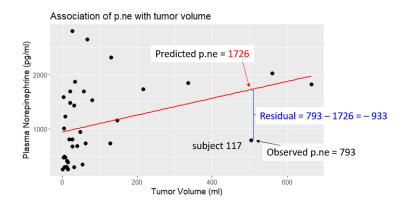
Understanding Regression Residuals (B)



Subject 117 has tumorvol = 504, and observed p.ne = 793 pg/nl. Model predicts p.ne is 946.2 + 1.55(504) = 1726 pg/nl.

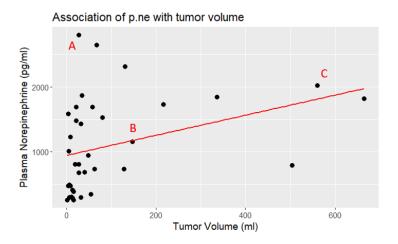
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Understanding Regression Residuals (C)



Subject 117 has $\underline{\text{tumorvol}} = 504$, and observed p.ne = 793 pg/nl. Model predicts p.ne is 946.2 + 1.55(504) = 1726. So, residual = 793 - 1726 = -933

Understanding Regression Residuals (D)



Which point (A, B or C) has the largest positive residual?

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Key Elements of the Summary (3)

```
Residual standard error: 685.2 on 35 degrees of freedom
Multiple R-squared: 0.1201, Adjusted R-squared: 0.09497
F-statistic: 4.778 on 1 and 35 DF, p-value: 0.03561
```

- The multiple R-squared (squared correlation coefficient) is 0.12, which implies that 12% of the variation in p.ne is explained using this linear model with tumorvol.
- It also implies that the Pearson correlation between p.ne and tumorvol is the square root of 0.12, or 0.347.

```
cor(VHL$p.ne, VHL$tumorvol)
```

[1] 0.3465646

We'll come back to this in a moment...

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Project Groups

Setting up the Project Groups

- We want ten groups, each with either 4 or 5 people.
- You need the full names of your group members.
- And their email addresses (for your own benefit.)
- Select a group reporter and a group name.
- Have the reporter fill out the Google Form identifying your group, now, ideally.

The Google Form you'll need is linked at

http://bit.ly/431-2018-project-groups

The Form's Questions...

Fall 2018 Project Groups (for Class Survey)

This is the form to specify your project group's name and membership. Only one person from your group should fill out this form. The groups will be formed in Class 9 (2018-09-25). This form needs to be submitted by noon on Wednesday 2018-09-26. If you have questions, contact Dr. Love directly.

Your email address (tel3@case.edu) will be recorded when you submit this form. Not you? Switch account

* Required

What is the name of your Project Group? *

100 characters or less, please.

Your answer

Please select the names of the members of your group from the list below. *

Your group must include either 4 or 5 people, in total. Be sure to check the box for each group member, including yourself.

Thinking More About Association/Correlation

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Correlation Coefficients

Two key types of correlation coefficient to describe an association between quantities.

- The one most often used is called the *Pearson* correlation coefficient, symbolized r or sometimes rho (ρ) .
- Another is the Spearman rank correlation coefficient, also symbolized by ρ , or sometimes ρ_s .

```
cor(VHL$p.ne, VHL$tumorvol)
[1] 0.3465646
cor(VHL$p.ne, VHL$tumorvol, method = "spearman")
```

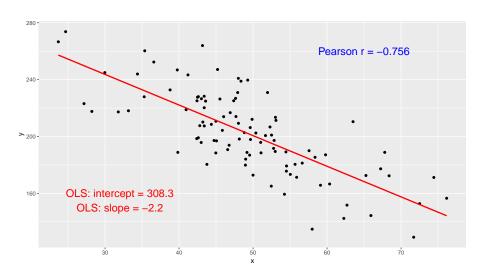
[1] 0.5414319

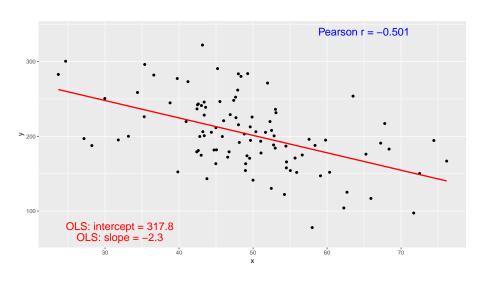
Meaning of Pearson Correlation

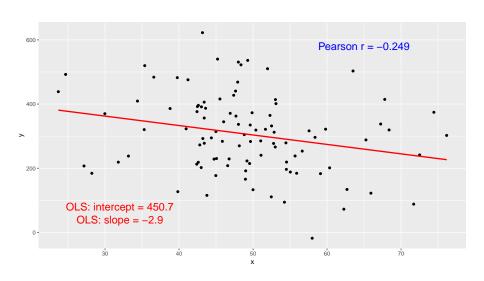
The Pearson correlation coefficient assesses how well the relationship between X and Y can be described using a linear function.

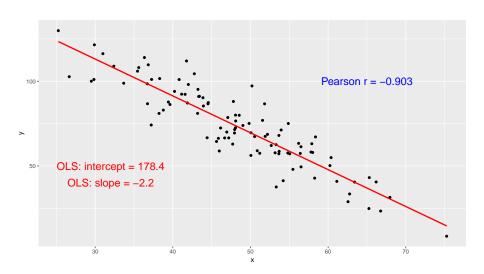
- The Pearson correlation is dimension-free.
- It falls between -1 and +1, with the extremes corresponding to situations where all the points in a scatterplot fall exactly on a straight line with negative and positive slopes, respectively.
- A Pearson correlation of zero corresponds to the situation where there is no linear association.
- Unlike the estimated slope in a regression line, the sample correlation coefficient is symmetric in x and y, so it does not depend on labeling one of them (y) the response variable, and one of them (x) the predictor.

$$r_{XY} = \frac{1}{n-1} \sum_{i=1}^{n} \left(\frac{x_i - \bar{x}}{s_x}\right) \left(\frac{y_i - \bar{y}}{s_y}\right)$$

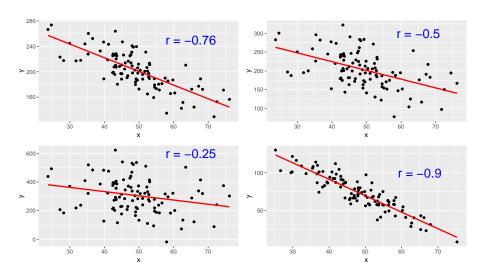


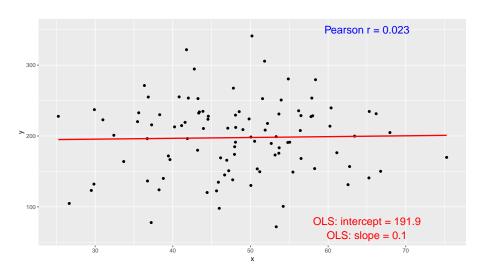


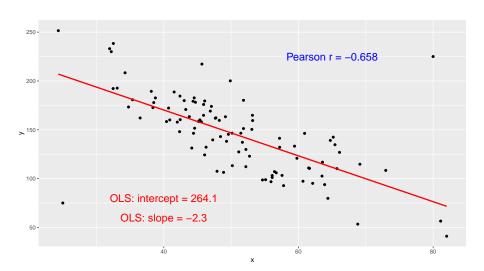




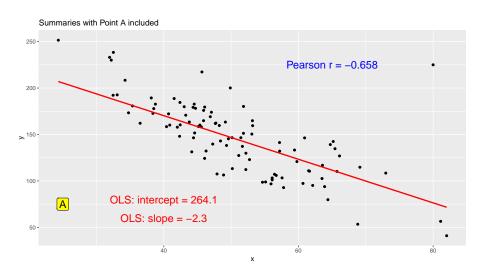
Calibrate Yourself on Correlation Coefficients





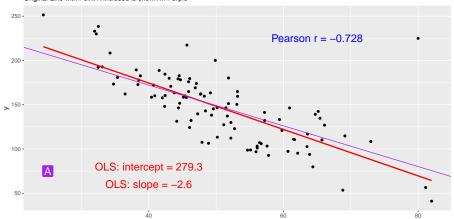


Example 6: What would happen if we omit Point A?

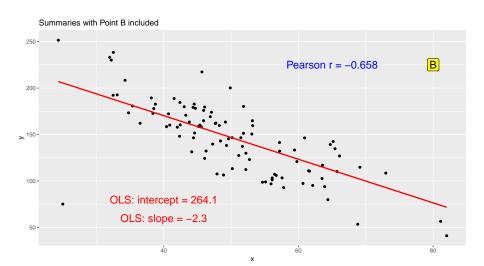


Example 6: Result if we omit Point A

Summaries, Model Results without Point A Original Line with Point A included is shown in Purple

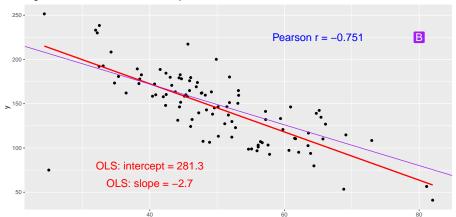


Example 6: What would happen if we omit Point B?

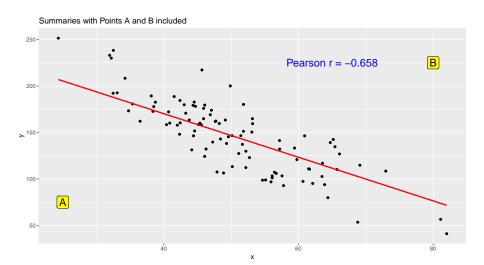


Example 6: Result if we omit Point B

Summaries, Model Results without Point B Original Line with Point B included is shown in Purple

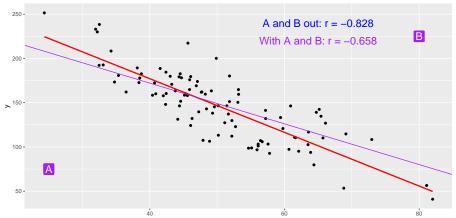


Example 6: What if we omit Point A AND Point B?



Example 6: Result if we omit Points A and B

Summaries, Model Results without A or B Original Line with Points A and B included is shown in Purple

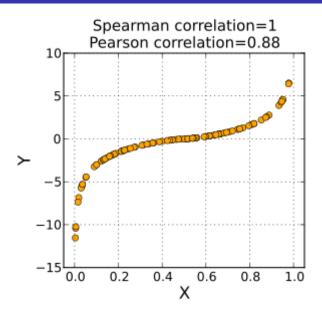


The Spearman Rank Correlation

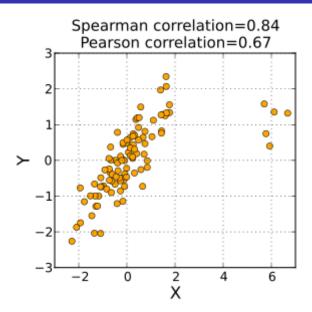
The Spearman rank correlation coefficient assesses how well the association between X and Y can be described using a **monotone function** even if that relationship is not linear.

- A monotone function preserves order that is, Y must either be strictly increasing as X increases, or strictly decreasing as X increases.
- A Spearman correlation of 1.0 indicates simply that as X increases, Y always increases.
- Like the Pearson correlation, the Spearman correlation is dimension-free, and falls between -1 and +1.
- A positive Spearman correlation corresponds to an increasing (but not necessarily linear) association between X and Y, while a negative Spearman correlation corresponds to a decreasing (but again not necessarily linear) association.

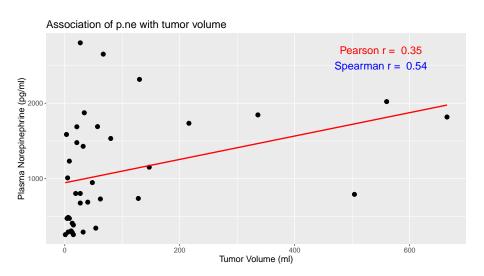
Monotone Association (Source: Wikipedia)



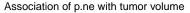
Spearman correlation reacts less to outliers

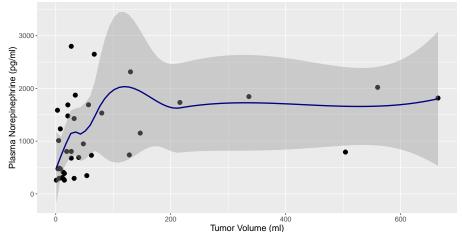


Our Key Scatterplot again

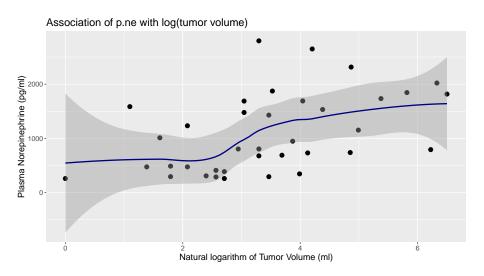


Smoothing using loess, instead

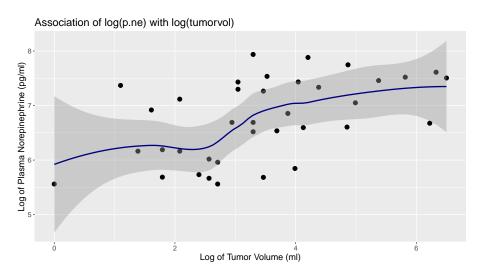




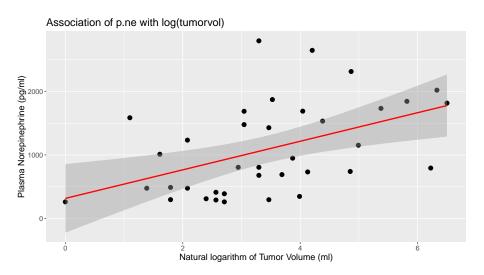
Using the Log transform to spread out the Volumes



Does a Log-Log model seem like a good choice?



Linear Model for p.ne using log(tumor volume)



Creating a Factor to represent disease diagnosis

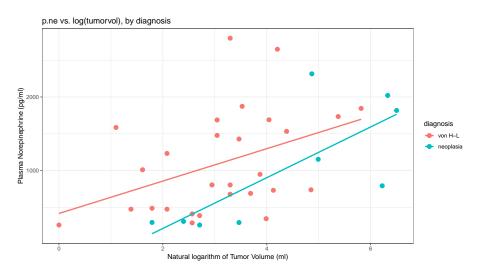
We want to add a new variable, specifically a factor, called diagnosis, which will take the values von H-L or neoplasia.

- Recall disease is a numeric 1/0 variable (0 = von H-L, 1 = neoplasia)
- Use fct_recode from the forcats package...

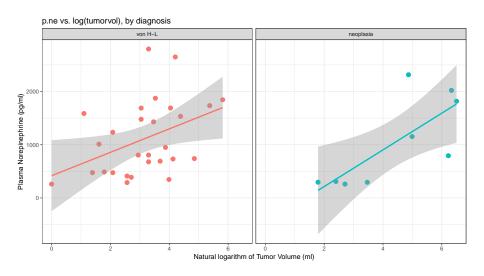
```
VHL
```

```
A tibble: 37 \times 5
      id disease p.ne tumorvol diagnosis
                           <int> <fct>
           <int> <int>
   <int>
     101
               0
                    289
                              13 von H-L
     102
               1
                   294
                              32 neoplasia
3
     103
               0 2799
                              27 von H-L
4
     104
               0
                  2649
                              67 von H-L
5
     105
               0
                 346
                              54 von H-L
6
     106
               0 1690
                              57 von H-L
7
     107
               0
                   805
                              19 von H-I.
8
     108
               1
                  1153
                             147 neoplasia
     109
               0
                 678
                              27 von H-I.
10
     110
               1
                  1817
                             665 neoplasia
 ... with 27 more rows
```

Compare the patients by diagnosis



Facetted Scatterplots by diagnosis



```
model2 <- lm(p.ne ~ log(tumorvol) * diagnosis, data = VHL)
model2

Call:
lm(formula = p.ne ~ log(tumorvol) * diagnosis, data = VHL)</pre>
```

Coefficients:

```
(Intercept)
417.2
log(tumorvol)
220.0
diagnosisneoplasia
-893.3
log(tumorvol):diagnosisneoplasia
124.8
```

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```
 p.ne = 417 + 220 \log(tumorvol) - 893 (diagnosis = neoplasia) + 125 (diagnosis = neoplasia)*log(tumorvol)
```

where the indicator variable (diagnosis = neoplasia) = 1 for neoplasia subjects, and 0 for other subjects...

- Model for p.ne in von H-L patients:
 - 417 + 220 log(tumorvol)
- Model for p.ne in neoplasia patients:
 - $(417 893) + (220 + 125) \log(tumorvol)$
 - -476 + 345 log(tumorvol)

```
What is the predicted p.ne for a single new subject with tumorvol = 200 ml (so log(tumorvol) = 5.3) in each diagnosis category?
```

fit lwr upr 1 1583.079 208.6489 2957.509

Tidying the Model 2 coefficients, with broom

```
broom::tidy(model2)
# A tibble: 4 \times 5
                estimate std.error statistic p.value
 term
 <chr>
                   <dbl>
                            <dbl>
                                     <dbl>
                                            <dbl>
                                  1.31 0.199
 (Intercept)
                    417.
                            318.
2 log(tumorvol)
                        93.6 2.35 0.0248
                    220.
3 diagnosisneopl~ -893. 659. -1.36 0.184
```

4 log(tumorvol):~

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125. 155. 0.807 0.425

Model 2, summarized at a glance, with broom

```
broom::glance(model2)
# A tibble: 1 x 11
 r.squared adj.r.squared sigma statistic p.value
                                                  df
     <dbl>
                  <dbl> <dbl> <dbl> <int>
     0.290
                  0.226 634. 4.50 0.00937
# ... with 5 more variables: logLik <dbl>, AIC <dbl>,
#
   BIC <dbl>, deviance <dbl>, df.residual <int>
Compare this to model 1...
broom::glance(model1)
# A tibble: 1 x 11
 r.squared adj.r.squared sigma statistic p.value
                                                  df
     <dbl>
                 <dbl> <dbl> <dbl> <dbl> <int>
     0.120
            0.0950 685. 4.78 0.0356
# ... with 5 more variables: logLik <dbl>, AIC <dbl>,
```

Reminders

- Please complete the Minute Paper after Class 9 at http://bit.ly/431-2018-minute09.
- 2 Please be sure your group has completed the Project Group form at http://bit.ly/431-2018-project-groups.
- 4 Homework 4 is due Friday at noon.
- Before Thursday, you should read Jeff Leek: Chapters 1-4 and 12.