# Investigating the COVID-19 Outbreak

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## Cleaning Data

### **Section 1: Introduction**

Several recent reports suggest that older age groups show more severe symptoms in the face of COVID-19, causing the virus to be more deadly for older age groups. We want to test whether this is true by comparing the death rate of older individuals to the death rate of younger individuals. Our null hypothesis (H0) is that the death rate for older individuals is the same as the death rate for younger individuals, while our alternative hypothesis (H1) is that the death rate for older individuals is higher than that of younger individuals.

We plan on working with the data from the early stages of the COVID-19 outbreak from 1/20/2020 to 2/15/2020. This dataset, from Kaggle, was first extracted from information provided by Johns Hopkins University. Johns Hopkins University collected this data from the World Health Organization, the Center for Disease Control and Prevention, the European Centre for Disease Prevention and Control, the National Health Commission of the People's Republic of China, among other state and national government health departments. Each observation in the dataset is a case in which an individual tested positive for COVID-19. The variables include the ID number of the individual, the number that the case is in the country, the date the case was reported, the location of the case, the gender of the individual, the age of the individual, the age group of the individual, the date of the onset of symptoms, the date of the hospital visit, the start and end dates of exposure to the virus, if the individual visited Wuhan, if the individual was from Wuhan, if the patient died, and if the patient recovered.

 $\label{line_line_line} Link \ to \ Data: \ https://www.kaggle.com/sudalairajkumar/novel-corona-virus-2019-dataset \#COVID19\_line\_list\_data.csv$ 

### Section 2: Data Analysis Plan

Through our analysis, we will use death as our outcome variable by analyzing the proportion of patients who have died, indicated by a value of "yes" for death. To do so, we will use the following predictor variables: age group, gender, visited wuhan, from wuhan, country.

Using these variables, we will attempt to determine not only if age affects one's survival outcome due to COVID-19, but also if any of these other characteristics are associated with one's survival outcome.

To start, we will preform some preliminary exploratory data analysis to learn more about our data.

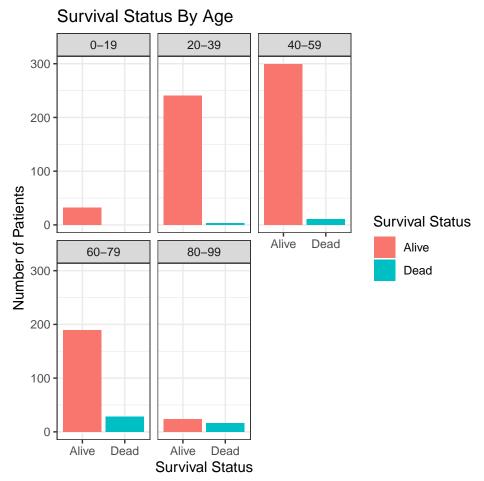
First, we will determine the death rate, proportion of those dead, of all patients in our dataset. As we can see, there is a small percentage, about 6%, of patients who died from COVID-19 in our data set.

Now, we will look at the survival rate by age group.

# A tibble: 11 x 4 # Groups: age\_group [6] n prop\_dead age\_group death <chr> <dbl> <chr> <int> 1 0-19 Alive 32 2 20-39 Alive 241 0.988 3 20-39 Dead 3 0.0123 4 40-59 299 0.965 Alive 5 40-59 Dead 11 0.0355 6 60-79 Alive 189 0.871 7 60-79 Dead 28 0.129 8 80-99 24 0.6 Alive 9 80-99 Dead 16 0.4 10 NA 237 0.979 Alive 11 NA Dead 5 0.0207

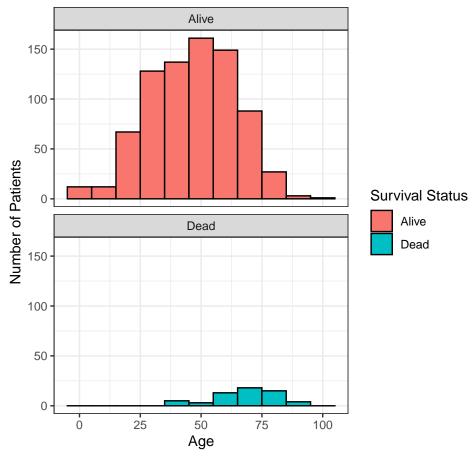
The death rate is lowest for the 20-39 age group while highest for the 80-99 age group. Older age groups, then, tend to have a higher death rate.

Now, we will visualize survival status faceted by age\_group.



We will also visualize the ages of patients for each survival status.





Below is a summary table of the mean age of patients who have died from COVID-19 and those that haven't, out of all patients in our data set that reported their ages. As we can see, the average age of patients that have died is greater than the average age of patients that are alive. These ages give us a reference point to determine what age will be considered "old" and what ages will be considered "young" for our exploratory data analysis.

To understand some of our other explanatory variables, we will calculate some statistics to get a sense of our data in terms of gender, country, and patients who have been to Wuhan recently. As we can see below, around 35% of patients are female, 48% of patients are male and 17% of patients are not classified. Noting that more male patients are included in our data set will be important and helpful when performing our exploratory data analysis.

Additionally, the patients in our data set come from 38 different countries.

However, as we can see below, 8 countries in our dataset have at least 1 reported death, with China having the most number of deaths by a significant margin, as of the date of our dataset. It will be helpful to know that only 8 of the 38 total countries in our data set have reported deaths when we consider the explanatory variable 'country' in our exploratory data analysis.

```
# A tibble: 8 x 3
# Groups:
             country [8]
  country
               people_dead prop_dead
  <chr>
                      <int>
                                 <dbl>
1 China
                         39
                               0.198
                          2
                               0.0513
2 France
3 Hong Kong
                          2
                               0.0213
4 Iran
                          4
                               0.222
5 Japan
                          5
                               0.0263
                               0.333
6 Phillipines
                          1
7 South Korea
                          9
                               0.0789
8 Taiwan
                          1
                               0.0294
```

Additionally, from the summary table below, we see the mean age of the patients who have died for each country where there are reported deaths. In China, the mean age is about 71. In Taiwan, the mean age is 65. In Hong Kong, the mean age is about 54. However, since there were less than ten recorded deaths in countries other than China, the use of country as a predictor may yield misleading results, so we plan to group the categories into "China" and "Other Countries."

#### # A tibble: 7 x 2 country mean\_death\_age <chr> <dbl> 1 Japan 82.5 2 China 71.1 3 France 70 65 4 Taiwan 5 South Korea 57.7 54.5 6 Hong Kong 7 Phillipines 44

From the table below, we see the majority of patients included in our data set are not from Wuhan, nor have they reported that they have previously visited Wuhan. Even though the majority of patients in our data set are not from or have been to Wuhan, it will be interesting to see if time in Wuhan is associated with one's survival outcome.

```
# A tibble: 3 x 2
  from_wuhan
                 prop
  <fct>
                <dbl>
1 0
             0.853
2 1
             0.144
3 <NA>
             0.00369
# A tibble: 2 x 2
  visiting_wuhan prop
  <fct>
                  <dbl>
                  0.823
1 0
2 1
                  0.177
```

We plan to use the following statistical methods to answer our research questions about whether age\_group, gender, country, visited\_wuhan, from\_wuhan play a role in variable death rate:

- a) Calculate the conditional probability of P(Death | Age) to determine if there are any confounding variables: gender, visited\_wuhan, from\_wuhan, country. We will also keep in mind that the conclusions we draw about death rate may be confounded with variables that are not included in our dataset, such as smoking/drinking status, chronic disease status, BMI, etc.
- b) Use estimation via bootstrap to create a confidence interval for the mean age of affected individuals:

For each age\_group, we will take bootstrap samples, calculate the mean death rate, and obtain a 95% confidence interval for the mean death rate of that particular age group. If the confidence intervals for the mean death rates do not overlap, we can conclude that the mean death rate for the older age group is significantly different from the mean death rate of the younger age group.

If there are any confounding variables, we will estimate the mean age of affected individuals faceted by the confounding variables.

We are 95% confident that the true mean death rate of the population age 20-39 is between the range of (0.03668033 and 0.06598361).

We are 95% confident that the true mean death rate of the population age 80-99 is between the range of (0.04545455) and (0.1590909).

Since the two confidence intervals overlap, we cannot claim that there is significant difference between the mean death rate of individuals in the 80-99 age group with those in 20-39 age group. However, both the lower and upper end of the confidence interval for the older age group (0.04545455 and 0.1590909) is higher than the interval for the younger age group (0.03668033 and 0.06598361).

We will repeat this process by determining the role of other explanatory variables on death rate: gender, country, visited\_wuhan, and from\_wuhan.

c) To get more information than seeing whether the confidence intervals overlap, we will use simulation-based hypothesis testing to give the exact probability estimate (p-value) for the alternate hypothesis.

H0:  $\mu$ (death rate of young age group) =  $\mu$ (death rate of old age group) H1:  $\mu$ (death rate of young age group) <  $\mu$ (death rate of old age group)

By using the bootstrap distribution, we will see where the elderly mean death rate lies on the null distribution for the young mean death rate.

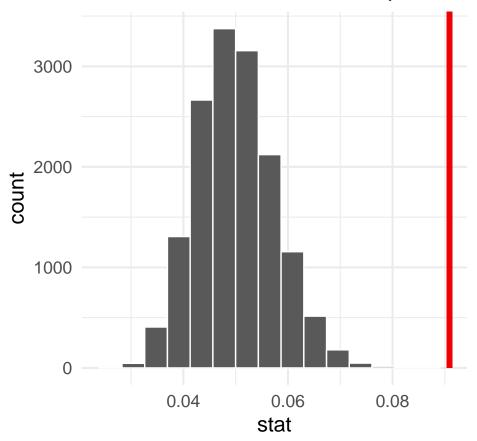
First, we estimate the mean death rate among the older age group through using bootstrap estimation.

#### [1] 0.09089939

Next, we create a null distribution for the mean death rate of the younger age group.

By graphing the sample mean for the older age group on the null distribution of the younger age group, we see that the probability of observing a sample mean the same or greater than that of the estimated mean for the older age group is very low.





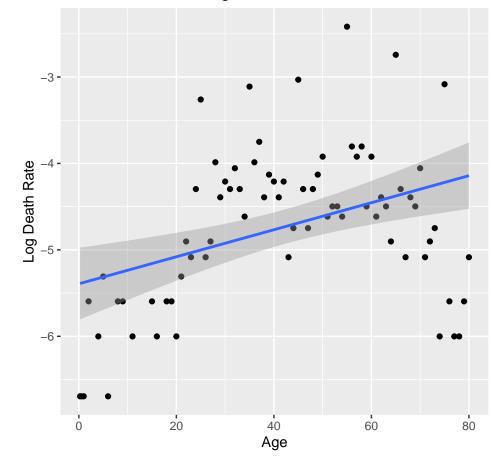
We confirm this by doing a hypothesis test and getting the p\_value, which comes out to be 6.666667e-05. Therefore, the probability of seeing a mean death rate of 0.09094273 (the sample mean death rate of the older age group) for the younger age group is approximately zero.

Thus, with an alpha level of 0.05, we have sufficient evidence to reject the null hypothesis that the mean death rate for the age group "80-99" is equal to the mean death rate of age group "20-39."

d) A final way we will measure whether the explanatory variables are significant determiners of death rate is by creating logistic regression models.

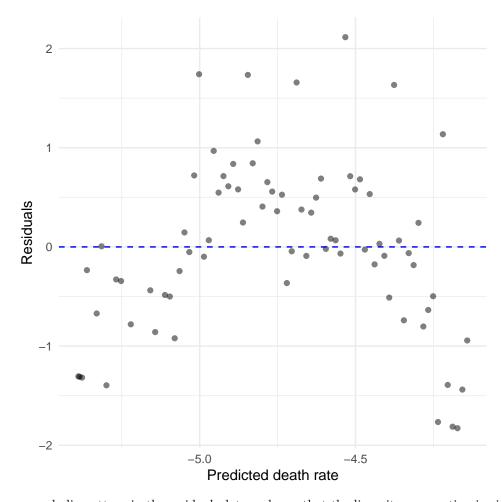
[1] 0.1500937

## Death Rate across Age



From this visualization, we can see that death rate peaks around age 60. This may be because of the small number of patients who are over 70.

Since the graph does not seem to follow a linear pattern, we will check whether a linear fit is appropriate using a residual plot.



From seeing a parabolic pattern in the residual plot, we know that the linearity assumption is violated, so a linear fit is not the best model.

We will create logistic regression models for each variable, then determine whether each variable is significant in influencing death rates by looking at P-value for each coefficient.

Finally, we will use AIC/BIC model selection criteria to select for a model with the highest adjusted R^2 using backwards elimination.

##Section 3: Data The dimensions of our dataset are 1,085 rows by 16 columns.

```
Observations: 1,085
Variables: 17
                        <fct> 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14...
$ id
                        <date> 2020-01-20, 2020-01-20, 2020-01-21, 2020-01-...
$ reporting_date
                        <chr> "Shenzhen, Guangdong", "Shanghai", "Zhejiang"...
$ location
                        <chr> "China", "China", "China", "China", "China", ...
$ country
                        <chr> "male", "female", "male", "female", "male", "...
$ gender
$ age
                        <dbl> 66, 56, 46, 60, 58, 44, 34, 37, 39, 56, 18, 3...
$ symptom_onset
                        <date> 20-01-03, 2020-01-15, 20-01-04, NA, NA, 2020...
$ if_onset_approximated <fct> 0, 0, 0, NA, NA, 0, 0, 0, 0, 0, 0, 0, NA, 0, ...
$ hosp_visit_date
                        <date> 20-01-11, 2020-01-15, 2020-01-17, 2020-01-19...
$ exposure_start
                        <date> 2019-12-29, NA, NA, NA, NA, NA, NA, 20-01-10...
$ exposure_end
                        <date> 20-01-04, 20-01-12, 20-01-03, NA, NA, NA, NA...
                        <fct> 1, 0, 0, 1, 0, 0, 0, 1, 1, 1, 1, 1, 1, 0, 0, ...
$ visiting_wuhan
$ from_wuhan
                        <fct> 0, 1, 1, 0, 0, 1, 1, 0, 0, 0, 0, 0, 0, 1, 1, ...
```