

Outline

1. One-Way ANOVA--- Fixed Effects
 - ① One-Way ANOVA
 - ② Post-hoc Test After One-Way ANOVA
2. Two-Way ANOVA
3. The Kruskal-Wallis Test
4. One-Way ANOVA--- Random Eeffects
5. Meta Analysis
6. Mixed Model

Random-Effects One-way ANOVA

Example:

Endocrinology

- Source: blood samples were obtained from a subset of nurses and serum levels of various hormones were recorded.
- Each blood sample was split into two equal aliquots, which were sent in a blinded fashion to one laboratory for analysis.
- The **goal** of the study was to assess how much variation in the analyses was attributable to between-person vs. within-person variation (or estimate the overall mean of the population).

Reproducibility data for plasma estradiol (pg/mL), Nurses' Health Study

Subject	Replicate		Absolute value of difference between replicates	Mean value
	1	2		
1	25.5	30.4	4.9	27.95
2	11.1	15.0	3.9	13.05
3	8.0	8.1	0.1	8.05
4	20.7	16.9	3.8	18.80
5	5.8	8.4	2.6	7.10

ANOVA model

- One-way ANOVA

$$y_{ij} = \mu + \alpha_i + \varepsilon_{ij}$$

- y_{ij} : j th replicate for the i th subject
- α_i : between-subject variability;
 - $\alpha_i \sim N(0, \sigma_A^2)$, σ_A^2 is the population variance effect
- e_{ij} : within-subject variability;
 - $e_{ij} \sim N(0, \sigma^2)$, σ^2 is the measurement variance
 - independent of α_i and any of the other e_{ij}
- Hierarchical structure

Testing in One-way ANOVA

- An important goal in the random-effects ANOVA is to test

$$H_0: \sigma_A^2 = 0 \quad vs \quad H_1: \sigma_A^2 > 0$$

- Under H_0 , there is no underlying between-subject variation; all variation seen between individual subjects is attributable to within-person variation(or “noise”).
- Under H_1 there is a true underlying difference among means for individual subjects.

Contd.

- Can we use the same F statistics (MSB/MSW) for fixed effect models?
- Easy to check

$$\begin{aligned} E(\text{MSW}) &= \sigma^2 \\ E(\text{MSB}) &= \sigma^2 + n_0 \sigma_A^2 \end{aligned}$$

where

$$n_0 = \begin{cases} n_1 = \dots = n_k, & \text{balanced case} \\ (\sum n_l - \sum n_l^2 / \sum n_l) / (k - 1), & \text{unbalanced case} \end{cases}$$

- If H_0 is true ($\sigma_A^2 = 0$), then F will be small;
- If H_1 is true ($\sigma_A^2 > 0$), then F will be large; ==> F test will work

Inference for variance components

1. the unbiased estimate of σ^2 is given by MSW
2. And since

$$E\left(\frac{\text{MSB} - \text{MSW}}{n_0}\right) = \frac{\sigma^2 + n_0\sigma_A^2 - \sigma^2}{n_0} = \sigma_A^2$$

\Rightarrow an unbiased estimate of σ_A^2 is given by $\hat{\sigma}_A^2 = (\text{MSB} - \text{MSW})/n_0$.

\Rightarrow Problem: this estimate can be negative. If it is, set to 0.

Coefficient of variation

- Another parameter that is often of interest in reproducibility studies, such as the **Endocrinology** example, is the Coefficient of variation(CV).
- Generally speaking, CVs of <20% are desirable, whereas CVs of >30% are undesirable.

$$CV = 100\% \times \frac{\text{within-person standard deviation}}{\text{within-person mean}}$$

- based on the assumption that the standard deviation is **independent** of the mean value. If not, see next slide...

Estimation of the CV in Reproducibility Studies

- Suppose we have k subjects enrolled in a reproducibility study where there are n_i replicates for the i th subject, $i = 1, \dots, k$. To estimate the *CV*,
 - ① Apply the \ln transformation to each of the values.
 - ② Estimate the between- and within-subject variance components using a one-way random-effects model ANOVA.
 - ③ The *CV* in the *original scale* is estimated by

$$100\% \times \sqrt{\text{MSW}}$$

The Intraclass Correlation

- In some instances, correlation between variables that are not readily distinguishable from each other.
- In **Endocrinology** example, the replicate-sample determinations are indistinguishable from each other, since each plasma sample was split into two halves at random.
- Thus a special type of correlation is needed between repeated measures on the same subject, called an **intraclass correlation coefficient** (the magnitude of σ_A^2 comparing to σ^2).

The Intraclass Correlation Coefficient

Definition: the correlation between two replicates from the same subject—i.e., between y_{ij} and y_{il} where $j \neq l$ and $1 \leq j \leq n_i, 1 \leq l \leq n_i$

denoted by ρ_I

Interpretation of Intraclass Correlation

- $\rho_I < 0.4$ indicates poor reproducibility
- $0.4 \leq \rho_I < 0.75$ indicates fair to good reproducibility
- $\rho_I \geq 0.75$ indicates excellent reproducibility

Contd.

- If y_{ij} follows a one-way random-effects ANOVA model,

$$\rho_I = \sigma_A^2 / (\sigma_A^2 + \sigma^2)$$

- 1 indicating perfect reproducibility
 - 0 indicating no reproducibility at all
- A point estimate of ρ_I is given by

$$\hat{\rho}_I = \max[\hat{\sigma}_A^2 / (\hat{\sigma}_A^2 + \hat{\sigma}^2), 0]$$

Back to Endocrinology

```
> rep <- c(25.5, 30.4, 11.1, 15.0, 8.0, 8.1,  
+ 20.7, 16.9, 5.8, 8.4)  
> rep <- log(rep)  
> sub <- factor(rep(1:5, c(2, 2, 2, 2, 2),  
+ labels = c("Sub1", "Sub2", "Sub3", "Sub4", "Sub5")))  
> plasma.lm <- lm(rep ~ sub)  
> print(anova(plasma.lm))
```

significant differences among the
underlying mean $\ln(\text{plasma estradiol})$
values for different subjects.

Analysis of Variance Table

Response: rep

	Df	Sum Sq	Mean Sq	F value	Pr(>F)
Sub	4	2.65775	0.66444	22.146	0.002221 **
Residuals	5	0.15001	0.03000		

Contd.

```
> # Estimate sigma^2_A  
> MSB <- anova(plasma.lm)$Mean[1]  
> MSW <- anova(plasma.lm)$Mean[2]
```

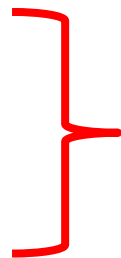
```
> n <- 2  
> sigma.A.2 <- (MSB - MSW)/n
```

```
> print(sigma.A.2)
```

```
[1] 0.3172171
```

```
> print(MSW)
```

```
[1] 0.03000244
```



Thus the between-person variance is about **10** times as large as the within-person variance, which indicates **good reproducibility**.

Contd.

```
> ## estimation of the coefficient of variation
> # the correct way
> sqrt(MSW) # in the original scale
[1] 0.1732121

> # incorrect way
> sqrt(MSW)/mean(rep) # CV for ln scale
[1] 0.06744243

> aov.raw <- anova(lm(rep1 ~ sub))
> sqrt(aov.raw$Mean[2])/mean(rep1) # for raw scale
# not appropriate because the standard deviation
# appears to increase as the mean increases
[1] 0.1639928
```

Contd.

```
> ## the Intraclass Correlation Coefficient  
> sigma.A.2/(sigma.A.2+MSW)  
# p_I  
[1] 0.9135923
```

Thus there is excellent reproducibility for ln(plasma estradiol).

Meta-Analysis

REF: Prognostic immune-related gene models for breast cancer: a pooled analysis, Oncotargets and Therapy, 2017

Motivation

- We have examined methods of analysis for a single study.
- However, often more than one investigation is performed to study a particular research question, often by different research groups.
- Many of the studies are **small** and individually are likely to yield **nonsignificant** results.
- **The question is**, What is the appropriate way to combine evidence across all the studies so as to **reduce sampling error** and **increase the power** of the investigation and, in some instances, to resolve the inconsistencies among the study results?

Meta-analysis

	True value of targeted parameter(unknown)	Results from the i-th study	
		Estimation	variance
Study 1	θ_1	y_1	σ_1^2
Study 2	θ_2	y_2	σ_2^2
...
Study K	θ_K	y_K	σ_K^2

Known from the literature

$$y_i = \theta_i + \epsilon_i,$$

- $\epsilon_i \sim N(0, \sigma_i^2)$, ϵ_i : within-study variation
- Fixed-effect model, $\theta_1 = \theta_2 = \dots = \theta_K = \theta$,

$$y_i = \theta + \epsilon_i \sim N(\theta, \sigma_i^2)$$
- Random-effect model, θ_i i.i.d. $\sim N(\theta, \sigma_A^2)$,

$$y_i = \theta_i + \epsilon_i \sim N(\theta, \sigma_A^2 + \sigma_i^2),$$

where σ_A^2 is unknown and needs to be estimated.

Meta-analysis: Estimation

- Fixed-effect model, $y_i \sim N(\theta, \sigma_i^2)$

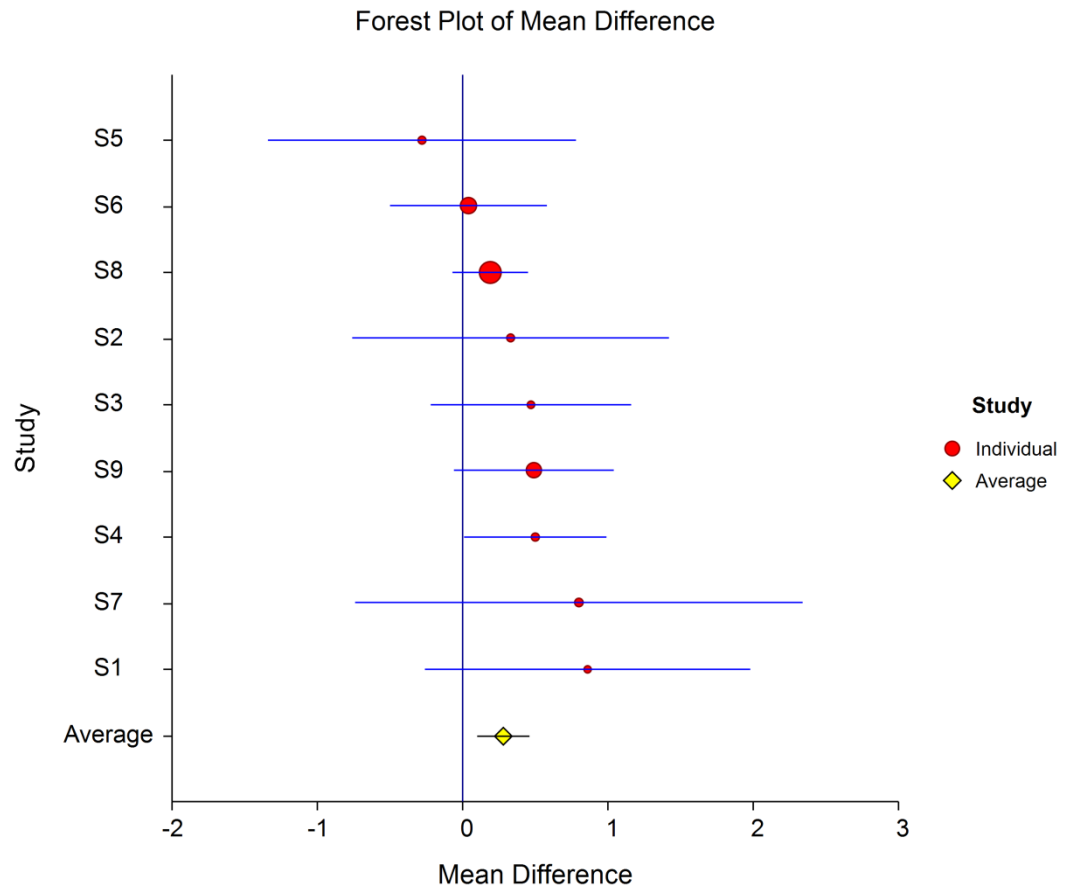
$$\text{MLE of } \theta: \hat{\theta} = \frac{\sum_{i=1}^K w_i y_i}{\sum_{i=1}^K w_i},$$

$$\text{where } w_i = \frac{1}{\sigma_i^2}$$

- Random-effect model

$$\text{MLE of } \theta: \hat{\theta} = \frac{\sum_{i=1}^K w_i^* y_i}{\sum_{i=1}^K w_i^*},$$

$$\text{where } w_i^* = \frac{1}{\widehat{\sigma_A^2} + \sigma_i^2} \text{ and } \widehat{\sigma_A^2} \text{ is the MLE of } \sigma_A^2.$$



Test of Homogeneity

- Some investigators feel the (random effect) procedure should only be used if there is no significant heterogeneity among the k study-specific θ_i s

- So to test

$H_0: \theta_1 = \dots = \theta_k = \theta$ vs $H_1: \text{at least two } \theta_i \text{ s are different}$

- The test statistic

$$Q_w = \sum_{i=1}^k w_i (y_i - \hat{\theta})^2$$

- $Q_w \sim \chi_{k-1}^2$ under H_0

Mixed model

Mixed model

- Two-way ANOVA model-balanced design with one fixed effect and one random effect

$$y_{ijk} = \mu + \alpha_i + \beta_j + (\alpha\beta)_{ij} + e_{ijk}$$

- y_{ijk} : k th replicate for the i th subject at the time point j
- α_i : a random effect; $\alpha_i \sim N(0, \sigma_A^2)$
- β_j : a fixed effect
- $(\alpha\beta)_{ij}$: interaction effect
- e_{ij} : error term; $e_{ij} \sim N(0, \sigma^2)$

Example:

Ophthalmology

- A study was performed among dry eye patients comparing an active drug with placebo.
- Measurement: tear break-up time (TBUT, the time it takes for a tear to dissolve); a **smaller** number indicates **worse** symptoms (more tearing).
- The TBUT was measured at baseline (bas), immediately after drop instillation (im), and at 5 minutes (pst5), 10 minutes (pst10), and 15 minutes (pst15) after instillation.

Contd.

Endocrinology

Table 12.24 Tear break-up time over 15 minutes among 14 dry eye patients in the placebo group of a clinical trial after a 3 second nonblink period

	od bas 1	od bas 2	od im 1	od im 2	od pet5 1	od pet5 2	od pet10 1	od pet10 2	od pet15 1	od pet15 2
1	5.44	4.59	4.34	5.31	4.81	6.53	6.00	4.63	6.47	7.03
2	3.28	3.00	10.87	19.06	13.34	12.31	10.34	9.71	5.81	7.25
3	3.18	2.43	14.78	16.28	12.53	16.84	5.53	6.68	6.78	6.43
4	2.47	1.40	11.12	6.44	8.46	3.84	1.93	2.46	2.62	3.21
5	4.40	4.90	12.93	14.84	7.43	9.78	5.93	6.81	6.28	7.65
6	4.93	4.87	10.56	11.71	4.53	5.50	5.37	3.75	4.56	3.31
7	7.21	6.15	14.34	15.50	10.56	10.87	10.43	8.57	3.15	2.78
8	4.93	4.15	15.31	14.00	7.51	6.59	4.01	3.59	3.90	3.62
9	3.18	2.84	6.90	5.75	8.09	7.03	5.31	6.81	4.09	4.06
10	3.47	1.37	6.91	3.57	7.06	5.09	1.53	1.06	2.96	1.34
11	9.46	8.50	12.03	10.75	17.03	14.93	12.31	14.62	13.06	15.09
12	3.03	3.12	7.12	7.19	5.68	4.32	2.41	3.10	4.47	4.25
13	2.47	2.62	18.97	10.60	2.06	2.66	1.87	2.91	2.22	2.40
14	2.66	2.32	12.97	14.81	5.03	3.03	2.35	1.31	1.32	1.19

Contd.

Endocrinology

- We wish to test whether there are differences in TBUT among subjects and over time.

A random effect

A fixed effect

- This type of design is called a mixed model

Analysis of Mixed model

Table 12.25 Analysis of two-way ANOVA table with one fixed effect and one random effect

Effect	SS	df	MS	F Stat	df
Row (random)	$RSS = \sum_{i=1}^r y_{i.}^2 / (nc) - y_{...}^2 / (nrc)$	$r - 1$	$RMS = RSS / (r - 1)$	RMS / EMS	$r - 1, rc(n - 1)$
Column (fixed)	$CSS = \sum_{j=1}^c y_{.j}^2 / (nr) - y_{...}^2 / (nrc)$	$c - 1$	$CMS = CSS / (c - 1)$	CMS / IMS	$c - 1, (r - 1)(c - 1)$
Interaction	$ISS = \sum_{i=1}^r \sum_{j=1}^c y_{ij}^2 / n$ $- RSS - CSS - y_{...}^2 / (nrc)$	$(r - 1)(c - 1)$	$IMS = ISS / [(r - 1)(c - 1)]$	IMS / EMS	$(r - 1)(c - 1), rc(n - 1)$
Error	$ESS = \sum_{i=1}^r \sum_{j=1}^c (y_{ijk} - \bar{y}_{ij})^2$	$rc(n - 1)$	$EMS = ESS / [rc(n - 1)]$		

General two way ANOVA

Table 12.26 Computation of the F statistics for tests of significance in a two-factor ANOVA with replication

Hypothesized effect	Model I (factors A and B both fixed)	Model II (factors A and B both random)	Model III (factor A random; factor B fixed)
Factor A	$\frac{\text{factor } A \text{ MS}}{\text{error MS}}$	$\frac{\text{factor } A \text{ MS}}{A \times B \text{ MS}}$	$\frac{\text{factor } A \text{ MS}}{\text{error MS}}$
Factor B	$\frac{\text{factor } B \text{ MS}}{\text{error MS}}$	$\frac{\text{factor } B \text{ MS}}{A \times B \text{ MS}}$	$\frac{\text{factor } B \text{ MS}}{A \times B \text{ MS}}$
$A \times B$ interaction	$\frac{A \times B \text{ MS}}{\text{error MS}}$	$\frac{A \times B \text{ MS}}{\text{error MS}}$	$\frac{A \times B \text{ MS}}{\text{error MS}}$

Back to:

Ophthalmology

```
> # read data into R

> tear <- read.table("tear.txt",header= F)
> tea <- as.matrix(tear[,2:11])
> tear <- read.table("tear.txt",header= F)
> tea <- as.matrix(tear[,2:11])
> tear.m <- as.vector(tea)
> time <- factor(rep(1:5,rep(14*2,5),
+ labels = paste("time.",1:5,sep="")))
> sub <- factor(rep(1:14,10,label =
+ paste("sub.",1:14,sep="")))
> tear.lm <- lm(tear.m ~ sub+time+sub*time)
```

R codes

```
> summary(tear.aov <- aov(tear.lm))
```

	Df	Sum Sq	Mean Sq	F value	Pr(>F)	
sub	13	897.58	69.045	32.271	< 2.2e-16	***
time	4	964.64	241.159	112.715	< 2.2e-16	***
sub:time	52	655.52	12.606	5.892	9.696e-12	***
Residuals	70	149.77	2.140			

--- Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05
'.' 0.1 ' ' 1

Another method for multiple comparison , like FDR and Bonferroni

```
> TukeyHSD(tear.aov, "time")
```

Tukey multiple comparisons of means
95% family-wise confidence level

Fit: aov(formula = tear.lm)

R codes

```
$time
      diff      lwr      upr      p adj
2-1  7.2353571  6.1406971  8.3300171 0.0000000
3-1  3.9667857  2.8721257  5.0614457 0.0000000
4-1  1.3914286  0.2967686  2.4860886 0.0058827
5-1  0.8903571 -0.2043029  1.9850171 0.1645008
3-2 -3.2685714 -4.3632314 -2.1739114 0.0000000
4-2 -5.8439286 -6.9385886 -4.7492686 0.0000000
5-2 -6.3450000 -7.4396600 -5.2503400 0.0000000
4-3 -2.5753571 -3.6700171 -1.4806971 0.0000001
5-3 -3.0764286 -4.1710886 -1.9817686 0.0000000
5-4 -0.5010714 -1.5957314  0.5935886 0.7031749
```