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Assignment 2 (Longitudinal Data Analysis)

1. BACKGROUND/RATIONALE FOR THE STUDY

Infants that are born to HIV positive mothers would require early HIV diagnostics as well as immediate treatment. The objective of this study was to determine the evolution of the length of infants born to HIV positive mothers and to study the effects of various explanatory variables

on their evolution.

2. RESEARCH METHODOLOGY

A Longitudinal data analysis was conducted on this study, focusing on infants that had two or more measurements taken from 571 infants. For significance purposes, two explanatory variables were removed from this study due to insignificant p-values from various general linear models. These variables included the maternal viral load group, as well as whether the mother was started on ARV treatment within four weeks of delivery. Various frequency plots were implemented in order to show the relationship between an infant that was born prematurely, being born below normal body weight, or whether the mother was symptomatic at the time of birth. A summary statistics table was also created to identify various statistics such as the mean, standard deviation as well as the maximum and minimum values between length and age of the infants. After careful consideration of different summary statistics and distribution models, a sample was taken from the population and only infants aged 0-300 days old were used for research purposes as there weren't enough infants born above 300 that

would have made an impact to the dataset.

3. Results

It was concluded that a mother with HIV did not in fact contribute to a difference in the infant's length overtime. Instead, we found that a child born prematurely or under the below normal techniques in the second contribute to a difference in the infant's

body weight had an increasingly smaller length overtime.

Appendix

Summary Statistics

run;

```
/*creates an output of 2 or more measurements per patient*/
proc sort data= lendata
            out= lent dat nouniquekey;
by ID;
proc print data=lent_dat;
run;
    identify how many patients are in the dataset that have two or more
measurements */
title "Number of infants per two measurements";
proc sql;
   create table new as
     select count(distinct(ID)) as Patient
            from lent dat;
                  proc print data=new;
quit;
                 Number of infants per two measurements
                              Obs Patient
                                    571
                                             Figure 1.1
/* identify significant p-values */
proc glm data = lent_dat;
      class Preamture;
            model Premature = TreatLess4Weeks VLGroup Symptomatic
      LowBWeight ;
output out = lent_Pr;
```

				The G	LM Pr	ocedu	ıre				
		D	epe	endent \	Varial	ole: Pr	ematur	е			
Source		DF	Sı	ım of S	quare	s Me	an Squ	are	F Val	lue	Pr >
Model		4		8.66	72370	2	2.166809	925	21	.42	<.000
Error		229		23.16	18228	1	0.101143	333			
Corrected	Total	233		31.82	90598	3					
	R-Squ	210	Co	peff Var Root		MCE	Droma	turo	Moar		
	0.272			5.8398		18030	Fiellia		162393		
	0.212	300	13	5.0530	0.5	10030		0.	10233	,	
Source			DF	Туре	I SS	Mear	Square	e F	Value	e F	Рr > F
TreatLe	ss4We	eks	1	0.0406	6697	0.04066697		7	0.40		.5267
VLGrou	р		1	0.0542	0.05421894		0.05421894		0.54 0		.4648
Sympto	matic		1	3.29123231		3.2	3.29123231		32.54 <		.0001
LowBW	leight		1	5.2811	5.28111879 5.28111879		9	52.21 <		.0001	
Source			DF	Type I	II SS	Mear	n Squar	e F	Value	e l	Pr > F
TreatLe	ss4We	eks	1	0.01333037		0.	0133303	7	0.1	3 (.7169
VLGrou	р		1	0.0148	31317	0.	0.01481317		0.1	5 (0.7023
Sympto	matic		1	0.00502236		0.	0.00502236		0.0	5 (0.8239
LowBW	eight		1	5.2811	1879	5.28111879		9	52.21		<.0001
Param	eter			Estir	nate	Sta	ndard Error	t V	/alue	Pr	> t
Interce	pt		0.	0.1028868837		0.04	724135		2.18	0.0	0304
TreatL	ess4W	eeks		0378085953		0.10	0414492		-0.36	0.7	7169
VLGrou	ир			0106077049		0.02	2771827		-0.38	0.7	7023
Sympto	omatic			019207	3265	0.08	619491		-0.22	0.8	3239
LowBV	Veight		0.	561371	2150	0.07	768833		7.23	<.(0001

Figure 1.2

From the output above, it is clear that we can remove two explanatory variables, these being VLGroup and TreatLess4Weeks. This is evident due to their p-values being greater than 0.05. On the other hand, Premature, Symptomatic and LowBWeight have p-values less than 0.05 making these explanatory variables highly significant.

Frequenc
Percent
Row Pct
Col Pct

су	Table 1 of Premature by Symptomatic								
	Controlling for LowBWeight=0								
		Symptomatic							
	Premature	0	1	Total					
	0	362	11	373					
		89.83	2.73	92.56					
		97.05	2.95						
		92.82	84.62						
	1	28	2	30					
		6.95	0.50	7.44					
		93.33	6.67						
		7.18	15.38						
	Total	390	13	403					
		96.77	3.23	100.00					
	Freque	ency Mis	sing = 2	7					

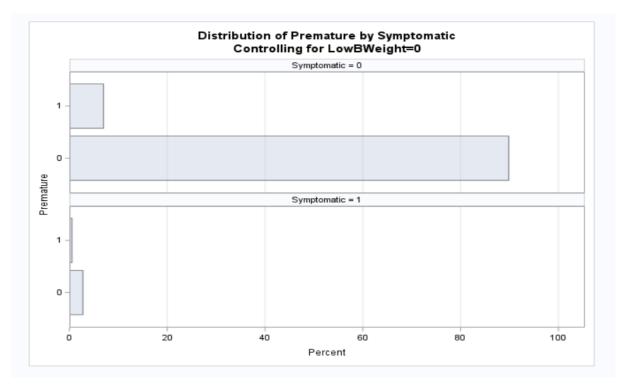


Figure 1.3

Table 1: Given that the infant was born at a normal birth weight

- 6.95 percent of infants were premature given that the mother was not symptomatic
- 89.83 percent of infants were not premature given that the mother was not symptomatic
- 0.50 percent of infants were premature given that the mother was symptomatic
- 2.73 percent of infants were not premature given that the mother was symptomatic

We can therefore conclude that if the infant was born at a normal birth weight, majority of the infants had a non-symptomatic mother and were not born prematurely

Frequency	Table 2 of Premature by Symptomatic							
Percent Row Pct Col Pct	Controlling for LowBWeight=1							
		Sy	mptoma	atic				
	Premature	0	1	Total				
	0	17	28	45				
		17.17	28.28	45.45				
		37.78	62.22					
		45.95	45.16					
	1	20	34	54				
		20.20	34.34	54.55				
		37.04	62.96					
		54.05	54.84					
	Total	37	62	99				
		37.37	62.63	100.00				
	Frequency Missing = 5							

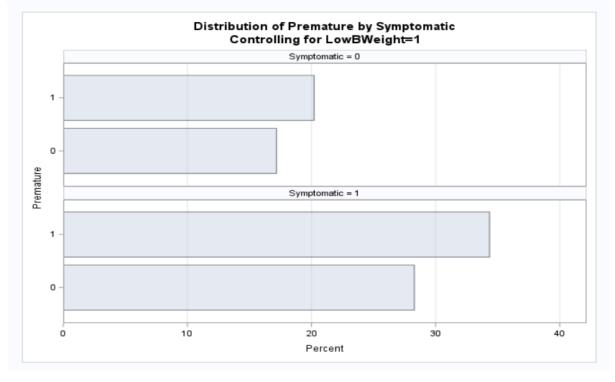


Figure 1.4

Interpretation:

Table 2: Given that the infant was born below the normal birth weight

- 20.20 percent of infants were premature given that the mother was not symptomatic
- 17.17 percent of infants were not premature given that the mother was not symptomatic
- 34.34 percent of infants were premature given that the mother was symptomatic

• 28.28 percent of infants were not premature given that the mother was symptomatic

We can therefore conclude that if the infant was born below the normal birth weight, majority of the infants had a symptomatic mother and were born prematurely.

```
/* plot summary statistics */
proc means data=len_main ;
var length age;
run:
```

The MEANS Procedure							
Variable	N	Mean	Std Dev	Minimum	Maximum		
Length	2378	61.2377628	6.7056544	34.0000000	80.8000000		
Age	2935	124.6918789	110.2271074	0	528.1875000		

Figure 1.5

Interpretation:

- The average length is 61.24 which gives a sense that that data could be normally distributed since it lies between the maximum and minimum values.
- The average age is 125 days old with a standard deviation of 110.23. Due to the
 average being significantly lower than the maximum age of 528 days and a low
 standard deviation, it is required that we extract a portion of age that will provide us
 with the best results when doing further analysis.

```
/* extacting which age to use */
data len_new;
    set len_main;
    if age>=300 then delete;
proc print data=len_new;
run;

/* Distribution of Age*/
data lent_age;
set len_new;
if age in ("0") then delete;
run;
```

```
title 'Distribution of Age';
proc sgplot data=lent_age;
histogram Age;
density age / type=normal;
density age/ type=kernel;
keylegend / location=inside
position=topright across=1;
run;
```

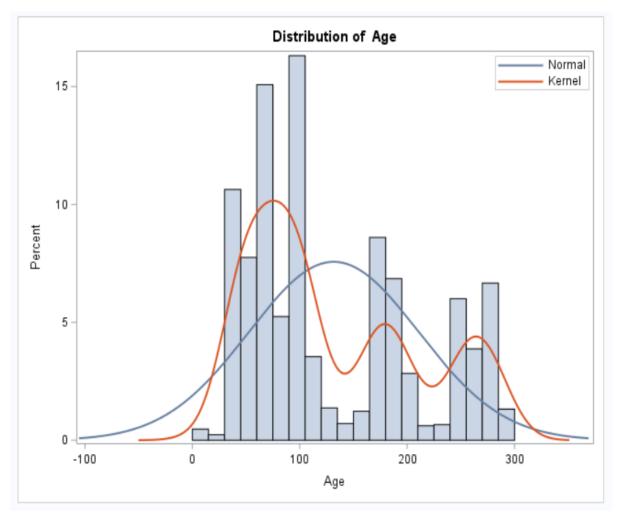


Figure 1.6

```
/* Age by Sex */
title 'Age by Sex';
proc sgpanel data=len_gen;
panelby gender / layout=columnlattice
onepanel novarname;
histogram age /
fillattrs=graphdata3;
run;
```

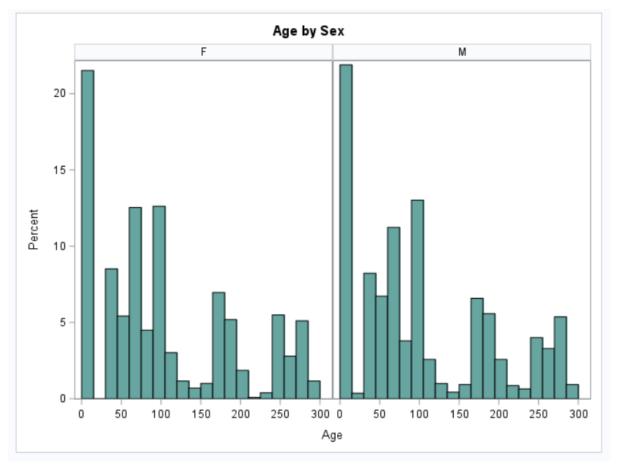


Figure 1.7

After extracting the age from 0-300 days old we can then plot the new distribution. The distribution of age is also skewed to the right (positively skewed) giving us an indication that most of the infants age is clustered around the left tail of the distribution. This is also evident when we model the distribution per male and female.

```
/* Distribution of Length*/
title 'Distribution of length';
    proc sgplot data=lent_dat;
        histogram length;
density length / type=normal;
density length/ type=kernel;
    keylegend / location=inside
        position=topright across=1;
run;
```

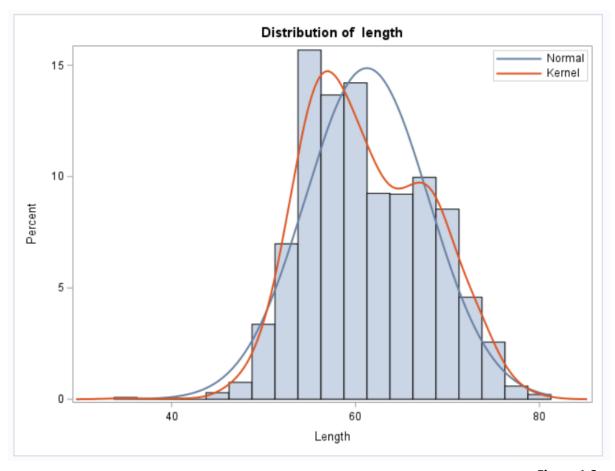


Figure 1.8

```
data len_gen;
    set len_new;
retain gender_new;
by id;
if first.id then gender_new=gender;
else gender=gender_new;
drop gender_new;
```

```
proc print data=len_gen;
run;

/* Length by Sex */

title 'Length by Sex';
proc sgpanel data=len_gen;
 panelby gender / layout=columnlattice
  onepanel novarname;
  histogram length /
  fillattrs=graphdata3;
  run;
```

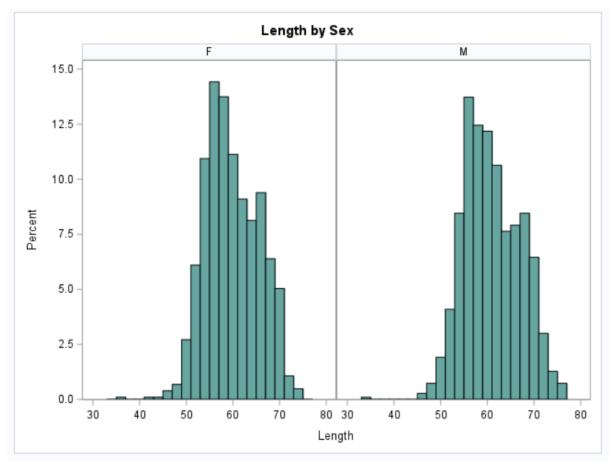


Figure 1.9

Similar to that of age, the distribution of length is also slightly skewed to the right (positively skewed) giving us an indication that most of the infants have a length clustered around the left tail of the distribution. This is also evident when we model the distribution per male and female.

Formulating a Plausible Random-Effects Model:

Before plotting the model, it is important to identify the relationship between the explanatory variables and the length of each infant given its age.

Code:

```
data len pr;
     set len gen;
retain pr new;
by id;
if first.id then pr new=premature;
else premature=pr_new;
drop pr new;
run;
data len sym;
     set len_pr;
retain sym new;
by id;
if first.id then sym new=Symptomatic;
else Symptomatic=sym new;
drop sym new;
run;
data len exp;
     set len sym;
retain Lowbw new;
by id;
if first.id then Lowbw new=LowBWeight;
else LowBWeight=Lowbw new;
drop Lowbw new;
proc print data=len exp;
run;
data loes_main_1;
set len_exp;
where Premature=1 and Symptomatic=1 and LowBWeight=1;
proc print data=loes main 1;
run;
```

```
data loes_main_2;
set len exp;
where Premature=0 and Symptomatic=1 and LowBWeight=1;
proc print data=loes main 2;
run;
data loes main 3;
set len exp;
where Premature=\mathbf{1} and Symptomatic=\mathbf{0} and LowBWeight=\mathbf{1};
proc print data=loes main 3;
run;
data loes main 5;
set len exp;
where Premature=0 and Symptomatic=0 and LowBWeight=1;
proc print data=loes main 5;
run;
data loes main 6;
set len exp;
where Premature=1 and Symptomatic=0 and LowBWeight=0 ;
proc print data=loes main 6;
run;
data loes_main_7;
set len exp;
where Premature=0 and Symptomatic=1 and LowBWeight=0 ;
proc print data=loes main 7;
run;
data loes main 8;
set len exp;
where Premature=0 and Symptomatic=0 and LowBWeight=0;
proc print data=loes main 8;
run;
```

```
* Plot individual profiles(1);
proc sort data = loes main 1;
by group;
run;
goptions reset=all ftext=simplex rotate=landscape i=join;
option nobyline;
proc gplot data = loes main 1;
plot length*age=id/haxis=axis1 vaxis=axis2 nolegend;
axis1 label=(h=2 'Age (days)');
axis2 label=(h=2 A=90 'Length');
title1 h=2 'Premature=1 Symptomatic=1 LowBWeight=1';
run; quit;
* Plot individual profiles(2);
proc sort data = loes main 2;
by group;
run;
goptions reset=all ftext=simplex rotate=landscape i=join;
option nobyline;
proc gplot data = loes main 2;
plot length*age=id/haxis=axis1 vaxis=axis2 nolegend;
axis1 label=(h=2 'Age (days)');
axis2 label=(h=2 A=90 'Length');
title1 h=2 'Premature=0 Symptomatic=1 LowBWeight=1';
run; quit;
* Plot individual profiles(3);
proc sort data = loes main 3;
by group;
run;
goptions reset=all ftext=simplex rotate=landscape i=join;
option nobyline;
proc gplot data = loes main 3;
plot length*age=id/haxis=axis1 vaxis=axis2 nolegend;
axis1 label=(h=2 'Age (days)');
axis2 label=(h=2 A=90 'Length');
title1 h=2 'Premature=1 Symptomatic=0 LowBWeight=1';
```

```
run; quit;
* Plot individual profiles(5);
proc sort data = loes main 5;
by group;
run;
goptions reset=all ftext=simplex rotate=landscape i=join;
option nobyline;
proc gplot data = loes_main_5;
plot length*age=id/haxis=axis1 vaxis=axis2 nolegend;
axis1 label=(h=2 'Age (days)');
axis2 label=(h=2 A=90 'Length');
title1 h=2 'Premature=0 Symptomatic=0 LowBWeight=1';
run; quit;
* Plot individual profiles(6);
proc sort data = loes main 6;
by group;
run;
goptions reset=all ftext=simplex rotate=landscape i=join;
option nobyline;
proc gplot data = loes main 6;
plot length*age=id/haxis=axis1 vaxis=axis2 nolegend;
axis1 label=(h=2 'Age (days)');
axis2 label=(h=2 A=90 'Length');
title1 h=2 'Premature=1 Symptomatic=0 LowBWeight=0';
run; quit;
* Plot individual profiles(7);
proc sort data = loes main 7;
by group;
run;
goptions reset=all ftext=simplex rotate=landscape i=join;
option nobyline;
proc gplot data = loes_main_7;
plot length*age=id/haxis=axis1 vaxis=axis2 nolegend;
axis1 label=(h=2 'Age (days)');
axis2 label=(h=2 A=90 'Length');
title1 h=2 'Premature=0 Symptomatic=1 LowBWeight=0';
run; quit;
```

Output:

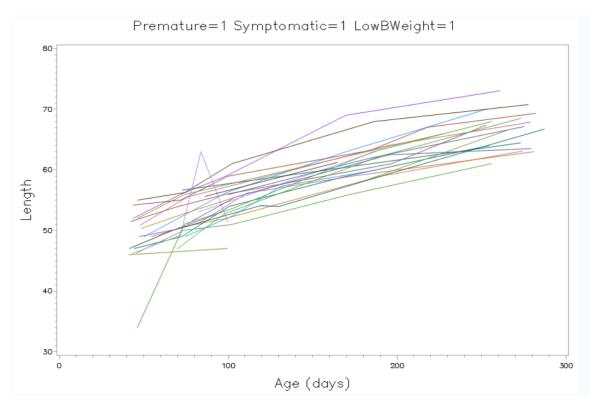


Figure 2.1

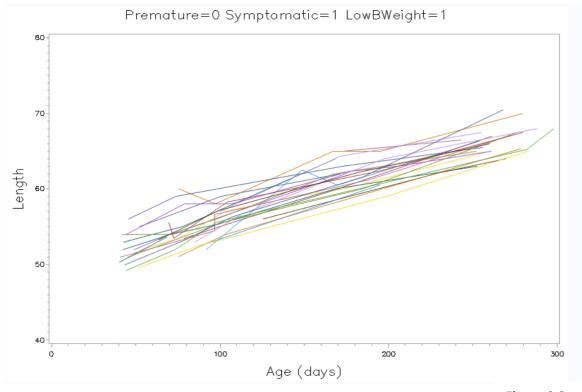


Figure 2.2

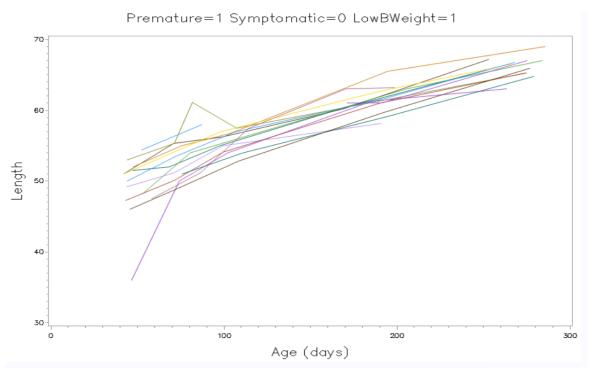


Figure 2.3

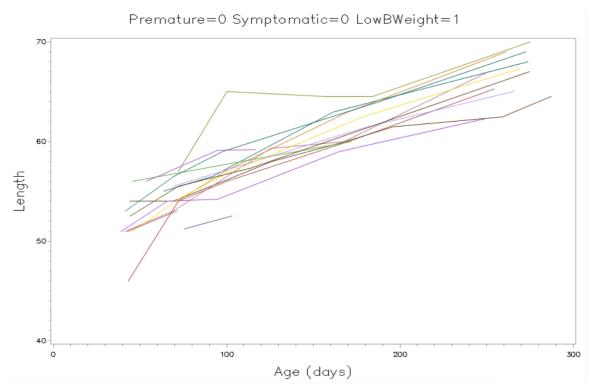


Figure 2.4

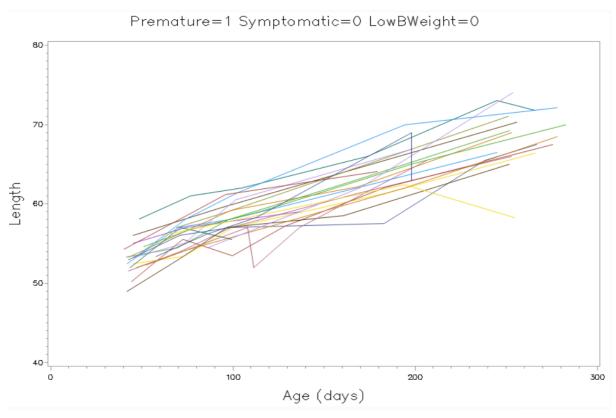
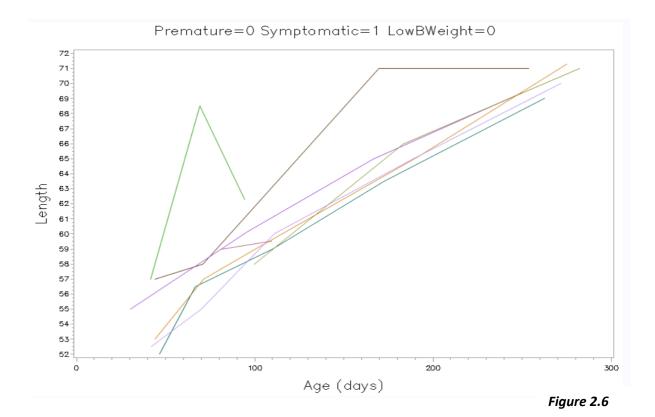


Figure 2.5



From above, it is evident that the explanatory variables can impact the infant's growth in terms of length over time. Majority of the results show that as the infant gets older, the length of the infant gets bigger. *Figure 2.4* is the only figure above that does not show a drop in length of a single infant over time whereas in the other figures there is at least one infant that has a drop in length. We can therefore say that an infant born prematurely to a symptomatic mother will not necessarily have a decrease in its length over time.

Another important observation to take notice of is the length range of the infants over the days. The two biggest differences were that of *figure 2.3 and 2.6*. In *figure 2.3*, the length of the infants are fairly low in comparison to that of the other graphs with a minimum of around 35cm and a maximum of 68cm. In *figure 2.6*, the length of the infants are fairly high with a minimum of around 52cm and a maximum of 71cm. We can therefore say that infants born prematurely and under the below normal body weight will have a smaller length and growth over time, whereas an infant that had a symptomatic mother but no other defects will grow faster in length over time.

Exploring the mean structure of the dataset:

Once the data has been manipulated, we need to determine whether the data is balanced or unbalanced. If the data is balanced, averages can be calculated for each occasion separately and standard errors for the means can be added.

```
* Average evolution with standard error bars;
goptions reset=all ftext=simplex rotate=landscape;

proc gplot data=len_exp;
plot length*age/ haxis=axis1 vaxis=axis2;
symbol c=blue i =std1mjt w=2 mode=include;
axis1 label=(h=2 'Age (Days)') order=(0 to 300 by 60) minor=none;
axis2 label=(h=2 A=90 'Length') minor=none;
title h=2 'Average evolution, with standard errors of means';
run; quit;
```

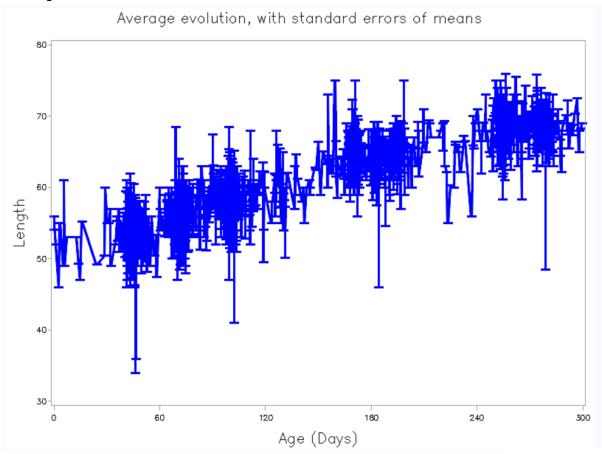


Figure 2.7

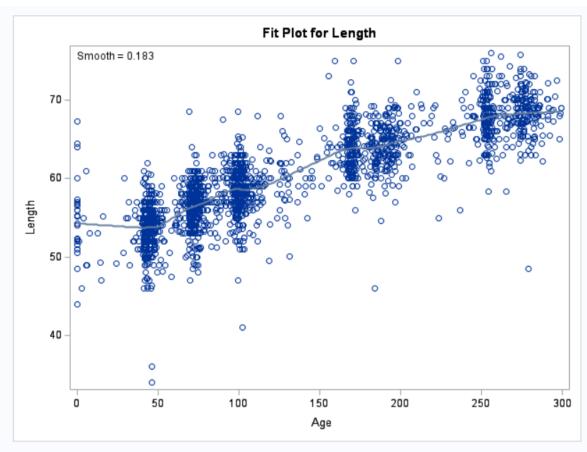
Interpretation: It is clear that the data is unbalanced. Therefore we need discretize the age scale and use sample averaging within intervals. This can be done using smoothing techniques to estimate the average evolution non-parametrically.

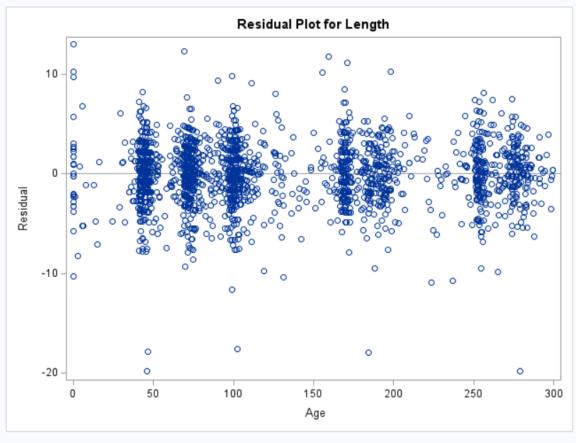
```
* Loess smooth overall;
proc loess data = len exp;
ods output scoreresults=out;
model length=age;
score data=len exp;
run;
proc sort data=out;
by age;
run;
goptions reset=all ftext=simplex rotate=landscape;
proc gplot data=out;;
plot p_length*age / overlay haxis = axis1 vaxis = axis2;
symbol1 c=red i=join w=2;
axis1 label=(h=2 'Age') minor=none;
axis2 label=(h=2 a=90 'length') minor=none;
title h=3 'Loess Smoothing';
run; quit;
```

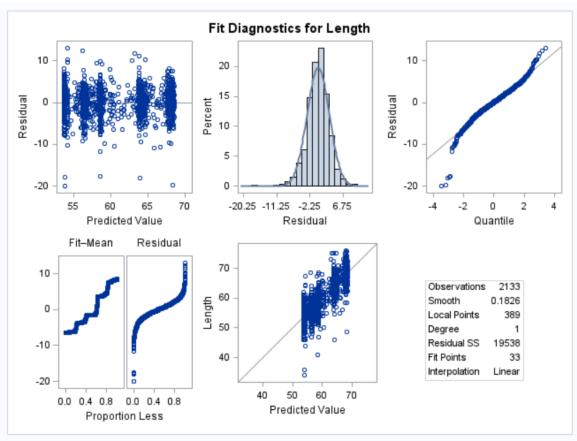
Loess Smoothing

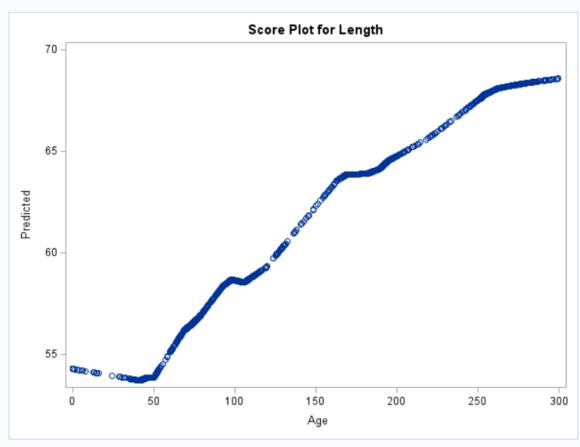
The LOESS Procedure Selected Smoothing Parameter: 0.183 Dependent Variable: Length

Fit Summary				
kd Tree				
Linear				
2133				
33				
77				
1				
0.18261				
389				
19538				
11.89560				
0.00434				
3.22702				









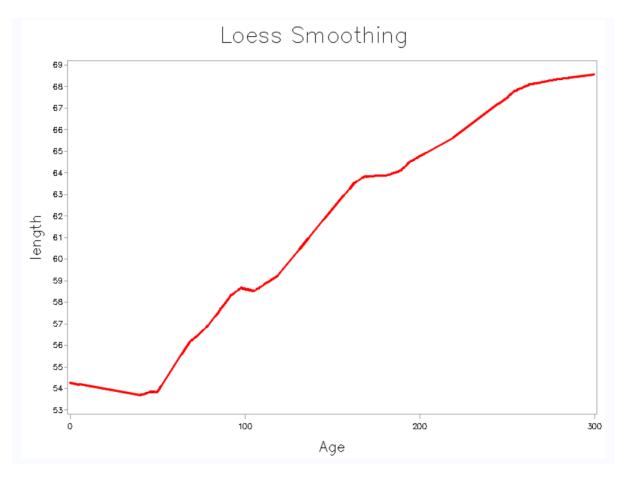


Figure 2.8

In this figure, we can identify a positive correlation between both age and length and we can see a continuously increasing pattern over time even though there was evidence of multiple outliers when observing the residual plot.

We will now fit linear mixed models in order to identify which model is the best model to use with the given data set:

```
proc mixed data=len_exp noclprint;
class id;
model length=age premature age*premature symptomatic age*symptomatic
LowBWeight age*LowBWeight / s;
random intercept age/ type=un subject=id g v;
repeated / type=simple subject=id r rcorr;
title 'Kidney: Random Intercept + Slope, Simple';
run;
```

Solution for Fixed Effects								
Effect	Estimate	Standard Error	DF	t Value	Pr > t			
Intercept	52.3780	0.1383	493	378.72	<.0001			
Age	0.06370	0.000764	419	83.37	<.0001			
Premature	-2.5547	0.3883	934	-6.58	<.0001			
Age*Premature	0.008648	0.002117	934	4.09	<.0001			
Symptomatic	-0.1574	0.4709	934	-0.33	0.7382			
Age*Symptomatic	0.004686	0.002651	934	1.77	0.0774			
LowBWeight	-2.8088	0.4464	934	-6.29	<.0001			
Age*LowBWeight	-0.00097	0.002510	934	-0.39	0.6998			

Type 3 Tests of Fixed Effects								
Effect Num DF Den DF F Value Pr >								
Age	1	419	6950.07	<.0001				
Premature	1	934	43.29	<.0001				
Age*Premature	1	934	16.69	<.0001				
Symptomatic	1	934	0.11	0.7382				
Age*Symptomatic	1	934	3.12	0.0774				
LowBWeight	1	934	39.59	<.0001				
Age*LowBWeight	1	934	0.15	0.6998				

Figure 2.9

Comment: Since certain p-values are greater than 0.05 we need to remove them in order to achieve the best model.

```
proc mixed data=len_exp noclprint;
class id;
model length=age premature age*premature LowBWeight / s;
random intercept age/ type=un subject=id g v;
repeated / type=simple subject=id r rcorr;
title 'Kidney: Random Intercept + Slope, Simple';
run;
```

Estimated V Matrix for ID 3							
Row	Col1	Col2	Col3				
1	6.8725	3.5170	3.4986				
2	3.5170	7.9493	4.3228				
3	3.4986	4.3228	7.6525				

Covariance Parameter Estimates					
Cov Parm	Subject	Estimate			
UN(1,1)	ID	3.4121			
UN(2,1)	ID	-0.00093			
UN(2,2)	ID	0.000042			
Residual	ID	3.4663			

Fit Statistics				
-2 Res Log Likelihood	8534.2			
AIC (Smaller is Better)	8542.2			
AICC (Smaller is Better)	8542.3			
BIC (Smaller is Better)	8559.1			

Solution for Fixed Effects								
Effect	Estimate	Standard Error	DF	t Value	Pr > t			
Intercept	52.3589	0.1360	497	384.90	<.0001			
Age	0.06402	0.000735	424	87.12	<.0001			
Premature	-2.5739	0.3677	944	-7.00	<.0001			
Age*Premature	0.008866	0.001826	944	4.85	<.0001			
LowBWeight	-2.6828	0.2917	944	-9.20	<.0001			

Туре	3 Tests o	f Fixed E	ffects		
Effect	Num DF	Den DF	F Value	Pr > F	
Age	1	424	7589.67	<.0001	
Premature	1	944	49.01	<.0001	
Age*Premature	1	944	23.57	<.0001	
LowBWeight	1	944	84.59	<.0001	

Although this model looks fairly good due to significant p-values, it is important to test other methods of modelling and then choose the best model from this. This can be done by looking at the Akaike information criterion (AIC) and the Bayesian information criterion (BIC) of each model.

Comparisons between different models were made and one model in particular had a smaller AIC and BIC than the model above. This was achieved by taking an AR(1).

```
proc mixed data=len_exp noclprint;
class id;
model length=age premature age*premature LowBWeight / s;
random intercept age/ type=un subject=id g v;
repeated / type=AR(1) subject=id r rcorr;
title 'Kidney: Random Intercept + Slope, Simple';
run;
```

		Esti	ma	ated R	Mat	rix f	or ID	3		
		Row		Col1	C	ol2	Col3			
		1	4	4.1520	0.8	295	0.165	7		
		2	(0.8295	4.1	520	0.829	5		
		3	(0.1657	0.8	295	4.152	20		
	Es	timat	ed	l R Cor	rela D 3	tion	Matri	x f	or	
	R	ow		Col1	Col2		Co		ol3	
		1	1	1.0000 0.		1998	998 0.0		3991	
		2	0).1998 1.		0000	0.	0.1998		
		3	0.03991		0.1998		1.0000		00	
			Es	timate	d G	Mat	rix			
Row	E	ffect		study_id		Col1			Col2	
1	Ir	nterce	pt	3		2.3780		0	0.003543	
2	A	ge		3		0.003543		6.197E-6		
		Esti	ma	ated V	Mat	rix f	or ID :	3		
		Row	w Col1		Col2		Col3			
		1	(6.8271	4.0	455	3.292	20		
		2	4	4.0455	8.0	349	4.601	8		
		3	3	3.2920	4.6	018	7.817	2		

	Estir	nated	ıvı	Matrix	for	ID:	3			
F	low	w Col		Col2	Col2		13			
	1 6.8		271 4.0455 3		3.2920					
	2	4.04	55	8.0349	4	1.601	18			
	3	3.29	20	4.6018	7	7.817	72			
								ı		
		ance Parameter Es								
	/ Pa			ubject		Estimate				
	(1,1)	ID				2.3780				
	(2,1)		ID				3543			
	(2,2)		ID ID		- (6.197E-6 0.1998				
AR										
Res	sidua	al				4.	1520			
	Fit Statistics									
-2	Res	Log Likelihood				8519.8				
Ald	C (Si	Smaller is Better)				852	29.8			
AIG	CC (Small	ler i	s Bette	er)	852	29.8			
BIG	C (Si	maller is Better)				8550.9				
		odel Likelihood Ratio Test								
DI		Chi-Square P			'r >	> ChiSq				
4	1	550.10				<.00	001			
	Sol	lution	for	Fixed	Effe	ects				
Effect	Est	Stimate		Standard Error		DF t Va		lue Pr>		t
Intercept	52.367		0.1372		2 4	497	381	.62	62 <.0001	
Age	0.063		6 0.000731		1 4	424	86	6.91 <.000		01
Premature	-2	2.5665		0.3710		944	-6.92		<.0001	
Age*Premature	0.0	08628		0.001819		944	4.74		<.0001	
LowBWeight	-2	2.6742		0.2925		944	-9.14		<.0001	
	Tyne	3 Tes	sts o	of Fixed	l Fi	ffect	s			
Effect				3 Tests of Fixed				Pr > F		
	Age Premature Age*Premature			1 424						
				1 944		4 47.86		<.0001		
LowBWeigh		1			14		3.61			
Londinoigh	-		•							

Figure 2.11

It is clear that the AIC and BIC are smaller in the model above than that of the previous model making this the best model of our choice.

Model in equation format:

 $\beta 0$ = intercept

 $\beta 1Ai$ = intercept for age

 β 2Pj = intercept for premature

 $\beta 3AiPj$ = common slope for age and premature

 β 4Lt = intercept for LowBWeight

$$Yijt = \beta 0 + \beta 1Ai + \beta 2Pj + \beta 3AiPj + \beta 4Lt + \epsilon ijt$$

$$Yijt = 52.3674 + 0.06356Ai - 2.5665Pj + 0.008628AiPj + -2.6742Lt$$