Tooth Growth

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Statistical Inference Course Project: Part 2

Problem Statement - Statistics Inference 2

Now in the second portion of the class, we're going to analyze the ToothGrowth data in the R datasets package. 1. Load the ToothGrowth data and perform some basic exploratory data analyses

- 2. Provide a basic summary of the data.
- 3. Use confidence intervals and hypothesis tests to compare tooth growth by supp and dose. (Use the techniques from class even if there's other approaches worth considering)
- 4. State your conclusions and the assumptions needed for your conclusions.

Load Data

```
data (Tooth Growth)
head (ToothGrowth)
##
      len supp dose
## 1
     4.2
            VC 0.5
## 2 11.5
            VC 0.5
## 3 7.3
           VC 0.5
## 4 5.8
            VC 0.5
## 5 6.4
            VC 0.5
## 6 10.0
            VC 0.5
```

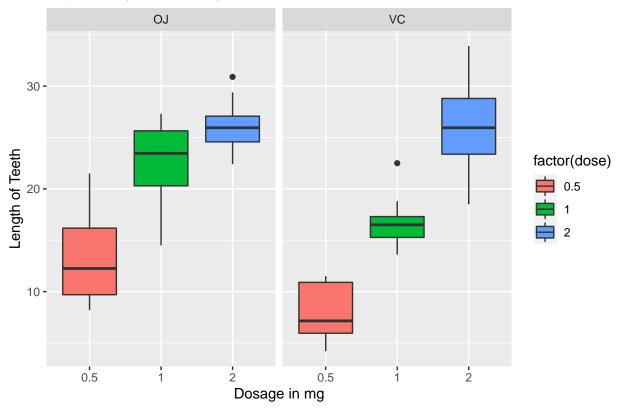
Solution for Q1

```
require(ggplot2)

## Loading required package: ggplot2

g1 <- ggplot(ToothGrowth, aes(x = factor(dose), y = len,fill = factor(dose)))
g1 + geom_boxplot() + facet_grid(.~supp) +
        scale_x_discrete("Dosage in mg") +
        scale_y_continuous("Length of Teeth") +
        ggtitle("Exploratory Data Analysis")</pre>
```

Exploratory Data Analysis



Solution for Q2

Basic summary of the data.

```
ToothGrowth$dose <- as.factor(ToothGrowth$dose)
summary(ToothGrowth)</pre>
```

```
##
         len
                             dose
                    supp
                            0.5:20
##
           : 4.20
                    OJ:30
##
   1st Qu.:13.07
                    VC:30
                            1 :20
  Median :19.25
                               :20
##
##
   Mean
           :18.81
##
    3rd Qu.:25.27
           :33.90
##
   Max.
```

table(ToothGrowth\$supp, ToothGrowth\$dose)

Solution for Q3

Equal Var

We perform Null Hypothesis Test

p-values for both equal and unequal variance t test > 5%. We can neither accept nor reject the Null

```
dose.05 <- ToothGrowth[which(ToothGrowth$dose == .5),1]
dose.10 <- ToothGrowth[which(ToothGrowth$dose == 1),1]
dose.20 <- ToothGrowth[which(ToothGrowth$dose == 2),1]
dose0510.t1 <- t.test(dose.05, dose.10, paired = F, var.equal = T)
dose0510.t2 <- t.test(dose.05, dose.10, paired = F, var.equal = F)
dose0510.result <- data.frame("p-value" = c(dose0510.t1$p.value, dose0510.t2$p.value),"Conf-Low" = c(do
dose0520.t1 <- t.test(dose.05, dose.20, paired = F, var.equal = T)
dose0520.t2 <- t.test(dose.05, dose.20, paired = F, var.equal = F)
dose0520.result <- data.frame("p-value" = c(dose0520.t1$p.value, dose0520.t2$p.value),"Conf-Low" = c(do
dose1020.t1 <- t.test(dose.10, dose.20, paired = F, var.equal = T)
dose1020.t2 <- t.test(dose.10, dose.20, paired = F, var.equal = F)
dose1020.result <- data.frame("p-value" = c(dose1020.t1$p.value, dose1020.t2$p.value),"Conf-Low" = c(do
dose.result <- rbind(dose0510.result,dose0520.result,dose1020.result)
dose.result</pre>
```

```
## Equal Var 1.266297e-07 -11.983748 -6.276252 0.5 to 1 ## Unequal Var 1.268301e-07 -11.983781 -6.276219 0.5 to 1 ## Equal Var1 2.837553e-14 -18.153519 -12.836481 0.5 to 2 ## Unequal Var1 4.397525e-14 -18.156167 -12.833833 0.5 to 2 ## Equal Var2 1.810829e-05 -8.994387 -3.735613 1 to 2 ## Unequal Var2 1.906430e-05 -8.996481 -3.733519 1 to 2
```

0.06039337 -0.1670064 7.567006

hypothesis. So it is not clear that the difference exists between OJ and VC groups.

Unequal Var 0.06063451 -0.1710156 7.571016

Above table shows that dosages significantly impacts tooth growth.

- 1. p-values are very small.
- 2. Confidence interval donot contain 0

So, we can reject the null hypothesis and state that higher dosage tends to result in higher tooth length

Solution Q4

We can conclude that across supplements for each dose:

- $1.\ 2\mathrm{mg}$ dose has larger impact on tooth growth than $1\mathrm{mg}$ and $0.5\mathrm{mg}$
- 2. 1mg dose has more impact than 0.5mg dose.
- 3. we cannot say that orange juice and vitamin C have obvious different impact on tooth growth

Conclusions

Both the confidence intervals and hypothesis tests indicate that at lower dosages, specifically 0.5 mg and 1 mg, the Orange Juice delivery method results in longer teeth than the Ascorbic Acid. However, at higher dosages, specifically 2 mg, there appears to be little difference and certainly not enough to reject the null hypothesis that they have the same effect.

However, the plot of means and confidence intervals does hint at a flattening out of effectiveness when using the Orange Juice method at a faster rate than when using the Ascorbic Acid method. This might warrant further exploration to see if Ascorbic Acid results in greater tooth length than Orange Juice and higher dosages.