# bayes' rule & diagnostic testing



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## early HIV testing in the military

- In first screen with ELISA
- if positive, two more rounds of ELISA
- if either positive, two Western blot assays
- only if both positive, determine HIV infection

## data

### ELISA

- > sensitivity (true positive): 93%
- > specificity (true negative): 99%

$$A + 1 HIN = 0.93$$
  
 $A - 1 no HIN = 0.99$ 

### Western blot

- sensitivity: 99.9%
- > specificity: 99.1%

prevalence: 1.48 / 1000 P(HIV) = 0.00148

 $P(has\ HIV\ |\ ELISA\ +)=?$ 

#### Sources:

- Petricciani (1985). Licensed tests for antibody to human T-lymphotropic virus type III: sensitivity and specificity. Annals of internal medicine, 103(5), 726-729.
- Burke et. al. (1987). Diagnosis of human immunodeficiency virus infection by immunoassay using a molecularly cloned and expressed virus envelope polypeptide: comparison to Western blot on 2707 consecutive serum samples. Annals of internal medicine, 106(5), 671-676.
- Burke et. al. (1987). Human immunodeficiency virus infections among civilian applicants for United States military service, October 1985 to March 1986. New England Journal of Medicine, 317(3), 131-136.

## prior probability

Prior to any testing, what probability should be assigned to a recruit having HIV?

## posterior probability

When a recruit goes through HIV screening there are two competing claims: recruit has HIV and recruit doesn't have HIV. If the ELISA yields a positive result, what is the probability this recruit has HIV?

## posterior probability

