Fixed-Effect Analysis of Baseline Serum Creatinine across sex and blood pressure levels **Azuka Atum**

Background: Context

CKD, also known as chronic kidney disease, or colloquially known as "kidney disease" is a condition in which the kidneys are damaged and cannot filter blood^[1]. As a results, fluid and waste from blood remain in the body for longer than they should and can lead to other illnesses such as heart disease.

According to the CDC, every 24 hours 360 people begin dialysis treatment for kidney failure^[2], or for every 1 hour, 15 people go on dialysis. Additionally, it is a leading cause of death in the United States, costing Medicare beneficiaries \$87.2 billion dollars^[3]. More than 1 in 7 (37 million) US adults are estimated to have CKD^[4].

Source:

- CKD FACTS
- 2. Kidney Disease Surveillance System
- 3. <u>Chronic Kidney Disease in the United</u> States, 2023

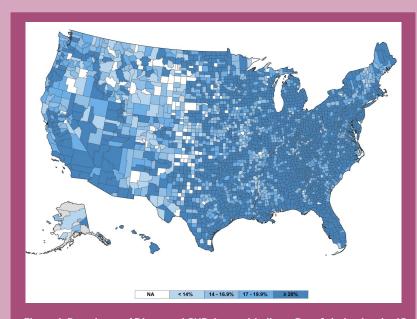


Figure 1. Prevalence of Diagnosed CKD Among Medicare Beneficiaries Aged \geq 65 Years, by U.S. State and County.

Background: Context

There are 5 stages of CKD, each one being worse than the last^[5]. Each stage is characterized by eGFR (estimated glomerular filtration rate) and an additional marker, such as proteinuria and/or hematuria.^[6]

A nephrologist will typically order a series of blood and urine tests in order to assess kidney function. Common measures include but are not limited to: **creatinine**, **eGFR**, **and blood urea nitrogen** (**BUN**)^[7].

There are many factors that can impact risk of CKD, such as creatinine levels, sex, and blood pressure level. Blood pressure especially, as kidney disease is closely associated with high blood pressure [8]. Also, creatinine is a waste product that is solely handled and filtered out by the kidneys [9]. A high creatinine concentration in the blood indicates that there is an issue in the kidneys [10].

There is a question of whether there is an observable difference in the effect between sex and baseline diastolic blood pressure in across sex between men and women.



Stage 1 CKD

eGFR 90 or higher **and** kidney damage

(e.g. uACR 30 or higher) for 3 months or more



Stage 2 CKD

eGFR 60-89 and kidney damage (e.g. uACR 30 or higher) for 3 when for 3 months or more



Stage 3a CKD

Mild to moderate loss of kidney function (eGFR 45-59 for 3 months or more)



Stage 3b CKD

Moderate to severe loss of kidney function

(eGFR 30-44 for 3 months or more)



Stage 4 CKD

Severe loss of kidney function (eGFR 15-29 for 3 months or more)



Stage 5 CKD

Kidney failure (eGFR less than 15 for 3 months or more)

or you are on dialysis

Figure 2. There are 5 stages of CKD.

Background: Dataset

- https://www.kaggle.com/datasets/davidechicco/chronic-kidneydisease-ehrs-abu-dhabi/
- Contains variables:
- ❖ Electronic medical records of 491 patients collected at the Tawam Hospital in Al-Ain city (Abu Dhabi, United Arab Emirates), between 1st January and 31st December 2008. The patients included 241 women and 250 men, with an average age of 53.2 years^[11].
- .csv file
- 21 variables
- 22 by 498 dimension dataset
- 491 datapoints

feature	explanation	measurement unit	values
ACEIARB	if the patient has taken ACEI or ARB	boolean	[0, 1]
AgeBaseline	age of the patient	integer	[23, 24,, 80, 89]
BMIBaseline	body-mass index of the patient	kg/m ²	[13, 16, 17,, 53, 57]
CholesterolBaseline	level of cholesterol	mmol/L	[2.23, 2.40,, 8.20, 9.30]
CreatinineBaseline	level of creatinine in the blood	mol/l	[6, 27,, 113, 123]
dBPBaseline	diastolic blood pressure	mmHg	[41, 45,, 110, 112[
DLDmeds	if the patient has taken dyslipidemia medications	boolean	[0, 1]
DMmeds	if the patient has taken diabetes medications	boolean	[0, 1]
eGFRBaseline	estimated glomerular filtration rate	ml/min/1.73m ²	$[60, 60.4, \ldots, 242.6]$
HistoryCHD	patient history of coronary heart disease	boolean	[0, 1]
HistoryDiabetes	patient history of diabetes	boolean	[0, 1]
HistoryDLD	patient history of dyslipidemia	boolean	[0, 1]
HistoryHTN	patient history of hypertension	boolean	[0, 1]
HistoryObesity	patient history of obesity	boolean	[0, 1]
HistorySmoking	patient history of smoking	boolean	[0, 1]
HistoryVascular	patient history of vascular diseases	boolean	[0, 1]
HTNmeds	if the patient has taken hypertension medications	boolean	[0, 1]
sBPBaseline	systolic blood pressure	mmHg	[92, 95,, 177, 180]
Sex	if the patient is a woman (0) or a man (1)	binary	[0, 1]
time year	year from follow-up start to severe CKD event or last visit	integer	[0, 1,, 9, 10]
[target] EventCKD35	if the patient had moderate-extreme CKD	boolean	[0, 1]

Figure 3. Variables list contained within dataset.

Proposal

Is there an observable difference in baseline creatinine levels and blood pressure between sexes?

Proposal: Hypothesis Test

 H_0 : $\mu_0 = \mu_1$ Difference between sexes ->

• There is no difference in mean baseline creatinine levels between sexes.

$$H_1: \mu_0 = \mu_1$$

There is a difference in mean baseline creatinine levels between sexes.

$$H_3$$
: $\mu_0 = \mu_1$

• There is no difference in mean baseline creatinine levels across blood pressure levels.

$$H_4$$
: $\mu_0 = \mu_1$

• There is a difference in mean baseline creatinine levels across blood pressure levels.

Analysis: Fixed Effect Model

- The model for the analysis is given on the right, where
 - > Y = the response, the creatinine baseline
 - $> \alpha$ = individual fixed effect
 - > $\beta_{1,2}$ = coefficients
 - Sex, Blood pressure = variables
 - > ε= error term
- ❖ Blood pressure is assumed to be normally distributed, as well as the interaction effect and the error term, which is iid^[13].

$$\gamma_{ik} = \alpha_i + \beta_1 (Sex)_{ik} + \beta_2 (BloodPressure)_{ik} + \epsilon_{ik}$$

Equation 1. ANOVA model.

Analysis: Baseline Characteristics

	Total (N = 491)	Males (N = 250)	Females (N = 241)
Age (years), Mean (SD)	53.20 ± 13.82	52.68 ± 15.30	53.75 ± 12.11
Male gender (%)	50.9	-	
History of (%)			
CHD	9.2	13.2	5.0
DM	43.8	46.4	41.1
Vascular disease	5.9	8.8	2.9
HTN	68.2	68.8	67.6
Dyslipidemia	64.6	63.6	65.6
Smoking	15.3	29.2	0.8
Obesity	50.5	40.4	61.0
ACEI/ARB use	46.6	49.6	39.4
Anthropometric values			
BMI (kg/m²), Mean (SD)	30.19 ± 6.21	28.73 ± 5.77	31.7 ± 6.30
SBP (mmHg), Mean (SD)	131.37 ± 15.69	132.03 ± 15.65	130.70 ± 15.74
DBP (mmHg), Mean (SD)	76.87 ± 10.71	77.64 ± 11.34	76.07 ± 9.98
Laboratory values			
TC (mmol/L), Mean (SD)	4.98 ± 1.10	4.83 ± 1.09	5.13 ± 1.09
TG (mmol/L), Mean (SD) ^a	1.32 ± 0.79	1.35 ± 0.80	1.28 ± 0.78
Cr (µmol/l), Mean (SD)	67.86 ± 17.92	78.97 ± 16.00	56.33 ± 11.30
eGFR (mL/min/1.73m ²), Mean (SD)	98.12 ± 18.50	95.56 ± 20.64	100.77 ± 15.60
HbA1c (%), Mean (SD) ^b	6.60 ± 1.71	6.77 ± 1.98	6.43 ± 1.39

CHD; Coronary heart disease, DM; diabetes mellitus, HTN; hypertension, ACEI; Angiotensin-converting enzyme inhibitors, ARB; Angiotensin II receptor blockers, BMI; Body mass index, eGFR; estimated glomerular filtration rate, SBP; Systolic blood pressure. DBP; Diastolic blood pressure, Cr; Creatinine, TC; Total cholesterol, TC; Triglycerides, SD; standard deviation, HbAIc; glycosylated Hemoglobin, Type A1C.

https://doi.org/10.1371/journal.pone.0199920.t001

 $^{^{}a}$ N = 485.

^b N = 476.

Analysis: Definitions

- *** sBPBaseline/dBPBaseline** -> Systolic/Diastolic baseline measures.
 - This allowed me to create a categorization of blood pressure readings according to official literature for ease of analysis^[14].
 - Trade-off is you lose degrees of freedom for statistical tests^[15].
 - Indicated in dataset as separate results, so I had to combine them. 5 categories:
 - 1 = "Normal"
 - 2 = "Elevated"
 - 3 = "High Blood Pressure (Hypertension STG 1)"
 - 4 = "High Blood Pressure (Hypertension STG 2)"
 - 5 = "Hypertensive Crisis";

Creatinine:

- A normal result for serum creatinine is 0.7 to 1.3 mg/dL (61.9 to 114.9 μmol/L) for men and 0.6 to 1.1 mg/dL (53 to 97.2 μmol/L) for women^[16].
- Left as continuous result in the dataset for analysis.

Sex:

- 2 categories:
 - 0 = female
 - 1 = male

Healthy and unhealthy blood pressure ranges

Learn what's considered normal, as recommended by the American Heart Association.

BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (upper number)	and/or	DIASTOLIC mm Hg (lower number)
NORMAL	LESS THAN 120	and	LESS THAN 80
ELEVATED	120 – 129	and	LESS THAN 80
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 1	130 – 139	or	80 – 89
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 2	140 OR HIGHER	or	90 OR HIGHER
HYPERTENSIVE CRISIS (consult your doctor immediately)	HIGHER THAN 180	and/or	HIGHER THAN 120

Figure 5. Blood pressure ranges^[16].

Analysis: Parameters

- \bullet "High blood pressure" is defined as SBP 130-139 or DBP 80-89^[17].
- Gender is a binary predictor, where 0 is "female and 1 is "male".
- Alpha-level is 0.05.

Analysis: Parameters (Code)

```
data ckd2;
set ckd;
format BP BP.;

*format Sex Sex.;

*format CKD CKD.;

IF (sBPBaseline < 120) AND (dBPBaseline < 80) THEN BP = 1;

IF (120 =< sBPBaseline <= 129) AND (dBPBaseline < 80) THEN BP = 2;

IF (130 <= sBPBaseline <= 139) OR (80 <= dBPBaseline <= 89) THEN BP = 3;

IF (sBPBaseline => 140) OR (dBPBaseline => 90) THEN BP = 4;

IF (sBPBaseline > 180) OR (dBPBaseline > 120) THEN BP = 5;

run;
```

Figure 6 a-d. The code here shows BP recode as well as a fixed effect proc step using proc glm.

```
proc glm data=ckd2;
title "This is the fixed effect model";
class Sex BP;
model CreatinineBaseline=Sex | BP/solution;
*random temp temp*model / test;
run;
quit;
```

```
proc glm data=ckd2;

class Sex BP;

model CreatinineBaseline = Sex BP Sex*BP;

lsmeans Sex BP / pdiff adjust=tukey;

run:
```

Analysis: Results

- H_0 vs H_1 -> Difference between sexes
 - The p-value is less than the 0.05 alpha level.

We reject the null hypothesis in favor of the alternative, which says there is a difference in baseline creatinine between the sexes.

- H₃ vs H₄ -> Difference across blood pressure levels
 - The p-value is 0.55, which is greater than the 0.05 alpha level.

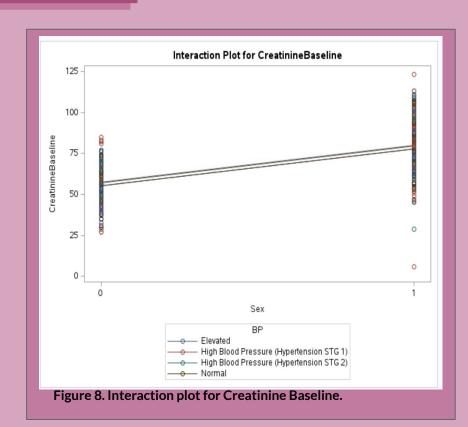
We fail to reject the null hypothesis in favor of the alternative, meaning that there is no significant difference in baseline creatinine across blood pressure levels.



Figure 7. Output of ANOVA analysis using PROC GLM step.

Analysis: Results

Parallel lines suggest no interactions between sex and blood pressure.



Analysis: Results

- The mean for female creatinine baseline is lower than that for males, and it is statistically significant. This means on average, males tend to have higher creatinine at baseline compared to females in this dataset.
- There is no statistical significance of the means within blood pressure categories.

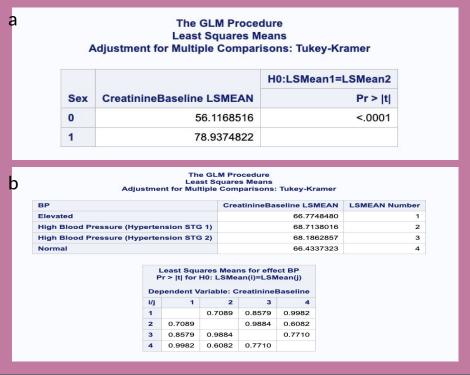


Figure 9a-b. LSmeans post-hoc analysis.

Conclusion: Discussion

In conclusion, there is a difference in baseline creatinine across sexes, and it is statistically significant. On average, women were over $20 \,\mu\text{mol/L}$ lower compared to men. This is consistent with literature that says that creatinine tends to be higher in men than in women.

There was no effect of blood pressure on serum creatinine. This could suggest that there are other factors at play not accounted for in the model.

Conclusion: Limitations

- All the potential features that could impact serum creatinine are not listed in the model.
- The average age of the participants in the data was 53.20 and it was collected in a clinical setting. People who are hospitalized tend to have more serious disease, and older people tend to experience more frequent hospitalizations, so the results are not that generalizable, only for this specific group^[19].

Questions

♦ Q&A

Appendix

Source:

- CKD FACTS
- 2. <u>Kidney Disease Surveillance System</u>
- 3. Chronic Kidney Disease in the United States, 2023
- 4. https://latex-editor.freebusinessapps.net/tex-editor
- 5. https://instruction.bus.wisc.edu/jfrees/jfreesbooks/Longitudinal%20and%20Panel%20Data/Book/Chapters/Chapter 2.9a.pdf
- 6. https://murraylax.org/rtutorials/fixedeffects.html#:~:text=The%20term%20%CE%B1i%20is,%2Dtime%2Dinvariant %20omitted%20variables.
- 7. https://www.statology.org/tukey-test-sas/
- 8. https://www.cdc.gov/nchs/data/nhsr/nhsr035.pdf
- 9. https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0199920#sec002
- 10. https://ieeexplore.ieee.org/document/9641833/metrics#metrics
- 11. https://www.kaggle.com/datasets/davidechicco/chronic-kidney-disease-ehrs-abu-dhabi/
- 12. https://ieeexplore.ieee.org/mediastore new/IEEE/content/media/6287639/9312710/9641833/chicc.t1-3133700-la rge.gif
- 13. https://stats.oarc.ucla.edu/sas/code/two-way-mixed-anova-using-sas-proc-glm-and-sas-proc-mixed/
- 14. https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0199920
- 15. Atum, A. (2022) "Cardiovascular disease project". CSUEB.
- 16. Atum, A. (2022) "Cardiovascular disease project". CSUEB.
- 17. Atum, A. (2022) "Cardiovascular disease project". CSUEB.
- 18. Atum, A. (2022) "Cardiovascular disease project". CSUEB.
- 19. Atum, A. (2022) "Cardiovascular disease project". CSUEB.

END