Cancer Mortality Exploration

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Research Question

Our team was hired by a health government agency that would like to understand factors that predict cancer mortality rates. Their ultimate goal is to identify communities for social interventions and of understanding which interventions are likely to have the most impact. Our main objective is to perform an exploratory analysis to understand how county-level characteristics are related to cancer mortality.

Dataset Analysis

```
setwd('~/Documents/MIDS/W203/hw/Lab_1/Cancer_EDA')
Cancer = read.csv('cancer.csv')
par(mar = rep(2, 4))
```

This dataset consists of 29 variables (not including the index column), all pertaining to county level information. Overall there were about 3047 observations per variable.

The types of variables present in the dataset can be categorized into 8 groups:

- 1) Region
- 2) Population
- 3) Birthrate
- 4) Race
- 5) Marital Status
- 6) Insurance coverage
- 7) Income status
- 8) Education

Data Quality

Overall the data quality was reasonable and usable. There were some observations in different decimal states, many NAs, and some variables that didn't seem relevant to cancer mortality at all. Other than that we found the data to be easy to analyze. Below are some data observations and assumptions:

"deathRate" - This is the column that we have assumed is the number of average yearly deaths per county.

"MedianAge" - This variable is the median age for a county, the dataset column had a range of 22-624, when analyzing this correlation we trimmed all numbers above 65 due to the numbers after 65 started in the 300s.

"PctSomeCol18_2"4 - This is the percent of some college attended between the age of 18-24. This column only had 762 of 3047 observations that were not NA. We still used this column when analyzing correlation, but it is worth noting that we removed all NAs.

"Race" - When it came to the percentage of race for each county, we noticed that a mojority of the counties surveyed were "white". This may or may not be a significant datapoint, but it may lead to assumptions about populations that are incorrect.

"avgAnnCount" - This was clarified as "2009-2013 mean incidences per county", we did not know what "incidences" this was referring to, we ended up not finding a direct correlation with other important variables, so we did not make any further assumptions and left it out of our analysis.

"AvgHouseholdSize" - This had 61 entries with less than 1, meaning that there are observations of 0 or negative household sizes, we removed these when analyzing houshold size with other key variables.

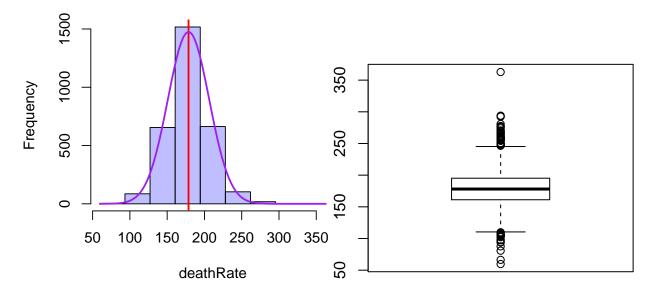
"PctEmployed16_Over" - There were 152 missing observations in this column, we removed these NAs from our dataset when analyzing this column with other key variables.

Analysis of Key Variables and Relationships

```
# convenient wrapper function for a prettier histogram
histWithNorm <- function(vec, name) {</pre>
  # calculate the breaks for the histogram
  vecMin <- min(vec, na.rm=TRUE)</pre>
  vecMax <- max(vec, na.rm=TRUE)</pre>
  breaks <- seq(vecMin, vecMax, length.out=10)</pre>
  vecHist <- hist(vec, col=rgb(0,0,1,1/4), breaks=breaks, main=paste("Histogram of ", name), xlab=name)
  # add a red line down the mean
  vecMean <- mean(vec, na.rm=TRUE)</pre>
  abline(v = vecMean, col="red", lwd=2)
  # plot a normal distribution over the histogram to visually compare the distributions
  vecSd <- sd(vec, na.rm=TRUE)</pre>
  # create the domain. span 6 sd's centered at the mean
  x <- seq(vecMean - 3 * vecSd, vecMean + 3 * vecSd, length.out=100)
  # get the width between each break
  histWidth <- breaks[2] - breaks[1]
  # calculate the area of the histogram and use it as the scale factor
  scaleFactor <- sum(histWidth * vecHist$counts)</pre>
  curve(dnorm(x, mean=vecMean, sd=vecSd) * scaleFactor, add=TRUE, col="purple", lwd=2)
}
```

The dependant variable for this analysis is deathRate, which is assumed to be the death rate from cancer. The histgram appears normally distributed.

Histogram of deathRate



Anomalous Data

We'll count the number of vector elements that violate some constraints to check for anomalies. If entries are missing or clearly erroneous, we can remove them from the data set before calculating the correlation.

```
# function that counts the number of elements in a vector that satisfy the predicate
# convenient for checking certain sanity bounds and counting how many are out of the bounds
count.by <- function(vec, predicate) {
    yes <- 0
    no <- 0
    for (n in vec) {
        if (predicate(n)) {
            yes <- yes + 1
        } else {
            no <- no + 1
        }
    }
    return(c(yes, no))
}</pre>
```

61 of the AvgHouseholdSize entries are less than 1. This is probably a coding error. A mean less than 1 for a set of integers is only possible if some values are 0 or negative. These values are nonsensical for a household size.

```
count.by(AvgHouseholdSize, function(num) num < 1)
## [1] 61 2986
cleanAvgHouseholdSize <- AvgHouseholdSize >= 1
```

30 of the MedianAge entries are greater than 200. This seems flagrantly improbable.

```
count.by(MedianAge, function(num) num >= 200)

## [1] 30 3017
cleanMedianAge <- MedianAge < 200</pre>
```

152 of the PctEmployed16_Over entries are NA.

```
count.by(PctEmployed16_Over, is.na)
## [1] 152 2895
cleanPctEmployed16_Over <- !is.na(PctEmployed16_Over)</pre>
```

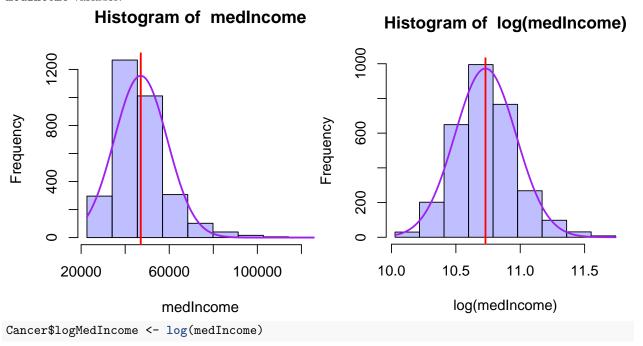
2285 of the PctSomeCol18_24 entries are NA. This is most of the rows, but there are still enough for a meaningful association.

```
count.by(PctSomeCol18_24, is.na)
## [1] 2285 762
cleanPctSomeCol18_24 <- !is.na(PctSomeCol18_24)</pre>
```

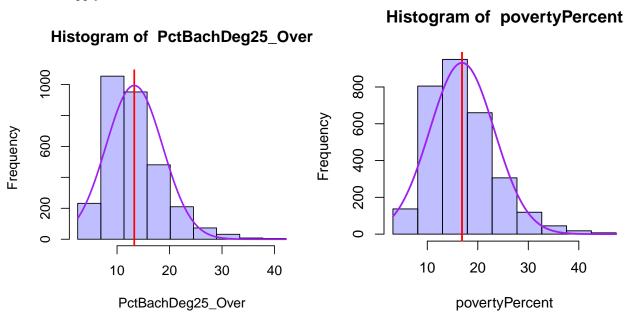
Key Variables

Here are some histograms of the variables that turned out to be related to deathRate. How we determined this in the correlated variables section.

medIncome looks like a positively skewed distribution. In fact, in some populations it may look more like a power law distribution than a normal [link]. If we plot log(medIncome), it looks closer to a normal distribution. We can check this transformation for correlation with deathRate in addition to the plain medIncome variable.

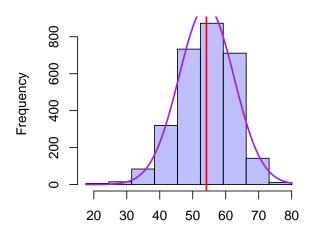


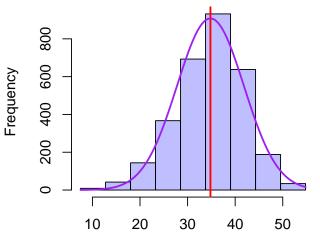
The rest look like clean, valid, approximately normally-distributed variables. There are no obvious transformations to apply.



Histogram of PctHS25_Over

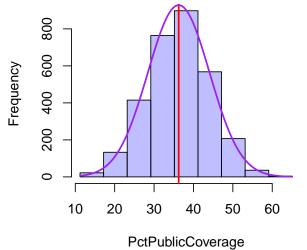
Histogram of PctEmployed16_Over

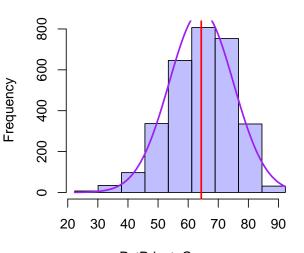




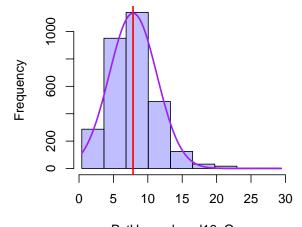
PctEmployed16_Over
Histogram of PctPublicCoverage

PctHS25_Over
Histogram of PctPrivateCoverage





Coverage PctPrivateCoverage
Histogram of PctUnemployed16_Over



PctUnemployed16_Over

Correlated Variables

The numeric variables were taken. The correlation with each numeric variable was calculated. Some of these variables had NAs, so those will get removed.

```
# get just the numeric columns
numericColumns <- sapply(Cancer, is.numeric)
NumericCancer <- Cancer[, numericColumns]
# get each correlations with each column
correlations <- apply(NumericCancer, 2, function(col) cor(col, deathRate))
correlations <- correlations[!is.na(correlations)]</pre>
```

Now we have a vector of all the correlations. We just filtered out the anomalous data, which includes PctEmployed16_Over because some of the entries were NA. We'll have to add it back manually after dealing with the NAs.

```
# clean the out of PctEmployed16 Over and calculate correlation
corPctEmployed16_Over <- cor(PctEmployed16_Over[cleanPctEmployed16_Over],</pre>
                               deathRate[cleanPctEmployed16 Over])
# append it to the vector of correlations and name the entry
correlations <- c(correlations, corPctEmployed16 Over)</pre>
names(correlations)[length(correlations)] <- "PctEmployed16_Over"</pre>
# add the rest of the cleaned variables
corPctSomeCol18_24 <- cor(PctSomeCol18_24[cleanPctSomeCol18_24],</pre>
                            deathRate[cleanPctSomeCol18_24])
correlations <- c(correlations, corPctSomeCol18_24)</pre>
names(correlations)[length(correlations)] <- "PctSomeCol18_24"</pre>
corAvgHouseholdSize <- cor(AvgHouseholdSize[cleanAvgHouseholdSize],</pre>
                             deathRate[cleanAvgHouseholdSize])
correlations <- c(correlations, corAvgHouseholdSize)</pre>
names(correlations)[length(correlations)] <- "cleanAvgHouseholdSize"</pre>
corMedianAge <- cor(MedianAge[cleanMedianAge],</pre>
                     deathRate[cleanMedianAge])
correlations <- c(correlations, corMedianAge)</pre>
names(correlations)[length(correlations)] <- "cleanMedianAge"</pre>
correlations
```

##	Х	${ t avgAnnCount}$	$\mathtt{medIncome}$
##	0.051913500	-0.143531620	-0.428614927
##	popEst2015	${ t povertyPercent}$	${ t MedianAge}$
##	-0.120073096	0.429388980	0.004375077
##	${\tt MedianAgeMale}$	${\tt MedianAgeFemale}$	AvgHouseholdSize
##	-0.021929429	0.012048386	-0.036905314
##	${\tt PercentMarried}$	PctNoHS18_24	PctHS18_24
##	-0.266820464	0.088462610	0.261975940
##	PctBachDeg18_24	PctHS25_Over	PctBachDeg25_Over
##	-0.287817410	0.404589076	-0.485477318
##	PctUnemployed16_Over	PctPrivateCoverage	${ t PctEmpPrivCoverage}$
##	0.378412442	-0.386065507	-0.267399428
##	PctPublicCoverage	PctWhite	PctBlack
##	0.404571656	-0.177399980	0.257023560
##	PctAsian	PctOtherRace	${ t PctMarriedHouseholds}$
##	-0.186331105	-0.189893571	-0.293325341

```
##
                BirthRate
                                       deathRate
                                                           logMedIncome
##
            -0.087406970
                                     1.000000000
                                                           -0.452277367
                                PctSomeCol18 24 cleanAvgHouseholdSize
##
      PctEmployed16 Over
##
            -0.412045764
                                    -0.188687667
                                                           -0.034641021
##
          clean Median Age
##
            -0.004288054
```

-0.4286149

0.4045717

PctPublicCoverage

##

##

##

Now we can determine the correlations that are significant. We'll sort these by descending order of absolute value.

```
# sort them
correlations <- correlations[order(abs(correlations), decreasing=TRUE)]</pre>
# remove the cor of deathRate with itself, which is 1, and always the first element after sorting
correlations <- correlations[2:length(correlations)]</pre>
correlations <- correlations[abs(correlations) >= 0.3]
correlations
##
      PctBachDeg25_Over
                                 logMedIncome
                                                     povertyPercent
             -0.4854773
                                   -0.4522774
##
                                                          0.4293890
##
              medIncome
                           PctEmployed16 Over
                                                       PctHS25 Over
```

0.4045891

0.3784124

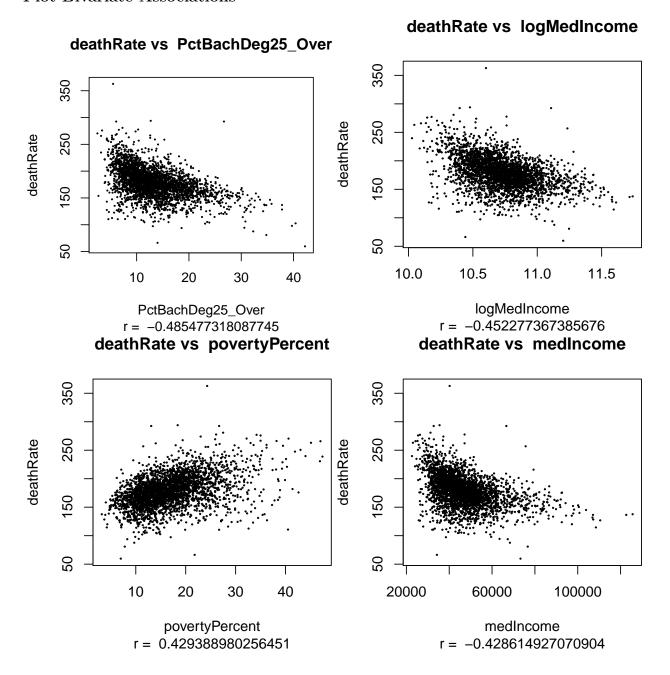
We will consider correlations of 0.3 or stronger a significant association. This includes 9 of the variables, one of which is our transformed log(medianIncome). This actually had stronger correlation with deathRate than medIncome.

PctPrivateCoverage PctUnemployed16_Over

-0.4120458

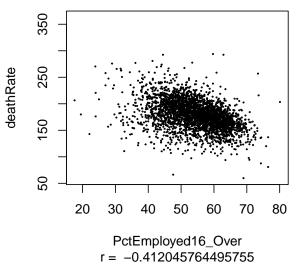
-0.3860655

Plot Bivariate Associations

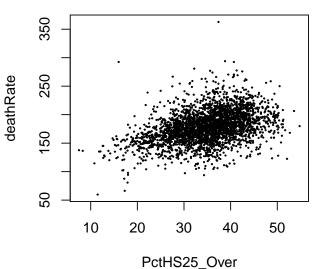


deathRate vs PctHS25_Over

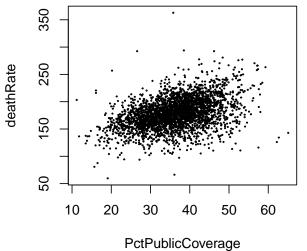
deathRate vs PctEmployed16_Over



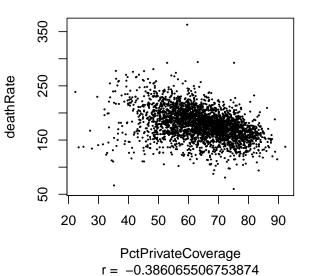
deathRate vs PctPublicCoverage



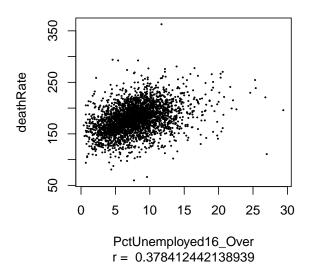
r = 0.404589075781319deathRate vs PctPrivateCoverage



r = 0.40457165629326



deathRate vs PctUnemployed16_Over



These variables have a positive correlation, meaning counties in this set which have higher values are more likely to have a higher deathRate: povertyPercent, PctHS25_Over, PctPublicCoverage, PctUnemployed16_Over. The rest of the variables are associated with lower deathRate: PctBachDeg25_Over, logMedIncome, medIncome, PctEmployed16 Over, PctPrivateCoverage.

Confounding Variables

The correlations can be summarized as such: employment, education, and wealth are linked to lower cancer mortality. We can speculate about the underlying causality between some of the variables. For example, suppose the correlation with PctBachDeg25_Over is because educated people are aware of cancer causes and choose to avoid those causes. Education also enables people to make more money. PctBachDeg25_Over would therefore confound the association between medIncome and deathRate. However, suppose it's actually income that lowers cancer mortality because people can afford better treatment. In that case, its medIncome that confounds the association of PctBachDeg25_Over with deathRate because the wealthy are more likely to afford tuition for school. A similar statement can be made about the insurance variables.