Analysis of toothgrowth data

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[1]Basic explantory analysis of ToothGrowth data from datasets

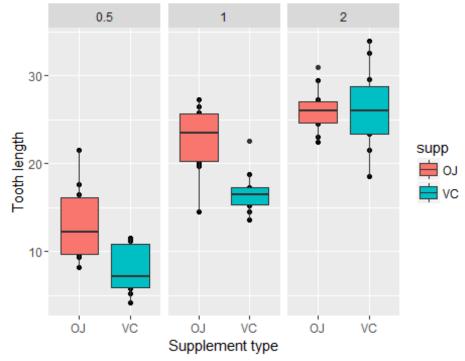
```
library(datasets)
library(ggplot2)
data(ToothGrowth)
help("ToothGrowth")
## starting httpd help server ... done
str(ToothGrowth)
## 'data.frame':
                   60 obs. of 3 variables:
## $ len : num 4.2 11.5 7.3 5.8 6.4 10 11.2 11.2 5.2 7 ...
## $ supp: Factor w/ 2 levels "OJ", "VC": 2 2 2 2 2 2 2 2 2 ...
## $ dose: num 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 ...
summary(ToothGrowth)
##
        len
                                dose
                   supp
##
   Min. : 4.20
                   OJ:30
                           Min.
                                  :0.500
## 1st Qu.:13.07
                   VC:30
                           1st Qu.:0.500
## Median :19.25
                           Median :1.000
## Mean :18.81
                           Mean :1.167
## 3rd Ou.:25.27
                           3rd Ou.:2.000
## Max. :33.90
                           Max. :2.000
```

This data has 60 observation, three variables (1)len(numeric): Tooth length (2) supp(factor): Supplement type (VC or OJ). (3) dose(numeric): Dose in milligrams/day

[2]. Summary of data by comparisons

```
#make plot to campare Tooth length with different supplement type for e
ach dosage
g<-qplot(supp,len,data=ToothGrowth, facets=~dose, main="Tooth growth of
  guinea pigs by different supplement type in each dose",xlab="Supplemen
  t type", ylab="Tooth length")
g<-g+geom_boxplot(aes(fill = supp))
g</pre>
```

prowth of guinea pigs by different supplement type in each do



As we can observe in the plot, the average tooth length increases as the dose increases.

[3]. Use confidence intervals and/or hypothesis tests to compare tooth growth by supp and dose Hypothesis testing (1). Assumption: the variables are independent and identically distributed. Tooth growth follows a normal distribution. (2). Null hypothesis for different supplement type: There is no difference in tooth growth when using the supplement OJ and VC. Alternative hypothesis: There is a difference in tooth growth when using the supplement OJ and VC.

Null hypothesis for different dose: There is no difference in tooth growth when using different dose. Alternative hypothesis: There is a difference in tooth growth when using different dose.

Here we are going to use two-way ANOVA for identifying effects of supplement type and dose on tooth growth

```
#Perform two-way ANOVA to identify effects of supplement type, dose and
    their interaction
ToothGrowth$dose = factor(ToothGrowth$dose, levels=c(0.5,1.0,2.0), labe
ls=c("low","med","high"))
ToothGrowth$supp=factor(ToothGrowth$supp,levels=c("OJ","VC"))
replications(len ~ supp+dose+supp:dose, data=ToothGrowth)
## supp dose supp:dose
## 30 20 10
```

```
anova<- aov(len ~ supp+dose+supp:dose, data=ToothGrowth)
summary(anova)
##
               Df Sum Sq Mean Sq F value
                                           Pr(>F)
                                 15.572 0.000231 ***
## supp
                1 205.3
                           205.3
                2 2426.4 1213.2 92.000 < 2e-16 ***
## dose
                2 108.3
                            54.2
                                   4.107 0.021860 *
## supp:dose
## Residuals
               54 712.1
                            13.2
## ---
## Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

As the result shows, there are two significant main effects and a significant interaction between dose and supp.

```
#Perform post hoc test to do pairwise comparison in different factors
TukeyHSD(anova)
##
     Tukey multiple comparisons of means
##
       95% family-wise confidence level
##
## Fit: aov(formula = len ~ supp + dose + supp:dose, data = ToothGrowth)
##
## $supp
         diff
                    lwr
##
                              upr
                                      p adj
## VC-0J -3.7 -5.579828 -1.820172 0.0002312
##
## $dose
              diff
##
                         lwr
                                   upr
                                         p adj
            9.130 6.362488 11.897512 0.0e+00
## med-low
## high-low 15.495 12.727488 18.262512 0.0e+00
## high-med 6.365
                    3.597488 9.132512 2.7e-06
##
## $`supp:dose`
##
                    diff
                                lwr
                                           upr
                                                   p adj
## VC:low-OJ:low
                   -5.25 -10.048124 -0.4518762 0.0242521
## OJ:med-OJ:low
                    9.47
                           4.671876 14.2681238 0.0000046
## VC:med-OJ:low
                    3.54
                         -1.258124 8.3381238 0.2640208
## 0J:high-0J:low 12.83
                         8.031876 17.6281238 0.0000000
## VC:high-OJ:low
                  12.91
                           8.111876 17.7081238 0.0000000
## OJ:med-VC:low
                   14.72
                           9.921876 19.5181238 0.0000000
## VC:med-VC:low
                    8.79
                          3.991876 13.5881238 0.0000210
## OJ:high-VC:low 18.08 13.281876 22.8781238 0.0000000
## VC:high-VC:low
                   18.16
                          13.361876 22.9581238 0.0000000
## VC:med-OJ:med
                   -5.93 -10.728124 -1.1318762 0.0073930
## OJ:high-OJ:med
                    3.36
                         -1.438124
                                    8.1581238 0.3187361
## VC:high-OJ:med
                    3.44
                         -1.358124
                                    8.2381238 0.2936430
## OJ:high-VC:med
                    9.29
                         4.491876 14.0881238 0.0000069
## VC:high-VC:med
                    9.37
                           4.571876 14.1681238 0.0000058
## VC:high-OJ:high
                    0.08 -4.718124 4.8781238 1.0000000
```

4.	Conclusions The above results indicate that different supplement types result in different tooth growth. Different doses of a supplement type also result in different tooth growth.