## PBHS 32700/STAT 22700, Spring 2024

## **Midterm Exam**

Total: 100 points.

INSTRUCTIONS: You have 80 minutes to do this examination. Please write down your name and cnetid (a second information to identify you). FOLLOW THE INSTRUCTIONS; DO NOT SPEND TIME DOING THINGS THAT ARE NOT ASKED. Show necessary computations.

- 1. (19 pts) For each of the following studies, determine whether a logistic regression model would be appropriate to address the question of interest (and the logistic model doesn't have to be the only choice). Write a simple yes or no would suffice.
  - (a) (3 pts) In an epidemiological study following an outbreak of food poisoning that occurred at an outing held for personnel of an insurance company, the proportion of consumers who became ill were categorised according to the food eaten. Researchers are interest in whether crabmeat was associated with food poisoning. Table 1 showed the data of consumers with food poisoning by the consumed food categories.

Crabmeat eaten	Potato salad eaten	Proportion ill out of total sampled/recorded		
Yes Yes Yes No No Yes No No		120/300		
		15/45		
		25/46		
		3/24		

Table 1: Proportion of consumers with food poisoning

- (b) (3 pts) A researcher is studying the number of hospital visits in past 12 months of senior citizens in a community based on the characteristics of the individuals including age, sex, marital status, underlying conditions (with=1, without=0) and the types of health plans (medicaid=0, medicare=1, and others=2) under which each one is covered. The researcher is interested in predicting the number of hospital visits for senior citizens.
- (c) (3 pts) Hotel booking cancellation has a significant impact on the revenue of hotel industry, and also affects management decisions. Booking.com is interested in collecting the data and building a model to effectively predict cancellation and identify key factors affecting cancellation. They collected data on 100,000 hotel bookings reservations for city hotels, resort hotels, and motels/inns. The data includes other 500 variables such as countries of the hotels, reservation and arrival (year, month and day), length of stay, canceled or not, the number of adults, children, and/or babies, number of available parking spaces, etc.

- (d) (3 pts) Boosted by the popular show "The Queen's Gambit", chess is experiencing a "pandemic boom" in the recent three years. The monthly active users of chess.com is rapidly growing, while online chess cheating becomes a serious issue. Chess.com is interested in building models to predict whether a game involves cheating. Many cheaters used chess.com engines to cheat and were caught. Researchers in the fairplay team collected 50,000 games involves cheating and 50,000 clean games to identify the patterns and main variables that distinguish cheaters and regular players. Those variables include, difference in performance rating versus current rating, players' age, gender, country, move quality, time used to make a move, and 200 other variables.
- (e) (3 pts) In a hospital-based multi-centered study, the investigators are interested in assessing whether oral contraceptive use affects the risk of invasive carcinoma (cancer) of the cervix. They collected data contains 900 records, with 500 samples with carcinoma and 400 samples without. Also recorded were their age, previous oral contraceptive use (yes=1, no=0), sex, doctor visited for abnormal vaginal discharge, and total number of pregnancies.
- (f) (4 pts) Among (a)-(e), identify the case-control studies. (Maybe one, maybe more than one).
- 2. (15 pts, 3 each) Identify the mistakes in the following statements. Each statement has one or more mistakes. Make a simple correction or explain why it is a mistake.
  - (a) Odds ratio is a measure of association between risk and exposure. When odds ratio is much larger than 1, it implies strong risk difference when comparing two exposure groups. When odds ratio is much smaller than 1, it suggests that the risk difference is small.
  - (b) Here is a logistic regression model:  $logit(\frac{p}{1-p}) = \beta_0 + \beta_1 X_1 + \epsilon$ , assessing the effect of  $X_1$  on event with probability p.
  - (c) Deviance measures the extent to which the current model fit deviates from the full model fit. The deviance statistic is always  $\chi^2$  distributed.

	(d)	When comparing two non-nested models, we always want to choose the model with a smaller deviance.
	(e)	For grouped binary data, the full model is the model with no predictor and only an intercept.
3.	head tion. med	ots) In a preliminary clinical study of a new headache medication, 200 patients with lache were given the new medication and 200 patients were given the standard medica-Both groups were monitored for one hour. By the end of the hour, 180 patients on new iation have relieved from the headache and 160 patients on standard medication have ed from the headache.
	(a)	(4 pts) Estimate the <u>probabilities</u> and <u>odds</u> of obtaining headache relief within one hour for <u>the new medication group</u> and <u>the standard medication group</u> .
	(b)	(4 pts) Estimate the <u>odds ratio</u> of obtaining headache relief within one hour comparing new versus standard medication. Obtain the 95% confidence interval for this odds ratio. Is there a significant improvement in the effect?
	(c)	(4 pts) Let $Y = 1$ if there is a headache relief of the patient and $Y = 0$ if no headache relief. Let $X = 1$ if taking new mediation and $X = 0$ if taking standard medication. Write down a logistic regression model to study whether there is significant improvement in the effects of the new mediation. Write down the null and alternative hypothesis of the test in terms of parameters in the regression model.

(d) (4 pts) For the model above, without using Stata/R, write down the fitted model. That is, write down the model with estimated  $\hat{\beta}$  values. (Hints: Interpret the coefficients and estimate the parameters using your answers in (a) and (b).)

(e) (4 pts) Is this model a full model for the data? Why or why not.

4. (36 pts) Consider the following dataset from a study of risk factors associated with low birth-weight described in Hosmer, Lemeshow, and Sturdivant (2013). The following table shows the summary information for some variables.

Variable	Obs	Mean	Std. dev.	Min	Max
low	189	.3121693	.4646093	0	1
ht	189	.0634921	.2444936	0	1
smoke	189	.3915344	.4893898	0	1
lwt	189	129.8201	30.57515	80	250

The variable low is binary with value 1 representing birthweight < 2500 g. The variable ht is binary with value 1 representing the mother has a history of hypertension. The variable smoke is binary with value 1 representing the mother smoked during the pregnancy. The variable lwt is the mother's Weight (lb) at her last menstrual period.

Here is a cross-tabulation of low birthweight by smoking:

. tab low smoke, chi

	Smoked	during				
Birthweigh	pregnancy					
1<2300g		Smoker 	Total +			
0	86	44	130			
1	29	30	59			
Total	115	74	189			

(a)	(5 pts) In the Stata output above, there is a Pearson's $\chi^2$ statistic. How do you interpret it? What is your conclusion based on the table.
(b)	(3 pts) Define $p_i = Pr(low_i = 1)$ , consider the model
	$logit(p_i) = \beta_0 + \beta_1 lw t_i + \beta_2 h t_i $ (1)
	In this model, what is the interpretation of $eta_1$ ?
(c)	(3 pts) Now consider the model
	$logit(p_i) = \beta_0 + \beta_1 lw t_i + \beta_2 h t_i + \beta_3 lw t_i \times h t_i $ (2)
	In this model, what is the interpretation of $\beta_1$ ?
(d)	(4 pts) In terms of parameters in model (2), what is the expected change in the log odds of low birthweight with each 10 lbs increase in mother's weight for the newborn whose
	mother has a hypertension history?

Stata output from the above two models (1) and (2) are given below. Note that the presented output tables are displaying "Coef".

. logit low lwt ht, nolog Number of obs = Logistic regression LR chi2(2) = 13.51Prob > chi2 = 0.0012 $Log\ likelihood = -110.58272$ Pseudo R2 = 0.0576low | Coefficient Std. err. P>|z|[95% conf. interval] lwt | -.0186285 .0065928 -2.83 0.005 -.0315502 -.0057068 ht | 1.854477 .7008247 \_cons | 1.447862 .8208979 2.65 .4808862 2.65 1.76 0.008 3.228068 0.078 -.1610682 3.056792 . gen lwtht = lwt \* ht. logit low lwt ht lwtht, nolog Logistic regression Number of obs = LR chi2(3) = 13.56Prob > chi2 = 0.0036 $Log\ likelihood = -110.55666$ Pseudo R2 = 0.0578low | Coefficient Std. err. P>|z| [95% conf. interval] -.0048506 -.0339085 -3.7096546.283633 lwtht | .0037324 .0161735 0.23 0.817 -.027967.0354319 \_cons | 1.539312 .9174766 1.68 0.093 -.25890963.337533

(e) (4 pts) Based on the Stata output, test the hypothesis that the interaction between mother's weight and hypertension history is an important predictor of low birthweight. Write down the null and alternative hypotheses in terms of the parameter in model (2), compute a test statistic and obtain the *P*-value; and draw conclusions from your test.

(f) (4 pts) Are models (1) and (2) nested? If so, compute the <u>difference in deviance</u> statistic comparing the two models. The critical value for  $\chi_1^2$  is 3.84 at the significance level of  $\alpha = 0.05$ . Which model do you prefer?

(g)	(5 pts) Using your preferred model to estimate the probability of low birthweight for a
	newborn whose mother has weight of 100 lb and does not have a history of hyperten-
	sion.

(h) (4 pts) Suppose we are interested in the relationship between low birthweight and mother's weight only among those with hypertension history, so we fit the following model using **only the subjects with** ht=1:

$$logit(p_i) = \beta_0 + \beta_1 lw t_i \tag{3}$$

Given the estimates obtained for model (2), write down the fitted model (3), i.e. give the estimates for  $\beta_0$  and  $\beta_1$ .

(i) (4 pts) We run some model diagnostics and obtain the standardized deviance residuals (dres). We observe that there are two observations (out of 189) have relatively large standardized deviance residuals. Comment on what you observe below. Discuss possible reasons for what you have observed. Explain what you might do next.

. list low lwt ht yhat dres if dres > 2.0 | dres < -2.0 & dres  $\sim = .$ , noobs clean

low	lwt	ht	yhat	dres
1	200	0	.0929751	2.179644
1	187	0	.1155086	2.077696

5. (10 pts) The following is a partially filled out analysis of deviance table for a logistic regression modeling effort for the birthweight data set presented in the previous problem.

Definition of variables: ht - mother's history of hypertension (0/1); smoke - whether the mother smoked during the pregnancy (0/1); lwt - mother's Weight (lb) at her last menstrual period. For purpose of this problem, assume that only those variables are available. All deviance statistics was rounded to ease the calculation.

Model	Predictors	Deviance	d.f.	Models being	d.f.	Test
				compared		statistic
С	(intercept only)	235	188	-	-	-
D	lwt	229	187	_ vs _		
Е	ht	231	187	_ vs _		
F	smoke	230	187	_ vs _		
G	lwt, ht, smoke	217	185	_ vs _		
Н	lwt, ht, smoke, lwt*ht	216	184	_ vs _		
I	lwt, ht, smoke, lwt*smoke	215	184	_ vs _		
J	lwt, ht, smoke, ht*smoke	216	184	_ vs _		

Based on what is presented, compare all the models and <u>find the best fitted model</u>. <u>Justify your answer.</u> To get full credit, you need to complete at least three sets of model comparisons. You may describe your comparisons and results OR may fill out the last three columns of the table, considering models C-J in turn as the current model, and mark your chosen models. Below are some additional details that may help.

- The critical values for  $\chi_1^2$  and  $\chi_2^2$  are 3.84 and 5.99, respectively, at the level of  $\alpha = 0.05$ .
- In the "Compare" column, place the model label (taken from the "Model" column) for the most appropriate comparison to the current model.
- In the "d.f." column, write the number of degree of freedom by which the current model and the comparison model differ.
- In the test statistic column, write the chi-squared test statistic based on deviance for comparing the current model and the comparison model.