

# Inference and Multiple Explanatory Variables

Logistic regression – Stat 230

# Recap: Framingham heart study

**Goal:** Determine whether participant experienced coronary heart disease (CHD) in 10-year window after their exam

- $Y = \text{CHD}$  ( $0 = \text{no}$ ,  $1 = \text{yes}$ )
- $X = \text{participant's age, sex, total cholesterol, and systolic blood pressure}$

**Strategy:** model the probability of CHD given these factors

# Binary logistic regression model

If  $Y$  follows a Bernoulli distribution

$$\mathrm{E}(Y|X) = \pi(X)$$

We link this mean function to the explanatory variables using the logit link

$$\begin{aligned}\eta &= \text{logit}(\pi(X)) \\ &= \log\left(\frac{\pi(X)}{1 - \pi(X)}\right) = \beta_0 + \beta_1 x_1 + \beta_2 x_2 + \cdots + \beta_p x_p\end{aligned}$$

# Framingham model

$$\log\left(\frac{\hat{\pi}(X)}{1 - \hat{\pi}(X)}\right) = -8.08 + 0.061\text{age} + 0.686\text{male} + 0.002\text{totChol} - 0.018\text{sysBP}$$

$\hat{\beta}_2$

- $e^{0.686} = 1.986$
- The odds of having a heart attack in the next ten years are nearly twice as high for males as females, after accounting for age, total cholesterol, and systolic blood pressure.

$\hat{\beta}_4$

- $e^{-0.018} = 0.9822$
- The odds of having a heart attack in the next ten years decrease by about 1.8% (i.e., a factor of 0.982) for a one-unit increase in systolic blood pressure, after accounting for age, sex, and total cholesterol.

# Wald-based inference for logistic regression

# Maximum likelihood (ML) estimation

The coefficients in logistic regression are estimated by finding the  $\hat{\beta}_0, \dots, \hat{\beta}_p$  that maximize the probability of the observed outcomes

$$L(\beta) = P(Y_1 = y_1, \dots, Y_n = y_n | \beta, X) = \prod_{i=1}^n \pi(X)^{y_i} [1 - \pi(X)]^{1-y_i}$$

where

$$\pi(X) = \frac{e^{\beta_0 + \beta_1 X_1 + \dots + \beta_p X_p}}{1 + e^{\beta_0 + \beta_1 X_1 + \dots + \beta_p X_p}}$$

# Properties of ML estimators

Large-sample properties of ML estimators,  $\hat{\beta}_i$ s  
(if the model is correct):

1. Essentially unbiased
2. SEs can be computed and are about as small as any other unbiased estimator
3. The sampling distributions for the estimators are approximately normal

# Wald test for a coefficient

Hypotheses:  $H_0 : \beta_i = 0$  vs.  $H_a : \beta_i \neq 0$

Test statistic:

$$z = \frac{\hat{\beta}_i}{SE(\hat{\beta}_i)}$$

Reference  
distribution:

$N(0, 1)$

# CI for a coefficient

A normal-based confidence interval for  $\beta_i$

$$\hat{\beta}_i \pm z_{1-\alpha/2}^* SE(\hat{\beta}_i)$$

CI for the multiplicative effect on odds of success for a 1-unit change in  $x$  (odds ratio of Success for  $x + 1$  vs.  $x$ ):

$$e^{\hat{\beta}_i - z_{1-\alpha/2}^* SE(\hat{\beta}_i)} \quad \text{to} \quad e^{\hat{\beta}_i + z_{1-\alpha/2}^* SE(\hat{\beta}_i)}$$

... for a  $C$ -unit change in  $x$

$$e^{C \cdot \hat{\beta}_i - z_{1-\alpha/2}^* C \cdot SE(\hat{\beta}_i)} \quad \text{to} \quad e^{C \cdot \hat{\beta}_i + z_{1-\alpha/2}^* C \cdot SE(\hat{\beta}_i)}$$

# Framingham example

What impact does age have on the odds of having a heart attack in the next 10 years?

#	A tibble: 5 × 5	term	estimate	std.error	conf.low	conf.high
		<chr>	<dbl>	<dbl>	<dbl>	<dbl>
1	(Intercept)	-8.08	0.412	-8.90	-7.29	
2	age	0.0610	0.00579	0.0497	0.0724	
3	male	0.686	0.0930	0.505	0.869	
4	totChol	0.00201	0.00102	0.00000310	0.00401	
5	sysBP	0.0176	0.00200	0.0137	0.0215	

Let's construct a 95% confidence interval for  $\beta_1$ :

$$\hat{\beta}_1 \pm z_{1-\alpha/2}^* SE(\hat{\beta}_1)$$

$$z_{1-0.05/2}^* = z_{0.975}^* = 1.96 \text{ quantile from } N(0, 1)$$

```
1 qnorm(0.975)
```

```
[1] 1.959964
```

$$0.0610 \pm 1.96 \cdot (0.00579) = (0.0497, 0.0724)$$

# Framingham example

$$0.0610 \pm 1.96 \cdot (0.00579) = (0.0497, 0.0724)$$

Exponentiating the endpoints to get the CI for the odds ratio for a one-year increase in age:

$$e^{0.0497} = 1.051 \quad \text{to} \quad e^{0.0724} = 1.075$$

We are 95% confident that a one-year increase in age is associated with an increase in the odds of having a heart attack in the next 10 years of between 5.1% (a 1.051 factor

# Framingham example

How do the odds of having a heart attack in the next 10 years change for someone 10 years older?

```
# A tibble: 5 × 5
  term      estimate std.error    conf.low conf.high
  <chr>     <dbl>     <dbl>     <dbl>     <dbl>
1 (Intercept) -8.08     0.412    -8.90    -7.29
2 age         0.0610    0.00579   0.0497    0.0724
3 male        0.686     0.0930    0.505     0.869
4 totChol     0.00201   0.00102   0.00000310 0.00401
5 sysBP       0.0176    0.00200   0.0137    0.0215
```

$$95\% \text{ CI: } C \cdot \left[ \hat{\beta}_1 \pm z_{1-\alpha/2}^* SE(\hat{\beta}_1) \right]$$

$$\begin{aligned} 10 [0.0610 \pm 1.96 \cdot (0.00579)] &= (10(0.0497), 10(0.0724)) \\ &= (0.497, 0.724) \end{aligned}$$

We are 95% confident that a 10-year increase in age is associated with an increase in the odds of having a heart attack in the next 10 year of

between a factor of 1.644 (a 64.4% increase) and a factor of 2.063 (a 106.3% increase), holding all other variables constant.

# Likelihood-based inference for logistic regression

# Likelihood function

Recall that the likelihood function gives the plausibility of the observed data given our parameter values

$$L(\beta) = P(Y_1 = y_1, \dots, Y_n = y_n | \beta, X) = \prod_{i=1}^n \pi(X)^{y_i} [1 - \pi(X)]^{1-y_i}$$

Idea:

- “better” model explains more of the variation in our data set
- “better” model makes our data more plausible

# Likelihood ratio test

**Full model:**  $\eta = \beta_0 + \beta_1 x_1 + \beta_2 x_2 + \cdots + \beta_k x_k + \beta_{k+1} x_{k+1} + \cdots + \beta_p x_p$

**Reduced model:**  $\eta = \beta_0 + \beta_1 x_1 + \beta_2 x_2 + \cdots + \beta_k x_k$

**Hypotheses:**  $H_0 : \beta_{k+1} = \cdots = \beta_p = 0$  vs.  $H_a : \text{at least one } \beta_j \neq 0$

**Test statistic:**

$$G = 2 \cdot \text{log-likelihood(full model)} - 2 \cdot \text{log-likelihood(reduced model)}$$

**Reference distribution:**  $\chi^2$  distribution

d.f. = #  $\beta$ s in full model – #  $\beta$ s in reduced model

# Deviance

## R implementation

R reports the **deviance** rather than the log-likelihood

In GLM, deviance is used to measure “unexplained” variation in the response

Alternate representation of the LRT test statistic

$$\begin{aligned} G &= 2 \cdot \text{log-likelihood}(\text{full model}) - 2 \cdot \text{log-likelihood}(\text{reduced model}) \\ &= \text{deviance}(\text{reduced model}) - \text{deviance}(\text{full model}) \end{aligned}$$

The LRT is sometimes called the drop-in-deviance test

# Framingham example

R's default output gives

```
# A tibble: 5 × 5
  term      estimate std.error statistic p.value
  <chr>     <dbl>     <dbl>     <dbl>    <dbl>
1 (Intercept) -8.08     0.412    -19.6  9.65e-86
2 age         0.0610    0.00579    10.5  5.32e-26
3 male        0.686     0.0930    7.38  1.56e-13
4 totChol     0.00201   0.00102    1.98  4.83e- 2
5 sysBP       0.0176    0.00200    8.80  1.39e-18

Null deviance: 3564.8 on 4189 degrees of freedom
Residual deviance: 3214.1 on 4185 degrees of freedom
```

**Full model:**  $\eta = \beta_0 + \beta_1 \text{age} + \beta_2 \text{male} + \beta_3 \text{totChol} + \beta_4 \text{sysBP}$

**Reduced model:**  $\eta = \beta_0$

**Hypotheses:**  $H_0 : \beta_1 = \beta_2 = \beta_3 = \beta_4 = 0$  vs.  $H_a : \text{at least one } \beta_j \neq 0$

$G = \text{deviance(reduced model)} - \text{deviance(full model)}$

$$G = 3564.8 - 3214.1 = 350.7$$

$$\text{d.f.} = 5 - 1 = 4$$

# Framingham example

Hypotheses:  $H_0 : \beta_1 = \beta_2 = \beta_3 = \beta_4 = 0$  vs.  $H_a : \text{at least one } \beta_j \neq 0$

$G = \text{deviance}(\text{reduced model}) - \text{deviance}(\text{full model})$

$$G = 3564.8 - 3214.1 = 350.7$$

$$\text{d.f.} = 5 - 1 = 4$$

```
1 1 - pchisq(350.7, df = 4)
```

```
[1] 0
```

There is overwhelming evidence that at least one of the explanatory variables helps explain the odds of having a heart attack in the next ten years ( $G = 350.7$ , d.f. = 4,  $p\text{-value} < 0.001$ ).