

# Numbersense: Clearing the Fog of Big Data

Kaiser Fung  
INFORMS NYC Luncheon  
9/18/2013

# Big Data studies

- ❧ Observational data
- ❧ Co-opted
- ❧ Seemingly exhaustive N
- ❧ Fused data
- ❧ No controls

# Flight Delay: the data

• U.S. domestic commercial flights

• 1987 to 2008

• 123 million records

• 29 variables

Which airline had a lower delay rate?

		Los Angeles	Phoenix	San Diego	San Francisco	Seattle
ALASKA	on time	497	221	212	503	1,841
	delayed	62	12	20	102	305
AMWEST	on time	694	4,840	383	320	201
	delayed	117	415	65	129	61



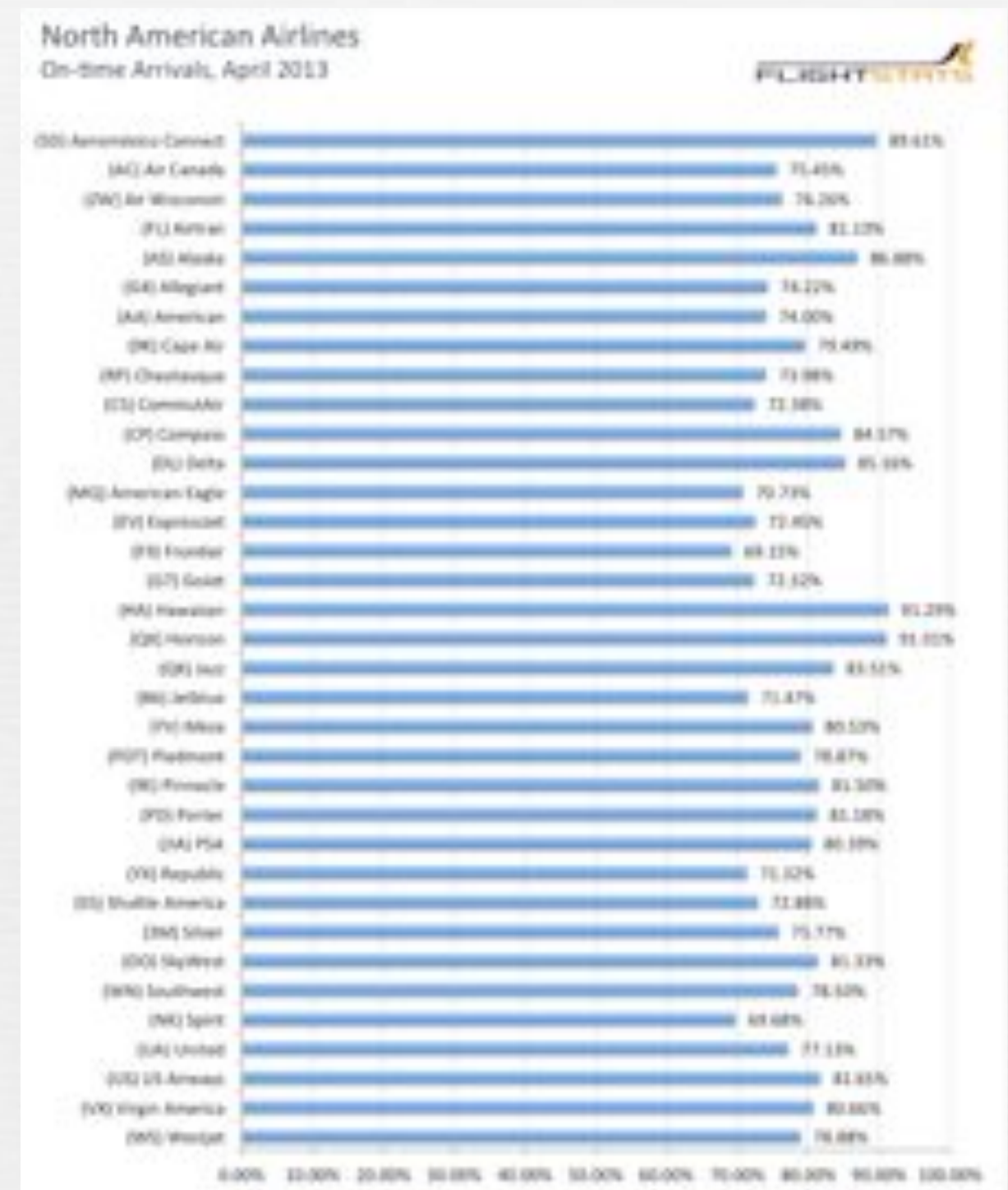
# Which airline had a lower delay rate?



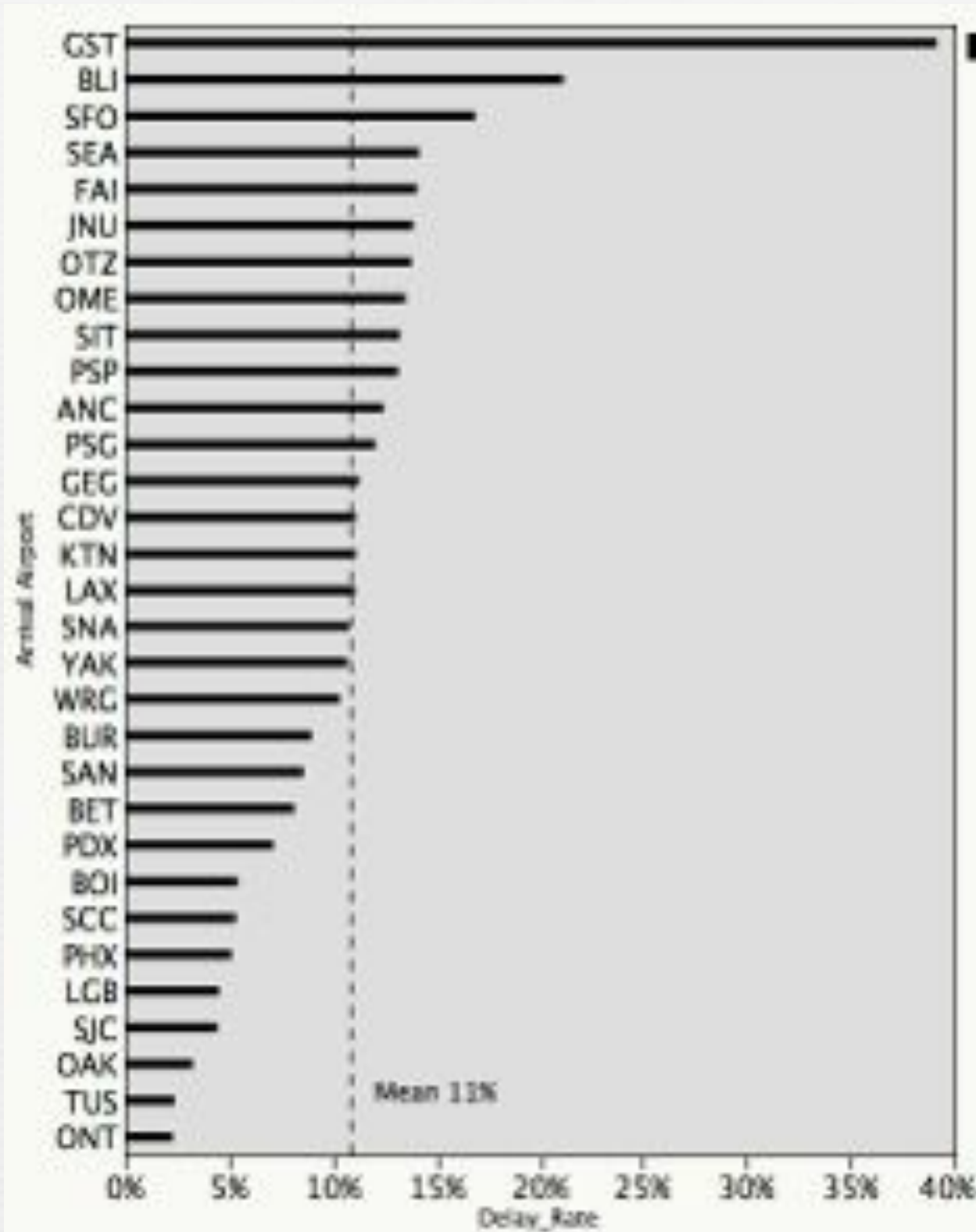
		Los Angeles	Phoenix	San Diego	San Francisco	Seattle	All 5 Airports	% delay
ALASKA	on time	497	221	212	503	1,841	3,274	13.3%
	delayed	62	12	20	102	305	501	
ALASKA	delay %	11.1%	5.4%	8.6%	16.9%	14.2%		
AM WEST	on time	694	4,840	383	320	201	6,438	10.9%
	delayed	117	415	65	129	61	787	
AM WEST	delay %	14.4%	7.9%	14.5%	28.7%	23.3%		



# Ask the “right” question



# Alaska's On-time Performance



10.9%

Alaska is the  
industry leader  
in on-time flights



# Flight Delay: the data

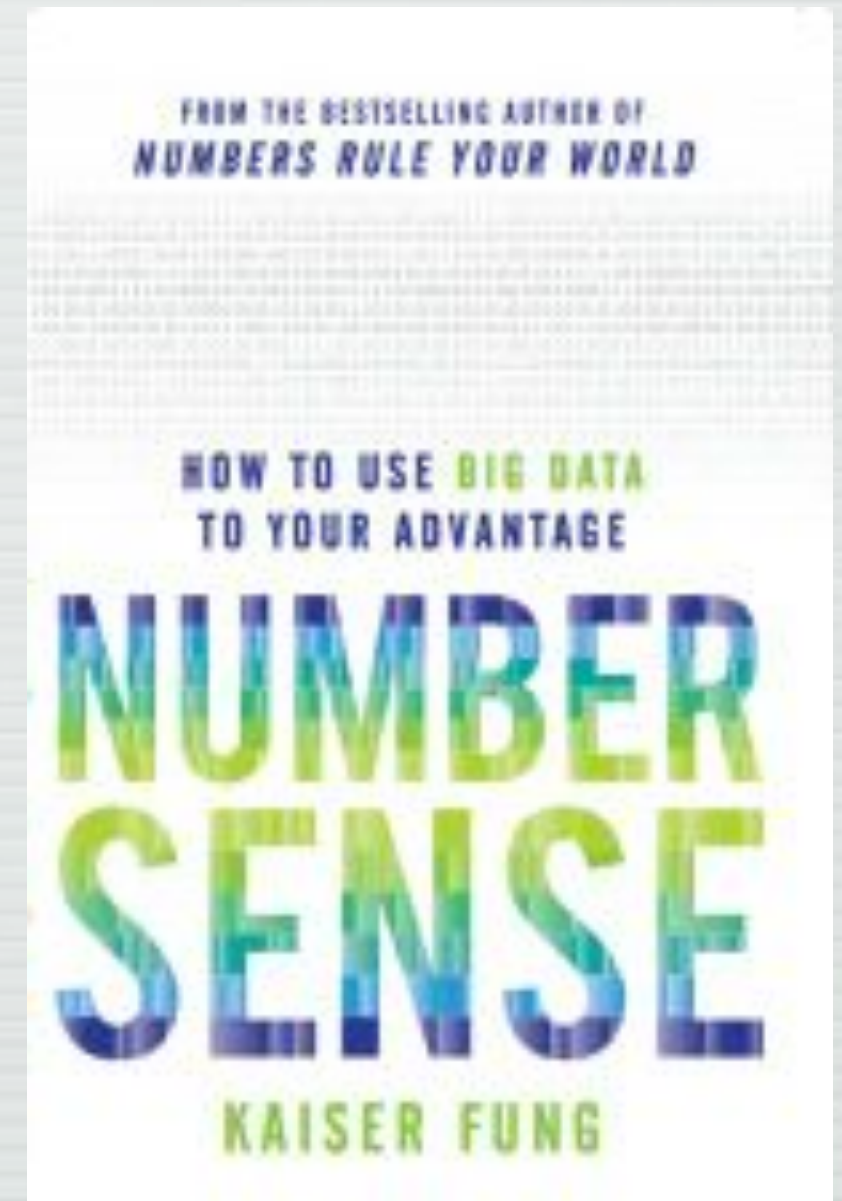
U.S. domestic commercial flights  
1987 to 2008  
In which variable(s) does  
Simpson's paradox lurk?

123 million records

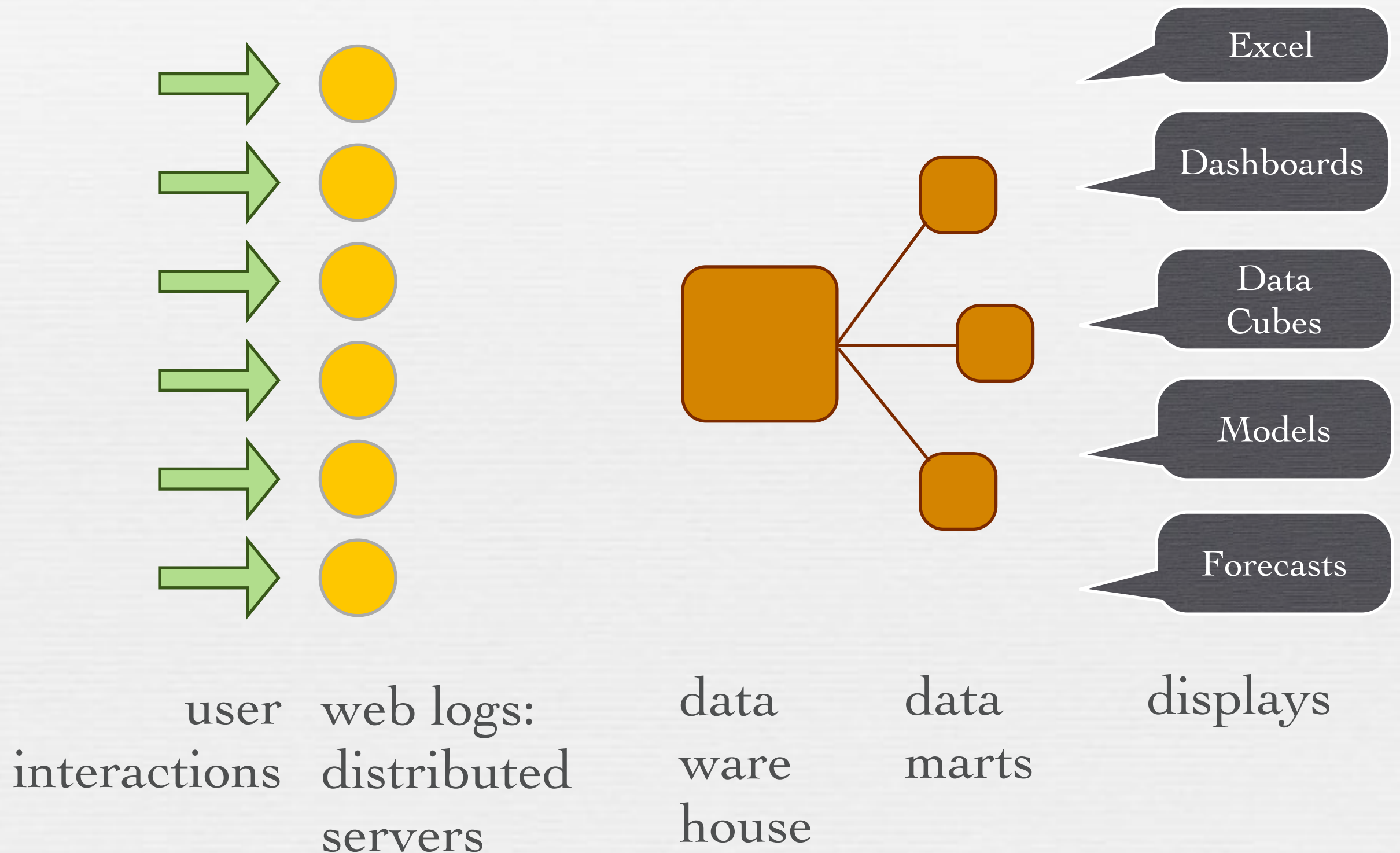
29 variables  
A priori?



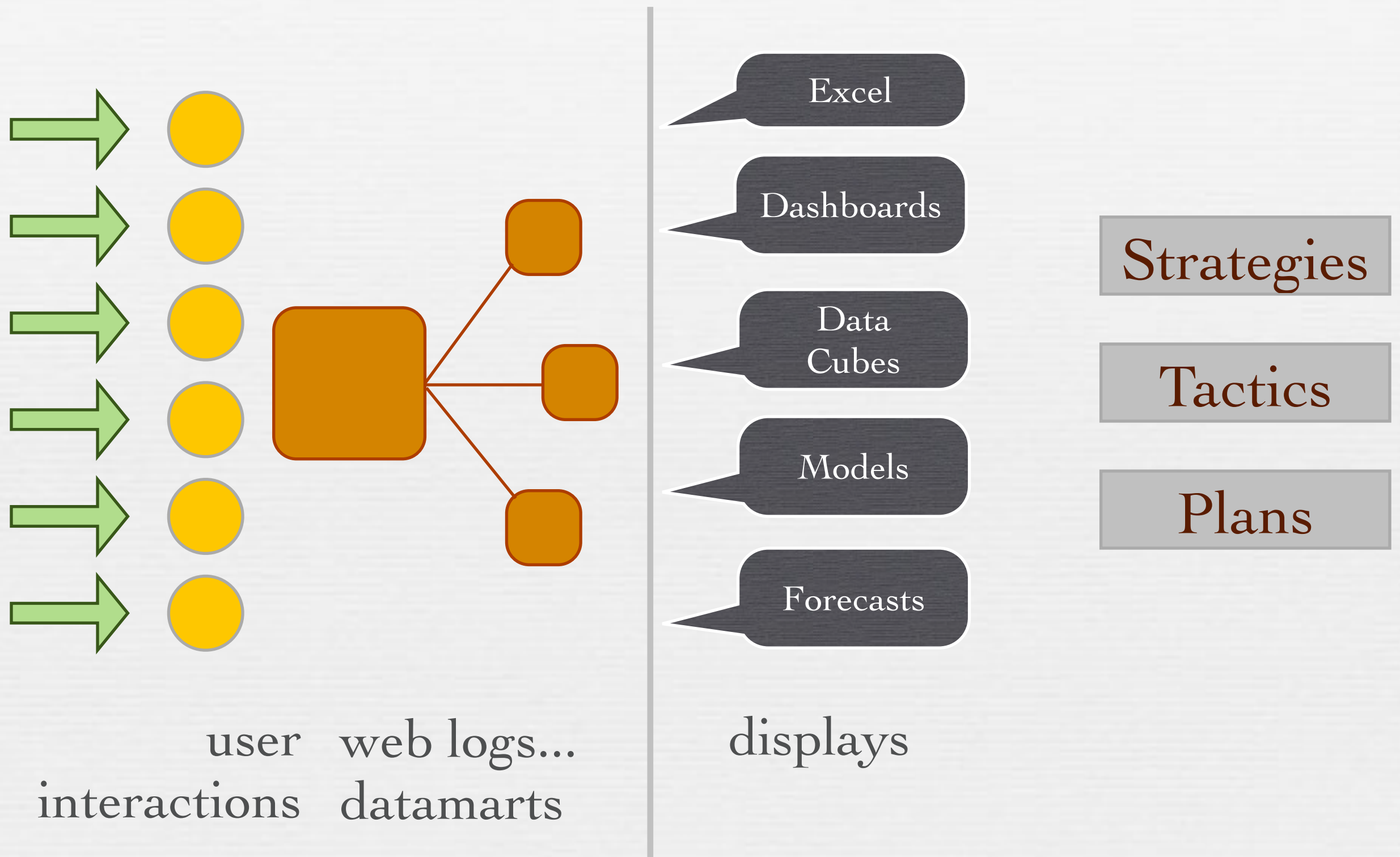
When more people are performing more analyses more quickly, there are more theories, more points of view, more complexity, more conflicts and more confusion. There is less clarity, less consensus and less confidence.



# Big Data: Producers



# Big Data: Consumers





# Moneyball





FROM THE BESTSELLING AUTHOR OF  
**NUMBERS RULE YOUR WORLD**

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HOW TO USE **BIG DATA**  
TO YOUR ADVANTAGE

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# NUMBER SENSE

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# NUMBER SENSE

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# Statistics != Math



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# The Obesity Epidemic



# The Obesity Epidemic



# Quetelet's Index (1830)



BMI Calculator

Imperial ☒ Metric

Feet Height Inches

5 11

Stone Weight Pounds

11 11

Your BMI Calculation is:

23.0

Calculate BMI

INFO | CALC | QUIT



# BMI Critics (2000-)

## obesity reviews

### Viewpoint

## Beyond body mass index

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### Summary

Body mass index (BMI) is the cornerstone of the current classification system for obesity and its advantages are widely exploited across disciplines ranging from international surveillance to individual patient assessment. However, like all anthropometric measurements, it is only a surrogate measure of body fatness. Obesity is defined as an excess accumulation of body fat, and it is the amount of this excess fat that correlates with ill-health. We propose therefore that much greater attention should be paid to the development of databases and standards based on the direct measurement of body fat in populations, rather than on surrogate measures. In support of this argument we illustrate a wide range of conditions in which surrogate anthropometric measures (especially BMI) provide misleading information about body fat content. These include: infancy and childhood; ageing; racial differences; athletes; military and civil forces personnel; weight loss with and without excessive physical exertion; and special clinical sit-

# BMI Critics (2000-)

obesity reviews

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January 20

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## Why are doctors still measuring obesity with the body mass index?

By Jeremy Singer-Vine | Posted Monday, July 20, 2009, at 10:00 AM ET

1 Posted Monday, July 20, 2009, at 10:00 AM ET

Slate.com

### Beyond BMI

Why doctors won't stop using an outdated measure for obesity.



### Why are doctors still measuring obesity with the body mass index?

A few extra pounds can extend your life. Or so chirped the press, reporting on a recent study from the journal *Obesity*. The new research, which supports earlier findings that being slightly overweight is associated with living longer, has added to an ongoing controversy over how we measure obesity. At the center of this debate is the body mass index, a simple equation (your weight in kilograms divided by the square of your height in meters) that has in the last decade claimed a near-monopoly on obesity statistics. Some researchers now argue that this flawed and overly reductive measure is skewing the results of research in public health.

For years, critics of the body mass index have griped that it fails to distinguish between lean and fatty mass. (Muscular people are often misclassified as overweight or obese.) The measure is maddening, too, about the distribution of body fat, which makes a big difference when it comes to health risks. And the BMI cutoffs for "underweight," "normal,"

"overweight," and "obese" have an undeserved air of mathematical authority. So how did we end up with such a lousy statistic?



# BMI Critics (2000-)

## obesity reviews

### Viewpoint Why are doctors still m

By Jeremy Singer-Vine / Posted Monday

/ Posted Monday, July 20, 2009, at 10

### Beyond body mass

Beyond BMI

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"overweight," and "obese" has become a lousy statistic?

OPEN ACCESS Freely available online

PLOS one

## Measuring Adiposity in Patients: The Utility of Body Mass Index (BMI), Percent Body Fat, and Leptin

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### Abstract

**Background:** Obesity is a serious disease that is associated with an increased risk of diabetes, hypertension, heart disease,

decreasing quality of life. Kishner-Guthrie [7] used a gold standard of percent body fat derived from bioelectrical impedance analysis to recommend a BMI > 25.5 kg/m<sup>2</sup> for women as an appropriate cutpoint. In a population of postmenopausal sedentary women, Blew [21] recommended a cutpoint of BMI > 25, while Rahman [12] advocated for the use of race/ethnicity-specific BMI cutpoints. NHANES [6] estimates that 28.6% of adult American women are overweight (BMI 25–30 kg/m<sup>2</sup>) and an additional 35.5% are obese (BMI > 30 kg/m<sup>2</sup>). Shifting those currently considered overweight into the obese category would clarify the magnitude of the issue of obesity. By our cutoffs, 64.1% or about 99.8 million American women are obese.

BMI significantly underestimates adiposity. A better cutpoint for obesity with BMI is 24 for females and 28 for males. These body fat and leptin corrected BMI cutpoints are consistent with lower cutpoints for all-cause mortality in men and women [19]. Leptin levels enhance the precision of estimation in using BMI. The findings can be generalized since this was a cross-sectional study of the American population. Obesity, body fat and increased adiposity are more prevalent than the American public and American physicians are aware of. This is contributing greatly to multiple co-morbidities such as hyperlipidemia, coronary artery

disease, hypertension, and diabetes. The current systematic underestimation of adiposity in large scale studies, and subsequent use of such studies for public health policy-making, can readily be corrected, resulting in a more appropriate sense of urgency and more cogent weighing of public health priorities. While BMI is less precise than direct adiposity measures in predicting medical co-morbidities, improving this globally used metric will have broad population health implications.

### Acknowledgments

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### Author Contributions

Conceived and designed the experiment: NRS ERB. Performed the experiment: NRS ERB. Analyzed the data: NRS ERB. Contributed reagents/materials/analysis tools: NRS ERB. Wrote the paper: NRS ERB.



# Taking eyes off the ball

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## Measuring Adiposity in Patients: The Utility of Body Mass Index (BMI), Percent Body Fat, and Leptin

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### Abstract

**Background:** Obesity is a serious disease that is associated with an increased risk of diabetes, hypertension, heart disease, stroke, and cancer, among other diseases. The United States Centers for Disease Control and Prevention (CDC) estimates a 20% obesity rate in the 50 states, with 12 states having rates of over 30%. Currently, the body mass index (BMI) is most commonly used to determine adiposity. However, BMI presents as an inaccurate obesity classification method that underestimates the epidemic and contributes to failed treatment. In this study, we examine the effectiveness of precise biomarkers and dual-energy x-ray absorptiometry (DXA) to help diagnose and treat obesity.

**Methodology/Principal Findings:** A cross-sectional study of adults with BMI, DXA, fasting leptin and insulin results were measured from 1998–2009. Of the participants, 63% were females, 37% were males, 75% white, with a mean age = 51.4 (SD = 14.2). Mean BMI was 27.3 (SD = 5.9) and mean percent body fat was 31.3% (SD = 9.3). BMI characterized 26% of the subjects as obese while DXA indicated that 64% of them were obese. 39% of the subjects were classified as non-obese by





# Taking eyes off the ball

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## Measuring Adiposity in Patients: The Utility of Body Mass Index (BMI), Percent Body Fat, and Leptin

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**Abstract**

**“Although DXA is a direct measurement of fat and a better measure of adiposity than BMI, it is not a disease correlate.”**

**Background:** Obesity is a serious disease that is associated with an increased risk of diabetes, hypertension, heart disease, stroke, and cancer among other diseases. The United States Centers for Disease Control and Prevention (CDC) estimates a 20% obesity rate in the 50 states, with 12 states having rates of over 30%. Currently, the body mass index (BMI) is most commonly used to determine adiposity. However, BMI presents as an inaccurate obesity classification method that underestimates the epidemic and contributes to failed treatment. In this study, we examine the effectiveness of precise biomarkers and dual-energy x-ray absorptiometry (DXA) to help diagnose and treat obesity.

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# The more things change

## All Patients

		DXA		BMI Totals
		Not Obese	Obese	
BMI	Not Obese	35 %	39 %	74%
	Obese	1 %	25 %	26%
DXA Totals		36 %	64 %	100%

## Female Patients

		DXA		BMI Totals
		Not Obese	Obese	
BMI	Not Obese	26 %	48 %	74%
	Obese	0 %	26 %	26%
DXA Totals		26 %	74 %	100%



# n-U-issance



# Reinstall Windows

Windows

A fatal exception 0E has occurred at 0028:C0011E36 in UXD VMH(01) + 00010E36. The current application will be terminated.

- \* Press any key to terminate the current application.
- \* Press CTRL+ALT+DEL again to restart your computer. You will lose any unsaved information in all your applications.

Press any key to continue \_

# Trust, not Truth



# Embarrassment of Riches

A team of psychologists performed personality tests on 100 professionals, of which 30 were engineers and 70 were lawyers.

Here is a brief description of one of the subjects:

Jack is a 45-year-old man. He is married and has four children. He is generally conservative, careful, and ambitious. He shows no interest in political or social issues and spends most of his free time on his many hobbies, which include home carpentry, sailing, and mathematics.

What is the probability that Jack is one of the 30 engineers?

A. 10 – 40 %

B. 41 – 60 %

C. 61 – 80 %

D. 81 – 100 %

The Law of Small  
Numbers is even  
more relevant in the  
era of Big Data



# Target knows your daughter is pregnant



... before you do

# Customer Acquisition



“Right around the birth of a child... parents are exhausted and overwhelmed and their shopping patterns and brand loyalties are up for grabs.”

# Customer Acquisition



“We knew that if we could identify them in their second trimester, there’s a good chance we could capture them for years.”



# Brochure Design



“We started mixing in all these ads for things we knew pregnant women would never buy, so the baby ads looked random.”

# Brochure Design



“We’d put an ad for wineglasses next to infant clothes. That way, it looked like all the products were chosen by chance.”

# Brochure Design

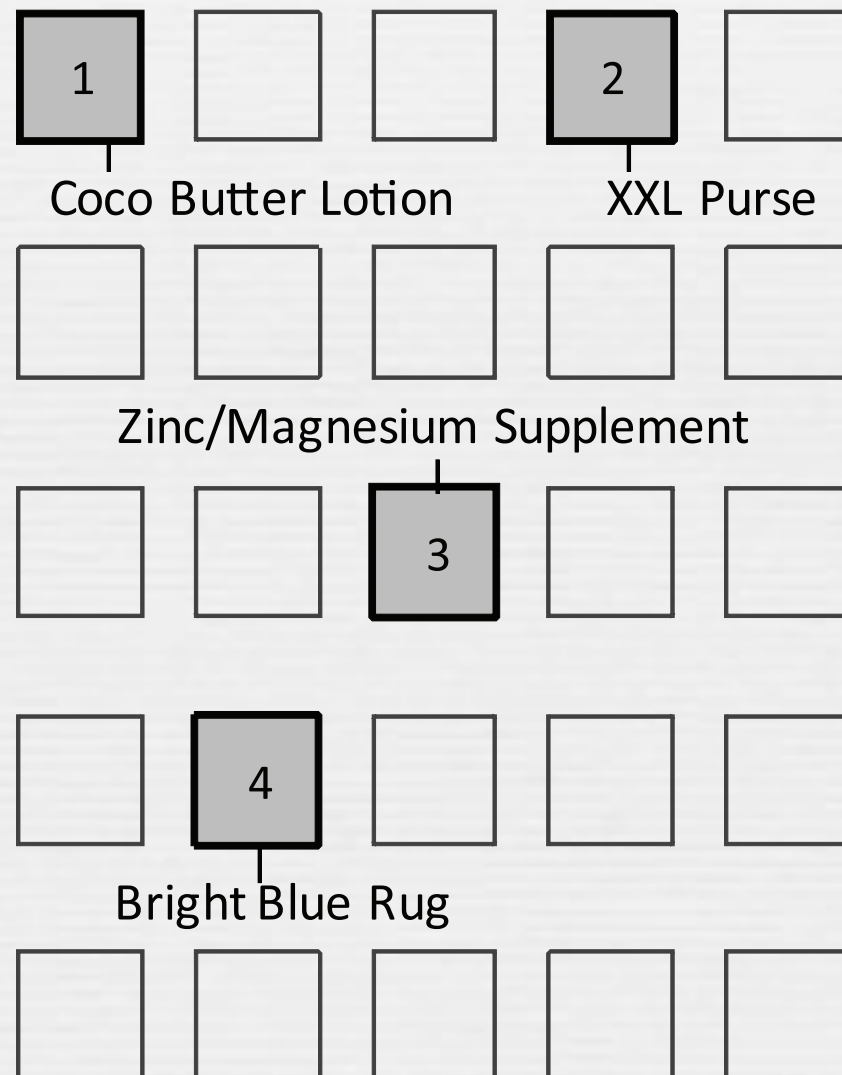


“As long as a pregnant woman thinks she hasn’t been spied on, she’ll use the coupons.”



# The Model

*Ward made 4 of 25 related purchases*



*Pregnancy  
Score = 87%*

Buy baby  
products  
soon

# Mad Dad

		Reality		
		Pregnant	Not	
Model Says	Pregnant	6%	14%	20
	Not	4%	76%	80
		10	90	100

Incidence:  $\frac{10}{100} = 10\%$

Positive predictive value:  $\frac{6}{20} = 30\%$


False positive rate:  $\frac{14}{90} = 16\%$

False negative rate:  $\frac{4}{10} = 40\%$

3x

# Sending Mixed Messages

		Reality		
		Pregnant	Not	
Model Says	Pregnant	6%	14%	20
	Not	4%	76%	80
		10	90	100



Incidence:  $\frac{10}{100} = 10\%$

Positive predictive value:  $\frac{6}{20} = 30\%$

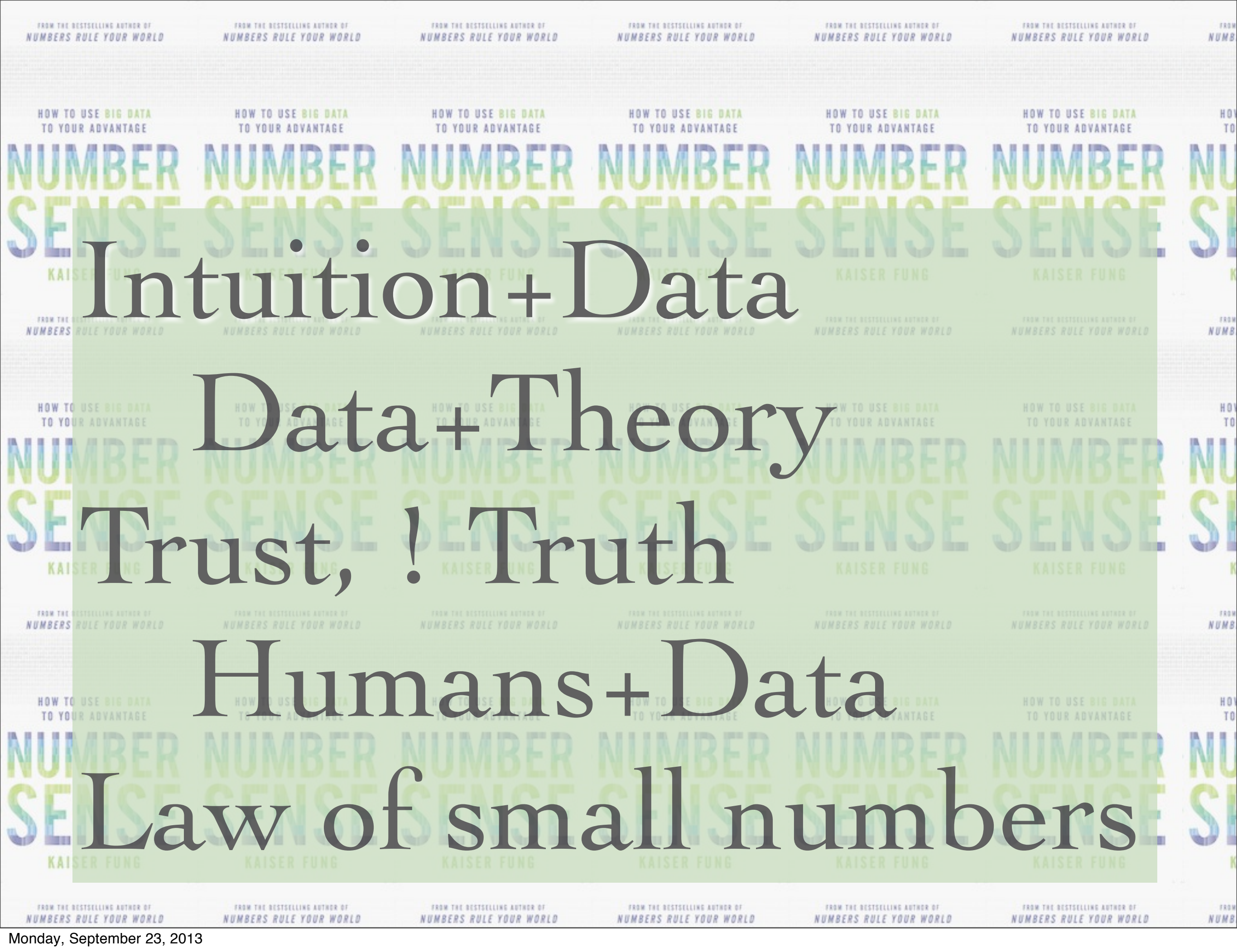
False positive rate:  $\frac{14}{90} = 16\%$

False negative rate:  $\frac{4}{10} = 40\%$

3x







# Intuition + Data Data + Theory Trust, ! Truth Humans + Data Law of small numbers

Thank you

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Gmail: JunkCharts

