

Solutions To Homework Assignment 2 Warm-Up Problems

General Comments:

- The solutions given below are (quite a bit) more extensive than would have been necessary to get full credit. I use the answer key as an opportunity to make important points, or mention commonly made mistakes. Nonetheless, the answer key should give you an idea of the type of solutions I would like to receive.
- I have included the graphics in a separate file since they don't import super easily into my mathematical word processing program.

Warmup Problems

(1) **Don't Drink and Derive:** The purpose of this problem is to see some examples of testing and interpreting transformations and interactions in the logistic regression context.

(a) **Interactions** We start by interpreting the interaction effect of speed and whether or not it was dark at the time of the accident on whether or not there were fatalities in the accident. The intuitive definition of an interaction is that the relationship between the outcome and the first predictor variable **depends on or varies as a function of** the value of the second predictor variable and vice versa. Here what that means is that the relationship between the likelihood of fatalities and speed "depends on" whether or not it was dark out (i.e. is different for day and night driving) or equivalently the difference in likelihood of fatalities between night and day changes as a function of how fast the cars were going. The first of these versions of the interpretation is probably more intuitive but both are perfectly valid and both make common sense. Driving fast may be more dangerous at night (version 1) or the effects of night driving (reduced vision, etc.) may be exacerbated by higher speed (version 2). In ordinary least squares regression, if you have one indicator (group) variable and one continuous variable and no interaction then essentially you are fitting two parallel regression lines, one for each group. They may have different intercepts but the slopes are the same. If you include an interaction term then you are allowing the lines to have different slopes as well as different intercepts. This can be extended to the case where either both predictor variables are categorical or both are continuous but the one categorical/one continuous case is the easiest to visualize. Mathematically, to include an interaction term in the model we take the product of the two variables involved in the joint effect. The coefficient of the interaction term gives the difference in slope between the two lines. So how does this generalize to the logistic regression setting? In logistic regression everything is linear on the **log odds scale**. Thus we can interpret interactions in logistic regression the same way as in OLS as long as we talk about the outcome in terms of log odds. If we go to the odds ratio scale then we can still say that the odds ratio for the effect of speed is different for nighttime driving than daytime driving or that the odds ratio for driving at night changes as a function of speed. However in this case the exponentiated coefficient of the interaction term has a **multiplicative** effect on the odds ratio.

The most important thing to remember with interaction terms, in logistic regression as well as OLS, is that you can't interpret the coefficients (or odds ratios) for the main effects of the component variables separately—you must interpret them in terms of the combined effects of the two (or more) variables involved in the interaction. All variables not involved in the interaction are assumed to be held fixed and so don't really affect the interpretation of the interaction.

As an illustration, let's look at the coefficients for the speed and dark variables and their interaction in the traffic data set. I'm going to assume that the at fault driver was male and not drunk and that there was a two-car accident so that I can set $X_1 = X_2 = X_8 = X_9 = 0$. I will also assume the driver was 40 years old. (A standard choice is to set all the continuous variables not involved in the interaction to their mean value in the data set. I just picked a round number near that.) None of these values actually matters for the interpretation of the interaction—they just change what is my base value for the log odds (the intercept for the plot I'm going to draw). We could equally carry the variables along in our expressions without plugging in values but it's messier looking. Now let's think about the values $b_5 = .026$, the speed coefficient, $b_6 = 2.73$, the dark coefficient, and $b_7 = .018$, the interaction coefficient. At an arbitrary speed and time of day, using the values specified above for the other variables, my equation for the log odds is

$$\begin{aligned} -3.367 + .896(0) - .967(0) - .15(40) + .0015(40^2) + .026speed + 2.73dark + .018speed * dark + 1.18(0) + .95(0) \\ = -6.97 + .026speed + 2.73dark + .018speed * dark \end{aligned}$$

The simplest way to interpret the remaining coefficients is to look at what happens (1) during the day (dark = 0) at an arbitrary speed and (2) at night (dark = 1) at an arbitrary speed. The equation for the log odds as a function of speed during the day is just

$$-6.97 + .026speed + 2.73(0) + .018speed(0) = -6.97 + .026speed$$

In other words our “intercept” of -6.97 gives the log odds for fatality during the day time if our speed is 0 (i.e. basically stopped) and the coefficient b_5 for the speed variable gives the change in log odds associated with driving 1 extra mile per hour faster **during the day**. Similarly the odds ratio obtained by exponentiating the speed coefficient, $e^{b_5} = 1.026$ says the odds of a fatality are 2.6% higher per mile per hour of speed **assuming we are driving during the day**.

Now what about at night time? In this case our equation becomes

$$-6.97 + .026speed + 2.73(1) + .018speed(1) = (-6.97 + 2.73) + (.026 + .018)speed = -4.24 + .044speed$$

We see that the coefficients of the dark indicator and the interaction term give us, respectively, the differences in intercept and slope between driving at night and driving during the day. Specifically, $b_6 = 2.73$ tells us that if the accident takes place at 0 miles per hour the log odds of a fatality will be 2.73 higher if the accident happens at night compared to during the day. On the odds ratio scale, $e^{2.73} = 15.27$ which means that for accidents that happen at 0 speed the odds of a fatality are 15 times as high at night as during the day. This is not really very meaningful since you don't have accidents at 0 miles per hour and even if you take this to mean extremely low speed the likelihood of a fatality is so low either during the day or at night that we probably aren't going to be considering it. The intercepts here are more important for giving the baseline on which to build the effects of the other variables. Now let's consider the coefficient of speed in the night-time equation. It is $.026 + .018 = .044$ meaning that at night every extra mile per hour of speed increases the log odds of a fatality by .044. The coefficient of the interaction term, $b_7 = .018$ tells us how much more the log odds go up by at night than during the day. If we exponentiate to get the odds ratio we have $e^{.044} = 1.045$ meaning that **at night** each extra mile per hour is associated with a 4.5% increase in the odds of a fatality. Note that $e^{.045} = e^{.026 + .018} = e^{.026}e^{.018} = (1.0265)(1.0185)$ which is the product of the odds ratios given on the printout for the speed main effect and the interaction term. In other words, the odds ratio for the interaction term tells us the extra multiplicative effect on the odds of fatality associated with driving at night as opposed to during the day. The effects of all these components are even messier on the probability scale. Because the probabilities are non-linear, the change in probability depends not only on the coefficients/odds ratios but the actual values of the speed and dark variables. The easiest way to see the effects is to plot the predicted probabilities as a function of speed for (1) day time and (2) night-time

and to see where the resulting S-curves differ.

(b) Transformations: Transformations of the predictor variables in logistic regression work the same way as in standard linear regression: you add functions of the X's as predictors, test whether they are significant, and if so interpret them in terms of the **shape** of the relationship between the predictor and outcome (rather than in terms of the effect of a 1-unit change in X since for non-linear transformations the degree of impact depends on the actual X value.) The main difference is that the interpretation about the shape is simplest on the log odds scale (where it is the same as in OLS) but that is the least intuitive scale in terms of the outcome. The numeric interpretation on the odds ratio scale is NOT so easy but computer packages will provide odds ratios for the coefficients of transformed variables anyway—you don't want to interpret them blindly. Usually you can at least say something about the effect on the probability. For instance if you have a quadratic predictor that is significant with a positive coefficient that means that the probability of the event of interest initially goes down as X increases and then goes up again—it's just that the shape isn't a parabola on the probability scale. If you want odds ratios associated with a curvilinear variable it's best to pick two specific values of X you'd like to compare, compute the difference in the log odds at those two values and exponentiate that to get the odds ratio of interest.

As a specific example let's look at age as a predictor in the traffic accident data set. The model includes a linear and a quadratic term and the coefficient of the age-squared term is positive. This means that we expect the log odds (and hence the probability) of a fatality to be higher for both younger and older drivers and lower for drivers of middle age. This makes intuitive sense—inexperience and a higher tendency towards recklessness on the young end and deterioration of reaction times and other physical faculties on the high end could both lead to worse accidents. To formally test whether the quadratic relationship between age and log odds of fatality is an improvement over a linear relationship we just need to test whether the coefficient of the age-squared term is significantly different from 0:

$H_0 : \beta_4 = 0$ —the age-squared term contributes nothing to the model after accounting for the other variables; a quadratic relationship is no better than a linear relationship in age.

$H_A : \beta_4 \neq 0$ —the age-squared term is worth adding to the model; a quadratic effect better describes the relationship between age and log odds of fatality than a linear relationship.

The p-value for the corresponding Wald test is .005 so we reject the null hypothesis and conclude that the quadratic model is an improvement. However, how much the log odds or the probability changes with age changes depends on where you are along the parabola. Suppose for instance that we want to compare the odds of a fatal accident for drivers at two different ages, A_1 and A_2 . The difference in log odds for these two people is given by

$$b_4 A_1 + b_5 (A_1^2) - b_4 A_2 - b_5 (A_2^2) = -.15(A_1 - A_2) + .0015(A_1^2 - A_2^2)$$

If we compare a 30 year old to a 20 year old our change in log odds is

$$-.15(30 - 20) + .0015(900 - 400) = -.75$$

and the corresponding odds ratio is $e^{-.75} = .47$. The 30 year old has about 53% lower odds or odds only about half as high odds of being in a fatal accident as the 20 year old, all else equal. However if we compare a 40 year old to a 30 year old, which is also a 10 year change in age, the difference in log odds is

$$-.15(40 - 30) + .0015(1600 - 900) = -.45$$

and the corresponding odds ratio is .64. Thus a 40 year old has only a 36% reduction in odds of a fatality compared to a 30 year old. There is no easy direct way to interpret the odds ratio of .0015 given on the printout for age-squared because it can not be separated from age. Note that this is different from the interaction situation above where we were able to get separate interpretations by breaking the equation down

into cases (day vs night). Here we have to give the interpretation for a particular pair of ages.

We could conceptually have come up with the idea that a quadratic model in age would make sense here but suppose we weren't sure about the shape and wanted to find a way to visualize the data, similar to a scatterplot of Y vs X in OLS. One way this is done is to divide the range of the X variable (here age) into intervals (quartiles is a common choice), create dummy variables for each of the intervals, fit a logistic regression using those dummy variables, and then to plot their corresponding coefficients versus the middle of the bins. You plot a coefficient of 0 for whichever bin you used as the reference. Since the coefficients are on the log odds scale, if this plot looks linear then you suspect a linear model will be OK. If the plot looks curved it provides some intuition about the shape. Of course the more bins you use the better the idea you get of the shape but also the more data you need to get a reasonable fit with all those dummy variables!

(2) Goodness of Fit Basics:

(a) In a logistic regression we model the **probability** of an event of interest as a function of a set of predictor variables. The probability represents the **average** relationship between the outcome and the covariates for the population as a whole. You can use the predicted probabilities together with a threshold cutoff to make a prediction about the outcome for an **individual** subject. The higher the predicted probability, the more inclined you are to believe that the individual will have the event. The term **calibration** refers to how well your model fits **on average**—in other words it measures how good your fit is on the level of the **probabilities**. Suppose we had as our predictors in a logistic model two indicators, say gender and treatment group. Our model would produce four predicted probabilities—one for male and treated, one for male and untreated, one for female and treated and one for female and untreated. We could also compute the observed proportions of events in each of these four categories in our data set and see if they were similar to the predicted probabilities. The closer they are, the better our model fits. This is the essential idea behind the Hosmer-Lemeshow goodness of fit test. HL simply extends this idea to the case where we have continuous predictors so it is not as obvious what our bins of covariate values should be. **Predictive accuracy** refers instead to how good a job our model does at guessing the outcomes for **individuals**. This is obviously a much harder problem. Even if we have accurately estimated the probability for people with a certain set of characteristics as p , the chances that a particular individual with those characteristics has the event will be p and the chance that they won't will be $1-p$. Wherever we set our threshold we will make a mistake on a fraction of either p or $1-p$ of the people. The closer p is to .5 the more errors we will tend to make because about half the people will have the event and half will not but we will categorize them all as having it (or not having it) depending on where we've set our threshold. This is somewhat analogous to the situation in standard linear regression where even if we had estimated the regression line perfectly, individuals would still vary about the line, e.g. it doesn't have to be the case that all people with the same height (X) have the same weight (Y) even if height and weight are related. However in OLS the values for the average Y and the individual Y (here weight) are at least on the same scale. In the logistic setting the average outcome is a probability whereas the individual outcome is a yes or no. It is possible to have good calibration and bad predictive accuracy (e.g. you fit the right model but lots of people in your sample have characteristics that make their predicted probabilities near .5). It is also possible to have bad calibration (i.e. your predicted probabilities are way off) but good predictive accuracy because the people who do and do not have the outcome of interest are well-separated in terms of their X characteristics and hence easy to distinguish from one-another. Thus these two concepts tell you different things about how well your model performs.

(b) The terms **sensitivity** and **specificity** are connected to the concept of predictive accuracy. **Sensitivity** is also called the **true positive rate**. It is the fraction of people who have the event of interest who you correctly predict to have the event using your model. The **specificity** is also called the **true negative rate**. It is the fraction of people who do NOT have the event who you predict correctly with your model. Instead of specificity people sometimes talk about the **false positive rate** which is just 1 minus the specificity. The sensitivity and specificity depend on the probability cutoff or **threshold** you use for deciding whether to

predict the person will have the event. For a threshold, p_0 , you predict the person will have the event if their predicted probability is above the cutoff, i.e. $\hat{p} > p_0$ while if $\hat{p} < p_0$ you will predict the person doesn't have the event. The smaller you set your p_0 , the higher your sensitivity will be. In fact, if $p_0 = 0$ you will predict that everyone will have the event and hence your sensitivity will be 1—all people who actually have the event will have been predicted to do so. However this naturally does horrible things to your specificity. If you predict that everyone will have the event then you will be wrong about 100% of people who don't have the event and your specificity will be 0. You can of course make your specificity higher by increasing the threshold probability but at the expense of decreased sensitivity. The trick is to find a point at which sensitivity and specificity are both as high as possible. This is often done by plotting both sensitivity and specificity as a function of the probability threshold and picking the point where the curves cross. However it may be more important to you to classify one or the other of the outcomes correctly (e.g. it might be worse to miss diagnosing someone who has a disease than to say someone has the disease when they don't. In the first instance the person may go off and infect other people or not get the needed treatment while in the second further tests will presumably show the person is OK though there may be some un-necessary procedures/anxiety in the interim). In this case you might choose to optimize one of sensitivity or specificity over the other. The combined sensitivity and specificity curves can be summarized using something called a **receiver operating characteristic** or **ROC** curve. This curve plots sensitivity (y-axis) versus false positive rate (x-axis) over a range of threshold probabilities. If your model is no better than random guessing the ROC curve will look like a straight line with a slope of 1 going from (0,0) to (1,1). An optimal ROC curve will rise rapidly to 1 and level off—this corresponds to being able to achieve high sensitivity even while maintaining a low false positive rate (high specificity). The information from the ROC curve is usually summarized by the **area under the curve** or **AUC** which is 1 for a perfect model and .5 for a model that is no better than random guessing. Values in the .7 to .9 range are generally considered pretty good. Achieving values above .9 is very rare.

(3) Still Gasping For Breath: This problem is designed to illustrate the various goodness of fit measures, including examining the shape of the relationship for a continuous variable, calibration and predictive accuracy.

(a) To check for linearity of a predictor in a logistic regression a rough but fairly simple technique is to divide the variable into quartiles, create dummy variables for the resulting bins and run a logistic model using those dummy variables. One then plots the resulting coefficients for the indicators versus the mid-point of the bins. If the plot looks linear then a linear fit is probably OK. If it has a curved pattern than will indicate something about a superior shape. The commands used to obtain the quantiles (25th, 50th and 75th percentiles) for the pollution variable are shown below. The resulting bins are [0-15.7], [15.7-21.3], [21.3-26.1] and [26.1,40.5]. We then fit the model with all the predictors including the dummy variables for these ranges. The resulting coefficients are $\hat{\beta}_1 = .51, \hat{\beta}_2 = .85, \hat{\beta}_3 = 1.25$. The lowest pollution bin is serving as the reference so effectively its coefficient is 0. We use this value in the scatterplot which is included in the accompanying graphics file. The points in the plot fit a straight line very well so we conclude that a linear fit in pollution is appropriate. The printout for the logistic regression with a linear term in pollution is also given below. We will use this model as the basis for the rest of the problem.

```
. sum pollution, detail
```

pollution				

	Percentiles	Smallest		
1%	4.581451	.6100724		
5%	9.353241	.6554115		
10%	11.36944	.9150193	Obs	1000
25%	15.69217	1.728456	Sum of Wgt.	1000

50%	21.25496		Mean	21.00246
		Largest	Std. Dev.	7.221641
75%	26.08167	39.60468		
90%	30.31795	39.82299	Variance	52.1521
95%	32.43209	39.8604	Skewness	-.0813572
99%	37.01562	40.41085	Kurtosis	2.622869

To create the pollution bin indicators I proceeded as follows:

```
gen pollbin1 = 0
replace pollbin1 = 1 if pollution > 15.7 & pollution <=21.3
```

and so on for the other indicators

```
. logit asthma pollbin1 pollbin2 pollbin3 urban ses breastfed famhist genderp3
```

Logistic regression	Number of obs	=	1000
	LR chi2(8)	=	76.72
	Prob > chi2	=	0.0000
Log likelihood = -334.50151	Pseudo R2	=	0.1029

asthma	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
pollbin1	.5072169	.3756775	1.35	0.177	-.2290975 1.243531
pollbin2	.8546278	.4145998	2.06	0.039	.0420272 1.667228
pollbin3	1.254061	.4366646	2.87	0.004	.3982144 2.109908
urban	.045625	.3151697	0.14	0.885	-.5720963 .6633462
ses	-.0821695	.0347055	-2.37	0.018	-.1501911 -.0141479
breastfed	.0042069	.010241	0.41	0.681	-.015865 .0242788
famhist	1.171824	.2225175	5.27	0.000	.7356974 1.60795
genderp3	-1.080269	.2166788	-4.99	0.000	-1.504952 -.6555864
_cons	.9074093	1.622919	0.56	0.576	-2.273454 4.088272

To create the variables coeff and midpoint I simply opened the data editor and created two new columns by typing in the numbers--specifically the estimated betas (with 0 in the place for pollbin0 since it was the reference) and the midpoints of my bins (e.g. 7.85 as the midpoint of the bin 0-15.7 and so on). Then I created the scatterplot:

```
. scatter coeff midpoint
```

```
. logit asthma urban pollution ses breastfed famhist genderp3
```

Logistic regression	Number of obs	=	1000
	LR chi2(6)	=	82.04
	Prob > chi2	=	0.0000
Log likelihood = -331.83839	Pseudo R2	=	0.1100

asthma	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
urban	-.0771939	.3020666	-0.26	0.798	-.6692335	.5148458
pollution	.0766367	.0200131	3.83	0.000	.0374118	.1158616
ses	-.0818089	.0345813	-2.37	0.018	-.149587	-.0140308
breastfed	.005728	.0103221	0.55	0.579	-.0145029	.0259589
famhist	1.180125	.2230401	5.29	0.000	.7429742	1.617275
genderp3	-1.094722	.2178808	-5.02	0.000	-1.521761	-.6676835
_cons	-.0470419	1.655807	-0.03	0.977	-3.292364	3.19828

```
. logistic asthma urban pollution ses breastfed famhist genderp3
```

Logistic regression	Number of obs	=	1000
	LR chi2(6)	=	82.04
	Prob > chi2	=	0.0000
Log likelihood = -331.83839	Pseudo R2	=	0.1100

asthma	Odds Ratio	Std. Err.	z	P> z	[95% Conf. Interval]	
urban	.9257104	.2796262	-0.26	0.798	.5121009	1.67338
pollution	1.07965	.0216071	3.83	0.000	1.03812	1.12284
ses	.921448	.0318649	-2.37	0.018	.8610635	.9860672
breastfed	1.005744	.0103814	0.55	0.579	.9856018	1.026299
famhist	3.25478	.7259464	5.29	0.000	2.102178	5.039341
genderp3	.3346326	.07291	-5.02	0.000	.2183271	.5128953

(b) The Hosmer-Lemeshow test measures goodness of fit by dividing the subjects into bins, counting how many subjects in each bin have or do not have the event of interest (the “observed counts”); computing the probabilities of having or not having the events for the subjects in each bin based on the fitted model; summing them (to get the “expected counts”); and comparing the resulting values using a statistic analogous to the contingency table chi-squared statistic. If the observed counts are very similar to the expected counts calculated from the model then the model fits well (specifically is “well-calibrated”). If the observed counts are significantly different from the expected counts it means there are at least some bins in which the model does not fit well. If the predictor variables are all categorical then one can let the resulting set of possible predictor categories represent the bins. However if some of the predictors are continuous one usually divides the subjects into bins based on quantiles of the predicted probabilities. 10 bins is a standard choice. The printout for the H-L test for the asthma model is given below. The p-value for the chi-squared test is .11 which is not significant. This suggests that our model fits reasonably well—the observed values do not differ significantly from what is suggested by our model.

```
. estat gof, group(10)
```

Logistic model for asthma, goodness-of-fit test

(Table collapsed on quantiles of estimated probabilities)

```

number of observations =      1000
      number of groups =         10
Hosmer-Lemeshow chi2(8) =      12.93
      Prob > chi2 =         0.1144

```

(c) The pseudo- R^2 based on the log likelihood is given in the basic logistic printout. It is only .11 for this model, indicating that despite the enormous overall significance of the model and the individual predictors, and the fact that the model fits quite well (per the HL test), we are still a long way from a perfect fit. If you like to think of it this way we have moved only 11% of the way along the path from the log-likelihood of the null model (no predictors) to the saturated model (perfect fit.) I mentioned other pseudo- R^2 measures in class. One is the square of the correlation between the Y values and the predicted probabilities. The commands for obtaining this value are shown below. The resulting pseudo- R^2 is $r^2 = .27^2 = .073$ which is a little worse than the .11 we get from the likelihood approach. Another option is to use sums of squares, specifically

$$1 - \frac{\sum (y_i - \hat{p}_i)^2}{\sum (y_i - \bar{y})^2} = 1 - \frac{1001.45}{1078.7} = .072$$

This is about the same as the squared correlation. I got the values for the sums of squares by creating two new variables, the squared residuals based on the model and the squared residuals based on the null model (which just predicts the overall fraction of the cases in the sample as the probability for everyone). The ratio of the means for these variables is the same as the ratio of the sums of squares since the sample size is the same in each case. The corresponding output is shown below. This metric produces an even lower pseudo- R^2 than the other two measures. The main point here is to recognize that although the model fits well and is significant there is still a lot of unexplained variability—this is very typical of logistic regression. Moreover there are many different measures of R^2 and they are not particularly consistent in their numerical values. These measures are most useful for comparing different models with the same outcome variable to see how much better one performs than another.

Correlation pseudo R-squared

```

. predict asthmaprobs
(option p assumed; Pr(asthma))

```

```

. cor asthma asthmaprobs
(obs=1000)

```

```

-----+-----
          |   asthma asthma~s
-----+-----
          |
asthma    |   1.0000
asthmaprobs |   0.2698   1.0000

```

```

. gen asthmaresids = asthma - asthmaprobs

```

```

. summarize asthma

```

```

-----+-----
Variable |      Obs      Mean   Std. Dev.      Min      Max
-----+-----
asthma   |      1000      .123    .3286016         0         1

```



```
. gen asthmaresidsnull = asthma - .123
. gen asthmaresids2 = asthmaresids^2
. gen asthmaresidsnull2 = asthmaresidsnull^2
. summarize asthmaresids2
```

Variable	Obs	Mean	Std. Dev.	Min	Max
asthmares~s2	1000	.1001454	.2208187	.000085	.9294102

```
. summarize asthmaresidsnull2
```

Variable	Obs	Mean	Std. Dev.	Min	Max
asthmares~l2	1000	.107871	.2477656	.015129	.769129

(d) The desired sensitivity, specificity and total fraction correct plots are shown in the accompanying graphics file. The first two are generated automatically by most programs. The total fraction correct can be calculated from the sensitivity and specificity as follows. Let n_P be the number of positive cases in the sample and let n_N be the number of negative cases with $n = n_P + n_N$. Let n_{TP} be the number of positive cases that are predicted correctly (the true positives) and let n_{TN} be the number of negative cases predicted correctly (the true negatives). The sensitivity is n_{TP}/n_P and the specificity is n_{TN}/n_N . The fraction correct is

$$\frac{n_{TP} + n_{TN}}{n} = \frac{n_P(n_{TP}/n_P) + n_N(n_{TN}/n_N)}{n} = \frac{n_P}{n} \text{Sensitivity} + \frac{n_N}{n} \text{Specificity}$$

The commands for generating this variable are also shown below. The sensitivity/specificity plot shows the two curves crossing at a threshold of about .13 and the corresponding sensitivity and specificity (and hence total fraction correct) are both around 70% which is quite good. Correspondingly the area under the ROC curve is .7528 which is very good though not absolutely spectacular. Overall this model performs very well in terms of predictive accuracy, despite the rather low seeming pseudo- R^2 values.

```
. lsens, gensens(asthmasens) genspec(asthmaspec) genprob(asthmathreshold)
obs was 1000, now 1002
```

```
. tab asthma
```

asthma	Freq.	Percent	Cum.
0	877	87.70	87.70
1	123	12.30	100.00
Total	1,000	100.00	

```
. gen totcorrect = .123*asthmasens + .877*asthmaspec
. scatter totcorrect asthmathreshold
. lroc
```

Logistic model for asthma

number of observations = 1000
area under ROC curve = 0.7528