# Examine the Association between Temperature Variation and Cardiovascular Disease Hospitalization

A Case Study in Shanxi, China

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## Introduction

## Theoretical background

### Global climate change

- ► Frequent heat shocks and cold spells<sup>1,2</sup>
- ▶ 12.6 M deaths attributable to climate change<sup>3</sup>

#### **CVD**

- Cardiovascular disease (CVD) is the leading cause of death worldwide and in China
- ▶ 15.2 M deaths, 26.7% of all deaths<sup>4</sup>

### **Aging China**

- ► "Aging tsunami" <- Previous one-child policy
- ▶ 400 M (30%) older adults by 2050<sup>5</sup>

### **Research Question**

Is temperature variation associated with CVD hospitalizations?

- biological association
- research gap

## **Data source**

### Shanxi Province, China

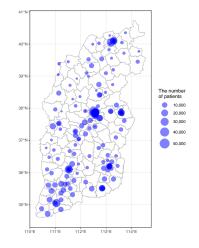


Figure 1: The location of Shanxi Province in China

## Shanxi inpatient database

#### **CVD** inpatients

- ▶ 175 hospitals
- ► 112 out of 118 administrative districts (ADs)
- $ightharpoonup \sim 1.2$  million patients
- **2015 2017**



**Figure 2:** Geographic distribution of 175 hospitals in Shanxi, China

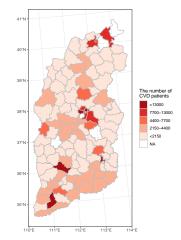
### Shanxi Statistical Yearbook

### County/city level

▶ 118 ADs

#### Variables available

- Population
- Gender
- Rural
- Education



**Figure 3:** Choropleth map patient distribution in each county and city in Shanxi, China

## The number of CVD patients by month

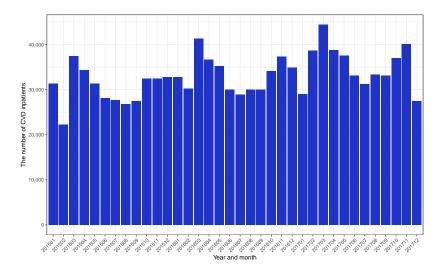
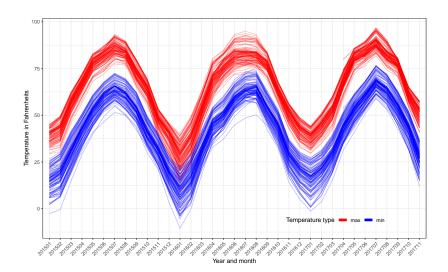


Figure 4: The number of CVD patients by year and month

## Temperature variation definition

- ▶ Vertical variation:  $V_v = T_{max} T_{min}$
- lacksquare Horizontal variation:  $V_h = \sum_{i=d-7}^d \left| T_i T_{i-1} \right|$



## Temperature variation trend

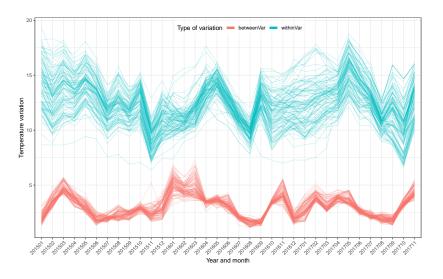


Figure 6: Temperature variation trend in 118 ADs in Shanxi, 2015 - 2017

## Final sample

- ▶ 109 ADs
- ▶ 12 months in 3 years
- ightharpoonup 109 \* 12 \* 3 = 3,924 rows

Data cleaning, visualization, statistical models, and reporting in R 3.6.0.

# **Statistical models**

### Model selection

The outcome is the count of CVD patients:

- ► Must be non-negative,
- integers,
- highly righ-skewed.

OLS assumpts are not met!

Poisson regression is a natural model for count data. We consider:

- 1. non-spatial Poisson regression
- 2. random effects Poisson regression
- 3. spatial Poisson regressions

## Non-spatial Poisson model

$$Y_i \sim \mathsf{Poisson}(\mathsf{Pop}_i * \lambda_i) \ \mathsf{log}(\lambda_i) = eta_0 + \sum_k eta \mathbf{X}$$

- $\triangleright$   $Y_i$ : The number of CVD inpatients
- ▶ Popi: The total population as an offset
- $\lambda_i$ : The rate parameter of Poisson distribution, both the mean and variance
- Predictor variables: temperature variation (horizontal and vertical), average temperature, log of GDP per capita, the percent of female, and the percent of rural population

### Hierarchical Poisson model

Assuming that each ADs have its own characteristics, and observations are **conditionally independent**.

$$Y_{ij} \sim \mathsf{Poisson}(\mathsf{Pop}_{ij} * \lambda_{ij})$$

$$\log(\lambda_{ij}) = \beta_{0j} + \beta_{1j}HV_{ij} + \beta_{2j}VV_{ij} + \sum_{k-2}\beta \mathbf{X} + u_{0j}$$

$$\beta_{0j} \sim \mathcal{N}(\mu_0, \sigma_0^2)$$

$$\beta_{01} \sim \mathcal{N}(\mu_1, \sigma_1^2)$$

$$\beta_{02} \sim \mathcal{N}(\mu_2, \sigma_2^2)$$

- ▶ Random intercepts:  $\beta_{0j}$  for each AD j
- ▶ Random slopes:  $\beta_{1j}$  and  $\beta_{2j}$  for each AD j

## **Spatial Poisson models**

#### **Spatial lag Poisson model**

- ightharpoonup An autoregressive parameter ho
- ► A weighting matrix **W**

$$Y_i \sim \mathsf{Poisson}(\mathsf{Pop}_i * \lambda_i) \ \mathsf{log}(\lambda_i) = eta_0 + \sum_k eta \mathbf{X} + 
ho \mathbf{W} y$$

#### Geographically weighted Poisson model

Still at the initial proof of concept stage. It can be conducted in the R package spgwr by Roger Bivand (2017).

## Results

### Moran's I - CVD patients

```
coords <- hloca[,c("longitude", "latitude")] %>%
 as.matrix()
nb <- dnearneigh(coords,d1=0, d2 = 70, longlat = TRUE)</pre>
moran.test(hloca$N, nb2listw(nb, style="W"))
##
   Moran I test under randomisation
##
##
## data: hloca$N
## weights: nb2listw(nb, style = "W")
##
## Moran I statistic standard deviate = 2.4915, p-value = 0.00636
## alternative hypothesis: greater
## sample estimates:
## Moran I statistic
                                              Variance
                         Expectation
##
        0.075114045
                         -0.006896552 0.001083440
```

## non-spatial Poisson models

Table 1: Parameter estimates of non-spatial Poisson models

	Dependent variable:	
	Poisson [	Mixed-effects Poisson (2)
Between variance	0.072*** (0.001)	0.065*** (0.006)
Within variance	-0.0003 (0.001)	0.015*** (0.004)
Mean temperature	-0.001***(0.0001)	-0.002***(0.0001)
Log GDP	0.237*** (0.002)	0.425*** (0.016)
Rural	-1.022***(0.007)	-1.037***(0.141)
Female	0.129*** (0.001)	0.011*** (0.004)
Constant	-13.347***(0.065)	-8.114***(0.224)
Log Likelihood	-141,512.000	-29,727.990
Akaike Inf. Crit.	283,038.000	59,481.970

*Note:* \*p<0.1; \*\*p<0.05; \*\*\*p<0.01

# **Spatial Poisson models**

#### To be added

- Spatial lag Poisson model
- Geographically weighted Poisson model

# Discussion

### **Limitations**

- Assumptions: the patients did not seek care in other ADs
- Omitted variable bias: air pollution, older population
- Hospitalization database: inpatients are not included
- Different weights for different severity of CVD hospitalization?

### **Future directions**

- Add time series analysis in several major cities?
- ► Mortality?
- Different effects in cold and hot days?
- ► Hierarchical spatial Poisson regression?

### References

- 1 Ryti NR, Guo Y, Jaakkola JJ. Global association of cold spells and adverse health effects: A systematic review and meta-analysis. *Environmental health perspectives* 2015; **124**: 12–22.
- 2 Huber D, Gulledge J. The global links between extreme weather and climate change. *Extreme Weather Events* 2017;: 17.
- 3 Watts N, Adger WN, Ayeb-Karlsson S *et al.* The lancet countdown: Tracking progress on health and climate change. *The Lancet* 2017; **389**: 1151–64.
- 4 The World Health Organization. The top 10 causes of death. 2018.
- 5 Chen Z, Yu J, Song Y, Chui D. Aging beijing: Challenges and strategies of health care for the elderly. *Ageing research reviews* 2010; **9**: S2–5.