

Biometry in Pharmaceutics

Probability & Bayes

U. Buffalo, March 6th

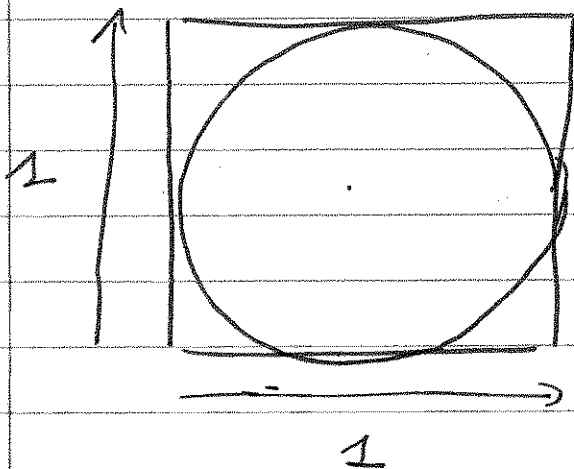
I/ Buffon's needle *

For this lecture, we'll consider a simplified needle experiment.

The goal is to measure π .

Originally proposed in 1733.

Simplified Experiment



What are the odds the needle falls in the circle?

$$p = \pi r^2 / A^2 = \pi / 4$$

- Is this experiment practical?
- What conditions, when dropping the needle, must be met?

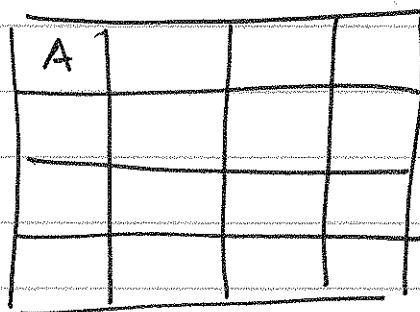
→ Needle can hit any point with the same probability.

$$x \sim U(0, 1)$$

$$y \sim U(0, 1)$$

What are the odds the needle hits a specific point? Say (x_0, y_0) ?

→ simpler problem:



What are the odds the needle falls in box A?

$$P(A) = 1/16 = 1/N$$

where N is the total number of outcomes.

But a point has dimension 0.

Thus

$$P_r(x=x_0, y=y_0) = 0$$

This does not mean the event is impossible!
Hints at some counter-intuitive results when we deal with continuous spaces.

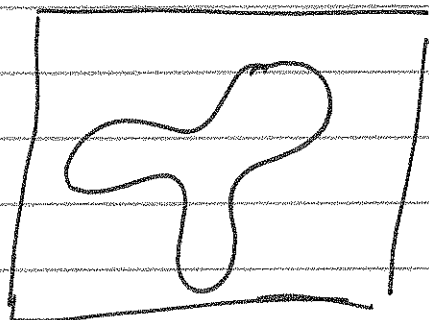
Probability measure: maps a set to $[0; 1]$.

Example of sets/events

	<u>measure</u>
◦ a point (x_0, y_0)	0
◦ the box A	$1/16$
◦ the circle	$\pi/4$
◦ the whole space	1

Our prob. measure is the area of the set.

Suppose π is unknown (which it is!)
 Or suppose we have a complicated shape:



How can we measure the area? Using probability.

define random variable

Let $A = \{\text{needle falls in circle}\}$

A^c the complement.

Let $p = \Pr(A)$.

Then $X = \text{success/failure}$ (success/failure)

Suppose we drop n needles.

We say

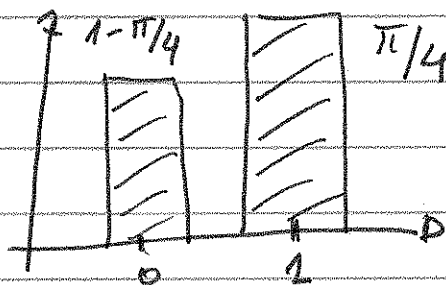
$X_1, \dots, X_n \stackrel{\text{iid}}{\sim} \text{Bernoulli}(p)$

Talk about density + prob. mass

$$p^x (1-p)^{1-x}$$

Talk about independence

Assigns probability mass to $x=1$ and $x=0$.



If we drop a lot of needles, the average of X converges to p !

STRONG LAW OF LARGE #!

$$\bar{X} \xrightarrow{D} E\{X\} \quad \left| \begin{array}{l} \text{roughly} \\ \text{speaking} \end{array} \right.$$

4/

Expectation value:

$$\lim_{n \rightarrow \infty} \frac{1}{n} \sum x_j = \mu \text{ a.s.}$$

$$\mu = E\{X\} = 1 \cdot P(X=1) + 0 \cdot P(X=0) = p \quad \text{w/ probability 1.}$$

~~WEAK LAW OF LARGE NUMBERS~~

$$\lim_{n \rightarrow \infty} P(|\bar{X}_n - \mu| > \epsilon) = 0, \text{ for an arbitrarily small } \epsilon.$$

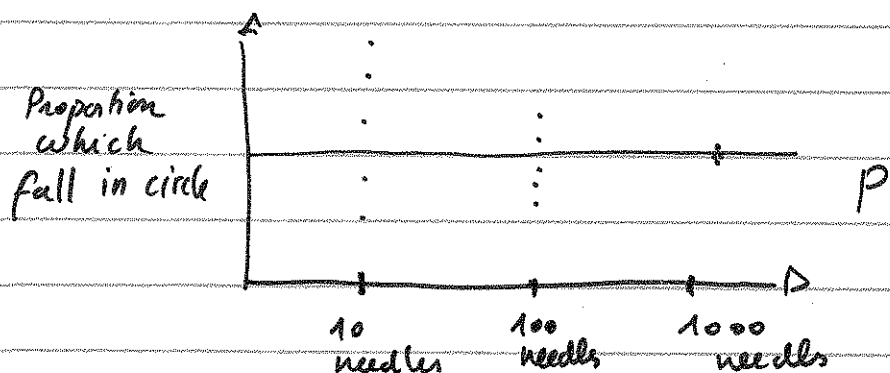
Central Limit Theorem

Tells us something about the rate of convergence.
How much variance will I have?

$$(\bar{X}_n - \mu) \xrightarrow{d} N(0, \sigma^2/n)$$

$$(=) \quad \bar{X}_n \xrightarrow{d} N(\mu, \sigma^2/n)$$

Note: the n should appear on the L.H.S as a \sqrt{n} . A limit shouldn't depend on n .



- Need to define (a) variance

(b) Normal density

Variance of Bernoulli

$$v = p(1-p)$$

$$\begin{aligned} \text{Var}[X] &= E[X^2] - E[X]^2 \\ &= P(X=1)1^2 = p \\ \Rightarrow v &= p - p^2 = p(1-p) \end{aligned}$$

→ compare $p = 1/2$

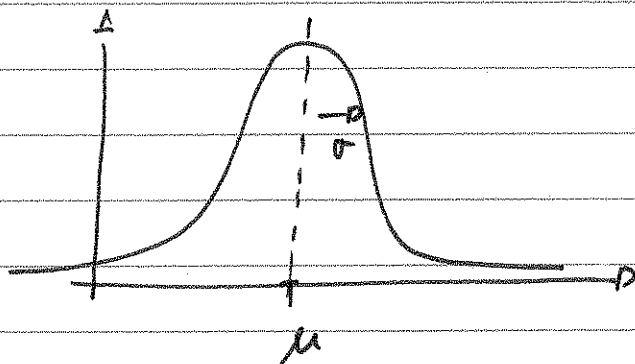
$$p = 3/4$$

$$p = 1$$

$$p = 0$$

Normal density

$$N(\mu, \sigma)$$



introduce
CDF

$$p_{\mu, \sigma} = \frac{1}{\sqrt{2\pi}\sigma} e^{-\frac{1}{2\sigma^2}(x-\mu)^2}, \text{ for } X \sim N(\mu, \sigma^2)$$

What if we generate N iid X ?

$$X_1, \dots, X_n \stackrel{\text{iid}}{\sim} N(\mu, \sigma^2)$$

$$P_{\mu, \sigma}(X_1, \dots, X_n) = \prod_{i=1}^n p(x_i) = \frac{1}{\sqrt{2\pi}\sigma} e^{-\frac{1}{2\sigma^2} \sum (x_i - \mu)^2}$$

Independent probabilities multiply! Use Bernoulli example + construct Binomial

For discrete distribution $\mu = \sum x_i P(X=x_i)$

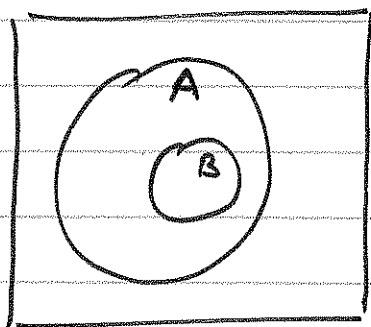
For continuous distributions:

$$\mu = \int_{\mathbb{R}} x p_{0,r} dx$$

More generally, for any random function $f(x)$:

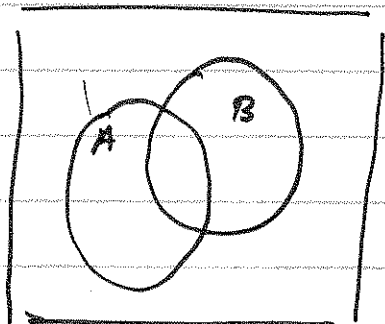
$$E\{f(x)\} = \int_{\mathbb{R}} f(x) p_{0,r}(x) dx$$

Conditional Probability



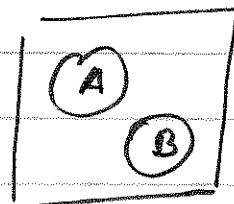
$$P(B|A) = \frac{P(B)}{P(A)}$$

What about $P(A|B)$?



$$P(B|A) = \frac{P(A \cap B)}{P(A)}$$

What about



?

Baye's Theorem

$$P(B|A) = \frac{P(A|B)P(B)}{P(A)}$$

Proof:

$$\begin{aligned} P(A \cap B) &= P(A) P(B|A) \\ &= P(B) P(A|B) \end{aligned}$$

Thus

$$P(A)P(B|A) = P(B)P(A|B)$$

$$\Rightarrow P(B|A) = \frac{P(B)P(A|B)}{P(A)} \quad \blacksquare$$

Example : Mammograms

Let $B = \{ \text{patient has breast cancer} \}$

$A = \{ \text{Test is positive} \}$

$$Pr(\overset{A}{B} | \overset{B}{A}) = 0.88 \text{ and } Pr(\overset{A^c}{B} | B) = 0.2$$

$$Pr(\overset{A}{B^c} | B^c) = 0.1 \text{ and } Pr(\overset{A^c}{B^c} | B^c) = 0.9$$

	+	-
Cancer	0.8	0.2
no-cancer	0.1	0.9

$$P(\overset{A}{B} | \overset{B}{A}) = \frac{P(A|B)P(B)}{P(A)}$$

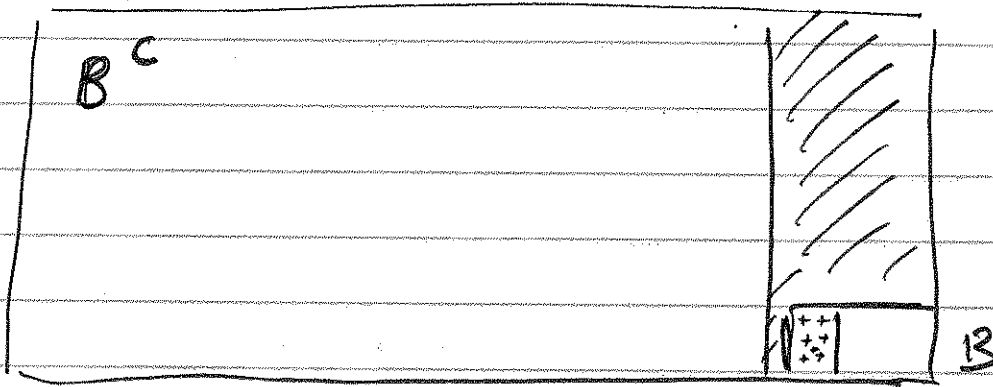
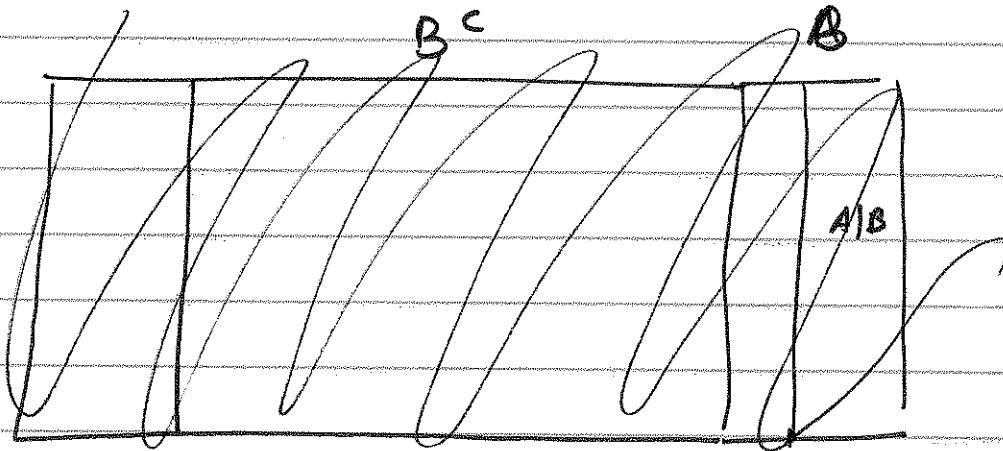
$$P(A) = P(A|B) + P(A|B^c)$$

$$\text{and } P(B) = 0.04\%$$

Note: should be $P(A|B)P(B)$
and $P(A|B^c)P(B^c)$.

Thus $P(B|A) = 0.3\%$ approx.

Geometric Interpretation



A patient is much more likely to land in the hatched area , than in the dotted area . This is what Bayes's rule tells us.

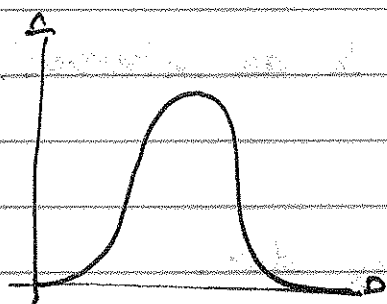
II/ Bayesian Inference

A goal in statistical inference is to characterize a DATA GENERATING PROCESS.

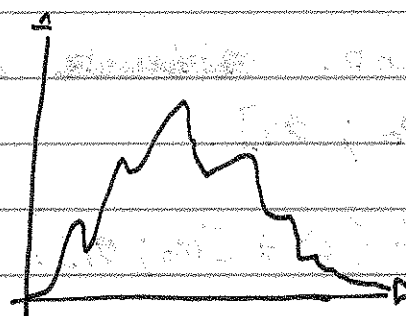
Note: some of statistics focuses on emulating the DGP to make prediction.

Tension between explain and predict.

Let $f(\cdot)$ be the density which generates data.
Can parametrize the density.



GAUSSIAN: μ, σ control
this distribution.



NON-PARAMETRIC
→ Infinite number of
parameters.

In practice θ is unknown.

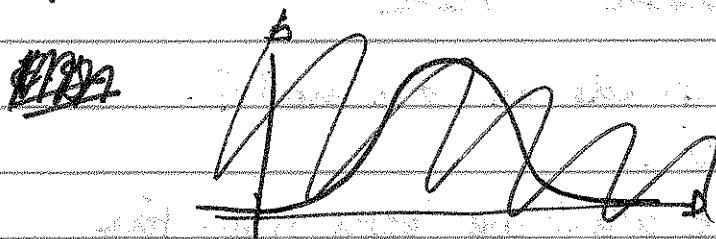
Can use X_1, \dots, X_n to estimate θ .

But how good is Bern estimate?

Explore a
parameter
space!!

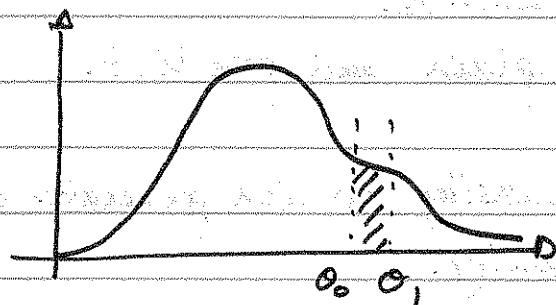
Random process \Rightarrow estimate is not perfect.

Bayesian Idea: use the posterior distribution
of $\theta|X$ to describe our estimate of θ .



(plot*)

What can we learn from the posterior?



- 1/ Prob. ~~estimate~~ θ falls in an interval $[\theta_0; \theta_1]$.

$$\Pr(\theta \in [\theta_0; \theta_1]) = \int_{\theta_0}^{\theta_1} f_{\theta|x} d\theta.$$

- 2/ Expected value of θ / mean value

$$\mathbb{E}\{\theta\} = \int_{\Theta} \theta \cdot f_{\theta|x}(\theta) d\theta \quad \leftarrow \text{not the same as the posterior mode!!}$$

and similarly variance quantiles.

Computing the posterior

$$p(\theta|x) \propto \underset{\substack{\uparrow \\ \text{likelihood}}}{p(x|\theta)} \underset{\substack{\uparrow \\ \text{prior}}}{p(\theta)}$$

- the likelihood depends on our model.
- so does our prior.

→ Interpretation: combine what we learn from the data with prior knowledge about θ .

The prior : - Prior knowledge :

- \bar{h} is around 3.14
- A parameter has a mechanistic interpretation & can use expert knowledge.

E.g

V of gut. \rightarrow w/ some variation.

$$V \sim N(V_0, \sigma_0^2)$$

- A regularization device
 - \rightarrow can help model fitting process
 - \rightarrow makes our parameter search more targeted exploration of target space.

E.g Immitation game / Code Breaking.

Example :

$$x_1, \dots, x_n \stackrel{iid}{\sim} N(\theta, \sigma^2), \quad \sigma \text{ is known.}$$

$$\theta \sim N(\mu, \tau^2)$$

This prior and this likelihood play well together.

$$p_{x|\theta} = \frac{1}{\sqrt{2\pi} \sigma^n} e^{-\frac{1}{2\sigma^2} \sum_{i=1}^n (x_i - \theta)^2}$$

$$p_\theta = \frac{1}{\sqrt{2\pi} \tau} e^{-\frac{1}{2\tau^2} (\theta - \mu)^2}$$

Produces a posterior $N\left(\frac{\mu/\tau + \sum x_i/\sigma^2}{1/\tau^2 + n/\sigma^2}, \frac{1}{1/\tau^2 + n/\sigma^2}\right)$

$$(\Rightarrow) N\left(\frac{\mu/\tau^2 + \bar{X}/\sigma^2/n}{1/\tau^2 + n/\sigma^2}, \dots\right)$$

The mean is a compromise or a weighted average between μ and \bar{X} .

The weighting is $1/\text{VAR}$

\Rightarrow More uncertainty is penalized.

As $n \rightarrow +\infty$, the data/likelihood dominates the prior.

$\text{Var} = \frac{1}{1/\tau^2 + n/\sigma^2}$ goes to 0, if we have strong prior (low variance) or a lot of data.

OPEN UP FOR Questions, time allowing.

Further topics

- In practice need to estimate posterior distribution.
 \rightarrow MCMC etc.