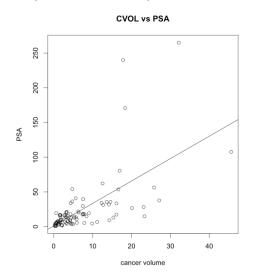
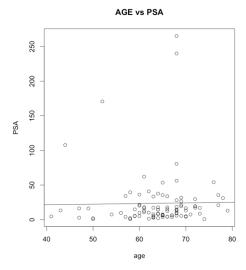
1. PSA -> Response variable

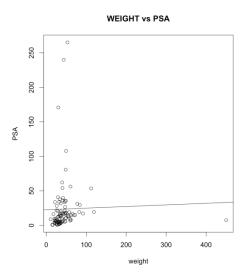
Scatterplots with other quantitative variables



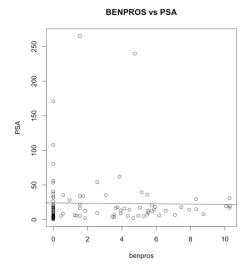
> cor(sysBP\$cancervol,sysBP\$psa) [1] 0.6241506



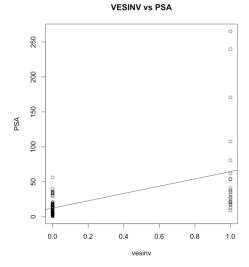
> cor(sysBP\$age,sysBP\$psa) [1] 0.01719938



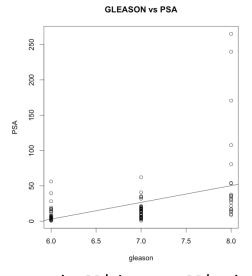
> cor(sysBP\$weight,sysBP\$psa) [1] 0.02621343



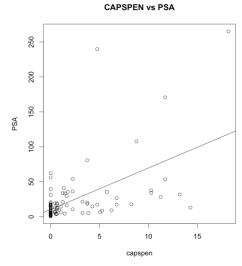
> cor(sysBP\$benpros,sysBP\$psa)
[1] -0.01648649



> cor(sysBP\$vesinv,sysBP\$psa)
[1] 0.5286188



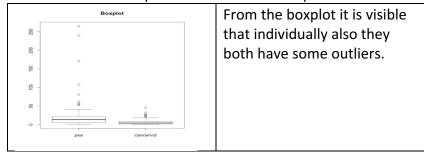
> cor(sysBP\$gleason,sysBP\$psa) [1] 0.4295798



> cor(sysBP\$capspen,sysBP\$psa)
[1] 0.5507925

The variable that can be used to predict the PDA level effectively is cancervol as it has a strong positive correlation with PSA. Cancervol increases linearly with PSA. It has also the highest correlation with PSA as compared to the other quantitative variables.

We see in the scatterplot that there are a couple of outliers.



R – code of scatterplots and boxplot

sysBP <- read.csv(file="/Users/charuarora/Downloads/prostate_cancer.csv",header=TRUE,sep=",");

plot(sysBP\$cancervol,sysBP\$psa,xlab = "cancer volume", ylab = "PSA", main = "CVOL vs PSA") abline(lm(sysBP\$psa~sysBP\$cancervol)) cor(sysBP\$cancervol,sysBP\$psa)

plot(sysBP\$weight,sysBP\$psa,xlab = "weight", ylab = "PSA", main = "WEIGHT vs PSA") abline(lm(sysBP\$psa~sysBP\$weight)) cor(sysBP\$weight,sysBP\$psa)

plot(sysBP\$age,sysBP\$psa,xlab = "age", ylab = "PSA", main = "AGE vs PSA") abline(lm(sysBP\$psa~sysBP\$age))

```
plot(sysBP$benpros,sysBP$psa,xlab = "benpros", ylab = "PSA", main = "BENPROS vs PSA")
abline(Im(sysBP$psa~sysBP$benpros))
cor(sysBP$benpros,sysBP$psa)

plot(sysBP$vesinv,sysBP$psa,xlab = "vesinv", ylab = "PSA", main = "VESINV vs PSA")
abline(Im(sysBP$psa~sysBP$vesinv))
cor(sysBP$vesinv,sysBP$psa)

plot(sysBP$capspen,sysBP$psa,xlab = "capspen", ylab = "PSA", main = "CAPSPEN vs PSA")
abline(Im(sysBP$psa~sysBP$capspen))
cor(sysBP$capspen,sysBP$psa)

plot(sysBP$gleason,sysBP$psa,xlab = "gleason", ylab = "PSA", main = "GLEASON vs PSA")
abline(Im(sysBP$psa~sysBP$psa,xlab = "gleason", ylab = "PSA", main = "GLEASON vs PSA")
abline(Im(sysBP$psa~sysBP$psa)

boxplot(sysBP$psa,sysBP$psa)
```

2. Fitting a simple linear regression model.

```
x<-sysBP$cancervol</li>y<-sysBP$psa</li>cancer.reg<-lm(y~x)</li>
```

The function Im fits a linear model to data and we specify the model using the formula where PSA (response variable) is on the left side separated by \sim from the other variable.

To create a summary of the fitted model:

> summary(cancer.reg)

```
Call: Im(formula = y ~ x)

Residuals:
    Min 1Q Median 3Q Max
-61.619 -9.023 -1.586 3.151 181.183

Coefficients:
    Estimate Std. Error t value Pr(>|t|)
(Intercept) 1.1249 4.3596 0.258 0.797
x 3.2299 0.4148 7.786 8.47e-12 ***
---
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 '' 1

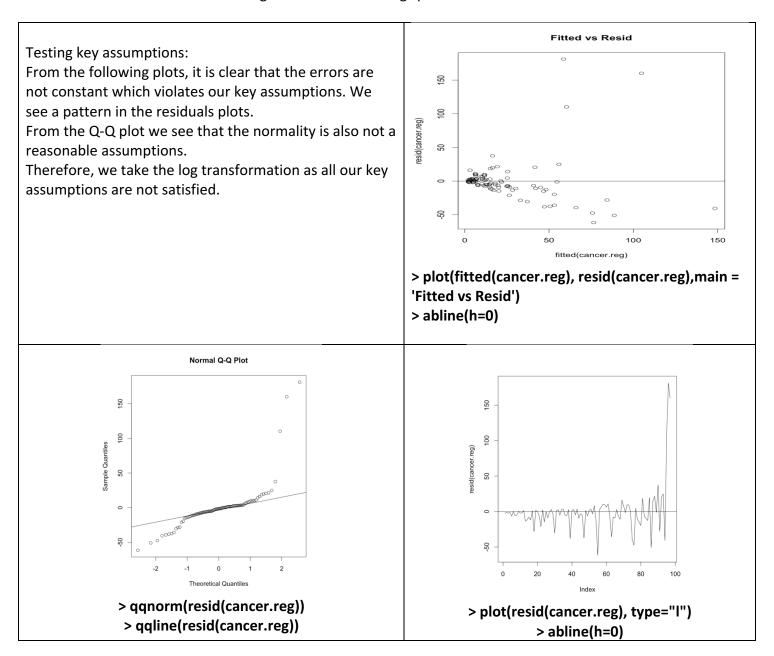
Residual standard error: 32.03 on 95 degrees of freedom Multiple R-squared: 0.3896, Adjusted R-squared: 0.3831
F-statistic: 60.63 on 1 and 95 DF, p-value: 8.468e-12
```

The estimates for the model intercept is 1.1249 and the coefficient measuring the slope of the relationship with cancervol is 3.2299.

Key Assumptions:

Errors are constant
Errors are independent
Errors follow a normal distribution

A plot of the residuals against fitted values is used to determine whether there are any systematic patterns, such as over estimation for most of the large values or increasing spread as the model fitted values increase.



The regression model with log transformation:

R- code for modelling the linear model for log(PSA) and log(cancervol)

> logpsa = log(sysBP\$psa)

Residuals:

Min 1Q Median 3Q Max -1.6778 -0.4187 0.1012 0.5035 1.9022

Coefficients:

Estimate Std. Error t value Pr(>|t|)
(Intercept) 1.50923 0.12198 12.37 <2e-16 ***
logcancervol 0.71827 0.06822 10.53 <2e-16 ***

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 '' 1

Residual standard error: 0.7879 on 95 degrees of freedom Multiple R-squared: 0.5385, Adjusted R-squared: 0.5336

F-statistic: 110.8 on 1 and 95 DF, p-value: < 2.2e-16

The estimated intercept, b_0 =1.50923 and slope is b_1 =0.71827. From the, R-squared value, logcancervol explains 53.36% of the total variability Since the p-value for log cancervol is between 0 and 0.001, logcancervol is a significant predictor for the PSA value.

> anova(newcancer.reg)

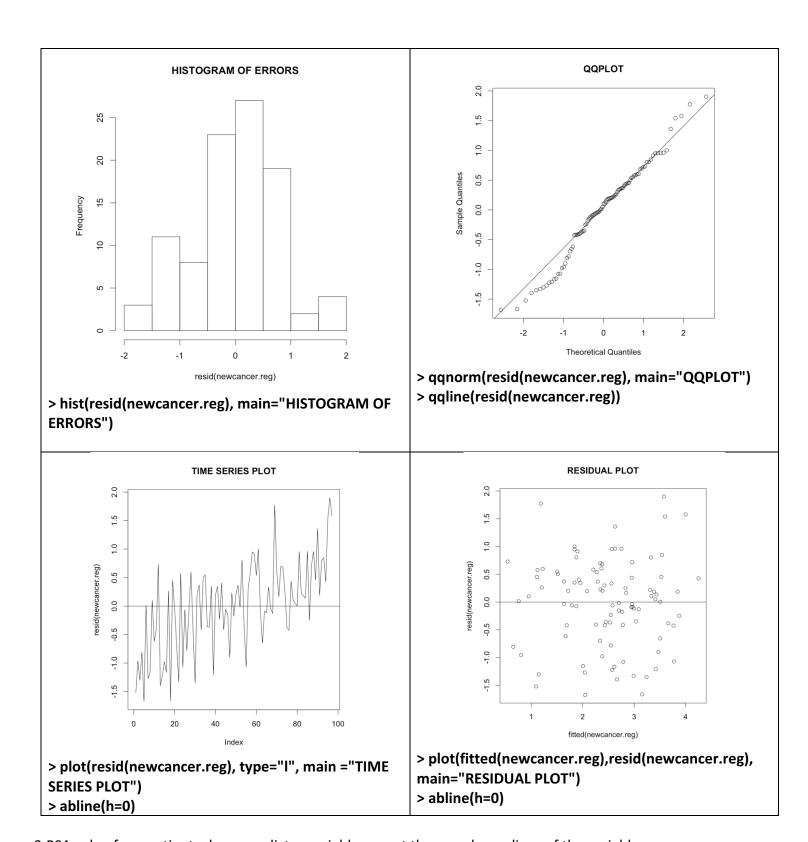
Analysis of Variance Table

Response: logpsa

Df Sum Sq Mean Sq F value Pr(>F) logcancervol 1 68.801 68.801 110.84 < 2.2e-16 *** Residuals 95 58.968 0.621

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 '' 1

Our key assumptions are satisfied as there are no trends in the above given plots.



3.PSA value for a patient whose predictor variables are at the sample medians of the variable.

Using the old method,

- > x.new <- data.frame(x=median(x))
- > predict(cancer.reg,x.new)

1

14.89438

> new_predict <- exp(1)^predict(newcancer.reg,data.frame(logcancervol = median(logcancervol)))
> new_predict
 1
12.81632