Understanding the impact of socio-economic factors on cancer mortality rates in South Dakota using variable selection techniques

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May 4, 2022

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Introduction

- According the CDC, cancer was the second leading cause of death in 2020 [National Center for Health Statistics, 2020].
- There is a growing body of evidence that socio-economic (poverty, insurace status, *etc,...*) factors contribute the cancer mortality rates [National Cancer Institute, 2015].

Introduction

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- This study sought to understand how eight socio-economic and lifestyle factors impacted cancer mortality rates per 100,000 on a county level in South Dakota (SD).
- To do this, we considered several variable selection techniques to create a parsimonious model.

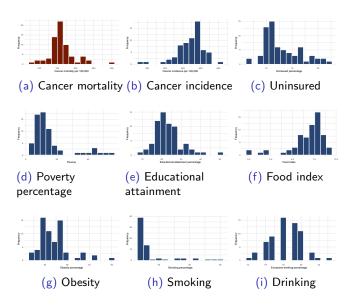
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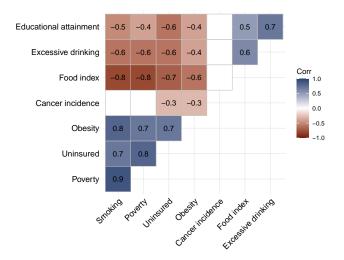
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- Obesity percentage, food index, smoking percentage, and excessive drinking percentage were provided by the Counties Ranking and Roadmap site [County Health Rankings and Roadmaps, 2022].

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- Obesity percentage, food index, smoking percentage, and excessive drinking percentage were provided by the Counties Ranking and Roadmap site [County Health Rankings and Roadmaps, 2022].
- All code and full data set are available at https://github.com/espors/cancer_mortality_modeling.

Exploratory Data Analysis I



Exploratory Data Analysis II



Moran's I

 Moran's I was used to determine if the data was spatially uncorrelated, (preserve normality assumption)

$$I = \frac{N}{\mathbf{W}} \frac{\sum_{i=1}^{N} \sum_{j=1}^{N} w_{ij} (x_i - \bar{x}) (x_j - \bar{x})}{\sum_{i=1}^{N} (x_i - \bar{x})^2}$$
(1)

- W is sum of the weight matrix W
- $w_{ij} \in 0,1$ indicates the value in W
- *N* is number of elements, *x* is response variable, $-1 \le l \le 1$

Multiple Linear Regression

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- In matrix notation, the estimated regression model has the form $\hat{Y} = Xb$ where b is found with

$$\mathbf{b} = \arg\min_{\beta} \left\{ \sum_{i=1}^{66} \left(Y_i - \beta_0 - \sum_{j=1}^{p-1} \beta_j x_{ij} \right)^2 \right\}$$
 (2)

• **Stepwise regression** is a feature selection technique that iteratively adds and drops predictor variables in a succession of models and selects the model with predictors that has the smallest AIC value.

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$$\mathbf{b} = \arg\min_{\beta} \left\{ \sum_{i=1}^{66} \left(Y_i - \beta_0 - \sum_{j=1}^{p-1} \beta_j x_{ij} \right)^2 + \lambda \sum_{j=1}^{p-1} \beta_j^2 \right\}.$$

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► Lasso regression (least operate shrinkage & selection operator) adds an 'L¹' penalty such that **b** is found with

$$\boldsymbol{b} = \arg\min_{\beta} \left\{ \sum_{i=1}^{66} \left(Y_i - \beta_0 - \sum_{j=1}^{p-1} \beta_j x_{ij} \right)^2 + \lambda \sum_{j=1}^{p-1} |\beta_j| \right\}.$$

► Elastic net regression combines the best of ridge and lasso regression and **b** is found with

$$\pmb{b} = \arg\min_{\beta} \left\{ \sum_{i=1}^{66} \left(Y_i - \beta_0 - \sum_{j=1}^{p-1} \beta_j x_{ij} \right)^2 + \lambda_1 \sum_{j=1}^{p-1} \beta_j^2 + \lambda_2 \sum_{j=1}^{p-1} |\beta_j| \right\}.$$

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or

$$\mathbf{b} = \arg\min_{\beta} \left\{ \sum_{i=1}^{66} \left(Y_i - \beta_0 - \sum_{j=1}^{p-1} \beta_j x_{ij} \right)^2 + \alpha \sum_{j=1}^{p-1} \beta_j^2 + (1 - \alpha) \sum_{j=1}^{p-1} |\beta_j| \right\}$$

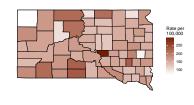
where
$$\alpha = \frac{\lambda_2}{\lambda_2 + \lambda_1} \in [0, 1)$$
.

• Predictions*

Moran's I

• Statistics calculated for Moran's I Mortality rate per 100,000.

Statistic	Value		
Mean Response	160.4379		
Moran's I	-0.0678		
E[I]	-0.0152		
Variance	0.0214		
W	348		
Z	-0.3584		
р	0.3632		



$$Z = \frac{E[I] - I}{\sqrt{v}} \approx -0.36 \implies p = 0.36 \ge 0.05$$
 (3)

• Fail to reject H_0 : no spatial correlation

Regression Models

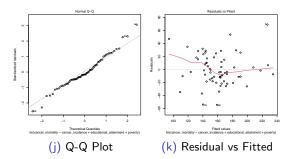
Summary of the regression models including the estimated coefficients, *t*-value, *p*-value, and adjusted R-squared.

	Model 1 - Full		Model 2 - No Smoking			
Variables	Coeff	t-value	Pr(> t)	Coeff	t-value	Pr(> t)
Cancer Incidence (Rate)	0.188	4.675	$1.84 \cdot 10^{-5}$	0.188	4.555	2.74 ·10 ⁻⁵
Obesity (%)	-2.44	-1.719	0.0911	-1.32	-0.995	0.323
Education Attainment (%)	-1.709	-2.607	0.011	-2.058	-3.185	0.002
Poverty (%)	0.931	1.242	0.219	2.038	4.024	0.0002
Uninsured (%)	-0.623	-0.407	0.685	-1.178	-0.763	0.448
Food Index	0.237	0.093	0.926	-1.359	-0.549	0.585
Drinking (%)	3.44	1.303	0.197	4.23	1.586	0.118
Smoking (%)	2.90	1.964	0.054	-	-	-
	Adj. R-sqr: 0.567, Mean VIF: 4.07		, Mean VIF: 4.07 Adj. R-sqr: 0.546, Mean VIF: 2.30			

	Model 3 - Stepwise		Model 4 - Penalized			
Variables	Coeff	t-value	Pr(> t)	Coeff	t-value	Pr(> t)
Cancer Incidence (Rate)	0.204	5.205	2.41 ·10 ⁻⁶	0.210	5.298	$1.7 \cdot 10^{-6}$
Education Attainment (%)	-1.799	-3.130	0.002	-1.268	-2.492	0.015
Poverty (%)	1.716	5.673	$4.11 \cdot 10^{-7}$	1.457	1.242	0.00034
Food Index	-	_	_	-0.599	-0.243	0.808
Drinking (%)	3.787	1.479	0.144	-	-	-
	Adj. R-sqr: 0.554, Mean VIF: 1.71		Adj. R-sq	r: 0.538, Me	ean VIF: 1.93	

Regression Models

	Model 5 - Reduced			
Variables	Coeff	<i>t</i> -value	$\Pr(> t)$	
Cancer Incidence (Rate)	0.21	5.333	$1.44 \cdot 10^{-6}$	
Educational Attainment (%)	-1.310	-2.760	0.007	
Poverty (%)	1.522	5.530	$6.82 \cdot 10^{-7}$	
	Adj. R-sqr: 0.545, Mean VIF: 1.30			



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- Cancer incidence was positively associated with cancer mortality. In Model 5, for an additional case per 100,000, there was an additional 0.21 deaths per 100,000.
- Poverty percentage was positively associated with cancer mortality.
 For an one percent increase in a county's poverty percentage, there was an additional 1.52 cancer-deaths per 100,000.
 - Persistent poverty is strongly associated with increased cancer mortality rates [Moss et al., 2020].
 - ▶ Eleven counties in SD are designated as experiencing persistent poverty.

- Educational attainment was negatively associated with cancer mortality. For an additional percentage in educational attainment, there were a decrease of 1.31 deaths per 100,000.
 - ▶ There is less literature on education and cancer mortality, but one study did find a relationship between those who didn't finish high school and mortality [Barcelo et al., 2021].
 - ► There is emerging evidence on the relationship between education and general health [Zajacova and Lawrence, 2018].

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- Limitations: Much of the data was based on self-reported surveys and the residuals indicate that not all of the linear assumptions may have been met.
- Future work: The data analysis could be expanded to include non-parametric and clustering models.

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