Name: Zhengting (Johnathan) He Lecture section: Lecture 3~4 Lab section: R user group Thursday 3:30 - 4:50 pm

Problem set 2 solution

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```
# Set up
setwd("D:/OneDrive - Johns Hopkins/Course/140.621.81 - Statistical Methods in Public Health I/Problem set/
jhsphbiostat621-assignment/Problem Set 2/Problem set 2")
```

Problem 1. Vitamin A Supplementation to Prevent Children's Mortality in Nepal

Section 1: Probability, Binomial and Poisson Models

i. The Nepal data set is located in the csv data file named nepal621.csv. Refer to your Class Dataset Code Book for the file format. Load the tidyverse with: library(tidyverse) Open the data set and name it nepal621. Construct a 2x2 contingency table of treatment (placebo or Vitamin A) against status (alive or dead) at sixteen months of followup. Calculate the rate of child mortality in Nepal for children receiving placebo; Vitamin A. Summarize the difference in mortality in a sentence as if for a journal.

```
require (tidyverse)
## Loading required package: tidyverse
## -- Attaching packages -----
                     v purrr 0.3.4
## v ggplot2 3.3.5
## v tibble 3.1.3
                     v dplyr 1.0.7
## v tidyr 1.1.3
                  v stringr 1.4.0
## v readr 2.0.1
                     v forcats 0.5.1
## -- Conflicts ------ tidyverse_conflicts() --
## x dplyr::filter() masks stats::filter()
## x dplyr::lag()
                   masks stats::lag()
nepal621 <- read csv("./data/nepal621.csv")
## Rows: 27121 Columns: 4
## -- Column specification --
## Delimiter: ","
## chr (4): sex, age, trt, status
## i Use `spec()` to retrieve the full column specification for this data.
## i Specify the column types or set `show_col_types = FALSE` to quiet this message.
CT <- table(nepal621$trt, nepal621$status)
addmargins (CT)
```

```
##
##
            Alive Died
                          Sum
##
    Placebo 13099
                    290 13389
##
    Vit A 13499
                    233 13732
##
    Sum
            26598
                    523 27121
```

```
prop. table(CT, margin=1)
```

```
##
##
                  Alive
                              Died
    Placebo 0.97834043 0.02165957
##
    Vit A 0.98303233 0.01696767
```

The rate of child mortality in Nepal for children receiving Vitamin Λ is 0.0170, while the rate for children en receiving placebo is 0.0217. The rate difference and ratio for children receiving Vitamin A compared to receiving placebo is -0.0047 and 0.7834 respectively, indicating children receiving Vitamin A have a lower mortality rate compared with children receiving placebo in Nepal.

- ii. For a randomly chosen child from the study population, calculate the following probabilities from the 2x2 contingency table you constructed above.
- Marginal Probabilities

```
Pr(VitA) = 13732/27121 = 0.5063
Pr(Died) = 523/27121 = 0.0193
```

Joint Probabilities

```
Pr(Died and VitA) = 233/27121 = 0.0086
Pr(Died and Placebo) = 290/27121 = 0.0107
```

· Conditional Probabilities

```
Pr(Died \mid VitA) = Pr(Died \text{ and } VitA) / Pr(VitA) = 0.0086 / 0.5063 = 0.0170
Pr(Died | Placebo) = Pr(Died and Placebo)/Pr(Placebo) = 0.0107/(13389/27121) = 0.0217
```

By hand, use Bayes' Theorem and the 2x2 contingency table to calculate the probability that a child that died received Vitamin A. Use the observed rates for each term below to see how the calculations work.

```
Pr(VitA | Died) = Pr(VitA and Died) / Pr(Died)
                = Pr(Died | VitA)*Pr(VitA) / Pr(Died)
                = Pr(Died | VitA)*Pr(VitA) / (Pr(Died | VitA)*Pr(VitA) + Pr(Died | Placebo)*Pr(Placebo))
                = 0.0170*0.5063 / (0.0170*0.5063 + 0.0217*13389/27121)
                = 0.4455
```

iii. For each treatment group, construct the 2x2 contingency table of sex (male or female) versus vital status (alive or dead). From these tables, calculate the overall probability of dying for males and females separately by treatment group. Describe in a sentence as if for a journal the relationship between mortality and treatment. Does the effect of treatment appear to vary by sex? If so, we say: "sex is an effect modifier," or "sex modifies the effect of vitamin A on mortality" or there is an "interaction" of sex and treatment in causing mortality. Write another sentence or two describing differences in the treatment effect between boys and girls. Be quantitative and use the term "effect modification."

```
nepal.plac <- filter(nepal621, trt == "Placebo")</pre>
nepal.vit <- filter(nepal621, trt == "Vit A")</pre>
# Placebo group
CT <- table(nepal.plac$sex, nepal.plac$status)
addmargins(CT)
```

```
##
##
           Alive Died
                       Sum
##
    Female 6376 166 6542
##
    Male
            6723
                  124 6847
##
    Sum
           13099
                  290 13389
```

```
prop. table(CT, margin=1)
```

```
##
##
                 Alive
                              Died
##
    Female 0.97462550 0.02537450
##
    Male
           0. 98188988 0. 01811012
```

```
# Vit A group
CT <- table(nepal.vit$sex, nepal.vit$status)
addmargins(CT)
```

```
##
##
           Alive Died
##
    Female 6544
                  121 6665
                   112 7067
##
    Male
            6955
##
    Sum
           13499
                   233 13732
```

```
prop. table(CT, margin=1)
```

```
##
##
                 Alive
                              Died
##
    Female 0.98184546 0.01815454
##
           0. 98415169 0. 01584831
    Male
```

```
The overall probability of dying for males and females separately by treatment group are:
   Pr(Died \mid Male \& Placebo) = 124/6847 = 0.0181
   Pr(Died | Female & Placebo) = 166/6542 = 0.0254
   Pr(Died \mid Male \& Vit A) = 112/7067 = 0.0158
   Pr(Died | Female & Vit A) = 121/6665 = 0.0182
```

The mortality probability is 0.0023 and 0.0072 lower in vitamin A treatment group compared with placebo gr oup and the ratio is 0.8751 and 0.7155 in treatment group compared with placebo group, in male and female subgroups respectively, indicating treatment can reduce mortality probability.

The mortality probability is 0.0024 higher in female subgroup compared with male subgroup, and the ratio i s 1.1455 in female subgroup compared with male subgroup, in vitamin treatment group, indicating the effect of treatment apper to vary by sex; thus, sex iss an effect modifier for the effect of vitmain A on mortali ty.

- iv. Summarize in a table and/or figure the evidence (data) relevant to the null hypotheses that:
- 1. Vitamin A supplementation has no effect on mortality in Nepali pre-school children;

and

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2. The treatment effect is the same for both boys and girls (i.e., "not modified by sex").

Group	Evidence	Conclusion
Null hypothesis (1)	Vitamin A group compared with placebo group	Null hypothesis (1) may not hold
	Death probability difference = -0.0047	
	Death probability ratio = 0.7834	
Null hypothesis (2)	In vitamin A treatment group	Null hypothesis (2) may not hold
	Male subgroup compared with female	
	subgroup	
	Death probability difference = -0.0023	
	Death probability ratio = 0.8730	

v. Consider a family with 3 boys and 2 girls who received placebo. Suppose that each child's survival is independent of all the other children in the family. Calculate the probability that 0, 1, 2 or 3 boys die during the study follow-up.

```
x \sim Bin(3, 0.0181)
P(x = 0) = 0.94668
P(x = 1) = 0.05235
P(x = 2) = 0.00097
P(x = 3) = 0.00001
```

vi. Use the Poisson approximation to the binomial distribution to recalculate probabilities of 0, 1, 2 or 3 boys dying in problem v.

```
x \sim Pois(0.0181)
P(x = 0) = 0.98206
P(x = 1) = 0.01778
P(x = 2) = 0.00016
P(x = 3) = 0
```