

Team 2

Importance of Healthy Habits



Background



Health is crucial to everyone

- **FACTS:** Heart disease, cancer, and accidents are top 3 causes of death in the US. In 2022, heart disease alone was responsible for over 700,000 deaths*.
- **GOAL:** Discovering the causality between personal habits & physical condition and chronic diseases.

*2022 statistics from Centers for Disease Control and Prevention(CDC)

Main Topics

Chronic Diseases

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Habits / Physical Condition

1

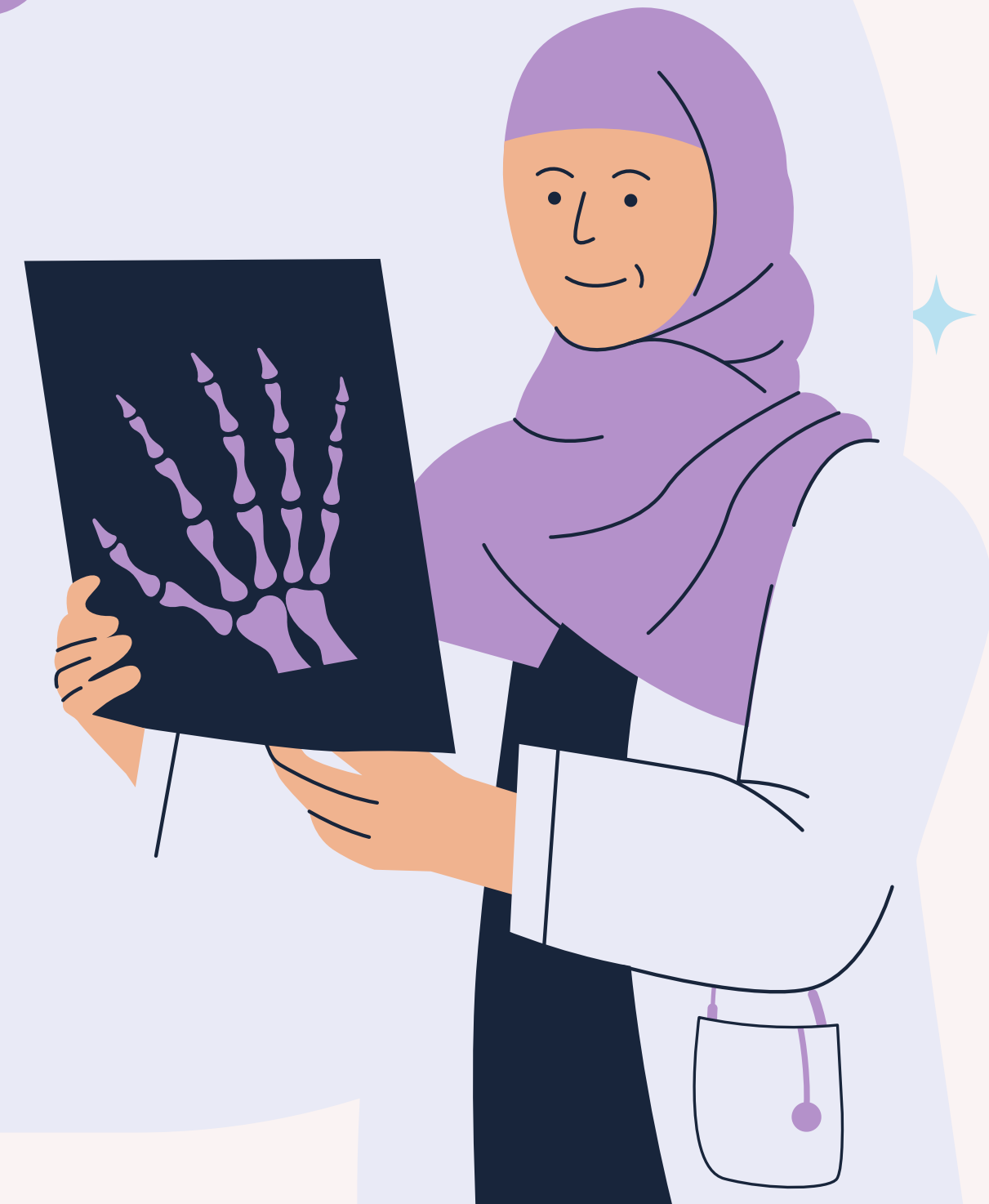
Diabetes

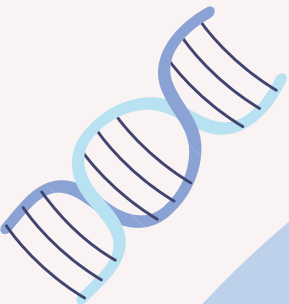
Exercise
Obesity

2

Hypertension

Obesity
Smoker
Sleep Time





Data Source

National Health and Nutrition Examination Survey (NHANES)

- Conducted yearly by the Centers for Disease Control and Prevention (CDC)
- Assess the health and nutritional status of adults and children in the United States
- Selected Period: **2017-2018**
- **9,254** participants completed the interview
- **8,704** participants were examined





Demographic

household Income

Gender

Age



Dietary

Total nutrients intake,
consumed by participants
during the 24-hour period

Saturated fatty acids (gm) ≤ 20

Sugars (gm) ≤ 50

Sodium (mg) ≤ 2000

Fiber (gm) ≥ 31



Examination

BMI, blood pressure,
pulse, Waist
circumference, Hip
circumference



Laboratory

Direct HDL-Cholesterol (mg/dL),
under 60 mg/dL indicates the risk
for hypertension

Cotinine, Serum (ng/mL), over 11
ng/mL can be recognized as smoker



Questionnaire

Sleep hours, exercise habits,
diabetes
(mental health, self-report
dietary habits, smoking habits,
hypertension)

Variables

Methodology

Potential Outcome Frameworks

Observational study focusing on **ATE** - to understand the treatment effect in real world

Ensure unconfoundedness and overlap assumption

1. Choosing confounders based on credible sources
2. Confirm that all models meet overlap assumption requirements to conclude that the treatment effect is unbiased and valid.

Model Comparisons

Utilizing different models to ensure the validity of the suggestion.



Applied Models

Regression Based
(w/o and w/
interaction)

**Propensity-Score
Based**

Doubly Robust
(Augmented IPW)

**Doubly Robust
PLM**

Causal Analytics

Hypothesis: Diabetes & Exercise

	Regression Based	Regression Based (w/ Interaction)	IPWE	AIPWE	PLM
ATE Estimate	-0.2549	-0.2319	-0.0356	-0.0309	-0.0301
Standard Error	0.115	0.146	0.014	0.016	0.009
t-statistic	-2.22	-1.59	-2.54	-1.93	-3.34

***Target: individuals aged 21 or older**

****Control covariates: Alcohol, Smoke, Sleep, BMI, Dietary, Income, Age, Gender, etc**

*****Number of observed units: 3,275**

Causal Analytics

Hypothesis: Diabetes & BMI

	Regression Based	Regression Based (w/ Interaction)	IPWE	AIPWE	PLM
ATE Estimate	0.7941	0.8016	0.1033	0.0945	0.1032
Standard Error	0.116	0.139	0.0148	0.0130	0.0094
t-statistic	6.865	5.766	6.980	7.269	10.979

***Target: individuals aged 21 or older**

****Control covariates: Exercise, Alcohol, Smoke, Sleep, Dietary, Income, Age, Gender, Pulse, Blood pressure**

*****Number of observed units: 2,534**

Causal Analytics

Hypothesis: Hypertension & BMI

	Regression Based	Regression Based (w/ Interaction)	IPWE	AIPWE	PLM
ATE Estimate	-4.8640	-5.1344	-6.1644	-5.0379	-4.9365
Standard Error	0.597	0.637	0.5632	0.4320	0.3298
t-statistic	-8.149	-8.06	-10.9460	-11.6622	-14.9679

*Hypertension is measured by the HDL-C(High-density lipoprotein cholesterol) level, normally this value is larger than 60mg/dL.

**Control covariates: Exercise, Blood pressure, Alcohol, Smoke, Sleep, Dietary, Income, Age, Gender, etc

***Number of observed units: 3,244

Causal Analytics

Hypothesis: Hypertension & Smoking

	Regression Based	Regression Based (w/ Interaction)	IPWE	AIPWE	PLM
ATE Estimate	-1.3546	-1.4727	-2.0406	-2.0403	-1.4970
Standard Error	0.4957	0.5315	0.6530	0.5667	0.5130
t-statistic	-2.7327	-2.7706	-3.1249	-3.6001	-2.9160

***Smoking is measured by the indicator of Cotinine ≥ 11 ng/mL**

****Control covariates: Alcohol, BMI, Dietary, Sleep, Exercise, Income, Gender, Age**

*****Number of observed units: 3,817**

Causal Analytics

Hypothesis: Hypertension & Sleep

	Regression Based	Regression Based (w/ Interaction)	IPWE	AIPWE	PLM
ATE Estimate	-0.9243	-0.8480	-0.5613	-0.5759	-0.3647
Standard Error	0.578	0.608	0.6066	0.5385	0.3389
t-statistic	-1.600	-1.395	-0.9253	-1.0694	-1.0761

***Sleep well is measured by the indicator of sleep hour ≥ 7 hour on weekdays**

****Control covariates: Alcohol, Exercise, Smoke, BMI, Dietary, Income, Age, Gender, etc**

*****Number of observed units: 3071**

Conclusion

You ate your way in! You can walk your way out!

- Obesity is significant to diabetes and hypertension.
- Smoking is a significant contributor to hypertension
- Although there are studies indicating lack of sleep is relevant to hypertension, this dataset has not shown significant causality.

Limitation & Future Research

- Limits of observational studies
- Expand study timeframe to more recent data
- Researching on more potential factors

**Thank you for
your attention**

