

Apathy and Physical Activity: Meta-Analysis

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R Markdown file set-up

Packages required: 1) dmetar 2) tidyverse 3) meta 4) metafor 5) metasens 6) esc

Data file glimpse (not included in PDF)

Meta-analysis method

In a meta-analysis, we pooled Pearson product-moment correlations from eligible studies to examine the relationship between apathy and physical activity. Correlations were pooled using the generic inverse pooling method via the ‘metacor’ function in the R ‘meta’ package (Schwarzer et al., 2023a). This function automatically performs a necessary Fisher’s z-transformation on the original, untransformed correlations prior to pooling. The ‘metacor’ function also reconverts the pooled association back to its original form for ease of interpretation. We used the ‘metafor’ package (Vietchbauer, 2010, 2023) to compare our three-level model to one in which a level was removed to investigate if our three-level model represented the variability in our data better than a two-level model. We anticipated considerable between-study heterogeneity, and therefore used a random-effects model to pool correlations. The restricted maximum likelihood (RML) estimator (Viechtbauer et al., 2005) was used to calculate the heterogeneity variance τ^2 . In addition to τ^2 , to quantify between study heterogeneity, we report the I^2 statistic, which provides the percentage of variability in the correlations that is not caused by sampling error (Higgins et al., 2002). The I^2 statistic was interpreted as follows: 0-40%, may not be important; 30-60%, may represent moderate heterogeneity; 50-90%, may represent substantial heterogeneity; and 75-100%, may represent considerable heterogeneity. To reduce the risk of false positives, we used a Knapp-Hartung adjustment (Knapp et al., 2003) to calculate the confidence interval around the pooled association. We also report the prediction interval, which provides a range within which we can expect the associations of future studies to fall based on the current evidence. The pooled correlation was interpreted using Cohen’s conventions (Cohen et al., 1998): $r < -0.10$, small negative correlation; $r < -0.30$, moderate negative correlation; $r < -0.50$, large negative correlation. Egger’s regression test of funnel plot asymmetry (Egger et al., 1997) and a p-curve analysis (Simonsohn et al., 2014) were conducted to assess potential publication bias in our meta-analysis. The R  cker’s limit meta-analysis method (Schwarzer et al., 2023b), which explicitly includes the heterogeneity variance in the model, was used to compute bias-corrected estimate of the true effect size.

A secondary meta-analysis was conducted using the same approach, but based on Spearman’s rho values, to further test the relationship between apathy and physical activity.

Subgroup analyses were conducted to examine the differences in correlations between studies including participants with different health conditions and using different types of physical activity outcomes, and apathy measures.

Meta-regressions were conducted to examine if the average age of participants or the proportion of women in a study predicted the reported correlation between apathy and physical activity. Another meta-regression was used as a sensitivity analysis to examine whether the quality of the studies affected the correlation.

All analyses were performed in RStudio integrated development environment (IDE) (2023.06.1+524, “Mountain Hydrangea” release) for R software environment (R Core Team, 2023) using the ‘meta’ (Schwarzer, 2023a), ‘metasens’ (Schwarzer et al., 2023b), and ‘metafor’ (Vietchbauer, 2010, 2023) R packages.

Meta-analysis: primary analysis

```
m.cor <- metacor(cor = cor,
  n = n,
  studlab = author,
  data = apathy_r,
  fixed = FALSE,
  random = TRUE,
  method.tau = "REML",
  hakn = TRUE,
  title = "Apathy and physical activity behaviour")
summary(m.cor)
```

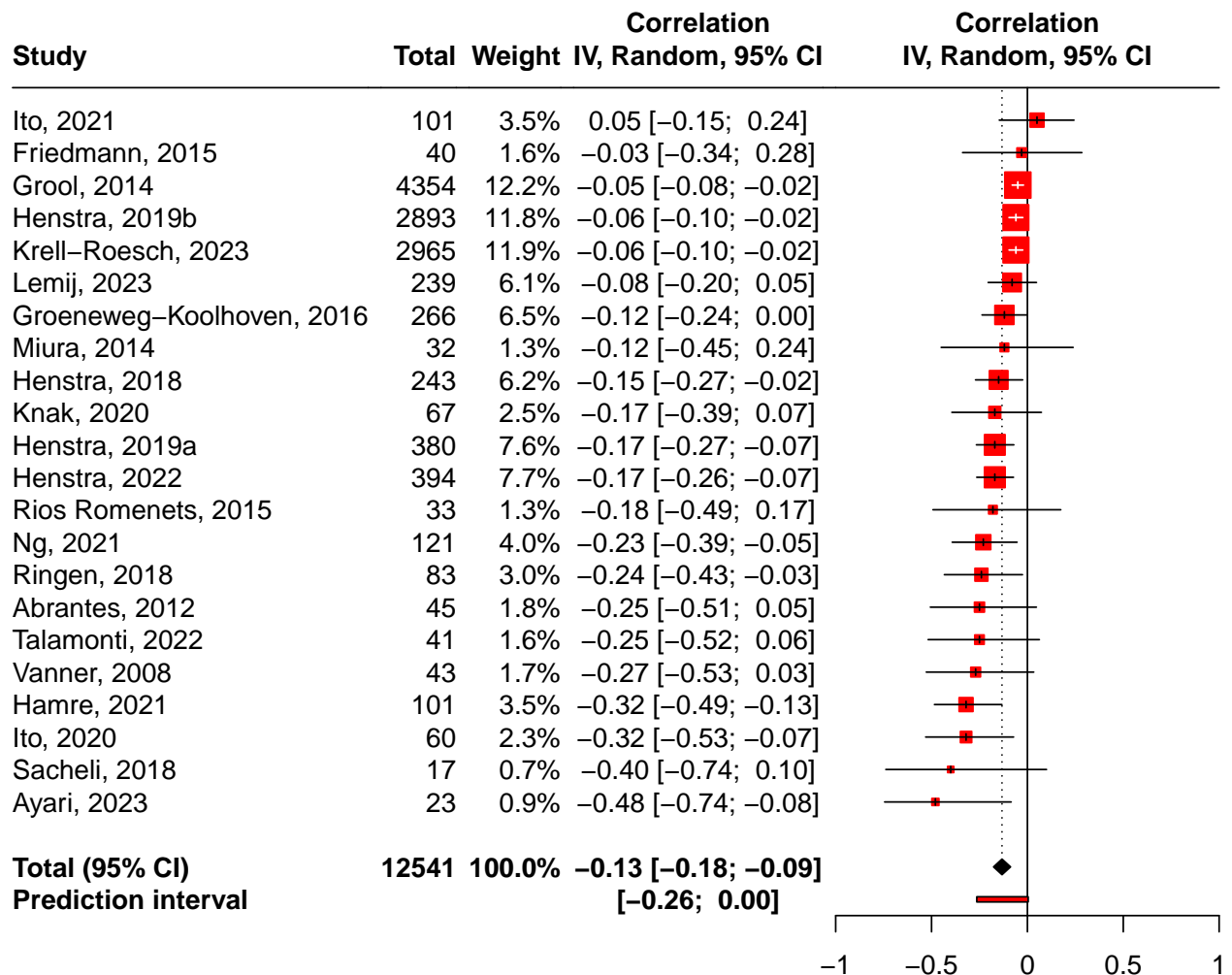
```

## Review:      Apathy and physical activity behaviour
##
##              COR              95%-CI %W(random)
## Abrantes, 2012      -0.2500 [-0.5064; 0.0470]      1.8
## Ayari, 2023         -0.4800 [-0.7448; -0.0845]      0.9
## Friedmann, 2015     -0.0300 [-0.3383; 0.2842]      1.6
## Groeneweg-Koolhoven, 2016 -0.1200 [-0.2369; 0.0003]      6.5
## Hamre, 2021         -0.3200 [-0.4851; -0.1329]      3.5
## Ito, 2021           0.0500 [-0.1469; 0.2431]      3.5
## Knak, 2020          -0.1700 [-0.3941; 0.0732]      2.5
## Lemij, 2023         -0.0800 [-0.2048; 0.0474]      6.1
## Ng, 2021            -0.2300 [-0.3924; -0.0537]      4.0
## Ringen, 2018        -0.2400 [-0.4333; -0.0256]      3.0
## Rios Romenets, 2015 -0.1800 [-0.4929; 0.1741]      1.3
## Sacheli, 2018       -0.4000 [-0.7386; 0.0998]      0.7
## Talamonti, 2022     -0.2500 [-0.5178; 0.0625]      1.6
## Vanner, 2008        -0.2700 [-0.5276; 0.0330]      1.7
## Miura, 2014         -0.1200 [-0.4499; 0.2387]      1.3
## Henstra, 2018       -0.1500 [-0.2707; -0.0246]      6.2
## Ito, 2020           -0.3200 [-0.5308; -0.0719]      2.3
## Grool, 2014         -0.0500 [-0.0796; -0.0203]     12.2
## Henstra, 2019a      -0.1700 [-0.2661; -0.0706]      7.6
## Henstra, 2019b      -0.0600 [-0.0962; -0.0236]     11.8
## Henstra, 2022       -0.1700 [-0.2644; -0.0724]      7.7
## Krell-Roesch, 2023  -0.0600 [-0.0958; -0.0241]     11.9
##
## Number of studies: k = 22
## Number of observations: o = 12541
##
##              COR              95%-CI      t  p-value
## Random effects model -0.1325 [-0.1765; -0.0879] -6.14 < 0.0001
##
## Quantifying heterogeneity:
## tau^2 = 0.0038 [0.0003; 0.0167]; tau = 0.0619 [0.0184; 0.1294]
## I^2 = 49.0% [16.4%; 68.9%]; H = 1.40 [1.09; 1.79]
##
## Test of heterogeneity:
##      Q d.f. p-value
## 41.18 21 0.0053
##
## Details on meta-analytical method:
## - Inverse variance method
## - Restricted maximum-likelihood estimator for tau^2
## - Q-Profile method for confidence interval of tau^2 and tau
## - Hartung-Knapp adjustment for random effects model (df = 21)
## - Fisher's z transformation of correlations

```

Our meta-analysis of 22 studies (n = 12,541) based on Pearson's r revealed a statistically significant small negative correlation between apathy and physical activity (r = -0.13; 95% confidence interval [95% CI]: -0.18 to -0.09; p < 0.0001). Further supporting this result, between-study statistical heterogeneity could be considered moderate (Tau2 = 0.0038, 95% CI: 0.0003 to 0.0167; I2 = 49.0%, 95% CI: 16.4 to 68.9%), and the prediction interval ranged from r = -0.26 to 0.00, suggesting that the correlation is expected to be negative for a future study.

```
forest(m.cor,
      layout = "Revman5",
      sortvar = -TE,
      prediction = TRUE,
      print.tau2 = FALSE,
      leftlabs = c("Author", "n"),
      xlim=c(-1.0,1.0),
      fs.hetstat = 10,
      addrows.below.overall = 2)
```



Heterogeneity: $\tau^2 = 0.0038$; $\chi^2 = 41.18$, $df = 21$ ($P < 0.01$); $I^2 = 49\%$

```
png(file = "Main analysis forestplot.png",
    width = 2800, height = 3800, res = 300)
```

```
forest(m.cor,
      layout = "Revman5",
      sortvar = -TE,
      prediction = TRUE,
      print.tau2 = FALSE,
      leftlabs = c("Author", "n"),
      xlim=c(-1.0,1.0),
      fs.hetstat = 10,
```

```
addrows.below.overall = 2)

dev.off()
```

```
## pdf
## 2
```

Secondary analysis based on Spearman's rho values

Analysis with metafor with model comparisons

```
mv.cor.rho <- rma.mv(yi = z,
                    V = var.z,
                    slab = author,
                    data = apathy_rho,
                    random = ~ 1 | author/cor_id,
                    test = "t",
                    method = "REML")
summary(mv.cor.rho)

##
## Multivariate Meta-Analysis Model (k = 7; method: REML)
##
##   logLik  Deviance      AIC      BIC     AICc
##   1.3899   -2.7798   3.2202   2.5955   15.2202
##
## Variance Components:
##
##              estim      sqrt  nlvls  fixed      factor
## sigma^2.1  0.0973  0.3119      4     no      author
## sigma^2.2  0.0000  0.0000      7     no  author/cor_id
##
## Test for Heterogeneity:
## Q(df = 6) = 33.4420, p-val < .0001
##
## Model Results:
##
## estimate      se      tval  df    pval    ci.lb    ci.ub
## -0.4275  0.1678  -2.5474   6  0.0436  -0.8381  -0.0169  *
##
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

round(convert_z2r(-0.4275), 3) # point estimate

## [1] -0.403

round(convert_z2r(-0.8381), 3) # lower CI

## [1] -0.685

round(convert_z2r(-0.0169), 3) # Upper CI

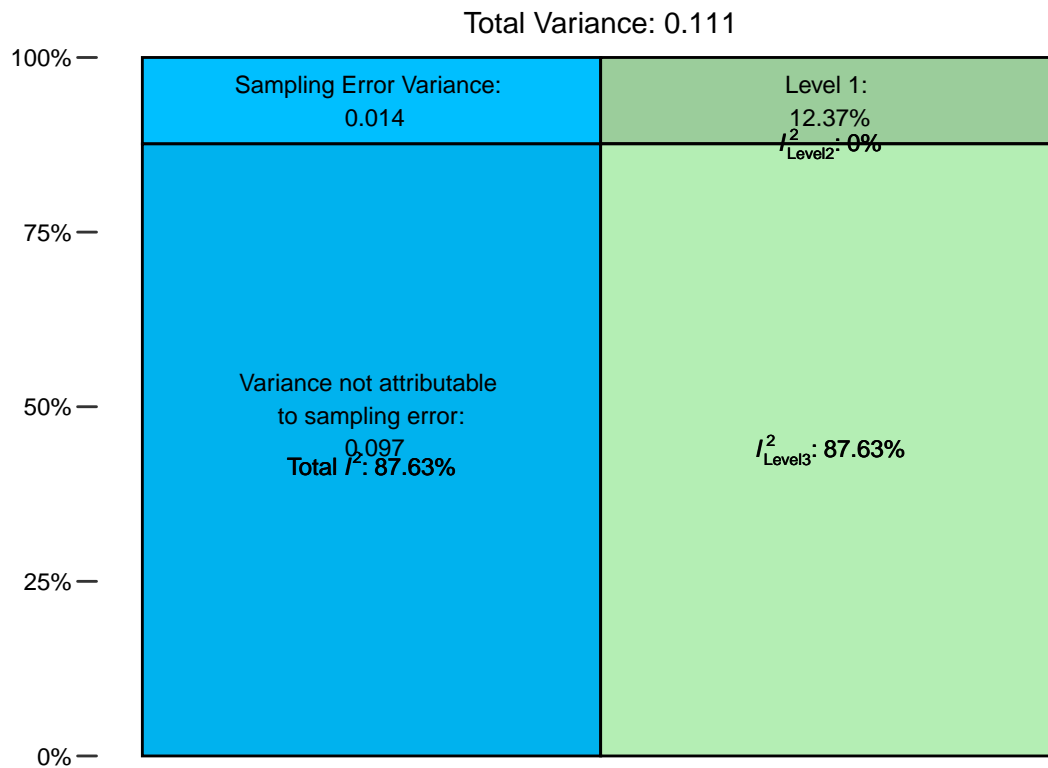
## [1] -0.017
```

Explore heterogeneity

```
i2 <- var.comp(mv.cor.rho)
summary(i2)
```

```
##           % of total variance      I2
## Level 1      1.236966e+01  ---
## Level 2      3.468176e-09    0
## Level 3      8.763034e+01 87.63
## Total I2: 87.63%
```

```
plot(i2)
```



Comparing models

Reduced model in which the level 3 variance (between study heterogeneity) is set to 0, which assumes all effect sizes are independent.

```
l3.removed <- rma.mv(yi = z,
                    V = var.z,
                    slab = author,
                    data = apathy_rho,
                    random = ~ 1 | author/cor_id,
                    test = "t",
                    method = "REML",
                    sigma2 = c(0, NA))

summary(l3.removed)
```

```
##
## Multivariate Meta-Analysis Model (k = 7; method: REML)
```

```
##
##   logLik  Deviance      AIC      BIC      AICc
## -1.2868    2.5736    6.5736    6.1572    10.5736
##
## Variance Components:
##
##           estim      sqrt  nlvls  fixed      factor
## sigma^2.1  0.0000  0.0000     4    yes      author
## sigma^2.2  0.0716  0.2676     7     no  author/cor_id
##
## Test for Heterogeneity:
## Q(df = 6) = 33.4420, p-val < .0001
##
## Model Results:
##
## estimate      se      tval  df    pval    ci.lb    ci.ub
## -0.3346  0.1116  -2.9987   6  0.0240  -0.6076  -0.0616  *
##
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

Comparing full and reduced models.

```
anova(mv.cor.rho, l3.removed)
```

```
##
##           df      AIC      BIC      AICc  logLik      LRT    pval      QE
## Full       3  3.2202  2.5955  15.2202   1.3899              33.4420
## Reduced    2  6.5736  6.1572  10.5736  -1.2868  5.3535  0.0207  33.4420
```

Secondary analysis of rho values with meta

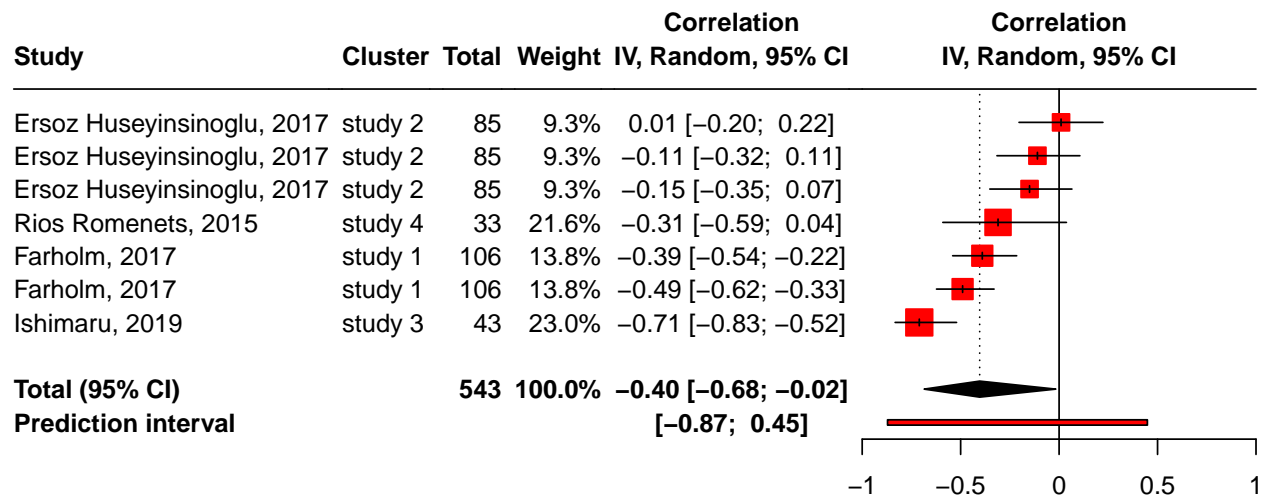
```
m.cor.rho <- metacor(cor = cor,
  n = n,
  data = apathy_rho,
  cluster = cluster,
  studlab = author,
  fixed = FALSE,
  random = TRUE,
  method.tau = "REML",
  hakn = TRUE)
summary(m.cor.rho)
```

```
##
##           COR           95%-CI %W(random) cluster
## Farholm, 2017    -0.4900 [-0.6226; -0.3301]    13.8 study 1
## Farholm, 2017    -0.3900 [-0.5405; -0.2153]    13.8 study 1
## Ersoz Huseyinsinoglu, 2017 -0.1500 [-0.3519; 0.0652]    9.3 study 2
## Ersoz Huseyinsinoglu, 2017  0.0100 [-0.2036; 0.2226]    9.3 study 2
## Ersoz Huseyinsinoglu, 2017 -0.1100 [-0.3157; 0.1056]    9.3 study 2
## Ishimaru, 2019    -0.7100 [-0.8328; -0.5207]   23.0 study 3
## Rios Romenets, 2015 -0.3100 [-0.5905; 0.0373]   21.6 study 4
##
## Number of studies: n = 4
## Number of estimates: k = 7
## Number of observations: o = 543
```

```
##
##                                COR                95%-CI      t p-value
## Random effects model -0.4033 [-0.6849; -0.0169] -2.55  0.0436
##
## Quantifying heterogeneity:
## tau^2.1 = 0.0973 [0.0158; 0.9745]; tau.1 = 0.3119 [0.1259; 0.9872] (between cluster)
## tau^2.2 < 0.0001 [0.0000; 0.0588]; tau.2 < 0.0001 [0.0000; 0.2424] (within cluster)
## I^2 = 82.0% [64.1%; 91.0%]; H = 2.36 [1.67; 3.34]
##
## Test of heterogeneity:
##      Q d.f.  p-value
## 33.39    6 < 0.0001
##
## Details on meta-analytical method:
## - Inverse variance method (three-level model)
## - Restricted maximum-likelihood estimator for tau^2
## - Profile-Likelihood method for confidence interval of tau^2 and tau
## - Random effects confidence interval based on t-distribution (df = 6)
## - Fisher's z transformation of correlations
```

Results of the secondary meta-analysis based on seven Spearman rho values ($k = 4$, $n = 543$) were consistent with those based on Pearson's r as they showed a statistically significant moderate negative correlation between apathy and physical activity ($r = -0.40$; 95% CI: -0.68 to -0.02; $p = 0.043$). However, we observed substantial to considerable between-study statistical heterogeneity (between-cluster $\text{Tau}^2 = 0.09$, 95% CI: 0.01 to 0.97; $I^2 = 82.0\%$, 95% CI: 64.1 to 91.0%), and the prediction interval ranged from $r = -0.87$ to 0.45, indicating that a moderate positive correlation cannot be ruled out for future studies.

```
forest(m.cor.rho,
       layout = "Revman5",
       sortvar = -TE,
       prediction = TRUE,
       print.tau2 = FALSE,
       fontsize = 11,
       xlim=c(-1.0,1.0),
       fs.hetstat = 10,
       addrows.below.overall = 2)
```



Heterogeneity: $\text{Tau}^2 = 0.0973$; $\text{Chi}^2 = 33.39$, $\text{df} = 6$ ($P < 0.01$); $I^2 = 82\%$


```
png(file = "Rho analysis forestplot.png",
     width = 2500, height = 2000, res = 300)
```

```
forest(m.cor.rho,
       layout = "Revman5",
       sortvar = -TE,
       prediction = TRUE,
       print.tau2 = FALSE,
       fontsize = 11,
       xlim=c(-1.0,1.0),
       fs.hetstat = 10,
       addrows.below.overall = 2)
```

```
dev.off()
```

```
## pdf
## 2
```

Meta-analysis: subgroup analyses

Subgroup analysis by health status

```
apathy_r$Health_status <- as.factor(apathy_r$Health_status)
```

```
Health_subg <- update(m.cor,
                      subgroup = Health_status,
                      tau.common = FALSE)
```

```
Health_subg
```

```
## Review:      Apathy and physical activity behaviour
##
## Number of studies: k = 22
## Number of observations: o = 12541
##
##              COR              95%-CI      t  p-value
## Random effects model -0.1325 [-0.1765; -0.0879] -6.14 < 0.0001
##
## Quantifying heterogeneity:
## tau^2 = 0.0038 [0.0003; 0.0167]; tau = 0.0619 [0.0184; 0.1294]
## I^2 = 49.0% [16.4%; 68.9%]; H = 1.40 [1.09; 1.79]
##
## Test of heterogeneity:
##      Q d.f. p-value
## 41.18  21  0.0053
##
## Results for subgroups (random effects model):
##
## Health_status = Parkinson's disease          k    COR
## Health_status = Older adults (healthy, depressi ... 10 -0.0968
## Health_status = Stroke                       3 -0.1960
## Health_status = Myotonic dystrophy           1 -0.1700
## Health_status = Cancer                       1 -0.0800
## Health_status = Severe mental illness        1 -0.2400
```

```

## Health_status = Multiple sclerosis          1 -0.2700
##                                           95%-CI  tau^2
## Health_status = Parkinson's disease        [-0.3078; -0.1381]      0
## Health_status = Older adults (healthy, depressi ... [-0.1455; -0.0476] 0.0018
## Health_status = Stroke                      [-0.6363;  0.3406] 0.0385
## Health_status = Myotonic dystrophy          [-0.3941;  0.0732]    --
## Health_status = Cancer                     [-0.2048;  0.0474]    --
## Health_status = Severe mental illness       [-0.4333; -0.0256]    --
## Health_status = Multiple sclerosis          [-0.5276;  0.0330]    --
##                                           tau      Q    I^2
## Health_status = Parkinson's disease         0  0.97  0.0%
## Health_status = Older adults (healthy, depressi ... 0.0418 17.94 49.8%
## Health_status = Stroke                      0.1961  8.75 77.1%
## Health_status = Myotonic dystrophy          --  0.00  --
## Health_status = Cancer                     --  0.00  --
## Health_status = Severe mental illness       --  0.00  --
## Health_status = Multiple sclerosis          --  0.00  --
##
## Test for subgroup differences (random effects model):
##           Q d.f. p-value
## Between groups 14.13    6  0.0282
##
## Details on meta-analytical method:
## - Inverse variance method
## - Restricted maximum-likelihood estimator for tau^2
## - Q-Profile method for confidence interval of tau^2 and tau
## - Hartung-Knapp adjustment for random effects model (df = 21)
## - Fisher's z transformation of correlations

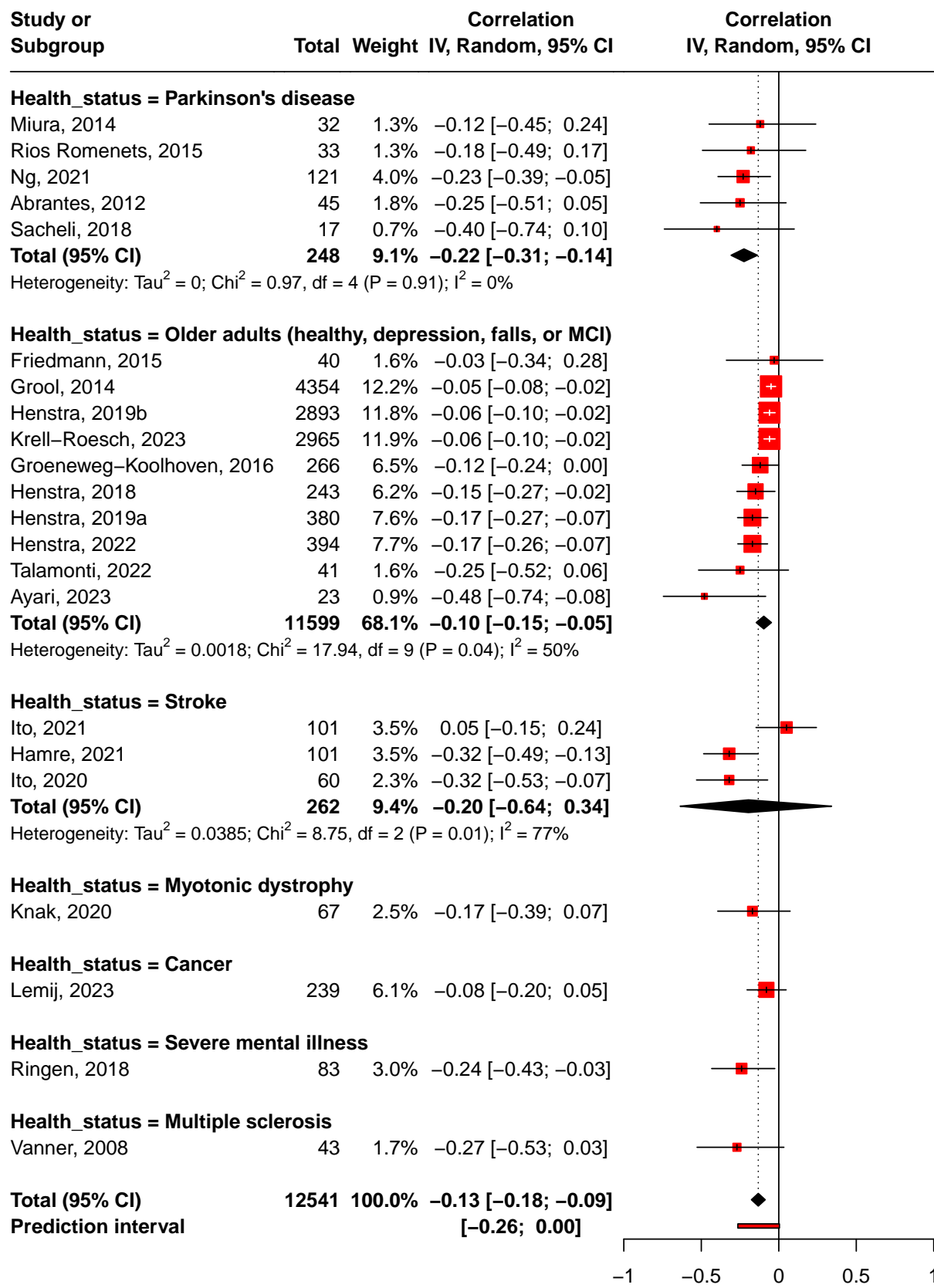
```

The test of subgroup differences between health status was possible between studies comprising older adults who were healthy, depressed, fallers, or had mild cognitive impairment ($k = 10$), people with Parkinson's Disease ($k = 5$), and stroke survivors ($k = 3$). We found statistical difference between these studies ($p < 0.0001$) (Table 2; Figure 6). The relationship between apathy and physical activity was statistically significant in studies that included older adults who were healthy, depressed, fallers, or had mild cognitive impairment ($r = -0.10$; 95% CI: -0.15 to -0.05) or patients with Parkinson's disease ($r = -0.22$; 95% CI: -0.31 to -0.14), but not in studies that included stroke survivors ($r = -0.20$; 95% CI: -0.64 to -0.34). However, statistical power was lacking in the latter ($k = 3$) and other health status ($k = 1$).

```

forest(Health_subg,
       layout = "Revman",
       sortvar = -TE,
       common = FALSE,
       xlim = c(-1, 1),
       prediction = TRUE,
       fontsize = 11,
       fs.hetstat = 10,
       col.subgroup = 'black',
       addrows.below.overall = 2)

```



```
png(file = "Health condition forestplot.png",
     width = 2800, height = 3000, res = 300)

forest(Health_subg,
       layout = "Revman",
       sortvar = -TE,
       common = FALSE,
       xlim = c(-1, 1),
       prediction = TRUE,
       fontsize = 11,
       fs.hetstat = 10,
       col.subgroup = 'black',
       addrows.below.overall = 2)

dev.off()
```

```
## pdf
## 2
```

Subgroup analysis by physical activity measurement instruments

Subgroup analysis by physical activity outcome

```
apathy_r$PA_outcome <- as.factor(apathy_r$PA_outcome)

PAout_subg <- update(m.cor,
                    subgroup = PA_outcome,
                    tau.common = FALSE)

PAout_subg
```

```
## Review:      Apathy and physical activity behaviour
##
## Number of studies: k = 22
## Number of observations: o = 12541
##
##              COR              95%-CI      t  p-value
## Random effects model -0.1325 [-0.1765; -0.0879] -6.14 < 0.0001
##
## Quantifying heterogeneity:
## tau^2 = 0.0038 [0.0003; 0.0167]; tau = 0.0619 [0.0184; 0.1294]
## I^2 = 49.0% [16.4%; 68.9%]; H = 1.40 [1.09; 1.79]
##
## Test of heterogeneity:
##      Q d.f. p-value
## 41.18  21  0.0053
##
## Results for subgroups (random effects model):
##              k      COR              95%-CI  tau^2    tau    Q
## PA_outcome = MET-min/week  6 -0.1521 [-0.2200; -0.0827] <0.0001 0.0021  4.97
## PA_outcome = Kcal/day      1 -0.0300 [-0.3383; 0.2842]      --      --   0.00
## PA_outcome = Score         7 -0.1377 [-0.2305; -0.0425]  0.0065 0.0803 13.79
## PA_outcome = Steps/day     2 -0.1304 [-0.9880; 0.9797]  0.0590 0.2428  5.25
## PA_outcome = Active time   5 -0.2247 [-0.3040; -0.1423]      0      0   0.85
## PA_outcome = Frequency     1 -0.0500 [-0.0796; -0.0203]      --      --   0.00
```

```

##                                I2
## PA_outcome = MET-min/week  0.0%
## PA_outcome = Kcal/day      --
## PA_outcome = Score         56.5%
## PA_outcome = Steps/day     81.0%
## PA_outcome = Active time   0.0%
## PA_outcome = Frequency     --
##
## Test for subgroup differences (random effects model):
##           Q d.f.  p-value
## Between groups 33.31    5 < 0.0001
##
## Details on meta-analytical method:
## - Inverse variance method
## - Restricted maximum-likelihood estimator for tau2
## - Q-Profile method for confidence interval of tau2 and tau
## - Hartung-Knapp adjustment for random effects model (df = 21)
## - Fisher's z transformation of correlations

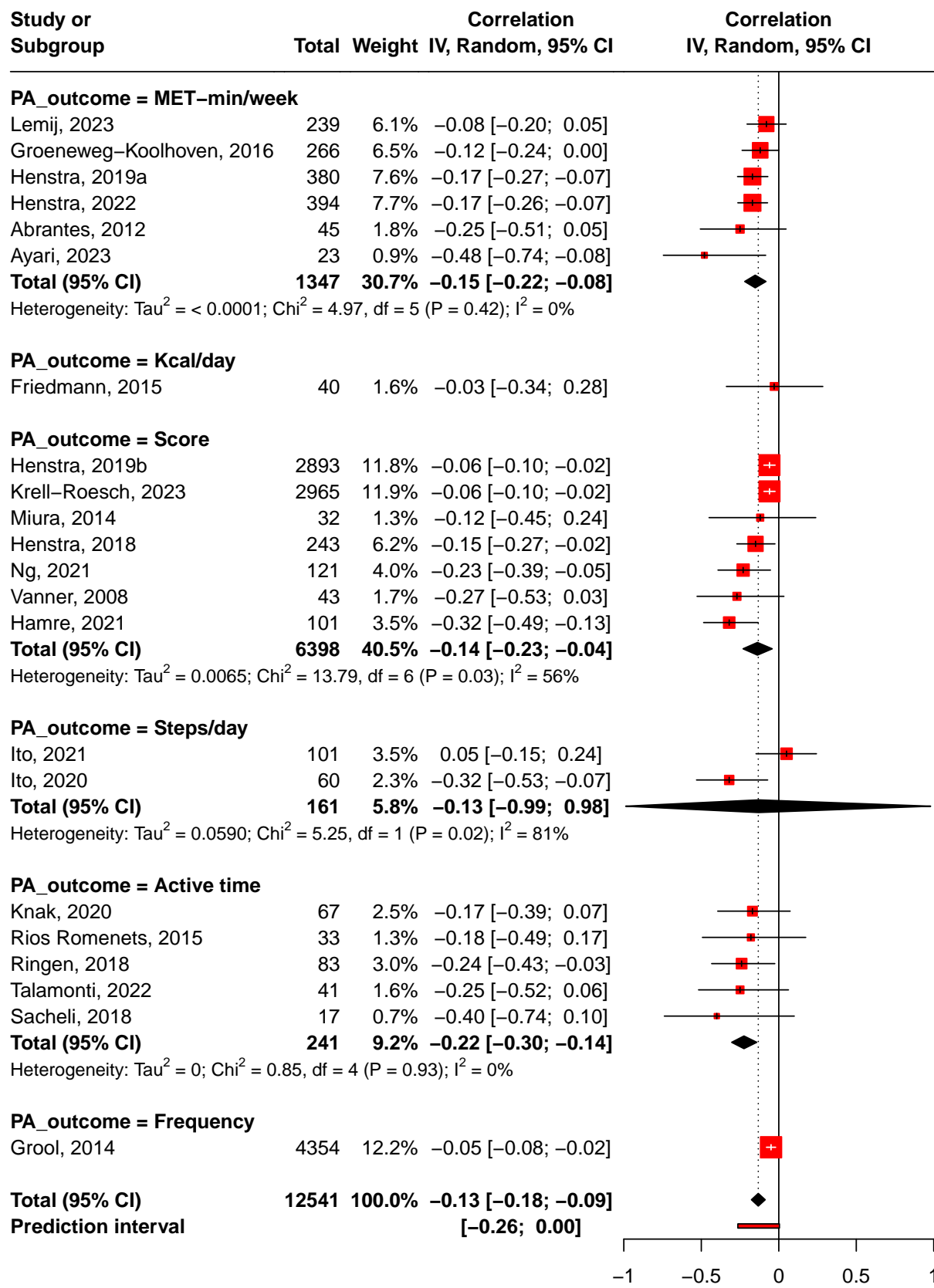
```

The test of subgroup differences between physical activity outcomes was possible between studies using a score from a questionnaire ($k = 7$), MET-min/week ($k = 6$), active time per day or week ($k = 5$), and steps per day ($k = 2$) (Table 2; Figure 7). We found statistical difference between these studies ($p < 0.0001$). The relationship between apathy and physical activity was statistically significant in studies using a score ($r = -0.14$; 95% CI: -0.23 to -0.04), MET-min/week ($r = -0.15$; 95% CI: -0.22 to -0.08), and active time ($r = -0.22$; 95% CI: -0.30 to -0.14), but not in studies that used the number of steps per day ($r = -0.13$; 95% CI: -0.99 to 0.98). However, statistical power was lacking in the latter ($k = 2$) and other physical activity outcomes ($k = 1$).

```

forest(PAout_subg,
       layout = "RevMan5",
       sortvar = -TE,
       common = FALSE,
       xlim = c(-1.0, 1.0),
       prediction = TRUE,
       fontsize = 11,
       fs.hetstat = 10,
       col.subgroup = 'black',
       addrows.below.overall = 2)

```



Heterogeneity: $\tau^2 = 0.0038$; $\chi^2 = 41.18$, $df = 21$ ($P < 0.01$); $I^2 = 49\%$
 Test for subgroup differences: $\chi^2 = 33.31$, $df = 5$ ($P < 0.01$)

```
png(file = "PA outcome forestplot.png",
     width = 2800, height = 3200, res = 300)
```

```
forest(PAout_subg,
       layout = "RevMan5",
       sortvar = -TE,
       common = FALSE,
       xlim = c(-1.0, 1.0),
       prediction = TRUE,
       fontsize = 11,
       fs.hetstat = 10,
       col.subgroup = 'black',
       addrows.below.overall = 2)
```

```
dev.off()
```

```
## pdf
## 2
```

Subgroup analysis by apathy measure

```
apathy_r$Apathy <- as.factor(apathy_r$Apathy)
```

```
apathy_subg <- update(m.cor,
                      subgroup = Apathy,
                      tau.common = FALSE)
```

```
apathy_subg
```

```
## Review:      Apathy and physical activity behaviour
```

```
##
```

```
## Number of studies: k = 22
```

```
## Number of observations: o = 12541
```

```
##
```

```
##              COR              95%-CI      t  p-value
## Random effects model -0.1325 [-0.1765; -0.0879] -6.14 < 0.0001
```

```
##
```

```
## Quantifying heterogeneity:
```

```
## tau^2 = 0.0038 [0.0003; 0.0167]; tau = 0.0619 [0.0184; 0.1294]
```

```
## I^2 = 49.0% [16.4%; 68.9%]; H = 1.40 [1.09; 1.79]
```

```
##
```

```
## Test of heterogeneity:
```

```
##      Q d.f. p-value
```

```
## 41.18  21  0.0053
```

```
##
```

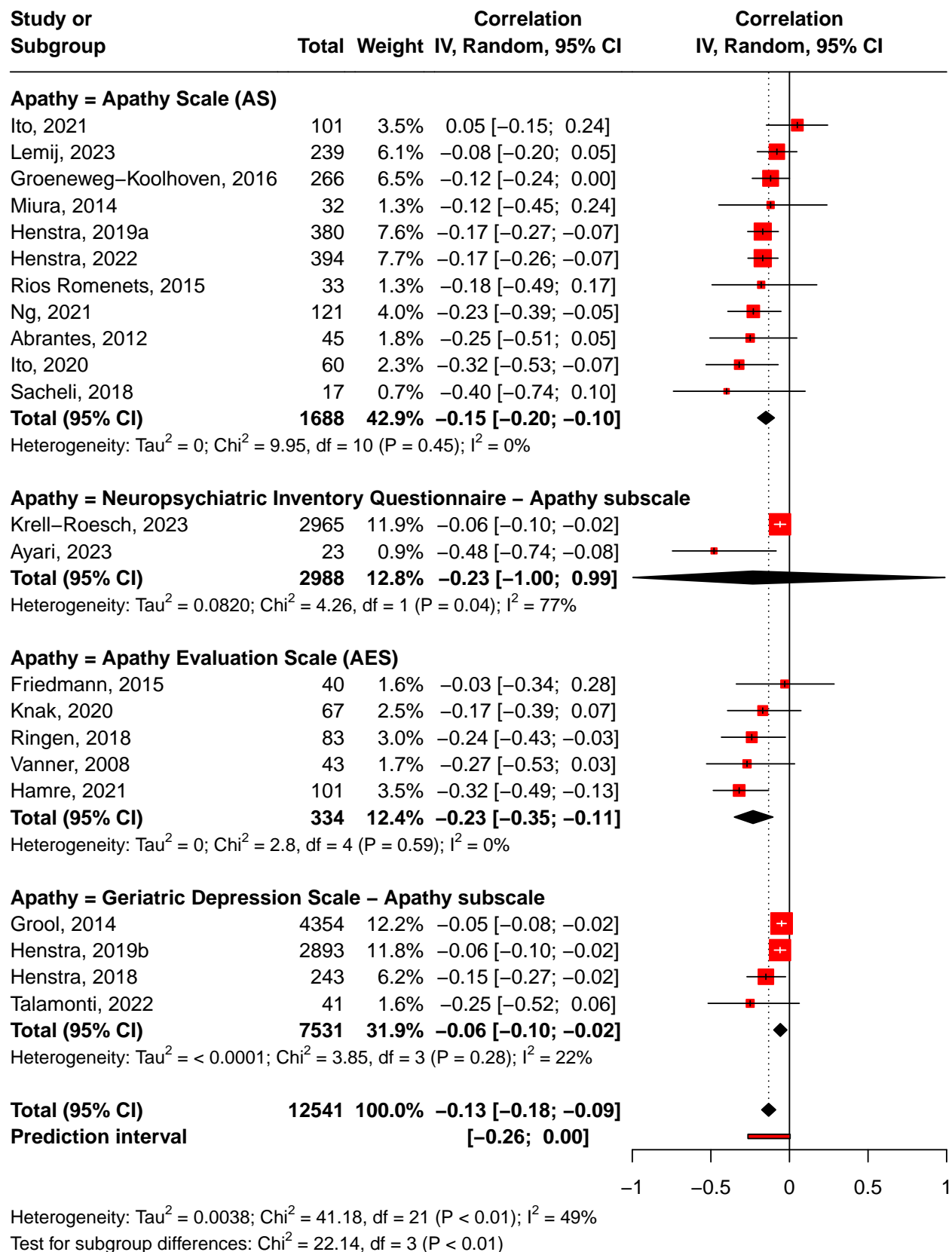
```
## Results for subgroups (random effects model):
```

	k	COR	95%-CI
## Apathy = Apathy Scale (AS)	11	-0.1498	[-0.2027; -0.0960]
## Apathy = Neuropsychiatric Inventory Ques ...	2	-0.2335	[-0.9959; 0.9895]
## Apathy = Apathy Evaluation Scale (AES)	5	-0.2316	[-0.3505; -0.1054]
## Apathy = Geriatric Depression Scale - Ap ...	4	-0.0581	[-0.0996; -0.0165]
##		tau^2	tau Q I^2
## Apathy = Apathy Scale (AS)		0	0 9.95 0.0%
## Apathy = Neuropsychiatric Inventory Ques ...		0.0820	0.2863 4.26 76.5%
## Apathy = Apathy Evaluation Scale (AES)		0	0 2.80 0.0%

```
## Apathy = Geriatric Depression Scale - Ap ... <0.0001 0.0016 3.85 22.1%
##
## Test for subgroup differences (random effects model):
##      Q d.f.  p-value
## Between groups 22.14    3 < 0.0001
##
## Details on meta-analytical method:
## - Inverse variance method
## - Restricted maximum-likelihood estimator for tau^2
## - Q-Profile method for confidence interval of tau^2 and tau
## - Hartung-Knapp adjustment for random effects model (df = 21)
## - Fisher's z transformation of correlations
```

The test of subgroup differences between apathy measures was possible between studies using the Apathy Scale ($k = 11$), the Apathy Evaluation Scale ($k = 5$), the apathy subscale of the Geriatric Depression Scale ($k = 4$), and the apathy subscale of the Neuropsychiatric Inventory Questionnaire ($k = 2$) (Table 2; Figure 8). The relationship between apathy and physical activity was statistically significant in studies using the Apathy Scale ($r = -0.14$; 95% CI: -0.23 to -0.04), Apathy Evaluation Scale ($r = -0.15$; 95% CI: -0.22 to -0.08), and Geriatric Depression Scale ($r = -0.22$; 95% CI: -0.30 to -0.14), but not in studies that used the Neuropsychiatric Inventory Questionnaire ($r = -0.13$; 95% CI: -0.99 to 0.98). However, statistical power was lacking in the latter apathy measure ($k = 2$).

```
forest(apathy_subg,
       layout = "Revman5",
       sortvar = -TE,
       common = FALSE,
       xlim = c(-1, 1),
       prediction = TRUE,
       fontsize = 11,
       fs.hetstat = 10,
       col.subgroup = 'black',
       addrows.below.overall = 2)
```

```
png(file = "Apathy measure forestplot.png",
     width = 2800, height = 3200, res = 300)

forest(apathy_subg,
       layout = "Revman5",
       sortvar = -TE,
       common = FALSE,
       xlim = c(-1, 1),
       prediction = TRUE,
       fontsize = 11,
       fs.hetstat = 10,
       col.subgroup = 'black',
       addrows.below.overall = 2)

dev.off()
```

```
## pdf
## 2
```

Meta-analysis: meta-regression

Meta-regression by age

```
m.cor.reg.age <- metareg(m.cor, ~Age)
```

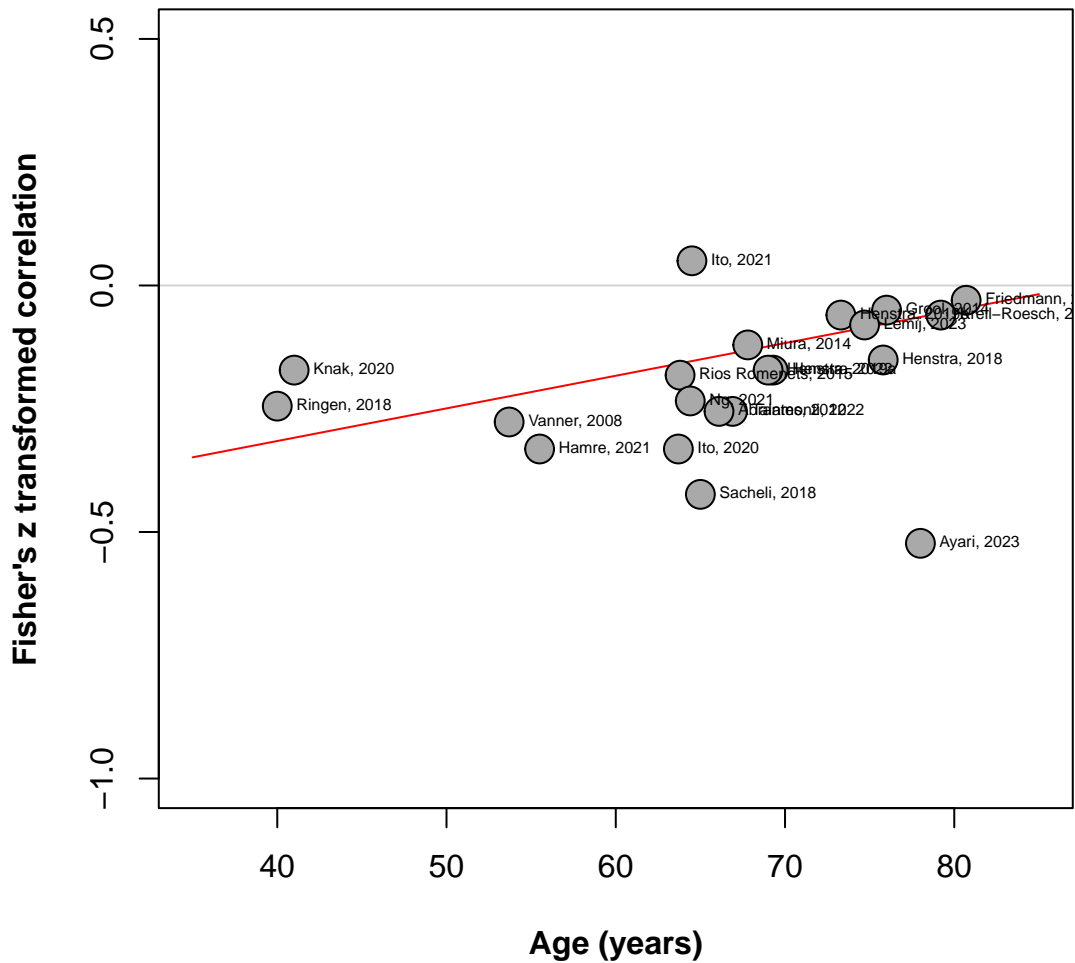
```
## Warning: 1 study with NAs omitted from model fitting.
```

```
m.cor.reg.age
```

```
##
## Mixed-Effects Model (k = 21; tau^2 estimator: REML)
##
## tau^2 (estimated amount of residual heterogeneity):      0.0006 (SE = 0.0009)
## tau (square root of estimated tau^2 value):             0.0246
## I^2 (residual heterogeneity / unaccounted variability): 21.25%
## H^2 (unaccounted variability / sampling variability):    1.27
## R^2 (amount of heterogeneity accounted for):             86.58%
##
## Test for Residual Heterogeneity:
## QE(df = 19) = 24.4507, p-val = 0.1794
##
## Test of Moderators (coefficient 2):
## F(df1 = 1, df2 = 19) = 11.6081, p-val = 0.0030
##
## Model Results:
##
##      estimate      se      tval   df    pval    ci.lb    ci.ub
## intrcpt  -0.5802  0.1423  -4.0781  19  0.0006  -0.8780  -0.2824 ***
## Age       0.0066  0.0019   3.4071  19  0.0030   0.0026   0.0107 **
##
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

Age statistically influenced the correlation values of the meta-analysis studies ($k = 13$; $p = 0.003$).

```
Age.bubble <- bubble(m.cor.reg.age,
  xlim = c(35, 85),
  ylim = c(-1.0, 0.5),
  xlab = 'Age (years)',
  font.lab = 2,
  studlab = TRUE,
  cex = 2,
  cex.studlab = 0.5,
  pos.studlab = 4,
  offset = 0.5,
  col.line = 'red')
```



```
Age.bubble
```

```
## NULL
```

```
png(file = "Bubble plot for meta-regression by age.png",
  width = 2500, height = 2500, res = 300)
```

```
Age.bubble
```

```
## NULL
```

```
dev.off()
```

```
## pdf
## 2
```

Meta-regression by proportion of women

```
m.cor.reg.women <- metareg(m.cor, ~Prop_women)
```

```
## Warning: 1 study with NAs omitted from model fitting.
```

```
m.cor.reg.women
```

```
##
## Mixed-Effects Model (k = 21; tau^2 estimator: REML)
##
## tau^2 (estimated amount of residual heterogeneity):      0.0053 (SE = 0.0037)
## tau (square root of estimated tau^2 value):            0.0725
## I^2 (residual heterogeneity / unaccounted variability): 68.93%
## H^2 (unaccounted variability / sampling variability):   3.22
## R^2 (amount of heterogeneity accounted for):            0.00%
##
## Test for Residual Heterogeneity:
## QE(df = 19) = 40.6493, p-val = 0.0027
##
## Test of Moderators (coefficient 2):
## F(df1 = 1, df2 = 19) = 0.9339, p-val = 0.3460
##
## Model Results:
##
##              estimate      se      tval  df    pval    ci.lb    ci.ub
## intrcpt      -0.2093  0.0751  -2.7866  19  0.0118  -0.3665  -0.0521 *
## Prop_women    0.1247  0.1290   0.9664  19  0.3460  -0.1454   0.3948
##
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

The proportion of women did not statistically influence the correlation values of the meta-analysis studies ($k = 21$; $p = 0.346$).

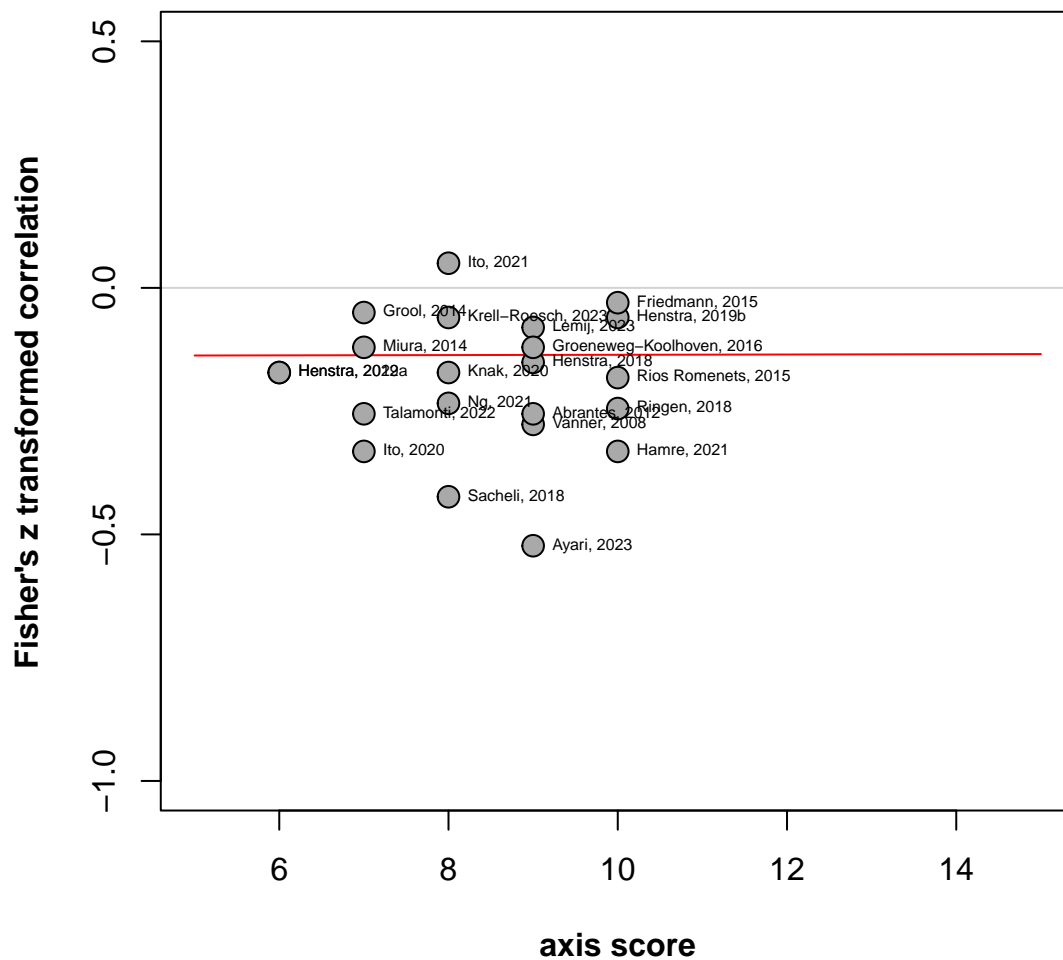
```
Propwomen.bubble <- bubble(m.cor.reg.women,
  xlim = c(0.1, 0.9),
  ylim = c(-1, 0.5),
  xlab = 'Proportion of women',
  font.lab = 2,
  studlab = TRUE,
  cex = 2,
  cex.studlab = 0.5,
  pos.studlab = 4,
  offset = 0.5,
  col.line = 'red')
```



```
## tau^2 (estimated amount of residual heterogeneity):      0.0045 (SE = 0.0032)
## tau (square root of estimated tau^2 value):             0.0671
## I^2 (residual heterogeneity / unaccounted variability): 60.89%
## H^2 (unaccounted variability / sampling variability):    2.56
## R^2 (amount of heterogeneity accounted for):             0.00%
##
## Test for Residual Heterogeneity:
## QE(df = 20) = 41.1718, p-val = 0.0035
##
## Test of Moderators (coefficient 2):
## F(df1 = 1, df2 = 20) = 0.0003, p-val = 0.9862
##
## Model Results:
##
##      estimate      se      tval  df    pval    ci.lb    ci.ub
## intrcpt  -0.1386  0.1384  -1.0019  20  0.3284  -0.4273  0.1500
## Q_score   0.0003  0.0167   0.0175  20  0.9862  -0.0345  0.0351
##
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

The meta-regression by quality score based on the Quality Assessment Tool for Observational Cohort and Cross-Sectional Studies ($k = 22$) showed that a study's quality did not influence correlation values ($p = 0.986$).

```
Axis.bubble <- bubble(m.cor.reg.axis,
  xlim = c(5, 15),
  ylim = c(-1.0, 0.5),
  xlab = 'axis score',
  studlab = TRUE,
  font.lab = 2,
  cex = 1.5,
  cex.studlab = 0.5,
  pos.studlab = 4,
  offset = 0.5,
  col.line = 'red')
```



Axis.bubble

```
## NULL
```

```
parameter <- par(mfrow=c(1,3))
```

```
parameter <- bubble(m.cor.reg.age,
  xlim = c(35, 85),
  ylim = c(-0.6, 0.1),
  xlab = 'Age (years)',
  font.lab = 2,
  studlab = F,
  cex = 2,
  cex.studlab = 0.5,
  pos.studlab = 4,
  offset = 0.5,
  col.line = 'red')
```

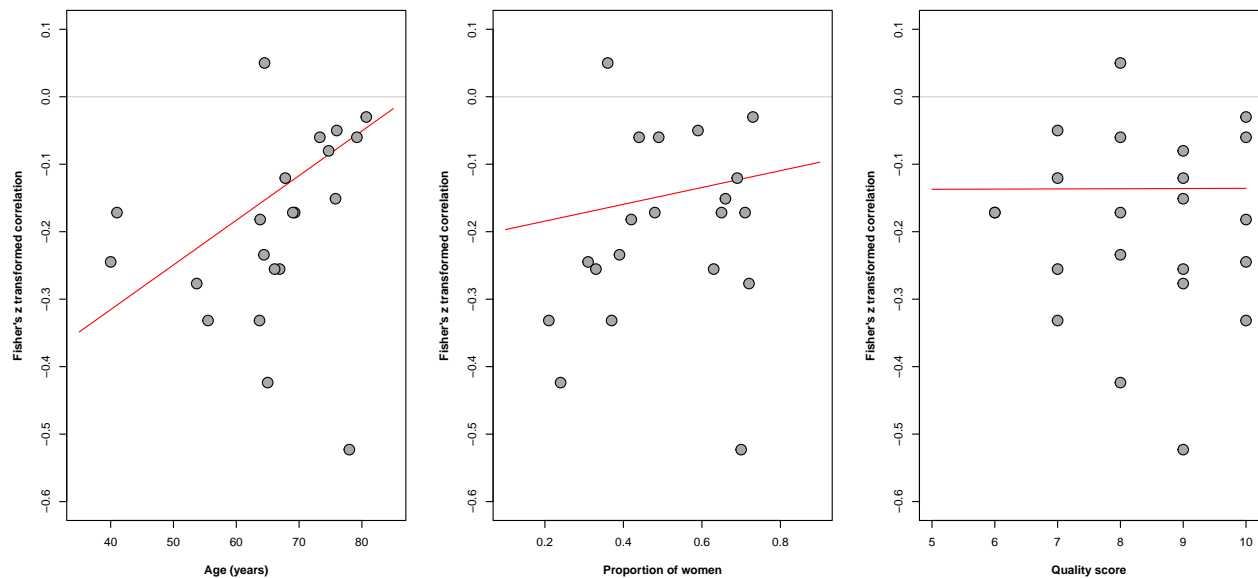
```
parameter <- bubble(m.cor.reg.women,
  xlim = c(0.1, 0.9),
  ylim = c(-0.6, 0.1),
  xlab = 'Proportion of women',
  font.lab = 2,
  studlab = F,
```

```

cex = 2,
cex.studlab = 0.5,
pos.studlab = 4,
offset = 0.5,
col.line = 'red')

parameter <- bubble(m.cor.reg.axis,
  xlim = c(5, 10),
  ylim = c(-0.6, 0.1),
  xlab = 'Quality score',
  studlab = F,
  font.lab = 2,
  cex = 2,
  cex.studlab = 0.5,
  pos.studlab = 4,
  offset = 0.5,
  col.line = 'red')

```



Publication bias analysis

Small-study effects

Funnel plot

```

# Define fill colors for contour
col.contour = c("gray75", "gray85", "gray95")

# Funnel plot
funnel(m.cor,
  xlim = c(-1.5, 1),
  contour = c(0.9, 0.95, 0.99),
  col.contour = col.contour,
  studlab = TRUE,
  cex = 1,
  cex.studlab = 0.5,

```



```

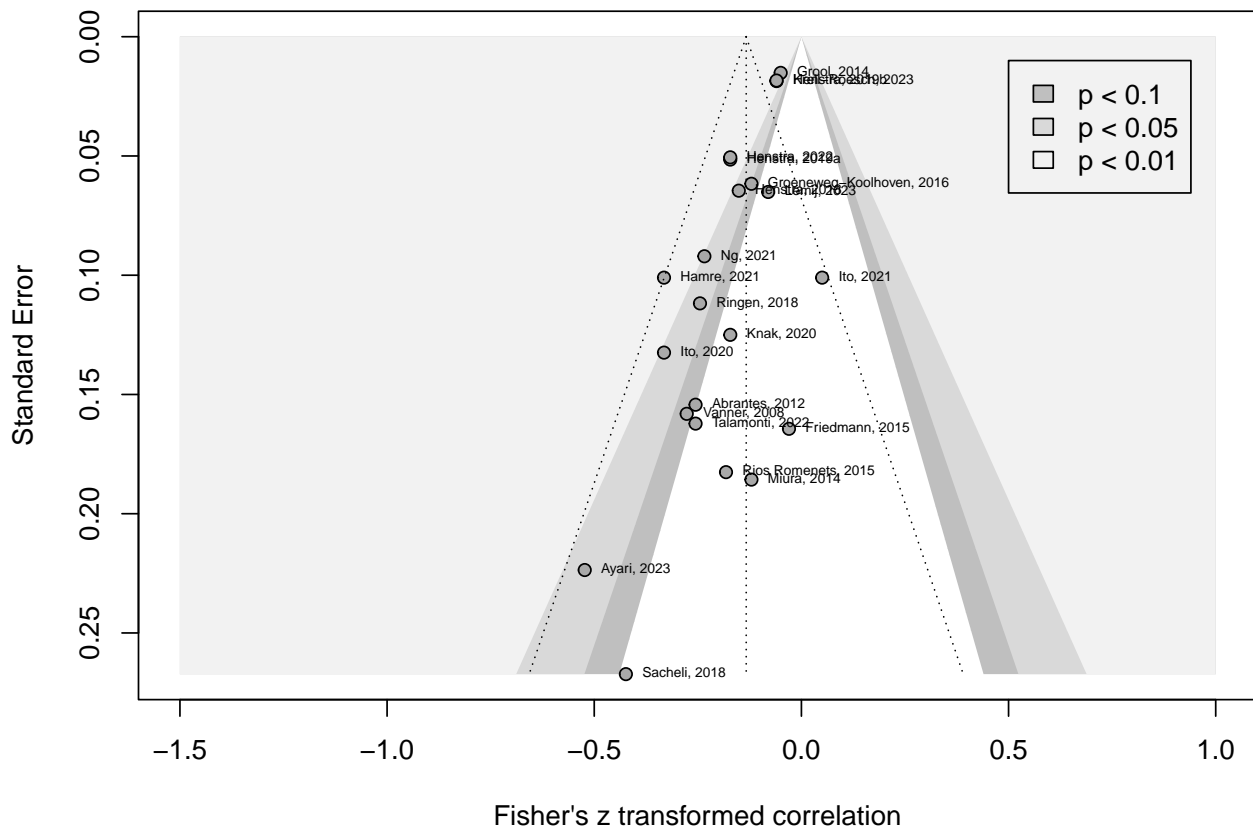
pos.studlab = 4,
offset = 0.5)

# legend
legend(x = 0.5, y = 0.01,
       legend = c("p < 0.1", "p < 0.05", "p < 0.01"),
       fill = col.contour)

# title
title("Contour-Enhanced Funnel Plot (Apathy and Physical Activity)")

```

Contour-Enhanced Funnel Plot (Apathy and Physical Activity)



```

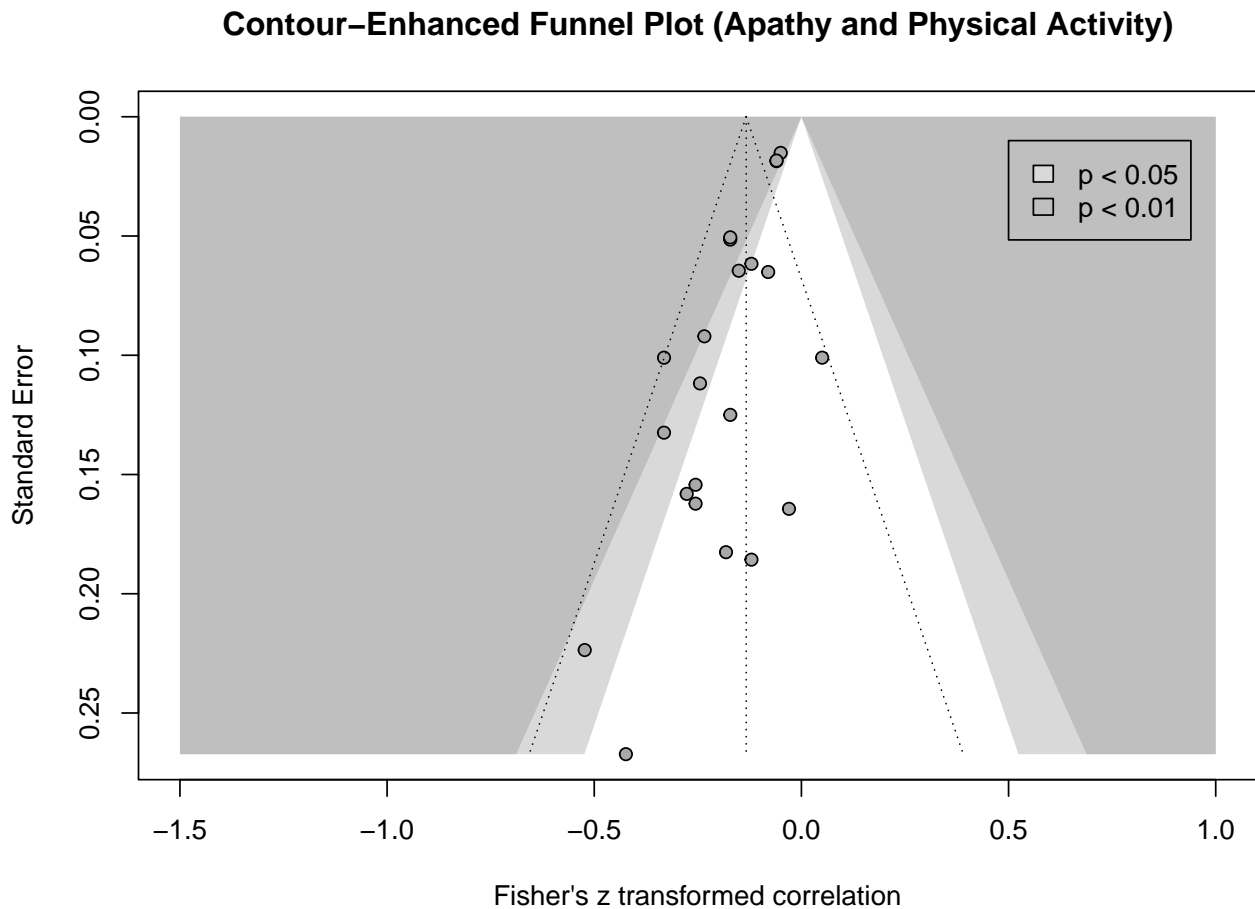
# Define fill colors for contour
col.contour = c("gray85", "gray75")

# Funnel plot
funnel(m.cor,
       xlim = c(-1.5, 1),
       contour = c(0.95, 0.99),
       studlab = FALSE,
       cex = 1,
       cex.studlab = 0.5,
       pos.studlab = 4,
       offset = 0.5,
       col.contour = col.contour)

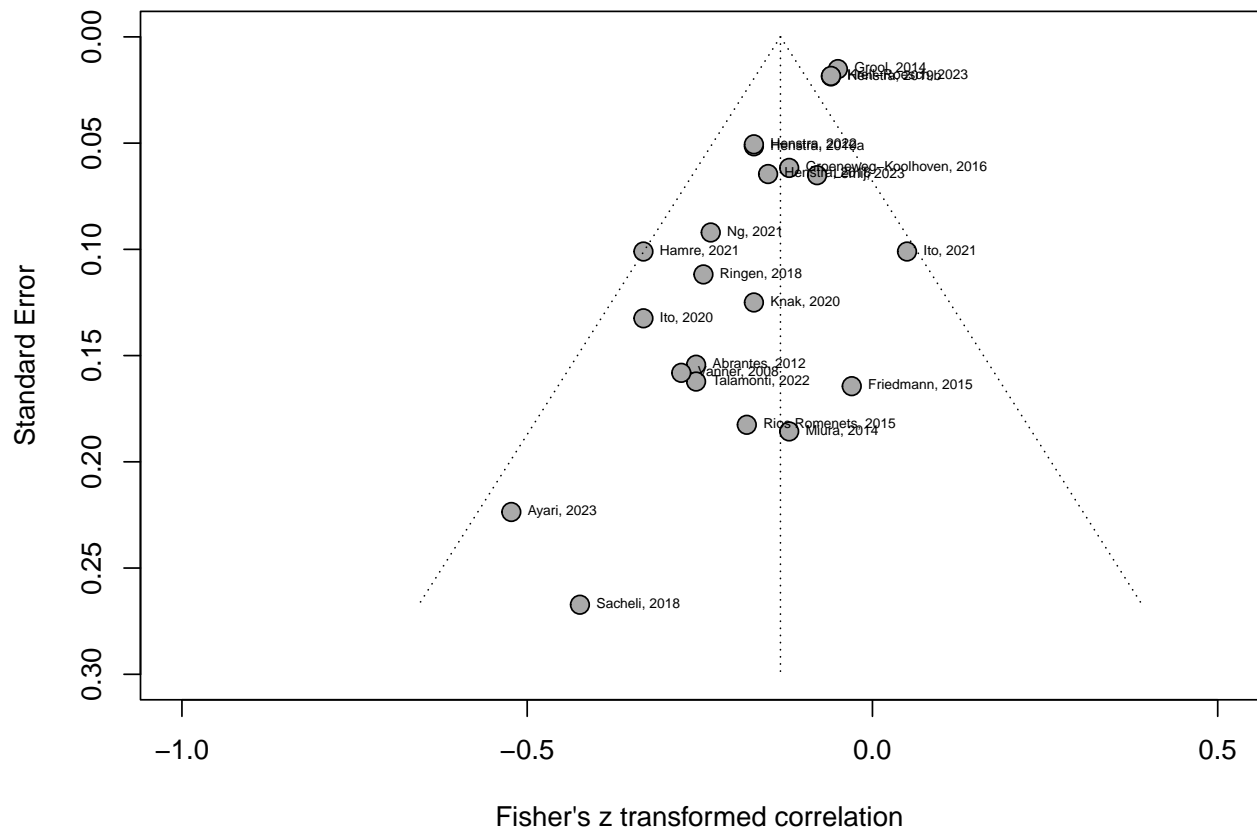
```

```
# legend
legend(x = 0.5, y = 0.01,
      legend = c("p < 0.05", "p < 0.01"),
      fill = col.contour)

# title
title("Contour-Enhanced Funnel Plot (Apathy and Physical Activity)")
```



```
# Produce funnel plot
funnel(m.cor,
      xlim = c(-1, 0.5),
      ylim = c(0.3, 0.0),
      studlab = TRUE,
      cex = 1.5,
      cex.studlab = 0.5,
      pos.studlab = 4,
      offset = 0.5)
```



```

png(file = "Funnel Plot.png", width = 2100, height = 1500, res = 300)

# Define fill colors for contour
col.contour = c("gray75", "gray85", "gray95")

# Funnel plot
funnel(m.cor,
       xlim = c(-1.5, 1),
       contour = c(0.9, 0.95, 0.99),
       col.contour = col.contour,
       studlab = TRUE,
       cex = 1,
       cex.studlab = 0.5,
       pos.studlab = 4,
       offset = 0.5)

# legend
legend(x = 0.5, y = 0.01,
       legend = c("p < 0.1", "p < 0.05", "p < 0.01"),
       fill = col.contour)

# title
title("Contour-Enhanced Funnel Plot (Apathy and Physical Activity)")

dev.off()

## pdf
## 2

```

Egger's test

```
metabias(m.cor, method.bias = "linreg", k.min = 9)
```

```
## Review:      Apathy and physical activity behaviour
##
## Linear regression test of funnel plot asymmetry
##
## Test result: t = -5.34, df = 20, p-value < 0.0001
##
## Sample estimates:
##      bias se.bias intercept se.intercept
## -1.4426  0.2702  -0.0346      0.0113
##
## Details:
## - multiplicative residual heterogeneity variance (tau^2 = 0.8489)
## - predictor: standard error
## - weight:      inverse variance
## - reference: Egger et al. (1997), BMJ
```

```
egggers.test(m.cor)
```

```
## Eggers' test of the intercept
## =====
##
## intercept      95% CI      t      p
##    -1.443 -1.97 - -0.91 -5.339 3.166541e-05
##
## Eggers' test indicates the presence of funnel plot asymmetry.
```

Egger's regression test showed that the data in the funnel plot was asymmetric ($b = -1.44$, 95% CI: -1.97 to -0.91, $p = 3.1 \times 10^{-5}$), which may be explained by publication bias, but also by other potential causes, such as different study procedures and between-study heterogeneity.

Limit meta-analysis

```
limitmeta(m.cor)
```

```
## Review:      Apathy and physical activity behaviour
##
## Result of limit meta-analysis:
##
## Random effects model      COR      95%-CI      z      pval
## Adjusted estimate -0.0797 [-0.1366; -0.0224] -2.72  0.0065
## Unadjusted estimate -0.1325 [-0.1765; -0.0879] -6.14 < 0.0001
##
## Quantifying heterogeneity:
## tau^2 = 0.0038; I^2 = 49.0% [16.4%; 68.9%]; G^2 = 27.9%
##
## Test of heterogeneity:
##      Q d.f.  p-value
## 41.18  21  0.0053
##
## Test of small-study effects:
##      Q-Q' d.f.  p-value
## 24.20    1 < 0.0001
```

```
##
## Test of residual heterogeneity beyond small-study effects:
##      Q' d.f.  p-value
## 16.98   20   0.6544
##
## Details on adjustment method:
## - expectation (beta0)
```

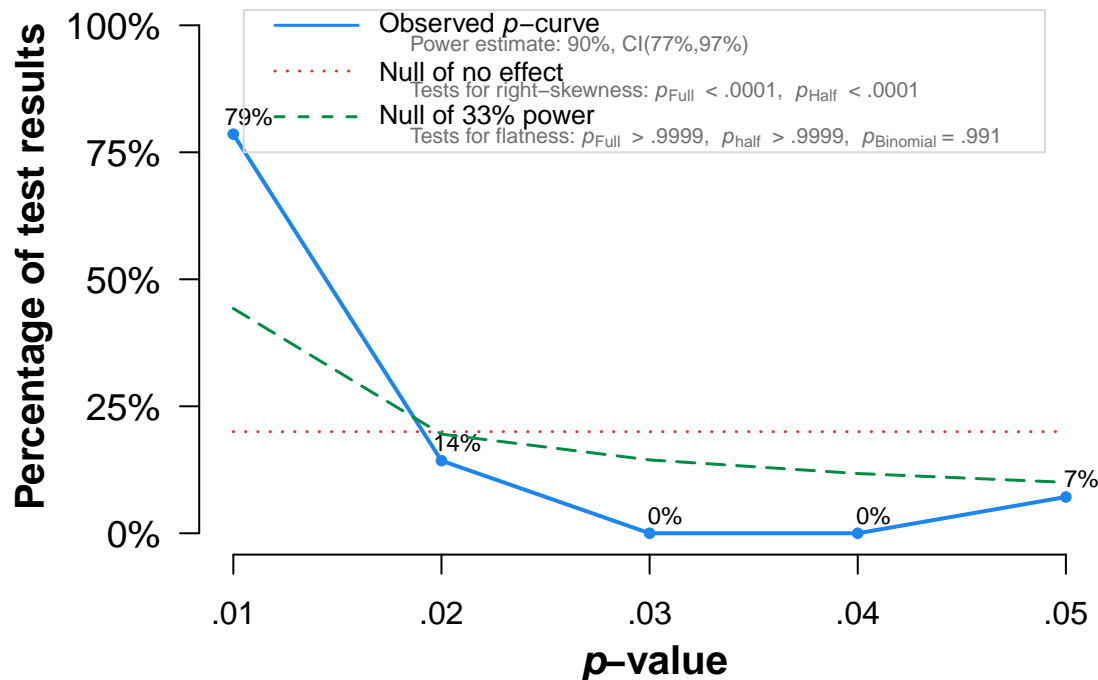
The bias-corrected estimate of the true effect size, calculated using Rücker's limit meta-analysis method, showed that the correlation would remain significant if there was publication bias ($r = -0.08$; 95% CI: -0.14 to -0.02; $p = 0.0065$).

Pcurve analysis

Standard errors of the correlation values were calculated using the formula: $\sqrt{(1 - \text{correlation_coefficient}^2) / (\text{sample_size} - 2)}$

```
p_curve_data = data.frame("studlab" = c(paste("Study_", 1:29, sep = "")),
  "TE" = c(-0.27, -0.057, -0.37, -0.23, -0.25, -0.18, -0.03, -0.25,
    -0.048, -0.12, -0.32, 0.05, -0.17, -0.08, -0.49, -0.39,
    -0.15, 0.01, -0.11, -0.71, -0.31, -0.12, -0.15, -0.32,
    -0.05, -0.17, -0.06, -0.17, -0.06),
  "seTE" = c(0.150373518685809, 0.257779104402717, 0.103225750448013,
    0.089212238675037, 0.147656105804655, 0.176671738616584,
    0.162148405058939, 0.155043418, 0.217966358,
    0.0611010092660779, 0.095219046, 0.100378073, 0.122229293,
    0.064748784, 0.085479417225615, 0.090293325, 0.108522387,
    0.109758772, 0.109098165, 0.109977825, 0.170757326,
    0.181254885, 0.063686864, 0.124402018, 0.015139517,
    0.050685773, 0.018564909, 0.049772441, 0.018337961))

pcurve(p_curve_data)
```



Note: The observed p -curve includes 14 statistically significant ($p < .05$) results, of which 13 are $p < .025$. There were 15 additional results entered but excluded from p -curve because they were $p > .05$.

```
## P-curve analysis
## -----
## - Total number of provided studies: k = 29
## - Total number of p<0.05 studies included into the analysis: k = 14 (48.28%)
## - Total number of studies with p<0.025: k = 13 (44.83%)
##
## Results
## -----
##               pBinomial  zFull pFull  zHalf pHalf
## Right-skewness test    0.001 -7.775    0 -7.434    0
## Flatness test          0.991  4.647    1  7.099    1
## Note: p-values of 0 or 1 correspond to p<0.001 and p>0.999, respectively.
## Power Estimate: 90% (77.1%-96.5%)
##
## Evidential value
## -----
## - Evidential value present: yes
## - Evidential value absent/inadequate: no
```

The 29 studies reporting a correlation value (Pearson's r or Spearman's ρ) were provided to the p -curve analysis. The observed p -curve includes 14 (48.3%) statistically significant results ($p < 0.05$), with 13 of them being $p < 0.025$ (Figure 4). The other results were excluded because they had a $p > 0.05$. The p -value of the right-skewness test was < 0.001 for both the half curve and the full curve, suggesting that evidential value was present, i.e., that the effect we estimated is not spurious; an artifact caused by selective reporting (e.g., p -hacking) in the literature.

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