

Co-structure of two tables

Application to a clinical study designed to demonstrate the superiority of drug A over drug B in reducing pre-existing coronary atherosclerosis in T2DM patients

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Contents

Introduction
Clinical Trial

R, Clinical environment

Main analysis, Baseline values

1. PCA

2. LDA

Principles, Applications

3. Co-inertia

Conclusion

MVA, R, graphics

Aims of this talk

- 1. Multivariate statistical analyis
- 2. Variety of graphics
- 3. Statistical language R



List of Abbreviations

- . PCA = Principal Component Analysis
- . LDA = Linear Discriminant Analysis
- . MVA = Multivariate Analysis
- . T2DM = Type 2 Diabetes Mellitus
- . CHD = Coronary Heart Disease





What is R?

« A Programming Environment for Data Analysis and Graphics »

Basic package

+

Specific Packages

- linear and non linear modelling,
- classical statistical tests,
- time-series analysis,
- classification,
- clustering,
- ...

Free Software under the terms of the GNU General Public License http://www.r-project.org/





Lipid lowering drugs in T2DM

• NCEP/ATP III guidelines consider diabetes as a CHD risk equivalent, in part because its frequent association with multiple risk factors



Introduction

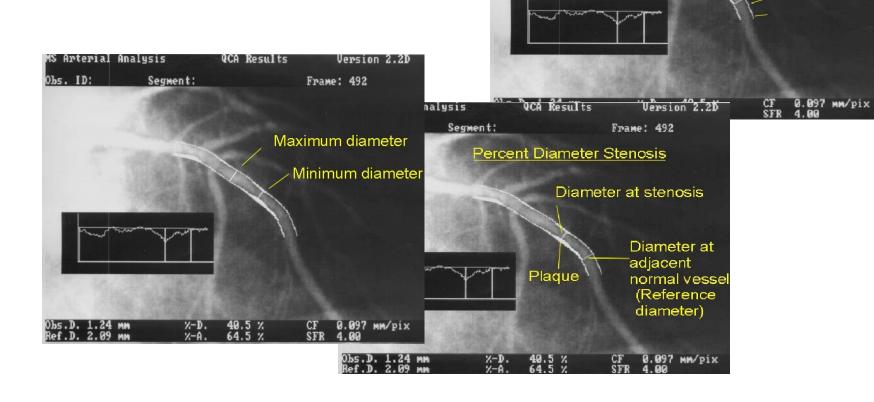
Frame: 492

Mean diameter

Version 2.2D

QCA Results

Angiography



MS Arterial Analysis

Segment:

Obs. ID:



Synopsis

- Randomised, double-blind, two parallel arms: drug A vs. drug B
- N=418 randomized patients, 305 males, 113 females
- Mean Treatment Duration ~ 3 years
- Mean Age at Baseline ~ 57 years
- n=379 non missing data

« To compare the average diameter between groups »

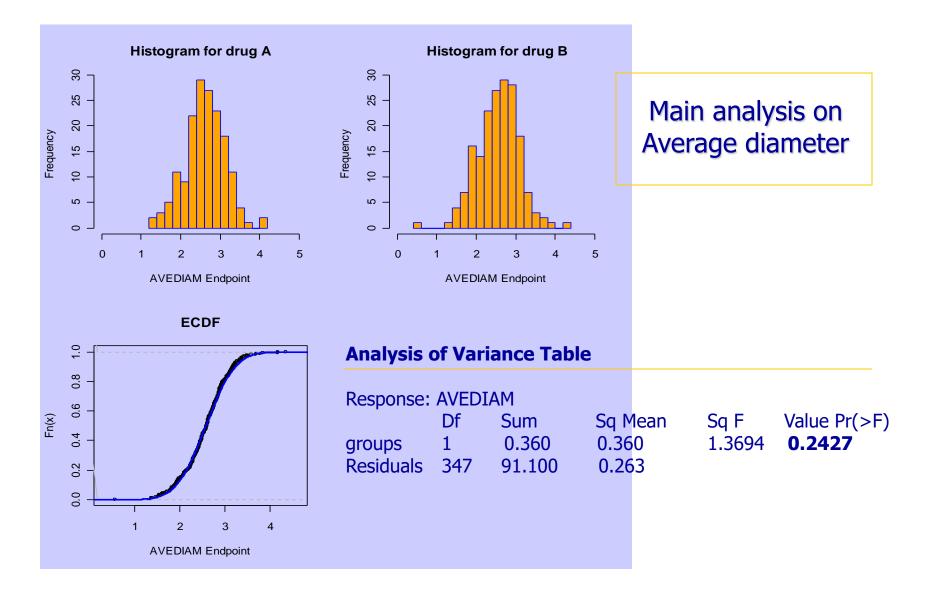


TC, HDL-C, IDL-C, cLDL-C, qLDL-C, VLDL-C, TG, IDL-TG, VLDL-TG, Apo AI, Apo CIII, Apo B, Lp a, Lp AI, Lp AII

Average diameter, Minimum diameter, %Stenosis, %New lesions, %Progressing segments, %Regressing or Stable segments



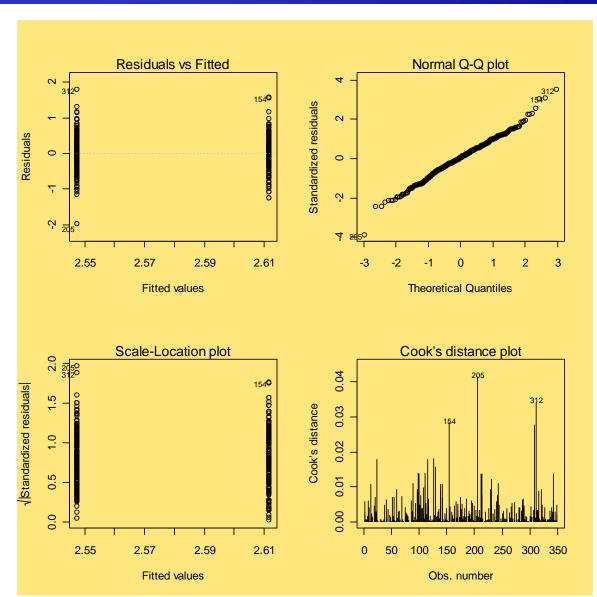






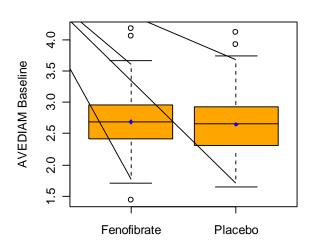


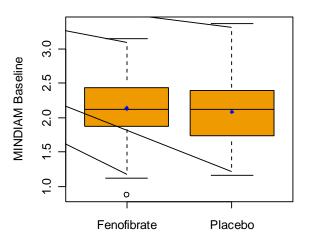
Diagnostics for linear model



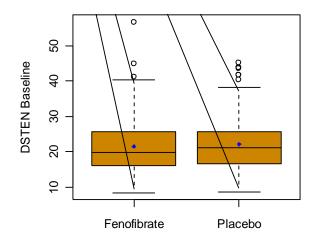








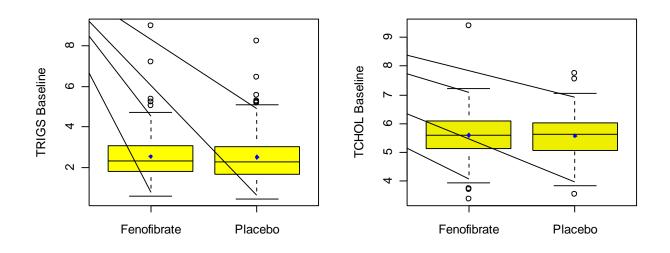
Assessment of main angios at baseline



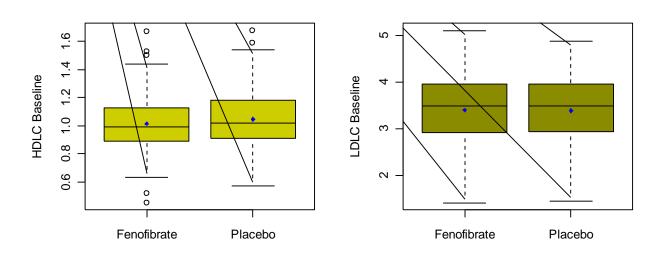
```
boxmoy<-function(x, gp, thecol, yaxlab)
{
    thebox<-boxplot(x~gp, col=thecol, ylab=yaxlab)
    meang<-tapply(x, gp, mean)
    xi<-seq(thebox$n)
    points(xi, meang, col="blue", pch=18, cex=1)
}</pre>
```





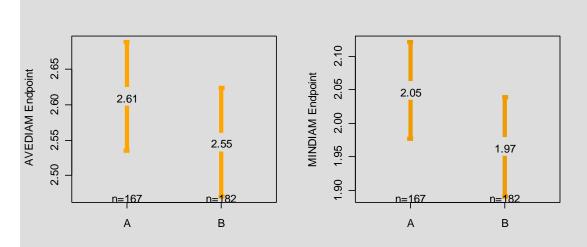


Assessment of main lipids at baseline

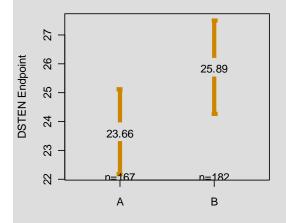








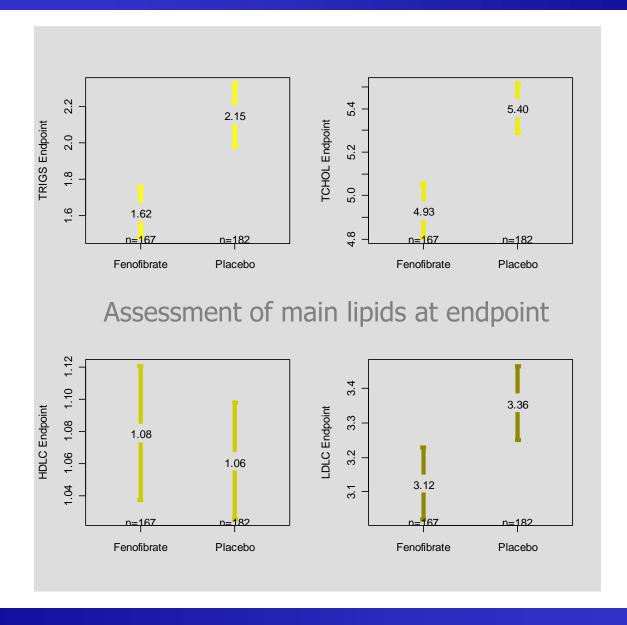
Assessment of main angios at endpoint



plotmeans (AVEDIAMF~groups, barcol="orange1", barwidth=5, xlab="", ylab=" AVEDIAM Endpoint", n.label=T, mean.label=T, digits=2, connect=F)





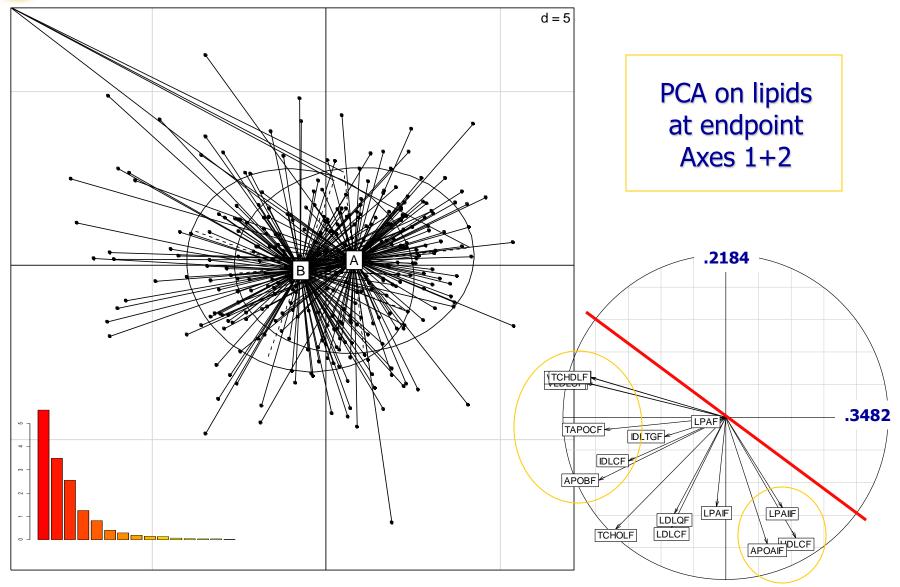




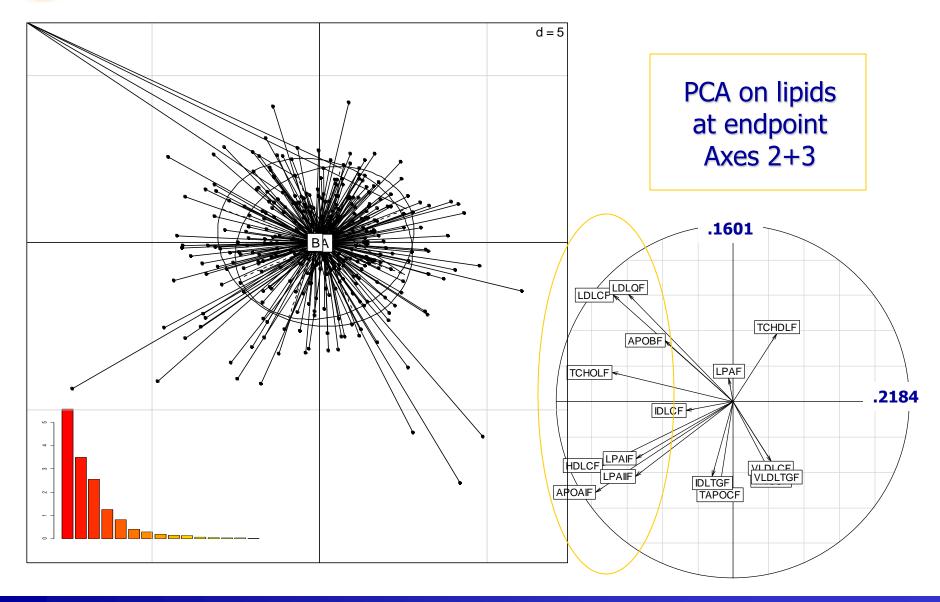
Principle

Randtest

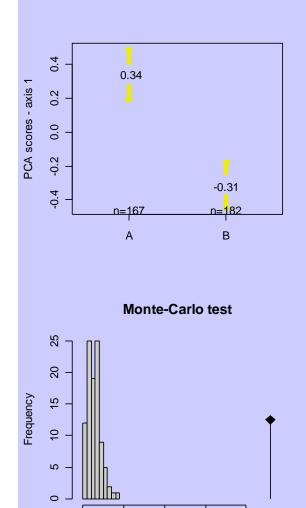












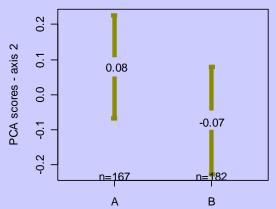
0.01

0.02

sim

0.03

0.04



95% CI on PCA scores for lipids Axes 1+2

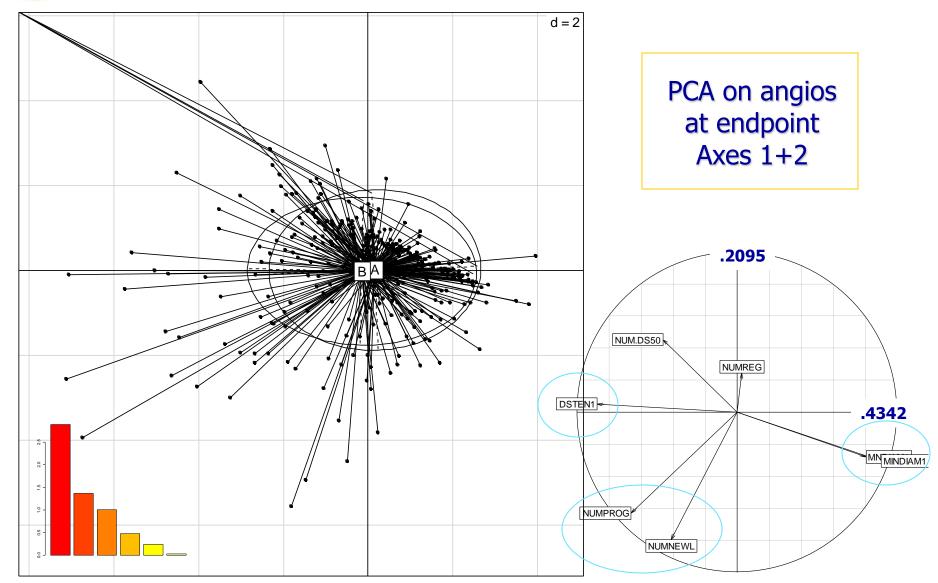
Monte-Carlo test

Observation: 0.04591039

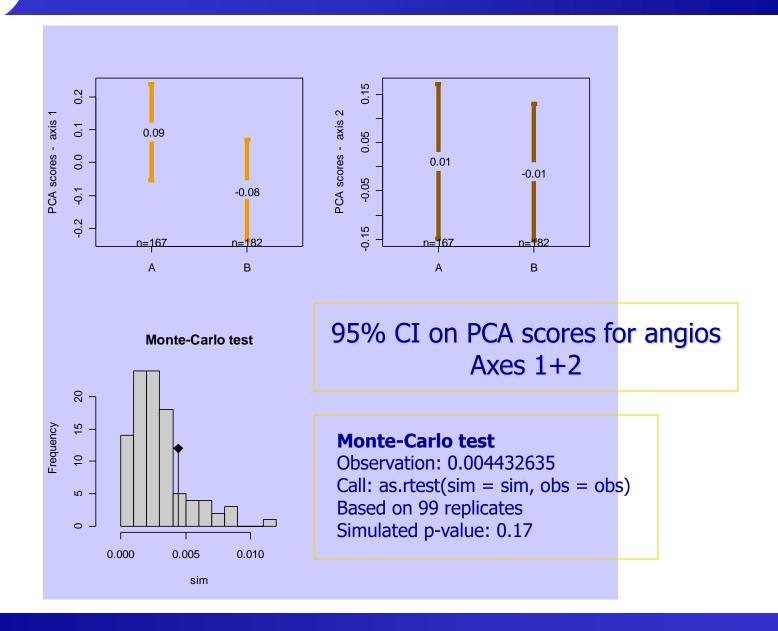
Call: as.rtest(sim = sim, obs = obs)

Based on 99 replicates Simulated p-value: 0.01











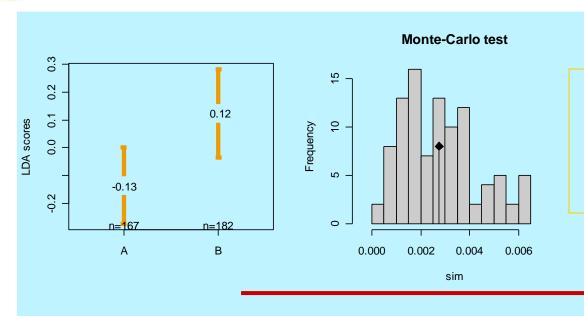
Linear Discriminant Analysis

Principle

Randtest



Linear Discriminant Analysis



Monte-Carlo test

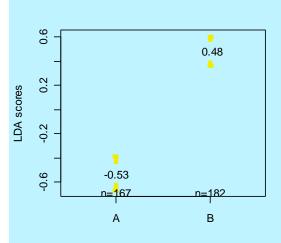
Observation: 0.002760904

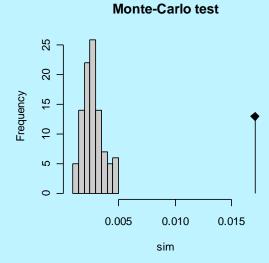
Call: as.rtest(sim = sim, obs = obs)

Based on 99 replicates Simulated p-value: 0.49

ANGIOS

LIPIDS





Monte-Carlo test

Observation: 0.01706249

Call: as.rtest(sim = sim, obs = obs)

Based on 99 replicates Simulated p-value: 0.01

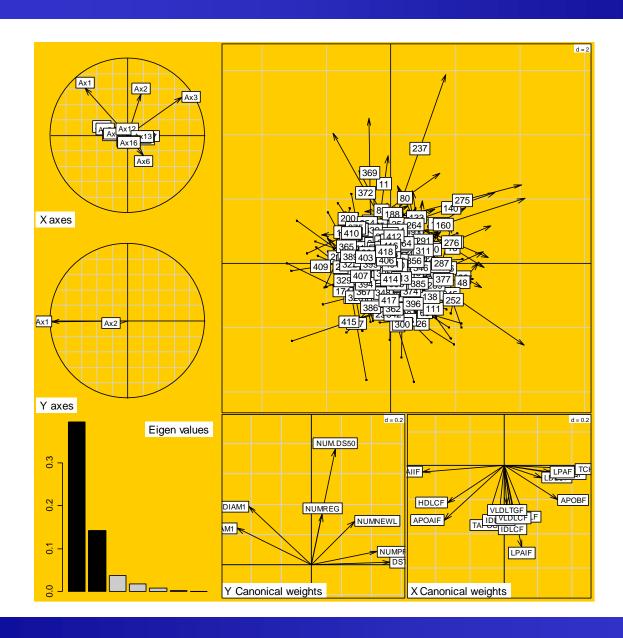




Principle

Randtest









Eigenvalues decomposition:

eig covar sdX sdY corr 1 0.3958632 0.6291766 1.794465 1.7269392 0.2030302 2 0.1430298 0.3781928 1.947764 0.9554333 0.2032247

Inertia & coinertia X (lipids):

inertia max ratio 1 3.220104 5.571867 0.5779219 12 7.013889 9.066556 0.7736001

Inertia & coinertia Y (angios):

inertia max ratio
1 2.982319 3.039098 0.9813171
12 3.895172 4.505455 0.8645457

RV:

0.02254131









ON MVA:





ON R:





ON THE CLINICAL TRIAL:

- The idea is to capitalize on the clinical knowledge of the evaluation criteria, their relationships,
- To build a model as narrow as possible from the data,