718-Assignment2

Group2 01/03/2020

1. Understanding the Data

The purpose of the report is to examine the relationship between the treatments and death rate of HIV infected people having TB. This analysis is centered around the datasets *TB_burden_countries* and *TB_outcomes*.

TB_burden_countries dataset records the data from year 2000-2018 for all the WHO countries under six regions. The dataset describes the incidence and mortality for various TB patients, the number of HIV positive and patients having MDR/RR TB (i.e. drug resistant TB). From this table, the focus is on **e_inc_num** and **e_mort_tbhiv_num** variables.

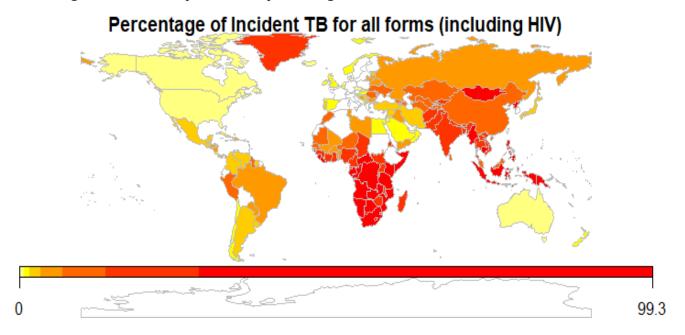
TB_outcomes dataset records the results of various treatment outcomes (if the patients were cured or not), the focus is on the **tbhiv_succ** variable.

Firstly, we created 2 dataframes by importing csv files, and tidying the datasets by filtering, cleaning and removing the NA (Blank) values (using *is.na(Variable_Name)* function).

Structure of Dataset:

By joining and aggregating along the countries and year we made a merged dataframe for our analysis. Following is the structure of the new dataset.

The following World Heat Mapshows the percentage of incident cases of Tuberculosis.



2. Summarizing the Variable Selection

a. Identification of variables

From the merged dataset, we have chosen two variables, *e_mort_tbhiv_num* and *tbhiv_succ*. Our assumption is that more successfull the treatments are, lesser will be the mortality rate.

#Measures of central tendency

##	Measure	tbhiv_succ	e_mort_tbhiv_num
## 1:	Mean	2066.141	2042.003
## 2:	Median	17	13
## 3:	Mode	0	0

#Measure of Dispersion:

##	Measure	tbhiv_succ	e_mort_tbhiv_num
## 1:	Variance	124300291.573	70296490.575
## 2:	Standard Deviation	11149.004	8384.3
## 3:	<pre>Inter-Quartile Range (IQR)</pre>	268	320
## 4:	Range	0 147605	0 89000

b. Assumptions for Normality Test and log Transformation e mort tbhiv num - normality check

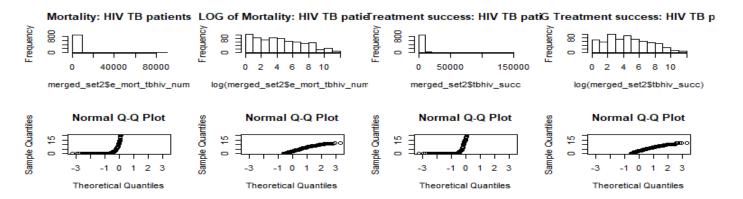
```
##
         median
                                   SE.mean CI.mean.0.95
                         mean
                                                                            std.dev
                                                                  var
## 1.300000e+01 2.042003e+03 2.741959e+02 5.381115e+02 7.029649e+07 8.384300e+03
##
       coef.var
                     skewness
                                  skew.2SE
                                               kurtosis
                                                             kurt.2SE
                                                                        normtest.W
## 4.105919e+00 6.407067e+00 4.005480e+01 4.699415e+01 1.470515e+02 2.556335e-01
##
     normtest.p
## 1.982412e-51
```

The skew.2SE(4.005480e+01) and kurt.2SE (1.470515e+02) values are >1, indicating skewness. Further confirming the results visually using histogram & Q-Q plot, we see that the data is right skewed.

tbhiv succ - normality check

```
##
                                   SE.mean CI.mean.0.95
                                                                           std.dev
         median
                        mean
                                                                  var
## 1.700000e+01 2.066141e+03 3.646114e+02 7.155525e+02 1.243003e+08 1.114900e+04
                                                             kurt.2SE
       coef.var
                    skewness
                                  skew.2SE
                                               kurtosis
                                                                        normtest.W
## 5.396051e+00 1.029775e+01 6.437803e+01 1.182106e+02 3.698983e+02 1.675072e-01
##
     normtest.p
## 2.936082e-53
```

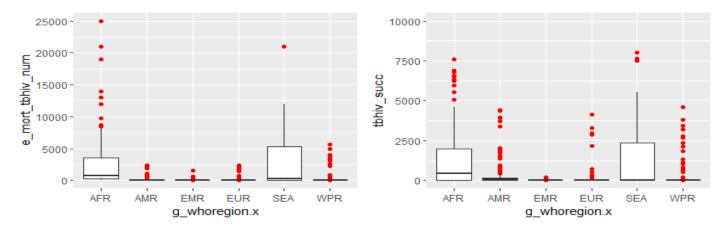
The skew.2SE(6.437803e+01) & kurt.2SE (3.698983e+02) values are >1, indicating skewness. Further confirming the results visually using histogram and Q-Q plot, we see that the data is right skewed.



Shapiro test

```
## Shapiro-Wilk normality test
## data: merged_set2$e_mort_tbhiv_num
## W = 0.25563, p-value < 2.2e-16</pre>
```

Since the p-value is too low we can conclude that the data is not normal. Upon further analysis of the skewness, there were many outliers identified as shown by the below box plots.



We did not find it appropriate to remove these outliers as the sample population of each region varies distinctly. Some regions have high mortality and HIV-TB incidence than others. This is the region for skewness and is necessary for our analysis.

c. Appropriate Correlation Test

Correlation is way of measuring the extent to which **e_mort_tbhiv_num** & **tbhiv_succ** are related, and the pattern of responses across variables. We have found the correlation on aggregated data by years.

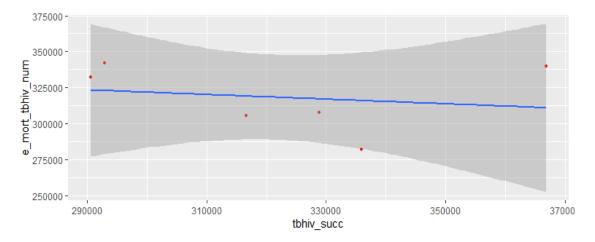
Spearman Correlation test Since our data is non-parametric we cannot perform Pearson's correlation test and therefore testing our assumption using Spearman test. ## [1] -0.2571429

From Spearman's test the Rho is -0.2571 which indicates negative correlation.

Kendall Correlation test

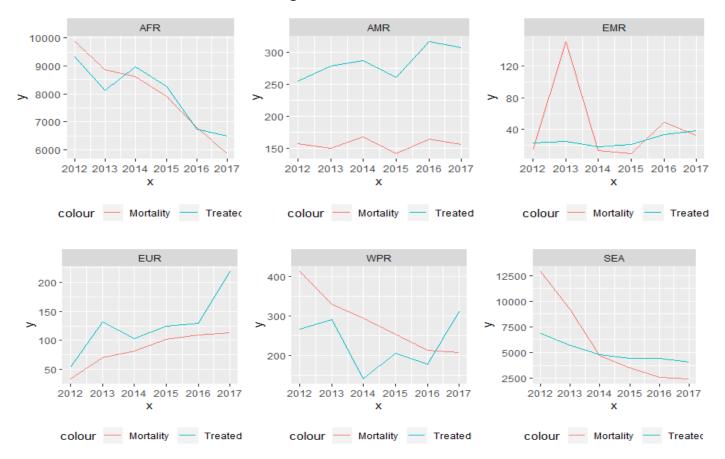
[1] -0.2

From Kendall's test p value is very small and true tau is not equal to zero. Thus, test statitics prove that $x(e_mort_tbhiv_num)$ & $y(tbhiv_succ)$ are slightly negatively correlated which confirms our *hypothesis*.



3. Analysis

To corroborate the negative correlation between the number of mortality in HIV patients with Tuberculosis, and the Number of Successful treatments in HIV patients with Tuberculosis, we determine the based on the 6 main sub-regions as follows:



4. Conclusion and Future Scope

- 1. Using Spearman's Correlation test we get co-relation of -0.2571 i.e Estimated number of deaths from TB in people who are HiV positive (aggregated e_mort_tbhiv_num) is negatively co-related with Treatment success for HIV positive TB cases (aggregated tbhiv_succ), which confirms ours asumption.
- 2. For region AFR (Africa), the mortality rate decreases with increasing treatment success.
- 3. For region AMR (America), the mortality rate is almost constant over time.
- 4. For EMR (East Mediterranean) region, mortality increases intially from 2011 to 2013 and decreases steeply over the years while treatment success slightly increased.
- 5. For EUR (European) regions, the mortality has been increasing due to increase in HIV and also, the treatment success rate has increased drastically. This, is the only region which doesn't have negative correlation as shown in graphs.
- 6. For WPR (West Pacific), it follows our assumption completely, Mortality rate has decreased drastically with high increase in Treatment success rate.
- 7. For SEA (South East Asian), mortality rate has decreased sharply also the treatment success rate has been decreasing gradually.
- 8. AS per our assumption, mortality rate decreases with increase in the treatment success rates, aggregated over the years as evident from our overall plot. This is because, as the technology has improved, TB is more likely to be cured than older times.