Repeated measures

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Outline

1 Repeated measures ANOVA

2 Example: Depression and Imipramin

3 Mixed-effects regression

Repeated measures ANOVA

Model with one repeated measurement factor

- When subjects are observed for more than two time points, we can model these data using a repeated measures ANOVA
- Data layout

	Time point						
Subject	1	2		j		n	
1	<i>y</i> 11	<i>y</i> 12		<i>Y</i> 1 <i>j</i>		y_{1n}	
2	<i>y</i> 21	<i>y</i> 22	• • •	У2ј	• • •	<i>Y</i> 2 <i>n</i>	
:	:					:	
i	y _{i1}	Yi2		Уij		Уin	
÷	:					:	
Ν	Y _{N1}	УN2		УNј		y_{Nn}	

Statistical model

• When we observe i = 1, ..., N subjects for j = 1, ..., n time points, we get

$$y_{ij} = \mu_0 + \tau_j + \upsilon_i + \varepsilon_{ij}$$

with

 μ_0 grand mean

 τ_i effect of time point j equal for all subjects

 v_i effect of subject *i* constant over time

 ε_{ij} error term for subject i at time point j

- Assumptions
 - $v_i \sim N(0, \sigma_v^2)$ i.i.d., σ_v^2 being the variance between subjects
 - $\varepsilon_{ij} \sim N(0, \sigma^2)$ i.i.d., σ^2 being the variance within subjects
 - ullet v_i and $arepsilon_{ij}$ are independent

Statistical model

$$y_{ij} = \mu_0 + \tau_j + \upsilon_i + \varepsilon_{ij}$$

response	grand mean	time effect	subject effect	residual
<i>y</i> ₁₁	μ_{0}	$ au_1$	v_1	$arepsilon_{11}$
<i>y</i> ₁₂	μ_{0}	$ au_2$	v_1	$arepsilon_{12}$
<i>y</i> 13	μ_{0}	$ au_3$	v_1	$arepsilon_{13}$
:	:	:	÷	:
<i>y</i> ₂₁	μ_{0}	$ au_1$	v_2	$arepsilon_{21}$
<i>y</i> ₂₂	μ_{0}	$ au_2$	v_2	ε_{22}
<i>y</i> 23	μ_0	$ au_3$	v_2	$arepsilon_{23}$
:	:	:	:	:
УNп	μ_0	$ au_n$	v_{N}	$\varepsilon_{\mathit{Nn}}$

Statistical model

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:	:	:	:	:
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<i>y</i> ₂₂	μ_0	$ au_2$	v_2	ε_{22}
<i>y</i> 23	μ_{0}	$ au_3$	v_2	ε_{23}
:	:	:	:	:
УNn	μ_0	$ au_n$	v_{N}	$\varepsilon_{\mathit{Nn}}$
$\sigma_v^2 + \sigma^2$			σ_v^2	σ^2

Mixed-effects regression

Model properties

For the model, we have

$$E(y_{ij}) = \mu_0 + \tau_j$$

$$Var(y_{ij}) = Var(\mu_0 + v_i + \tau_j + \varepsilon_{ij}) = \sigma_v^2 + \sigma^2$$

$$Cov(y_{ij}, y_{i'j}) = 0 \text{ for subjects } i \neq i'$$

$$Cov(y_{ij}, y_{ij'}) = \sigma_v^2 \text{ for observations } j \neq j'$$

The correlation between observations and subjects is

$$Corr(y_{ij}, y_{ij'}) = \frac{\sigma_v^2}{\sigma_v^2 + \sigma^2}$$

known as intraclass correlation (ICC)

Compound Symmetry

• For the covariance matrix of the observations for one subject we get the so-called compound symmetry structure

$$\mathbf{\Sigma}_{\mathbf{y}_i} = \sigma_v^2 \mathbf{1} \mathbf{1}' + \sigma^2 \mathbf{I} = egin{pmatrix} \sigma_v^2 + \sigma^2 & \sigma_v^2 & \sigma_v^2 & \cdots & \sigma_v^2 \ \sigma_v^2 & \sigma_v^2 + \sigma^2 & \sigma_v^2 & \cdots & \sigma_v^2 \ dots & \ddots & & dots \ \sigma_v^2 & \sigma_v^2 & \sigma_v^2 & \cdots & \sigma_v^2 + \sigma^2 \end{pmatrix}$$

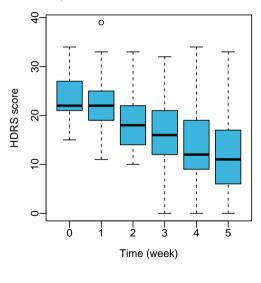
- The assumption of a compound symmetry structure is usually unrealistic for longitudinal data
- In general, successive observations are more strongly correlated than observations being farther apart (covariance is not constant)
- Variance increases with time, e.g., when some subjects are more responsive to a certain treatment than others

2 Example: Depression and Imipramin

Depression and Imipramin (Reisby et al., 1977)

- Reisby et al. (1977) studied the effect of Imipramin on 66 inpatients treated for depression
- Depression was measured with the Hamilton depression rating scale (HDRS)
- Additionally, the concentration of Imipramin and its metabolite Desipramin was measured in their blood plasma
- Patients were classified into endogenous and non-endogenous depressed
- Depression was measured weekly for 6 time points; the effect of the antidepressant was observed starting at week 2 for four weeks

Descriptive statistics



HDRS score

t	W0	W1	W2	W3	W4	W5
M	23.44	21.84	18.31	16.42	13.62	11.95
SD	4.53	4.70	5.49	6.42	6.97	7.22
n	61	63	65	65	63	58

Empirical correlation matrix of HDRS score

	W0	W1	W2	W3	W4	W5
Week 0	1	.49	.41	.33	.23	.18
Week 1	.49	1	.49	.41	.31	.22
Week 2	.41	.49	1	.74	.67	.46
Week 3	.33	.41	.74	1	.82	.57
Week 4	.23	.31	.67	.82	1	.65
Week 5	.18	.22	.46	.57	.65	1

Depression and Imipramin

```
dat
        <- read.table("data/reisby.dat", header = TRUE)</pre>
dat$id <- factor(dat$id)</pre>
dat$diag <- factor(dat$diag, levels = c("nonen", "endog"))</pre>
dat <- na.omit(dat) # drop missing values</pre>
# descriptive statistics
aggregate(hamd ~ week, dat, mean)
aggregate(hamd ~ week, dat, sd)
aggregate(hamd ~ week, dat, length)
cor(reshape(dat[, c("hamd", "id", "week")],
            direction = "wide", timevar = "week")[, 2:7],
    use = "pairwise.complete.obs")
```

Fitting repeated-measures ANOVA

```
# week needs to be a factor when computing an ANOVA
dat$week2 <- factor(dat$week)</pre>
contrasts(dat$week2) <- "contr.sum" # effect coding</pre>
summary(aov(hamd ~ week2 + Error(id/week2), dat))
# --> ??
library(ez) # "SPSS"-style
ezANOVA(data = dat, dv = hamd, wid = id, within = week2, type = 3)
# check data
ezDesign(data = dat, x = week, y = id, col = diag)
replications(hamd ~ week2 + id, dat)
```

Fitting repeated-measures ANOVA

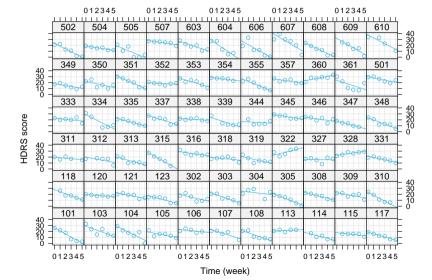
```
# remove IDs with missing observations
ids <- names(which(replications(hamd ~ id, dat)$id == 6))
dat_val <- dat[dat$id %in% ids, ]</pre>
# fit ANOVAs again
aov1 <- aov(hamd ~ week2 + Error(id/week2), dat_val)
summarv(aov1)
ez1 <- ezANOVA(data = dat_val, dv = hamd, wid = id, within = week2)
ez1$ANOVA
```

Fitting repeated-measures ANOVA

```
# How close can we get with a mixed-effects model?
library(lme4)
lme1 <- lmer(hamd ~ week2 + (1 | id), dat_val)</pre>
anova(lme1)
# calculate mean sum of squares for id by hand
sp <- attr(VarCorr(lme1)$id, "stddev")</pre>
se <- sigma(lme1)
se^2 + 6 * sp^2
```

Mixed-effects regression

Depression and Imipramin – individual processes



Alternative model with a constant time term

$$y_{ij} = \beta_0 + \beta_1 time + v_{0i} + \varepsilon_{ij}$$

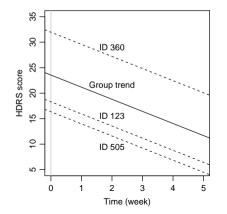
with $v_{0i} \sim N(0, \sigma_v^2)$ i.i.d., $\varepsilon_{ii} \sim N(0, \sigma^2)$ i.i.d., v_{0i} and ε_{ii} i.i.d.

response	intercept	time effect	time	subject effect	residual
<i>y</i> ₁₁	β_0	eta_{1}	0	v_1	$arepsilon_{11}$
<i>y</i> ₁₂	β_0	$eta_{ extbf{1}}$	1	v_1	$arepsilon_{12}$
<i>y</i> 13	eta_0	$eta_{ extbf{1}}$	2	v_1	$arepsilon_{13}$
:	:	:	:	:	:
<i>y</i> ₂₁	eta_{0}	eta_{1}	0	v_2	$arepsilon_{21}$
<i>y</i> ₂₂	β_0	eta_{1}	1	v_2	ε_{22}
<i>y</i> 23	eta_0	$eta_{ extbf{1}}$	2	v_2	$arepsilon_{23}$
:	:	:	:	:	:
УNn	eta_0	eta_1	n	v_N	$arepsilon_{ extsf{Nn}}$

Mixed-effects regression

Random intercept model

$$y_{ij} = \beta_0 + \beta_1 time + v_{0i} + \varepsilon_{ij}$$
 with $v_{0i} \sim N(0, \sigma_v^2)$ i.i.d., $\varepsilon_{ii} \sim N(0, \sigma^2)$ i.i.d., v_{0i} and ε_{ii} i.i.d.



- The estimated mean baseline HDRS score is $\hat{\beta}_0 = 23.55$
- However, the estimated standard deviation between patients is $\hat{\sigma}_v = 4.02$
- The mean improvement per week is $\hat{eta}_1 = -2.38$

Mixed-effects regression

Implied marginal covariance matrix

• For the three time points $t_{ii} = 0, 1, 2$, $\mathbf{Z}_i = \mathbf{1}'_{n_i}$ and $\mathbf{\Sigma}_v = \sigma_v^2$ we get

$$Cov(\mathbf{y}_i) = \mathbf{Z}_i \mathbf{\Sigma}_v \mathbf{Z}_i' + \sigma^2 \mathbf{I}_{n_i}$$

$$= \sigma_v^2 \mathbf{1}_{n_i} \mathbf{1}_{n_i}' + \sigma^2 \mathbf{I}_{n_i}$$

$$= \begin{pmatrix} \sigma_v^2 + \sigma^2 & \sigma_v^2 & \sigma_v^2 \\ \sigma_v^2 & \sigma_v^2 + \sigma^2 & \sigma_v^2 \\ \sigma_v^2 & \sigma_v^2 & \sigma_v^2 + \sigma^2 \end{pmatrix}$$

The random intercept model implies the compound symmetry structure

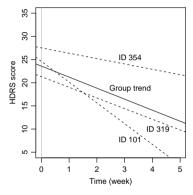
$$y_{ij} = \beta_0 + \beta_1 time + v_{0i} + v_{1i} time + \varepsilon_{ij}$$

with

$$\begin{pmatrix} v_{0i} \\ v_{1i} \end{pmatrix} \sim \mathcal{N} \begin{pmatrix} 0 \\ 0 \end{pmatrix}, \; \mathbf{\Sigma}_{v} = \begin{pmatrix} \sigma_{v_0}^2 & \sigma_{v_0 v_1} \\ \sigma_{v_0 v_1} & \sigma_{v_1}^2 \end{pmatrix}$$
 i.i.d.
$$\varepsilon_i \sim \mathcal{N}(\mathbf{0}, \, \sigma^2 \mathbf{I}_{n_i}) \text{ i.i.d.}$$

• Individual intercepts and slopes each have a unique variance component and correlate with $\varrho_{v_0v_1}=\frac{\sigma_{v_0v_1}}{\sigma_{v_0}\,\sigma_{v_1}}$

Model predictions



- The estimated mean baseline HDRS score is $\hat{\beta}_0 = 23.58$
- The estimated standard deviation between patients is $\hat{\sigma}_{v_0}=3.55$
- The mean improvement per week is $\hat{\beta}_1 = -2.38$
- The estimated standard deviation between patients is $\hat{\sigma}_{\upsilon_1}=1.44$
- The estimated correlation between individual intercepts and slopes is $\hat{\varrho}_{v_0v_1}=-0.28$
- Patients with higher (that means worse) baseline scores improve more strongly than patients with smaller baseline scores

Implied marginal covariance matrix

For the three time points $t_{ii} = 0, 1, 2$,

$$\mathbf{Z}_i = egin{pmatrix} 1 & 0 \ 1 & 1 \ 1 & 2 \end{pmatrix} \ \ \mathsf{und} \ \mathbf{\Sigma}_v = egin{pmatrix} \sigma_{v_0}^2 & \sigma_{v_0v_1} \ \sigma_{v_0v_1} & \sigma_{v_1}^2 \end{pmatrix}$$

we get

$$Cov(\mathbf{y}_{i}) = \mathbf{Z}_{i} \mathbf{\Sigma}_{v} \mathbf{Z}'_{i} + \sigma^{2} \mathbf{I}_{n_{i}}$$

$$= \begin{pmatrix} \sigma_{v_{0}}^{2} & \sigma_{v_{0}}^{2} + \sigma_{v_{0}v_{1}} & \sigma_{v_{0}}^{2} + 2\sigma_{v_{0}v_{1}} \\ \sigma_{v_{0}}^{2} + \sigma_{v_{0}v_{1}} & \sigma_{v_{0}}^{2} + 2\sigma_{v_{0}v_{1}} + \sigma_{v_{1}}^{2} & \sigma_{v_{0}}^{2} + 3\sigma_{v_{0}v_{1}} + 2\sigma_{v_{1}}^{2} \\ \sigma_{v_{0}}^{2} + 2\sigma_{v_{0}v_{1}} & \sigma_{v_{0}}^{2} + 3\sigma_{v_{0}v_{1}} + 2\sigma_{v_{1}}^{2} & \sigma_{v_{0}}^{2} + 4\sigma_{v_{0}v_{1}} + 4\sigma_{v_{1}}^{2} \end{pmatrix} + \sigma^{2} \mathbf{I}_{n_{i}}$$

hence, a more flexible covariance structure when compared to compound symmetry

Mixed-effects regression

Fitting mixed-effects models

```
# random intercept model
lme1 <- lmer(hamd ~ week + (1 | id), dat, REML=FALSE)</pre>
summarv(lme1)
# random slope model
lme2 <- lmer(hamd ~ week + (week | id), dat, REML=FALSE)</pre>
summary(lme2)
# model comparison
anova(lme1, lme2)
```

 Assumptions of repeated measures ANOVA are often too restrictive for measurements taken over time

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- Mixed-effects models allow for a more flexible variance-covariance structure

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- Mixed-effects models allow for a more flexible variance-covariance structure
- For unequal group sizes, repeated measures ANOVA is not defined
- (For within designs where assumptions of equal variance are more plausible, repeated measures ANOVA is well suited)

Exercise

- Expand the linear mixed-effects model two more than one factor
- Add diagnosis ("endogenous" vs. "non-endogenous") as additional between factor
- Test if this factor interacts with week using a likelihood-ratio test
- Use parametric bootstrapping to get a sampling distribution for your LRT statistic
- Plot the sampling distribution and add the empirical confidence interval

References

Reisby, N., Gram, L. F., Bech, P., Nagy, A., Petersen, G. O., Ortmann, J., Ibsen, I., Dencker, S. J., Jacobsen, O., Krautwald, O., Sondergaard, I., & Christiansen, J. (1977). Imipramine: Clinical effects and pharmacokinetic variability. *Psychopharmacology*, *54*, 263–272.