

Lecture 8: repeated measurements

Lecture notes and  code

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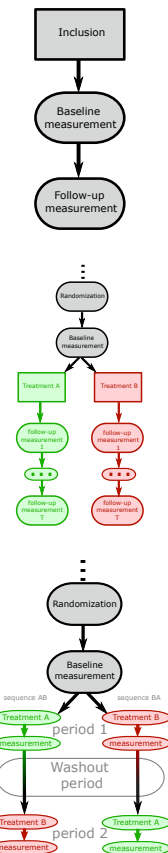
1 Study design


Repeated measurements arise when one (or several) variable(s) are measured at different occasions on the same experimental unit.

Typically a clinical score may be measured repeatedly over time on the **same** subject.

Classical designs involving repeated measurements:

- **test re-test study**: one group of subjects undergo a baseline and a follow-up measurement.
 - expect the same value at baseline and follow-up
 - used to assess the stability of a measurement device.
 - each individual is its own control.
- **longitudinal study**: two groups of subjects undergo a baseline measurement, get treatment, and then undergo several follow-up measurements.
 - assess the effect of a drug/exposure over time.
 - another group as control.
- **cross-over study**: one group of subjects undergo several follow-up measurements, each under a different treatment condition.
 - period effect can be controlled for using multiple sequences of treatment.
 - assess the stability/reliability of an instrument.
 - each individual is its own control.

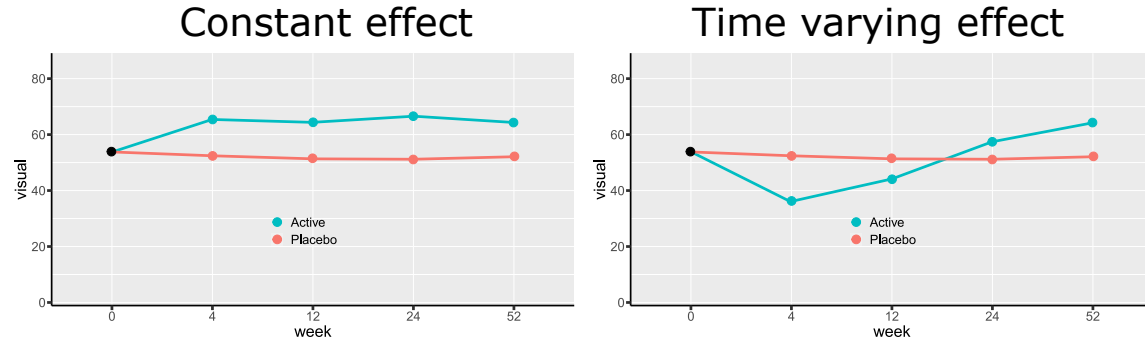


 In those designs, follow-up times are decided by design and the same for all patients (independence between data collection and outcome value).

2 Benefit of repeated measurements

Getting more **inside**:

- e.g. understanding the time dynamic of the treatment effect.
Can be constant, delayed, early detrimental and then beneficial, ...



Getting more **precise** estimates:

- remove biological variability by modeling within patient changes.

Example: consider an outcome $Y_i(t)$ (e.g. visual acuity) that is a function of time t and individual i :

$$Y_i(t) = \alpha(t) + \beta X_i + \gamma Z_i(t) + \varepsilon_i(t)$$

The outcome may depend:

- on time via $\alpha(t)$ (e.g. worse vision as a disease develops)
- on individual characteristics X_i (e.g. genes) that are assumed constant over time and have an effect β also constant over time.
- on instruments Z_i that may change over time (e.g. distance between eyes and eye chart) with an effect γ independent of time.
- other unknown reasons $\varepsilon_i(t)$

The change in outcome between baseline and time 4 is:

$$Y_i(4) - Y_i(0) = \alpha(4) - \alpha(0) + \gamma(Z_i(4) - Z_i(0)) + \varepsilon_i(4) - \varepsilon_i(0)$$

Working on the change:

- only removes covariate effects that are time independent
- when $\text{Var}[Y_i(4) - Y_i(0)] < \text{Var}[Y_i(4)]$, is a less variable outcome than working on the value at follow-up. Assuming constant variance, this means that¹: $\text{Cor}(Y_i(4), Y_i(0)) > 0.5$.

¹ $\text{Var}[Y_i(4) - Y_i(0)] = \text{Var}[Y_i(4)] + \text{Var}[Y_i(0)] - 2 * \sqrt{\text{Var}[Y_i(4)] \text{Var}[Y_i(0)]} \text{Cor}(Y_i(4), Y_i(0))$

3 Challenges with repeated measurements

A key difference between repeated measurements data and "usual" data is that

(A) **observations are no more independent:**

- observations belonging to the same individual are usually (strongly) correlated.
- most of statistical results require independence.

Intuitively: ignoring the dependence would be like running a study with new patients at each timepoint instead of the same patients followed over time.

- will lead to incorrect p-values as an incorrect sample size is used.
- will lead to sub-optimal estimates, as information can generally be shared between timepoints which reduces uncertainty².

(B) **Missing data** is another difficulty that arises with this type of design.

As the follow-up time increases, patients are more likely to quit or pause their participation in the study for reasons:

- unrelated to the outcome (**independent censoring**),
e.g. fatigue/inconvenience, forgotten appointments, loss of motivation, ...
- related to the outcome (**informative censoring**),
e.g. full recovery, worsening of the disease, treatment side effect, ...

Technical issues can also generate missing values for reasons :

- unrelated to the outcome (**independent censoring**),
e.g. breakdown of a measurement device
- related to the outcome (**informative censoring**),
e.g. detection limits of a device

Patients may also experience an event ending their participation (**competing events**):

- death, disease affecting the outcome (e.g. becoming blind in an incident)

Handling competing events and informative censoring is beyond the scope of this lecture, as they require specific methods:

⚠ complete case analysis will generally output incorrect results

(C) **Multiple testing** issues also frequently arise with repeated measurements:

- multiple parameters describing the treatment effect
(e.g. at week 4, 12, ...)
- multiple statistical approaches, depending on the type of model used
how it is specified
(e.g. multiple t-tests, mixed model with linear treatment effect, ...)

²e.g. when assuming a constant gender effect, observations from all timepoints are used to estimate this effect leading to a less variable estimate compared to using only information from a single timepoint.

4 Descriptive statistics with repeated measurements

Start by identifying a **level** at which we have **independent replicates**:

- e.g. observations are grouped within patients.
i.e. independent replicates of the vector of outcomes $\mathbf{Y} = (Y(0), Y(4), Y(12), Y(24), Y(52))$.

Recommended descriptive statistics include:

- overview of the data with a spaghetti plot
- summary statistics at each timepoint like median, quantiles at each time
- correlation across repetitions
- missing data patterns
percentage of missing data (per group) across timepoints.

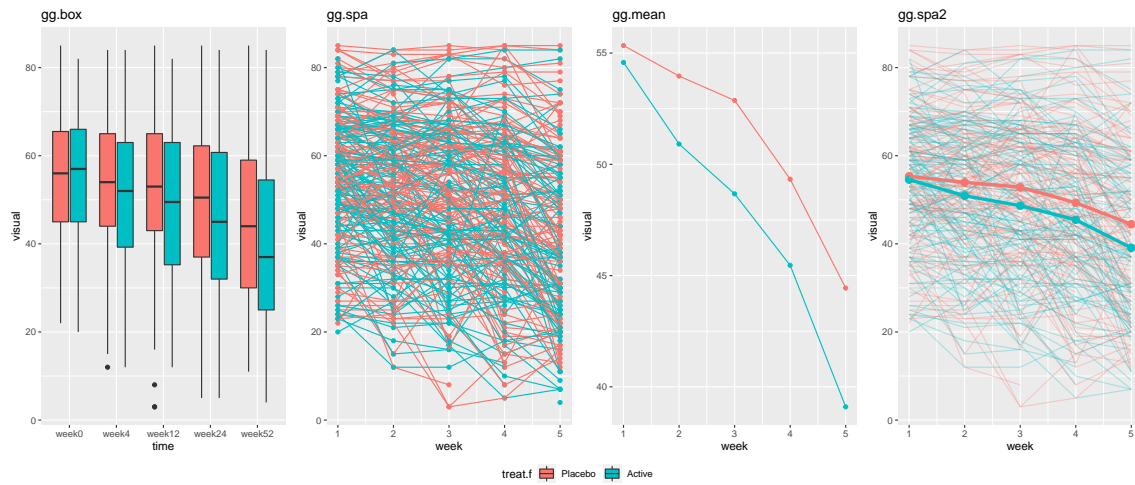


Figure 1: Boxplot (left panel), spaghetti plot (middle left panel), mean plot (middle right panel), and combination of the two (middle panel).

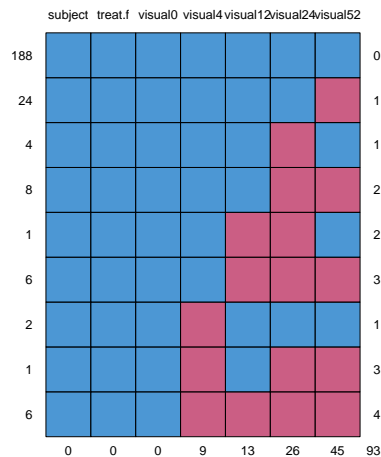


Figure 2: Missing data patterns, each row corresponding to a pattern. Blue indicates observed data and red missing data. The number on the left (resp. right) is number of observations (resp. missing data) in a pattern.

5 Statistical analysis

There are several valid³ ways to analyze repeated measurements. Two are presented:

- a **univariate approach**: simple to implement. Especially relevant when one is interested in a single timepoint and there is no missing data (or there is only independent censoring and the sample size is large).
- a **multivariate approach**: more complex to implement, interpret, and report but can better handle censoring or unbalanced cross-over designs. It can also use parsimonious models when analyzing multiple timepoints, e.g. to obtain a concise representation of the time dynamic of the treatment effect.

Example: to simplify, we will describe these methods when applied to a longitudinal study, with two-arms: active ($G=1$) vs. placebo ($G=0$), randomized, and no covariates. We will denote by:

- $\alpha_g(t)$ the expected outcome value at time t in the arm g .
- $\sigma_g^2(t)$ the variance of outcome at time t in the arm g .
- $\rho_g(t_1, t_2)$ the correlation between outcome values from the same subject at time t_1 and t_2 in the arm g .

5.1 Univariate approach

1. Before collecting the data, we know that the interest lies in the treatment effect at a specific timepoint:

- e.g. timepoint ($t=52$) to assess the long-term treatment effect

2. We will then typically be interested in compare the change in outcome from baseline between two treatment groups:

- e.g. $\Delta Y(52) = Y(52) - Y(0)$ in the Active vs. Placebo group.

⚠ doing so will implicitly perform a complete case analysis,
i.e. exclude individuals with a missing value at one of the two timepoints

3. We make a graphical display of the data

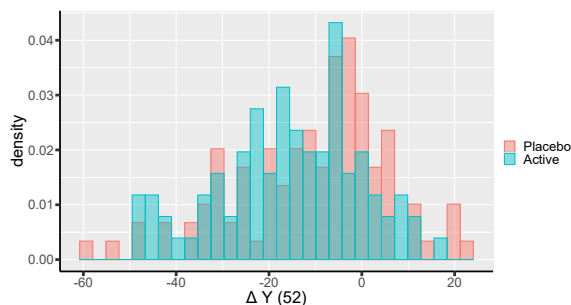


Figure 3

³in the sense unbiased under reasonable assumptions

4. If the mean provides a reasonable summary of the treatment effect, we can perform a two-sample t-test on the change in outcome.

- in our example the corresponding statistical model is:

$$\begin{aligned}\Delta Y(52)|G=0 &\sim \mathcal{N}(\mu_0, \tau_0) \\ \Delta Y(52)|G=1 &\sim \mathcal{N}(\mu_1, \tau_1) \\ \text{where for } g \in \{0,1\} \quad \mu_g &= \alpha_g(52) - \alpha_g(0) \\ \text{and} \quad \tau_g &= \sigma_g^2(52) + \sigma_g^2(0) - 2\sigma_g(52)\sigma_g(0)\rho_g(0,52)\end{aligned}$$


(normality ease the description of the model but is not a requirement)

We are then testing the null hypothesis of no treatment effect on the mean:

$$\mu_1 - \mu_0 = 0$$

⚠ if this approach is performed at multiple timepoints to find the timepoint at which the treatment effect is the strongest, the procedure need to be adjusted for multiple comparisons.

Note that because of missing values, the patients kept in the complete case analysis may not be the same at all timepoints.

⚠ Using a standard linear model, e.g. `lm` in , instead of a t-test leads to assume no treatment effect on the variance $\sigma_1^2 = \sigma_0^2$.

5.2 Multivariate approach

This approach exploits properties of the multivariate normal distribution.

1. Before collecting the data, we either know that the interest lies in the treatment effect at **a specific timepoint** or impose **a specific shape** to the treatment effect.

- e.g. timepoint ($t = 52$)
- e.g. the effect of the treatment is proportional to the number of weeks from baseline.

2. Drop-out prevents us to observe the outcome at follow-up times for all individuals.

For individual i belonging to group g , we would like to **guess the missing follow-up values** (e.g. $Y_i(52)$) based on:

- a) the observed values for this individual at other/earlier timepoints (e.g. $Y_i(0)$)
- b) the average outcome in the population at the missing timepoints (e.g. $\alpha_g(52)$)
- c) the correlation between the values at missing and observed timepoints (e.g. $\rho_g(0,52)$) in the population will determine how much weight is given to a).

Specific cases:

- No correlation: our best guess is b), i.e. a) is not used.
- Perfect correlation: our best guess is b) corrected by how much a) deviates from the population mean.

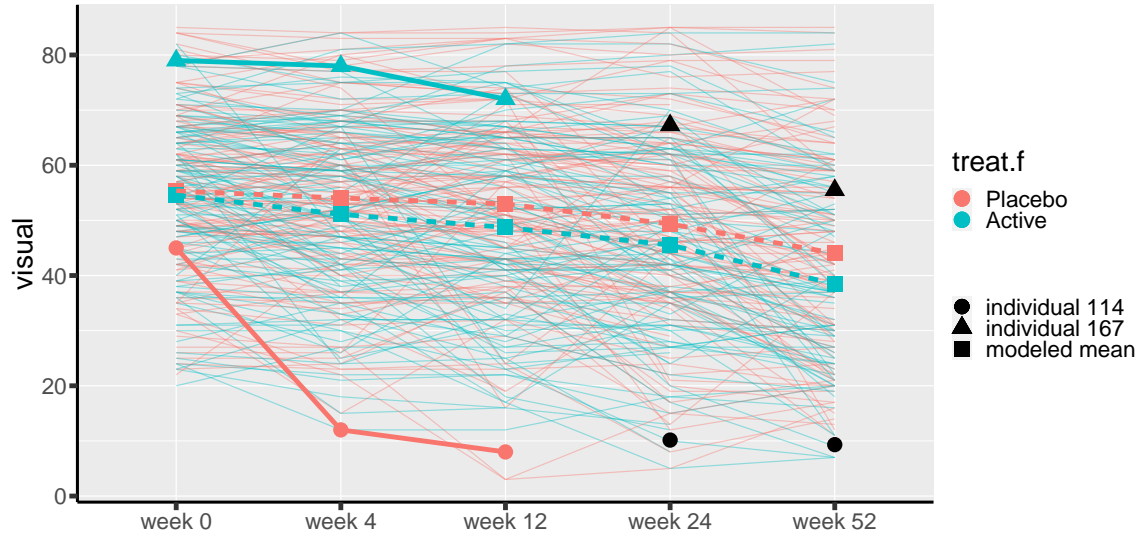


Figure 4: Illustration of what we would like to perform in step 2. The black dots and triangles are our "guesses". Compared to the other figures, 5 timepoints are used instead of 3 to better visualize the correlation over time.

- restricting to timepoints 0 and 52 weeks, we would guess for individual i in arm $g \in \{0, 1\}$:

$$\hat{Y}_i(52) = \alpha_g(52) + \rho_g(0, 52) \frac{\sigma_g(52)}{\sigma_g(0)} (Y_i(0) - \alpha_g(0)) \quad (1)$$

Looking more closely at [Equation 1](#), one can see that it is equivalent to a linear regression with as:

outcome: $Y_i(52)$, i.e. timepoint(s) with missing values

covariate: $Y_i(0)$, i.e. timepoint(s) with observed values

intercept: $\alpha_g(52) - \rho_g(0, 52) \frac{\sigma_g(52)}{\sigma_g(0)} \alpha_g(0)$

slope: $\rho_g(0, 52) \frac{\sigma_g(52)}{\sigma_g(0)}$.

We can visualize the corresponding data with a simple scatterplot:

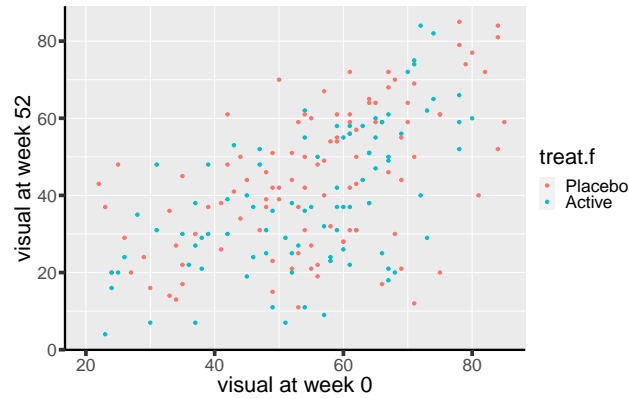


Figure 5

3. The **mixed model** can be viewed as a convenient way to guess the missing values (across several missing data patterns) and account for the uncertainty about the guesses when comparing the groups. The mixed model requires more than modeling than the t-test, as the mean, variance, and correlation over time are used to handle missing values.

- with only two timepoints, the statistical model for the control group is:

$$\begin{bmatrix} Y(0)|G=0 \\ Y(52)|G=0 \end{bmatrix} \sim \mathcal{N} \left(\begin{bmatrix} \alpha_0(0) \\ \alpha_0(52) \end{bmatrix}, \begin{bmatrix} \sigma_0^2(0) & \sigma_0(0)\sigma_0(52)\rho_0(0,52) \\ \sigma_0(0)\sigma_0(52)\rho_0(0,52) & \sigma_0^2(52) \end{bmatrix} \right)$$

while for the active group it is:

$$\begin{bmatrix} Y(0)|G=1 \\ Y(52)|G=1 \end{bmatrix} \sim \mathcal{N} \left(\begin{bmatrix} \alpha_1(0) \\ \alpha_1(52) \end{bmatrix}, \begin{bmatrix} \sigma_1^2(0) & \sigma_1(0)\sigma_1(52)\rho_1(0,52) \\ \sigma_1(0)\sigma_1(52)\rho_1(0,52) & \sigma_1^2(52) \end{bmatrix} \right)$$

⚠ In presence of informative censoring, it is critical that the mean, variance, and correlation structure over time is well-specified if we want to correctly "guess" and therefore avoid bias.

There are several equivalent ways to **parametrize** the model. An intuitive one is to model the mean at each timepoint in each group with one parameter (e.g. $\alpha_0(0)$, $\alpha_0(52)$, $\alpha_1(0)$, $\alpha_1(52)$). Most software use a different parametrisation where:

- the mean for reference group and timepoint is selected, e.g. α for the control group at time 0
- other means are modeled relative to this reference, e.g. the active group at time 0 has mean $\alpha + \beta$. This makes it easy to test effects like group effects ($\beta = 0$ instead of $\alpha_0(0) - \alpha_1(0) = 0$ in the other parametrisation).

- with only two timepoints, we will reparametrize the model as:

$$\begin{bmatrix} Y(0)|G=0 \\ Y(52)|G=0 \end{bmatrix} \sim \mathcal{N} \left(\begin{bmatrix} \alpha \\ \alpha + \beta_{time} \end{bmatrix}, \begin{bmatrix} \sigma_0^2(0) & \sigma_0(0)\sigma_0(52)\rho_0(0,52) \\ \sigma_0(0)\sigma_0(52)\rho_0(0,52) & \sigma_0^2(52) \end{bmatrix} \right)$$

while for the active group it is:

$$\begin{bmatrix} Y(0)|G=1 \\ Y(52)|G=1 \end{bmatrix} \sim \mathcal{N} \left(\begin{bmatrix} \alpha + \beta_{group} \\ \alpha + \beta_{time} + \beta_{group} + \beta_{interaction} \end{bmatrix}, \begin{bmatrix} \sigma_1^2(0) & \sigma_1(0)\sigma_1(52)\rho_1(0,52) \\ \sigma_1(0)\sigma_1(52)\rho_1(0,52) & \sigma_1^2(52) \end{bmatrix} \right)$$

where $\beta_{interaction}$ encodes the group difference at follow-up.

4. We will then **test null hypothesis** (same as in the univariate approach), i.e. no treatment effect on the mean change from baseline. This will involve a specific combination of parameters that depends on the parametrization of the model.

- Depending on the parametrisation we will either test $(\alpha_1(52) - \alpha_1(0)) - (\alpha_0(52) - \alpha_0(0)) = 0$ or $\beta_{interaction} = 0$

6 In R

6.1 Data management

For illustration, we will use only part of the dataset presented during the lecture:

```
## load dataset
data(armd.wide, package = "nlmeU")
## only keep specific columns
keep.col <- c("subject","treat.f",
              "visual0","visual4","visual12","visual24","visual52")
dfW <- armd.wide[,keep.col,drop=FALSE]
## display the first rows
head(dfW,5)
```

	subject	treat.f	visual0	visual4	visual12	visual24	visual52
1	1	Active	59	55	45	NA	NA
2	2	Active	65	70	65	65	55
3	3	Placebo	40	40	37	17	NA
4	4	Placebo	67	64	64	64	68
5	5	Active	70	NA	NA	NA	NA

Converting a dataset from wide to long format:

```
## convert to long format
dfL <- reshape(dfW, direction = "long", idvar = "subject",
               varying = paste0("visual",c(0,4,12,24,52)),
               timevar = "week", v.names = "visual")
## re-order dataset by subject
dfL <- dfL[order(dfL$subject),]
## remove row names
rownames(dfL) <- NULL
## character version of the time variable
dfL$time <- factor(dfL$week, levels = 1:5,
                  labels = paste0("week",c(0,4,12,24,52)))
## display the first rows
head(dfL,6)
```

	subject	treat.f	week	visual	time
1	1	Active	1	59	week0
2	1	Active	2	55	week4
3	1	Active	3	45	week12
4	1	Active	4	NA	week24
5	1	Active	5	NA	week52
6	2	Active	1	65	week0

Converting a dataset from long to wide format:

```
## easier to use when only a single time column
## this is why column week is removed
dfW.bis <- reshape(dfL[,c("subject","treat.f","visual","time")],
  direction = "wide",
  idvar = c("subject","treat.f"),
  timevar = "time",
  v.names = "visual"
)
head(dfW.bis,5)
```

Complete case: restrict dataset to patients having full data over all timepoints:

```
dfW.CC <- dfW[rowSums(is.na(dfW))==0,]
dfL.CC <- dfL[dfL$subject %in% dfW.CC$subject,]
```

6.2 Descriptive statistics (numbers)

Computing summary statistics, in the long format, stratified on a variable (e.g. at each timepoint):

- using base R functions like `tapply`:

```
tapply(X = dfL$treat.f=="Active", ## "outcome" variable
  INDEX = dfL$time, ## "grouping" variable
  FUN = mean) ## function to apply
```

```
      week0      week4      week12      week24      week52
0.5041667 0.5041667 0.5041667 0.5041667 0.5041667
```

```
## using your own function by explaining what to do to a generic x
tapply(X = dfL$treat.f=="Active",
  INDEX = dfL$week,
  FUN = function(x){100*mean(x)})
```

```
      1      2      3      4      5
50.41667 50.41667 50.41667 50.41667 50.41667
```

- using pre-defined functions:

```
library(LMMstar)
dfS <- summarize(visual ~ week + treat.f, data = dfL, na.rm = TRUE)
dfS
```

	outcome	week	treat.f	observed	missing	mean	sd	min	median	max
1	visual	1	Placebo	119	0	55.33613	15.00129	22	56.0	85
2	visual	2	Placebo	117	2	53.96581	15.90973	12	54.0	84
3	visual	3	Placebo	117	2	52.87179	17.20091	3	53.0	85
4	visual	4	Placebo	112	7	49.33036	18.51242	5	50.5	85
5	visual	5	Placebo	105	14	44.43810	18.53683	11	44.0	85
6	visual	1	Active	121	0	54.57851	14.82270	20	57.0	82
7	visual	2	Active	114	7	50.91228	15.81114	12	52.0	84
8	visual	3	Active	110	11	48.67273	17.47665	12	49.5	82
9	visual	4	Active	102	19	45.46078	18.08050	5	45.0	84
10	visual	5	Active	90	31	39.10000	18.40069	4	37.0	84

Correlation matrix:

```
cor(dfW[,paste0("visual",c(0,4,12,24,52))], use = "pairwise")
```

	visual0	visual4	visual12	visual24	visual52
visual0	1.0000000	0.8543813	0.7442610	0.6611932	0.5593174
visual4	0.8543813	1.0000000	0.8425869	0.7387614	0.6135206
visual12	0.7442610	0.8425869	1.0000000	0.8220768	0.7021200
visual24	0.6611932	0.7387614	0.8220768	1.0000000	0.8355586
visual52	0.5593174	0.6135206	0.7021200	0.8355586	1.0000000

Missing data pattern:

```
library(mice)
md.pattern(dfW, plot = FALSE)
```

	subject	treat.f	visual0	visual4	visual12	visual24	visual52
188	1	1	1	1	1	1	0
24	1	1	1	1	1	1	0
4	1	1	1	1	1	0	1
8	1	1	1	1	1	0	0
1	1	1	1	1	0	0	1
6	1	1	1	1	0	0	0
2	1	1	1	0	1	1	1
1	1	1	1	0	1	0	0
6	1	1	1	0	0	0	0
	0	0	0	9	13	26	45

6.3 Descriptive statistics (graph)

Boxplot plot (see left panel of [Figure 1](#)):

```
library(ggplot2)
gg.box <- ggplot(dfL, aes(x = time, y = visual, fill = treat.f))
gg.box <- gg.box + geom_boxplot()
gg.box
```

Spaghetti plot (see middle left panel of [Figure 1](#)):

```
gg.spa <- ggplot(dfL, aes(x = week, y = visual,
  group = subject, color = treat.f))
gg.spa <- gg.spa + geom_point() + geom_line()
gg.spa
```

Mean plot (see middle right panel of [Figure 1](#)):

```
gg.mean <- ggplot(dfS, aes(x = week, y = mean,
  group = treat.f, color = treat.f))
gg.mean <- gg.mean + geom_point() + geom_line() + ylab("visual")
gg.mean
```

Combine spaghetti and mean plot (see right panel of [Figure 1](#)):

```
gg.spa2 <- ggplot(mapping = aes(x = week, color = treat.f))
gg.spa2 <- gg.spa2 + geom_line(data = dfL, alpha = 0.3,
  aes(y = visual, group=subject))
gg.spa2 <- gg.spa2 + geom_point(data = dfS, aes(y = mean), size = 3)
gg.spa2 <- gg.spa2 + geom_line(data = dfS, aes(y = mean, group = treat.f),
  size = 1.5)
gg.spa2
```

Density plot (see [Figure 3](#)):

```
dfW$change52 <- dfW$visual52 - dfW$visual0
gg.dens <- ggplot(dfW, aes(change52, color = treat.f, fill = treat.f))
gg.dens <- gg.dens + geom_histogram(alpha = 0.45, aes(y=..density..),
  position = "identity")
gg.dens <- gg.dens + xlab("\u0394 Y (52)")
gg.dens
```

Scatterplot (see [Figure 5](#)):

```
gg.sca <- ggplot(dfW, aes(x=visual0, y=visual52,
  group = treat.f, color = treat.f))
gg.sca <- gg.sca + geom_point()
gg.sca <- gg.sca + xlab("visual at week 0") + ylab("visual at week 52")
gg.sca
```

6.4 Statistical analysis: univariate

Group comparisons using t-tests:

```
## compute change from baseline
dfW.CC$dvisual4 <- dfW.CC$visual4 - dfW.CC$visual0
dfW.CC$dvisual52 <- dfW.CC$visual52 - dfW.CC$visual0
## divide dataset according to treatment group
dfW.CCa <- dfW.CC[dfW.CC$treat.f == "Active",]
dfW.CCp <- dfW.CC[dfW.CC$treat.f == "Placebo",]
## difference in change at time 4 between groups
tt4 <- t.test(dfW.CCa$dvisual4, dfW.CCp$dvisual4)
## difference in change at time 12 between groups
tt52 <- t.test(dfW.CCa$dvisual52, dfW.CCp$dvisual52)
tt52
```

Welch Two Sample t-test

```
data: dfW.CCa$dvisual52 and dfW.CCp$dvisual52
t = -1.7781, df = 184.09, p-value = 0.07704
alternative hypothesis: true difference in means is not equal to 0
95 percent confidence interval:
 -8.7909377  0.4566924
sample estimates:
mean of x mean of y
-15.12791 -10.96078
```

Adjustment for multiple comparisons:

```
p.adjust(c(tt4$p.value, tt52$p.value), method = "bonferroni")
```

```
[1] 0.06081505 0.15408670
```

T-test in a regression model:

```
e.tt <- lmm(dvisual52 ~ treat.f, repetition =~treat.f|subject,
  structure = "IND", data = dfW.CC)
model.tables(e.tt) ## short version of summary(e.tt)
```

	estimate	se	df	lower	upper	p.value
(Intercept)	-10.96	1.64	101	-14.22	-7.699	1.42e-09
treat.fActive	-4.17	2.34	184	-8.79	0.457	7.70e-02

6.5 Statistical analysis: multivariate

Fit a mixed model:

```
library(LMMstar)
e.lmm <- lmm(visual ~ time*treat.f, ## model for the mean
  repetition = ~time|subject, ## structure of the data
  structure = "UN", ## model for the variance
  data = dfL) ## data
logLik(e.lmm)
```

```
[1] -4151.224
```

Estimated model parameters for the mean structure:

```
model.tables(e.lmm)
```

	estimate	se	df	lower	upper	p.value
(Intercept)	55.336	1.367	238	52.64	58.0289	0.00e+00
timeweek4	-1.281	0.765	231	-2.79	0.2254	9.52e-02
timeweek12	-2.352	1.091	220	-4.50	-0.2007	3.23e-02
timeweek24	-6.020	1.318	212	-8.62	-3.4211	8.42e-06
timeweek52	-11.311	1.599	193	-14.46	-8.1576	2.70e-11
treat.fActive	-0.758	1.925	238	-4.55	3.0348	6.94e-01
timeweek4:treat.fActive	-2.204	1.087	232	-4.35	-0.0617	4.38e-02
timeweek12:treat.fActive	-3.508	1.560	222	-6.58	-0.4330	2.55e-02
timeweek24:treat.fActive	-3.070	1.895	216	-6.81	0.6661	1.07e-01
timeweek52:treat.fActive	-4.866	2.317	199	-9.44	-0.2963	3.70e-02

Extract reference level (i.e. what the (Intercept) corresponds to)

```
levels(e.lmm)$reference
```

```
time    treat.f
"week0" "Placebo"
```

Testing multiple model parameters:

```
anova(e.lmm)
```

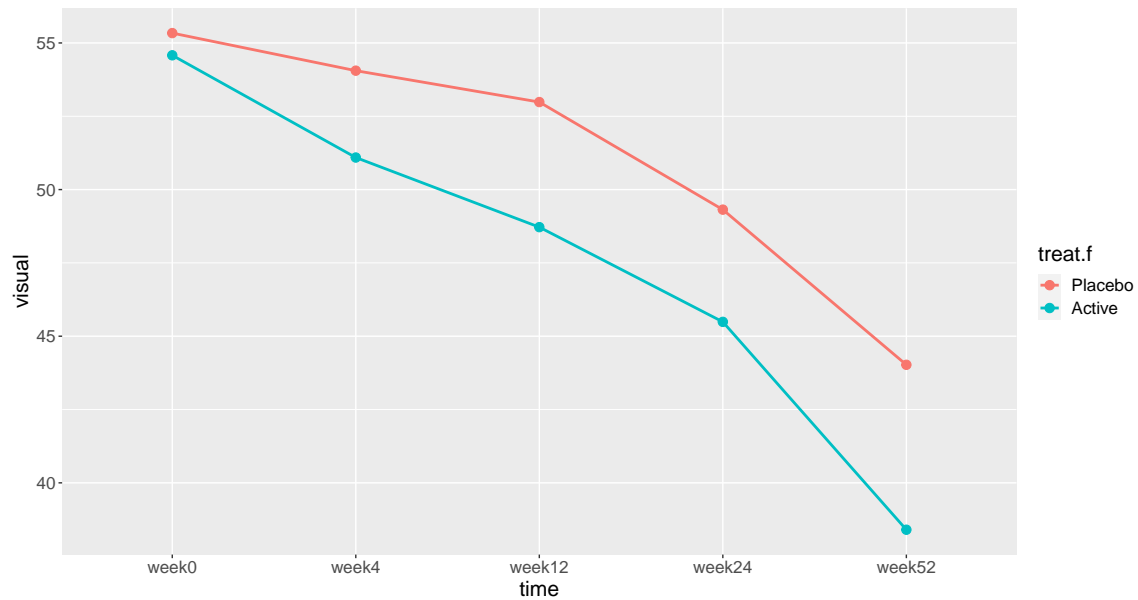
```
          ** mean coefficients **

- F-test

      statistic df.num df.denom      p.value
time      13.7048511      4 202.3355 6.600918e-10
treat.f      0.1548786      1 238.0257 6.942684e-01
time:treat.f  1.8397879      4 207.1469 1.224733e-01
```

Display of the model fit:

```
plot(e.lmm, ci = FALSE)
```



Estimated mean at each timepoint and in each group:

```
dummy.coef(e.lmm)
```

	time	treat.f	estimate	se	df	lower	upper
1	week0	Placebo	55.33613	1.366923	238.0249	52.64332	58.02895
2	week4	Placebo	54.05485	1.460500	234.7088	51.17749	56.93222
3	week12	Placebo	52.98448	1.588206	232.4446	49.85536	56.11359
4	week24	Placebo	49.31611	1.721041	223.2780	45.92455	52.70768
5	week52	Placebo	44.02519	1.767665	210.6591	40.54061	47.50977
6	week0	Active	54.57851	1.355579	238.0266	51.90805	57.24898
7	week4	Active	51.09301	1.456179	238.4434	48.22439	53.96163
8	week12	Active	48.71891	1.597738	240.5417	45.57157	51.86626
9	week24	Active	45.48891	1.748162	234.4195	42.04479	48.93302
10	week52	Active	38.40129	1.835338	224.4565	34.78459	42.01799

Variance and correlation estimates:

```
confint(e.lmm, effects = c("correlation","variance"))
```

	estimate	lower	upper
sigma	14.911	13.623	16.321
k.week4	1.066	0.997	1.140
k.week12	1.158	1.061	1.264
k.week24	1.246	1.129	1.377
k.week52	1.261	1.123	1.416
rho(week0,week4)	0.857	0.819	0.888
rho(week0,week12)	0.739	0.674	0.793
rho(week0,week24)	0.664	0.583	0.732
rho(week0,week52)	0.517	0.409	0.611
rho(week4,week12)	0.840	0.797	0.874
rho(week4,week24)	0.749	0.684	0.802
rho(week4,week52)	0.591	0.494	0.675
rho(week12,week24)	0.825	0.777	0.863
rho(week12,week52)	0.698	0.620	0.763
rho(week24,week52)	0.840	0.793	0.877

Note: estimates and confidence intervals for sigma, k, rho have been back-transformed.