Practical session on logistic regression

2023-2024

1 Study of Premature Birth Data

As part of a study on prenatal factors related to premature delivery in women already in preterm labor, there are 13 explanatory variables for 388 women included in the study.

Table 1 – Variables available for childbirth data

Comment

in weeks

1-4

gnancies

number of previous pregnancies in-

number of previous full-term pre-

cluding the current one

The response variable (PREMATURE) is premature delivery (1=yes; 0=no).

The data contain the following variables:

Description

pregnancy period

gravidity

parity

gestational age at study entry

 \overline{Var}

GEST

STRAT

GRAVID

PARIT

DILATE	cervical dilation	in cm
EFFACE	cervical effacement	in %
CONSIS	cervical consistency	1: soft
		2 : medium
		3: firm
CONTR	presence of contractions	1 : yes
		2 : no
MEMBRAN	membranes	1 : ruptured
		2 : not ruptured
		3 : uncertain
AGE	mother's age	in years
AUL	mounci a age	III years

DIAB diabetes issue 1: present
2: absent

TRANSF transfer to a specialized hospital 1: yes
2: no

GEMEL pregnancy type 1: single
2: multiple

The objective is to define the predictive factors for premature delivery (Y). For each considered model, denote π as the probability of premature delivery given the variables X_1, \dots, X_p included.

1. Load the dataset into a table prema, obtain the summary, and check that nominal qualitative variables are indeed factors (necessary for logistic regression). If needed, use the as.factor() command.

```
load("prema.RData")
str(prema)
prema$DIAB = as.factor(prema$DIAB)
attach(prema)
```

Study of a Binary Variable

- 2. Construct the contingency table PREMATURE/GEMEL.
- 3. Calculate the probability of premature delivery for a multiple pregnancy.
- 4. Fit the model explaining premature delivery by pregnancy type GEMEL (model1).

```
model1 <- glm(PREMATURE ~ GEMEL, family = "binomial", data = prema)
summary(model1)</pre>
```

5. Is the coefficient associated with the variable GEMEL significant? Retrieve the odds ratio associated in two different ways.

Study of a Quantitative Variable

- 6. What is the average cervical effacement in patients who delivered prematurely? In others? (You can use the by function for this.)
- 7. Fit the model explaining premature delivery by cervical effacement (model2).
- 8. Express $\pi(x) = P(PREMATURE = 1/EFFACE = x)$ as a function of x and write an R function to perform this calculation.
- 9. What is the probability of premature delivery when the cervix is effaced at 60%?
- 10. Use the previously written function to calculate the π score associated with the women in the study. Compare this score to the results returned by the following commands:

```
pi_hat = predict(model2, prema, type = "response")
model2$fitted.values
```

11. Create a graph illustrating the dependence between cervical effacement and premature delivery. For example, plot two densities corresponding to the score distributions in the two groups using the following commands:

```
library(lattice)
gS = densityplot(~pi_hat, data = data.frame(prema, pi_hat), groups = PREMATURE,
    plot.points = FALSE, ref = TRUE, auto.key = list(columns = 1))
print(gS)
```

Study of Multiple Explanatory Variables

12. Fit the model explaining premature delivery by pregnancy type and cervical effacement (model3):

```
model3 <- glm(PREMATURE ~ GEMEL + EFFACE, family = "binomial",
    data = prema)
summary(model3)</pre>
```

13. Compare the two models model2 and model3 using the likelihood ratio test:

```
anova(model2, model3, test = "LRT")
```

- 14. Which model do you choose?
- 15. Estimate the complete model (fullmodel):

```
\ln\left(\frac{\pi}{1-\pi}\right)=\beta_0+\beta_1X_1+\cdots+\beta_pX_p, fullmodel <- glm(PREMATURE ~ ., family = "binomial", data = prema) summary(fullmodel)
```

- 16. Evaluate the significance of each coefficient in fullmodel. Use the step function for automatic variable selection in the model and interpret. Call reduced the model reduced to the selected variables. Compare the two models (full and reduced).
- 17. Interpret the coefficients of reduced. What are the risk factors for premature delivery? What are the protective factors?

 $\underline{\text{Hint}}$:

```
exp(cbind(OR=coef(reduced), confint(reduced)))
```

Evaluation of the Decision Rule

- 18. Calculate the predicted values of the probabilities of interest using the predict function or the fitted.values field of reduced. Name this new score S. Visualize and comment on the prediction quality (e.g., plot boxplots).
- 19. Calculate the confusion matrix for a decision threshold of 0.5.
- 20. Arbitrarily decide to assign all values with an S score higher than the score of the last row to group 1 and the others to group 0. Then calculate sensitivity and specificity for this threshold.
- 21. Plot the ROC curve associated with the S score using the prediction and performance functions from the ROCR package.

```
library(ROCR)
pred = prediction(S, prema$PREMATURE)
perf = performance(pred, "tpr", "fpr")
plot(perf)
```

22. Explore the objects that allow you to calculate the ROC curve:

```
perf@x.values[[1]]
perf@y.values[[1]]
perf@alpha.values[[1]]
```

23. Calculate the area under the ROC curve using the following commands :

```
AUC = performance(pred, "auc") attr(AUC, "y.values")[[1]]
```

24. Calculate the threshold closest to the ideal point for the ROC curve related to the S score. Calculate the new confusion matrix associated with this decision threshold.