# Effects of Different Pain Relievers and Dosages on Cognitive Retention

**Exploratory Data Analysis (EDA)** 

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#### 1 Introduction

## 1.1 Relevant Background

Pain can make everyday tasks harder, particularly when mental focus and clarity are required. Common pain relievers like Aspirin, Paracetamol, and Tramadol are often used to reduce physical discomfort, but their impact on cognitive functions is not well understood. Recalling information, a task that demands mental effort, becomes more difficult when we're in pain. This study investigates how different pain relievers (Aspirin, Paracetamol, and Tramadol) at standard dosages affect memory performance. It also looks at how varying dosages of each drug influence memory function. Since the ability to recall information is essential in many situations, understanding how pain relief might impact cognitive performance is important for managing pain without affecting productivity.

#### 1.2 Research Questions

- 1. How does the type of pain reliever (Aspirin 500 mg, Paracetamol 500 mg, Tramadol 50 mg, and Placebo) affect cognitive task performance?
- 2. How does the dosage (low vs. high) of each drug affect cognitive retention, while accounting for confounding factors like age?

## 1.3 Study Design

This study involves 2 factors, pain reliever type (4 levels) and dosage(2 levels). Crossing them provides us with 8 treatment groups, with 30 participants assigned to each. The groups are as follows:

- 1. Aspirin 500 mg (Low)
- 2. Aspirin 1000 mg (High)
- 3. Paracetamol 500 mg (Low)
- 4. Paracetamol 1000 mg (High)
- 5. Tramadol 50 mg (Low)
- 6. Tramadol 100 mg (High)
- 7. Placebo (Low)
- 8. Placebo (High)

This results in **240 total observations**  $(8 \times 30 = 240)$ .

## 1.4 Confounding Variable: Age

To reduce bias, we consider to control the experiment by controlling participant ages to be 18+. Hence in this study **age** acts as a **confounding variable**. Participants will be categorized into three groups evenly to prevent bias created through age. The groups are as follows:

- 1. 18–34 years
- 2. 35–50 years
- 3.50 + years

#### 1.5 Quantitative and Qualitative Variables

In our study the quantitative and qualitative variables are as follows:

- 1. Quantitative variables: Memory Game Scores, Memory Test Cards Scores
- 2. Qualitative variables: Type of pain reliever, dosage level (low/high)

#### 1.6 Data Analysis Method

We will use **one-way ANOVA** to analyze the effects of different pain relievers on memory performance. Similarly, we will use **two-way ANOVA** to analyze the effects of different dosage levels per drug type on memory performance and cognitive retention.

Table 1: Summary Statistics for Quantitative Variables

Statistic	Memory Game Score	Memory Cards Score
Mean	62.57583	7.945833
Median	61.50000	9.000000
SD	15.63703	1.960164
IQR	23.35000	2.000000

Table 2: Summary of Drug Types

Drug	Count	Percentage
Aspirin	60	25
Paracetamol	60	25
Placebo	60	25
Tramadol	60	25

# 2 Summary Statistics

## 2.1 Summary of quantitative variables

Table 1 shows the summary statistics of memory game scores before and after the treatment. The mean is similar across all groups, however, the standard deviation (SD) is relatively high. The median game scores remain close to the mean, and the IQR (Interquartile Range) is smaller than the SD. The cards memory task shows little change before and after treatment, suggesting that pain relievers may not have a major effect on this specific task.

Evident through the results on **?@tbl-summary-6**, Paracetamol is the drug that has the greatest mean & median improvement in the game scores after administering the drug (without dosage taken into account). Aspirin appears to negatively impact the results of the game after being given to people, this was seen through the mean and median improvements.

Table 3: Summary of Dosage Levels

Dosage	Count	Percentage
High	120	50
Low	120	50

Table 4: Summary of Age Groups

Age_Group	Count	Percentage
18-34	80	33.33
35-50	80	33.33
50+	80	33.33

## 2.2 Summary of counts and percentage for qualitative variables

Table 2 shows the distribution of participants across drug types. Aspirin, Paracetamol, and Tramadol, and Placebo each have 60 participants (25%), ensuring balance.

Table 3 shows the dosage levels assigned to participants. There is an equal split between high-dose (120 participants, 50%) and low-dose (120 participants, 50%) conditions.

# 2.3 Confounding Variable

Table 4 shows the breakdown of age groups, which is a confounding variable in this study. The three age groups: 18–34, 35–50, and 50+ each have 80 participants (33.33%).

#### 3 Plots

#### 3.1 Game Score Distribution Before and After Treatment

**?@fig-boxplot-scores** shows the distribution of memory game scores before and after treatment across different drug types using box plots.

- 1. The median scores for all drugs appear similar before treatment.
- 2. Tramadol has a higher median than other drugs both before and after treatment.
- 3. The Placebo group has a slightly lower median score compared to other drugs.
- 4. There is one outlier in the Tramadol group before treatment.
- 5. The (IQR) is **similar across all drug types**, though Tramadol sees a decrease in its IQR in the memory game scores after treatment.

These boxplots provide an initial comparison of cognitive performance changes before and after drug administration.

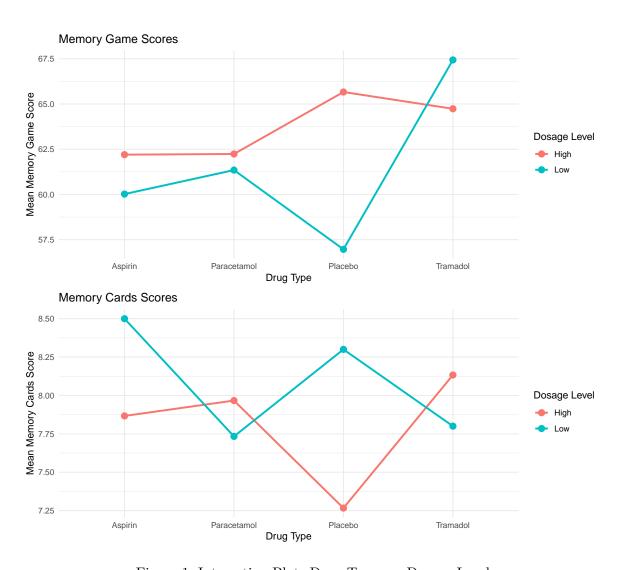


Figure 1: Interaction Plot: Drug Type vs. Dosage Level

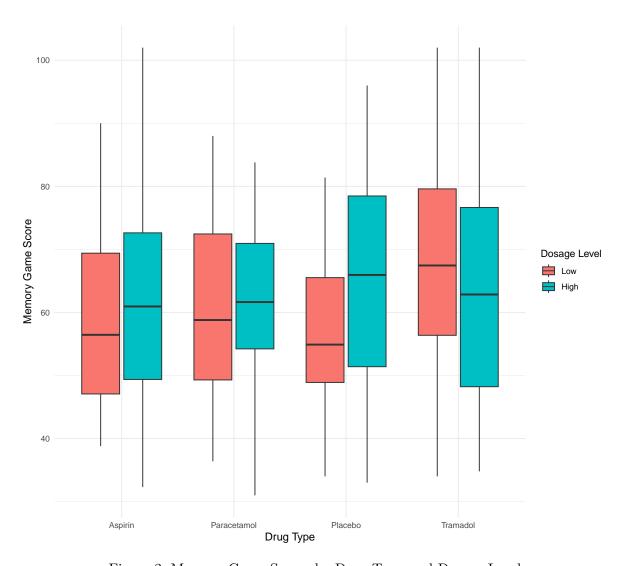


Figure 2: Memory Game Scores by Drug Type and Dosage Level

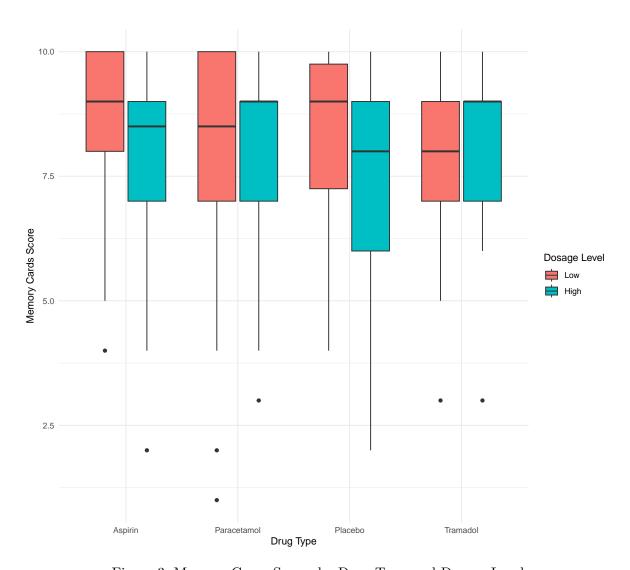


Figure 3: Memory Game Scores by Drug Type and Dosage Level

Table 5: Regression Results for Memory Game Score

term	estimate	std.error	statistic	p.value
(Intercept) drugParacetamol	60.020000 1.326667	2.839371 4.015478	21.1384816 0.3303883	0.0000000 0.7414048
drugPlacebo	-3.053333	4.015478	-0.7603911	0.4477929
drugTramadol dosage_levelHigh	7.416667 $2.180000$	4.015478 4.015478	1.8470198 $0.5428993$	0.0660176 $0.5877203$
drugParacetamol:dosage levelHigh	-1.290000	5.678743	-0.2271630	0.8204971
drugPlacebo:dosage_levelHigh	6.516667	5.678743	1.1475545	0.2523345
drugTramadol:dosage_levelHigh	-4.880000	5.678743	-0.8593451	0.3910372

# 3.2 Memory Card Score Distribution Before and After Treatment

?@fig-boxplot-cards shows the distribution of memory card scores before and after treatment across drug types.

- 1. Before treatment, the scores are relatively high across all groups, with Paracetamol and Placebo showing slightly higher medians than the others.
- 2. After treatment, the distributions remain similar, though there is a slight increase in spread for Aspirin, Paracetamol, and Placebo.
- 3. There is a slight decrease in the IQR of Tramadol.
- 4. Outliers are present in all groups, indicating some variability in memory card performance across individuals.

# 4 Assumptions

#### 4.1 Model

 $\text{memory}\_\text{game}\_\text{score}_i = \beta_0 + \beta_1 \cdot \text{drug}_i + \beta_2 \cdot \text{dosage}\_\text{level}_i + \beta_3 \cdot (\text{drug}_i \times \text{dosage}\_\text{level}_i) + \varepsilon_i$ 

#### Where:

- $\beta_0$  is the intercept.
- $\beta_1, \, \beta_2, \, \text{and} \, \, \beta_3$  are coefficients for the predictors and interaction term.
- $\varepsilon_i$  is the random error term.

Table 6: Model Fit Statistics for Memory Game Score

r.squared	${\it adj.r.} {\it squared}$	$_{ m sigma}$	statistic	p.value	$\mathrm{d}\mathrm{f}$	logLik	AIC	BIC	deviance	df.residual	nobs
0.0398318	0.0108612	15.55188	1.374906	0.216744	7	-995.0806	2008.161	2039.487	56111.73	232	240

Table 7: Two-Way ANOVA Results for Memory Game Score

	Df	Sum Sq	Mean Sq	F value	Pr(>F)
drug	3	1000.7542	333.5847	1.379242	0.2498211
$dosage\_level$	1	308.2667	308.2667	1.274562	0.2600786
$drug:dosage\_level$	3	1018.7310	339.5770	1.404018	0.2423452
Residuals	232	56111.7280	241.8609	NA	NA

$$Y_{ijk} = \mu + \alpha_i + \beta_j + (\alpha\beta)_{ij} + \varepsilon_{ijk}$$

#### Where:

•  $Y_{ijk}$ : Memory score •  $\mu$ : Overall mean

•  $\alpha_i$ : Effect of the  $i^{\text{th}}$  drug

•  $\beta_j$ : Effect of the  $j^{\text{th}}$  dosage level

•  $(\alpha\beta)_{ij}$ : Interaction effect between drug and dosage

•  $\varepsilon_{ijk} \sim \mathcal{N}(0, \sigma^2)$ : Random error

Table 8: Shapiro-Wilk Test for Normality

	Statistic	P_Value	Method
W	0.9886	0.0555	Shapiro-Wilk normality test

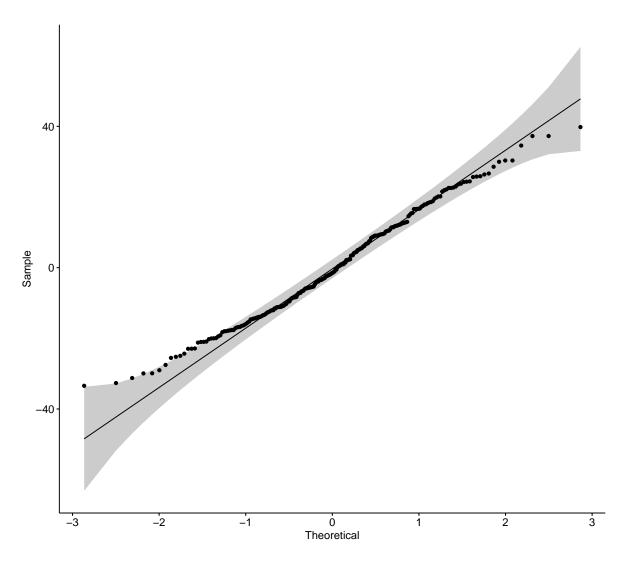
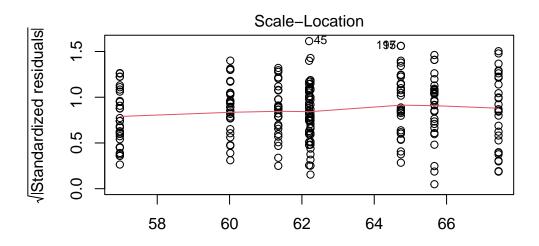


Figure 4: Q-Q Plot of Residuals

Table 9: Bartlett's Test for Homogeneity of Variance



Fitted values Im(memory\_game\_score ~ drug \* dosage\_level)

	Statistic	DF	P_Value	Method
Bartlett's K-squared	7.9776	7	0.3346	Bartlett test of homogeneity of variances