

Simple Logistic Regression

Biostat 514/517
Discussion – Week 9

University of Washington

PSA Study

- Goal of study was to assess if PSA can be used to identify those patients in whom cancer is progressing
- Prospective cohort study of men who have received hormonal therapy for prostate cancer
- Followed for at least 24 months
- Lowest PSA and cancer severity measured

Scientific Questions

- Is PSA nadir (the lowest value observed post therapy) highly associated with time of remission?
- Are associations between PSA nadir and time of remission independent of effects due to performance status or tumor mass (as measured by bone scan score)?

PSA Data

- What are the relevant variables for this scientific question?

PSA Data

- What are the relevant variables for this scientific question?
 - PSA Nadir (continuous, uncensored)
 - Time to remission (continuous, possibly censored)
 - Indicator of remission status (binary)
- What are valid analysis approaches?

Analysis Approaches

- Approach 1: (From HW 1)
Logistic regression – binary predictor
 - Response: Remission indicator
 - Predictor: Dichotomized PSA nadir
 - Statistical question: Are the odds of remission different for those with high PSA nadir compared to those with low PSA nadir.
- Drawbacks?
 - Cut-off may be arbitrary

Analysis Approaches

- Approach 2:
Logistic regression – continuous predictor
 - Response: Remission indicator
 - Predictor: PSA nadir
 - Statistical question: Are the odds of remission different for those with with different PSA levels?
- Drawbacks?
 - Slightly harder to interpret (but we'll go over this!)

Review of Terms

- Probability of event occurring (remission)

$$P(Y_i = 1) = p_i$$

- Odds of event occurring: Ratio of probabilities

$$\text{odds} = \frac{p_i}{1 - p_i}$$

- Odds ratio: Ratio of odds of event occurring to odds of event not occurring

$$OR = \frac{\text{odds event in group 1}}{\text{odds event in group 2}}$$

Logistic Regression Review

- Uses the model

$$\text{logit}(p_i) = \log\left(\frac{p_i}{1-p_i}\right) = \beta_0 + \beta_1 X_i$$

- Parameter interpretations
 - log odds for $X = 0$: β_0
 - log odds for $X = x$: $\beta_0 + \beta_1 * x$
 - log odds for $X = x + 1$: $\beta_0 + \beta_1 * (x + 1)$

Logistic Regression Review

- Parameter interpretation (cont.)
 - Odds of event for $X=x$: $\exp(\beta_0 + \beta_1 * x)$
 - Odds of event for $X=x+1$: $\exp(\beta_0 + \beta_1 * (x+1))$

- Odds ratio comparing groups:

$$\begin{aligned}\frac{\text{odds of event for } X=x+1}{\text{odds of event for } X=x} &= \frac{\exp(\beta_0 + \beta_1(x+1))}{\exp(\beta_0 + \beta_1 x)} \\ &= \frac{\exp(\beta_0 + \beta_1 x + \beta_1)}{\exp(\beta_0 + \beta_1 x)} \\ &= \exp(\beta_1)\end{aligned}$$

Approach 2: Application

```
psa = read.table("psa.txt",header=TRUE)
```

```
#creating indicator of relapse within 24 months
```

```
psa$relapse24 <- ifelse(psa$inrem=="no" &  
psa$obstime<24, 1, 0)
```

```
#logistic regresion
```

```
mod <- glm(relapse24 ~ nadirpsa,  
family="binomial", data=psa)
```

Approach 2: Application

```
summary(mod)
```

```
Call:
```

```
glm(formula = relapse24 ~ nadirpsa, family = "binomial", data = psa)
```

```
Deviance Residuals:
```

Min	1Q	Median	3Q	Max
-2.4956	-0.9110	-0.9098	1.2361	1.4656

```
Coefficients:
```

	Estimate	Std. Error	z value	Pr(> z)
(Intercept)	-0.67626	0.34086	-1.984	0.0473 *
nadirpsa	0.04071	0.02346	1.735	0.0827 .

```
---
```

```
Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

```
(Dispersion parameter for binomial family taken to be 1)
```

```
Null deviance: 68.593  on 49  degrees of freedom
```

```
Residual deviance: 60.102  on 48  degrees of freedom
```

```
AIC: 64.102
```

```
Number of Fisher Scoring iterations: 6
```

```
confint.default(mod)
```

	2.5 %	97.5 %
(Intercept)	-1.344324494	-0.008193382
nadirpsa	-0.005269916	0.086681625

Approach 2: Results

- Results
 - OR : $\exp(0.041) = 1.04$
 - 95% CI : $[\exp(-0.0052) , \exp(0.087)]$
 $= [0.995, 1.09]$
 - P value: 0.0827
- Note: Above analysis does not use robust standard errors, but could use them here.

Approach 2: Results

The estimated odds of relapse within 24 months in a group of prostate cancer patients is 4% higher relative to a group of prostate cancer patients with a 1 ng/ml lower PSA nadir level. Based on a 95% CI it would not be unusual to observe an OR between 0.995 and 1.09. With a p-value of 0.08 we find this result is not significant.

Approach 3: Using $\log_2(\text{PSA})$

- In the previous example we compared groups on an additive scale (1 unit different in PSA)
- If we wanted to compare groups on a multiplicative scale we can use a log-transformed predictor

Approach 3: Application

```
#transforming to log base 2 PSA
```

```
l2psa <- log(psa$nadirpsa) / log(2)
```

```
#fitting logistic model
```

```
mod2 <- glm(relapse24 ~ l2psa, family="binomial", data = psa)
```


Approach 3: Application

`summary(mod2)`

Call:

```
glm(formula = relapse24 ~ l2psa, family = "binomial", data = psa)
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-2.5904	-0.5355	-0.4704	0.6088	1.7684

Coefficients:

	Estimate	Std. Error	z value	Pr(> z)
(Intercept)	-0.7109	0.3884	-1.831	0.067166 .
l2psa	0.6178	0.1671	3.696	0.000219 ***

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for binomial family taken to be 1)

Null deviance: 68.593 on 49 degrees of freedom
Residual deviance: 44.063 on 48 degrees of freedom
AIC: 48.063

Number of Fisher Scoring iterations: 5

Approach 3: Results

The estimated odds of relapse within 24 months in a group of prostate cancer patients is 1.85 times the odds of relapse for group of prostate cancer patients with a PSA nadir twice as low (one-fold decrease). Based on a 95% CI it would not be unusual to observe an OR between 1.34 and 2.57. With a p-value less than 0.001 we find this result to be significant and reject the null hypothesis.

Summary

- Logistic regression requires a binary dependent/response variable
- Without a good scientific reason, dichotomization of continuous is not recommended.
- Choice of transformation of independent variable depends the scientific question (additive or multiplicative change).