# Logistic regression and prediction

## **Agenda**

- Exam 1
  - Wednesday September 21, in class
  - Covers material up through today (inclusive)
  - Closed notes
  - Bring a calculator (cannot use phone or laptop)
  - I won't ask you to write R code, but you may need to interpret R output
  - Questions similar to assignments and class activities
- Today: more logistic regression

#### **Data**

Data on 5720 Vietnamese children, admitted to hospital with possible dengue fever. Variables include:

- → Dengue: whether the patient actually has dengue fever, based on a lab test (0 = no, 1 = yes)
- Temperature: patient's body temperature (in Celsius)
- Abdominal: whether the patient has abdominal pain (0 = no, 1 = yes)
- HCT: patient's hematocrit (proportion of red blood cells)
- Age: patient's age (in years)
- Sex: patient's sex
- + several others

#### Last time

$$Y_i \sim Bernoulli(\pi_i)$$

$$egin{split} \logigg(rac{\pi_i}{1-\pi_i}igg) &= eta_0 + eta_1 \ Temperature_i + eta_2 \ Abdominal_i \ &+ eta_3 \ Temperature_i \cdot Abdominal_i \end{split}$$

Does the model improve when we add hematocrit (the proportion of red blood cells)?

### Model

$$Y_i \sim Bernoulli(\pi_i)$$

 $egin{split} \logigg(rac{\pi_i}{1-\pi_i}igg) &= eta_0 + eta_1 \ Temperature_i + eta_2 \ Abdominal_i \ &+ eta_3 \ Temperature_i \cdot Abdominal_i \ &+ eta_4 \ HCT_i \end{split}$ 

want to enech relationship be tween

· MCT and Dengre (empirical log odds)

· Do empirical log adds plots to sheek for interactions w/ Temp & Abdomina)

Lab3: involves checking these interactions

# Class activity, Part I

https://sta214-f22.github.io/class\_activities/ca\_lecture\_11.html

## **Class activity**

What is the estimated change in odds associated with a 1 point increase in hematocrit, holding temperature and abdominal pain constant?

Increases by a factor of 
$$e^{By} = e^{0.115}$$

# **Class activity**

How does the deviance change when we add hematocrit to the model?

Class activity

with those variables in the model)

two-sided

Researchers want to test whether there is a relationship between hematocrit and the probability a patient has dengue, after accounting for temperature and abdominal pain. Carry out a hypothesis test to investigate this research question.

$$Z = 12.753$$
  
= 0.115  
0.009  
p-value  $\approx 0$ 

## **Comparing models**

If deviance always decreases when I add additional variables, how can I assess whether including hematocrit substantially improves the model?

**Option 1:** Likelihood ratio test

Is the change in deviance bigger than we would expect if hematocrit doesn't really matter?

Option 2: AIC

(Audihe's Information Criterian)

10/23

#### **AIC**

In linear regression, what quantity did we use to compare models with different numbers of parameters?

In linear regression, what quantity did we use to compare models with different numbers of parameters?

#### Adjusted $\mathbb{R}^2$

- We can use something similar for logistic regression, called the Akaike information criterion (AIC)
- Motivation: penalize the deviance based on the number of parameters

#### **AIC**

AIC: Suppose our model has p parameters (including the intercept). Then the AIC is

$$AIC = 2p + deviance$$

# parameters  $\uparrow$ 

want deviance to be

sme

#### **AIC**

```
Model 1: (adding hematocrit) P=S

## Null Deviance: 6956

## Residual Deviance: 6745

Model 2: (no hematocrit) P=U

## Null Deviance: 6956

## Residual Deviance: 6914

AIC: 6922
```

Which model do we prefer, based on AIC?

## **Model comparison**

Does the model improve when we add hematocrit (the proportion of red blood cells)?

- **Likelihood ratio test:** p-value pprox 0
- AIC: AIC is smaller when we add hematocrit

**Conclusion:** We have convincing evidence that adding hematocrit improves the model.

## A new question...

You report your results to the hospital, and they ask a follow-up question:

How good is your model at predicting whether a patient has dengue?

## **Making predictions**

- + For each patient in the data, we calculate  $\widehat{\pi}_i$
- lacktriangle But, we want to decide which patients to treat. So we need to guess whether patient i has dengue  $(Y_i=1)$  or doesn't  $(Y_i=0)$

How can we turn  $\widehat{\pi}_i$  into a dengue prediction?

If 
$$\hat{\Pi}_{i} = 0$$
, gives  $Y_{i} = 0$ 

$$\hat{\gamma}_{i} = 1$$

$$\hat{\gamma}_{i} = 1$$

$$\hat{\gamma}_{i} = 0$$

$$\hat{\gamma}_{i} \geq 0.5 \angle \text{threshold}$$

$$\text{(and ose other threshold)}$$

$$\text{(in } 1 = 0$$

$$\hat{\gamma}_{i} \geq 0.5 \angle \text{threshold}$$

$$\text{(in } 2 = 0.5$$

#### **Confusion matrix**

3957;

Actual Y=0 Y=1 Y=1

- For 3957 patients, we correctly predicted they did not have dengue
- For 66 patients, we correctly predicted they had dengue
- For 1631 patients, we incorrectly predicted they did not have dengue

Did we do a good job at predicting?

# **Accuracy**

Also look at performance within each grap 4=0 and 4=1

	Y=0: 3957
Actual	3957 +66
Y=0 $Y=1$	

Predicted 
$$\widehat{Y}=0$$
 3957 1631  $\widehat{Y}=1$  66 66

$$egin{aligned} {\rm Accuracy} &= rac{
m number\ of\ correct\ predictions} {
m number\ of\ observations} \ &= rac{3957+66}{5720} \ &= 0.703 \end{aligned}$$

We correctly predict dengue status 70% of the time.

(Five have unbalanced data, (10+5 more Os or 15)

Accuracy can be misleading

# Class activity, Part II

https://sta214-f22.github.io/class\_activities/ca\_lecture\_11.html

# **Class activity**

		Actual	
		Y = 0	Y = 1
Predicted	$\widehat{Y} = 0$	3990	503
	$\widehat{Y} = 1$	33	1194

What is the accuracy of the rapid test?

## **Class activity**

Which method would you prefer -- our logistic regression model, or the rapid test?