LDM Package Version 5.0

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Changes in Version 2.1

- Added functionalities for analyzing matched-set data using the LDM or PERMANOVA (Zhu et al. 2020)
- Added functionalities for testing presence-absence associations using the LDM or PER-MANOVA (Hu et al., 2021; Hu and Satten, 2021)
- Fixed some minor bugs
- The results here were computed from R 3.6.0, while the results in vignette v1.0 were computed from R 3.4.4

Changes in Version 3.0

- Added an option for performing mediation analysis using LDM-med (Yue and Hu 2021) (test.mediation in ldm)
- Added an option for parallel computing (n.cores in both 1dm and permanovaFL)
- Removed the options test.global and test.otu and always perform both global and OTU tests (one can set n.perm.max=10000 if one is interested in the global tests only and wants to cap the permutation at 10000)

Changes in Version 4.0

• Added an option for calling the new omnibus test, LDM-omni3 (Zhu et al. 2022), that combines results from analyzing three scales of taxon data: relative abundance, arcsin-root transformed relative-abundance, and presence-absence (test.omni3 in ldm)

Changes in Version 5.0

- Added an option to take the second residual (e.g., the Martingale or deviance residual) obtained from a Cox proportional hazard model that fits the survival outcome and relevant covariates, and offered a combination test that combines the results of analyzing the first residual (specified as a covariate in the regression model) and the second residual (Hu et al. 2022) (other.surv.resid in both ldm and permanovaFL)
- Added an option for performing mediation analysis using PERMANOVA-med (manuscript under preparation) (test.mediation in permanovaFL)
- Expanded permanovaFL to read multiple distance metrics/matrices to perform an omnibus test (dist.method or dist.list in permanovaFL)

1 Overview

The LDM package implements the Linear Decomposition Model (Hu and Satten 2020), which provides a single analysis path that includes global tests of any effect of the microbiome, tests of the effects of individual OTUs (operational taxonomic units) or ASVs (amplicon sequence variants) while accounting for multiple testing by controlling the false discovery rate (FDR), and a connection to distance-based ordination. It accommodates multiple covariates (e.g., clinical outcomes, environmental factors, treatment groups), either continuous, discrete (with ≥ 2 levels), or multivariate, as well as interaction terms to be tested either singly or in combination, allows for adjustment of confounding covariates, and uses permutation-based pvalues that can control for clustered data (e.g., repeated measurements on the same individual). It gives results for both the frequency (i.e., relative abundance) and arcsine-root-transformed frequency data, and can give an "omnibus" test that combines results from analyses conducted on the two scales (LDM-omni). In follow-up papers, we extended the LDM to test associations with microbiome data at the presence-absence scale (Hu et al. 2021), to analyze matched sets of samples (Zhu et al. 2020), to test microbiome associations with censored survival times (Hu et al. 2022), and to test mediation effects of the microbiome (LDM-med) (Yue and Hu 2021). Because LDM applied to relative abundance data works well when associated taxa are abundant and LDM applied to presence-absence data works well when associated taxa are relatively rare, we further developed another omnibus test, LDM-omni3 (Zhu et al., 2022); LDM-omni3 allows simultaneous consideration of data at the three taxon scales (i.e., relative abundance, arcsin-root transformed relative-abundance, and presence-absence), thus offering optimal power across scenarios with different association mechanisms. The wide variety of data types and analyses that the LDM supports are depicted in Figure 1.

The core function of the LDM package is 1dm, which can be used to test association between covariates of interest and the microbiome, possibly after adjusting for confounding covariates. Several additional functions are included in the LDM package. The function permanovaFL implements the PERMANOVA-FL test (our version of the PERMANOVA test); like the function 1dm, permanovaFL allows adjustment of confounding covariates, control of clustered data, test of presence-absence associations (Hu and Satten 2021) and analysis of matched sets of samples (Zhu et al., 2020); unlike the implementation of PERMANOVA in adonis and adonis2 in the R package vegan, permanovaFL adopts the permutation scheme described by Freedman and Lane (1983). The function adjust.data.by.covariates produces the adjusted distance matrix and OTU table after removing the effects of covariates (e.g., confounders). The functions jaccard.mean and unifrac.mean computes the expected value of the Jaccard and unweighted UniFrac distance matrices over rarefaction replicates. The function avgdist.squared computes the average of squared distance matrices based on multiple rarefied OTU tables.

Download the latest version of the package from GitHub at https://github.com/yijuanhu/LDM to a local hard drive and install and load the package:

> install.packages("LDM_3.0.tar.gz", repos=NULL)

> library(LDM)

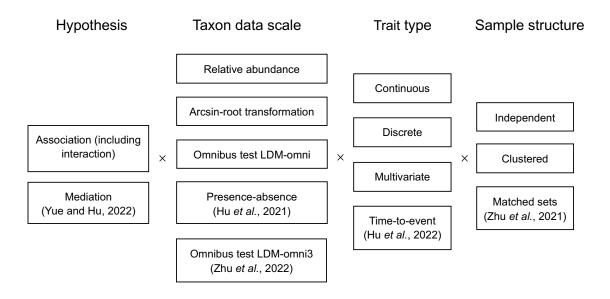


Figure 1. Analyses now supported by the LDM. Analysis types without a citation were introduced in the original LDM paper (Hu and Satten 2020). "LDM-omni" combines the relative abundance and arcsin-root transformed relative abundance data. "LDM-omni3" expands LDM-omni by adding the presence-absence data. "Clustered" refers to analyses of clustered data where traits of interest vary by cluster or vary both by and within clusters (some analyses may require special structure or additional assumptions). "Matched sets" is a special type of clustered analysis in which all traits of interest vary within sets.

2 Example dataset 1: throat microbiome data

The throat microbiome data included in this package contain 60 subjects with 28 smokers and 32 non-smokers. Microbiome data were collected from right and left nasopharynx and oropharynx region to form an OTU table with 856 OTUs. The phylogenetic tree was constructed using UPGMA on the K80 distance matrix of the OTUs. Metadata include smoking status, packs smoked per year, age, gender, and antibiotic use (we added a binary variable AntibioticUse which takes value 1 if AntibioticUsePast3Months_TimeFromAntibioticUsage is not equal to "None" and 0 if otherwise). For further information on these data see Hu and Satten (2020) and references therein. We first prepare this dataset:

```
> data(throat.tree)  # phylogenetic tree; only needed if UniFrac distances are requested
> data(throat.otu.tab) # OTU table
> data(throat.meta)  # metadata (covariates of interest, confounding covariates, etc.)
```

The OTU table should have rows corresponding to samples and columns corresponding to OTUs (1dm will transpose the OTU table if the number of rows is not equal to the length of the covariates in the metadata but this consistency check will fail in the unlikely case that the number of OTUs and samples are equal). Note that samples with zero reads for every OTU, possibly representing negative controls, are analyzed as they are, but a warning message will be sent. OTUs with zero reads in every sample will be automatically removed by 1dm before any further analysis is carried out.

It is *essential* that the OTU table and the metadata have the same number of samples and that these occur *in the same order* in the OTU table and metadata. Note also that fitting the LDM assumes no missing data; samples having a NA value for any covariate in the formula (including confounders) are removed by 1dm before any further analysis is carried out. Similarly, if a cluster.id variable is specified (see Section 8), samples having cluster.id=NA are removed.

As in the analysis presented in Hu and Satten (2020), we filtered out OTUs with presence in fewer than 5 samples, leaving 233 OTUs for analysis:

```
> otu_presence = which(colSums(throat.otu.tab>0)>=5)
> throat.otu.tab5 = throat.otu.tab[,otu_presence]
> dim(throat.otu.tab5)
[1] 60 233
```

The filtered OTU table throat.otu.tab5 is also available in the LDM package. Although this criterion is commonly used, its use is not necessary to run 1dm. Note that the taxonomy table, if it exists, should be subsetted accordingly.

3 Ordination using distances adjusted for covariates

(Users who read for the testing functionalities of the LDM can skip this section). The function adjust.data.by.covariates produces (1) the adjusted OTU table and (2) the adjusted distance matrix, both having the effects of the covariates (e.g., confounders) removed using projection, without fitting or testing the LDM. These are also part of the adjustment of covariates in the LDM. The adjusted distance matrix can be used to perform ordination in which the effects of confounding covariates are removed. As an example, we perform distance-based ordination and visualize whether the samples from the throat data are clustered by smoking status after removing the confounding effects from gender and antibiotic use:

```
> adj.data <- adjust.data.by.covariates(formula=~Sex+AntibioticUse, data=throat.meta,
                                      otu.table=throat.otu.tab5, dist.method="bray")
> PCs <- eigen(adj.data$adj.dist, symmetric=TRUE)
> PCs.percentage = signif(PCs$values[1:2]/sum(PCs$values),3)*100
> par(mfrow=c(1,1), mar=c(5, 4, 4, 8) + 0.1, pty="s", xpd=TRUE)
> color = rep("blue", length(throat.meta$SmokingStatus))
> color[which(throat.meta$SmokingStatus=="Smoker")] = "red"
> plot(PCs$vectors[,1], PCs$vectors[,2],
     main="Ordination based on Bray-Curtis distance",
     xlab=paste("PC1 (", PCs.percentage[1], "%)", sep=""),
     ylab=paste("PC2 (", PCs.percentage[2], "%)", sep=""),
     xlim=c(-0.4, 0.4), ylim=c(-0.4, 0.4),
     col=color, pch=21)
> ordiellipse(ord=PCs$vectors, groups=factor(throat.meta$SmokingStatus, exclude=c()),
            conf=0.9, col=c("blue", "red"))
> legend(x="topright", inset=c(-0.5, 0.4), bty="n",
       legend=c("smokers", "non-smokers"), pch=21,
       col=c("red","blue"), lty=0)
```

The resulting plot is shown in Figure 2. By removing confounding directions from the distance matrix, any clustering pattern by smoking status is not due to correlation between smoking and gender and/or antibiotic use.

Ordination based on Bray-Curtis distance

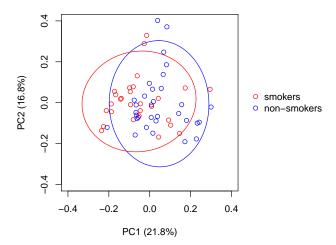


Figure 2 Ordination of the throat microbiome samples based on the Bray-Curtis distance after removing the effects of gender and antibiotic use. The ellipses are 90% confidence limits.

4 Writing formulas for 1dm and permanovaFL

The function 1dm uses a formula interface that is similar to other regression models in R, but with some differences. The general form of a formula for LDM is:

```
otu.table | (confounders) ~ (first set of covariates) + (second set) + (last set)
```

The left hand side of the formula gives the OTU table and any confounders that need to be controlled for. The generic formula in the absence of confounders is

```
otu.table ~ (first set of covariates) + (second set) + (last set)
```

On the right hand side of the formula, parentheses are used to group covariates that should be considered together as a single "submodel". The covariates in each submodel are considered jointly (i.e., leading to a joint p-value for each submodel), and in order from left to right such that the variance explained by each submodel is that part that remains after the previous submodels have been fit (i.e., are controlled for). If a submodel contains only a single covariate, then the parentheses are optional. Similarly, since the confounders are always treated as a single submodel, the parentheses around the confounders is also optional. The formula

```
otu.table ~ (confounders) + (first set of covariates) + (second set) + (last set)
```

will fit the same model as the first formula statement in this section. The only difference is that moving (confounders) to the right hand side of the model will produce a p-value for testing

the confounders; specifying the confounders on the left hand side of the formula suppresses this p-value, which can speed up the ldm, both by reducing the number of test statistics calculated in each permutation and by possibly reducing the number of permutations required to satisfy all the stopping criteria.

The standard syntax for formulas in R can be used to expand single covariates into a model matrices with multiple columns. For example, the formula

```
otu.table ~ as.factor(a) + b*c
```

will have two submodels, the first with as many columns (degrees of freedom) as a has levels, and the second (using the standard R syntax for interactions) with columns corresponding to $(b, c, b \times c)$.

The function permanovaFL uses the same formula interface as ldm. In addition, permanovaFL allows the OTU table on the left hand side of the formula to be replaced by a pre-calculated distance matrix.

We now give an example of a formula that can be fit to the throat data. We first wish to test the association of the microbiome with smoking status and then test the association of the microbiome with pack per year after removing the association with smoking status, both tests accounting for the confounding effects of sex and antibiotic use. Thus we specify this formula in the 1dm:

throat.otu.tab5 | (Sex+AntibioticUse) ~ SmokingStatus + PackYears

5 Fitting the LDM model without testing

(Users who read for the testing functionalities of the LDM can skip this section). We can fit the LDM to the observed data (i.e., obtaining the variance explained [VE] without testing their significance) by calling ldm with n.perm.max=0. This is useful if we only want to see how much variability is explained by each set of covariates, or if we want factor loadings from OTUs. Unless otherwise specified, ldm automatically fits the OTU data at both the frequency (i.e., relative abundance) scale and the arcsin-root-transformed frequency scale.

Because we would also like to compare the VE by covariates to those by an ordination of the data using distance, an externally-calculated distance matrix can be used, or ldm can calculate the distance internally. Current distances supported include all of those supported by vegdist in the vegan package (i.e., "manhattan", "euclidean", "canberra", "bray", "kulczynski", "jaccard", "gower", "altGower", "morisita", "horn", "mountford", "raup", "binomial", "chao", "cao", "mahalanobis") as well as "hellinger", "unwt-unifrac", and "wt-unifrac". The default choice for distance is the Bray-Curtis distance. Note that when we internally call vegdist for its supported distances without changing any of the default settings, the OTU table is converted to the frequency scale if scale.otu.table=TRUE; the parameter binary=TRUE if a presence-absence-type of distance is requested. The Hellinger distance measure ("hellinger") takes the form 0.5*E, where E is the Euclidean distance between the square-root-transformed frequency data. The UniFrac distances ("unwt-unifrac" and "wt-unifrac") are calculated by internally calling GUniFrac in the GUniFrac package. For the throat microbiome data, we choose the default Bray-Curtis distance:

```
> fit <- ldm(formula=throat.otu.tab5|(Sex+AntibioticUse)~SmokingStatus+PackYears,</pre>
             data=throat.meta,
                                       # parameter for fitting the LDM without testing
             n.perm.max=0)
> ### frequency scale
> fit$VE.global.freq.submodels
                                      # VE for submodels 1 and 2
[1] 0.13891274 0.02751291
> fit$VE.otu.freq.submodels[1,1:3]
                                      # Contribution of OTUs 1-3 to VE for submodel 1
        4695
                     4194
                                  5160
3.780166e-07 1.138872e-07 2.666018e-03
                        # F statistics for VE of submodels 1 and 2 (i.e., cov1 and cov2)
> fit$F.global.freq
       cov1
                   cov2
0.049056264 0.009716031
> fit$F.otu.freq[1,1:3] # F statistics for contribution of OTUs 1-3 in submodels 1 and 2
           4695
                       4194
                                  5160
cov1 0.09829664 0.000170493 0.04114451
cov2 0.03139611 0.021585241 0.02909457
> ### arcsin-root transformed scale
                                     # VE for submodels 1 and 2
> fit$VE.global.tran.submodels
[1] 1.2829126 0.3691146
```

The LDM performs a full decomposition (similar to SVD) of the OTU table; the singular values are returned in d.freq and d.tran (frequency and arcsin-root-transformed scale). It can be informative to make a scree plot to see how much variability is explained by submodel variables compared to the residual variability. The following code accomplishes this; the VE corresponding to the submodels is plotted in red, while residual components are plotted in black. In the code that follows, we handle the possibility of multiple terms per submodel by plotting a single point for each submodel; the value plotted is the average VE (i.e., averaged over each term in each submodel). We could also plot the VE for each term in each submodel by plotting the appropriate values of d.freq².

The resulting plots are shown in Figure 3. We can see that although the VE by SmokingStatus does not rank the highest compared to other directions in the whole space (i.e., the augmented X matrix in the manuscript, which is denoted by x in the output of ldm), it still appears substantial. By contrast, the VE by PackYears seems very small. Although these results are suggestive, we must use permutation to decide which VEs are significant. The function ldm also returns the right singular vectors from the decomposition (v.freq and v.tran) which can be used to construct biplots (see Satten et al. 2017 for additional details).

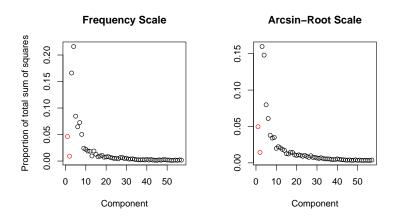


Figure 3 VEs when fitting the LDM to the throat microbiome data. The first two red circles represent VEs by SmokingStatus and PackYears, respectively. The black circles represent VEs (ordered by their Bray-Curtis eigenvalues) by residual components, usually referred to as the scree plot.

6 Testing relative-abundance associations using 1dm and permanovaFL

The function 1dm simultaneously provides global tests of any effect of the microbiome and OTU-specific tests. Thus the function 1dm uses two sequential stopping criteria for the permutation procedure. For the global test, 1dm uses the stopping rule of Besag and Clifford (1991), which stops permutation when a pre-specified minimum number of rejections (n.rej.stop with default 100; "rejection" occurs when the permutation statistic exceeded the observed test statistic) has been reached. For the OTU-specific tests, 1dm uses the stopping rule of Sandve et al. (2011), which stops permutation when every OTU test has either reached the pre-specified number of rejections (n.rej.stop with default 100) or yielded a q-value that is below the nominal FDR level (fdr.nominal with default 0.1). As a convention, we call a test "stopped" if the corresponding stopping criterion for that test has been satisfied. For the OTU-specific tests, there exists an upper bound for the number of permutations for the algorithm to stop, which is $J \times L_{\min} \times \alpha^{-1}$, where J is the number of OTUs, L_{\min} is the pre-specified minimum number of rejections, and α is the nominal FDR. For example, when $L_{\min} = 100$ and $\alpha = 0.1$, the upper bound is 1000 J, which is 233000 for this example dataset. If the maximum number of permutations n.perm.max takes the default value NULL, then the maximum number of permutations for testing OTUs is determined in this way, while the maximum number of permutations for the global test is fixed at 5000. Conversely, if a numeric value for n.perm.max is specified, this value is used for both the global tests and the OTU-specific tests. All tests are "terminated" when a user-specified n.perm.max have been generated; if this number is too small, some tests may not have "stopped". Tests that require a large number of permutations are those that are close to the threshold for acceptance or rejection. The function permanovaFL only uses the stopping rule of Besag and Clifford (1991) as it only implements a global test.

Further, unless specified otherwise by the user, 1dm automatically performs tests on two data scales: the frequency (i.e., relative abundance) scale and the arcsin-root-transformed frequency scale. The omnibus test reports the most powerful of the two scales (after properly adjusting for the comparison).

We now give the simplest example of association testing using all default values for the 1dm parameters. We test the association of the throat microbiome with smoking status and then test the association with pack per year after removing the association with smoking status, both tests accounting for the confounding effects of sex and antibiotic use:

> res.ldm\$n.perm.completed
[1] 130000

With 5000 permutations, the stopping criterion of obtaining at least 100 rejections has not been met by the global test. The OTU tests stopped (met the early stopping criteria) after 130000 permutations. According to the omnibus test results, smoking status (cov1) after accounting for the confounders is significantly associated with the microbiome (p-value = 0.0034) while pack per year (cov2) after accounting for smoking status and the confounders is not (p-value = 0.701). Note that, when the true global p-value is very small, a larger number of permutations may be required to "accurately" estimate it and there is no upper bound for n.perm.max to guarantee the stop of the algorithm; if the value of global.tests.stopped=FALSE, then the reported p-value may be used as an upper bound. At the nominal FDR 0.1, we find four OTUs (with column names "2434", "1490", "4703", and "3538" in throat.otu.tab5) that contribute to the association with smoking status and no OTU for pack per year. These results are consistent with the level of significance in the corresponding global tests.

Using the code below, we provide a summary table for the detected OTUs (or OTUs with the top smallest p-values), which includes the raw p-value, adjusted p-value (by the Benjamini-Hochberg [1995] [BH] procedure), population-level mean relative abundance, directions of covariate effects, and OTU name (can be substituted by taxonomy assignment); the OTUs are ordered by the raw p-values:

```
### order the detected OTUs by their p-values
> w1 = match(res.ldm$detected.otu.omni[[1]], colnames(res.ldm$q.otu.omni))
# remove [[1]] if there is only one covariate after "~" in the formula for ldm
> o = w1[order(res.ldm$p.otu.omni[1, w1])]
# If no OTU is detected, we can still provide a summary table for the top (e.g., 10) OTUs
# by re-defining o = order(res.ldm$p.otu.omni[1,])[1:10]
> summary.tab = data.frame(raw.pvalue=signif(res.ldm$p.otu.omni[1,o],3),
```

```
adj.pvalue=signif(res.ldm$q.otu.omni[1,o],3),
                       mean.freq=signif(res.ldm$mean.freq[o],3),
                       direction=t(ifelse(res.ldm$beta[1,]>0, "+", "-"))[o,],
                       otu.name=colnames(res.ldm$q.otu.omni)[o], # can use taxonomy assignment
                       row.names=NULL)
> colnames(summary.tab)[4] = paste("direction.", rownames(res.ldm$beta[1,]), sep="")
> summary.tab
  raw.pvalue adj.pvalue
                         mean.freq direction.SmokingStatusNonSmoker otu.name
    0.000279
                 0.0583
                            0.0638
1
                                                                          1490
2
    0.001000
                 0.0745
                            0.0373
                                                                          2434
3
    0.001070
                 0.0745
                             0.0109
                                                                          3538
4
    0.001700
                 0.0887
                            0.0129
                                                                          4703
```

It requires some care to interpret the directions of covariate effects. For example, direction.SmokingStatusNonSmoker = '-' means that the NonSmoker level in the SmokingStatus covariate is associated with lower relative abundances than the Smokers level, for all four OTUs.

For the detected OTUs, we can also plot their relative abundance data by smoking status, which are displayed in Figure 4. We first obtain the relative abundance data adjusted for the confounding covariates by using adjust.data.by.covariates:

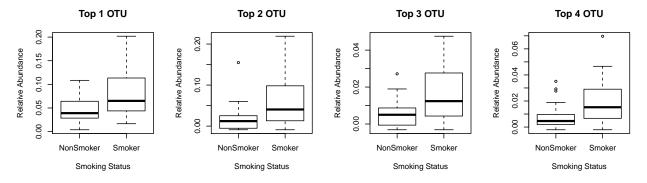


Figure 4 Box plot of relative abundances (adjusted for sex and antibiotic use).

The permanovaFL function implements the PERMANOVA-FL test (our implementation of the PERMANOVA test). Like the PERMANOVA test implemented elsewhere (e.g., the adonis or adonis2 functions in the R package vegan), our permanovaFL only allows testing of global hypotheses. Here we use the default n.perm.max=5000, i.e., 5000 for the maximum number of permutations.

- > res.perm\$R.squared # proportion of distance variance explained by each trait
 cov1 cov2
 0.04997645 0.01365515
- > res.perm\$F.statistics
 cov1 cov2
 2.9354949 0.8020703
- > res.perm\$p.permanova cov1 cov2 0.00219956 0.64500000

The R-squared values are proportions of variance in the distance matrix (after projecting off the confounders, i.e., Sex and AntibioticUse here) explained by each covariate. The global test results are consistent with those from 1dm: smoking status (after accounting for the confounders) is significantly associated with the microbiome (p-value = 0.0022) while pack per year after accounting for smoking status (and the confounders) is not (p-value = 0.645).

7 Testing presence-absence associations using 1dm and permanovaFL

The functions 1dm and permanovaFL have implemented functionalities to test associations with the presence and absence of bacteria. This type of tests are often confounded by the library size (total number of reads per sample). A frequently used solution is *rarefaction*, which corresponds to subsampling reads of all samples to a common rarefaction depth that is often the lowest observed library size (after removing outliers). However, a single rarefaction typically results in a substantial loss of reads and hence statistical power. It also introduces a stochastic component to the analysis, so the results depend on the rarefaction replicate sampled.

In Hu et al. (2021), we presented two ways of extending the LDM F-statistic to aggregate information over multiple rarefactions: the LDM-F(R), which uses the average of the F-statistic over R rarefaction replicates as a test statistic, and the LDM-A, which averages the numerator and denominator of the F statistic separately and then uses the ratio of these averages as a test statistic. In particular, in LDM-A, the average of the numerator/denominator over all rarefaction replicates (equivalently, the expectation of the numerator/denominator over rarefaction) can be calculated in a closed form, and thus it is recommended over LDM-F(R). We have implemented both LDM-A and LDM-F(R) in 1dm. Note that there is only one data scale, which is presence or absence (i.e., binary).

First, we illustrate the LDM-A method using the throat microbiome data, by calling 1dm with n.rarefy="all":

According to the global results, smoking status (after accounting for the confounders) is significantly associated with the presence and absence of some bacteria (p-value = 0.0086) while pack per year after accounting for smoking status (and the confounders) is not (p-value = 0.759). At the nominal FDR 0.1, we find three OTUs that are differentially present among smokers and non-smokers. Using the code below, we provide a summary table for the detected OTUs, which includes the raw p-value, adjusted p-value (by BH), population-averaged probability of presence, directions of covariate effects, and OTU name (can be substituted by taxonomy assignment); the OTUs are ordered by the raw p-values.

```
### order the detected OTUs by their p-values
> w1 = match(res.ldmA$detected.otu.pa[[1]], colnames(res.ldmA$q.otu.pa))
```

```
# remove [[1]] if there is only one covariate after "~" in the formula for ldm
> o = w1[order(res.ldmA$p.otu.pa[1,w1])]
# If no OTU is detected, we can still provide a summary table for the top (e.g., 10) OTUs
# by re-defining o = order(res.ldmA$p.otu.pa[1,])[1:10]
> summary.ldmA.tab = data.frame(raw.pvalue=signif(res.ldmA$p.otu.pa[1,o],3),
                         adj.pvalue=signif(res.ldmA$q.otu.pa[1,o],3),
                         prob.presence=signif(colMeans(res.ldmA$phi)[o],3),
                         direction=t(ifelse(res.ldmA$beta[1,]>0, "+", "-"))[o,],
                         otu.name=colnames(res.ldmA$q.otu.pa)[o],
                         row.names=NULL)
> colnames(summary.ldmA.tab)[4] = paste("direction.", rownames(res.ldmA$beta[1,]), sep="")
> summary.ldmA.tab
  raw.pvalue adj.pvalue prob.presence direction.SmokingStatusNonSmoker otu.name
    0.000687
                 0.0986
                                0.881
                                                                            3954
1
2
    0.001240
                 0.0986
                                0.119
                                                                             411
3
    0.001410
                 0.0986
                                0.100
                                                                            4363
```

It requires some care to interpret the directions of covariate effects. For example, direction. SmokingStatusNonSmoker = '+' means that the NonSmoker level in the SmokingStatus covariate is associated with higher chance of presence than the Smokers level for OTU "3954". For the detected OTUs, we can also plot the probability of presence in individual samples by smoking status, which are displayed in Figure 5. We first obtain the probability of presence of an OTU in each sample over rarefaction (denoted by phi in the ldm output), and adjust it for the confounding covariates by using the projection operation in the linear regression function lm:

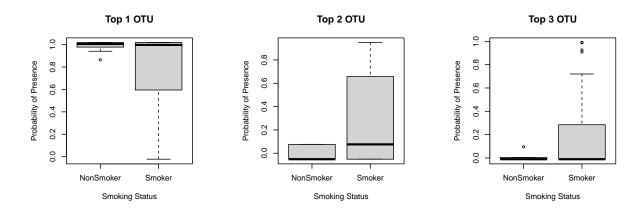


Figure 5 Box plot of probability of presence (adjusted for sex and antibiotic use).

Next, we illustrate the LDM-F(R) method, which can invoked by calling 1dm with binary=TRUE and n.rarefy=5:

```
> res.ldmF <- ldm(formula=throat.otu.tab5 | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,</pre>
                  data=throat.meta, seed=67817,
                  binary=TRUE, n.rarefy=5)
                                                 # parameters for requesting LDM-F(5)
> res.ldmF$p.global.pa
                                      # columns:R=1-5; rows: SmokingStatus, PackYears
       rarefy1
                  rarefy2
                              rarefy3
                                         rarefy4
                                                     rarefy5
cov1 0.0079984 0.00839832 0.00739852 0.00739852 0.00739852
cov2 0.7414000 0.74720000 0.77620000 0.82960000 0.83360000
> res.ldmF$detected.otu.pa
$cov1
character(0)
$cov2
character(0)
```

In Hu and Satten (2021), we presented four ways of extending the PERMANOVA F-statistic to aggregate information over multiple rarefactions: the PERMANOVA-F(R), which uses the average of the F-statistic over R rarefaction replicates as a test statistic, the PERMANOVA-D2(R) and PERMANOVA-D(R), which average the element-wise squared and unsquared distance matrices, respectively, computed for each of R rarefaction replicates for use in calculating the F-statistic, and the PERMANOVA-D2- A_o , which calculates the expectation of the Jaccard or unweighted UniFrac distance matrix over all rarefaction replicates using the oth (o = 1 or 2) order approximation by the delta method. Like LDM-A, PERMANOVA-D2- A_o does not perform any actual rarefaction and essentially uses all data in a non-stochastic manner, and thus it is recommended over the other three methods.

First, we illustrate the PERMANOVA-D2-A₂ method, which can be invoked by first calling jaccard.mean or unifrac.mean for calculating the expected squared Jaccard or unweighted UniFrac distance matrix and then calling permanovaFL with square.dist=FALSE:

```
> res.jaccard <- jaccard.mean( throat.otu.tab5 )</pre>
> dist.mean.sq <- res.jaccard$jac.mean.sq.o2</pre>
# res.unifrac <- unifrac.mean(throat.otu.tab5, throat.tree)</pre>
# dist.mean.sq <- res.unifrac$unifrac.mean.sq.o2</pre>
> res.perm.D2A2 <- permanovaFL(dist.mean.sq | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,</pre>
                               data=throat.meta, seed=82955,
                               square.dist=FALSE) # parameters for requesting PERMANOVA-D2-A2
> res.perm.D2A2$p.permanova
    cov1
             cov2
0.00319936 0.92340000
   The expected squared Jaccard or unweighted UniFrac distance matrix, generated as part of the
PERMANOVA-D2-A<sub>2</sub> method, can be used as if it were an ordinary squared distance matrix, for
example, for performing ordination. The code below generated the ordination plot based on the
Jaccard distance (after removing confounding directions), which is shown in Figure 6:
> adj.dist.mean.sq <- adjust.data.by.covariates(formula= ~ Sex+AntibioticUse,
                                                 data=throat.meta,
                                                 dist=dist.mean.sq, square.dist=FALSE)$adj.dist
> PCs <- eigen(adj.dist.mean.sq, symmetric=TRUE)</pre>
> color = rep("blue", length(throat.meta$SmokingStatus))
> w = which(throat.meta$SmokingStatus=="Smoker")
> color[w] = "red"
> plot(PCs$vectors[,1], PCs$vectors[,2], xlab="PC1", ylab="PC2",
     col=color, main="Smokers vs. non-smokers")
> legend(x="topleft", legend=c("smokers", "non-smokers"), pch=c(21,21),
       col=c("red","blue"), lty=0)
> ordiellipse(ord=PCs$vectors, groups=factor(throat.meta$SmokingStatus, exclude=c()),
             conf=0.9, col=c("blue", "red"))
   Then, we illustrate the other three methods.
### PERMANOVA-F(R)
> res.perm.F <- permanovaFL(throat.otu.tab5 | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,
                             data=throat.meta, seed=82955,
                              dist.method="jaccard", binary=TRUE,
                                                                                # parameters
                                                             # for requesting PERMANOVA-F(5)
                              n.rarefy=5)
> res.perm.F$p.permanova
          rarefy1
                      rarefy2
                                  rarefy3
                                             rarefy4
                                                         rarefy5
```

cov1 0.00159968 0.00159968 0.00259948 0.00239952 0.00239952 cov2 0.91560000 0.93460000 0.86560000 0.88860000 0.89240000

Ordination based on Jaccard distance

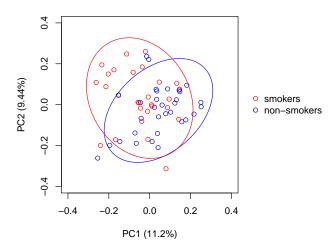


Figure 6 Ordination of the throat microbiome samples based on the expected squared Jaccard distance over rarefaction, which has the effects of gender and antibiotic use removed by projection. The ellipses are 90% confidence limits.

```
### PERMANOVA-D2(R)
> dist.avg.D2 <- avgdist.squared(throat.otu.tab5, dist.method="jaccard", n.rarefy=100)</pre>
> res.perm.D2 <- permanovaFL(dist.avg.D2 | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,
                            data=throat.meta, seed=82955,
                           square.dist=FALSE) # parameter for requesting PERMANOVA-D2(100)
> res.perm.D2$p.permanova
    cov1
             cov2
0.00339932 0.92720000
### PERMANOVA-D(R)
> dist.avg.D <- as.matrix(avgdist(x=throat.otu.tab5, sample=min(rowSums(throat.otu.tab5)),</pre>
                        dmethod="jaccard", tree=NULL, iterations=100, binary=TRUE))
> res.perm.D <- permanovaFL(dist.avg.D | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,
                             data=throat.meta, seed=82955)
> res.perm.D$p.permanova
   cov1
           cov2
0.0029994 0.9202000
```

8 Analyzing correlated samples with complex (restricted) permutations

The functions ldm and permanovaFL accommodate a variety of complex (i.e., restricted) permutations through the permute package. For unclustered data, perm.within.type governs the type of permutation. The default value, permute.within.type="free" performs unrestricted permutations, equivalent to using sample(n.obs, replace=FALSE). Other allowed values are "series", "grid" and "none". If perm.within.type="grid" is specified, then values of perm.within.nrow and perm.within.ncol must be specified. For more information on the effect of choosing perm.within.type to a value other than "free", see the documentation for the permute package. If desired, permutations can also be restricted to groups of observations by specifying strata=strata.id, which restricts permutations to those that preserve the value of strata.id for each observation.

The functions 1dm and permanovaFL use the complex (restricted) permutation schemes to analyze clustered data that preserves the sample correlations. Clusters in the data are identified by having a common value of cluster.id. There are two parameters that control the type of permutations possible with clustered data: perm.between.type and perm.within.type. The allowable values of perm.within.type are as described in the previous paragraph, while the allowable values of perm.between.type are "free", "none" and "series". To permute only within clusters, choose perm.between.type="none" and perm.within.type="free". To permute only across clusters, choose perm.between.type="free" and perm.within.type="none". To permute both within and between clusters, set both to "free". Note that if perm.between.type has a value other than "none" then all clusters must have the same size. Permutations of clustered data may be further restricted to preserve the value of strata.id by specifying strata=strata.id. Note that the value of strata.id must be the same for each member of a single cluster. If there are only a few observed cluster sizes, permuting within strata defined by cluster size is a way to analyze unbalanced, clustered data.

Users may also use the how function in the permute package to manually specify a restricted permutation. This is accomplished by setting how=how.var where how.var is an object of class how as produced by the permute package. Any permutation scheme allowed by permute can be specified in this way.

8.1 Example dataset 2: simulated data of repeated samples

To illustrate the analysis of repeated samples (i.e., samples within a cluster have the same value for the covariates of interest) using 1dm and permanovaFL, we simulated a dataset based on the relative abundances and overdispersion observed in the throat microbiome data. It consists of data from 50 individuals, each of whom contributed 2 samples. Twenty-five individuals were cases (Y.between = 1), and the remaining ones were controls (Y.between = 0). Metadata include the case-control status (Y.between), a confounding covariate (X.between), and a unique individual identifier (ID). We use "between" in covariate names to indicate that these covariates are between-individual variables. See Hu and Satten (2020) for more details in generating this dataset. We first prepare this dataset:

```
> library(LDM)
> data(sim.otu.tab) # zero columns have been excluded
> data(sim.meta)
>
> otu_presence = which(colSums(sim.otu.tab>0)>=5) # optionally remove OTUs that occur
```

```
> sim.otu.tab5 = sim.otu.tab[,otu_presence] # in fewer than 5 individuals
> dim(sim.otu.tab5)
[1] 100 593
```

The OTU table contains 593 OTUs after excluding OTUs having less than 5 presence in the sample. To test the association of the microbiome with the case-control status Y.between while controlling for the confounder X.between, while also accounting for the clustering structure (so that the case-control status is always the same for all samples from the same individual), we specify cluster.id=ID, perm.between.type="free", and perm.within.type="none" and use the code:

```
> res.ldm.repeated <- ldm(formula=sim.otu.tab5 | X.between ~ Y.between,
                        data=sim.meta, seed=34794,
                        cluster.id=ID,
                                                      # parameters for requesting analysis of
                        perm.within.type="none", perm.between.type="free") # repeated samples
> res.ldm.repeated$n.perm.completed
[1] 61000
> res.ldm.repeated$global.tests.stopped
[1] FALSE
> res.ldm.repeated$otu.tests.stopped
[1] TRUE
> res.ldm.repeated$p.global.omni
[1] 0.00019996
> res.ldm.repeated$detected.otu.omni
 [1] "1583" "3067" "5522" "5443" "2122" "2334" "2245" "2213" "330" "2434" "3619" "4036"
[13] "922" "3954" "3108" "799" "3957" "4599" "596"
> length(res.ldm.repeated$detected.otu.omni[[1]])
Γ1 19
```

With 61000 permutations, the OTU-specific tests have met the stopping criterion and detect 19 OTUs at the nominal FDR 0.1. The global test has not met the stopping criterion of obtaining at least 100 rejections with 5000 permutations; however, we know the *p*-value is going to be very small around 0.00019996 and there is no need to add more permutations to make it more precise.

The syntax of using permanovaFL for this type of data is very similar to ldm, except that the method for calculating the distance matrix (dist.method) should be specified:

8.2 Example dataset 3: simulated data of matched sets of samples

To illustrate the analysis of matched sets of samples (i.e., samples within a cluster have different values for the covariates of interest) using 1dm and permanovaFL, we added to the dataset in Section

8.1 a within-individual case-control status Y.within and a within-individual covariate X.within. In particular, Y.within is always 0 for one sample and 1 for the other sample from the same individual. To test the association of the microbiome with the case-control status Y.within while controlling for the potential confounder X.within, while also accounting for the clustering structure (so that the case-control status is always different for the two samples from the same individual), we specify cluster.id=ID, perm.between.type="none", and perm.within.type="free". As described in Zhu et al. (2020), the indicator variables for individuals should be adjusted as covariates to constrain the test within individuals.

```
> res.ldm.matched <- ldm(formula=sim.otu.tab5 | as.factor(ID) + X.within ~ Y.within,
                       data=sim.meta, seed=34794,
                       cluster.id=ID,
                                                  # parameters for requesting analysis of
                       perm.within.type="free", perm.between.type="none") # matched sets
> res.ldm.matched$n.perm.completed
Γ17 71000
> res.ldm.matched$global.tests.stopped
[1] TRUE
> res.ldm.matched$otu.tests.stopped
[1] TRUE
> res.ldm.matched$p.global.omni
[1] 0.435
> res.ldm.matched$detected.otu.omni
$cov1
character(0)
```

With 71000 permutations, both the global test and OTU-specific tests have met the stopping criterion. The global test is non-significant with p-value 0.435 and the OTU-specific tests detect 0 significant OTUs.

Again, the syntax of using permanovaFL for this type of data is very similar to ldm, except that the method for calculating the distance matrix (dist.method) should be specified:

8.3 Testing between- and within-individual variables simultaneously

We also demonstrate the case in which you set both perm.within.type="free" and perm.between.type="free" Note that we don't adjust for the ID variable as a confounder.

```
res.ldm.perm.both <- ldm(formula=sim.otu.tab5 | X.within ~ Y.between + Y.within,
data=sim.meta, seed=34794,
cluster.id=ID,
perm.within.type="free", perm.between.type="free")
```

9 Omnibus test using 1dm (LDM-omni3) and permanovaFL

Because LDM applied to relative abundance data works well when associated taxa are abundant and LDM applied to presence-absence data works well when associated taxa are relatively rare, we further developed another omnibus test, LDM-omni3 (Zhu et al., 2022); LDM-omni3 allows simultaneous consideration of data at the three taxon scales (i.e., relative abundance, arcsin-root transformed relative-abundance, and presence-absence), thus offering optimal power across scenarios with different association mechanisms. In a similar spirit, we extended the permanovaFL function to provide an omnibus test that allows simultaneous consideration of multiple distance matrices.

We use the same data and fit the same model as in Section 6, i.e., testing the association of the throat microbiome with smoking status and then test the association with pack per year after removing the association with smoking status, both tests accounting for the confounding effects of sex and antibiotic use. Now we request the new omnibus test, LDM-omni3 by setting test.omni3=TRUE (default is FALSE).

We print the global p-values of the LDM-omni3 test, one for each of the two covariates, as well as the global p-values of all other global tests that are related to LDM-omni3. The test named with "freq" is based on the relative abundance data for all taxa; the test named with "pa" is based on the arcsin-root transformed relative abundance data for all taxa; the test named with "pa" is based on the presence-absence data for all taxa; the test named with "harmonic" is based on the harmonic mean p-value combination method to combine taxon-specific p-values p.otu.omni3, each of which is from an omnibus test at the taxon combining results from all three data scales; the test named with "fisher" is based on Fisher's p-value combination method to combine p.otu.omni3; the test named with "omni" is an omnibus test combining results of two global tests: "freq" and "tran"; finally, the LDM-omni3 test, named with "omni3" is an omnibus test combing results of five global tests: "freq", "tran", "pa", "harmonic", and "fisher".

The p-values of the five contributing tests for LDM-omni3 give us information on which data scale has driven the significance of the "omni3" test. Here, the "tran" test has the smallest p-values 0.00219956 for testing cov1 and seems to be the driver for the small "omni3" p-value 0.00539892.

Next, we print the number of detected OTUs for cov1 by the LDM-omni3 test, as well as the numbers of detected OTUs for cov1 by all other taxon-specific tests, i.e., the test based on the relative abundance data for each taxon ("freq"), the test based on the arcsin-root relative abundance data for each taxon ("tran"), the test based on the presence-absence data for each taxon ("pa"), the

omnibus test LDM-omni ("omni") that combines the results of the "freq" and "tran" tests at each taxon, and the new omnibus test LDM-omni3 ("omni3") that combines the results of the "freq", "tran", and "pa" tests at each taxon.

Note that both omnibus tests (LDM-omni and LDM-omni3) are available for all analyses that are supported by LDM, including the mediation analysis (Section 10).

To obtain an omnibus test based on permanovaFL, one way is to specify multiple distance metrics in dist.method:

We obtained the p-values for the omnibus test in output p.permanova.omni, and we also obtained the p-values for each distance metric from p.permanova which provide insights into which distance has driven the significance of the omnibus p-value.

Note that the implementation above assumes no rarefaction for calculating any distance. The implementation below is to first calculate the distance matrices externally, which can utilize our function <code>jaccard.mean</code> or <code>unifrac.mean</code> to calculate the expected Jaccard or unweighted UniFrac distance over all rarefactions, and then provide these distance matrices through <code>dist.list</code>. Since these distance matrices have already been squared, we turn off <code>square.dist</code>.

> res.perm.omni.1\$p.permanova

cov1 cov2 dist1 0.00319936 0.9234 dist2 0.00219956 0.6450

10 Mediation analysis of the microbiome using 1dm (LDM-med) and permanovaFL

In Yue and Hu (2021), we propose a new approach to mediation analysis of the microbiome based on inverse regression that regresses the microbiome data at each taxon on the exposure and the exposure-adjusted outcome. Then the p-values for testing the coefficients of the exposure and the exposure-adjusted outcome are used to test mediation at both the community and individual taxon levels. This approach fits nicely into our LDM framework, so our new method LDM-med, implemented in the LDM framework, enjoys all the features of the LDM, e.g., allowing an arbitrary number of taxa to be tested simultaneously, supporting continuous, discrete, or multivariate exposures and outcomes (including survival outcomes; see Section 11) as well as adjustment of confounders, and offering analysis of the taxon data at the relative abundance or presence-absence scale. In a similar spirit, we also extended permanovaFL to provide a global test of microbial mediation at the community level.

To call the mediation analysis using 1dm, the formula takes the specific form

```
otu.table ~ exposure + outcome
or most generally
otu.table | (set of confounders) ~ (set of exposures) + (set of outcomes),
```

in which there should be exactly two terms on the right hand side of the regression, corresponding to the exposure(s) and the outcome(s), the outcome(s) must appear after the exposure(s), and the covariates or confounders that we wish to adjust must appear after "|".

We have simulated an outcome variable Outcome and added it to the metadata of the throat microbiome dataset. Here we test the mediation effects of the microbiome, at both the community level and the OTU level, that mediate the effect of SmokingStatus on Outcome. This can be easily achieved by setting test.mediation=TRUE.

We found that the microbiome played a significant mediation role and OTUs "2434", "171", and "4703" are the specific mediators. From the same run, we can obtain the bivariate associations between SmokingStatus and the microbiome, the microbiome and Outcome conditional on SmokingStatus, both at the community level and the OTU levels. Both bivariate associations have very small p-values, which corroborate with the existence of mediation effects.

```
> res.ldm.med$p.global.omni
cov1 cov2
0.00089991 0.00569943
```

```
> res.ldm.med$p.otu.omni[,res.ldm.med$med.detected.otu.omni]
2434 171 4703
cov1 0.0002499931 0.0067333333 0.0003055471
cov2 0.0003199872 0.0000399984 0.0002799888
```

Now we perform the new omnibus test, LDM-omni3, for the mediation of the microbiome by adding test.omni3=TRUE:

```
> res.ldm.med.omni3 <- ldm(throat.otu.tab5 | (Sex+AntibioticUse) ~ SmokingStatus + Outcome,
                    data=throat.meta, seed=67817, n.cores=4,
                    test.mediation=TRUE, # parameter for requesting mediation analysis
                    test.omni3=TRUE)
                                          # parameter for requesting LDM-omni3
> tab.global <- c(res.ldm.med.omni3$med.p.global.freq,</pre>
                     res.ldm.med.omni3$med.p.global.tran,
                     res.ldm.med.omni3$med.p.global.pa,
                     res.ldm.med.omni3$med.p.global.harmonic,
                     res.ldm.med.omni3$med.p.global.fisher,
                     res.ldm.med.omni3$med.p.global.omni,
                     res.ldm.med.omni3$med.p.global.omni3)
[1] 0.00049995 0.00439956 0.1587 0.00109989 0.9932 0.00079992 0.00119988
> tab.otu <- c(length(res.ldm.med.omni3$med.detected.otu.freq),</pre>
                  length(res.ldm.med.omni3$med.detected.otu.tran),
                  length(res.ldm.med.omni3$med.detected.otu.pa),
                  length(res.ldm.med.omni3$med.detected.otu.omni),
                  length(res.ldm.med.omni3$med.detected.otu.omni3))
[1]
       2
            3
                      3
```

Finally, we perform mediation analysis within the PERMANOVA framework using permanovaFL, considering two distance matrices Bray-Curtis and Jaccard and the omnibus test:

11 Testing associations with censored survival times using 1dm and permanovaFL

In Hu et al. (2022), we extended the LDM to test survival outcomes. We propose to use the Martingale residuals or the deviance residuals obtained from the Cox model as continuous covariates in the LDM; the Cox model should regress the survival outcome on non-microbiome covariates that are related to the survival outcome. We further construct tests that combine the results of analyzing each set of residuals separately. We also extended PERMANOVA to handle survival outcomes in a similar manner.

We have simulated censored survival times (Time, Status) and added them to the metadata of the throat microbiome data. Here we test microbiome associations with the survival outcome, adjusting for sex and antibiotic use. Because sex and antibiotic are also risk factors for the survival outcome, we adjust for them in both the Cox model and the LDM. First we prepare the Martingale and deviance residuals by fitting the Cox model:

> library(survival)

```
> cox.fit = coxph(Surv(Time, Status) ~Sex+AntibioticUse , data=throat.meta)
> resid.Martingale = residuals(cox.fit, type='martingale')
> resid.deviance = residuals(cox.fit, type='deviance')
Then we run ldm with one residual variable specified in the formula and the other specified in
other.surv.resid. We also request the omnibus test LDM-omni3.
> res.ldm.surv <- ldm(formula=throat.otu.tab5 | (Sex+AntibioticUse) ~ resid.Martingale,</pre>
                    data=throat.meta, seed=67817, n.cores=4,
                    test.omni3=TRUE,
                                                       # requesting LDM-omni3
                    other.surv.resid=resid.deviance) # requesting analysis of
                                        # the other residual and the combination test
> res.ldm.surv$p.global.omni3
      cov1
0.01259748
> res.ldm.surv$p.global.omni3.OR  # results from "other.surv.resid"
cov1
0.02
> res.ldm.surv$p.global.omni3.com # combination test of both residuals
  cov1
0.0226
> res.ldm.surv$detected.otu.omni3
$cov1
[1] "2434"
> res.ldm.surv$detected.otu.omni3.OR
$cov1
[1] "2434" "1490" "3538"
> res.ldm.surv$detected.otu.omni3.com
$cov1
[1] "2434" "3538"
```

Similarly, we run permanovaFL with other.surv.resid:

```
> res.perm.surv.omni <- permanovaFL(throat.otu.tab5 | (Sex+AntibioticUse) ~ resid.Martingale,
                  data=throat.meta, seed=82955, n.cores=4,
                  dist.method=c("bray", "jaccard")) # requesting the omnibus test
                  other.surv.resid=resid.deviance, # requesting analysis of
                                         # other residual and the combination test
> res.perm.surv.omni$p.permanova
  dist1
           dist2
0.0069986 0.1328000
> res.perm.surv.omni$p.permanova.OR
     dist1
                dist2
0.00779844 0.16860000
> res.perm.surv.omni$p.permanova.com
                dist2
0.01039792 0.17180000
> res.perm.surv.omni$p.permanova.omni
[1] 0.01159768
> res.perm.surv.omni$p.permanova.omni.OR
[1] 0.01359728
> res.perm.surv.omni$p.permanova.omni.com
[1] 0.0169966
```

Finally, we illustrate how to perform mediation analysis with a censored survival time as the outcome. We consider smoking status as the exposure and sex and antibiotic use as confounders. We first run ldm and request the omnibus test LDM-omni3:

Then, we run permanovaFL for the same mediation model with a survival outcome and obtain omnibus tests by specify "bray" and "jaccard" in dist.method. We also consider one rarefaction and averaged results over two rarefactions.

> res.perm.surv.med\$med.p.permanova.com

```
rarefy1 rarefy2
dist1 0.0934 0.1022
dist2 0.5310 0.4890
> res.perm.surv.med$med.p.permanova.omni.com
rarefy1 rarefy2
0.1410 0.1502
```

Alternatively, we provide the externally calculated distance matrices to permanovaFL and turn off square.dist:

12 Miscellaneous

12.1 Simple linear regression with permutation using 1dm

In essence, 1dm performs a simple linear regression with permutation-based inference at each taxon. In fact, 1dm can be generally applied to data (in addition to the OTU table data) that do not follow normal distributions. In particular, 1dm can be applied to analyze an alpha diversity measure or the relative abundance of a particular OTU in association of covariates of interest. Note that both measurements are univariate variables. To this end, we should suppress scale.otu.table and turn on freq.scale.only.

```
### The alpha diversity for richness
> richness = matrix(rowSums(throat.otu.tab5>0), ncol=1)
> res.alpha.ldm <- ldm(richness | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,</pre>
                     data=throat.meta, seed=67817,
                     scale.otu.table=FALSE, freq.scale.only=TRUE) # parameters for
                                            # requesting a simple linear regression
> res.alpha.ldm$p.global.freq
 cov1 cov2
0.528 0.896
### The relative abundance of one OTU
> one.otu = throat.otu.tab5[,5,drop=FALSE]/rowSums(throat.otu.tab5)
> res.1otu.ldm <- ldm(one.otu | (Sex+AntibioticUse) ~ SmokingStatus+PackYears,</pre>
                  data=throat.meta, seed=67817,
                  scale.otu.table=FALSE, freq.scale.only=TRUE)
> res.1otu.ldm$p.global.freq
 cov1 cov2
0.909 0.959
```

12.2 Turning off the sequential stop rule

For the OTU-specific tests, you can turn off the sequential stop rule of Sandve et al. (2011) by setting both n.rej.stop and n.perm.max to the same, fixed number of permutations you want. Using the previous univariate analysis as an example:

13 References

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