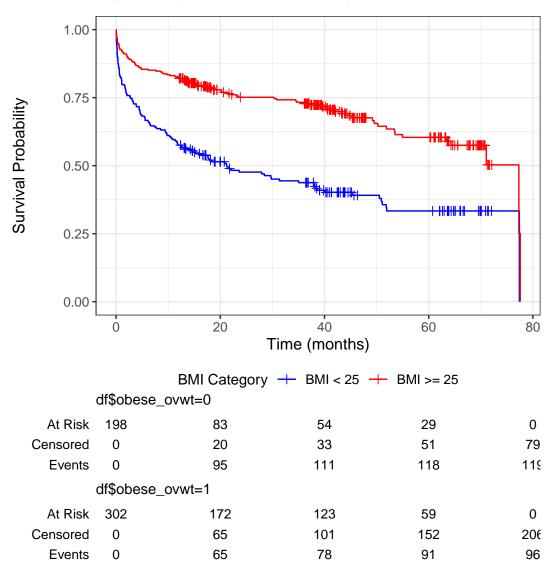
Homework2

Yuki Joyama

1. Logrank and Score Tests for MI Study

(a) Below is the plot of estimated Kaplan-Meier survival functions for the endpoint of death for those who are obese or overweight $(BMI \ge 25)$ vs. those of normal weight (which we will define here as BMI <



Difference in the censoring patterns between the two BMI groups:

25):

- There is a higher frequency of censoring events throughout the study period in obese or overweight group.
- The censoring events appear to occur at similar time points for both groups, notably around 18 months, 40 months, and 67 months

```
# the number of patients who are overweight or obese (BMI >= 25)
overweight_obese_count <- df |>
  filter(bmi >= 25) |>
  nrow()

# the percentage of overweight or obese patients out of 500
pct_overweight_obese <- (overweight_obese_count / 500) * 100</pre>
```

60.4% of the patients out of 500 are either overweight or obese.

(b) I will implement log-rank test and Wilcoxon test using CMH approach. Below is the output from SAS.



$$\chi^2_{MH} = 41.4301 \text{ (p-value } < 0.0001)$$

 $\chi^2_{W} = 43.6153 \text{ (p-value } < 0.0001)$

The both tests suggest that there is an association between whether being overweight/obese and death. The log-rank test gives equal weight to all time points, while the Wilcoxon test gives more weight to early events. Given the KM curve, there is more differences in survival in early stage, so we can assume that Wilcoxon test would yield a larger test statistic.

(c)

The LIFETEST Procedure

Testing Homogeneity of Survival Curves for dthtime over Strata

Rank Statistics					
obese_ovwt	Fleming				
0	44.682				
1	-44.682				

Covariance Matrix for the Fleming Statistics									
obese_ovwt	bese_ovwt 0 1								
0	48.1884	-48.1884							
1	-48.1884	48.1884							

Test	of Equality ov	er Str	ata			
Test	Chi-Square	DF	Pr > Chi-Square			
Fleming(0,0)	41.4301	1	<.0001			

The LIFETEST Procedure

Testing Homogeneity of Survival Curves for dthtime over Strata

Rank Statistics					
obese_ovwt	Fleming				
0	36.014				
1	-36.014				

Covariance Matrix for the Fleming Statistics								
obese_ovwt 0 1								
0	30.4221	-30.4221						
1	-30.4221	30.4221						

Test	Test of Equality over Strata							
Test	Chi-Square	DF	Pr > Chi-Square					
Fleming(1,0)	42.6330	1	<.0001					

The LIFETEST Procedure

Testing Homogeneity of Survival Curves for dthtime over Strata

Rank Statistics							
obese_ovwt Fleming							
0	6.399						
1	-6.399						

Covariance Matrix for the Fleming Statistics									
obese_ovwt 0 1									
0	1.36298	-1.36298							
1	-1.36298	1.36298							

Test	Test of Equality over Strata							
Test	Chi-Square	DF	Pr > Chi-Square					
Fleming(1,1)	30.0436	1	<.0001					

$$p=0, q=0: \chi_{FH}^2 = 41.4301 \text{ (p-value } < 0.0001)$$

$$\begin{array}{l} \mathrm{p}{=}0,\,\mathrm{q}{=}0\colon\,\chi_{FH}^2=41.4301\;(\mathrm{p}\text{-value}<\!0.0001)\\ \mathrm{p}{=}1,\,\mathrm{q}{=}0\colon\,\chi_{FH}^2=42.6330\;(\mathrm{p}\text{-value}<\!0.0001)\\ \mathrm{p}{=}1,\,\mathrm{q}{=}1\colon\,\chi_{FH}^2=30.0436\;(\mathrm{p}\text{-value}<\!0.0001) \end{array}$$

p=1, q=1:
$$\chi^2_{EII} = 30.0436$$
 (p-value < 0.0001)

When p=0, q=0, the test statistic is equal to that of log-rank test. When p=1, q=0, the test is similar to the Peto-Prentice test and it is closer to the test statistic of Gehan's Wilcoxon test in (b). When p=1, q=1, the Fleming-Harrington test gives more weight to events happening around the median time. The smaller test statistic indicates fewer mid-term differences between two BMI groups.

If most events happen earlier, we expect p=1, q=0 to be more powerful than log-rank test, and if most events happen around the middle of the study period, we expect p=1, q=1 to be more powerful. Fleming-Harrington may be less powerful compared to log-rank test when most of the events occur later in the follow-up period.

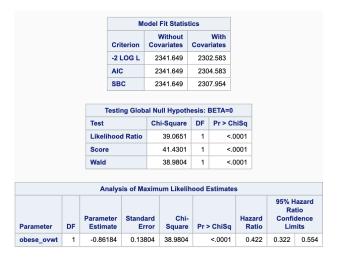
(d) I will use a logistic regression model to test whether the proportions of deaths during follow-up differ for those who are over-weight/obese versus those of normal weight.

```
##
## Call:
  glm(formula = dthstat ~ obese ovwt, family = binomial, data = df)
##
##
  Coefficients:
               Estimate Std. Error z value Pr(>|z|)
##
  (Intercept)
                 0.4097
                            0.1451
                                      2.823 0.00476 **
  obese ovwt
                -1.1732
                            0.1906 -6.155 7.51e-10 ***
##
                   0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
## Signif. codes:
##
##
   (Dispersion parameter for binomial family taken to be 1)
##
##
       Null deviance: 683.31
                              on 499
                                       degrees of freedom
## Residual deviance: 644.01
                              on 498
                                      degrees of freedom
## AIC: 648.01
##
## Number of Fisher Scoring iterations: 4
```

The result indicates that being over-weight/obese has approximately 69.06% lower odds of death compared to non-obese individuals when adjusting for no other variables, and this is statistically significant. This conclusion (being over-weight/obese have somewhat positive effect on mortality) is similar to the results of survival analysis in (b) and (c). Survival analysis may become more powerful when there are considerable number of censoring in the study subject and the data is highly skewed.

2. Cox Model for Myocardial Infarction Study

(a) Below is the SAS output of Cox PH model and Wald, Score, and LR tests.



Given the results of MLE, over-weight/obese individuals have hazard ratio of 0.422 (p-value <0.0001). In other words, over-weight/obese individuals have a 57.8% lower risk of death compared to normal-weight individuals.

```
Wald test: \chi^2 = 38.9804 (p-value <0.0001)
Score test: \chi^2 = 41.4301 (p-value <0.0001)
LR test: \chi^2 = 39.0651 (p-value <0.0001)
```

The three test indicates that the model including covariate obese_ovwt is significant. The score test has

a test statistic that is exactly the same as the log-rank test from 1(b), because there is only one binary covariate in this model.

(b) The adjusted Cox PH model (age, gender, systolic blood pressure, type of MI) is shown below:

	Model Fit Statistics										
		Cri	Criterion		Without Covariates		With Covariates				
		-21	LOG L	2	341.649	218	2.512				
		AIC	;	2	341.649	219	2.512				
		SB	С	2	341.649	220	9.365				
Testing Global Null Hypothesis: BETA=0											
		Test		Ch	i-Square	DF	Pr > Cl	niSq			
		Likelihoo	d Ratio	tio 159.1363		5	<.0001				
		Score			148.1797	5	<.(0001			
		Wald			139.0436	5	<.0001				
		Analys	is of Ma	ıxim	um Likeli	hood E	stimate	s			
Parameter	DF	Parameter Estimate	Standa Er	ard ror	Chi- Square		• ChiSq	Haz Ra	ard	95% F Ra Confi Lin	dence
obese_ovwt	1	-0.44895	0.146	557	9.3827		0.0022	0.	638	0.479	0.851
age	1	0.05972	0.006	38	87.5696		<.0001	1.0	062	1.048	1.075
gender	1	-0.12025	0.142	244	0.7128		0.3985	0.	887	0.671	1.172
sysbp	1	-0.00354	0.002	219	2.6086		0.1063	0.	996	0.992	1.001
mitype	1	-0.33522	0.172	214	3.7923		0.0515	0.	715	0.510	1.002

Summary of findings

Unadjusted HR: obese_ovwt 0.422 (95% CI: 0.322-0.544) Adjusted HR: obese_ovwt 0.638 (95% CI: 0.479-0.851)

age $1.062~(95\%~\mathrm{CI:}~1.048\text{-}1.075)$ gender $0.887~(95\%~\mathrm{CI:}~0.671\text{-}1.172)$ sysbp $0.996~(95\%~\mathrm{CI:}~0.992\text{-}1.001)$ mitype $0.715~(95\%~\mathrm{CI:}~0.510\text{-}1.002)$

The unadjusted HR of overweight/obesity for mortality was 0.422 (95% CI: 0.322-0.544), indicating a significant protective effect. Adjusting for other covariates reduces the protective effect, but the HR remains significant at 0.638 (95% CI: 0.479-0.851), suggesting that adjustment for factors such as age and blood pressure slightly reduces but does not eliminate the association.

(c)

i. Test for obese_ovwt from Cox PH model, stratifying by gender

Summary of the Number of Event and Censored Values									es
Str	atum	gender	Total	Event	Censored			Percent Censored	
	1	0	300	111			189	63	3.00
	2	1	200	104			96	48	3.00
	Total		500	215			285	57	7.00
Convergence Status									
Convergence criterion (GCONV=1E-8) satisfied.									
Model Fit Statistics									
		Criterio		Without /ariates		Covai	With		
		-2 LOG		154.653		2120.837			
		AIC		154.653	-	2122.837			
		SBC	2	154.653	†	2126.208			
		Testing G	lobal N	ıll Нуро	the	sis: E	BETA:	=0	
	Test	t	Ch	i-Squar	е	DF	Pr>	ChiSq	
	Like	lihood Rat	io	33.816	0	1	<.0001		
	Sco	re		35.369	8	1 <.0		<.0001	
	Wald			33.6880 1			<.0001		
	-	Analysis of	Maxim	um Like	liho	ood E	stima	ites	
ımeter	DF	Paramete Estimat		ndard Error	Ch	ni-Squ	uare	Pr > C	hiSq

Score test statistic: $\chi^2=35.3698$ (p-value <0.001) HR for obese_ovwt: 0.442 (p-value <0.001)

ii. Test for obese_ovwt from Cox PH model, controlling for gender

		M																																			
		Criterion	Without With Covariates																																		
		-2 LOG L	2455.158	3 2	41	3.734																															
		AIC	2455.158	3 2	41	7.734																															
		SBC	2455.158	3 2	42	4.475																															
		Testing Global Null Hypothesis: BETA=0																																			
	Tes	t	Chi-Squa	re Di	F	Pr>	ChiSq																														
	Like	lihood Ratio	41.423	39	2		<.0001																														
	Sco	Score 43.8816		16	2 <.0		<.0001																														
	Wal	d	41.390)8	2		<.0001																														
	- 1	Analysis of Ma	aximum Lik	elihoo	d E	stima	tes																														
Parameter	DF	Parameter Estimate	Standard Error	Chi-Square			Pr > CI	niSq	Hazard Ratio																												
obese_ovwt	1	-0.81648	0.14066	3	33.6933		33.693		33.6933		33.6933		33.6933		33.6933		33.6933		33.6933		33.6933		<.(0001	0.442												
gender	1	0.22053	0.14035	2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		2.4689		1161	1.247

Score test statistic: $\chi^2=43.8816$ (p-value $<\!0.001)$ HR for obese_ovwt: 0.442 (p-value $<\!0.001)$

HR for gender: 1.247 (p-value 0.1161)

iii. Log-rank test (linear rank) for obese_ovwt, stratifying by gender

	Univa	ariate Chi-S	quares for	the Log	-Rank	Test	
Variab	le	Test Statistic	Standard Error	Chi-S	quare		Pr > Square
obese_c	obese_ovwt		6.8987	35	.3698	<.0001	
	obese_ovwt			obese_ovwt 47.5918			
Forward S	tepwi	se Sequen	ce of Chi-S	quares	for the	Log-R	ank Test
Forward S	Stepwi DF	se Sequen	Pr	>	for the Chi-Sq Incren	uare	eank Test Pr > Incremen

Log-rank (linear rank) $\chi^2 = 35.3698$ (p-value <0.0001)

Log-rank (linear rank) test statistic is equivalent to score test statistic in (i).

In Cox PH model, by controlling for gender, the score test statistics increased from 35.3698 to 43.8816, indicating a better fit with the data. This suggests that controlling for gender has a higher power than stratifying by it.

(d) Stratification allows the baseline hazard to vary by gender, which is beneficial when gender is a strong confounder for the outcome and the proportional hazards assumption does not hold across genders. One of the disadvantages is the potential loss of power, as seen in (c), due to the smaller size within each stratum. To further examine whether stratification is appropriate, I would suggest testing the proportional hazards assumption, such as using the Schoenfeld residual test.

3. Model Interpretation - Myocardial Infarction Study

Variable Name	Estimate	s.e.	P-value
Age	0.0500	0.0066	< 0.0001
Heart rate	0.0112	0.0029	0.0001
Diastolic BP	-0.0107	0.0035	0.0024
Sex (0=male, 1=female)	-0.2732	0.1442	0.0581
Congestive heart failure	0.7816	0.1469	< 0.0001
BMI	-0.0453	0.0163	0.0055

(a) Given the coefficient estimate table, the estimated hazard for death is:

$$\begin{split} \lambda(t,Z) &= \lambda_0(t) exp(\beta_1 \cdot Age + \beta_2 \cdot HR + \beta_3 \cdot dBP + \beta_4 \cdot Sex + \beta_5 \cdot CHF + \beta_6 \cdot BMI) \\ &= \lambda_0(t) exp(0.05 \cdot Age + 0.0112 \cdot HR - 0.0107 \cdot dBP - 0.2732 \cdot Sex + 0.7816 \cdot CHF - 0.0453 \cdot BMI) \end{split}$$

(b) "Baseline" group is defined as a model with the following values:

Age: age = 0Heart rate: hr = 0Diastolic BP: diasp = 0Sex: gender = 0 (male)

Congestive heart failure: chf = 0 (no)

BMI: bmi = 0

There are no observations that fall into such a group.

(c) The estimated HR for death associated with bmi = 30 vs. bmi = 24, holding all other covariates constant:

```
\begin{array}{l} HR = \frac{exp(0.05 \cdot Age + 0.0112 \cdot HR - 0.0107 \cdot dBP - 0.2732 \cdot Sex + 0.7816 \cdot CHF - 0.0453 \times 30)}{exp(0.05 \cdot Age + 0.0112 \cdot HR - 0.0107 \cdot dBP - 0.2732 \cdot Sex + 0.7816 \cdot CHF - 0.0453 \times 24)} \\ = exp(0.0453 \times 30 - 0.0453 \times 24) = 0.76 \end{array}
```

The 95% CI for this estimate can be obtained by calculating the following:

```
L = exp(-0.0453 \times 6 - 1.96 \times 0.0163 \times 6) = 0.63

U = exp(-0.0453 \times 6 + 1.96 \times 0.0163 \times 6) = 0.92
```

The estimated HR 0.76 indicates that individuals with a BMI of 30 have a 24% lower hazard of death compared to individuals with a BMI of 24, all else being equal. The 95% CI is (0.63, 0.92), suggesting that this HR estimate is statistically significant.

(d) The estimated HR of death for a subject aged 60 years vs. 50 years, holding all other covariates constant:

```
HR = \frac{exp(0.05\times60+0.0112\cdot HR-0.0107\cdot dBP-0.2732\cdot Sex+0.7816\cdot CHF-0.0453\cdot BMI)}{exp(0.05\times50+0.0112\cdot HR-0.0107\cdot dBP-0.2732\cdot Sex+0.7816\cdot CHF-0.0453\cdot BMI)} = exp(0.05\times60-0.05\times50) = 1.65
```

The 95% CI for this estimate can be obtained by calculating the following:

```
L = exp(0.05 \times 10 - 1.96 \times 0.0066 \times 10) = 1.45

U = exp(0.05 \times 10 + 1.96 \times 0.0066 \times 10) = 1.88
```

The estimated HR 1.65 indicates that individuals aged 60 years have a 65% higher hazard of death compared to individuals aged 50 years, all else being equal. The 95% CI is (1.45, 1.88), suggesting that this HR estimate is statistically significant.

(e) The estimated HR of death for a female subject aged 60 years with BMI of 24 vs. male sugject aged 50 years with BMI of 30, holding all other covariates constant:

```
HR = \frac{exp(0.05\times60+0.0112\cdot HR-0.0107\cdot dBP-0.2732\times1+0.7816\cdot CHF-0.0453\times24)}{exp(0.05\times50+0.0112\cdot HR-0.0107\cdot dBP-0.2732\times0+0.7816\cdot CHF-0.0453\times30)} = exp(0.05\times60-0.2732\times1-0.0453\times24-0.05\times50+0.2732\times0+0.0453\times30) = 1.65
```

(f) Hazard ratio of female vs. male, holding all other variables constant: HR = exp(-0.2732) = 0.76 95% CI for this:

```
L = exp(-0.2732 - 1.96 \times 0.1442) = 0.57

U = exp(-0.2732 + 1.96 \times 0.1442) = 1.01
```

The HR implies that, all else being equal, female is associated with 24% lower risk of death compared to male. However, the 95% CI includes 1 and suggests that this is not statistically significant.

4. Impact of Ties on Cox Model Estimation and Testing