STAT362 Homework Assignment 5

Sharon O'Boyle

Problem 1, Problem 3.6, p. 117

# SAS Program

\* Sharon O'Boyle; \* Stat 362; \* Homework Assignment 5; \* Problem 3.6, p. 117; \* Program to compute Odds Ratio and 95% Confidence Interval for nonionizing radiation; DATA ODDS; INPUT OUTCOME \$ EXPOSURE \$ COUNT; DATALINES; CASE 1-YES 50 CASE 2-NO 500 CONTROL 1-YES 40 CONTROL 2-NO 500 ; **PROC PRINT** DATA=ODDS; TITLE 'PRINTING DATASET TO CHECK FOR CORRECT INPUT'; RUN; **PROC FREQ** DATA=ODDS; TABLES EXPOSURE\*OUTCOME / CMH; WEIGHT COUNT; TITLE "Problem 3.6: Compute Odds Ratio and 95% Confidence Interval for non-ionizing radiation"; RUN;

# SAS Log

```
NOTE: Copyright (c) 2002-2010 by SAS Institute Inc., Cary, NC, USA.
NOTE: SAS (r) Proprietary Software 9.3 (TS1M1)
     Licensed to GEORGE MASON UNIVERSITY-SFA T&R, Site 70008900.
NOTE: This session is executing on the W32 7PRO platform.
NOTE: Updated analytical products:
SAS/STAT 9.3 M1, SAS/ETS 9.3 M1, SAS/OR 9.3 M1
NOTE: SAS initialization used:
     real time
                        6.03 seconds
     cpu time
                        1.59 seconds
    * Sharon O'Boyle;
1
    * Stat 362;
2
   * Homework Assignment 5;
3
4
5
    * Problem 3.6, p. 117;
6
    * Program to compute Odds Ratio and 95% Confidence Interval for
non-ionizing radiation;
7
8
    DATA ODDS;
9
        INPUT OUTCOME $ EXPOSURE $ COUNT;
10
   DATALINES;
NOTE: The data set WORK.ODDS has 4 observations and 3 variables.
NOTE: DATA statement used (Total process time):
      real time
                         0.28 seconds
                        0.10 seconds
     cpu time
15
   ;
16
17
    PROC PRINT DATA=ODDS;
NOTE: Writing HTML Body file: sashtml.htm
    TITLE 'PRINTING DATASET TO CHECK FOR CORRECT INPUT';
18
19
    RUN:
NOTE: There were 4 observations read from the data set WORK.ODDS.
NOTE: PROCEDURE PRINT used (Total process time):
                         16.56 seconds
     real time
                         0.31 seconds
     cpu time
```

21 22 PROC FREQ DATA=ODDS; TABLES EXPOSURE\*OUTCOME / CMH; 23 24 WEIGHT COUNT; 25 TITLE "Problem 3.6: Compute Odds Ratio and 95% Confidence Interval for non-ionizing 25 ! radiation"; 26 RUN; NOTE: There were 4 observations read from the data set WORK.ODDS. NOTE: PROCEDURE FREQ used (Total process time): real time 0.29 seconds cpu time 0.07 seconds

# SAS Output

For each problem that asks you to compute a statistic or a confidence interval, list the statistic or confidence interval along with an interpretation. (That is, answer the questions: What is the meaning of the statistic in words? What does the confidence interval imply about the associated population parameter?)

Null Hypothesis: Non-ionizing radiation and leukemia are not related.

Alternative Hypothesis: People with leukemia are more likely to have been exposed to non-ionizing radiation.

Problem 3.6: Compute Odds Ratio and 95% Confidence Interval for non-ionizing radiation

	The FRE	Q Proced	ure				
Frequency	Table of E	Table of EXPOSURE by OUTCOME					
Percent	EXPOSURE	EXPOSURE OUTCOME					
Row Pct		CASE	CONTROL	Total			
Col Pct	1-YES	50	40	90			
		4.59	3.67	8.26			
		55.56	44.44				
		9.09	7.41				
	2-NO	500	500	1000			
		45.87	45.87	91.74			
		50.00	50.00				
		90.91	92.59				
	Total	550	540	1090			
		50.46	49.54	100.00			

Estimates of the Common Relative Risk (Row1/Row2)					
Type of Study	Method	Value	95% Confidence	Limits	
<b>Case-Control</b>	Mantel-Haenszel	1.2500	0.8100	1.9290	
<mark>(Odds Ratio)</mark>	<mark>Logit</mark>	<mark>1.2500</mark>	<mark>0.8100</mark>	<mark>1.9290</mark>	

The Odds Ratio = 1.2500.

The 95% Confidence Interval is (0.8100 to 1.9290). This means that we are 95% confident that the true population odds ratio is in this interval. Since this interval contains 1, we conclude that the odds ratio=1.250 is not significant at the .05 level. So this test does not support the alternate hypothesis.

Therefore we would not reject the Null Hypothesis and we cannot conclude that people with leukemia are more likely to have been exposed to non-ionizing radiation.

```
Problem 2, Problem 3.16, p. 119
Part A: Heart Attacks
SAS Program
* Problem 3.16, p.119
* Program to compute the Relative Risk for Aspirin Therapy;
DATA RR HATTACK;
  LENGTH GROUP $ 9;
   INPUT GROUP $ OUTCOME $ COUNT;
DATALINES;
ASPIRIN MI 80
ASPIRIN NO-MI 920
PLACEBO MI 240
PLACEBO NO-MI 1760
;
PROC PRINT DATA=RR HATTACK;
TITLE 'PRINTING RR HATTACK DATASET TO CHECK FOR CORRECT INPUT';
RUN;
PROC FREQ DATA=RR HATTACK;
   TABLES GROUP*OUTCOME / CMH;
  WEIGHT COUNT;
   TITLE "Relative Risk of Heart Attacks";
RUN;
```

### SAS Log

27 28 \* Problem 3.16, p.119 29 \* Program to compute the Relative Risk for Aspirin Therapy; 30 31 DATA RR HATTACK; 32 LENGTH GROUP \$ 9; 33 INPUT GROUP \$ OUTCOME \$ COUNT; 34 DATALINES; NOTE: The data set WORK.RR HATTACK has 4 observations and 3 variables. NOTE: DATA statement used (Total process time): real time 0.00 seconds cpu time 0.00 seconds

39 ; 40 41 PROC PRINT DATA=RR HATTACK; TITLE 'PRINTING RR HATTACK DATASET TO CHECK FOR CORRECT INPUT'; 42 43 RUN; NOTE: There were 4 observations read from the data set WORK.RR HATTACK. NOTE: PROCEDURE PRINT used (Total process time): 0.01 seconds real time 0.01 seconds cpu time 44 PROC FREQ DATA=RR HATTACK; 45 46 TABLES GROUP\*OUTCOME / CMH; 47 WEIGHT COUNT; TITLE "Relative Risk of Heart Attacks"; 48 RUN; 49 NOTE: There were 4 observations read from the data set WORK.RR HATTACK. NOTE: PROCEDURE FREQ used (Total process time): real time 0.07 seconds cpu time 0.01 seconds

# SAS Output

*Null Hypothesis*: Aspirin therapy does not offer a significant benefit in reducing heart attacks.

Alternative Hypothesis: Aspirin therapy offers a significant benefit in reducing heart attacks.

	Relative Risk	of Heart /	Attacks	
	The FREC	Q Proced	ure	
Frequency	Table of G	ROUP	by OUTC	OME
Percent	GROUP	0	DUTCOM	E
Row Pct		MI	NO-MI	Total
Col Pct	ASPIRIN	80	920	1000
		2.67	30.67	33.33
		8.00	92.00	
		25.00	34.33	
	PLACEBO	240	1760	2000

	8.00	58.67	66.67
	12.00	88.00	
	75.00	65.67	
Total	320	2680	3000
	10.67	89.33	100.00

Estimates of the Common Relative Risk (Row1/Row2)						
Type of Study	Method	Value	95% Confidence Limits			
<b>Case-Control</b>	Mantel-Haenszel	0.6377	0.4891 0.8314			
(Odds Ratio)	Logit	0.6377	0.4891 0.8314			
Cohort	Mantel-Haenszel	0.6667	0.5237 0.8487			
<mark>(Col1 Risk)</mark>	<mark>Logit</mark>	<mark>0.6667</mark>	0.5237 0.8487			

The relative risk = 0.6667 with a 95% confidence of (0.5237 to 0.8487). This means that those in the Aspirin group have only a 66.67% risk of developing a heart attack compared to those in the placebo group. Since the confidence interval does not include 1, we can reject the null hypothesis and conclude that aspirin therapy does offer a significant benefit in reducing heart attacks.

Part B: Stroke

SAS Program

\* Part B - Stroke;

DATA RR\_STROKE; LENGTH GROUP \$ 9; INPUT GROUP \$ OUTCOME \$ COUNT; DATALINES; ASPIRIN MI-STR 65 ASPIRIN NO-STR 935 PLACEBO MI-STR 165 PLACEBO NO-STR 1835 ; PROC PRINT DATA=RR\_STROKE; TITLE 'PRINTING STROKE DATASET TO CHECK FOR CORRECT INPUT'; RUN; PROC FREQ DATA=RR\_STROKE; TABLES GROUP\*OUTCOME / CMH; WEIGHT COUNT; TITLE "Relative Risk of Stroke"; RUN;

# SAS Log

71 72	* Part B - Stroke;	
73 74 75 76	DATA RR_STROKE; LENGTH GROUP \$ 9; INPUT GROUP \$ OUTC DATALINES;	COME \$ COUNT;
NOTE : NOTE :	The data set WORK.RE DATA statement used real time cpu time	R_STROKE has 4 observations and 3 variables. (Total process time): 0.01 seconds 0.01 seconds
81 82 83 84 85	; PROC PRINT DATA=RR_ST TITLE 'PRINTING STROP RUN;	TROKE; KE DATASET TO CHECK FOR CORRECT INPUT';
NOTE : NOTE :	There were 4 observa PROCEDURE PRINT used real time cpu time	ations read from the data set WORK.RR_STROKE. d (Total process time): 0.01 seconds 0.00 seconds
86 87 88 89 90 91	PROC FREQ DATA=RR_ST TABLES GROUP*OUTCO WEIGHT COUNT; TITLE "Relative R RUN;	ROKE; DME / CMH; isk of Stroke";
NOTE : NOTE :	There were 4 observa PROCEDURE FREQ used real time cpu time	ations read from the data set WORK.RR_STROKE. (Total process time): 0.09 seconds 0.03 seconds

SAS Output

Null Hypothesis: Aspirin therapy does not offer a significant benefit in reducing strokes.

Alternative Hypothesis:	Aspirin	therapy	offers	а	significant
benefit in reducing stroke	s.				
Relative Risk of Stroke					

Frequency	Table of	Table of GROUP by OUTCOME			
Percent	GROUP	0	DUTCOME	2	
Row Pct		MI-STR	NO-STR	Total	
Col Pct	ASPIRIN	65	935	1000	
		2.17	31.17	33.33	
		6.50	93.50		
		28.26	33.75		
	PLACEBO	165	1835	2000	
		5.50	61.17	66.67	
		8.25	91.75		
		71.74	66.25		
	Total	230	2770	3000	
		7.67	92.33	100.00	
Estimate	s of the Common I	Relative R	isk (Row1/F	Row2)	
Type of Study	Mentel Heenerel	value y	95% Confid		
Case-Control	Mantel-Haenszel	0.7731	0.5741	1.041	
(Odds Ratio)	Logit	0.7731	0.5741	1.041	
Cohort	Mantel-Haenszel	0.7879	0.5974	1.039	
		<u> </u>		1 0 0 0	

The relative risk = 0.7879 with a 95% confidence of (0.5974 to 1.0391). This means that those in the Aspirin group have only a 78.79%

risk of developing a stroke compared to those in the placebo group. However, since the confidence interval includes 1 (which would indicate no significant difference), we cannot reject the null hypothesis and we cannot conclude that aspirin therapy offers a significant benefit in reducing strokes.

#### Problem 3, Problem 3.18, p. 120

SAS Program

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***Problem 3.18, p 120;
*** Program to perform meta-analysis;
DATA STUDIES;
 LENGTH TREATMENT $9;
      INPUT STUDY NO $ SURVIVAL $ TREATMENT $ COUNT;
DATALINES:
STUDY1 DIED 1-MGSO4 100
STUDY1 DIED 2-PLACEBO 155
STUDY1 SURVIVED 1-MGSO4 20
STUDY1 SURVIVED 2-PLACEBO 25
STUDY2 DIED 1-MGSO4 150
STUDY2 DIED 2-PLACEBO 150
STUDY2 SURVIVED 1-MGSO4 25
STUDY2 SURVIVED 2-PLACEBO 21
STUDY3 DIED 1-MGSO4 200
STUDY3 DIED 2-PLACEBO 240
STUDY3 SURVIVED 1-MGSO4 30
STUDY3 SURVIVED 2-PLACEBO 28
;
PROC PRINT DATA=STUDIES;
TITLE 'STUDIES DATASET AFTER INPUT';
RUN;
PROC FREQ DATA=STUDIES;
 TABLES STUDY NO*TREATMENT*SURVIVAL/ALL; /*ALL option use with the
TABLES statement requests tests and measures of association produced
by CHISQ, MEASURES, and CMH options*/
 WEIGHT COUNT;
 TITLE "PROBLEM 3.18: META ANALYSIS";
RUN;
```

SAS Log

20 DATA STUDIES; 21 LENGTH TREATMENT \$9 ; 22 INPUT STUDY NO \$ SURVIVAL \$ TREATMENT \$ COUNT; 23 DATALINES; NOTE: The data set WORK.STUDIES has 12 observations and 4 variables. NOTE: DATA statement used (Total process time): 0.00 seconds real time cpu time 0.00 seconds 36 ; 37 38 PROC PRINT DATA=STUDIES; 39 TITLE 'STUDIES DATASET AFTER INPUT'; 40 RUN; NOTE: There were 12 observations read from the data set WORK.STUDIES. NOTE: PROCEDURE PRINT used (Total process time): real time 0.10 seconds cpu time 0.01 seconds 41 42 PROC FREQ DATA=STUDIES; TABLES STUDY NO\*TREATMENT\*SURVIVAL/ALL; /\*ALL option use with the 43 TABLES statement requests 43 ! tests and measures of association produced by CHISQ, MEASURES, and CMH options\*/ 44 WEIGHT COUNT; 45 TITLE "PROBLEM 3.18: META ANALYSIS"; 46 47 RUN; NOTE: There were 12 observations read from the data set WORK.STUDIES. NOTE: PROCEDURE FREQ used (Total process time): real time 0.40 seconds cpu time 0.15 seconds

Null Hypothesis: MgSO4 does not affect survival in cardiac arrest.

Alternative Hypothesis: MgSO4 improves survival in cardiac arrest.

#### PROBLEM 3.18: META ANALYSIS

The FREQ Procedure

# Summary Statistics for TREATMENT by SURVIVAL Controlling for STUDY\_NO

Cochran-Mantel-Haenszel Statistics (Based on Table Scores)					
Statistic	Alternative Hypothesis	DF	Value	Prob	
1	Nonzero Correlation	1	1.5095	0.2192	
2	Row Mean Scores Differ	1	1.5095	0.2192	
3	General Association	1	1.5095	0.2192	

Estimates of the Common Relative Risk (Row1/Row2)						
Type of Study	Method	Value	95% Confidence	Limits		
<b>Case-Control</b>	Mantel-Haenszel	0.8050	0.5695	1.1379		
(Odds Ratio)	Logit	0.8050	0.5695	1.1378		
Cohort	Mantel-Haenszel	0.9721	0.9288	1.0174		
(Col1 Risk)	Logit	0.9722	0.9291	1.0172		
Cohort	Mantel-Haenszel	1.2070	0.8942	1.6294		
(Col2 Risk)	Logit	1.2068	0.8940	1.6289		

<b>Breslow-Day Tes</b>	<mark>t for</mark>
Homogeneity of the Oc	<mark>lds Ratios</mark>
Chi-Square	0.0331
DF	2
<mark>Pr &gt; ChiSq</mark>	<mark>0.9836</mark>

Total Sample Size = 1144

The Breslow-Day Test for Homogeneity of the Odds Ratios is not significant (p=0.9836), so we can be comfortable combining the results of the three studies. The cohort relative risk, Coll risk = 0.9722 with a 95% confidence interval of (0.9291 to 1.0172). This means that we are 95% confident that the true population odds ratio is in this interval. Since this interval contains 1, we conclude that the odds ratio is not significant at the .05 level. So this test does not support the alternate hypothesis.

Therefore we would not reject the Null Hypothesis and we cannot conclude that MgSO4 improves survival in cardiac arrest.