Module 8 Case Studies in Longitudinal Data Analysis

Benjamin French, PhD

Radiation Effects Research Foundation University of Pennsylvania

> SISCR 2017 July 25, 2017

Learning objectives

- This module will focus on the design of longitudinal studies, exploratory data analysis, and application of regression techniques based on estimating equations and mixed-effects models
- Case studies will be used to discuss analysis strategies, the application of appropriate analysis methods, and the interpretation of results, with examples in R and Stata
- Some theoretical background and details will be provided; our goal is to translate statistical theory into practical application
- At the conclusion of this module, you should be able to apply appropriate exploratory and regression techniques to summarize and generate inference from longitudinal data

Overview

Review: Longitudinal data analysis

Case study: Longitudinal depression scores

Case study: Indonesian Children's Health Study

Case study: Carpal tunnel syndrome

Summary and resources

Overview

Review: Longitudinal data analysis

Case study: Longitudinal depression scores

Case study: Indonesian Children's Health Study

Case study: Carpal tunnel syndrome

Summary and resources

Longitudinal studies

Repeatedly collect information on the same individuals over time

Benefits

- Record incident events
- Ascertain exposure prospectively
- Separate time effects: cohort, period, age
- Distinguish changes over time within individuals
- Offer attractive efficiency gains over cross-sectional studies
- Help establish causal effect of exposure on outcome

Longitudinal studies

Repeatedly collect information on the same individuals over time

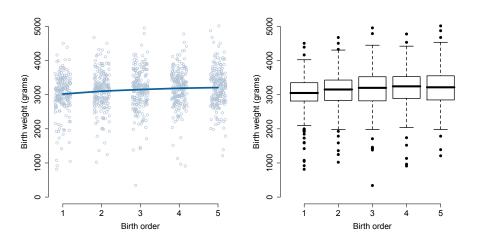
Challenges

- Determine causality when covariates vary over time
- Choose exposure lag when covariates vary over time
- Account for incomplete participant follow-up
- Use specialized methods that account for longitudinal correlation

Georgian infant birth weight

- Birth weight measured for each of m = 5 children of n = 200 mothers
- Birth weight for infants *j* comprise repeated measures on mothers *i*
- Interested in the association between birth order and birth weight
 - Estimate the average time course among all mothers
 - Estimate the time course for individual mothers
 - Quantify the degree of heterogeneity across mothers
- Consider adjustment for mother's initial age (at first birth)

	momid	birthord	bweight	lowbrth	initage
[1]	39	1	3720	0	15
[2]	39	2	3260	0	15
[3]	39	3	3910	0	15
[4]	39	4	3320	0	15
[5]	39	5	2480	1	15
[6]	62	1	2381	1	17
[7]	62	2	2835	1	17
[8]	62	3	2381	1	17
[9]	62	4	2268	1	17
[10]	62	5	2211	1	17



Strategies for analysis of longitudinal data

• **Derived variable**: Collapse the longitudinal series for each subject into a summary statistic, such as a difference (a.k.a. "change score") or regression coefficient, and use methods for independent data

• **Repeated measures**: Include all data in a regression model for the mean response and account for longitudinal and/or cluster correlation

Options for analysis of change

Does mean change differ across groups?

- Consider simple situation with
 - Baseline measurement (t = 0)
 - Single follow-up measurement (t = 1)
- Analysis options for simple pre-post design
 - Analysis of POST only
 - Analysis of CHANGE (post-pre)
 - Analysis of POST controlling for BASELINE
 - Analysis of CHANGE controlling for BASELINE

Change and randomized studies

- Key assumption: groups equivalent at baseline
- Methods that 'adjust' for baseline are generally preferable due to greater precision

•
$$\rho > 1/2$$
 POST \prec CHANGE \prec ANCOVA

•
$$\left|
ho < 1/2 \right|$$
 Change \prec Post \prec Ancova

- CHANGE analysis adjusts for baseline by subtracting it from follow-up
- ANCOVA analysis adjusts for baseline by controlling for it in a model
- Missing data will impact each approach

Change and non-randomized studies

- Baseline equivalence no longer guaranteed
- Methods no longer answer same scientific question
 - POST: How different are groups at follow-up?
 - CHANGE: How different is the change in outcome for the two groups?
 - ANCOVA: What is the expected difference in the mean outcome at follow-up across the two groups, controlling for the baseline value of the outcome?
- CHANGE typically most relevant; multivariable methods to come later characterize CHANGE across multiple timepoints

Strategies for analysis of longitudinal data

- **Derived variable**: Collapse the longitudinal series for each subject into a summary statistic, such as a difference (a.k.a. "change score") or regression coefficient, and use methods for independent data
 - Example: birth weight of 2nd child birth weight of 1st child
 - Might be adequate for two time points and no missing data
- **Repeated measures**: Include all data in a regression model for the mean response and account for longitudinal and/or cluster correlation
 - Generalized estimating equations (GEE)

Generalized linear mixed-effects models (GLMM)

Notation

Define

 m_i = number of observations for subject i = 1, ..., n Y_{ij} = outcome for subject i at time $j = 1, ..., m_i$ $X_i = (x_{i1}, x_{i2}, ..., x_{im_i})$ $x_{ij} = (x_{ij1}, x_{ij2}, ..., x_{ijp})$ exposure, covariates

Stacks of data for each subject:

$$Y_{i} = \begin{bmatrix} Y_{i1} \\ Y_{i2} \\ \vdots \\ Y_{im_{i}} \end{bmatrix} \qquad \qquad X_{i} = \begin{bmatrix} x_{i11} & x_{i12} & \dots & x_{i1p} \\ x_{i21} & x_{i22} & \dots & x_{i2p} \\ \vdots & \vdots & \vdots & \vdots \\ x_{im_{i}1} & x_{im_{i}2} & \dots & x_{im_{i}p} \end{bmatrix}$$

Dependence and correlation

Issue Response variables measured on the same subject are correlated

- Observations are **dependent** or **correlated** when one variable predicts the value of another variable
 - ► The birth weight for a first child is predictive of the birth weight for a second child born to the same mother
- Variance: measures average distance that an observation falls away from the mean
- Covariance: measures whether, on average, departures in one variable $Y_{ij} \mu_j$ 'go together with' departures in another variable $Y_{ik} \mu_k$
- Correlation: measure of dependence that takes values from -1 to +1

Covariance: Something new to model

$$Cov(Y_{i}) = \begin{bmatrix} Var(Y_{i1}) & Cov(Y_{i1}, Y_{i2}) & \dots & Cov(Y_{i1}, Y_{im_{i}}) \\ Cov(Y_{i2}, Y_{i1}) & Var(Y_{i2}) & \dots & Cov(Y_{i2}, Y_{im_{i}}) \\ \vdots & \vdots & \vdots & \vdots \\ Cov(Y_{im_{i}}, Y_{i1}) & Cov(Y_{im_{i}}, Y_{i2}) & \dots & Var(Y_{im_{i}}) \end{bmatrix} \\ = \begin{bmatrix} \sigma_{1}^{2} & \sigma_{1}\sigma_{2}\rho_{12} & \dots & \sigma_{1}\sigma_{m_{i}}\rho_{1m_{i}} \\ \sigma_{2}\sigma_{1}\rho_{21} & \sigma_{2}^{2} & \dots & \sigma_{2}\sigma_{m_{i}}\rho_{2m_{i}} \\ \vdots & \vdots & \vdots & \vdots \\ \sigma_{m_{i}}\sigma_{1}\rho_{m_{i}1} & \sigma_{m_{i}}\sigma_{2}\rho_{m_{i}2} & \dots & \sigma_{m_{i}}^{2} \end{bmatrix}$$

Note: $\rho = \text{ correlation}$

GEE (Liang and Zeger, 1986)

- Contrast average outcome values across populations of individuals defined by covariate values, while accounting for correlation
 - Focus on a generalized linear model with regression parameters β, which characterize the systemic variation in Y across covariates X

$$Y_{i} = (Y_{i1}, Y_{i2}, \dots, Y_{im_{i}})^{\mathsf{T}} X_{i} = (x_{i1}, x_{i2}, \dots, x_{im_{i}})^{\mathsf{T}} x_{ij} = (x_{ij1}, x_{ij2}, \dots, x_{ijp}) \beta = (\beta_{1}, \beta_{2}, \dots, \beta_{p})^{\mathsf{T}}$$

for i = 1, ..., n; $j = 1, ..., m_i$; and k = 1, ..., p

• Longitudinal correlation structure is a nuisance feature of the data

Mean model

Assumptions

- Observations are independent across subjects
- Observations could be correlated within subjects

Mean model: Primary focus of the analysis

$$\begin{array}{lll} \mathsf{E}[Y_{ij} \mid x_{ij}] &=& \mu_{ij}(\beta) \\ g(\mu_{ij}) &=& x_{ij}\beta \end{array}$$

• Corresponds to any generalized linear model with link $g(\cdot)$

Continuous outcome			Count outcome			Binary outcome		
$E[Y_{ij} \mid x_{ij}]$	=	μ_{ij}	$E[Y_{ij} \mid x_{ij}]$	=	μ_{ij}	$P[Y_{ij} = 1 \mid x_{ij}]$	=	μ_{ij}
μ_{ij}	=	$x_{ij}eta$	$log(\mu_{ij})$	=	$x_{ij}eta$	$logit(\mu_{ij})$	=	$x_{ij}eta$

• Characterizes a marginal mean regression model

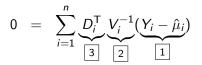
Covariance model

Longitudinal correlation is a nuisance; secondary to mean model of interest 1. Assume a form for **variance** that could depend on μ_{ii}

Continuous outcome:	$Var[Y_{ij} \mid x_{ij}]$	=	σ^2
Count outcome:	$Var[Y_{ij} \mid x_{ij}]$	=	μ_{ij}
Binary outcome:	$Var[Y_{ij} \mid x_{ij}]$	=	$\mu_{ij}(1-\mu_{ij})$

which could also include a scale or dispersion parameter $\phi > 0$ 2. Select a model for longitudinal **correlation** with parameters α

Intuition



- 1 The model for the mean, $\mu_i(\beta)$, is compared to the observed data, Y_i ; setting the equations to equal 0 tries to minimize the difference between **observed** and **expected**
- 2 Estimation uses the inverse of the variance (covariance) to **weight** the data from subject *i*; more weight is given to differences between observed and expected for subjects who contribute more information
- 3 Simply a "change of scale" from the scale of the mean, μ_i , to the scale of the regression coefficients (covariates)

Comments

- GEE is specified by a mean model and a correlation model
 - 1. A regression model for the average outcome, e.g., linear, logistic
 - 2. A model for longitudinal correlation, e.g., independence, exchangeable
- $\hat{\beta}$ is a consistent estimator for β provided that the mean model is correctly specified, even if the model for longitudinal correlation is incorrectly specified, i.e., $\hat{\beta}$ is 'robust' to correlation model mis-specification
- However, the variance of $\hat{\beta}$ must capture the correlation in the data, either by choosing the correct correlation model, or via an alternative variance estimator
- GEE computes a sandwich variance estimator (aka empirical, robust, or Huber-White variance estimator)
- Empirical variance estimator provides valid standard errors for $\hat{\beta}$ even if the working correlation model is incorrect, but requires $n \ge 40$ (Mancl and DeRouen, 2001)

Variance estimators

- **Independence estimating equation**: An estimation equation with a working independence correlation structure
 - Model-based standard errors are generally not valid
 - Empirical standard errors are valid given large n and $n \gg m$
- Weighted estimation equation: An estimation equation with a non-independence working correlation structure
 - Model-based standard errors are valid if correlation model is correct
 - Empirical standard errors are valid given large n and $n \gg m$

	Variance estimator			
Estimating equation	Model-based	Empirical		
Independence	_	+/-		
Weighted	-/+	+		

GEE commands

- Stata: xtset, then use xtgee
- R: geeglm in geepack library, using geese fitter function
- SAS: PROC GENMOD
- NB: Order might be important for analysis in software
 - Requires sorting the data by unique subject identifier and time
 - Important for exchangeable and auto-regressive correlation structures

Interested in the association between birth order and birth weight

$$\mathsf{E}[Y_{ij} \mid x_{ij}] = \beta_0 + \beta_1 x_{ij1} + \beta_2 x_{ij2}$$

for $i = 1, \ldots, 200$ and $j = 1, \ldots, 5$ with

- Y_{ij}: Infant birth weight (continuous)
- x_{ij1}: Infant birth order
- x_{ij2}: Mother's initial age

Motivating example: Stata commands

* Declare the dataset to be "panel" data, grouped by momid * with time variable birthord xtset momid birthord

* Fit a linear model with independence correlation xtgee bweight birthord initage, corr(ind) robust

* Fit a linear model with exchangeable correlation xtgee bweight birthord initage, corr(exc) robust

Motivating example: Stata output

GEE population-a	veraged mo	model		Number of	obs =	1000
Group variable:		momid		Number of	groups =	200
Link:		identity		Obs per g	group: min =	- 5
Family:		Gaussian			avg =	5.0
Correlation:		independent			max =	- 5
				Wald chi2	2(2) =	27.95
Scale parameter:		32445	8.3	Prob > ch	ni2 =	0.0000
		(Std.	Err. ad	ljusted for	clustering	; on momid)
1		Semi-robust				
bweight	Coef.	Std. Err.	z	P> z	[95% Conf.	Interval]
+						
birthord	46.608	10.02134	4.65	0.000	26.96653	66.24947
initage	26.73226	10.1111	2.64	0.008	6.914877	46.54965
_cons	2526.622	177.2781	14.25	0.000	2179.164	2874.081

Motivating example: Stata output

GEE population-a	veraged mo	del		Number o	f obs =	= 1000
Group variable:		momid		Number of	f groups =	= 200
Link:		identity		Obs per g	group: min :	= 5
Family:		Gaussian			avg :	= 5.0
Correlation:		exchangeable			max :	= 5
				Wald chi	2(2) =	= 27.95
Scale parameter:		324458.3		Prob > cl	hi2 :	= 0.0000
		(Std.	Err. ad	djusted for	r clustering	g on momid)
1		Semi-robust				
bweight	Coef.	Std. Err.	z	P> z	[95% Conf	. Interval]
+						
birthord	46.608	10.02134	4.65	0.000	26.96653	66.24947
initage	26.73226	10.1111	2.64	0.008	6.914877	46.54965
_cons	2526.622	177.2781	14.25	0.000	2179.164	2874.081

Motivating example: Comments

- Difference in mean birth weight between two populations of infants whose birth order differs by one is 46.6 grams, 95% CI: (27.0, 66.2)
- Model-based standard errors are smaller for exchangeable structure, indicating efficiency gain from assuming a correct correlation structure
- In practice, i.e. with real-world data, it's often difficult to tell what the correct correlation structure is from exploratory analyses
- A priori scientific knowledge should ultimately guide the decision
- I tend to use working independence with empirical standard errors unless I have a good reason to do otherwise, e.g. large efficiency gain
- Try not to select the structure that gives you the smallest *p*-value
- Stata labels the standard errors "semi-robust" because the empirical variance estimator protects against mis-specification of the correlation model, but requires correct specification of the mean model

 \star See help xtgee for detailed syntax, other options, and saved results

GEE summary

- In the GEE approach the primary focus of the analysis is a marginal mean regression model that corresponds to any GLM
- Longitudinal correlation is secondary to the mean model of interest and is treated as a nuisance feature of the data
- Requires selection of a 'working' correlation model
- Semi-parametric: Only the mean and correlation models are specified
- The correlation model does not need to be correctly specified to obtain a consistent estimator for β or valid standard errors for $\hat{\beta}$
- Efficiency gains are possible if the correlation model is correct

Issues

- Accommodates only one source of correlation: Longitudinal or cluster
- GEE requires that any missing data are missing completely at random
- Issues arise with time-dependent exposures and covariance weighting

Strategies for analysis of longitudinal data

- **Derived variable**: Collapse the longitudinal series for each subject into a summary statistic, such as a difference (a.k.a. "change score") or regression coefficient, and use methods for independent data
 - Example: birth weight of 2nd child birth weight of 1st child
 - Might be adequate for two time points and no missing data
- **Repeated measures**: Include all data in a regression model for the mean response and account for longitudinal and/or cluster correlation
 - Generalized estimating equations (GEE): A marginal model for the mean response and a model for longitudinal or cluster correlation

 $g(\mathsf{E}[Y_{ij} \mid x_{ij}]) = x_{ij}\beta$ and $\operatorname{Corr}[Y_{ij}, Y_{ij'}] = \rho(\alpha)$

Generalized linear mixed-effects models (GLMM)

Mixed-effects models (Laird and Ware, 1982)

- \star Contrast outcomes both within and between **individuals**
 - Assume that each subject has a regression model characterized by subject-specific parameters: a combination of **fixed-effects** parameters common to all individuals in the population and **random-effects** parameters unique to each individual subject
 - Although covariates allow for differences across subjects, typically cannot measure all factors that give rise to subject-specific variation
 - Subject-specific random effects induce a correlation structure

Set-up

For subject *i* the mixed-effects model is characterized by

$$\begin{split} Y_i &= (Y_{i1}, Y_{i2}, \dots, Y_{im_i})^{\mathsf{T}} \\ \beta^{\star} &= (\beta_1^{\star}, \beta_2^{\star}, \dots, \beta_p^{\star})^{\mathsf{T}} & \text{Fixed effects} \\ x_{ij} &= (x_{ij1}, x_{ij2}, \dots, x_{ijp}) \\ X_i &= (x_{i1}, x_{i2}, \dots, x_{im_i})^{\mathsf{T}} & \text{Design matrix for fixed effects} \\ \gamma_i &= (\gamma_{1i}, \gamma_{2i}, \dots, \gamma_{qi})^{\mathsf{T}} & \text{Random effects} \\ z_{ij} &= (z_{ij1}, z_{ij2}, \dots, z_{ijq}) \\ Z_i &= (z_{i1}, z_{i2}, \dots, z_{im_i})^{\mathsf{T}} & \text{Design matrix for random effects} \end{split}$$

for $i = 1, \ldots, n$; $j = 1, \ldots, m_i$; and $k = 1, \ldots, p$ with $q \leq p$

Linear mixed-effects model

Consider a linear mixed-effects model for a continuous outcome Yij

• Stage 1: Model for response given random effects

$$Y_{ij} = x_{ij}\beta + z_{ij}\gamma_i + \epsilon_{ij}$$

with

- x_{ij} is a vector a covariates
- z_{ij} is a subset of x_{ij}
- β is a vector of fixed-effects parameters
- γ_i is a vector of random-effects parameters
- ϵ_{ij} is observation-specific measurement error
- Stage 2: Model for random effects

$$\gamma_i \sim N(0,G)$$

 $\epsilon_{ij} \sim N(0,\sigma^2)$

with γ_i and ϵ_{ij} are assumed to be independent

Choices for random effects

Consider the linear mixed-effects models that include

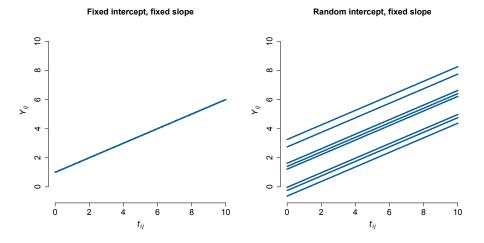
• Random intercepts

$$\begin{array}{rcl} Y_{ij} &=& \beta_0 + \beta_1 t_{ij} + \gamma_{0i} + \epsilon_{ij} \\ &=& (\beta_0 + \gamma_{0i}) + \beta_1 t_{ij} + \epsilon_{ij} \end{array}$$

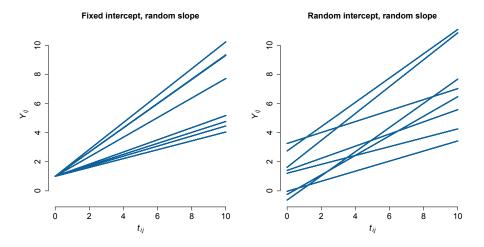
• Random intercepts and slopes

$$\begin{array}{rcl} Y_{ij} & = & \beta_0 + \beta_1 t_{ij} + \gamma_{0i} + \gamma_{1i} t_{ij} + \epsilon_{ij} \\ & = & (\beta_0 + \gamma_{0i}) + (\beta_1 + \gamma_{1i}) t_{ij} + \epsilon_{ij} \end{array}$$

Choices for random effects



Choices for random effects



Choices for random effects: G

G quantifies random variation in trajectories across subjects

$$G = \left[\begin{array}{cc} G_{11} & G_{12} \\ G_{21} & G_{22} \end{array} \right]$$

- $\sqrt{G_{11}}$ is the typical deviation in the **level** of the response
- $\sqrt{G_{22}}$ is the typical deviation in the **change** in the response
- G_{12} is the covariance between subject-specific intercepts and slopes
 - $G_{12} = 0$ indicates subject-specific intercepts and slopes are uncorrelated
 - $G_{12} > 0$ indicates subjects with **high level** have **high rate** of change
 - $G_{12} < 0$ indicates subjects with **high level** have **low rate** of change

 $(G_{12} = G_{21})$

Generalized linear mixed-effects models

A GLMM is defined by random and systematic components

• **Random**: Conditional on γ_i the outcomes $Y_i = (Y_{i1}, \dots, Y_{im_i})^T$ are mutually independent and have an exponential family density

$$f(Y_{ij} \mid eta^{\star}, \gamma_i, \phi) = \exp\{[Y_{ij} heta_{ij} - \psi(heta_{ij})]/\phi + c(Y_{ij}, \phi)\}$$

for i = 1, ..., n and $j = 1, ..., m_i$ with a scale parameter $\phi > 0$ and $\theta_{ij} \equiv \theta_{ij}(\beta^*, \gamma_i)$

Generalized linear mixed-effects models

A GLMM is defined by random and systematic components

 Systematic: μ^{*}_{ij} is modeled via a linear predictor containing fixed regression parameters β^{*} common to all individuals in the population and subject-specific random effects γ_i with a known link function g(·)

$$g(\mu_{ij}^{\star}) = x_{ij}\beta^{\star} + z_{ij}\gamma_i \Leftrightarrow \mu_{ij}^{\star} = g^{-1}(x_{ij}\beta^{\star} + z_{ij}\gamma_i)$$

where the random effects γ_i are mutually independent with a common underlying multivariate distribution, typically assumed to be

$$\gamma_i \sim N_q(0, G)$$

so that G quantifies random variation across subjects

Likelihood-based estimation of β

Requires specification of a complete probability distribution for the data

• Likelihood-based methods are designed for fixed effects, so integrate over the assumed distribution for the random effects

$$\mathcal{L}_{Y}(\beta,\sigma,G) = \prod_{i=1}^{n} \int f_{Y|\gamma}(Y_{i} \mid \gamma_{i},\beta,\sigma) \times f_{\gamma}(\gamma_{i} \mid G) d\gamma_{i}$$

where f_{γ} is typically the density function of a Normal random variable

- For linear models the required integration is straightforward because Y_i and γ_i are both normally distributed (easy to program)
- For non-linear models the integration is difficult and requires either approximation or numerical techniques (hard to program)

Likelihood-based estimation of β

Two likelihood-based approaches to estimation using a GLMM

- 1. **Conditional likelihood**: Treat the random effects as if they were fixed parameters and **eliminate** them by conditioning on their sufficient statistics; does not require a specified distribution for γ_i
 - xtreg and xtlogit with fe option in Stata
- 2. **Maximum likelihood**: Treat the random effects as unobserved nuisance variables and **integrate** over their assumed distribution to obtain the marginal likelihood for β ; typically assume $\gamma_i \sim N(0, G)$
 - xtreg and xtlogit with re option in Stata
 - mixed and melogit in Stata
 - Imer and glmer in R package lme4

'Fixed effects' versus 'random effects'

'Fixed-effects' approach provided by conditional likelihood estimation

- Comparisons are made within individuals who act as their own control and differences are averaged across all individuals in the sample
- Could eliminate potentially large sources of bias by controlling for all stable characteristics of the individuals under study (+)
- Variation across subjects is ignored, which could provide standard error estimates that are too big; conservative inference (-)
- Although controlled for by conditioning, cannot estimate coefficients for covariates that have no within-subject variation (-/+)

'Fixed effects' versus 'random effects'

'Random-effects' approach provided by maximum likelihood estimation

- Comparisons are based on within- and between-subject contrasts
- Requires a specified distribution for subject-specific effects; correct specification is required for valid likelihood-based inference (-/+)
- Do not control for unmeasured characteristics because random effects are almost always assumed to be uncorrelated with covariates (-)
- Can estimate effects of within- and between-subject covariates (+)

Assumptions

Valid inference from a linear mixed-effects model relies on

- Mean model: As with any regression model for an average outcome, need to correctly specify the functional form of x_{ii}β (here also z_{ii}γ_i)
 - Included important covariates in the model
 - Correctly specified any transformations or interactions
- Covariance model: Correct covariance model (random-effects specification) is required for correct standard error estimates for $\hat{\beta}$
- **Normality**: Normality of ϵ_{ij} and γ_i is required for normal likelihood function to be the correct likelihood function for Y_{ij}
- *n* sufficiently large for **asymptotic inference** to be valid
- \star These assumptions must be verified to evaluate any fitted model

Motivating example

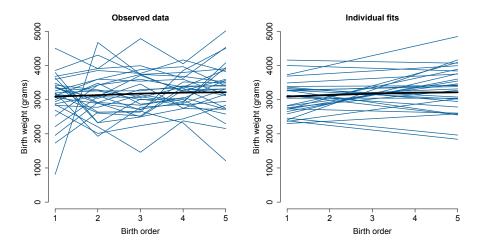
Interested in the association between birth order and birth weight

$$\begin{aligned} \mathsf{E}[Y_{ij} \mid x_{ij}, \gamma_i] &= \beta_0 + \beta_1 x_{ij1} + \beta_2 x_{ij2} + \gamma_{0i} \\ \text{or} \quad \beta_0 + \beta_1 x_{ij1} + \beta_2 x_{ij2} + \gamma_{0i} + \gamma_{1i} x_{ij1} \end{aligned}$$

for $i = 1, \ldots, 200$ and $j = 1, \ldots, 5$ with

- Y_{ij}: Infant birth weight (continuous)
- x_{ij1}: Infant birth order
- x_{ij2}: Mother's initial age

Motivating example



Motivating example: Stata commands

* Declare the dataset to be "panel" data, grouped by momid * with time variable birthord xtset momid birthord

* Fit a linear model with random intercepts xtmixed bweight birthord initage || momid:

* Fit a linear model with random intercepts and slopes xtmixed bweight birthord initage || momid: birthord

Motivating example: Stata output

Mixed-effects REML regression Group variable: momid	Number of obs = 1000 Number of groups = 200
	Obs per group: min = 5 avg = 5.0 max = 5
Log restricted-likelihood = -7649.3763	
bweight Coef. Std. Err. z	P> z [95% Conf. Interval]
birthord 46.608 9.951014 4.68 initage 26.73226 9.002678 2.97 _cons 2526.622 163.3387 15.47	0.000 27.10437 66.11163 0.003 9.08734 44.37719 0.000 2206.484 2846.76
Random-effects Parameters Estimate Std	l. Err. [95% Conf. Interval]
momid: Identity	71804 314.5797 407.8139
	13253 423.7298 467.386
LR test vs. linear regression: chibar2(01) =	

Motivating example: Stata output

Mixed-effects REML regression Group variable: momid		obs = groups =	
	Obs per g	roup: min = avg = max =	5.0
Log restricted-likelihood = -7647.4511		(2) = i2 =	
bweight Coef. Std. Err. z			
birthord 46.608 10.41108 4.48 initage 27.06415 8.899505 3.04 _cons 2520.799 161.1498 15.64	0.000 0.002 0.000	26.20265 9.621441 2204.952	67.01335 44.50686 2836.647
Random-effects Parameters Estimate Std	. Err.	[95% Conf.	Interval]
momid: Independent sd(birthord) 49.35226 13. sd(_cons) 325.7759 29 	57685 . 6488 	28.78331 272.5532 416.8224	84.62007 389.3916 461.6472
LR test vs. linear regression: chi2(2) =			

Motivating example: Comments

- Difference in mean birth weight between two populations of infants whose birth order differs by one is 46.6 grams, 95% CI: (27.0, 66.2)
- Agrees well with GEE point estimate and confidence interval
- $\sqrt{\hat{G}_{00}} = 323$ indicates substantial variability across mothers in the initial level of infant birth weight; $\sqrt{\hat{G}_{11}} = 49$ indicates substantial variability across mothers in the trend of birth weight over time
- Note: Typically can specify correlated intercepts and slopes, i.e. $G_{01} \neq 0$, but in this case the model would not converge
- There are options for formal statistical evaluation of two randomeffects specifications, but I generally do not recommend an inferential procedure in which a *p*-value tells you to use a simpler model
- Specification for the random effects should be guided by *a priori* scientific knowledge and exploratory data analysis

GLMM summary

- A GLMM is defined by a random component describing outcomes given subject-specific effects and a systematic component describing the conditional mean given subject-specific effects
- Conditional likelihood for 'fixed effects' eliminates subject-specific effects by conditioning on their sufficient statistics
- Maximum likelihood for 'random effects' integrates over the assumed distribution of the subject-specific effects
- Interpretation of parameter estimates depends on the assumed distribution for the outcome given the subject-specific effects and the specified structure for subject-specific effects

Issues

- GLMM requires that any missing data are missing at random
- · Issues arise with time-dependent exposures and covariance weighting

Strategies for analysis of longitudinal data

- **Derived variable**: Collapse the longitudinal series for each subject into a summary statistic, such as a difference (a.k.a. "change score") or regression coefficient, and use methods for independent data
 - Example: birth weight of 2nd child birth weight of 1st child
 - Might be adequate for two time points and no missing data
- **Repeated measures**: Include all data in a regression model for the mean response and account for longitudinal and/or cluster correlation
 - Generalized estimating equations (GEE): A marginal model for the mean response and a model for longitudinal or cluster correlation

 $g(\mathsf{E}[Y_{ij} \mid x_{ij}]) = x_{ij}\beta$ and $\mathsf{Corr}[Y_{ij}, Y_{ij'}] = \rho(\alpha)$

 Generalized linear mixed-effects models (GLMM): A conditional model for the mean response given subject-specific random effects, which induce a (possibly hierarchical) correlation structure

$$g(\mathsf{E}[Y_{ij} \mid x_{ij}, \gamma_i]) = x_{ij}\beta^* + z_{ij}\gamma_i$$

B French (Module 8)

Overview

Review: Longitudinal data analysis

Case study: Longitudinal depression scores

Case study: Indonesian Children's Health Study

Case study: Carpal tunnel syndrome

Summary and resources

Motivation and design

- Gregoire et al. (1996) published the results of an efficacy study on estrogen patches in treating postnatal depression
- 61 women with major depression, which began within 3 months of childbirth and persisted for up to 18 months postnatally, participated in a double-blind, placebo-controlled study
- Women were randomly assigned to active treatment (n = 34) or placebo (n = 27)
- Participants attended clinics monthly and at each visit self-ratings of depressive symptoms on the Edinburgh postnatal depression scale (EPDS) were measured
- EPDS is a standardized, validated, self-rating scale consisting of 10 items, each rated on a 4-point scale of 0–3
- **Goal**: Investigate the antidepressant efficacy of treatment with estrogen over time

Data

- Depression scores are assessed across m = 7 months for the n = 61 subjects in the study
- Depression scores for visit *j* are the longitudinal components measured on subject *i*

	subj	group	dep0	dep1	dep2	dep3	dep4	dep5	dep6
1.	1	placebo	18	17	18	15	17	14	15
2.	2	placebo	27	26	23	18	17	12	10
3.	3	placebo	16	17	14				
4.	4	placebo	17	14	23	17	13	12	12
5. I	5	placebo	15	12	10	8	4	5	5
6. I	6	placebo	20	19	11.54	9	8	6.82	5.05
7.	7	placebo	16	13	13	9	7	8	7
8.	8	placebo	28	26	27				
9.	9	placebo	28	26	24	19	13.94	11	9
10.	10	placebo	25	9	12	15	12	13	20

- "Wide" form: A row for each subject
- Note that there are some missing data due to drop-out

Exploratory analyses

- 1. Summarize the depression scores by visit and treatment group
- 2. Examine within-person correlations among depression scores, graphically and numerically
- 3. Graph depression scores over time, by treatment group; include a lowess line (smoother) for each group to summarize trends
- 4. Plot individual trajectories by treatment group

Regression analyses

- Consider collapsing the longitudinal series for each subject into a summary statistic between the baseline and sixth depression scores. Use methods for independent data to evaluate the association between change in depression scores and estrogen treatment
- 6. Reshape the data into long form and evaluate longitudinal associations between depression scores and treatment using GEE
 - Use visit as a linear variable
 - Use visit as a categorical variable
 - Evaluate whether the treatment effect varies over time

Reshape the data

Recall what the data look like in wide form

	+ subj 	group	dep0	dep1	dep2	dep3	dep4	dep5	dep6
1.	, 1 1	placebo	18	17	18	15	17	14	15
2.	2	placebo	27	26	23	18	17	12	10
з.	3	placebo	16	17	14				.
4.	4	placebo	17	14	23	17	13	12	12
5.	5	placebo	15	12	10	8	4	5	5

For some analyses, reshape the data from wide form to long form

```
. reshape long dep, i(subj) j(visit)
(note: j = 0 1 2 3 4 5 6)
```

Data w	vide	->	long
Number of obs. Number of variables	61 9	->	427 4
j variable (7 values) xij variables:		->	visit
dep0 dep1 d	lep6	->	dep

Reshape the data

"Long" form: A row for each observation

	+-				+
		subj	visit	group	dep
1.	1	1	0	placebo	18
	1	-	•	1	
2.		1	1	placebo	17
З.		1	2	placebo	18
4.		1	3	placebo	15
5.		1	4	placebo	17
6.		1	5	placebo	14
7.	Т	1	6	placebo	15
8.		2	0	placebo 2	
9.	1	2	1	placebo	26
10.	1	2	2	placebo	23
	-				

Answers

Overview

Review: Longitudinal data analysis

Case study: Longitudinal depression scores

Case study: Indonesian Children's Health Study

Case study: Carpal tunnel syndrome

Summary and resources

Indonesian Children's Health Study (ICHS)

- Determine the effects of vitamin A deficiency in preschool children
- n = 275 children examined for respiratory infection at up to 6 visits
- Xerophthalmia is an ocular manifestation of vitamin A deficiency
- **Goal**: Evaluate association between vitamin A deficiency and risk of respiratory infection

				1	Age (y	ears)			
Xerophthalmia	Infection	0	1	2	3	4	5	6	7
No	No	77	229	154	196	176	143	65	5
No	Yes	8	30	30	15	9	7	1	0
Yes	No	0	1	9	10	15	8	4	1
Yes	Yes	0	0	4	3	0	0	0	0

Data

	+									
		id	age	time	infect~n	xerop	gender	hfora	cost	sint
1.	1	121013	31	1	0	0	0	-3	-1	0
2.	1	121013	34	2	0	0	0	-3	0	-1
3.	1	121013	37	3	0	0	0	-2	1	0
4.	1	121013	40	4	0	0	0	-2	0	1
5.	1	121013	43	5	1	0	0	-2	-1	0
6.		121013	46	6	0	0	0	-3	0	-1
7.		121113	-9	1	0	0	1	2	-1	0
8.	1 :	121113	-6	2	0	0	1	0	0	-1
9.	1	121113	-3	3	0	0	1	-1	1	0
10.	1	121113	0	4	0	0	1	-2	0	1
11.	1	121113	3	5	1	0	1	-3	-1	0
12.	1	121113	6	6	0	0	1	-3	0	-1
13.	1	121114	-26	1	0	0	0	8	-1	0
14.	1	121114	-23	2	0	0	0	5	0	-1
15.	1	121114	-20	3	0	0	0	3	1	0
16.	1	121114	-17	4	1	0	0	0	0	1
17.	1	121114	-14	5	1	0	0	0	-1	0
18.	1	121114	-11	6	0	0	0	0	0	-1

. list id age time infection xerop gender hfora cost sint

Multiple records per person, with age in months, centered at 36 months, and time indicating visit number

B French (Module 8)

Exploratory analyses

- 1. Plot vitamin A deficiency and infection status, by age, for a sample of individuals
- 2. Plot percent with respiratory infection versus age, by presence or absence of vitamin A deficiency
- 3. Explore correlation structure by visit number, and calculate percent with respiratory infection at each visit

Regression analyses

- 4. Evaluate the association between respiratory infection and vitamin A deficiency using an ordinary logistic regression model
- Use GEE to estimate the population-averaged odds ratio for respiratory infection, comparing those with vitamin A deficiency to those without, given equivalent values of other covariates. Explore multiple specifications of working correlation
- 6. Use GLMM to estimate the conditional odds ratio for respiratory infection, comparing a typical individual with vitamin A deficiency to a typical individual without, given equivalent values of other covariates. Estimate the variability in the probability of respiratory infection across individuals

Answers

Overview

Review: Longitudinal data analysis

Case study: Longitudinal depression scores

Case study: Indonesian Children's Health Study

Case study: Carpal tunnel syndrome

Summary and resources

Carpal tunnel syndrome trial

- Jarvik et al. (2009) compared surgical versus non-surgical treatment for carpal tunnel syndrome (CTS)
- 116 participants were randomized
- Outcomes were assessed using the CTS assessment questionnaire (CTSAQ), every 3 months for 12 months
 - Primary: functional status (low values are favorable)
 - Secondary: symptom severity
- Crossover to surgery was allowed after 3 months
- Goal: Determine whether surgery improves functional status

Data (wide format)

. list ID idgroup treatassign surgical ctsaqf0 ctsaqf1 ctsaqf2 ctsaqf3 ctsaqf4

		ctsaqf2		ctsaqf0	surgical	treata~n	idgroup	ID	
		1.888889		1.888889	3	0	2	11050	1.
4	3.777778	4.222222	4.111111	4	0	0	2	11068	2.
	1				1	1	2	11071	3.
2.333333	2.5	2.125	1.5	1.375	0	0	2	11078	4. I
:	1.777778	1	2.111111	3.222222	1	1	2	11086	5. '
1.222222	1.222222	1.555556	1.3333333	2.555556	1	1	2	11087	6.
:	1.333333	1.444444	1.555556	2	4	0	2	11098	7.
2		2.888889		2.875	1	1	2	11117	8.
2.7	2.75	3.25	2.75	3.125	1	1	4	12001	9. I
		4.555555	4.333333		3	0	4	12004	
		1	1		1	1	4	12049	
2.444444	2.333333	2.333333	3.333333	2.444444	0	1	4	12068	2.
4.22222	3.777778		4.222222	2.888889	0	0	4	12093	3.
:	1	1	1.444444	2.888889	1	1	4	12143	4. I
2.22222	•	•	3.25	3	1	0	4	12153	5. I
			3.777778	4.555555	1	1	4	12177	6.
:	1.333333	1.111111	1.222222	2	0	1	3	13001	7.
:	1	1.444444	1.333333	2.333333	1	1	3	13002	8. I
1.555556	1.444444	1.777778	1.666667	1.888889	1	0	3	13005	9. I
:	2	1.777778	2.333333	3.111111	1	1	3	13006	0. I

Variables

- ID: unique participant ID
- idgroup: study site
 (1 = private, 2 = UW, 3 = VA, 4 = HMC)
- age: age in years
- gender
 (0 = male, 1 = female)
- treatassign: randomized intervention (0 = non-surgery, 1 = surgery)
- surgreported#: surgery reported at visit # (0 = no, 1 = yes)
- ctsaqf#: CTSAQ functional status at visit #
- ctsaqs#: CTSAQ symptom severity at visit #
- surgical: treated surgically during study (0 = never, 1 = 0-3 mos, 2 = 3-6 mos, 3 = 6-9 mos, 4 = 9-12 mos)

Exploratory analyses

- 1. Plot individual trajectories in CTSAQF over time by treatment
- 2. Plot average CTSAQF over time by treatment
- 3. Summarize means, variances, and correlations over time by treatment

Regression analyses (intention-to-treat)

- 4. Evaluate POST, CHANGE, and ANCOVA models for each timepoint with CTSAQF as outcome
 - POST: follow-up measurement only
 - CHANGE: difference between follow-up and baseline measurement
 - ANCOVA: follow-up measurement controlling for baseline
- 5. Evaluate difference in mean CTSAQF between treatments at 12 months, adjusted for baseline CTSAQF and study site
- Using repeated measures regression models, evaluate difference in mean CTSAQF between treatments using all timepoints, adjusted for baseline CTSAQF and study site

Bonus analyses (as treated)

- 7. Summarize actual treatment patterns by assigned treatment group
- 8. Plot average CTSAQF by visit...
 - ▶ For those who received surgery by 3 months versus those who did not
 - ► For those who received surgery by 9 months versus those who did not
- 9. Use linear mixed-effects models to estimate differences in mean CTSAQF when exposure is surgery by 3 months and surgery by 9 months instead of assigned treatment group

Answers

Overview

Review: Longitudinal data analysis

Case study: Longitudinal depression scores

Case study: Indonesian Children's Health Study

Case study: Carpal tunnel syndrome

Summary and resources

Big picture: GEE

- Marginal mean regression model
- Model for longitudinal correlation
- Semi-parametric model: mean + correlation
- Form an unbiased estimating function
- Estimates obtained as solution to estimating equation
- Model-based or empirical variance estimator
- Robust to correlation model mis-specification
- Large sample: $n \ge 40$
- Testing with Wald tests
- Marginal or population-averaged inference
- Efficiency of non-independence correlation structures
- Missing completely at random (MCAR)
- Time-dependent covariates and endogeneity
- Only one source of positive or negative correlation
- R package geepack; Stata command xtgee

Big picture: GLMM

- Conditional mean regression model
- Model for population heterogeneity
- Subject-specific random effects induce a correlation structure
- Fully parametric model based on exponential family density
- Estimates obtained from likelihood function
- Conditional (fixed effects) and maximum (random effects) likelihood
- Approximation or numerical integration to integrate out $\boldsymbol{\gamma}$
- Requires correct parametric model specification
- Testing with likelihood ratio and Wald tests
- Conditional or subject-specific inference
- Induced marginal mean structure and 'attenuation'
- Missing at random (MAR)
- Time-dependent covariates and endogeneity
- Multiple sources of positive correlation
- R package lme4; Stata commands mixed, melogit

Final summary

Generalized estimating equations

- Provide valid estimates and standard errors for regression parameters of interest even if the correlation model is incorrectly specified (+)
- Empirical variance estimator requires sufficiently large sample size (-)
- Always provide population-averaged inference regardless of the outcome distribution; ignores subject-level heterogeneity (+/-)
- Accommodate only one source of correlation (-/+)
- Require that any missing data are missing completely at random (-)

Final summary

Generalized linear mixed-effects models

- Provide valid estimates and standard errors for regression parameters only under stringent model assumptions that must be verified (-)
- Provide population-averaged or subject-specific inference depending on the outcome distribution and specified random effects (+/-)
- Accommodate multiple sources of correlation (+/-)
- Require that any missing data are missing at random (-/+)

Advice

- Analysis of longitudinal data is often complex and difficult
- You now have versatile methods of analysis at your disposal
- Each of the methods you have learned has strengths and weaknesses
- Do not be afraid to apply different methods as appropriate
- Statistical modeling should be informed by exploratory analyses
- Always be mindful of the scientific question(s) of interest

Resources

Introductory

- Fitzmaurice GM, Laird NM, Ware JH. *Applied Longitudinal Analysis*. Wiley, 2004.
- Gelman A, Hill J. *Data Analysis Using Regression and Multilevel/ Hierarchical Models*. Cambridge University Press, 2007.
- Hedeker D, Gibbons RD. Longitudinal Data Analysis. Wiley, 2006.

Advanced

- Diggle PJ, Heagerty P, Liang K-Y, Zeger SL. Analysis of Longitudinal Data, 2nd Edition. Oxford University Press, 2002.
- Molenbergs G, Verbeke G. *Models for Discrete Longitudinal Data*. Springer Series in Statistics, 2006.
- Verbeke G, Molenbergs G. *Linear Mixed Models for Longitudinal Data*. Springer Series in Statistics, 2000.

Thank you!