## Session 2

## Binary logistic model

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## Binary Logistic Model

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### 2.1 Dichotomisation of ordinal data to a binary response

Binary data are a special case of Ordinal data when there are just two response categories
e.g.

No Pain<br>No Bleeding<br>No Ulcer<br>Pain<br>Bleeding<br>Ulcer

However, even if we have multiple response categories, e.g.

| no pain | mild pain | moderate pain | severe pain |
| :--- | :--- | :--- | :--- |

these categories can be reduced to a binary response:-

| no, mild, moderate pain | severe pain |
| :--- | :--- |


| no and mild pain | moderate and severe pain |
| :--- | :--- |



Start by analysing binary data - as all further methods are developed from the binary response

### 2.2 Binary methods Example 2: Outcome following a head injury

| Glasgow Outcome Scale <br> Count (\%) | Treatment |  |  |  | Total |  |
| :--- | ---: | ---: | ---: | ---: | ---: | :--- |
|  | Control |  | Treated |  |  |  |
|  | 42 | $(25)$ | 71 | $(40)$ | 113 | $(33)$ |
| 2: Moderate disability | 27 | $(16)$ | 30 | $(17)$ | 57 | $(17)$ |
| 3: Severe disability | 33 | $(20)$ | 27 | $(15)$ | 60 | $(18)$ |
| 4: $\quad$ Vegetative state/Dead | 63 | $(38)$ | 48 | $(27)$ | 111 | $(33)$ |
| Total | $165(100)$ | $176(100)$ | 341 | $(100)$ |  |  |

Objective: to relate
Outcome: $\quad$ Favourable $=$ categories 1 and 2
Unfavourable $=$ categories 3 and 4
to
Treatment: $\quad 0=$ Control
Baseline age

## Standard notation for a $2 \times 2$ table

|  | Control | Treated | Total |
| :--- | :---: | :---: | :---: |
| Success | $\mathrm{s}_{\mathrm{C}}$ | $\mathrm{s}_{\mathrm{T}}$ | s |
| Failure | $\mathrm{f}_{\mathrm{C}}$ | $\mathrm{f}_{\mathrm{T}}$ | f |
| Total | $\mathrm{n}_{\mathrm{C}}$ | $\mathrm{n}_{\mathrm{T}}$ | n |

Using Example 2

|  | Control | Treated | Total |
| :--- | :---: | :---: | :---: |
| Favourable | 69 | 101 | 170 |
| Unfavourable | 96 | 75 | 171 |
| Total | 165 | 176 | 341 |

## Estimation of difference

## (1) Simple proportions

$p_{i}=P($ Success; Treatment Group i), $i=C, T$

Control
$\hat{\mathrm{p}}_{\mathrm{C}}=\frac{\mathrm{s}_{\mathrm{C}}}{\mathrm{n}_{\mathrm{C}}}$
$\frac{69}{165}=0.42$

Treated

$$
\hat{\mathrm{p}}_{\mathrm{T}}=\frac{\mathrm{s}_{\mathrm{T}}}{\mathrm{n}_{\mathrm{T}}}
$$

$$
\frac{101}{176}=0.57
$$

(2) Odds ratio: the Odds of a success for a patient in group T relative to the Odds of a success for a patient in group C

$$
\psi=\frac{\mathrm{p}_{\mathrm{T}}\left(1-\mathrm{p}_{\mathrm{C}}\right)}{\mathrm{p}_{\mathrm{C}}\left(1-\mathrm{p}_{\mathrm{T}}\right)} \begin{array}{lll}
>1 & \text { Group T better } \\
& =1 & \text { No difference } \\
& \text { Group T worse }
\end{array}
$$

Odds ratio of a favourable outcome in the treated relative to the control group

$$
\hat{\psi}=\frac{101 \times 96}{69 \times 75}=1.874
$$

## (3) Log odds ratio

denoted by $\theta: \quad \theta=\log \psi$
$>0$ Group T better
$=0$ No difference
$<0$ Group T worse
estimated by $\quad \hat{\theta}=\log 1.874=0.628$

$$
\begin{aligned}
\operatorname{se}(\hat{\theta}) & =\left(\frac{1}{\mathrm{~s}_{\mathrm{C}}}+\frac{1}{\mathrm{~s}_{\mathrm{T}}}+\frac{1}{\mathrm{f}_{\mathrm{C}}}+\frac{1}{\mathrm{f}_{\mathrm{T}}}\right)^{\frac{1}{2}} \\
& =\left(\frac{1}{69}+\frac{1}{101}+\frac{1}{96}+\frac{1}{75}\right)^{\frac{1}{2}}=0.2194
\end{aligned}
$$

## 95\% confidence interval for $\boldsymbol{\theta}$

$\hat{\theta} \pm 1.96 \mathrm{se}(\hat{\theta})$<br>$0.628 \pm 1.96$ (0.2194)<br>(0.198, 1.058)

Hence, 95\% Cl for $\psi$
$\exp [\hat{\theta} \pm 1.96 \operatorname{se}(\hat{\theta})]$
(1.22, 2.88)

## Hypothesis testing

$H_{0}: \theta=0$
vs $H_{1}: \theta \neq 0$
i.e. $\psi=1, p_{C}=p_{T}$
i.e. $\psi \neq 1, p_{C} \neq p_{T}$

Pearson's chi-square test

$$
X^{2}=\sum \frac{(\mathrm{O}-\mathrm{E})^{2}}{\mathrm{E}}=8.256 \quad \text { c.f. } \chi_{1}^{2}
$$

Significant result p 0.004

| Observed (Expected) | Control | Treated | Total |
| :--- | :--- | :--- | ---: |
| Favourable | $69(82.26)$ | $101(87.74)$ | 170 |
| Unfavourable | $96(82.74)$ | $75(88.26)$ | 171 |
| Total | 165 | 176 | 341 |

## Approach via efficient score and Fisher's information statistics for log odds ratio $\theta$

## Efficient score: $\quad$ Z: measure of group T advantage over group C <br> $\mathrm{Z}=\frac{\mathrm{S}_{\mathrm{T}} \mathrm{f}_{\mathrm{C}}-\mathrm{s}_{\mathrm{C}} \mathrm{f}_{\mathrm{T}}}{\mathrm{n}}$

Fisher's information: $\quad \mathrm{V}^{\prime}$ : amount of information in the data about the group effect
$\mathrm{V}^{\prime}=\frac{\mathrm{n}_{\mathrm{C}} \mathrm{n}_{\mathrm{T}} \mathrm{sf}}{\mathrm{n}^{3}}$

$$
\begin{aligned}
\mathrm{Z} & =\frac{\mathrm{s}_{\mathrm{T}} \mathrm{f}_{\mathrm{C}}-\mathrm{s}_{\mathrm{C}} \mathrm{f}_{\mathrm{T}}}{\mathrm{n}}=\frac{101 \times 96-69 \times 75}{341}=13.258 \\
\mathrm{~V}^{\prime} & =\frac{\mathrm{n}_{\mathrm{C}} \mathrm{n}_{\mathrm{T}} \mathrm{sf}}{\mathrm{n}^{3}}=\frac{165 \times 176 \times 170 \times 171}{341^{3}}=21.290
\end{aligned}
$$

Test statistic for $\mathbf{H}_{0}: \boldsymbol{\theta}=\mathbf{0} \quad \frac{\mathrm{Z}^{2}}{\mathrm{~V}^{\prime}}$

$$
\frac{\mathrm{Z}^{2}}{\mathrm{~V}^{\prime}}=8.256 \quad \text { (equal to Pearson's chi-square statistic) }
$$

Under $\mathbf{H}_{0}: \quad \frac{\mathrm{Z}^{2}}{\mathrm{~V}^{\prime}} \sim \chi_{1}^{2}$

Maximum likelihood estimate of $\theta \cong \frac{\mathrm{Z}}{\mathrm{V}^{\prime}}$

$$
\frac{\mathrm{Z}}{\mathrm{~V}^{\prime}}=\frac{13.258}{21.290}=0.623
$$

Standard error of $\frac{\mathrm{Z}}{\mathrm{V}^{\prime}}$ is $\frac{1}{\sqrt{\mathrm{~V}^{\prime}}}$

$$
\frac{1}{\sqrt{\mathrm{~V}^{\prime}}}=\frac{1}{\sqrt{21.290}}=0.217
$$

- Approximate $95 \%$ confidence interval for $\theta$

$$
\frac{\mathrm{Z}}{\mathrm{~V}^{\prime}} \pm 1.96 \frac{1}{\sqrt{\mathrm{~V}^{\prime}}}
$$

$0.623 \pm 1.96(0.217)$
(0.198, 1.048)

- Approximate 95\% confidence interval for $\psi$
$\exp \left[\frac{\mathrm{Z}}{\mathrm{V}^{\prime}} \pm 1.96 \frac{1}{\sqrt{\mathrm{~V}^{\prime}}}\right]$
(1.22, 2.85)


### 2.3 Logistic analysis using SAS Proc Logistic

Model: $\log \left[\frac{\mathrm{p}\left(\mathrm{z}_{\mathrm{i}}\right)}{1-\mathrm{p}\left(\mathrm{z}_{\mathrm{i}}\right)}\right]=\alpha+\beta \mathrm{z}_{\mathrm{i}}$
where $p\left(z_{i}\right)=$ probability of a favourable outcome

$$
z_{\mathrm{i}}=\left\{\begin{array}{c}
0: \text { if treat }=0(\text { Control }) \\
1: \text { if treat }=1(\text { Treated })
\end{array}\right.
$$

|  | Control | Treated | Total |
| :--- | :--- | :--- | :--- |
| Favourable | 69 | 101 | 170 |
| Unfavourable | 96 | 75 | 171 |
| Total | 165 | 176 | 341 |

SAS Proc Logistic program and output are shown in Supplement 2.1

## (1) Estimation of difference

Log odds ratio $\theta$ for a favourable outcome Treated: Control

$$
\theta=\log \left[\frac{\mathrm{p}(1)\{1-\mathrm{p}(0)\}}{\mathrm{p}(0)\{1-\mathrm{p}(1)\}}\right]=(\alpha+\beta \times 1)-(\alpha+\beta \times 0)
$$

From $2 \times 2$ table

$$
\hat{\theta}=\log \left(\frac{\mathrm{s}_{1} \mathrm{f}_{0}}{\mathrm{~s}_{0} \mathrm{f}_{1}}\right)=0.628 \quad \operatorname{se}(\hat{\theta})=\left(\frac{1}{\mathrm{~s}_{0}}+\frac{1}{\mathrm{~s}_{1}}+\frac{1}{\mathrm{f}_{0}}+\frac{1}{\mathrm{f}_{1}}\right)^{\frac{1}{2}}=0.2194
$$

Using Efficient score and Fisher's information

$$
\hat{\theta} \cong \frac{\mathrm{Z}}{\mathrm{~V}^{\prime}}=0.623 \quad \operatorname{se}(\hat{\theta}) \approx \frac{1}{\sqrt{\mathrm{~V}^{\prime}}}=0.217
$$

From SAS

$$
\hat{\theta}=\hat{\beta}=0.628 \quad \text { se }(\hat{\theta})=0.2194
$$

## Odds ratio $\psi$

$$
\begin{aligned}
& \hat{\psi}=\frac{101 \times 96}{69 \times 75}=1.874 \\
& \frac{\mathrm{P}(\text { Success } ; \text { Treated })}{\mathrm{P}(\text { Failure } ; \text { Treated })}=1.874 \frac{\mathrm{P}(\text { Success } ; \text { Control })}{\mathrm{P}(\text { Failure } ; \text { Control })}
\end{aligned}
$$

## 95\% CI for $\psi$

$\exp [0.628 \pm 1.96(0.2194)]$
(1.22, 2.88)
(2) Hypothesis testing of $\mathrm{H}_{0}: \boldsymbol{\theta}=\mathbf{0}$
(a) Likelihood ratio test

$$
\begin{aligned}
\mathrm{D}(0)-\mathrm{D}(\hat{\theta}) & =-2 \ell(0)--2 \ell(\hat{\theta}) \\
& =472.723-464.433 \\
& =8.290 \quad\left(\text { c.f. } \chi_{1}^{2}\right)
\end{aligned}
$$

(b) Score test

$$
\frac{\mathrm{Z}^{2}}{\mathrm{~V}^{\prime}}=8.2562 \quad \text { (c.f. } \chi_{1}^{2} \text { ) Pearson's chi-square statistic }
$$

(c) Wald's chi-square

$$
\left(\frac{\hat{\theta}}{\operatorname{se}(\hat{\theta})}\right)^{2}=8.1885
$$

Statistically significant difference between treatments

## Response variable

- Proc Logistic models the probability of the first ordered value of the response variable as given in the response profile
- Default ordering of response is on formatted labels (if formatted) otherwise actual values
e.g. Dead (2) Survival (1)

Option ORDER = INTERNAL on MODEL or PROC LOGISTIC statement forces
SAS to take order of actual values

## Explanatory variables

- Options on CLASS statement for fitting factors

ORDER = INTERNAL
Order on actual values not on the default formatted values

## PARAM = REF

Reference cell parameterisation. The level of the variable to use as the reference level can be specified.
e.g. treat (ref=‘Control') The default is REF=LAST.

- To fit a continuous covariate, include variable in MODEL statement only
- PROC LOGISTIC offers more control of ordering explanatory variables than PROC GENMOD


### 2.4 Logistic analysis using SAS Proc Genmod

SAS Proc Genmod program and output are shown in Supplement 2.2

### 2.5 Why use Logistic analyses?

Why do we use Logistic analysis rather than:
simple Pearson's chi-square
the Efficient score and Fisher's information?

- to give a systematic way of investigating the structure of data using a linear model
- so that we may adjust for covariate prognostic factors
- so that we get a magnitude and a confidence interval for an effect


### 2.6 Further example using SAS Proc Logistic

To examine the effect of:

- age
- treatment adjusted for age on favourable outcome

SAS Proc Logistic program and output are shown in
Supplement 2.3

## From Proc Logistic output (Supplement 2.3)

(1) Hypothesis testing

Change in deviance due to age

$$
\begin{aligned}
& =472.723-464.600 \\
& =8.123\left(\text { c.f. } \chi_{1}^{2}\right)
\end{aligned}
$$

Change in deviance due treat (adjusted for age)

$$
\begin{aligned}
& =464.600-454.770 \\
& =9.830\left(\text { c.f. } \chi_{1}^{2}\right)
\end{aligned}
$$

## Analysis of deviance table:

| Source | df | Deviance |
| :--- | ---: | ---: |
| age | 1 | 8.123 |
| treat (adjusted for age) | 1 | 9.830 |
| residual | 338 | 454.770 |
| total | 340 | 472.723 |

Effect of baseline age is significant $(p=0.004)$
Treatment effect is still significant having adjusted for baseline age

## (2) Estimation: calculation of log odds ratios

Model: $\quad \log \left[\frac{\mathrm{p}\left(\underline{\mathrm{z}}_{\mathrm{i}}\right)}{1-\mathrm{p}\left(\underline{\mathrm{z}}_{\mathrm{i}}\right)}\right]=\alpha+\eta\left(\underline{\mathrm{z}}_{\mathrm{i}}\right)$
where $\quad \eta\left(\underline{z}_{i}\right)=\beta_{1} z_{i 1}+\beta_{2} z_{i 2}$

$$
\begin{aligned}
& z_{i 1}=\text { age } \\
& z_{i 2}=\left\{\begin{array}{l}
0: \text { if treat }=0(\text { Control }) \\
1: \text { if treat }=1 \text { (Treated })
\end{array}\right.
\end{aligned}
$$

$\mathrm{p}\left(\mathrm{z}_{\mathrm{i}}\right)$ is probability of a favourable outcome
log odds of survival for patient with baseline age $=20$ relative to patient with age $=50$ receiving the same treatment: $\theta$

$$
\begin{aligned}
& \log \left[\frac{\mathrm{p}\left(20, \mathrm{z}_{\mathrm{i} 2}\right)}{1-\mathrm{p}\left(20, \mathrm{z}_{\mathrm{i} 2}\right)}\right]=\alpha+\beta_{1} 20+\beta_{2} \mathrm{z}_{\mathrm{i} 2} \\
& \log \left[\frac{\mathrm{p}\left(50, \mathrm{z}_{\mathrm{i} 2}\right)}{1-\mathrm{p}\left(50, \mathrm{z}_{\mathrm{i} 2}\right)}\right]=\alpha+\beta_{1} 50+\beta_{2} \mathrm{z}_{\mathrm{i} 2} \\
& \hat{\theta}=\operatorname{logit}\left[\mathrm{p}\left(20, \mathrm{z}_{\mathrm{i} 2}\right)\right]-\operatorname{logit}\left[\mathrm{p}\left(50, \mathrm{z}_{\mathrm{i} 2}\right)\right] \\
& \quad=\hat{\beta}_{1}(-30)=-0.0226(-30)=0.678 \\
& \hat{\psi}=\mathrm{e}^{0.678}=1.97
\end{aligned}
$$

Odds of a favourable outcome are greater for younger patients

