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— in addition to overheads from Davis (2002):  
597–611, 613–14, 618, 624, 630, 632, 637–641

## PRACTICAL INFORMATION

### Today's lecture:

- review:
  - \* random effects models (mostly by examples),
  - \* GEE estimation, part I:
    - classical method (sometimes called “GEE1”),
    - some methodological issues postponed to next week,
- examples:
  - \* cross-over trials with two and three periods (Diggle et al., 2002),
  - \* seizure counts (Davis, 2002, and Diggle et al., 2002),
  - \* clinical trial on spasmodic torticollis  $\sim$  neurological disease (Davis, 2002).

### Plan for rest of course:

- final of GEE + transitional models next week (Thursday!),
- summary of approaches + software + worked example,
- missing data,
- Mabrok's seminar.

## ANALYSIS OF RANDOM EFFECT MODELS

Many approaches for GLMM analysis:

- conditional (VER: “stratification”):
  - \* consider the random effects as nuisance parameters, and eliminate by “conditioning” (statistical technique) ⇒ uses only within- cluster information,
  - \* binary outcome: Mantel-Haenszel statistic and conditional logistic regression,
  - \* no assumptions about random effects,
  - \* limited scope: no between-group predictors,
- quasi-likelihood approximations:
  - \* numerically simple and fast,
  - \* biased (towards 0) estimates in certain situations,
  - \* no likelihood-based analysis,
- numerical integration:
  - \* numerically demanding and not always numerically robust,
  - \* `gllamm` macro in Stata = state-of-the-art software,
- Bayesian analysis (all above are “frequentist”).

## EXAMPLES: CROSS-OVER TRIALS

### 2×2 trial:

- 2 treatments (A=active, B=placebo) and 2 periods  $\Rightarrow$  2 treatment orders: AB or BA,
- outcome = electrocardiogram abnormal/normal (0/1),
- data:

Group	Responses				Total
	(1,1)	(0,1)	(1,0)	(0,0)	
AB	22	0	6	6	34
BA	18	4	2	9	33

### 3×3 trial:

- 3 treatments (A=placebo, B/C=low/high analgesic) and 3 periods  $\Rightarrow$  6 treatment orders (below), corresponding to two Latin squares,
- outcome = relief (no/yes) of primary dysmenorrhoea,
- data:

Group	Responses								Total
	000	100	010	001	110	101	011	111	
ABC	0	0	2	2	1	0	9	1	15
ACB	2	1	0	0	0	0	9	4	16
BAC	0	1	1	1	0	8	3	1	15
BCA	0	1	1	1	8	0	0	1	12
CAB	3	0	0	0	1	7	2	1	14
CBA	1	5	0	0	4	3	1	0	14

## RESULTS FOR 2 × 2 CROSS-OVER TRIAL

Random effects/GEE logistic regression estimates:

Parameter	Estimate (SE) on logit scale		
	Conditional	Num. Integration	GEE (classical)
intercept	–	1.52 (.86)	0.52 (.25)
$\beta(\text{tx})$	1.61 (.77)	1.60 (.77)	0.56 (.24)
clustering	–	$\hat{\sigma} = 4.37$	$\tilde{\rho} = 0.62$
intercept	–	2.17 (1.10)	0.67 (.29)
$\beta(\text{tx})$	10.9 (.)	1.84 (0.90)	0.57 (.23)
$\beta(\text{period})$	-10.3 (.)	-1.02 (0.80)	-0.30 (.23)
clustering	–	$\hat{\sigma} = 4.84$	$\tilde{\rho} = 0.64$

- numerical integration by SAS, proc nlmixed
- $\tilde{\rho}$  = working correlation coefficient

### Comments:

- agreement between two random effects analyses (first model),
- conditional estimation fails due to sparse data (12/67 subjects),
- very strong clustering,
- approximate correction from SS to PA by factor  $\sqrt{1 + 0.346 \cdot 4.84^2} = 3.0 \Rightarrow$  fair agreement,
- no tx × period interaction (not shown).

## RESULTS FOR 3 × 3 CROSS-OVER TRIAL

Random effects logistic regression estimates (logit scale):

Parameter	Estimate (SE)		
	Conditional	Num. Integration	GEE (classical)
intercept	–	-1.09 (.33)	-1.08 (.31)
$\beta(\text{tx})$ B	1.98 (.45)	2.11 (.40)	2.10 (.42)
$\beta(\text{tx})$ C	1.71 (.41)	2.07 (.38)	2.07 (.42)
$\beta(\text{per})$ 2	0.69 (.56)	0.41 (.46)	0.42 (.41)
$\beta(\text{per})$ 3	0.85 (.58)	0.59 (.48)	0.59 (.46)
$\beta(\text{prev})$ B	-0.14 (.60)	-0.13 (.50)	-0.14 (.51)
$\beta(\text{prev})$ C	-1.24 (.65)	-0.93 (.49)	-0.93 (.44)
clustering	–	$\hat{\sigma} = 0.013$	$\tilde{\rho} = -0.03$

- numerical integration by (crude) `glmmML` library in R
- $\tilde{\rho}$  = working correlation coefficient

### Comments:

- $\beta(\text{prev}) \sim$  carry-over effects, e.g.  $\hat{\beta}_c = -0.93 \sim$  reduction in odds of relief in period following C (relative to A) by factor  $e^{-0.93} = 0.40$ ,
- close agreement between numerical integration and GEE approaches, but some differences to conditional,
- no substantial clustering,
- no treatment by period interactions (not shown).

## EXAMPLE: SEIZURE COUNTS

Clinical trial involving 59 epileptics:

- two treatment groups (progabide medicament and placebo),
- counts of seizures in four 2-week intervals, plus 8-week baseline interval prior to treatment,
- additional information on age.

Data analysis preliminaries:

- outcome (counts) strongly non-normal  $\Rightarrow$ 
  - \* summary statistic approach (Ch. 2 of Davis, 2002),
  - \* GLMM, possibly a Poisson regression:
    - length of weekly intervals  $\sim$  “offset” (time at risk),
    - dichotomous predictor (time) to separate baseline and study periods:  
time=0 for baseline, and =1 for study period.
- patient no. 207 very unusual (very high counts), but cannot be excluded as an error,
- seizure rates (per 2 weeks):

Treatment	Time	Seizure rate
Progabide	0	7.90
	1	7.96
Placebo	0	7.70
	1	8.60

— weak treatment effect (if any).

## RESULTS FOR SEIZURE COUNTS

Random effects/GEE Poisson regression estimates:

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Parameter	Estimate (SE) on log scale			
	Conditional	Num. Integration		GEE (classical)
intercept	–	1.03 (.15)	1.07 (.14)	1.35 (.16)
$\beta(\text{tx})$	–	-0.02 (.21)	0.05 (.19)	0.03 (.22)
$\beta(\text{time})$	0.11 (.047)	0.11 (.047)	-0.002 (.11)	0.11 (.12)
$\beta(\text{tx*time})$	-0.10 (.065)	-0.10 (.065)	-0.31 (.15)	-0.10 (.21)
clustering	–	$\hat{\sigma} = 0.78$	$\hat{\sigma}_0 = 0.71$	$\tilde{\rho} = 0.78$
	–	–	$\hat{\sigma}_{\text{time}} = 0.48$	–
	–	–	$\hat{\rho} = 0.17$	–

- conditional by explicit formula calculations
- numerical integration by SAS, `proc nlmixed`
- $\tilde{\rho}$  = working correlation coefficient

Comments:

- fair agreement between methods (except for random effects and GEE intercepts),
- strong evidence of random slopes:  
 $G^2 = 2021.4 - 1849.3 = 172.1$  (df=2),
- log-scale variances of random slope model:
  - time = 0 :  $\sigma^2 = 0.71^2 = 0.50$ ,
  - time = 1 :  $\sigma^2 = 0.71^2 + 0.48^2 + 2 \cdot 0.71 \cdot 0.48 \cdot 0.16 = 0.84$ ,
- smaller correlation between baseline count and study week count than between two study week counts.