## Faculty of Health Sciences

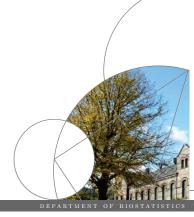


# Logistic regression

Basic Statistics for health researchers

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Section of Biostatistics, University of Copenhagen



March 12, 2025

## Outline

#### Overview

ILO: to outline what the (univariate) logistic model is about

#### One binary covariate

LO: to interpret the model fit when using only one binary covariate

#### One categorical (non binary) covariate

ILO: to interpret the model fit when using only categorical binary covariate ILO: to use the model to perform a powerful multiple testing adjustment

#### One continuous covariate

ILO: to interpret and check the model, when using only one continuous covariate

#### Multiple regression: two binary covariates

ILO: to interpret the fit of a multiple regression (i.e. an adjusted model)

#### Multiple regression: one continuous and one binary covariate

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#### Multiple regression: interaction

ILO: to interpret interactions and explain their meaning to others



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# Regression

Regression can be used when we want to adjust for confounding, or to account for risk factors to gain power in the analysis.

The type of outcome determines which kind of model is relevant:

### Continuous outcome

- Linear regression.
  - ► To model means.
  - Association parameters : differences between mean values

## Binary outcome

- ► Logistic regression.
  - ► To model probabilities.
  - Association parameters: odds ratio (OR) or equivalently differences between log(odds).

# Binary outcome regression: why not linear?

If the outcome variable is binary:

$$Y_i = \begin{cases} 1 & \text{if } i \text{ is diseased} \\ 0 & \text{if } i \text{ is not diseased} \end{cases}$$

then linear regression

$$Y_i = \alpha + \beta X_i + \varepsilon_i$$

is **not good** for many reasons.



# Binary outcome regression: why not linear?

If the outcome variable is binary:

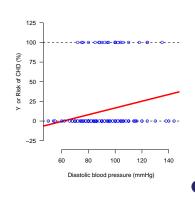
$$Y_i = \left\{ \begin{array}{ll} 1 & \text{if } i \text{ is diseased} \\ 0 & \text{if } i \text{ is not diseased} \end{array} \right.$$

then linear regression

$$Y_i = \alpha + \beta X_i + \varepsilon_i$$

is **not good** for many reasons.

One reason is that the regression line can go below 0 and above 1.



# Logistic regression

$$Y_i = \begin{cases} 1 & \text{if } i \text{ is diseased} \\ 0 & \text{if } i \text{ is not diseased} \end{cases}$$

We model the probability of the event  $Y_i = 1$  with predictor variable  $X_i$ 

$$P(Y_i = 1 | X_i) = p_i$$

Instead of using a linear regression for  $p_i$ , which is bounded between 0 and 1, we apply the logit function:

$$logit(p_i) = log\left(\frac{p_i}{1 - p_i}\right) = a + bx_i$$

lt's a good idea as  $\log\left(\frac{p_i}{1-p_i}\right)$  can be both negative and positive.

$$\log\left(\frac{p_i}{1-p_i}\right) = a + bx_i$$

$$\to \left(\frac{p_i}{1-p_i}\right) = \exp(a + bx_i) = \exp(a) \cdot \exp(bx_i)$$

If we consider a categorical X, with two levels:

$$X = \begin{cases} 1 & \text{if in group 1} \\ 0 & \text{if in group 2} \end{cases}$$

The odds ratio are defined as:

$$OR = \frac{\left(\frac{p_1}{1-p_1}\right)}{\left(\frac{p_2}{1-p_2}\right)} = \frac{\exp(a+b\cdot 1)}{\exp(a+b\cdot 0)} = \frac{\exp(a)\cdot \exp(b)}{\exp(a)\cdot 1} = \exp(b)$$

thus,  $\exp(b)$  is interpreted as odds ratio, or equivalently the difference between log(odds)

$$b = \log(OR) = \log\left(\frac{\frac{p_1}{1 - p_1}}{\frac{p_2}{1 - p_2}}\right) = \log\left(\frac{p_1}{1 - p_1}\right) - \log\left(\frac{p_1}{1 - p_1}\right)$$



# Case: Framingham study<sup>1</sup>

Data. n=1.363:

	AGE	FRW	SBP	DBP	CHOL	CIG	sex	disease
1	45	93	100	62	220	0	Female	0
2	48	93	108	70	340	0	Male	0
3	45	91	160	100	171	0	${\tt Female}$	0
4	50	110	110	70	224	0	Male	0
5	48	85	110	70	229	25	Male	0
6	55	101	134	84	224	0	Male	0



Outcome: coronary heart disease (CHD) during follow-up (1=yes/no=0).

- ► sex: Male/Female
- ► AGE: age (years) at baseline (45-62)
- ► FRW: "Framingham relative weight" (pct.) at baseline (52-222; 11 persons have missing values)
- ► SBP: systolic blood pressure at baseline (*mmHg*) (90-300)
- ▶ **DBP:** diastolic blood pressure at baseline (*mmHg*) 50-160)
- ► CHOL: cholesterol at baseline (mg/100ml) (96-430)
- ► CIG: cigarettes per day at baseline (0-60; 1 person has missing value)
- disease: 1 if coronary heart disease (CHD) during follow-up, 0 otherwise

## Categorical explanatory variable (K groups, k = 1, ..., K)

## Linear regression, continuous outcome Y

$$mean(Y|group k) - mean(Y|reference group)$$

E.g., the average blood pressure was higher in males compared to females.

## Logistic regression, binary outcome

$$OR = \frac{\text{odds(group } k)}{\text{odds(reference group)}}$$

E.g., the risk (or the odds <sup>2</sup>) of coronary heart disease was higher in males compared to females.



 $\frac{1}{2}$  remember: odds(p)= p/(1-p) and "higher odds" is equivalent to "higher risk".

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# Quantitative (continuous) predictor variables

## Linear regression, continuous outcome Y

Differences in mean values per unit of X:

$$mean(Y|x+1) - mean(Y|x)$$

E.g., the average systolic blood pressure increased with one unit of age.

# Quantitative (continuous) predictor variables

## Linear regression, continuous outcome Y

Differences in mean values per unit of X:

$$\operatorname{mean}(Y|x+1) - \operatorname{mean}(Y|x)$$

E.g., the average systolic blood pressure increased with one unit of age.

## Logistic regression, binary outcome

Ratio of odds per unit of X

Odds ratio = 
$$\frac{\operatorname{odds}(x+1)}{\operatorname{odds}(x)}$$

Differences in log(odds) per unit of X

$$\log(OR) = \log \left\{ \mathsf{odds}(x+1) \right\} - \log \left\{ \mathsf{odds}(x) \right\}$$

E.g., the risk (odds) of coronary heart disease increased with age.



## Linearity in regression models

For a continuous variable X (e.g. age), linearity means that the effect of a unit change of X on the outcome does not depend on the value of X.

ightharpoonup Linear regression, continuous outcome Y

$$\begin{aligned} \operatorname{mean}(Y|45+1) - \operatorname{mean}(Y|45) &= \operatorname{mean}(Y|46+1) - \operatorname{mean}(Y|46) \\ &= \cdots = \operatorname{mean}(Y|61+1) - \operatorname{mean}(Y|61) \end{aligned}$$

► Logistic regression, binary outcome

$$\frac{\operatorname{odds}(45+1)}{\operatorname{odds}(45)} = \frac{\operatorname{odds}(46+1)}{\operatorname{odds}(46)} = \cdots = \frac{\operatorname{odds}(61+1)}{\operatorname{odds}(61)}$$

Linearity is a model assumption which should be checked!<sup>3</sup>



By default, software report log(Odds ratio) = difference in log(odds).

$$\begin{split} \log{(\mathsf{OR})} &= \log\left\{\frac{\mathsf{odds}(\mathsf{group}\;\mathsf{k})}{\mathsf{odds}(\mathsf{reference}\;\mathsf{group})}\right\} \\ &= \log\left\{\mathsf{odds}(\mathsf{group}\;\mathsf{k})\right\} - \log\left\{\mathsf{odds}(\mathsf{reference}\;\mathsf{group})\right\} \end{split}$$

But it does not matter for the **interpretation**.

$$ightharpoonup OR > 1 \Leftrightarrow \log(\mathsf{OR}) > 0 \Leftrightarrow RR > 1$$
 (higher risk)

$$ightharpoonup OR = 1 \Leftrightarrow \log(\mathsf{OR}) = 0 \Leftrightarrow RR = 1$$
 (same risk)

$$ightharpoonup OR < 1 \Leftrightarrow \log{(\mathsf{OR})} < 0 \Leftrightarrow RR < 1$$
 (lower risk)



 $^{\overline{11/68}}$   $^{3}$ Categorizing a continuous covariate can be useful when linearity does not hold

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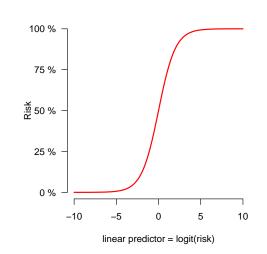
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# Appendix: further details

Equivalently, the (univariate) logistic model is:

$$p_i = \frac{\exp(a + bx_i)}{1 + \exp(a + bx_i)}$$

 $ightharpoonup a + bx_i$ : linear predictor



# Appendix: further details

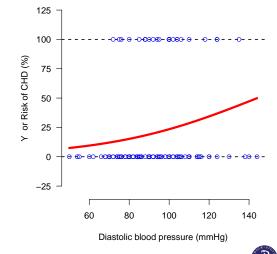
Example of model fit, with x being the diastolic blood pressure (mmHg):

$$p_i = \frac{\exp(-3.86 + 0.027x_i)}{1 + \exp(-3.86 + 0.027x_i)}$$

Here the linear predictor ranges from

$$-3.86 + 0.027 \cdot 50 = -3.52$$
 to  $-3.86 + 0.027 \cdot 144 = -0.13$ 

because the pressure ranges from 50 to 144.



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## Research question:<sup>4</sup>

Do men and women have the same risk of coronary heart disease?



<sup>15/68</sup> <sup>4</sup>A bit made up, just for pedagogical purpose, to illustrate the concepts

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# A binary explanatory variable

$$Y_i = \begin{cases} 1 & \text{subject i develops coronary heart diseased (CHD)} \\ 0 & \text{subject i does not develop CHD} \end{cases}$$
 
$$X_i = \begin{cases} 1 & \text{subject } i \text{ is a female} \\ 0 & \text{if subject } i \text{ a male (REF group)} \end{cases}$$

Univariate logistic regression for  $p_i = P(Y_i = 1 | X_i = x_i)$ :

$$\log\left(\frac{p_i}{1-p_i}\right) = a + bx_i = \left\{\begin{array}{cc} a & \text{males} \\ a+b & \text{females} \end{array}\right.$$

# A binary explanatory variable

$$Y_i = \begin{cases} 1 & \text{subject i develops coronary heart diseased (CHD)} \\ 0 & \text{subject i does not develop CHD} \end{cases}$$
 
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Univariate logistic regression for  $p_i = P(Y_i = 1 | X_i = x_i)$ :

$$\log\left(\frac{p_i}{1-p_i}\right) = a + bx_i = \begin{cases} a & \text{males} \\ a+b & \text{females} \end{cases}$$

That means,

$$\begin{split} \log\left(OR_{\operatorname{Qvs}\vec{\mathcal{O}}}\right) &= \log\left(\frac{\operatorname{odds\ for\ } \operatorname{\diamondsuit}}{\operatorname{odds\ for\ } \vec{\mathcal{O}}}\right) = \\ &= \log(\operatorname{odds\ for\ } \operatorname{\diamondsuit}) - \log(\operatorname{odds\ for\ } \vec{\mathcal{O}}) = (a+b) - a = b \end{split}$$

$$\text{ and } \log \left( OR_{\vec{O'} \text{vsQ}} \right) = - \Big( \log(\text{odds for } \emptyset) - \log(\text{odds for } \vec{O'}) \Big) = -b$$



# Logistic regression in R

fit1 <- glm(disease~sex, data=framingham, family=binomial)</pre>

- ightharpoonup disease  $\sim$  sex: tells R that disease is the outcome and sex the predictor variable.
- data=framingham: tells R where to find the variables disease and sex.
- ▶ glm: means "generalized linear model".
- ► family=binomial: tells R that the outcome is binary and the that logit link function should be used.

## R code: only sex variable

#### R code:

fit1 <- glm(disease~sex, data=framingham, family=binomial)
summary(fit1)</pre>

#### Output (partial):

#### Coefficients:

Note: Pay attention to the default reference group! Here it is "male" as in the previous slide...





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## Comparison with results from the 2x2 table

2x2 contingency table

\_\_\_\_\_

	1	0	Sum
Female	104	616	720
Male	164	479	643
Sum	268	1095	1363

Odds ratio = OR = (p1/(1-p1))/(p2/(1-p2)) = 0.4931Standard error = SE.OR = sqrt((1/a+1/b+1/c+1/d)) = 0.1394

#### And we can see the same results:

- $\widehat{OR} = \exp(-0.7070219) = 0.493$
- $\triangleright$  Standard error of log(OR)= 0.1394.

For this simple case with only one binary predictor variable, logistic regression is equivalent to what we have seen last week.

## Confidence intervals for the odds ratio

library(Publish)
publish(fit1)

Variable	Units	OddsRatio	CI.95	p-value
Sex	Male	1.00	[1.00;1.00]	1
	Female	0.49	[0.38;0.65]	< 0.0001

**Note**:  $0.49 = \exp(-0.71)$ .



## Confidence intervals for the odds ratio

library(Publish)
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Variable	Units	OddsRatio	CI.95	p-value
Sex	Male	1.00	[1.00;1.00]	1
	Female	0.49	[0.38;0.65]	< 0.0001

**Note**:  $0.49 = \exp(-0.71)$ .

#### "Typical"/possible conclusion sentence:

Women have a significantly lower risk to develop coronary heart disease than men (odds ratio: 0.49, 95%-CI: [0.38; 0.65], p-value <0.0001).



framingham\$sexF <- relevel(framingham\$sex,ref="Female")
fit1a <- glm(disease~sexF, data=framingham, family=binomial)
publish(fit1a)</pre>



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## Changing the reference level

framingham\$sexF <- relevel(framingham\$sex,ref="Female")
fit1a <- glm(disease~sexF, data=framingham, family=binomial)
publish(fit1a)</pre>

Variable	Units	OddsRatio	CI.95	p-value
sexF	Female	1.00	[1.00;1.00]	1
	Male	2.03	[1.54;2.66]	< 0.0001

**Note**:  $2.03 = \exp(0.71)$ .

### "Typical"/possible conclusion sentence:

Men have a significantly higher risk to develop coronary heart disease than women (odds ratio: 2.03, 95%-CI: [1.5; 2.7], p-value <0.0001).

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## Research questions:<sup>5</sup>

Is age associated with the risk of coronary heart disease?

Are some age groups more at risk of coronary heart disease than others?



<sup>&</sup>lt;sup>24/68</sup> <sup>5</sup>A bit made up, just for pedagogical purpose, to illustrate the concepts

# Model with only one categorical explanatory variable

Assume that we want to compare several groups, e.g. four age groups.<sup>6</sup>

			Age			
		45-48	49-52	53-56	57-62	
Outcome	Y = 1	51	61	64	92	268
(CHD)	Y = 0	308	298	254	235	1095
		359	359	318	327	1363

#### We can either use:

- $\blacktriangleright$  Fisher's exact test or Pearson  $\chi^2$  for the global null hypothesis H<sub>0</sub>: "the risk is the same for all age groups" (see Lecture 7).
- or logistic regression to make all-pairwise comparisons (via OR) and use the min-P approach to efficiently account for multiple testing.<sup>7</sup>

<sup>&</sup>lt;sup>6</sup>Note: we pooled the data of men and women





7 It also works when we "adjust" for other variables

## Logistic regression: categorical variable with 4 levels:

$$\log\left(\frac{p_i}{1 - p_i}\right) = \begin{cases} a & \text{age } 45 - 48\\ a + b_1 & \text{age } 49 - 52\\ a + b_2 & \text{age } 53 - 56\\ a + b_3 & \text{age } 57 - 62 \end{cases}$$

### Reference category 45-48

$$a = \log \left( \text{odds}(45 - 48) \right)$$

$$b1 = \log \left( \frac{\text{odds}(49 - 52)}{\text{odds}(45 - 48)} \right)$$

$$b2 = \log \left( \frac{\text{odds}(53 - 56)}{\text{odds}(45 - 48)} \right)$$

$$b3 = \log \left( \frac{\text{odds}(57 - 62)}{\text{odds}(45 - 48)} \right)$$

# Results: one categorical predictor variable

Variable	Units	OddsRatio	CI.95	p-value
AgeCut	45-48	Ref		
	49-52	1.24	[0.82;1.85]	0.30425
	53-56	1.52	[1.02;2.28]	0.04151
	57-62	2.36	[1.61;3.46]	< 0.0001

#### Remarks:

- ▶ Not all (six) comparisons are directly available from the "summary" of the model fit, for example the odds ratio for group 57-62 vs 53-56 is not.
- $\widehat{OR} = (92 \times 308)/(51 \times 235) = 2.36$  and all estimates match those of each corresponding  $2 \times 2$  table.
- ▶ Running a similar code after changing the reference group is a convenient "trick" to obtain any OR estimate, with corresponding 95% CI and p-value.



Equivalent to making 3 times the 2x2 table analysis for the group 45-48 versus each of the three others .

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## **Equivalent Results**

Units	OddsRatio	CI.95	p-value
53-56	Ref		
45-48	0.66	[0.44;0.98]	0.04151
49-52	0.81	[0.55;1.20]	0.29468
57-62	1.55	[1.08;2.24]	0.01798
	53-56 45-48 49-52	45-48       0.66         49-52       0.81	53-56 Ref 45-48 0.66 [0.44;0.98] 49-52 0.81 [0.55;1.20]

### As expected:

- ightharpoonup 0.66 = 1/1.52, i.e. OR(45-48 vs 53-56) = 1/OR(53-56 vs 45-48)
- ► 1.55=2.36/1.52, i.e. OR(57-62 vs 53-56)= OR(57-62 vs 45-48)/OR(53-56 vs 45-48)

# Appendix: all pairwise comparisons

#### Statistical methods:

Comparisons between groups were made using a logistic model. P-values and 95% confidence intervals were adjusted for multiple testing using the min-P (aka max-t test) method as implemented in the multcomp-package [ref.<sup>8</sup>] of the statistical software R [ref.<sup>9</sup>] and described in [ref.<sup>10</sup>].

Results (adjusted for multiple testing):

Comparison	Est. OR	95% CI	p-value
49-52 - 45-48	1.24	[0.7;2.1]	0.7329
53-56 - 45-48	1.52	[0.9;2.6]	0.1736
57-62 - 45-48	2.36	[1.4;3.9]	0.0001
53-56 - 49-52	1.23	[0.7;2.0]	0.7207
57-62 - 49-52	1.91	[1.2;3.1]	0.0028
57-62 - 53-56	1.55	[1.0; 2.5]	0.0836

#### Note:

► Significant association between CHD and age groups, p-value= 0.0001 (i.e. the minimum)

BHothorn, Bretz & Westfall (2008). Simultaneous Inference in General Parametric Models. Biometrical Journal 50(3), 346–363.



Bretz, Hothorn, & Westfall (2016). Multiple comparisons using R. CRC Pro

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### Research questions:<sup>11</sup>

Is age associated with the risk of coronary heart disease?

How does age relate to the risk of coronary heart disease?



<sup>&</sup>lt;sup>31/68</sup>11A bit made up, just for pedagogical purpose, to illustrate the concepts

# Quantitative explanatory factor

It is sometimes more natural or better to include the a continuous variable (e.g. age) as a quantitative predictor in the model (i.e., *No grouping*)<sup>12</sup>

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b \cdot \mathsf{age}_i$$

$$\begin{aligned} a &= \log(\mathsf{odds}(\mathsf{age}=0)) \\ b &= \log \left\{ \mathsf{odds}(\mathsf{age}=x+1) \right\} - \log \left\{ \mathsf{odds}(\mathsf{age}=x) \right\} \end{aligned}$$

**Interpretation:** for each year, the factor by which odds for CHD increases with each one unit increase of age (here 1 year) is

$$\exp(b) = \mathsf{odds} \; \mathsf{ratio}$$





Appendix: details on inference (Est., 95% CI & p-values)

- ► We estimate the parameters (a and b) by 'maximum likelihood estimation': giving them values that makes the observations of the outcome of our data the "most likely" to be observed (again).
- ▶ We compute the standard error for each parameter by looking at how much the likelihood to observe the outcome of our data is sensitive to the parameter values. Intuition: high sensitivity= a small range of parameter values makes the data "most likely"= small standard error.
- ▶ 95 % confidence interval for parameters:

estimate  $\pm$  1.96  $\cdot$  standard error.

▶ p-value for the null hypothesis H<sub>0</sub>: "parameter=0":

$$z = \frac{\text{estimate}}{\text{standard error}}$$
 and p-value  $= P(|Z| > |z|)$ ,

with Z being a random variable with a standard normal distribution. It works well, but software can also do something slightly more precise (called "profile likelihood" inference).

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## Raw results

fit5 <- glm(disease~AGE,data=framingham,family=binomial)
summary(fit5)</pre>

#### Coefficients:

$$\widehat{OR} = \exp(0.06581) = 1.07$$

## Good reporting practice

1-year change in age (not very good)

```
fit5 <- glm(disease~AGE,data=framingham,family=binomial)
publish(fit5)</pre>
```

```
Variable Units OddsRatio CI.95 p-value
AGE 1.07 [1.04;1.10] < 0.0001
```

## 10-year change in age (probably better)

```
framingham$age10 <- framingham$AGE/10
fit5b <- glm(disease~age10,data=framingham,family=binomial)
publish(fit5b)</pre>
```

```
Variable Units OddsRatio CI.95 p-value age10 1.93 [1.45;2.56] < 0.0001
```



## Good reporting practice

## 1-year change in age (not very good)

fit5 <- glm(disease~AGE,data=framingham,family=binomial)
publish(fit5)</pre>

Variable Units OddsRatio CI.95 p-value AGE 1.07 [1.04;1.10] < 0.0001

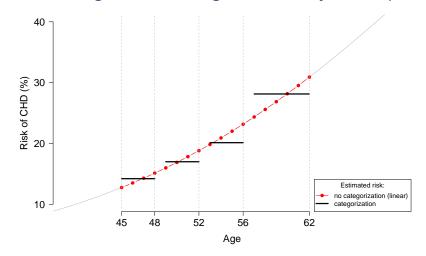
## 10-year change in age (probably better)

framingham\$age10 <- framingham\$AGE/10
fit5b <- glm(disease~age10,data=framingham,family=binomial)
publish(fit5b)</pre>

Variable Units OddsRatio CI.95 p-value age10 1.93 [1.45;2.56] < 0.0001

These results are completely equivalent:  $1.93 = 1.07^{10}$ . The fitted models are the same, but the "default" way of presenting the results is different.

## Visualizing and checking the linearity assumption



▶ We compare the "flexible" model which uses the categorized variable to the "less flexible" model (but "nicer" if correct!) which uses the continuous variable (together with a "linearity" assumption).

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### Multiple regression: one continuous and one binary covariate

ILO: to interpret the fit of a multiple regression (i.e. an adjusted model)

### Multiple regression: interaction

ILO: to interpret interactions and explain their meaning to others



# Multiple logistic regression

Additive effects of several explanatory variables:

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 x_i + \dots$$

with 
$$p_i = P(Y_i = 1 | X_i = x_i, Z_i = z_i, ...)$$
.

- Multiple logistic regression is a way to control for confounding / unbalanced design.
- ► Makes it possible to estimate odds ratios to compare the risks of two groups of subjects who are similar with respect to all predictor variables except one.

# Multiple logistic regression

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with  $p_i = P(Y_i = 1 | X_i = x_i, Z_i = z_i, ...)$ .

- ► Multiple logistic regression is a way to control for confounding / unbalanced design.
- Makes it possible to estimate odds ratios to compare the risks of two groups of subjects who are similar with respect to all predictor variables except one.
- ▶ We often say that the effect (via the odds ratio) on the outcome of each predictor variable under study (e.g. "exposure"), is adjusted for the other explanatory variables (e.g. age, sex, comorbidity).
- $\blacktriangleright$  Without interaction, the model assumes that the effect (odds ratio of z on Y is the same for all values of x.

### Research guestion:<sup>13</sup>

Are smokers more at risk of coronary heart disease than non-smokers?

#### Background (that we need to take into account):

It is known that men smoke more than women.

#### Hence the aim of the statistical analysis:

We want to compare the risk of two subjects, one smokes, the other doesn't, who are similar with respect to sex (i.e. either both men or both women).



<sup>&</sup>lt;sup>39/68</sup>13A bit made up, just for pedagogical purpose, to illustrate the concepts

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## Example of two binary variables

 $Z_i = \left\{ \begin{array}{ll} 1 & \text{if male} \\ 0 & \text{female} \end{array} \right. \quad \text{and} \quad V_i = \left\{ \begin{array}{ll} 1 & \text{if smokes} \\ 0 & \text{otherwise} \end{array} \right.$ 

Data can be summarized as two 2 by 2 tables **in two ways**, but usually, one option is more interesting than the other for the research question.

Here it is less interesting to look at the two 2 by 2 tables showing the association between Y (disease) and Z (Sex) given V (Smoking) because it is less related to our research question.

## Model with two binary variables (without interaction)

$$\begin{array}{lcl} \log\left(\frac{p_i}{1-p_i}\right) & = & a+b_1Z_i+b_2V_i \\ \\ & = & \begin{cases} a & \text{Female non-smoker} \\ a+b_1 & \text{Male non-smoker} \\ a+b_2 & \text{Female smoker} \\ a+b_1+b_2 & \text{Male smoker} \end{cases}$$

Note: 
$$b_1 = (a+b_1)-a$$
 (comparison among non-smoker)  $= (a+b_1+b_2)-(a+b_2)$  (comparison among smoker)  $= \log OR(\ref{S} \text{ vs } \ref{S} \text{ for given smoking status})$ 

and 
$$b_2 = (a+b_2)-a$$
 (comparison among female)  $= (a+b_1+b_2)-(a+b_1)$  (comparison among male)  $= \log OR$  (smokers vs. non-smokers for given sex)

2

## Logistic regression results

fit2 <-glm(disease~sex+Smoke,data=framingham,family=binomial)
summary(fit2)</pre>

#### Coefficients:

	Estimate	Std. Error	z value	Pr(> z )	
(Intercept)	-1.09215	0.12717	-8.588	< 2e-16	***
sexFemale	-0.69521	0.14635	-4.750	2.03e-06	***
SmokeYes	0.03296	0.14457	0.228	0.82	

## Extracting odds ratios with confidence intervals

publish(fit2)

p-value	CI.95	OddsRatio	Units	Variable
		Ref	Male	sex
<1e-04	[0.37;0.66]	0.50	Female	
		Ref	No	Smoke
0.8196	[0.78:1.37]	1.03	Yes	



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# Extracting odds ratios with confidence intervals

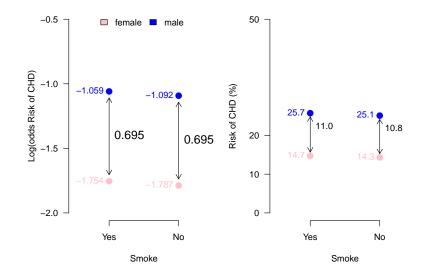
publish(fit2)

Variable Units OddsRatio CI.95 p-value sex Male Ref Female 0.50 [0.37;0.66] <1e-04 Smoke No Ref Yes 1.03 [0.78;1.37] 0.8196

## "Typical"/possible conclusion sentence:

Logistic regression adjusted for sex did not show an increase in odds of CHD in smokers compared to non-smokers (OR=1.03, 95% CI: [0.78;1.37], p=0.82).

# Visual interpretation



Note: additivity is on the logit scale (i.e. log(odds) ), not on the risk scale



## Outline

Overview

ILO: to outline what the (univariate) logistic model is about

One binary covariate

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ILO: to interpret interactions and explain their meaning to others

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### Research question:<sup>14</sup>

Do men and women have the same risk of coronary heart disease?

### Background:

It is known that aging increases the risks of coronary heart disease. We could not collect the data in a way that necessarily makes the distribution of age similar for men and women.

### Hence the aim of statistical analysis:

We want to compare the risk of two subjects, one is a man, the other a woman, both are similar with respect to age.



46/68<sub>14</sub>A bit made up, just for pedagogical purpose, to illustrate the concepts.

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# Another multiple regression example

Additive model (no statistical interactions)

$$\log\left(\underbrace{\frac{p_i}{1-p_i}}\right) = a + b_1 z_i + b_2 x_i$$

Effect of sex  $z_i$  (0 = female, 1 = male) adjusted for age  $(x_i)$ 

$$\begin{split} \frac{\text{odds(age=50, male)}}{\text{odds(age=50, female)}} &= \frac{\exp(a+b_1+b_250)}{\exp(a+b_250)} \\ &= \exp(a+b_1+b_250-a-b_250) \\ &= \exp(b_1). \end{split}$$

The result is the same for age 46 and age 61 and all other ages.

Effect of age  $(x_i)$  for males:

$$\begin{split} \frac{\text{odds(age=51, male)}}{\text{odds(age=50, male)}} &= \frac{\exp(a+b_1+b_251)}{\exp(a+b_1+b_250)} \\ &= \exp(a+b_1+b_251-a-b_1-b_250) \\ &= \exp(b_2). \end{split}$$

The result is the same for females:

$$\begin{array}{l} {\rm odds(age=51,\;female)}\\ {\rm odds(age=50,\;female)} = \frac{\exp(a+b_251)}{\exp(a+b_250)}\\ = \exp(a+b_251-a-b_250)\\ = \exp(b_2). \end{array}$$

Linearity means that the result is the same for a comparison of age 63 and age 62 and all other one year differences.

## Results (raw)

#### Coefficients:

	Estimate	Std. Error	z value	Pr(> z )	
(Intercept)	-4.59208	0.78019	-5.886	3.96e-09	***
AGE	0.06672	0.01458	4.575	4.75e-06	***
sexFemale	-0.71613	0.14052	-5.096	3.46e-07	***



## Results (formatted for publication)

#### Possible conclusion sentences:

Logistic regression was used to investigate gender differences in odds (risks) of CHD adjusted for age.

The age adjusted odds ratio was 0.49 (95%-CI: [0.37;0.64]) showing that the risks of CHD were significantly lower for women compared to men (p<0.0001).

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## Predicted risks based on logistic regression model

A logistic regression model can be used to predict "personalized"/conditional risks, since

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 z_i + \dots$$

is equivalent to

$$p_i = \frac{\exp(a + b_1 z_i + b_2 x_i + \dots)}{1 + \exp(a + b_1 z_i + b_2 x_i + \dots)}$$

We can predict a risk for any value of the covariates Z, X,... once we have estimated the model parameters. We just need to plug the estimated parameter values into the equations. <sup>15</sup>

**Note:** the risks (and risk ratios) depend on all predictor variables simultaneously.

# Visualization of predicted risks

For men:

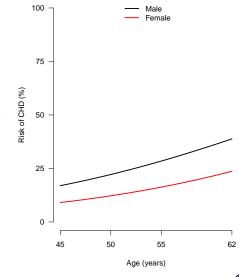
$$\frac{\exp(-4.59208 + 0.06672 \cdot \mathsf{age})}{1 + \exp(-4.59208 + 0.06672 \cdot \mathsf{age})}$$

For women:

$$\frac{\exp(-4.59208 - 0.71613 + 0.06672 \cdot \mathsf{age})}{1 + \exp(-4.59208 - 0.71613 + 0.06672 \cdot \mathsf{age})}$$

Because we have seen:

Estimate
(Intercept) -4.59208
AGE 0.06672
SexFemale -0.71613



**Note:**  $\widehat{OR}(\text{male vs female given age}) = e^{-0.71613} = 0.489 \text{ but } \widehat{RR} \text{ varies from } 0.535 \text{ to } 0.610.$ 



 $<sup>^{15}</sup>$ However, upmost caution is needed when using covariate values beyond the range of those observed (e.g. age=110). Usually we do not want to extrapolate beyond observed data.

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ILO: to interpret interactions and explain their meaning to others

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Statistical interaction = Effect modification

The effect of the exposure  ${\cal X}$  on the outcome  ${\cal Y}$  depends on some covariate  ${\cal Z}$ 

Example: the effect of age (X) on coronary heart disease (Y) depends on the sex (Z).



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## Effect modification

## Setting: 3 variables.

- lacktriangleright two predictor variables X and Z
- ightharpoonup one outcome Y

## Meaning

In logistic regression, an interaction means that the odds ratio which describes the effect of X on the odds of Y=1 depends on the value of Z.

## Symmetry

If the effect of variable X on Y is modified by Z then also the effect of Z on Y is modified by X.

### Research question:<sup>16</sup>

What are the risk of coronary heart disease for men and women at any age?

How different is the consequence of aging on the risk of coronary heart disease between men and women?





<sup>&</sup>lt;sup>56/68</sup>16A bit made up, just for pedagogical purpose, to illustrate the concepts

## Interaction between a continuous and a binary variable

To model the **interaction** we add " $b_3x_i \cdot z_i$ " in the model, i.e.,

$$\log\left(\underbrace{\frac{p_i}{1-p_i}}_{=\mathsf{odds}_i}\right) = a + b_1 z_i + b_2 x_i + b_3 x_i \cdot z_i$$

▶ The effect of sex  $z_i$  (0 = female, 1 = male) depends on age  $(x_i)$ .

$$\frac{\mathsf{odds}(\mathsf{age} = \!\! 50, \ \mathsf{male})}{\mathsf{odds}(\mathsf{age} = \!\! 50, \ \mathsf{female})} = \frac{\exp(a + b_1 + b_2 50 + b_3 50)}{\exp(a + b_2 50)} = \exp(b_1 + b_3 50).$$

When 
$$\left\{ \begin{array}{c} b_3 > 0 \\ b_3 < 0 \end{array} \right\}$$
, then  $\mathsf{OR}( \circlearrowleft \mathsf{vs} \ \varsigma \ \mathsf{given} \ \mathsf{age}) \left\{ \begin{array}{c} \mathsf{increases} \\ \mathsf{decreases} \end{array} \right\}$  with  $\mathsf{age}_{ }$ 

▶ The effect of age  $(x_i)$  depends on sex  $z_i$ .

$$\begin{split} \frac{\text{odds(age=50, male)}}{\text{odds(age=45, male)}} &= \frac{\exp(a+b_1+b_250+b_350)}{\exp(a+b_1+b_245+b_345)} \\ &= \exp(b_25+b_35). \end{split}$$

$$\frac{\mathsf{odds}(\mathsf{age} = \mathsf{50}, \; \mathsf{female})}{\mathsf{odds}(\mathsf{age} = \mathsf{45}, \; \mathsf{female})} = \exp(b_2 \mathsf{5}).$$

**Note:**  $\exp(b_2)$  describes the odds ratio for age in the reference group for sex (female) only, while it is  $\exp(b_2 + b_3)$  in the other group (male).

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## Statistical interaction in R

### First option (more transparent):

### Shorter syntax (less transparent):

```
glm(disease ~ AGE * sex, family = binomial,
    data = framingham)
```

# Raw R output

#### Coefficients:

```
Estimate Std. Error z value Pr(>|z|)

(Intercept) -3.45290 1.00008 -3.453 0.000555 ***

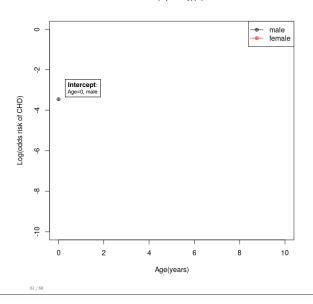
AGE 0.04523 0.01883 2.402 0.016288 *

sexFemale -3.54459 1.60431 -2.209 0.027146 *

AGE:sexFemale 0.05297 0.02987 1.773 0.076194 .
```

## Interpretation

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 x_i + b_3 x_i \cdot z_i$$

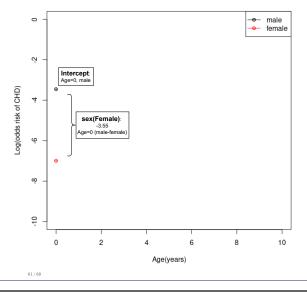


► Intercept a: est. log of the odds in the reference group (male, AGE=0).

Not meaningful here!

## Interpretation

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 x_i + b_3 x_i \cdot z_i$$



▶ sexFemale b<sub>2</sub>: est. log of the OR, when comparing the risk of a female to that of a male at AGE=0. Not meaningful here!



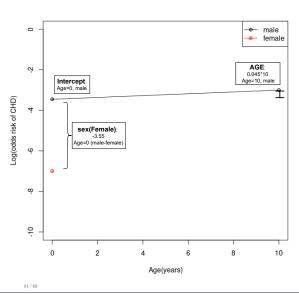
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## Interpretation

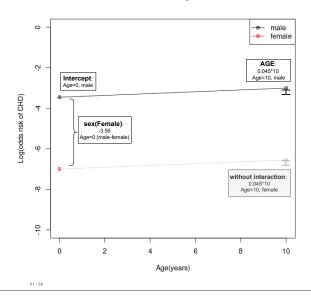
$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 x_i + b_3 x_i \cdot z_i$$



Age b₁: est. log of the OR, when comparing the risks of two males (the reference group for sex), one being 1 year older than the other. Because of linearity, at 10 years = 0.045\*10

# Interpretation

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 x_i + b_3 x_i \cdot z_i$$

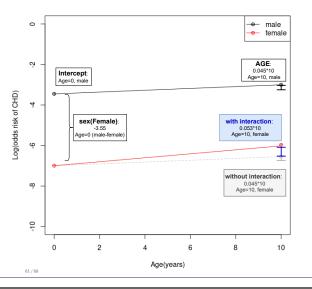


▶ Without interaction: b₁ would also be the estimated log of the OR when comparing the risk of two females one being 1 year older than the other



# Interpretation

$$\log\left(\frac{p_i}{1-p_i}\right) = a + b_1 z_i + b_2 x_i + b_3 x_i \cdot z_i$$



► With Interaction

(AGE:sexFemale)  $b_3$ :est. log of the ratio of two ORs: the OR to compare the the risks of two **males** with 1 year age difference, and the OR to compare the the risks of two females with one 1 year difference.

For 10 years, the value is 10 \* 0.05297.

## Formatted results

Variable Units OddsRatio CI.95 p-value AGE: sex(Male) 1.05 [1.01;1.09] 0.01629 AGE: sex(Female) 1.10 [1.05;1.15] < 1e-04

### Interpretation

- ▶ One year more in age increases the odds by 5% (95% CI=[1;9]) in males and by 10% (95% CI=[5;15]) in females.<sup>17</sup>.
- ► However, note that the difference in the increase in odds between men and women is not significant (p-value=0.076).

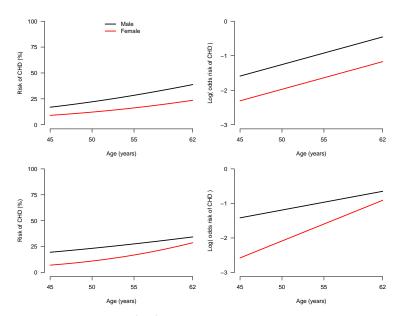
 $\overline{^{62/68}}17_{1.05} = \exp(0.04523) \text{ and } 1.10 = \exp(0.04523 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.0524 + 0.$ 

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## Predicted risk with or without interaction



**Note**: without an interaction (top), the curves cannot cross.

With interaction (bottom), they can.

# When using models with interaction?

- ▶ When it makes sense in the context of your study<sup>18</sup>.
  - Because of the research question.
  - ► To better "adjust".
  - ▶ When subgroup analyses could be interesting.
- ► To check that the corresponding model without interaction seems "reasonable", i.e. to challenge your modeling assumptions.

 $<sup>^{18}</sup>$ But you should have enough data... the more flexible the model the more data you need to estimate it accurately.

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## Two binary variables revisited: with interaction

```
fit8 <-glm(disease~sex*Smoke,data=framingham,family=binomial)
summary(fit8)</pre>
```

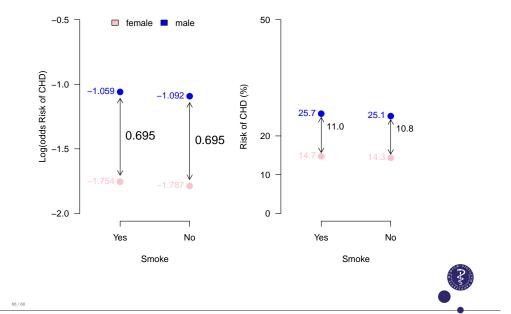
#### Coefficients:

```
Estimate Std. Error z value Pr(>|z|)
(Intercept)
                    -1.2092
                                0.1509
                                        -8.012 1.13e-15 ***
sexFemale
                    -0.4943
                                0.1953
                                        -2.532
                                                 0.0114
SmokeYes
                     0.2191
                                                 0.2456
                                0.1887
                                         1.161
sexFemale:SmokeYes -0.4772
                                0.3053
                                        -1.563
                                                 0.1180
```

#### publish(fit8)

Variable	Units	OddsRatio	CI.95	p-value
<pre>sex(Male): Smoke(Yes vs No)</pre>		1.24	[0.86;1.80]	0.24555
sex(Female): Smoke(Yes vs No)		0.77	[0.48;1.24]	0.28219
<pre>Smoke(No): sex(Female vs Male)</pre>			[0.42;0.89]	
<pre>Smoke(Yes): sex(Female vs Male)</pre>		0.38	[0.24;0.60]	< 1e-04

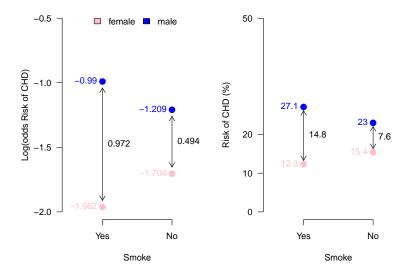
## Reminder: results without interaction



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## Reminder: results with interaction



Estimates are simply those obtained by stratifying, i.e. they match those of the two  $2\times2$  tables of slide 40, e.g. 27.1% = 107/(107+288).



## Take home messages

- (Multiple) logistic regression describes associations between one or several explanatory variables and the risk of an event (binary outcome), via odds ratio.
- ► The analysis of an exposure of interest can be adjusted for potential confounders.
- ▶ In an additive model (no interactions), the odds ratio for each explanatory variable does not depend on the other explanatory variables.
- Risks and risk ratios predicted by the model depend on the other explanatory variables.
- Linearity and absence of interaction are assumptions which might need to be checked.
- ► Models with interactions are flexible and useful but need more concentration to be interpreted correctly and more data to be fitted.
- Many models can be fitted from the same data, but some are more relevant than others for a given research question (e.g. in terms of adjustments and interactions).