

From Classroom to Clinic: Applying Linear Mixed Models to Understand Real-World Medical Research Data



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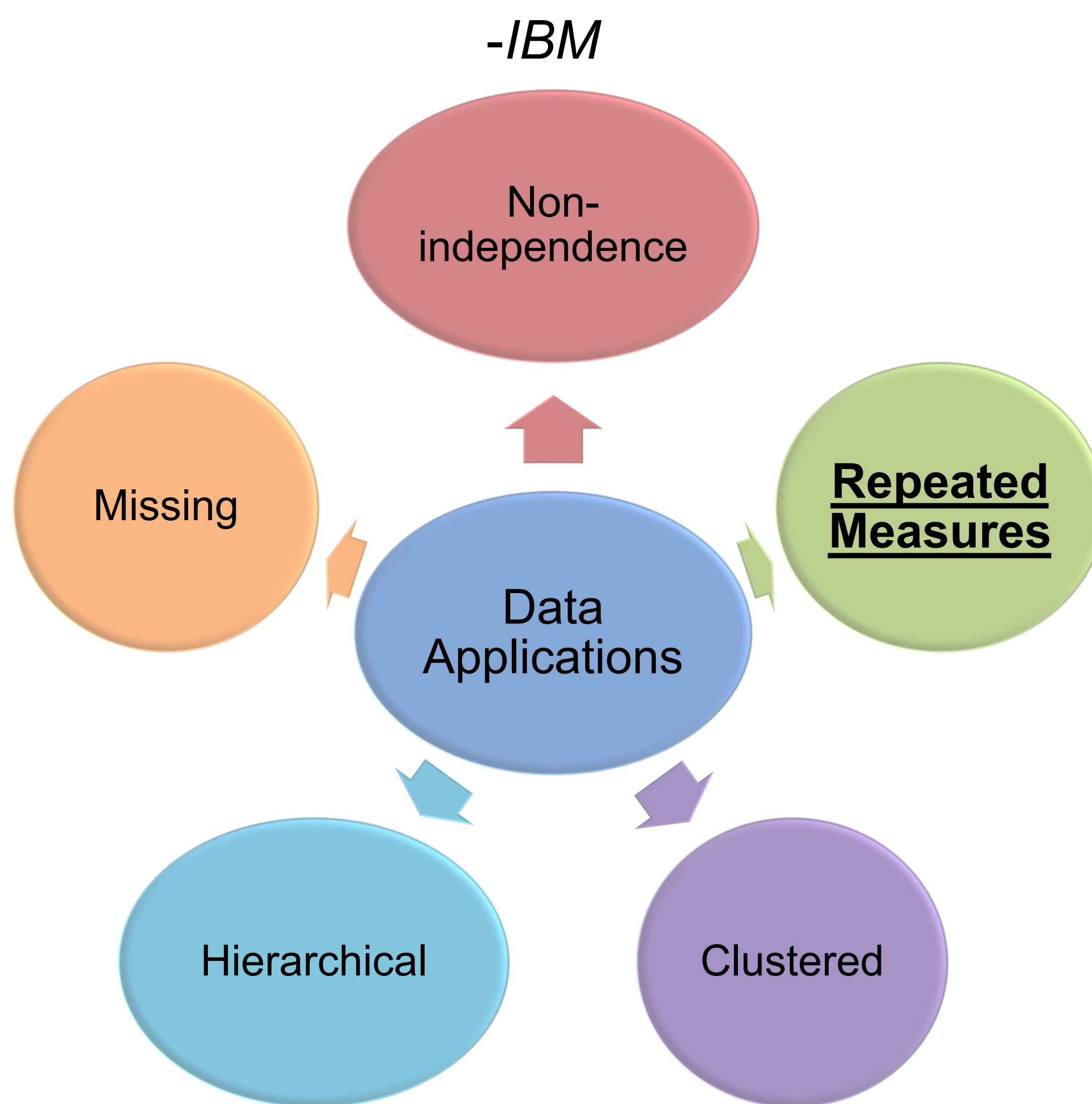
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University of West Florida (UWF) - STA 6257 (Advanced Statistical Modeling)

INTRODUCTION

Defining a **linear mixed model (LMM)**:

“advanced statistical tools designed to analyze data that exhibit complex structures, such as hierarchical organization, repeated measures, and random effects”



What are mixed effects?

- **Fixed effects** – the variable of interest and controlled variables (*i.e.*, those that are directly)
- **Random effects** – measured random variability between individuals, clusters, or hierarchies (*i.e.*, those that are not typically measured directly)

MATHEMATICAL FOUNDATIONS

Mathematical Foundations:
Linear Algebra

Simple LMMs can be defined by:

$$y = X\beta + Zu + \epsilon$$

- Y is the response vector.
- X is the design matrix for fixed effects.
- β is the vector of fixed effects
- Z is the design matrix for random effects.
- u is the vector of random effects
- ϵ is the vector of residual errors.

An Example:

- 2-level longitudinal structure
- 100 students (*random effect*)
- 10 test scores (*dependent variable – fixed effect*)
- Associated study time each (*independent variable – fixed effect*)
- $N = 1000$ (students * tests)
- $J = 10$ (scores per student)
- $P = 2$ (random intercept + fixed effect)
- This LMM can be defined by:

$$Y_{1000 \times 1} = X_{1000 \times 2} \beta_{2 \times 1} + Z_{1000 \times 10} u_{10 \times 1} + \epsilon_{1000 \times 1}$$

Level 1 (Time):

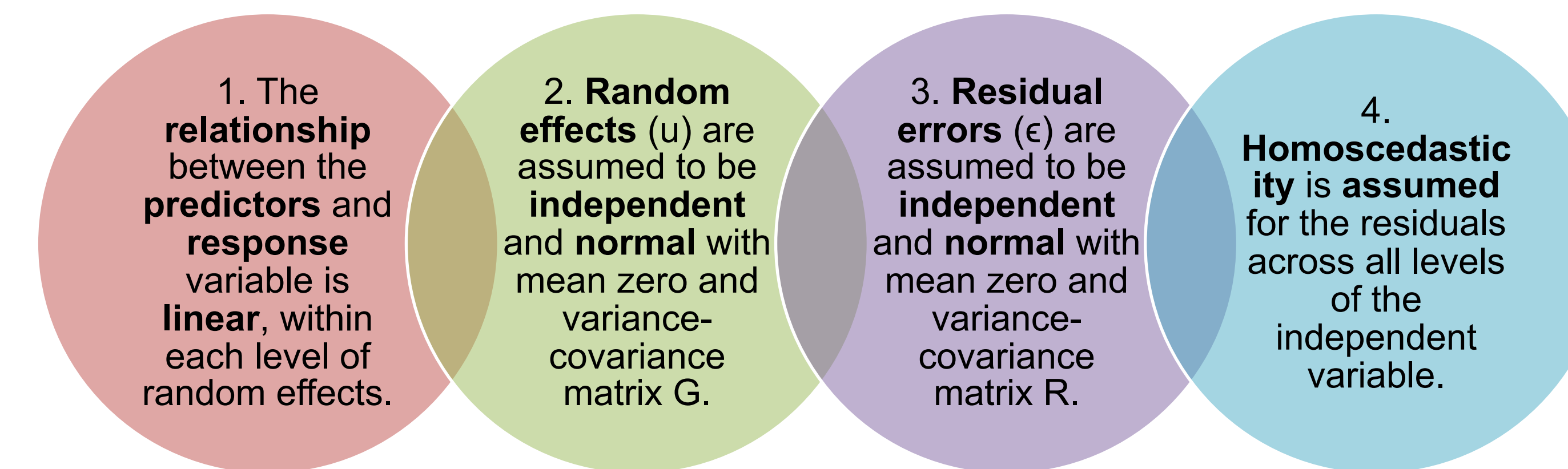
$$Y_{ti} = \beta_{0j} + \beta_{1j} \cdot \text{StudyTime}_{ti} + e_{ti}$$

Level 2 (Student):

$$\beta_{0j} = \gamma_{00} + u_{0j}$$

- γ_{00} is the grand intercept mean.
- u_{0j} is the deviation of the j^{th} group

ASSUMPTIONS



THE CAPSTONE PROJECT

The Dataset:

- Longitudinal, retrospective study.
- Impact of BMI on **airway resistance** and reactance in children with Sickle Cell Disease (C-SCD) and asthma (C-Asthma).
- Same patients ($n=85$), **multiple (repeated) measurements** over time (6 visits total).
- 14 measured variables (*fixed effects*)
- 2 grouping variables (*random effects*)
- 4 of the fixed effects are *dependent variables* representing airway resistance.
- **Data required winsorization to satisfy LMM assumption of normality. All other assumptions were met.**

The Final Model:

$$Y_{ijk} = (\beta_0 + u_{0j} + u_{1j} \times \text{Observation_number}_{2ijk} + \dots + u_{5j} \times \text{Observation_number}_{6ijk}) + \beta_1(BMI_{ijk}) + \beta_2(AsthmaYes_{ijk}) + \beta_3(ICSYes_{ijk}) + \beta_4(LABA_{ijk}) + \beta_5(Gender_{ijk}) + \beta_6(Age_months_{ijk}) + \beta_7(Height_cm_{ijk}) + \beta_8(Weight_Kg_{ijk}) + \beta_9(Group_{ijk}) + \epsilon_{ijk}$$

• **Fixed effects:** Diagnosis (C-SCD or C-Asthma) and all demographic and co-morbidity variables.

• **Random effects:** Subject and observation number.

- Adding *observation_number* increased AIC, but these effects were kept in the final model due to the goal of the research project (predicting airway resistance).
- All assumptions satisfied.
- Akaike Information Criterion (AIC) = 1801.60.
- Smaller Mean Squared Error (41.95 v. 117.1 and 270.60) and Mean Absolute Error (5.07 v. 8.48 and 12.15) than previous models.

CONCLUSION AND ADDITIONAL RESOURCES

Conclusion:

- LMM's are versatile tools for modeling complex relations with multiple effects (fixed and random), as well as missing and non-independent data.
- For the given capstone dataset, the generated LMM can reliably predict measures of airway resistance and reactance given demographic and co-morbidity data.
- This model can be reliably used for both children with Sickle Cell Disease and those with asthma.

View our FULL literature, report, and slides for the capstone project:



REFERENCES

1. Bates, D., Mächler, M., Bolker, B., and Walker, S. (2015), "Fitting Linear Mixed-Effects Models Using lme4," *Journal of Statistical Software*, 67, 1–48. <https://doi.org/10.18637/jss.v067.i01>.
2. Galecki, A. T., Kathleen B. Welch (2014), *Linear Mixed Models: A Practical Guide Using Statistical Software, Second Edition*, New York: Chapman; Hall/CRC. <https://doi.org/10.1201/b17198>.



<https://csdalab.github.io/>



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