## **Epidemiological Reasoning**

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### The 2004 Surgeon General's Report

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www.StatLit.org/pdf/2005SchieldUnion6Up.pdf

## Association versus Causation

"Association is not causation." This ambiguous claim includes at least 4 different statements.

#### Association (without manipulation) is ...

- 1. **not ever** [sufficient to infer] causation.
- 2. not always [sufficient to infer] causation
- 3. **sometimes** [sufficient to infer] causation.
- 4. **sometimes** [evidence for] causation.
- 5. **always** evidence of causation somewhere.

#1 is false (statistically); #2 - #5 are true.

# Using Association as evidence of Causation

Using association as evidence for causation is necessary when manipulation is:

- 1. impossible (cosmology).
- 2. possible but unethical (smoking).
- 3. possible & ethical but expensive.
- 4. possible & ethical but takes time.
- 5. possible & ethical but requires choice.

## **Epidemiology**

Epidemiology typically involves

- · observational studies.
- ordinal, nominal or binary predictors.
- binary outcomes (live or die)
- relative risk, odds ratio, attributable fraction

Epidemiology seldom involves

- · random assignment
- Pearson correlation coefficient

# Epidemiology and Public Health

Epidemiology, epidemics & communicable diseases:

- 1796: Small Pox & William Jenner
- 1854: Cholera & John Snow
- 1944: Tuberculosis (TB)

Epidemiology studies personal health:

- 1964: Smoking and Cancer
- 1981: "Causes of Cancer" by Doll & Peto
- 1992: Second-hand smoke (ETS) EPA Assessment

Epidemiology studies lifestyle:

• 1990s onward

#### Epidemiology: Study of Health Risk Factors

Health - Reuters

Smoking Ups Impotence Risk in Younger Men

Health - HealthDay

Mom's Poor Diet Can Up Diabetes Risk in Child

## **Epidemiology: Conflicting Claims**

5/96: British Medical Journal (BMJ) article cites "overwhelming evidence" that excessive consumption [of salt] causes high blood pressure, heart disease and strokes.

5/96: Journal of American Medical Assoc. (JAMA) article concludes that "dietary salt intake has little effect on blood pressure in the population at large."

#### The New Epidemiology: Study of Social Risk Factors

TV violence is

- a <u>contributing factor</u> to increases in violent crime and antisocial behavior. .
- a "<u>risk factor</u>" that <u>contributes</u> to increasing a person's aggressiveness.

just as every cigarette increases the chance that someday the smoker will get lung cancer, so every exposure to violence <u>increases the chances</u> that someday a child will behave more violently <u>than they otherwise would</u>.

## **Epidemiological Reasoning: Probabilistic Causation**

Suppose:

- 80% of lung cancer deaths involve smokers
- 20% of smokers die of lung cancer Thus, in relation to death from lung cancer, smoking may be (speaking loosely):
- very 'necessary' but far from 'sufficient' Q. Is smoking a cause of lung cancer death? We can't run an experiment.

#### Epidemiological Reasoning: Criteria

• Statistically significant (statistical criteria)

#### Hill (1965) criteria:

- Strength of Association (Relative Risk)
- Coherence, Plausibility & Analogy (Fits with known facts & theories)
- Dose-response relationship
- Consistency (repeatability)
- Temporality (cause precedes effect)

## 2004 Surgeon General's Report

Systematized reporting of epidemiological results as a basis for public health decisions.

- 1 Gave current statistics on effects of smoking
- 2 Reviewed language used in previous reports.
- 3 Classified strength of evidence for causation into four categories...
- 4 Was silent on minimum strength of association needed to control for confounding.

See www.cdc.gov/tobacco/sgr/sgr\_2004/

## #1: Quantitative Effects of (Active) Smoke

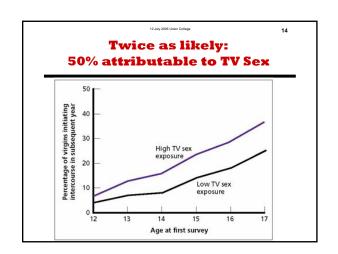
Tobacco use remains the leading preventable cause of disease and death in the US,

- causing approximately <u>440,000</u> deaths/year
- costing approximately \$157 billion in annual health-related economic losses.

Nationally, smoking results in more than <u>5.6</u> million years of potential life lost each year.

Ch 1. 2004 US Surgeon General's Report

# Epi Reasoning: "Deaths Attributed" Hypothetical Deaths due to lung cancer 2% Non-smokers Smokers 20% Base Excess Lung Cancer Deaths 90% of these smoker deaths due to lung cancer are attributable to smoking



## #2: Grammar of Association vs. Causation

Reviewed 250 statements in reports: 1964 - 2002

- 1. Association/relation; associated/related
- 2. Comparison: more, greater, stronger, bigger, etc.
- 3. Link, connection, factor: risk factor
- 4. Changes (active verb): Increases, cuts, contributes
- 5. Logical connection: 'due to' (Risk due to ...)
- 6. Causal factor, time relation (leads to, results in)
- 7. Causally associated/related; a causal relation
- 8. A cause: judged to be causal, causes, effect of.

## Change/Compare Grammars Observational Studies

Change and compare grammars imply causation

- 1. Electrical fields increase miscarriages
- 2. Night shift work *Ups* Breast Cancer Risk (40%)
- 3. HRT raises Cancer (24%) and Stroke (41%) Risks
- 4. Alcohol *Ups* Breast Cancer Risk (6% /glass-wk)
- 5. Eggs & Hot Dogs *Cut* Breast Cancer Risk (18%)
- 6. Broccoli *Reduces* Breast Cancer Risk (24%)
- 7. Parental tobacco *leads to* brain tumors (22%)8. Non-shavers *more likely* to have stroke (70%)

## Epidemiological Studies: Cheaper; Always Possible

NON-EPI STUDIES:	OUTCOME	
PREDICTOR	Repeatable (Migraine)	Non-Repeatable (Death)
Changeable (Medicine, \$, Education)	Before/After: Physical Exp. or Stat Exp.	Statistical Exp. / Clinical Trial: Random Assign
Unchangeable Physical: Race Moral: Smoker		

## #3: Strength of Evidence for Causation (4 levels)

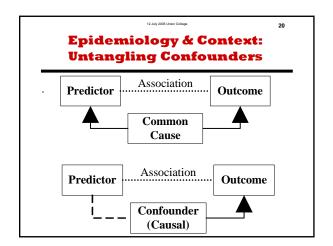
- A. Evidence is **inadequate** to infer the presence or absence of a causal relationship (which encompasses evidence that is sparse, of poor quality, or conflicting).
- B. Evidence is suggestive of no causal relationship.
- C. Evidence is **suggestive but not sufficient** to infer a causal relationship.
- D. Evidence is **sufficient** to infer a causal relationship

## Suggestive but not sufficient to Infer Causation

Male cigarette smokers have higher death rate from coronary artery disease than non-smoking males.

1964: "...more prudent from the public health viewpoint to **assume** that the established **association has causative meaning**, than to suspend judgment until no uncertainty remains."

2004: "placing it in the "suggestive" category ... although it falls *short of proving causation*, this evidence still makes causation *more likely than not*."



#### Relative Risk = 1.19 16% Attributable

1993: EPA & ETS (second-hand smoke):

- "3,000 American nonsmokers die each year from lung cancer caused by ETS.
- <u>150,000 to 300,000</u> children under 18 months of age get pneumonia or bronchitis.
- Second-hand smoke worsens condition of up to one million asthmatic children.

## #4: Criteria for Causation Strength of Association

In Epidemiology, strength of association is typically measured using Relative Risk.

RR > 3 is a rule of thumb to avoid spurious results due to **confounding**. (Taubes)

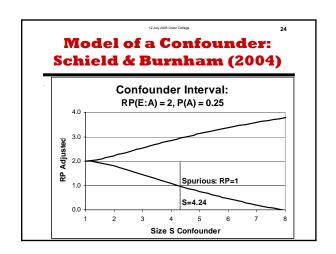
RR > 10: lung cancer among smokers RR < 2: problems from 2nd-hand smoke

## Problem Selecting Epidemiological Minimum

Sir Richard Doll: No single study is persuasive unless the lower limit of its 95% confidence level falls above a **threefold** increased risk.

As a rule of thumb, says Angell of the New England Journal, "we are looking for a relative risk of **3 or more**" before accepting a paper.

John Bailar, epidemiologist: "There is no reliable way of identifying the dividing line."



## **Goal: Help People make** better Decisions using Data

Decisions based on observational data:

- Public health: quarantine, medical testing
- Education policy: best practices, league ratings
- Public policy (people): E.g., The Bell Curve, "More Guns; Less Crime"
- Public policy (\$): Economics and finance
- Business: data mining and data modelling
- Personal Health: Vitamins, Supplements
- Personal Medical: HRT, chemo, radiation

## **Epidemiological** Reasoning

Allows "inductive inference" without

- examining weight of evidence
- identifying plausible mechanisms

Enables government intervention (public policy) based on public health/safety grounds:

- bypasses individual rights & freedoms
- extends ideas of 'threat' & 'coercion'

## **Journalistic Assessment**

Note as "Soft Science" (observational study)

- Not a manipulative experiment (no before/after)
- Not a statistical experiment (no random assign)

Evaluate strength of association:

- "Very weak": less than a factor of 2 (100% more)
- "Modest": factor of 2 to 3 (100% to 200% more)
- "Moderate: factor of 3 to 5 (200% to 400% more)
- "Strong": more than a factor of 5 (400% more)

## **Epi Reasoning** in Education

"Pro and Con" Should be

- a chapter in intro logic/thinking texts
- a chapter in intro statistics texts.
- required in college general education.
- introduced at the secondary level
- used as a wedge for contextual thinking
- used as a wedge for "conceptual literacy" (inductive reasoning about core values)

## **S**/ Recommendation: **Statistical Literacy**

Study statistics used in everyday arguments

Students in introductory statistics need to

- focus on observational studies & decisions
- focus on context and confounding
- see statistics used to argue for causation
- see statistical prevarication & opportunism
- understand epidemiological reasoning.

#### **Epidemiology** References

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