Statistics for Classification and Predictive Tests in Medicine

By Sephora Zoro ©

What is a Test???

- Assesses the disease status of a patient
- Concerned with dichotomous conditions
 - Disease status D
 - Test Result Y
- Binary, Ordinal, and Continuous
- Dichotomous tests may be constructed from a continuum of biomarkers with threshold selection
- Test is *positive* if Y>= c, *negative* if Y<c
- Gold-Standard Tests will tell you whether a patient is ill or not without uncertainty

Errors and Positive Fractions

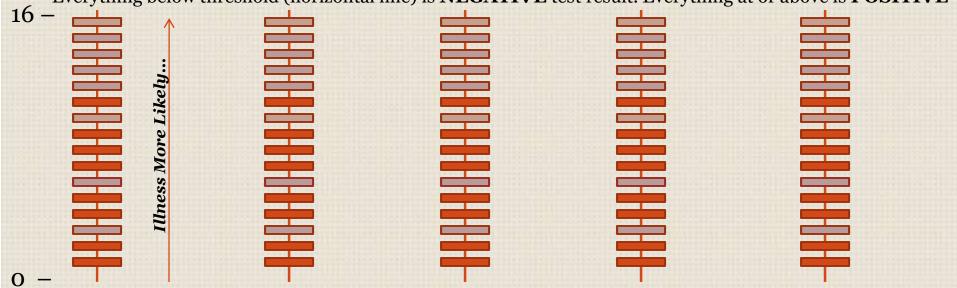
- Type I False Negative Type II – False Positive
- Errors are present in non-ideal tests
 - False Positive Fraction: P[Y = 1|D = 0]Type I Error
 - True Positive Fraction: P[Y = 1|D = 1]
 1 Type II
- An ideal diagnostic test has FPF = 0, TPF = 1
- A useless test has FPF=TPF

The ROC Curve is the set of all possible true and false positive fractions found by transforming a continuous biomarker Y into a dichotomous result, using different thresholds!

Biomarker A:

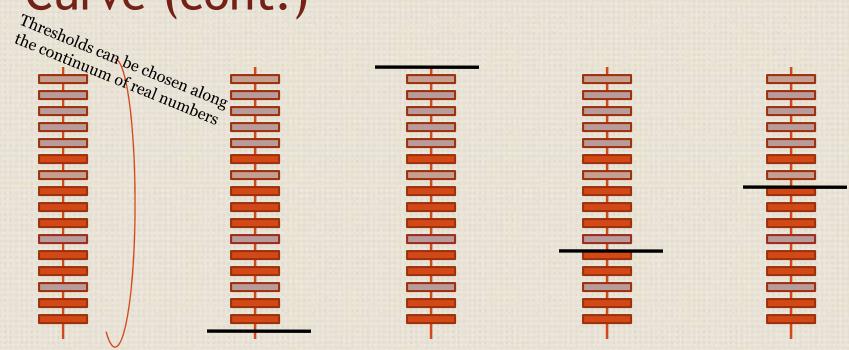
- 0-16
- Continuous
- Purple is ill, red is not ill S1

Everything below threshold (horizontal line) is **NEGATIVE** test result. Everything at or above is **POSITIVE**



Slide 5

change colors Sephora, 3/7/2023 S1



$$FPF = 0.0$$

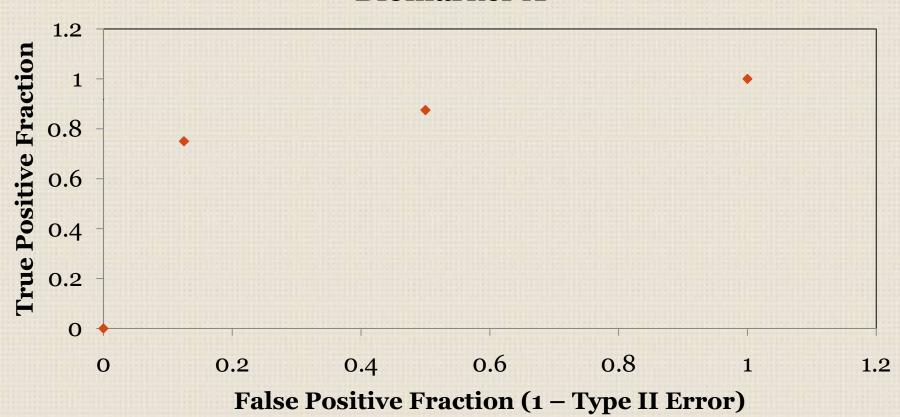
$$FPF = 0.5$$

$$TPF = 0.75$$

$$EPF = 0.107$$

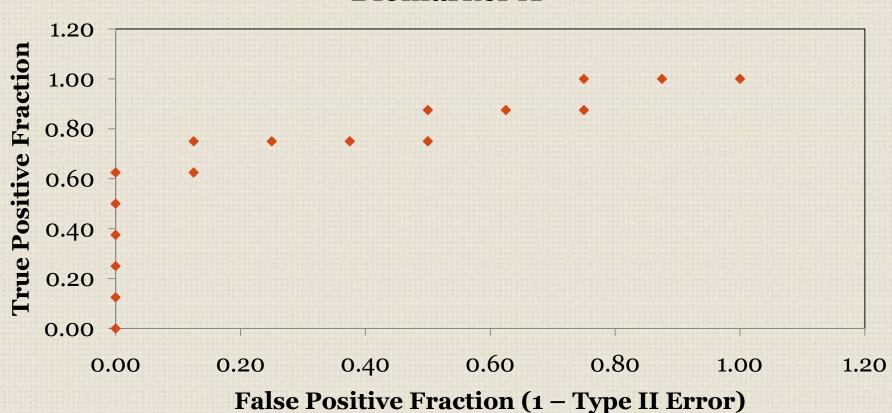
$$FPF = 0.125$$

Biomarker A



THRESHOLD	TRUE POSITIVE FRACTION	FALSE POSITIVE FRACTION
O	8/8	8/8
1	8/8	7/8
2	7/8	6/8
3	7/8	6/8
4	7/8	5/8
5	7/8	4/8
6	6/8	4/8
7	6/8	3/8
8	6/8	2/8
9	6/8	1/8
10	5/8	1/8
11	5/8	0/8
12	4/8	0/8
13	3/8	0/8
14	2/8	0/8
15	1/8	0/8
16	0/8	0/8

Biomarker A

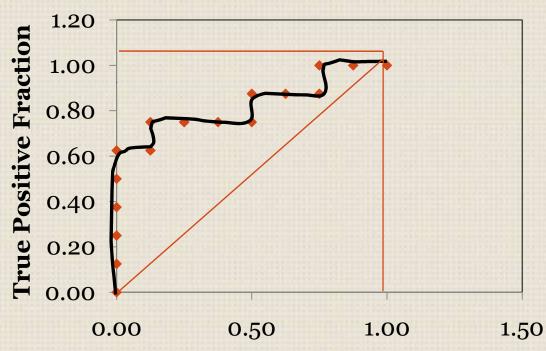


Biomarker A

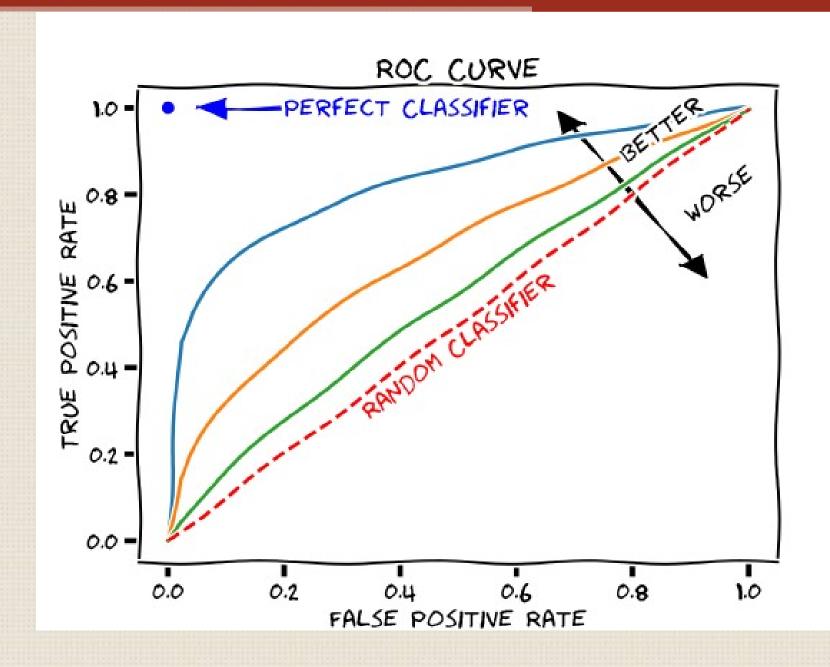
Threshold Selection:

TPF/FPF

-Minimizing
Type I and Type
II error
-Weighting
errors
-Minimum



False Positive Fraction (1 – Type II Error)



Example: MRI Imaging of Dementia Patients

Cross Sectional Collection

- 416 adults 18-96 yo.
- 100 patients 60+ diagnosed with Alzheimer's
- Gold Standard CDR classification

MRI Imaging of Dementia Patients

Characteristics of each patient are collected before over study course:

Clinical Dementia Rating (CDR)

Mini Mental State Exam (MMSE)

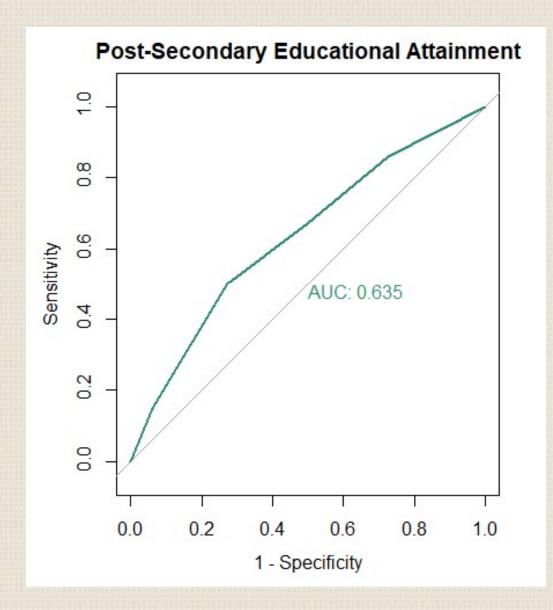
Normalized Whole Brain Volume (nWBV)

Estimated Total Intracranial Volume (eTIV)

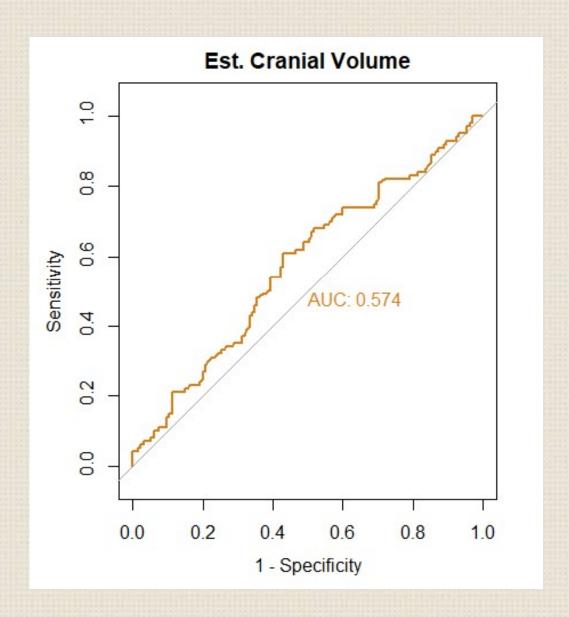
Educational Attainment (Educ)

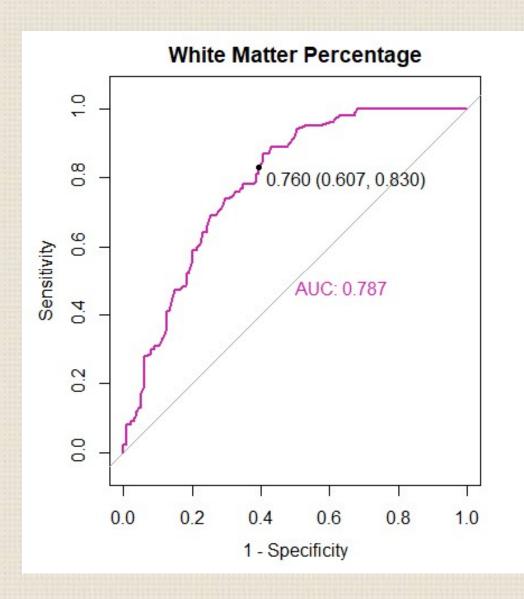
Classification Test

- Educational Attainment
- Cranium Volume
- White Matter Percentage
- Mini Mental State Exam

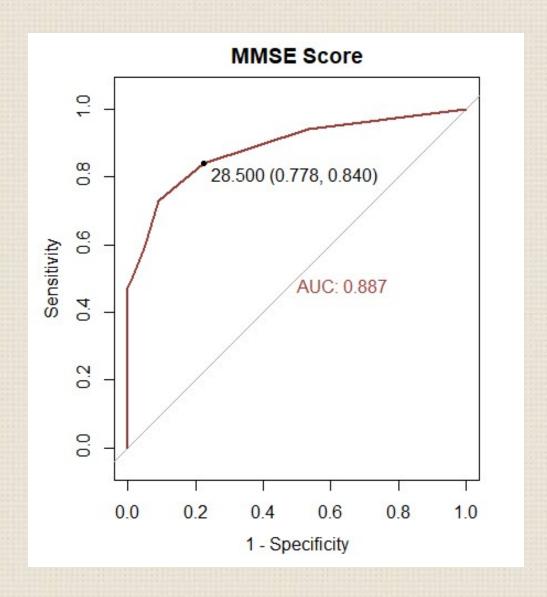


* Low AUC- operates close to a random classifierr * AUC almost 0.5 – essentially a random classifier

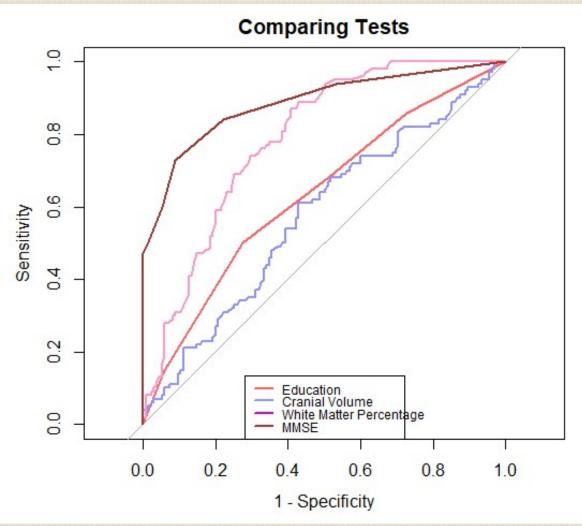




* Higher AUC, closer to perfect classifier than to random classifier * Sensitivity of 60%, Specificity of 83% *High AUC; * TPF and (1-FPF) Higher than previously at selected threshold



Step 1:



Step 2:

- White Matter Percentage (roc3.info, roc1)
- MMSE (roc4.info, roc2)

```
data: roc3.info and roc4.info
Z = -2.9646, p-value = 0.003031
alternative hypothesis: true difference in AUC is not equal to 0
95 percent confidence interval:
   -0.16475866 -0.03361171
sample estimates:
AUC of roc1 AUC of roc2
   0.7874444   0.8866296
```

Limitations and Summary

- In practice, there is some error in some Gold Standard tests
 - e.g., CDR is not gold standard for Alzheimer's diagnosis
- ROC Curves are used to display performance of tests compared to gold standard
- Test usefullness can be quanitified with AUC
 - Close to 1.0, more useful test
- Thresholds for tests can be chosen with different error weights, or specifying a preferred TPF/FPF