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The Online R-FETPV 1st Module : Basic Epidemiology and Surveillance Data Analysis

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Basic descriptive and analytic statistics for disease outbreak event

CLIP#5

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Analytical Epidemiology

- A study designed to investigate hypothesized causal relationships.
- Tries to determine why disease is occurring.
- Tests hypotheses.

Study design of an epidemiological research

- **Experimental:** Studies preventions and treatments for diseases; investigator actively manipulates which groups receive the agent under study.
- **Observational:** Studies causes, preventions, and treatments for diseases; investigator passively observes as nature takes its course.
 - **Cohort:** Typically examines multiple health effects of an exposure; subjects are defined according to their exposure levels and followed for disease occurrence.
 - **Case-control:** Typically examines multiple exposures in relation to a disease; subjects are defined as cases and controls, and exposure histories are compared.
 - **Cross-sectional:** Examines relationship between exposure and disease prevalence in a defined population at a single point in time.
- **Ecological:** Examines relationship between exposure and disease with population-level rather than individual-level data.

Types of observational studies

- Cohort studies
 - Changes over time
 - Exposed and Not exposed
 - Smoking and cancer
- Case-control studies
 - Diseased and non-diseased animals
 - Positive and negative animals
 - Herd with lesions and herd without lesions
- Cross sectional studies
 - Prevalence or incidence at a time
 - National sero-surveillance for Foot and mouth disease

GENERAL REQUIREMENTS

In all study designs required that

1. each **unit of observation** (typically one animal, could also be an aggregate): **disease** and **exposure status** is recorded
2. disease and exposure status - if not directly observable – is established: reliable diagnostic tests (i.e. sensitivity and specificity known and considered)
3. **diagnostic procedure**: standardized and not subject to changes
4. additional information: collected on traits with known impact on disease and exposure status

(Freie Universitat, Berlin - http://www.arbo-zoo.net/_data/ArboConFlu_StudyDesign.pdf)

Measure of association

	Diseased animals	Non-diseased animals
Exposed	a	b
Not exposed	c	d

- Incidence: The number of new cases that occur in a known population over a specified period of time
- Prevalence: The number of instances of diseases or related attributes (e.g., infection or presence of antibodies) in a known population, at a designated time, without distinction between old and new cases

(Source: Thrusfield M (2005) Veterinary Epidemiology 3rd Ed.)

2x2 contingency table for cross-tabulation of disease and exposure state



	Diseased (D+)	Non-diseased (D-)	Total
Exposed (E+)	a	b	n_1
Unexposed (E-)	c	d	n_2
Total	m_1	m_2	n

Notation:

D+ = animals is diseased n_1 = total number of animals exposed to the risk factor
D- = animal non-diseased n_2 = total number of animals unexposed to the risk factor
E+ = animal is exposed m_1 = total number of diseased animals
E- = animal is unexposed m_2 = total number of non-diseased animals
n = total number of animals

a = number of diseased animals exposed to the risk factor
b = number of non-diseased animals exposed to the risk factor
c = number of diseased animals unexposed to the risk factor
d = number of non-diseased animals unexposed to the risk factor

2x2 TABLE: PROBABILITY NOTATION



	Disease d (D+)	Non-diseased (D-)	Total
Exposed (E+)	a	b	n_1
Unexposed (E-)	c	d	n_2
Total	m_1	m_2	n

Proportion or rate of interest	Probability notation	Sample estimate
Exposed	$\Pr(E+)$	$(a + b)/n$
Diseased	$\Pr(D+)$	$(a + c)/n$
Diseased and exposed	$\Pr(E+ \text{ and } D+)$	a/n
Diseased in the exposed group	$\Pr(D+ E+)$	$a/(a + b)$
Diseased in the unexposed group	$\Pr(D+ E-)$	$c/(c + d)$
Exposed in the diseased group	$\Pr(E+ D+)$	$a/(a + c)$
Exposed in the non-diseased group	$\Pr(E+ D-)$	$b/(b + d)$



“SAMPLING BY ROWS”:

$a/(a+c)$ is a valid estimator of $\Pr (E+ | D+)$

$b/(b+d)$ is a valid estimator of $\Pr (E+ | D-)$

$\Pr (D+)$ and $\Pr (D-)$ cannot be estimated (directly) using this design

“SAMPLING BY COLUMNS”:

$a/(a+b)$ is a valid estimator of $\Pr (D+ | E+)$

$c/(c+d)$ is a valid estimator of $\Pr (D+ | E-)$

$\Pr (E+)$ and $\Pr (E-)$ cannot be estimated (directly) using this design

“SAMPLING THE ENTIRE TABLE”:

all sample estimates are valid estimators of the respective probabilities, but

we may end up with n_1 being a too small value if prevalence of exposure is low

we may end up with m_1 being a too small value if prevalence of disease is low

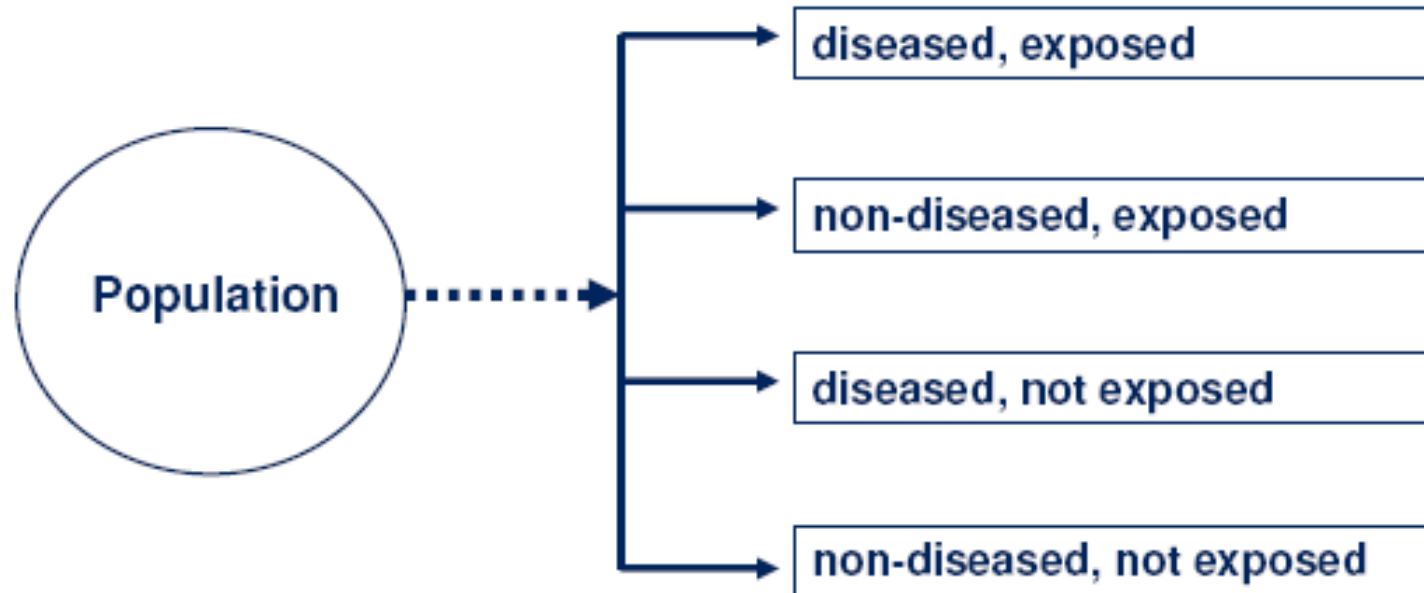
CLASSIFICATION OF STUDY TYPES:

“sampling the entire table “ = cross-sectional study

“sampling by rows” = cohort study

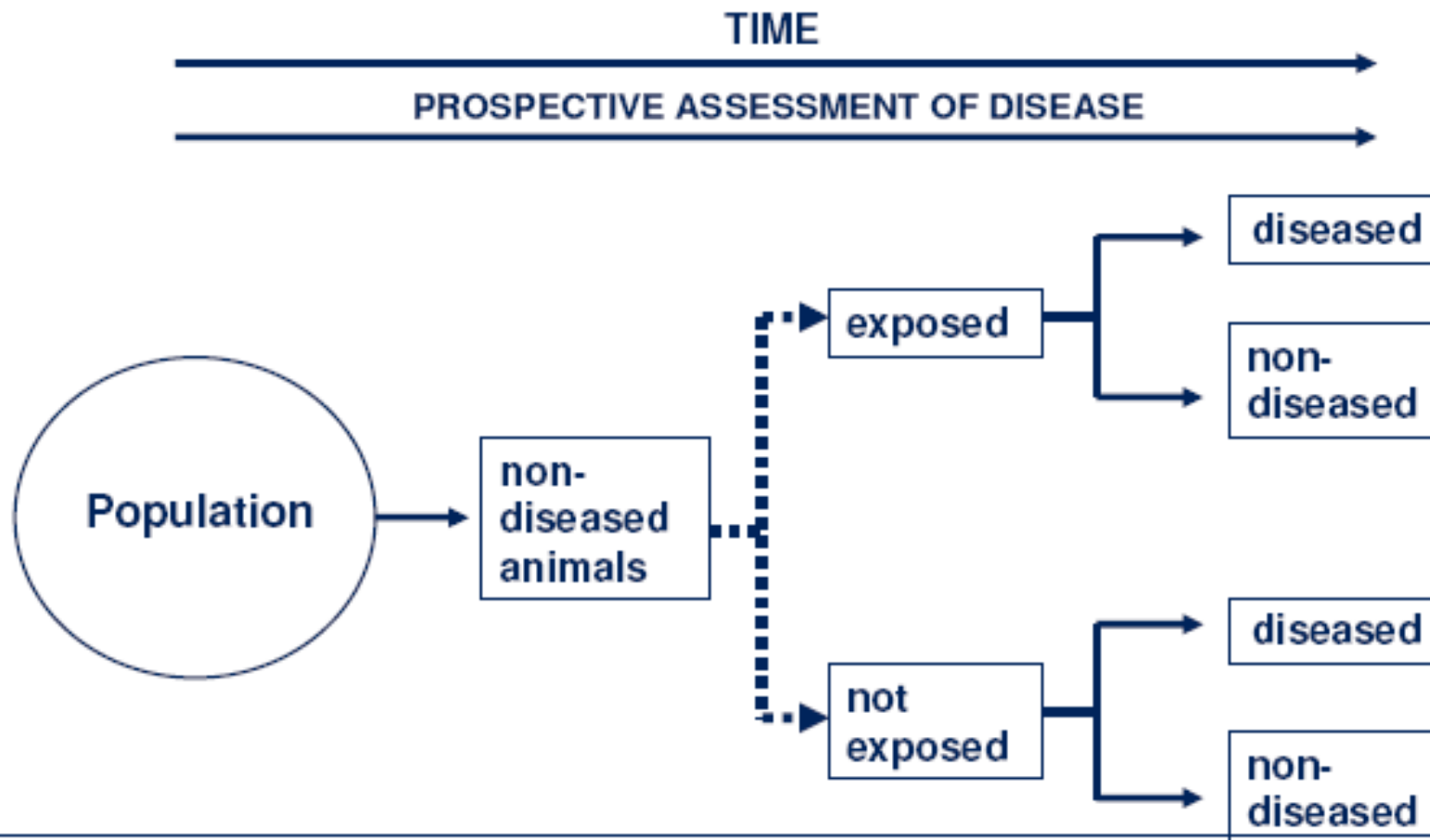
“sampling by columns” = case - control study

CROSS-SECTION STUDY DESIGN

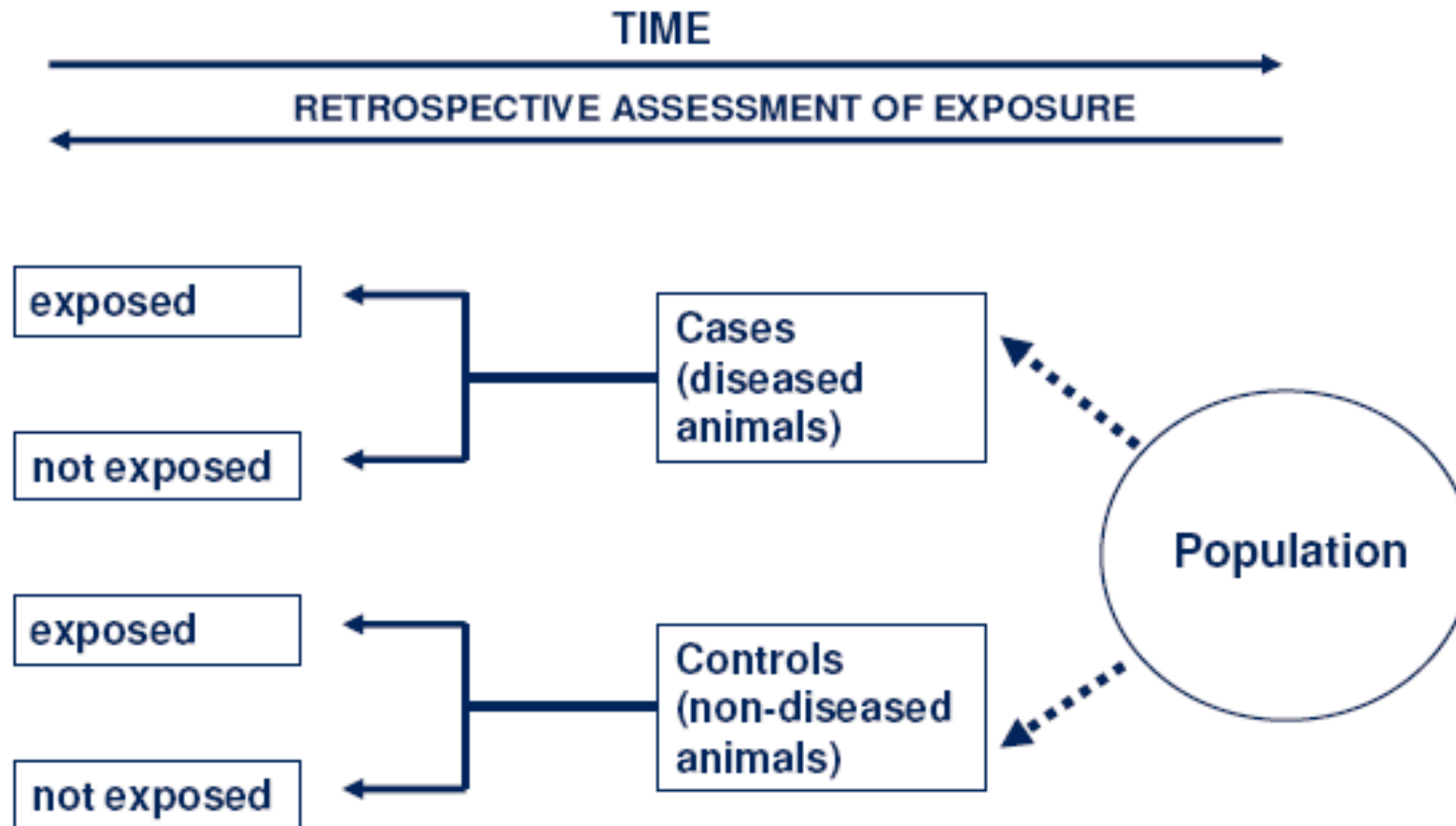




PROSPECTIVE (COHORT) STUDY DESIGN



RETROSPECTIVE (CASE-CONTROL) STUDY DESIGN



SUMMARY: MOST IMPORTANT FEATURES



	Cross-sectional study	Case-control study	Cohort study
Measure of disease frequency	Prevalence	Prevalence	Incidence
Direction of investigation	momentary/ Retrospective	Retrospective	Prospective
Samples (selections) involved	1 sample from the population	1 group of cases, 1 group of controls	1 cohort of exposed, 1 cohort of unexposed
Primary measure of association	Prevalence odds ratio	Odds ratio	Relative risk; attributable risk

Major *advantages* (printed bold) and disadvantages

	Cross-sectional study	Case-control study	Cohort study
Marginal conditions	quick relatively cheap	quick relatively cheap	time-consuming relatively costly
Applicability	permanent risk factors quite common dis.	more general rare diseases	more general
Data quality	as good as diagnosis	errors in historic data	as good as diagnosis
Sample sizes	large (low prevalences)	relatively small	large (dropout, low inc.)
Inferences/ estimatability	no causal evidence no incidence prev. of exposure prev. of disease	limited causal evidence no incidence prev. of exposure no prev. of disease	causal evidence incidence no prev. of exposure prev. of disease