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PG Residency Pediatrics Preparation

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Happy Learning!

01: INTRODUCTION G RESOURCES, INCLUDING BIOSTAT

BIOSTATISTICS FOR PEDIATRIC RESIDENTS PART 1



Study designs



- Cross-sectional study
 - Cross-section of population is taken at 1 point
 - Descriptive study design
 - The best way to do a cross-sectional study is doing a survey of population, for example take group of patients in hospital and describe it by % of disease, % of risk factor
 - Prevalence is the result you get from a cross-sectional study design.
- Case control study
 - Analytical study design
 - There will be an exposure and an outcome and the study is to find an association between them.
 - Start from cases (diseased) and controls (non-diseased)
 - Start from disease and go back in the past to find out exposure status.
- Cohort study
 - Analytical study design
 - There will be an exposure and an outcome and the study is to find an association between them.
 - Start from exposed and non-exposed
 - Start from exposure and follow them into the future to see what percentage of them have developed the disease.

Case control study



00:07:27



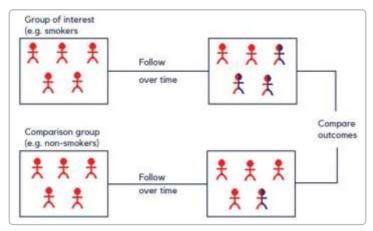
- E.g.: To find out the relationship between smoking and lung cancer.
- Two groups, one of lung cancer patients(Group of interest) and another of non-lung cancer patients(comparison group) are taken and their history is taken to know their association with smoking. After that their exposure status is measured and their difference is calculated for comparison.

Cohort



00:08:38

- Cohort means group of army men I similar looking(having common exposure in our case)
- Similarly two study groups are taken one with smokers (group of interest) and another with non smokers (comparison group), make sure at the start of the study none of them have the outcome.
- A prospective study of both groups over a defined period to determine the difference in the relationship between exposure and outcome.



Q. 20 pregnant women were asked about h/o smoking when they came for regular antenatal visits and then followed up to see how many of them had LBW babies. What is the type of study

Ans: Cohort

Q. A study was done in 3 states to see the mean BP in each community. Health workers were assigned and they visited each house in the 3 communities. Mean BP in each community was found and compared. What type of study design is represented here

Ans: Cross sectional study

In a hospital DVT patients were taken and they were compared with other patients to find the risk factors. What type of study is this?

Ans: Case control

Risk measure



00:11:11

- It gives the Strength of association.
- The risk measure in case control study is the Odds ratio:
 - Probability of exposure among cases and control is measured.
 - Example: A case control study of 100 smokers and 100 non-smokers to look for association with smoking.
 - Construct a 2×2 table
 - > CD in column I always write diseased in the columns and risk factor in the rows
 - Odds ratio a/k/a cross product ratio

Lung Cancer				
Smoking	Present (Cases)	Absent (Controls)		
Present	60	20	80	
Absent	40	80	120	
Total	100	100	200	

- Odds ratio = ad / bc
 - A = 60
 - B = 20

- C = 40
- -D = 80
- Odds ratio= (60×80) / (40×20) = 6
 - Interpretation: smokers have 6 times more chance for developing lung cancer than non-smokers
 - Odds ratio =1 □ no association
 - Odds ratio <1 □ protective factor
- Interpretation of Odds ratio
 - OR > 1 □ exposure is risk factor

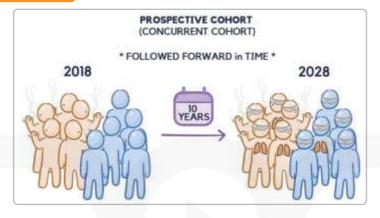
 - OR=1

 no association between exposure and outcome

Risk measure in Cohort



00:17:04



Outcome measures in a cohort study



00:17:12

- 1. Incidence
 - No. of new cases of the disease that have developed in the exposed and unexposed at end of follow-up time
- 2. Relative risk (RR)/Risk ratio
- 3. Attributable risk (AR)
- 4. Population attributable risk (PAR)

Relative risk (risk ratio)



00:18:07

- · In relation to the nonexposed, how many times more is the chance for exposed to develop the outcome
- Risk ratio= incidence among exposed / incidence among nonexposed
- Example:

Lung Cancer				
Smoking	Present (Cases)	Absent (Controls)		
Present	10	90	100	
Absent	2	98	100	
Total	12	188	200	

Incidence of lung cancer among smokers = 10/100

- Incidence of lung cancer among nonsmokers = 2/100
- Rr= (10/100) / (2/100) = 5
- Interpretation: Smokers have 5 times more chance for developing lung cancer than nonsmokers

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