An Introduction to the Use of R for Clinical Research

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Outline



• What is R and how to obtain in it

• Features of R

• Using R

• R and clinical research

What is R?



- R is a free software environment for statistical computing and graphics.
 - ▷ it was initiated in 1992 by Ross Ihaka and Robert Gentleman at University of Auckland, New Zealand
 - in 1997 the R Core Team was established with renowned members of the statistical computing community
 - □ nowadays, the R Core Team has grown and consists of about 20 members, experts in computing
- Free Software
 - b the source code is available
 - □ b users are allowed to modify and redistribute the code

How to Install R?



Download R from the CRAN web site

```
▷ http://cran.r-project.org

▷ choose your platform, e.g., Windows, Linux

▷ e.g., for Windows: Windows → base → Download R 2.15.0 for Windows

▷ Install . . .
```

- ullet Download R packages from the CRAN web site \Rightarrow within R
 - ▶ Packages
 - ▷ Install package(s) . . .
 - > make your choice(s)
 - ▷ load the package using library() (note: install does not mean load)

Features of R



Why R

- ▷ because is free
- it compiles and runs on a wide variety of UNIX platforms as well as Windows and MacOS
- > R has extensive and powerful graphics & data manipulation capabilities
- \triangleright it can easily interface with low-level programming languages, e.g., C/C++ or Fortran
- it can be easily extended via R packages

Features of R (cont'd)



- Disadvantages of R
 - ▷ steep learning curve (some might say)
 - ▷ output is not so nice looking (but there are some alternatives)
 - * Sweave, odfWeave
 - > exporting output is more difficult
 - > cannot easily handle very very big data sets (depends on the installed RAM)
 - * use 64bit OSs
 - > a lot of things are available but it is sometimes hard to find your way
 - > the quality of the available packages is greatly varying

Examples using R



- R is a command-based functional language
 - > write and execute commands
 - □ use and define functions
- You may write the commands in the R console (Windows) or in a shell (Linux)
- Strongly advisable to use a suitable text editor Some available options:
 - ▷ Tinn-R (for Windows; http://sciviews.org/Tinn-R/)
 - ▷ Rstudio (all major platforms; http://www.rstudio.org/)
 - b for more check http://www.sciviews.org/_rgui/projects/Editors.html



- R has very flexible and compact syntax
 - Example: Calculate the coefficient of variation (sample std. dev. / sample mean), for blood pressure separately for males and females, in the age groups (20, 40) and (40, 60), and conditionally of being obese (BMI > 30) or not

```
with(BPdata, tapply(BP, list(cut(age, c(20, 40, 60)), sex, weight / height^2 > 30), function (x) sd(x)/mean(x))
```



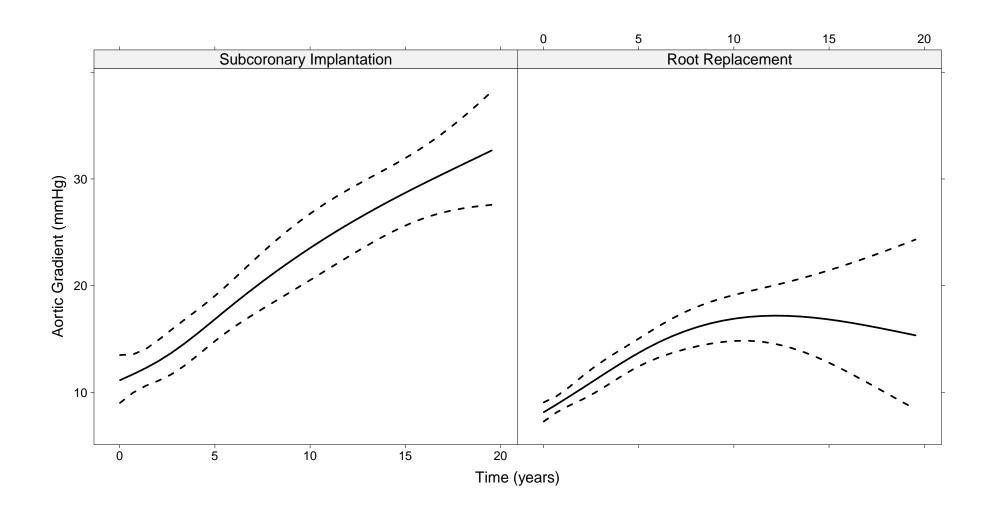
Example: Fit a linear model for blood pressure levels taking as explanatory variables the linear and quadratic effects of age the main effect of gender and their interaction

```
fm <- lm(BP ~ poly(age, 2) * sex, data = BPdata)
summary(fm) # parameter estimates, standard errors, etc.
plot(fm) # all basic residuals plots
fitted(fm) # extract fitted values
predict(fm, newdata) # make predictions for new patients</pre>
```



- Plotting
 - ▷ Predicted values with 95% Cls per operation type





Reporting Results in R: The Standard



- Communicating the results of a statistical analysis
 - > perform the analysis using your preferred statistical software
 - > results from this analysis constitute the basis for a statistical report
- Usually, this is a two-stage procedure,

 - b then write the report
- Statistician's hope: I won't have to change the analysis after I have finalized the report
 - □ unfortunately, this is seldom the case

Reporting Results in R: An Alternative



- Embed the analysis into the report
 - > end up with only the report and data files
- Advantages
 - > reproducible reports
 - b dynamic reports
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- Example: The client asks you to redo the whole analysis excluding some patients
 - ▶ you just subset your original data and the report gets automatically updated!!

Dynamic Reports with Sweave



What is Sweave

> Sweave is a tool that allows to embed the output of R code in LATEX documents

How it works

- b your report file will contain both documentation parts (written in IATEX) and code
 parts (written in R)
- the code is evaluated in R
- > the results as plain output or tables and/or figures are embedded into a final .tex file
- > you can then run pdflatex or latex to produce a pdf of your report



• Requirements:

- if you know how to use R and LATEX
 - * no need to learn something new
 - * Sweave ships directly with R
 - * it is relatively straightforward to start using it
- if you do not know LaTeX
 - * alternative: odfWeave (open document format)



- Assuming basic R and LATEX knowledge
- How does it work

 - b the file will also contain R code segments suitably separated from 上下

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 - ▷ from R execute Sweave("...\myfile.Rnw")
 - > this will create myfile.tex
 - > run LaTEX to obtain your report



- How do we combine the R and LATEX source code
 - □ using the Noweb syntax we separate between different segments (chunks) of source code, i.e.,
 - * << 'options' >>= denotes the start of an R code chunk
 - * @ denotes the start of a documentation LATEX chunk
- Basic options for code chunks
 - ▷ label: an optional name for the chunk useful for locating errors
 - ▷ echo: if TRUE, the commands are included in the document
 - ▷ fig: if TRUE, it includes the plot created in the code



- Basic options for code chunks
 - ▷ eval: if TRUE, the R code is evaluated
 - ▷ results:
 - * if hide, all output is completely suppressed
 - * if tex, the output is taken to be already proper LATEX markup and included as is
 - * if verbatim, the output of R commands is included in a verbatim-like R output environment
 - ▷ ...(check ?RweaveLatex)



• More info/material for Sweave available online:

```
bhttp://www.stat.uni-muenchen.de/~leisch/Sweave/Sweave-manual.pdf
bhttp://www.stat.uni-muenchen.de/~leisch/Sweave/FAQ.html
bhttp://www.stat.umn.edu/~charlie/Sweave/
bhttp://www.biostat.jhsph.edu/~rpeng/ENAR2009/lecture-slides.pdf
bhttp://biostat.mc.vanderbilt.edu/wiki/pub/Main/SweaveLatex/fhsweave.pdf
bmany more ⇒ Google it
```

Getting Help in R



• Within R

```
belp.search("topic") or ??"topic" (depends on the installed packages)
belp("topic") (requires internet connection)
belp() or ? invoke the on-line help file for the specified function
be checking the FAQ
```

On the internet

Getting Help in R (cont'd)



- On the internet
 - CRAN Task Views (http://cran.r-project.org/web/views/ categorization of packages)
 - ▷ Crantastic (http://crantastic.org/ categorization of packages + reviews)

Getting Help in R (cont'd)



- Intro with applications in statistics
 - Dalgaard, P. (2008) *Introductory Statistics with R, 2nd Ed.* New York: Springer-Verlag. (moderate)
 - Venables, W. and Ripley, B. (2002) Modern Applied Statistics with S. New York: Springer-Verlag. (advanced)

Programming

- ▷ Venables, W. and Ripley, B. (2000) S Programming. New York: Springer-Verlag.
- ▷ Chambers, J. (2008) *Software for Data Analysis Programming with R*. New York: Springer-Verlag.

Getting Help in R (cont'd)



- Clinical research
 - Peace, K. and Chen, D.-G. (2010) Clinical Trial Data Analysis Using R. Boca Raton: Chapman and Hall/CRC.
- More books that use R (or S) can be found at:

```
http://www.r-project.org/doc/bib/R-books.html, or
http://www.r-project.org/doc/bib/R-jabref.html
```



• The Is R Validated? saga: There is the PERCEPTION that a certain three-lettered statistical analysis system is the "Gold Standard" and, worse, is perhaps the only one accepted by the FDA

This is not TRUE!

• A key aspect of the CT regulatory framework is 21 CFR 11 with respect to digital signatures, audit trails, etc.

• Questions regarding the applicability of 21 CFR 11 to "stand-alone" statistical applications as opposed to databases that acquire, store and manage source electronic records

R For Clinical Research (cont'd)



- Most decision makers want to see documentation of compliance with applicable aspects of the regulations
- Efforts to create a guidance document for R began in earnest at useR! 2006 conference in Vienna
- "Working Group" began drafting a document with the goal of addressing key issues as they specifically pertain to R
 - ▶ Marc Schwartz (Vice President, Biostatistics, MedNet Study Solutions)
 - ▶ Frank Harrell (Chair at Dept. Biostatistics, Vanderbilt University School of Medicine)



- Leverage existing information on development, version control, testing, maintenance, bug reporting/resolution, stable release cycles, updates, documentation, end user support, etc.
 - > received constructive criticism from multiple parties
- Document submitted to The R Foundation for approval on June 15, 2007
- Notified of approval by The R Foundation on July 27, 2007
- Available at: http://www.r-project.org/doc/R-FDA.pdf



 Covers explicitly listed packages from "Base R" and the "Recommended Packages"

• Does **NOT** cover other CRAN and non-CRAN R packages

Qualification and Validation

• Specifically addresses 21 CFR 11.10 (a-i) and 11.30 functional requirements



• Changing from the standard to R is possible for clinical research

However, it will require time (⇒ learning curve)

• Time is money! The relevant question is:

How much money compared to the money payed annually for licences?

Thank you for your attention!