

RESEARCH METHODS FOR CLINICAL INVESTIGATORS

Session 1:

Study Designs: Which design best fits my study question?

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Objectives

At the end of the presentation, the audience will be able to:

- Determine which study design answers the research question
- Define the differences between observational and experimental study designs
- Identify a study design by its description and measures of association

Overview of Study Designs

- **Observational studies**

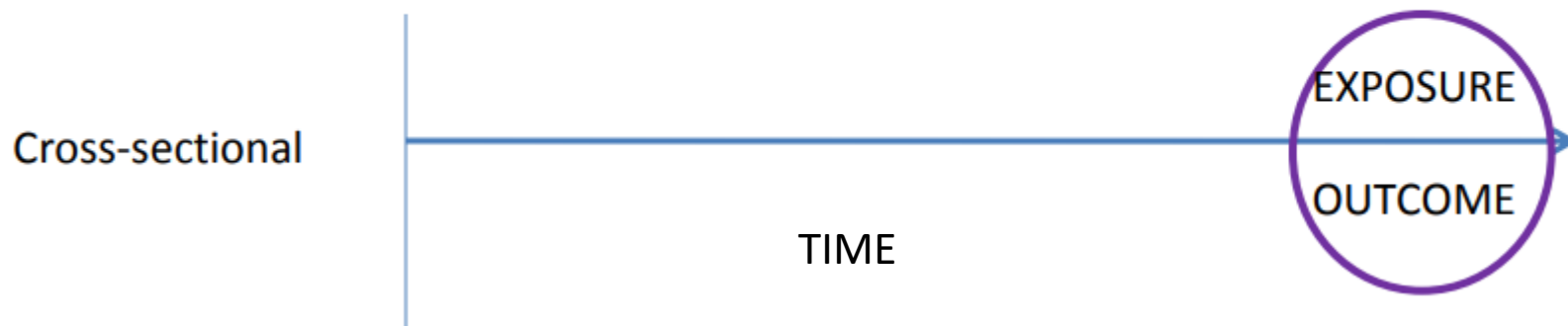
- Descriptive Studies: Cross-sectional surveys
- Analytic Studies: Ecologic studies, Case-control studies, Cohort studies

- **Experimental studies**

- Clinical Trials
- Group Randomized Trials

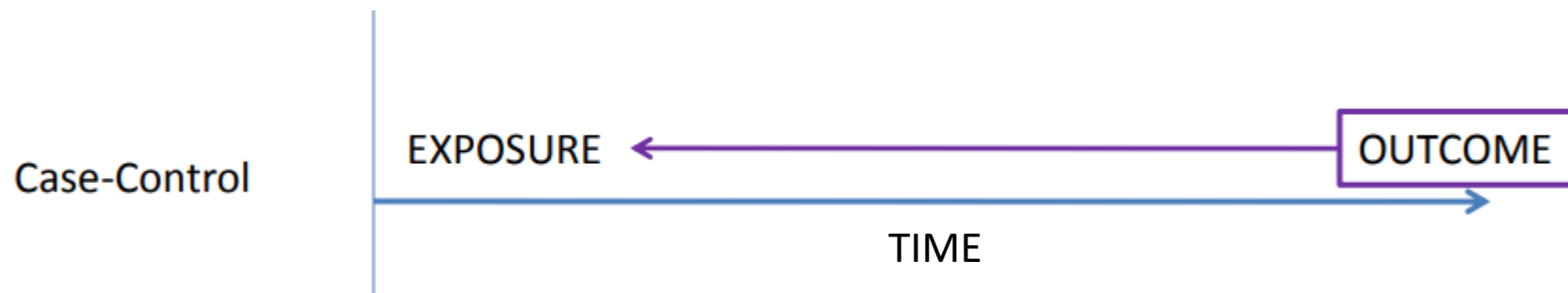
Cross-Sectional Study

- Single period of observation
Example: 1999
- Exposure and disease histories are collected simultaneously.
Can tie to other existing data such as medical records
- Limitations: **a.)** Can't assess incidence **b.)** Difficult to study rare diseases



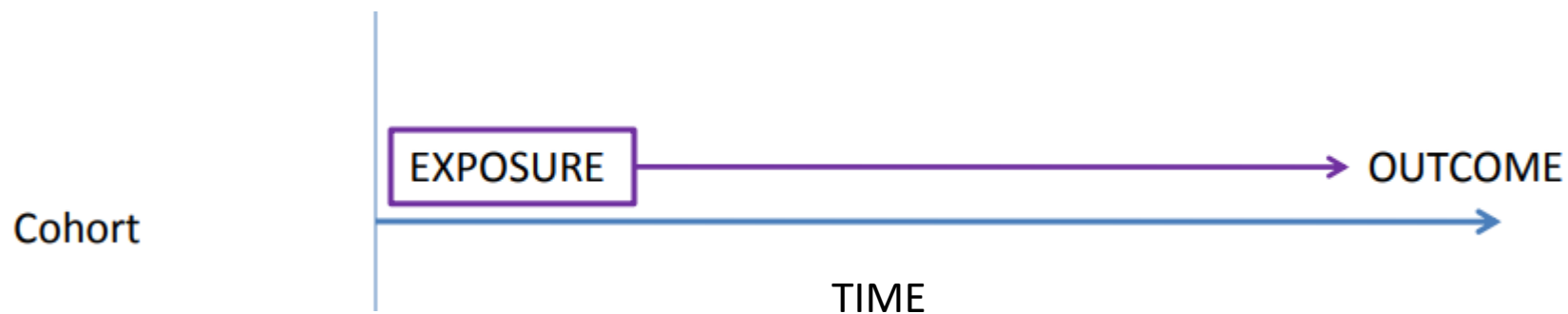
Case-Control Study

- Exposure is determined retrospectively
- Data collection typically involves a combination of both primary and secondary sources
- Limitations: **a.) Bias and Confounding**



Cohort Study

- Retrospective & Prospective
 - Ex. Framingham Study²
- Can be thought of as going from cause to effect
- Limitations: **a.)** Loss to follow-up (Bias) **b.)** Expensive and time consuming **c.)** Difficult to study rare diseases



1. Gordis, Leon. (2018). *Epidemiology*. Saunders Elsevier.

2. <https://www.nhlbi.nih.gov/science/framingham-heart-study-fhs>

Clinical Trials

- Involves the administration of a test regimen to humans or animals to evaluate its EFFICACY and SAFETY
 - Ex. Systolic Blood Pressure Intervention Trial (SPRINT) Study¹
- Individuals are randomly assigned to a study group
 - Intervention vs. Control (Placebo) or Attention Control²
 - Non-Inferiority Trials: New Rx vs Current Rx → Tests whether New Rx is not worse than Current Rx
- Limitations: **a.)** May be harder to generalize findings if the study population isn't representative of the general population **b.)** Expensive and time consuming **c.)** Not always ethical if exposure is harmful

1. <https://www.nhlbi.nih.gov/science/systolic-blood-pressure-intervention-trial-sprint-study>

2. LaFave, S., et al. (2019). Attention control group activities and perceived benefit in a trial of a behavioral intervention for older adults. Johns Hopkins University. Doi: [10.1002/nur.21992](https://doi.org/10.1002/nur.21992)

Study Designs

- **Method of data collection**
 - Survey: Questionnaire
 - Biomarkers: Blood draw
 - Interviews, i.e. Face-to-Face, Telephone
- **Measures of Association**
 - Odds Ratio (OR): Case-Control
 - Relative Risks (RR): Cohort
 - Hazard Ratio (HR): Randomized Clinical Trials

Study Designs cont'd

- **Measures of Association- OR**

OR>1: The odds of exposure among cases are **greater** vs controls

OR=1: The odds of exposure is the **same** for both study groups

OR<1: The odds of exposure among cases are **less** vs controls

Anticoagulation with heparin did not increase the likelihood of survival to hospital discharge or medical support for respiratory adverse events among patients diagnosed with COVID-19 vs those who received the standard thromboprophylaxis¹

(Adjusted OR: 0.83, 95% CI 0.67-1.03)

1. Bradbury, C., McVerry, B., et al. (2021). Therapeutic Anticoagulation with Heparin in Critically Ill Patients with COVID-19. *N England J Med.* 385(9): 777-789. doi: 10.1056/NEJMoa2103417

Study Designs cont'd

- **Measures of Association- RR**

RR>1: The risk in exposed group is **greater** than the risk in non-exposed group

RR=1: The risk in exposed group is = to the risk in non-exposed group

RR<1: The risk in exposed group is **less** than the risk in non-exposed group

- Shift work and insufficient sleep increased risk of coronary heart disease ¹
(RR: 1.23, 95% CI 1.15-1.31)

1. Kecklund, G., Axelsson, J. (2016). Health consequences of shift work and insufficient sleep. *BMJ*. 355. doi.org/10.1136/bmj.i5210

Study Designs cont'd

- **Measures of Association- HR**

HR>1: The hazard in exposed group is greater than the non-exposed group

HR=1: The hazard in exposed group is the same in non-exposed group

HR<1: The hazard in exposed group is less than the non-exposed group

- Cardiovascular Rx reduces risk of major cardiovascular events in patients w/ Type II diabetes and previous myocardial infarction¹ (HR: 0.84, 95% CI 0.72-0.99)

1. Furtado, R., Bonaca, M., et al. (2019). Dapagliflozin and Cardiovascular Outcomes in Patients With Type 2 Diabetes Mellitus and Previous Myocardial Infarction. *Circulation*. 139(22): 2516-2527. doi: 10.1161/CIRCULATIONAHA.119.039996.

Study Designs cont'd

- **Hypothesis Testing:** Reject/Accept (Null= H_0 vs. Alternate= H_A)
 - P-values: Probability of obtaining test results at least as extreme as the result actually observed, under the assumption that the null hypothesis is correct^{1,2}

p-value > 0.05 = Accept the H_0 and reject H_A , No difference in groups
p-value ≤ 0.05 = Reject the H_0 and accept H_A , Difference in groups
 - Confidence Intervals: Range of values that includes a population value, i.e. means, with a certain degree of confidence (95% CI)²
 - Population mean lies between an upper and lower interval

1. Dahiru.T., et al. (2008). P-value, A true test of statistical significance; A cautionary note. *Ann Ib Postgrad Med.* 6(1): 21-26. doi: 10.4314/aipm.v6i1.64038
2. Gordis, Leon. (2018). *Epidemiology*. Saunders Elsevier

Summary cont'd

- **Study Designs: Experimental vs. Observational**
- **Measures of Association and Hypothesis testing**
 - Ex. Statistical significance will/won't support the hypothesis that A predicts B

Research Question → Study Design → Data Collection → Analysis → Publication Support