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Introduction to Epidemiological Study Design

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Outline

- Objectives
- The scope of epidemiology (recap from previous training)
- Exposures and outcome
- Confounder factor
- Epidemiological study design
- Cross sectional study
- Cohort study
- Case-control study



• The scope of epidemiology (recap from previous training)



Epidemiology Definition

Epi =	upon	
Demos	=	population
Logos	=	study of

The study of how disease is distributed in populations and the factors that influence or determine this distribution.

Epidemiology, Third Edition, Leon Gordis



Key Word: Distribution

Distribution refers to the **frequency** and **pattern** of health and events in a population

Frequency -the number of events, and relationship to the size of population

Pattern – Occurrence of events by time, place, and person Ex. *Time* patterns – annual, seasonal – *Temporal analysis* Ex. *Place* patterns – rural, urban, - *Spatial analysis*



Key Words: Determinant & Health Related Events

Determinant (exposure or risk factor)

Any physical, biological, social, cultural or behavioral factor that influences health

Health Related Event (outcome of interest)

- Disease
- Death
- Injury
- Disability
- Decrease in animal production

Determinants (risk factors) -> Health related event (outcome)



Objectives of Epidemiology

- Identify the **etiology** or cause of disease
- Determine the magnitude of disease (impact) and trends over time and space
- Determine the **mode of transmission**
- Identify risk factors or protective variables
- Determine the role of the **environment**
- Identify potential interventions/control measures
- Evaluate the **impact** of prevention/control measures



Objectives of Epidemiology

- In epidemiology, measuring the occurrence of disease or other health related events in a population is **only one** of the possible objectives.
- Epidemiologists are also interested in assessing whether an exposure is <u>associated</u> with a particular disease (or other outcome of interest).





Steps in an epidemiological study

1) The first step in an epidemiological study is to define the **hypothesis** to be tested (i.e. *Aflatoxin is associated with liver cancer*)

This should include a precise definition of the **exposure(s)** (*i.e. Aflatoxin*) and **outcome(s)** (i.e. *Liver cancer*) under study.

2) The next step is to decide which **study design** will be the most appropriate to test that specific study hypothesis.



• Exposures and outcomes



Exposures and outcomes

- In an epidemiogical study there is:
- a) the **outcome of interest** (i.e. death/Sickness)
- b) the primary exposure (or risk factor)

c) there my be **more than one risk factors** that influence the outcome of interest (some of which may be *potential confounders*)

• There is the need to measure more than one exposures



Exposures and outcomes

Risk Factors Associated with Contamination of Raw Milk by Listeria monocytogenes in Dairy Farms

> M. SANAA, B. POUTREL,¹ J. L. MENARD,² and F. SERIEYS² Epidemiology and Animal Health Management Laboratory Ecole Nationale Vétérinaire d'Alfort 7, avenue du Général-de-Gaulle 94704 Maisons-Alfort, France

Quiz 1: which may be some risk factors associated to the contamination of raw milk by Listeria monocytogenes?

- Poor quality of silage (pH >4.0) (*OR =5.64; P= .0005*),
- Inadequate frequency of cleaning the exercise area (OR = 3.88; P =.0059),
- Poor cow cleanliness (OR = 5.91; P = .024),
- Insufficient lighting of milking parlors (OR = 4.57; P = .0093),
- Incorrect disinfection of towels between milkings (OR =2.93; P = .0326)



Exposures and outcomes

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Quiz 2: how did they find what are the risk factors for Listerian Monocytogenes?

- A **case-control study** involving 128 selected dairy farms was conducted to assess the **association** of several suspected risk factors with the **odds** of contamination of raw milk by Listeria Monocytogenes.



What's a counfounder factor?

- Some factors may «*distort*» the relationship between primary exposure and outcomes. They «*step in the way*», acting as **counfounding factors**!
- For a factor to be regarded as a **confounder** the rules are:
- 1. The factor must be associated with the exposure investigated
- 2. The factor must be independently associated with the outcome of interest





What's a counfounder factor?

Example: study of fracture risk in skiers verses snowboarders

Hypothesis: higher in skiers indicating a higher-risk sport?







• Epidemiological study designs



Epidemiological research

- Laboratory based research: procedures and strategies to understand mechanisms of health-related phenomena
- Outbreak investigations: study of outbreaks, in local populations, to identify agent(s), transmission mode(s), and possible control measure(s)
- Population-based (field) research: study of distribution, determinants, control measures of health-related phenomena in chosen populations, followed by application of suitable biostatistical techniques which may allow generalization of results



Adapted from: Study Designs in Epidemiology (Prof. Ahmed Mandil, University of Alexandria)

Data collection methods

- **Primary:** where the investigator is the first to collect the data. <u>Merits</u>: less measurement error, suits objectives of the study better. <u>Disadvantage</u>: costly, may not be feasible.
- Secondary: where the data is collected by OTHERS, for other purposes that those of the current study.



Study design-definition

"A study design is a specific plan or protocol for conducting the study, which allows the investigator to translate the **conceptual hypothesis** into an **operational one**."



- 1) Hypothesis development
- 2) Study design to test the hypothesis
- 3) Epi study implementation to collect (primary) data
- 4) Data analysis
- 5) Confirm/refuse hypothesis

Adapted from: Study Designs in Epidemiology (Prof. Ahmed Mandil, University of Alexandria)



Classification of study design

There are two basic approaches to assessing whether an exposure is associated with a particular outcome: **observational** (non-experimental) and **intervention** (experimental).



We only **observe:** the role of the investigator is merely to observe what happens, noting who is exposed or unexposed and who has or has not developed the outcome of interest. Researchers **allocate exposures** to individuals/communities: in an experiment, investigators study the impact of varying some factor which they can control (i.e. treatments; reduce/removal smoking)





Cross sectional study

- One of the most frequently chosen study designs in veterinary epidemiology
- Design is straightforward: a sample of individuals is selected from a previously defined (study) population and investigated (sampled) at a particular point in time to obtain simultaneously information on both the exposure(s) and outcome(s) of interest.
- The outcome frequency measure is the **Prevalence**





Cross sectional study descriptive



Cross sectional study analytic



Cross sectional study-analytical



Results:

The BTB prevalences at animal and herd levels were: 21.5 % and 40.9 % in Maekel, 7.3 % and 10 % in Debub, and 0.2 % and 1.6 % in the Anseba region, respectively.

In adult dairy cattle the probability of positive reactivity in the SICTT test was highest in pregnant animals as compared to the other categories.



Cohort study

- Cohort studies are observational studies in which the starting point is the selection of a study population, or cohort. Information is obtained to determine which members of this cohort are exposed to the factor of interest (*i.e. poor hygiene condition in farm*)
- This enables the researchers to define groups of individuals by their exposure status (i.e. a group animals kept in good hygiene condition and a group animals kept in poor hygiene condition)
- The entire population is then followed up over time and the incidence of the disease in the exposed individuals is compared with the incidence in those not exposed
- Cohort studies have the ability of looking at **multiple outcomes**



Cohort study





Cohort study

A Cohort Study of Coagulase Negative Staphylococcal Mastitis in Selected Dairy Herds in Prince Edward Island

T. Jeffrey Davidson, Ian R. Dohoo, Alan W. Donald, Harry Hariharan and Kathy Collins



Our **objectives** were to (i) estimate the incidence of avian influenza virus infection and (ii) assess the efficacy of H5N1 vaccination programmes as indicated by the presence of H5 antibody in vaccinated and unvaccinated poultry.

Results: A total of 17 968 swab and 14 878 blood samples were collected from 5476 birds over the study period. The overall **incidence rate** of H5 virus infection was 0.2 (95% CI 0.1–0.5) positive birds per 100 bird-months at risk. Fifty (95% CI 48–52) birds per 100 tested birds were H5 HI positive in the **unvaccinated group** compared with 71 (95% CI 69–73) birds per 100 in the



Case control study

- Case—control studies are observational studies in which the starting point is the identification of 'cases' of the disease (or condition) of interest, and of suitable 'controls' without that disease (or condition).
- Cases and controls are then compared to assess whether there were any differences in their **past exposure to putative risk factors** (i.e. the *odds* of exposure in cases is then compared with the *odds* of exposure in controls)
- Although a case-control study is limited to 1 outcome, many different exposures can be measured



Case control study





Case control study

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Design: From September to December 1989, we detected 40 herds with bulk milk contaminated by L. monocytogenes (**cases**); After selecting the first 40 herds, we engaged in a preliminary study comparing those herds with 80 other herds for which milk was not contaminated by Listeria spp (**control**). These two groups were compared for different factors.

Results:

- Poor quality of silage (pH >4.0) (*OR =5.64; P= .0005*),
- Inadequate frequency of cleaning the exercise area (OR = 3.88; P =.0059),
- Poor cow cleanliness (OR = 5.91; P = .024),
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Incorrect disinfection of towels between milkings (OR =2.93; P = .0326)

Measures of disease frequency and exposure effect in analytic study designs

Type of analytical study	Measure of disease (outcome) occurrence	Measure of exposure effect	
Ecological	Rate, Risk, Prevalence	Correlation or Regression Coefficient	
Cross-sectional	Prevalence	Prevalence Ratio, Prevalence Difference, Odds Ratio	
Cohort	Rate, Risk , Odds, Mean or Median	Rate Ratio, Risk Ratio, Odds Ratio, Rate Difference, Risk Difference, Vaccine Efficacy, Difference between Means or Medians	
Case-control	None ¹	Odds Ratio,Vaccine Efficacy,	



 Round table discussion: what are the advantages and disadvantages of different types of epidemiological studies?



What design to choose?

- Need to consider:
- Rarity of outcome
- Rarity of exposure
- More than one outcome?
- More than one exposure?
- Interested in time relationships between exposure and outcome?



Application of different studies

	Ecological	Cross- sectional	Case- control	Cohort
Investigation of rare disease	++++	-	+++++	-
Investigation of rare exposures	++	-	-	+++++
Examining multiple outcomes	+	++	-	+++++
Studying multiple exposures	++	++	++++	+++
Measurement of time relationship between exposure and outcome	+	-	+	+++++
Direct measurement of incidence	-	-	+ 1	+++++







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Thanks