Bayesian regression for group testing data

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lowa chlamydia data

- The State Hygienic Laboratory at the University of Iowa tests thousands of Iowa residents each year for chlamydia
- 2014: *N* = 13862 female subjects
 - endocervical swab (about 70 percent)
 - urine
- Swab specimens are combined and tested in pools
 - usually of size c = 4
 - positive pools resolved by testing each specimen individually
- Urine specimens are tested individually

- General premise: tests are performed on "pools" of individual specimens (e.g., swabs, urine, blood, etc.)
 - positive pool: at least one individual in the pool is positive
 - negative pool: all individuals in the pool are negative
- Used to test/screen for a variety of infections
 - syphilis (Dorfman, 1943)
 - HIV, HCV, HBV
 - chlamydia, gonorrhea
 - influenza
- Cost-efficient alternative to testing subjects individually
 - SHL: saves approximately \$600,000 each year by pooling specimens
- Case identification versus estimation

Iowa State Hygienic Laboratory



- CT testing
- Tecan pipettes 4 specimens at a time
- Entire process automated

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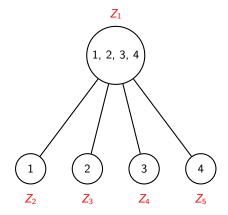
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Iowa State Hygienic Laboratory



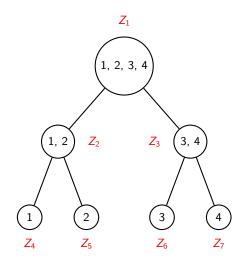
- Great colleagues at SHL!
- Wade Aldous (Associate Lab Director)
- Kris Eveland (Lab Technician)

Dorfman (two-stage hierarchical) testing



- Master pool tested in first stage
- Individual testing in second stage (if necessary)
- Most common case identification protocol
 - Iowa SHL; other labs

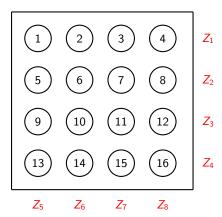
Three-stage hierarchical testing



- Master pool tested in first stage
- Subpools tested in second stage (if necessary)
- Individual testing in third stage (if necessary)
- Why make more complicated?
 - reduces number of tests when prevalence is small

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Array testing (in two dimensions)



- Individual specimens placed in the cells of an array
- First stage: Test row and column master pools
 - rows give Z_1, Z_2, Z_3, Z_4
 - columns give Z_5, Z_6, Z_7, Z_8
- Individual retests (if necessary) in second stage give Z₉, Z₁₀, Z₁₁...,

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- Develop a general regression framework to relate an individual's true status Y
 i to covariates in a regression model
 - covariates measured on each individual
 - don't get to observe \widetilde{Y}_i , i = 1, 2, ..., N
- ${\ensuremath{\, \bullet }}$ We get to observe the testing responses ${\ensuremath{ Z }} = ({\ensuremath{ Z }}_1, {\ensuremath{ Z }}_2, ..., {\ensuremath{ Z }}_J)'$
 - could arise from master pools, subsets of master pools, and/or individuals
- Also want to estimate assay sensitivity and specificity
 - allow sensitivity and specificity to change with pool size
 - even allow for multiple assays to be used during the screening process

Notation and assumptions

- \widetilde{Y}_i = disease status (1/0); \mathbf{x}_i covariate vector; i = 1, 2, ..., N
- *P_j* ⊂ {1, 2, ..., N} = set of indices identifying which individuals belong to the *j*th pool, *j* = 1, 2, ..., *J*.
 - Example: $\mathcal{P}_1 = \{1, 2, 3, 4\}$, $\mathcal{P}_2 = \{1, 2\}$, $\mathcal{P}_3 = \{3, 4\}$, $\mathcal{P}_4 = \{1\}$, $\mathcal{P}_5 = \{2\}$
- Z̃_j = 1 if P_j is truly positive; Z_j = 1 if P_j tests positively
 S_{ej} = pr(Z_j = 1|Z̃_j = 1)
 S_{pj} = pr(Z_j = 0|Z̃_j = 0)
- GLM: $\operatorname{pr}(\widetilde{Y}_i = 1 | \mathbf{x}_i, \beta) = g^{-1}(\mathbf{x}'_i \beta)$
 - if we had the \widetilde{Y}_i 's, we could estimate the model directly
 - we only have the Z_j 's (testing responses)

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Notation and assumptions

- Assume the Y
 _i's are conditionally independent given the covariates
- The conditional distribution of Z can be written as

$$\pi(\mathbf{Z}|\mathbf{S}_{e},\mathbf{S}_{p},\mathbf{X},\beta) = \sum_{\widetilde{\mathbf{Y}}\in\{0,1\}^{N}} \left\{ \prod_{j=1}^{J} \{S_{e_{j}}^{Z_{j}}(1-S_{e_{j}})^{1-Z_{j}}\}^{\widetilde{Z}_{j}} \{(1-S_{p_{j}})^{Z_{j}}S_{p_{j}}^{1-Z_{j}}\}^{1-\widetilde{Z}_{j}} \right\} \\ \times \prod_{i=1}^{N} \{g^{-1}(\mathbf{x}_{i}'\beta)\}^{\widetilde{Y}_{i}} \{1-g^{-1}(\mathbf{x}_{i}'\beta)\}^{1-\widetilde{Y}_{i}} \right\}$$

- Inside the brackets: $\pi(\mathbf{Z}, \widetilde{\mathbf{Y}} | \mathbf{S}_e, \mathbf{S}_p, \mathbf{X}, \beta)$
- First product: Contribution of observed testing responses
- Second product: Contribution of individual (latent) statuses
- Observed data likelihood of β if \mathbf{S}_e and \mathbf{S}_p are known

Bayesian estimation

- Assume S_e and S_p are known (relax later)
- $\pi(\beta) =$ prior distribution for β ; e.g., $\beta \sim \mathcal{N}_{r+1}(\mathbf{a}, \mathbf{R})$
- $\pi(\widetilde{\mathbf{Y}}, \beta | \mathbf{Z}, \mathbf{S}_e, \mathbf{S}_p, \mathbf{X}) \propto \underbrace{\pi(\mathbf{Z}, \widetilde{\mathbf{Y}} | \mathbf{S}_e, \mathbf{S}_p, \mathbf{X}, \beta) \pi(\beta)}_{(*)}$

$$egin{aligned} &(st)\propto\exp\left\{-rac{1}{2}(eta-\mathbf{a})'\mathbf{R}^{-1}(eta-\mathbf{a})+\sum_{i=1}^{N}\widetilde{Y}_{i} heta_{i}-b(heta_{i})
ight\} \ & imes\prod_{j=1}^{J}\{S^{Z_{j}}_{e_{j}}(1-S_{e_{j}})^{1-Z_{j}}\}^{\widetilde{Z}_{j}}\{(1-S_{p_{j}})^{Z_{j}}S^{1-Z_{j}}_{p_{j}}\}^{1-\widetilde{Z}_{j}}, \end{aligned}$$

where $\theta_i = \log[g^{-1}(\mathbf{x}'_i\beta)/\{1 - g^{-1}(\mathbf{x}'_i\beta)\}], \ b(x) = \log\{1 + \exp(x)\}$

 If the *Ỹ_i*'s were observed, sampling β could be done by using any Bayesian method for binary regression

Bayesian estimation

 Because we are estimating a GLM, we used Gamerman's (1997) MH algorithm because it is easier; can just work with

$$\pi(oldsymbol{eta}|\widetilde{\mathbf{Y}},\mathbf{X})\propto \exp\left\{-rac{1}{2}(oldsymbol{eta}-\mathbf{a})'\mathbf{R}^{-1}(oldsymbol{eta}-\mathbf{a})+\sum_{i=1}^{N}\widetilde{Y}_{i} heta_{i}-b(heta_{i})
ight\}$$

• From
$$\pi(\widetilde{\mathbf{Y}}, \beta | \mathbf{Z}, \mathbf{S}_{e}, \mathbf{S}_{p}, \mathbf{X})$$
, we can work out

$$\widetilde{Y}_{i}|\mathbf{Z}, \widetilde{\mathbf{Y}}_{-i}, \mathbf{S}_{e}, \mathbf{S}_{p}, \mathbf{X}, \boldsymbol{\beta} \sim \text{Bernoulli}\{p_{i1}^{*}/(p_{i0}^{*}+p_{i1}^{*})\}, \text{ where}$$

$$p_{i1}^{*} = g^{-1}(\mathbf{x}_{i}^{\prime}\boldsymbol{\beta}) \prod_{j \in \mathcal{A}_{i}} s_{e_{j}}^{Z_{j}} (1 - s_{e_{j}})^{1 - Z_{j}}$$

$$p_{i0}^{*} = \{1 - g^{-1}(\mathbf{x}_{i}'\boldsymbol{\beta})\} \prod_{j \in \mathcal{A}_{j}} \{S_{e_{j}}^{Z_{j}}(1 - S_{e_{j}})^{1 - Z_{j}}\}^{I(\sum_{i'} \in \mathcal{P}_{ij} \ \widetilde{Y}_{i'} > 0)} \{(1 - S_{p_{j}})^{Z_{j}} S_{p_{j}}^{1 - Z_{j}}\}^{I(\sum_{i'} \in \mathcal{P}_{ij} \ \widetilde{Y}_{i'} = 0)},$$

where the sets $A_i = \{j : i \in \mathcal{P}_j\}$ and $\mathcal{P}_{ij} = \{i' \in \mathcal{P}_j : i' \neq i\}$

Bayesian estimation

• Key point: All one needs to do is simply keep track of which individuals are in which pools

POSTERIOR SAMPLING ALGORITHM

- Initialize $\beta^{(0)}$ and $\widetilde{Y}_i^{(0)} = 0$, i = 1, 2, ..., N; set t = 1
- **2** Sample $\widetilde{Y}_{i}^{(t)} \sim \text{Bernoulli}\{p_{i1}^{*}/(p_{i0}^{*}+p_{i1}^{*})\}, i = 1, 2, ..., N$
- Sample $\beta^{(t)}$ from $\pi(\beta|\widetilde{\mathbf{Y}}^{(t)},\mathbf{X})$
- Set t = t + 1; repeat steps 2 and 3
 - This posterior sampling algorithm is extremely fast
 - all unknown quantities are updated using standard distributions
 - invariant to group testing protocol

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Unknown assay accuracy probabilities

- Allow S_e and S_p to be unknown
- Previous regression methods largely assume $S_{e_j} = S_e$ and $S_{p_j} = S_p$, j = 1, 2, ..., J
- S_e and S_p are usually estimated using pilot studies performed by assay manufacturers
 - these estimates are determined from testing individuals-not pools
- Goal: We want a flexible framework:
 - allow sensitivity and specificity to change with pool size
 - allow for multiple assays to be used during the testing process
 - e.g., screening tests for pools; confirmatory tests for individuals

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Unknown assay accuracy probabilities

• Let $S_{e(l)}$ and $S_{p(l)}$ denote the sensitivity and specificity associated with the *l*th assay, l = 1, 2, ..., L

Define

 $\mathcal{M}(I) = \{j : \text{the } I\text{th assay was used to test the } j\text{th pool}\}$

• Introduce independent prior distributions $\pi(S_{e(l)})$ and $\pi(S_{p(l)})$, l = 1, 2, ..., L

 $\pi(\widetilde{\mathbf{Y}}, \mathbf{S}_{e}, \mathbf{S}_{p}, \beta | \mathbf{Z}, \mathbf{X}) \propto \pi(\mathbf{Z}, \widetilde{\mathbf{Y}} | \mathbf{S}_{e}, \mathbf{S}_{p}, \mathbf{X}, \beta) \pi(\beta) \prod_{l=1}^{L} \pi(S_{e(l)}) \pi(S_{p(l)})$

- $\begin{array}{l} \bullet \ \ S_{e(l)} \sim \mathsf{beta}(a_{S_{e(l)}}, b_{S_{e(l)}}) \\ \bullet \ \ S_{p(l)} \sim \mathsf{beta}(a_{S_{p(l)}}, b_{S_{p(l)}}) \\ \bullet \ \ S_{e(l)} | \mathbf{Z}, \widetilde{\mathbf{Y}} \ \text{and} \ \ S_{p(l)} | \mathbf{Z}, \widetilde{\mathbf{Y}} \ \text{also beta} \end{array}$
- Augment posterior sampling algorithm: Add 1 extra step

Simulation study

- Model: logit{pr($\tilde{Y}_i = 1 | x_{i1}, x_{i2}$)} = $\beta_0 + \beta_1 x_{i1} + \beta_2 x_{i2}$
 - $\beta = (\beta_0, \beta_1, \beta_2)' = (-3, 2, -1)'$
 - $x_{i1} \sim \mathcal{N}(0,1)$ and $x_{i2} \sim \text{Bernoulli}(0.5)$
 - Population prevalence: about 10 percent
- Three group testing procedures: MPT, DT, and AT
- N = 5000 individuals (assign to master pools at random)
 - common master pool size c = 5
- Three configurations of the assay accuracies
 - common S_e and S_p for all tests (known)
 - 2 common S_e and S_p for all tests (unknown)
 - **③** different S_e and S_p for pools and individuals (unknown)
- $\pi(m{eta}) \propto 1$ and $S_{e(l)}, S_{p(l)} \sim \mathsf{beta}(1,1)$ independently

Parameter		Individual	MPT	DT	AT
$\beta_0 = -3$	Bias (CP95) SSD (ESE)	-0.03 (0.95) 0.13 (0.13)	-0.04 (0.95) 0.17 (0.17)	$-0.02 (0.95) \\ 0.11 (0.12)$	-0.01 (0.95) 0.11 (0.11)
$\beta_1 = 2$	Bias (CP95) SSD (ESE)	0.02 (0.94) 0.10 (0.11)	0.04 (0.95) 0.15 (0.15)	0.02 (0.95) 0.09 (0.10)	0.01 (0.95) 0.09 (0.09)
$\beta_2 = -1$	Bias (CP95) SSD (ESE)	-0.01 (0.95) 0.14 (0.14)	-0.03 (0.96) 0.21 (0.22)	-0.01 (0.96) 0.13 (0.13)	-0.01 (0.94) 0.13 (0.13)
Average number of tests		5000	1000 2679 (46%)		2787 (44%)

- Small bias, good agreement between SSD and ESE, and CP95 within MOE
- Interesting: DT and AT give (as good or) better precision than individual testing!
 - occurs despite requiring far fewer tests
 - common theme in group testing: "Get more for less"

lowa chlamydia data

• N = 13862 female specimens during 2014 (swab/urine)

• Data:

- 2273 swab master pools of size c = 4
- 12 swab master pools of size c = 3
- one swab master pool of size c = 2
- 416 individual swab specimens
- 4316 individual urine specimens
- Recall: Positive swab master pools resolved using DT
- All testing performed using AC2A
 - pilot data available from product insert; see also Gaydos (2003); can be used to set informative priors

• Six covariates measured on each individual:

$$1 x_1 = age$$

- 2 $x_2 = 1$ if the individual is Caucasian (0, otherwise)
- 3 $x_3 = 1$ if a new sexual partner was reported in the last 90 days
- $x_4 = 1$ if multiple partners were reported in the last 90 days
- STD reported in the previous year
- **(**) $x_6 = 1$ if the individual showed symptoms of infection
- Population model:

 $logit\{pr(\widetilde{Y}_{i} = 1 | \mathbf{x}_{i})\} = \beta_{0} + \beta_{1}x_{i1} + \beta_{2}x_{i2} + \beta_{3}x_{i3} + \beta_{4}x_{i4} + \beta_{5}x_{i5} + \beta_{6}x_{i6},$

for i = 1, 2, ..., 13862

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lowa chlamydia data

- We envision three sets of assay accuracy probabilities:
 - S_{e(1)} and S_{p(1)} for swab specimens tested in pools
 S_{e(2)} and S_{p(2)} for swab specimens tested individually
 S_{e(3)} and S_{p(3)} for urine specimens tested individually
- 13 parameters to estimate all together
 - $\pi(m{eta}) \propto 1$ and $S_{e(I)}, S_{p(I)} \sim \mathsf{beta}(1,1)$, for I=1,2,3
 - 40000 posterior draws sampled after a burn-in of 1000 draws
 - fitting the model took about 7 minutes
- Q: Use informative priors for $S_{e(2)}$, $S_{p(2)}$, $S_{e(3)}$, and $S_{p(3)}$?
 - A: We did and got the same results

Parameter	Description	Estimate	ESE	95% CI
β_0		-0.759	0.194	(-1.126, -0.368)
β_1	Age	-0.071	0.007	(-0.085, -0.058)
β_2	Race	-0.348	0.081	(-0.505, -0.190)
β_3	New partner	0.276	0.070	(0.139, 0.414)
β_4	Multiple partners	0.330	0.094	(0.144, 0.513)
β_5	Contact with STD	1.408	0.112	(1.189, 1.628)
eta_{6}	Symptoms	0.290	0.077	(0.138, 0.439)
$S_{e(1)}$	Swab pool	0.891	0.069	(0.742, 0.995)
$S_{e(2)}$	Swab individual	0.998	0.002	(0.993, 1.000)
$S_{e(3)}$	Urine individual	0.836	0.091	(0.646, 0.987)
$S_{\rho(1)}$	Swab pool	0.999	0.001	(0.997, 1.000)
$S_{p(2)}$	Swab individual	0.978	0.007	(0.964, 0.993)
<i>S</i> _{p(3)}	Urine individual	0.989	0.007	(0.974, 0.999)

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Discussion

- We have developed a general regression framework for group testing data with individually measured covariates
 - can incorporate historical information
 - estimate assay accuracy probabilities
 - invariant to how the data were collected
- Modeling extensions:
 - random effects + variable selection (*Biometrics*, 2020)
 - generalized additive regression (Biostatistics, 2021)
 - multivariate binary response (*Biometrics*, in revision)
 - time-to-event response (*Biometrika*, in revision)
- Can re-estimate model as new testing results arrive
 - useful to implement informative group testing case identification protocols
 - perhaps even to detect misdiagnosed individuals
 - "back-end screening"

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