

Recall

- What is usual outcome of descriptive study?
- II. What are two basic features of case-control studies?
- III. What do you mean by matching and how it is performed.
- What are analytical outcomes of a casecontrol study.
- V. What are short comings of C-C study

Cohort

A group of people who have something in common or remain part of the group over an extended period of time. Birth cohort, Occupational cohort, Exposure cohort/ Post atomic bombing. Suicide-survivor cohort, Women using IUD-cohort

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Cohort study

(Prospective-, Follow-up-, Longitudinal-, Incidence- & Forward looking studies)

- Observational study.
- Analyze hypothesized association,better than C-C study.
- Most reliable epidemiological / observational study method to test an etiological Hypothesis
- Close to a true experiment

When Cohort study is undertaken?

- When sufficient evidence about disease causation is available.
- Stable & manageable cohorts are available.
- Exposure in general is rare but disease is common in those who are exposed (certain occupational groups)
- Risk of attrition is minimal
- Enough resources are available

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Basic features of Cohort studies

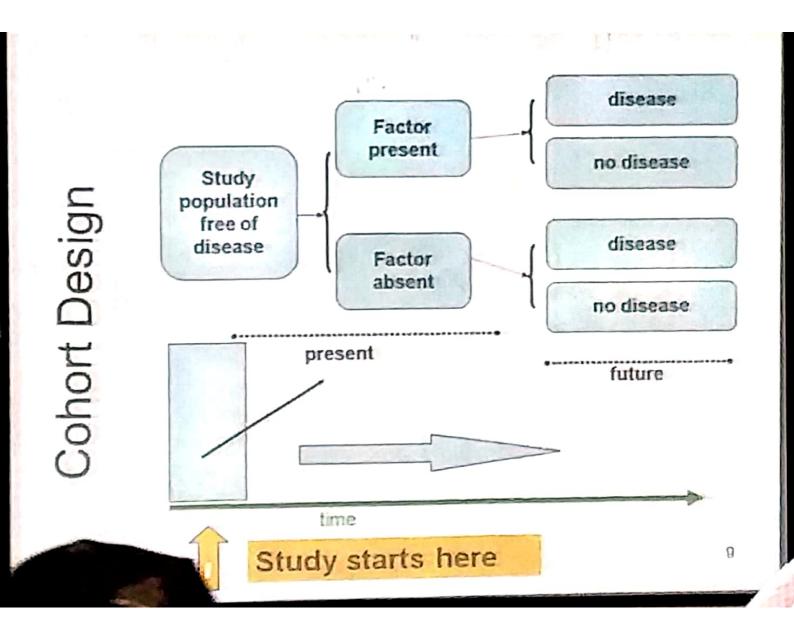
- Two comparable cohorts of individuals are identified from the population
- Both groups are free from disease.
- Persons belonging to one cohort are exposed to the suspected risk factor Exposed Cohort (like smoking)
- 2nd group is not exposed to that factor Non-Exposed.

Both groups are otherwise equally susceptible to diseases.

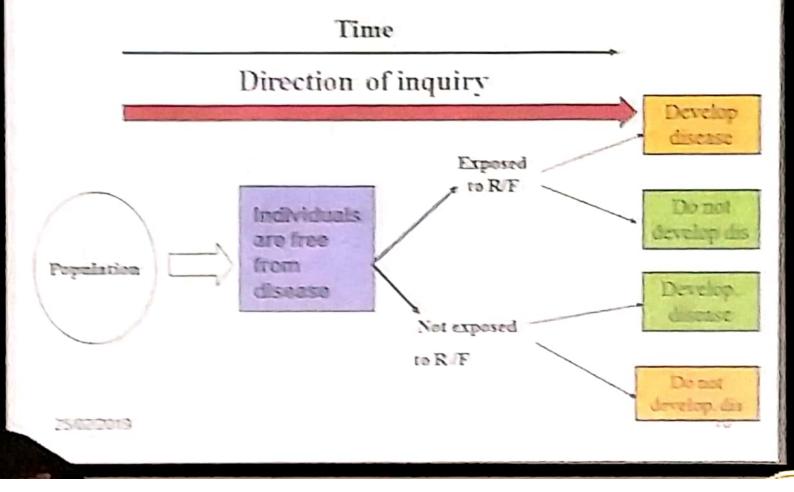
tudy proceed from cause to effect.

Basic features of Cohort studies

- Exposed & non-Exposed groups are observed over extended period of time and compared for occurrence (frequency) of disease / death.
- Incidence rate of the disease in both groups can be directly calculated
- Time & dose relationship between exposure and the outcome may be established.
- More than one, outcomes may be studied at the same time.



Cohort Study design



Steps for undertaking a cohort study

- 1. Selection of Cohort
 - a. Exposed group.
 - Gen. population
 - Select group (occupational gp)
 - b. Non-exposed group
 - Gen. population
 - Internal comparison
 - External comparison
- Collection of relevant information
 - a. About exposure
 - b. Basic variables

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Steps...

- Follow up for development of disease in both groups
 - Periodic medical examination
 - Review of medical records
 - Routine surveillance for morb. & mort.

ISSUE OF ATTRITION

- Analysis concept.
 - i. Is there any difference in occurrence of disease b/w the two groups ? if yes! Then, is it significant ? Determined by P-value, SE of diff b/w two props.
 - ii. Relative risk

Analytical framework of Cohort study

| Cohorts | Disease development | |
|---|------------------------|----|
| status | Yes | No |
| Exposed to suspected etiological factor | а | b |
| Not exposed to suspected etiological factor | C | d |

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Analysis use of "HF" and "early hearing loss"

| | Developed disease | Not developed disease | | |
|-------------|-------------------|-----------------------|---------|--|
| Exposed to | a | b | a+b | |
| R/F | (30) | (70) | (100) | |
| Not Exposed | c | d | c+d | |
| to R/F | (10) | (90) | (100) | |
| | a+c | b+d | n = 200 | |

- Incidence rate in Exposed = a / a + b x 100 (30%)
 Incidence rate in Not-Exposed = c / c+ d x 100 (10%).
- II. Relative Risk.

Incidence in Exposed =
$$a/a+b \times 100 = 30 = 3/1 = 3$$

Incidence in not-Exposed = $c/c+d \times 100 = 10$

RR or Risk Ratio = 3

Interpretation: those who exposed, are 03 (300%) times at higher chances of developing the disease as compare to those who are not exposed.

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