

มหาวิทยาลัยราชภัฏนครปฐม



CHAPTER 5

Epidemiology Study Designs



Episode 5.2: 2) Case-control study

Wanpen Waelveerakup, Dr.P.H.
Email: wanpenw@webmail.npru.ac.th

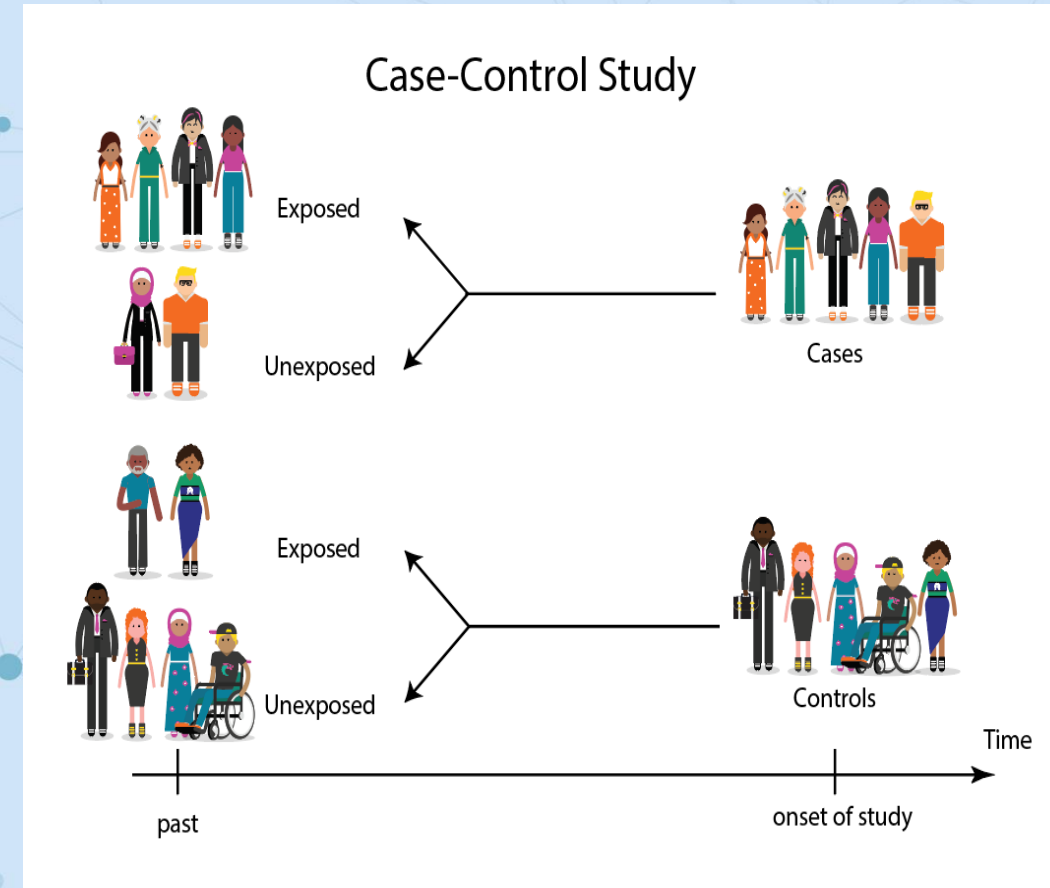
The nature of the case-control study

observation without manipulation

Case-control study

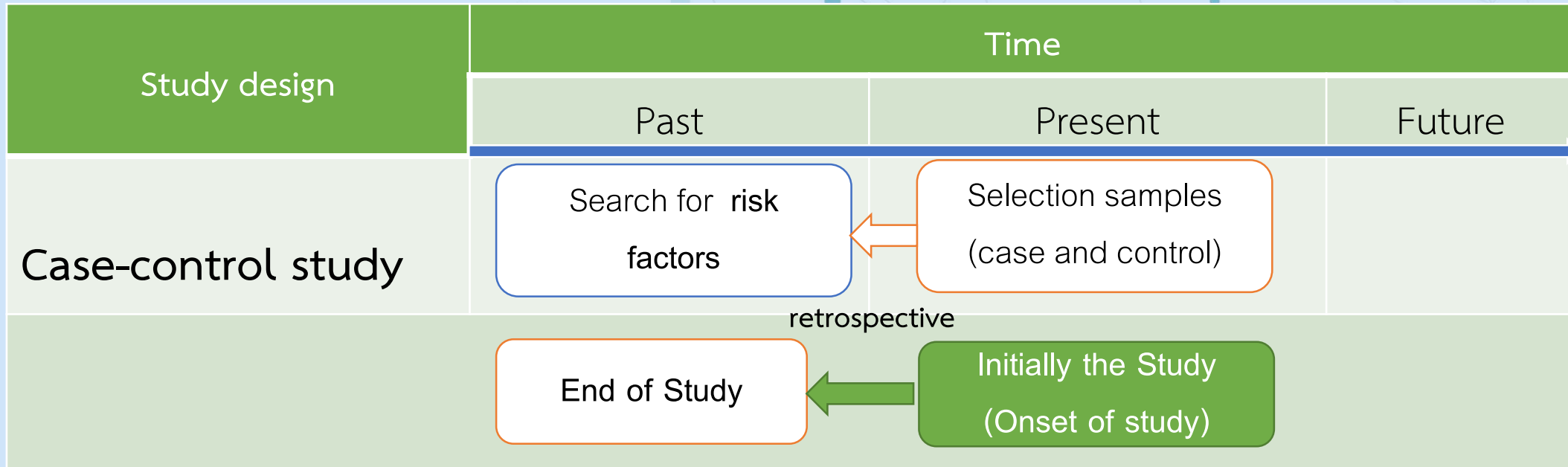
1. Start from the outcome retrospective to exposure (factor)

2. Initially, the diseased population was divided into 2 groups, namely the diseased group (case) and the group without the disease (control or non-case).



Source: <https://deakin.libguides.com/quantitative-study-designs/casecontrol>

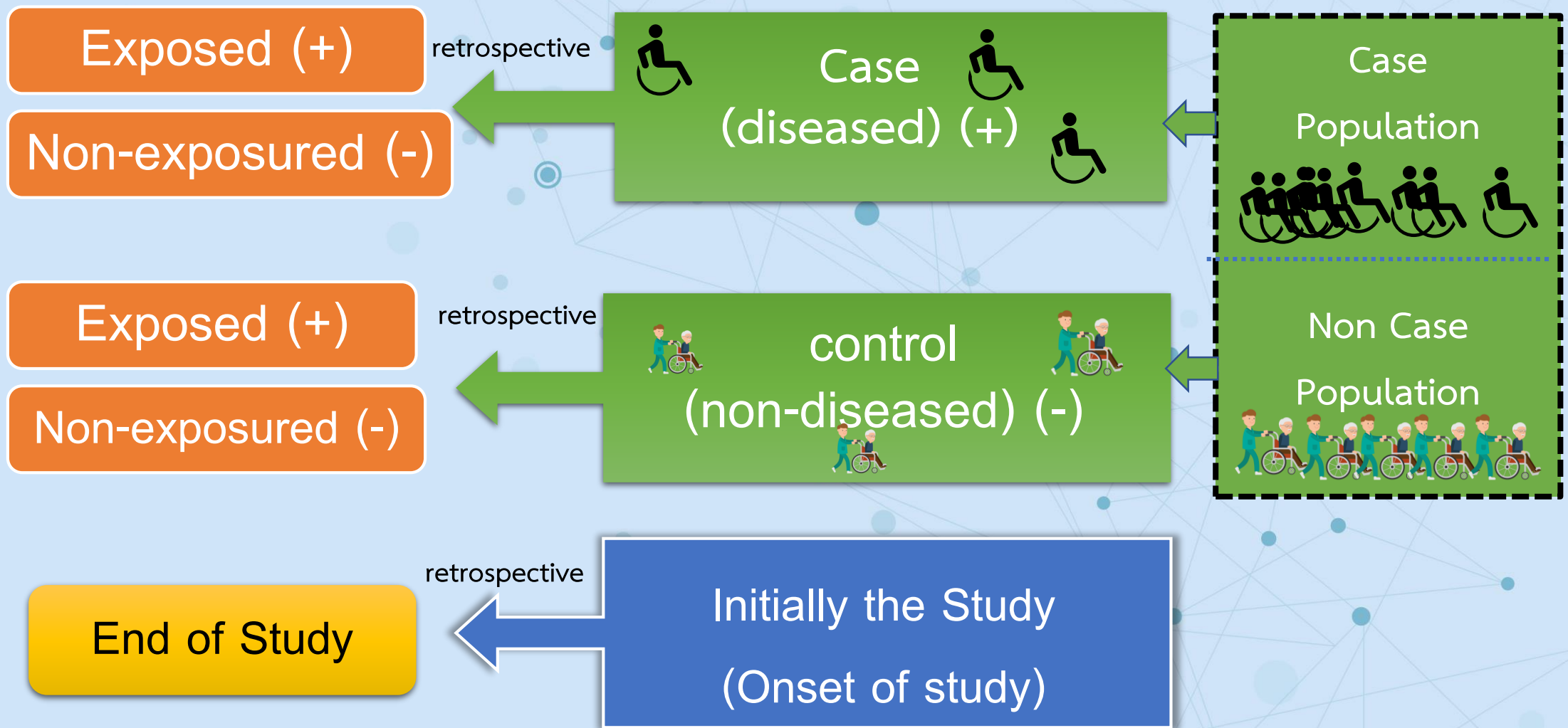
The nature of the case-control study: study plan



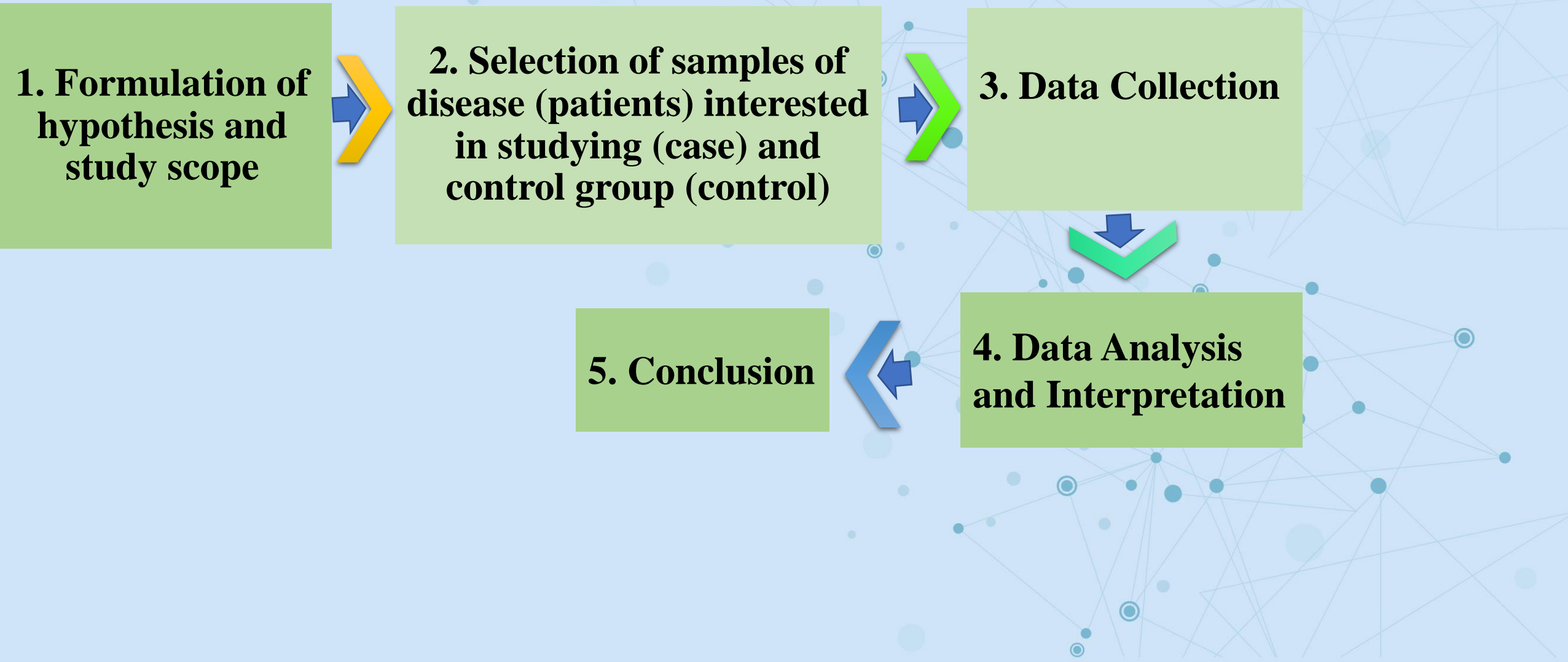


The nature of the case-control study

observation without manipulation



Steps for conducting a case-control study (retrospective study)



Selection samples (case and control)

Case group (diseased)

The primary study base is the *selection* of cases from the community by selecting cases or randomly selecting (sampling) cases from all existing patients in the community of interest.

The secondary study base, also known as the case-defined study base, is the selection of cases from patients who come to health care facilities. or hospital.

Control group (non-diseased)

- Representative of the population at risk of becoming a case.
- Have no health problems as interested (outcome)
- Patients with characteristics most similar to the studied patients.

Steps for conducting a case-control study (retrospective study)

Data Collection

3.1 Study data

from medical records about past illnesses/ treatments that have been recorded.

3.2 Study data

from other records related to past illness/ treatment.

3.3 Observing,

questioning, interviewing or surveying information **about the family environment**

3.4 Observing,

questioning, interviewing or surveying information **about psychosocial factors**

3.5 Observing,

questioning, interviewing or exploring **other risks**

3.6 Observing,

questioning, interviewing or surveying about **health behaviors**

Exposure (Risk factor)	Outcomes		Total	Prevalence
	Diseased	Non-diseased		
Exposed	a	b	a + b	a / (a + c)
Non-exposed	c	d	c + d	c / (a + c)
Total	a + c	b + d	a + b + c + d	-

The probability of exposed risk factor in case $(P_{ex}) = a / (a + c)$

The probability of non-exposed risk factor in case $(P_{non}) = c / (a + c)$

$$\text{Odds Ratio} = \frac{a}{c} = \frac{a / (a + c)}{c / (a + c)}$$

Odds Ratio (OR) Interpretation

- A Odds Ratio **of 1.0** indicates identical risk among the two groups.
- A Odds Ratio **greater than 1.0** indicates an increased risk for the group in the numerator, usually the exposed group.
- A Odds Ratio **less than 1.0** indicates a decreased risk for the exposed group, indicating that perhaps exposure actually protects against disease occurrence.

Conclusion

- The results obtained are only odds ratios.
- A true relationship or relative risk cannot be concluded because this type of study was unable to determine the incidence rate of the exposed group and the non-exposed group.

The bias of a case-control study (retrospective study)

1. Recall bias

- Some factors may have been forgotten
- Incomplete medical records
- The difference in the number of factors between case and control
- **Unclear Information on past exposures**

2. Selection bias

Often caused by the improper selection of the control group and the lack of cooperation from the control group in providing information.

Advantages & Disadvantages

Advantages

- Cheaper
- Quicker / easier to conduct
- Good for diseases with long latency periods
- Can assess multiple exposures
- Good for rare diseases

Disadvantages

- Retrospective / more prone to bias
- Can only assess one outcome/disease
- Cannot establish risk
- Cannot establish the incidence

Summary

- Case-control study is a retrospective design.
- Case-control studies must clearly define two groups at the start (one with the outcome/disease and one without the outcome/disease)
- This design focused on looking back to assess whether there is a statistically significant difference in the rates of exposure to a defined risk factor between the groups.



Thank You for Your Attention



Email: wanpenw@webmail.npru.ac.th

to be continued

