

2

SAMPLING

OBJECTIVES

After reading this chapter, you should be able to:

1. Select a random, simple, systematic, stratified, cluster, multistage sample or targeted (risk based) sample—given the necessary elements.
2. Recognise the advantages and disadvantages of each sampling method.
3. Select the appropriate sampling strategy for a particular situation, taking into account the requirements, advantages and disadvantages of each method.
4. List the elements that determine the sample size required to achieve a particular objective and be able to explain the effect of each upon the sample-size determination.
5. Compute required sample sizes for common analytic objectives.
6. Understand the implications of complex sampling plans on analytic procedures.
7. Select a sample appropriately to detect or rule out the presence of disease in a group of animals.

2.1 INTRODUCTION

2.1.1 Census vs sample

For the purposes of this chapter, we will assume that data are required for all individuals (animals, herds *etc*), or a subset thereof, in a population. The process of obtaining the data will be referred to as measurement.

In a census, every animal in the population is evaluated. In a sample, data are collected from only a subset of the population. Taking measurements or collecting data on a sample of the population is more convenient than collecting data on the entire population. In a census, the only source of error is the measurement itself. However, even a census can be viewed as a sample because it represents the state of the population at one point in time and hence, is a sample of possible states of the population over time. With a sample, you have both measurement and sampling error to contend with. A well-planned sample, however, can provide virtually the same information as a census, at a fraction of the cost.

Note The outcome in any study (*eg* disease status) is often determined by the use of diagnostic tests (see Chapter 5). For the sake of simplicity, in this chapter we will assume that the outcome is measured without error.

2.1.2 Descriptive versus analytic studies

Samples are drawn to support both descriptive studies (often called surveys) and analytic studies (often called observational studies).

A **descriptive study** (or survey) aims to describe population attributes (frequency of disease, level of production). Surveys answer questions such as, ‘What proportion of cows in the population has subclinical mastitis?’ or, ‘What is the average milk production of cows in Prince Edward Island (PEI)?’

An **analytic study** is done to test estimate the magnitude of an association between outcomes and exposure factors in the population. Analytic studies contrast groups and seek explanations for the differences between them. An analytic study might ask a question such as, ‘Is barn type associated with the prevalence of subclinical mastitis?’ or, ‘Is subclinical mastitis associated with milk production?’ Establishing an association is the first step to inferring causation, as was discussed in Chapter 1.

The distinction between descriptive and analytic studies is discussed further in Chapter 7.

2.1.3 Hierarchy of populations

There is considerable variation in the terminology used to describe various populations in a study. In this text, we will adopt terminology consistent with that used in the text *Modern Epidemiology* (Rothman *et al*, 2008) with 3 populations of interest: the target population, the source population and the study sample or group. These will be discussed with reference to a study designed to quantify post-surgical mortality in dogs.

The **target population** is the population to which it might be possible to extrapolate results

from a study. It is often not clearly defined and might vary depending on the perspective of the individual interpreting the results of the study. For example, the investigators conducting a post-surgical mortality study might have considered all dogs undergoing surgery in Canadian veterinary clinics as the target population, while someone reading the results of the study in the United States might evaluate the study assuming the target population was all dogs undergoing surgery in North America.

The **source population** is the population from which the study subjects are drawn. Conceptually, all units in the source population should be ‘listable’ and have a non-zero probability of being included in the study. For example, if the post-surgical mortality study was to be conducted in PEI, and all veterinary clinics in PEI were invited to participate, the source population would be all dogs undergoing surgery in veterinary clinics in PEI.

The **study sample** (or group) consists of the individuals (animals or groups of animals) that end up in the study. Usually this group is some form of sample from the source population. Prior to conducting the study the researchers would determine the necessary sample size (perhaps planning to sample only some of the clinics and some of the surgical patient records within the selected clinics. The veterinarians and owners would then be contacted and the study sample would consist of the animals enrolled through veterinarians and animal owners who agreed to participate (and whose records were adequate for inclusion in the study). These animals are referred to as a sample or group of animals rather than a population because they do not constitute an easily defined population.

The concept of validity is discussed at length in Chapters 12 and 13, but validity relates to the populations defined in the following way. The **internal validity** of a study relates to whether or not the study results (obtained from the study sample) are valid for members of the source population. Essentially, this indicates whether or not the study has obtained the ‘correct’ answer for the source population. Much of this book is dedicated to methods used to maximise the probability of getting this answer correct.

The **external validity** relates to how well those results can be generalised to the target population. Evaluation of external validity involves a subjective assessment of whether or not the source population is broadly representative of the target population. Given that the target population may be defined differently by different readers, assessment of external validity is much more difficult. However, it is much easier to generalise the results from an analytical study (one which evaluates associations) than results from a descriptive study (which describes the level of a disease or other characteristics in a population). For example, the prevalence of post-surgical complications (a descriptive result) may be very different in PEI than in other regions of North America. However, an observed association between duration of anaesthetic and the risk of post-surgical complication (an analytic result) is more likely to be generalisable.

2.1.4 Sampling frame

The **sampling frame** is defined as the list of all the **sampling units** in the source population. Sampling units are the basic elements of the population that is sampled (*eg* herds, animals). A complete list of all sampling units is required in order to draw a simple random sample, but it might not be necessary for some other sampling strategies. The sampling frame is the information about the source population that enables you to draw a sample. In our example, the sampling frame likely would be the list of all veterinary clinics in PEI. After veterinary clinics were selected, we would devise a strategy for selecting animal owners within those clinics.

2.1.5 Objectives of the study

The objectives of a study will influence the sampling strategy employed. Descriptive studies are usually aimed at determining the prevalence (or incidence) of disease in a population or demonstrating that a population is free of disease. Analytical studies are focused on establishing associations between factors (*eg* risk factors) and an outcome (*eg* disease). Unless otherwise specified, this chapter will focus on sampling to support prevalence estimation or analytical objectives. The issue of sampling to detect the presence of disease (or alternatively to declare a population free of disease) will be discussed in Section 2.12.

2.1.6 Types of error

In a study based on a sample of observations, the variability of the outcome being measured, measurement error, and sample-to-sample variability all affect the results we obtain. Hence, when we make inferences based on the sample data, they are subject to error. Within the context of hypothesis testing in an analytical study, there are 2 types of error:

Type I (α) error: You conclude that the outcomes in the groups being compared are different (*ie* an association exists) when in fact they are not.

Type II (β) error: You conclude that the outcomes are not different (*ie* no association between the exposure and outcome exists) when in fact they are.

A study was carried out to determine if an exposure had an effect on the probability of disease occurrence or not. Table 2.1 presents the possible decisions that can be made based on the study and their relation to the ‘truth’.

Table 2.1 Types of error

		True state of nature	
		Effect present	Effect absent
Conclusion of statistical analysis	Effect present (reject null hypothesis)	Correct	Type I (α) error
	No effect (accept null hypothesis)	Type II (β) error	Correct

Statistical test results reported in the medical literature are aimed at disproving the **null hypothesis** (which is that there is no difference between groups). If differences are found, they are reported with a P-value which expresses the probability that a difference as large (or larger) than the one observed could be due to chance, if the null hypothesis is true. P is the probability of making a Type I (α) error. When $P \leq 0.05$, we are ‘reasonably’ sure that any effect detected is not due to chance.

Power is the probability that you will find a statistically significant difference when it exists and is of a certain magnitude (*ie* $power = 1 - \beta$). The probability of making a Type II (β) error, or failing to detect a difference, is sometimes not stated because of the general preference for reporting positive results in the literature. So-called **negative findings** (failure to find a difference) are less likely to be reported. There are a number of reasons why a study might find no effect of the factor being investigated.

- There truly was no effect of exposure on the outcome.
- The study design was inappropriate.

- The sample size was too small (low power).
- Bad luck.

An evaluation of the power of the study will at least determine how likely you are to commit a Type II error for a given alternative hypothesis.

2.2 NON-PROBABILITY SAMPLING

Samples that are drawn without an explicit method for determining an individual's probability of selection are known as **non-probability samples**. Whenever a sample is drawn without a formal process for random selection, it should be considered a non-probability sample, of which there are 3 types: judgement, convenience, and purposive. Non-probability samples are inappropriate for descriptive studies except in the instance of initial pilot studies (even then, use of non-probability samples might be misleading). However, non-probability sampling procedures are often used in analytical studies.

2.2.1 Judgement sample

This type of sample is chosen because, in the judgement of the investigator, it is 'representative' of the source population. This is almost impossible to justify because the criteria for inclusion and the process of selection are largely implicit, not explicit.

2.2.2 Convenience sample

A convenience sample is chosen because it is easy to obtain. For instance, herds in close proximity to a research centre, herds with good handling facilities, herds with records that are easily accessible, *etc* might be selected for study. Convenience sampling often is used in analytical studies where the need to have a study group that is representative of the source population can be relaxed. For example, Chapter 17 will focus on the relationship between ultrasound measurements taken in beef cattle at the start of the finishing period and the final carcass grade of the animals. Even though the study was from a convenience sample of herds, the results would probably be applicable to beef cattle in general, provided they were fed and managed under reasonably comparable conditions.

2.2.3 Purposive sample

The selection of this type of sample is based on the study subjects possessing one or more attributes such as known exposure to a risk factor or a specific disease status. This approach is often used in observational analytical studies. If a random sample is drawn from all sampling units meeting the study criteria, then it becomes a probability sample from the subset of the source population.

2.3 PROBABILITY SAMPLING

A **probability sample** is one in which **every** element in the population has a known **non-zero** probability of being included in the sample. This approach implies that a formal process of random selection has been applied to the sampling frame. The following sections will describe

how to draw different types of probability sample. Procedures for analysing data derived from the samples will be discussed in Section 2.10. A much more complete description of sampling procedures can be found in general sampling texts such as Levy & Lemeshow (2008).

2.4 SIMPLE RANDOM SAMPLE

In a **simple random sample**, every study subject in the source population has an equal probability of being included. A complete list of the source population is required and a formal random process is used (random is **not** the same as haphazard). Random sampling can be based on drawing numbers from a hat, using computer-generated random numbers, using a random-numbers table, flipping a coin or throwing dice.

For example, suppose you wish to draw a sample of the 5,000 small animal patients in a veterinary clinic to determine the proportion whose vaccinations are up to date. You require a sample of 500. Assuming that a numbered list of all 5,000 patients is available and files can be accessed by that number, you could randomly pick 500 numbers between 1 and 5,000. These numbers would identify the animals whose records you would examine.

2.5 SYSTEMATIC RANDOM SAMPLE

In a **systematic random sample**, a complete list of the population to be sampled is not required provided an estimate of the total number of animals is available and all of the animals (or their records) are sequentially available (*eg* cattle being run through a chute). The **sampling interval** (j) is computed as the study population size divided by the required sample size. The first study subject is chosen randomly from among the first j study subjects, then every j^{th} study subject after that is included in the sample. It is a practical way to select a probability sample if the population is accessible in some order, but bias might be introduced if the factor you are studying is related to the sampling interval. Consequently, a simple random sample would be preferable, but might not be feasible if the logistics of the sampling program (*eg* time required for blood sampling) precludes the use of a simple random sample which might generate a series of consecutive numbers.

Assume once again that you want a sample of 500 patients in a veterinary clinic. You know how many you need to sample (500) and approximately how many patients there are (5,000) but generating a list of those patients would be very time consuming. However, all of their records are stored alphabetically in a file cabinet. You need to sample every 10th patient. To start, randomly pick a number between 1 and 10, then pull out every 10th file after that to obtain the data. Data from a systematic random sample are analysed as though they were derived from a simple random sample. **Note** In this specific case, a simple random sample would also be feasible if the estimate of the source population size was reliable, because there are no logistic constraints to counting the files.

2.6 STRATIFIED RANDOM SAMPLE

In this approach, prior to sampling, the population is divided into mutually exclusive strata based on factors likely to affect the outcome. Then, within each stratum, a simple or systematic random sample is chosen. The simplest form of stratified random sampling is called **proportional** (the number sampled within each stratum is proportional to the total number in

the stratum). There are 3 advantages of **stratified random sampling**.

1. It ensures that all strata are represented in the sample.
2. The precision of overall estimates might be greater than those derived from a simple random sample. The gain in precision results from the fact that the between-stratum variation is explicitly removed from the overall estimate of variance.
3. It produces estimates of stratum-specific outcomes, although the precision of these estimates will be lower than the precision of the overall estimate.

For example, assume you believe that cats are less likely to be up to date on vaccines than dogs. You would make up 2 lists—one of cats and one of dogs—and sample from each list with proportional sampling. If 40% of the patients are cats, then $500 \times 0.4 = 200$ cats would be selected, and 300 dogs would be selected.

2.7 CLUSTER SAMPLING

A **cluster** is a natural or convenient collection of study subjects with one or more characteristics in common. For example:

- a litter is a cluster of piglets,
- a dairy herd is a cluster of cattle,
- a pen in a feedlot is a cluster of cattle, and
- a county is a cluster of farms.

In a cluster sample, the **primary sampling unit** (PSU) is larger than the unit of concern. For example, if you wanted to estimate the average serum selenium level of beef calves in PEI, you could use a cluster sample in which you randomly selected farms, even though the unit of concern is the calf. In a cluster sample, every study subject within the cluster is included in the sample.

Cluster sampling is done because it might be easier to get a list of clusters (farms) than it would be to get a list of individuals (calves), and it is often less expensive to sample a smaller number of clusters than to collect information from many different clusters.

In this example of cluster sampling, a survey to determine the average serum selenium level of beef calves in PEI was conducted. Fifty herds were selected from a provincial herd list and every calf in each of the 50 herds was bled at weaning. A cluster sample is convenient because it is impossible to get a complete list of beef cattle in PEI, but it is easy to get a list of the beef producers. It is also more practical to sample all cattle on 50 farms than it is to drive around to all ~300 beef farms in PEI and sample a few animals on each farm. Of course, calves within a herd are probably more alike than calves from different farms, so the sampling variation for a given number of individuals is greater than if they had been chosen by simple random sampling. The impact of sampling at the cluster level is discussed further in Sections 2.10.3 and 2.11.6.

When a group is not a cluster In cluster sampling, a group is a cluster of individuals. A sample is a cluster sample if the group is the sampling unit and the study subjects within the group are the unit of concern. When the group is both the sampling unit and the unit of concern, then by definition, the sample is not a cluster sample. For example, the following is **not** a cluster sample: a sample of herds to determine whether or not the herds are infected with a particular disease agent (in this case, the herd is the unit of concern, not the individual animals).

2.8 MULTISTAGE SAMPLING

A cluster might contain too many study subjects to obtain a measurement on each, or it might contain study subjects so nearly alike that measurement of only a few study subjects provides information on the entire cluster. **Multistage sampling** is similar to cluster sampling except that, after the PSUs (*eg* herds) have been chosen, then a sample of **secondary sampling units** (*eg* animals) is selected. Assume again that you are interested in the serum selenium level of beef calves at weaning, and that within-farm variation is small. That means that you don't need to sample very many calves on a particular farm to get a good estimate of the serum selenium level of all the calves on that farm. Consequently, you might only sample a small number of individuals on each farm.

If you want to ensure that all animals in the population have the same probability of being selected, 2 approaches are possible. First, the PSUs chosen might be selected with a probability proportional to their size. In other words, if the herd size is known ahead of time, large herds should have a higher probability of being chosen than small herds. After the number of herds is chosen, you select a fixed number of calves in each herd from which to get serum samples. If herd size is not known ahead of time, take a simple random sample of the PSUs and then sample a constant proportion of the calves in each herd. Either approach will ensure each animal has the same probability of selection. If this is not the case, the probability of selection needs to be accounted for in the analysis (see Section 2.10.2).

How many herds and how many animals to sample within each herd depend upon the relative variation (in the factor(s) being measured) between herds, compared to within herds, and the relative cost of sampling herds compared to the cost of sampling individuals within herds. In other words, when the between-herd variation is large relative to the within-herd variation, you will have to sample many more herds to get a precise estimate. Multistage sampling is very flexible where cost of sampling is concerned. If you are like most researchers, you are working on a limited budget and, when it is expensive to get to herds, you will want to sample as few as possible. On the other hand, if the cost of processing samples from an individual animal is high relative to the cost of getting to the farm, you will want to sample fewer animals per farm. Usually researchers desire to have the most precise estimate of the outcome for the lowest possible cost. These 2 desires can be balanced by minimising the product of the variance and the cost. Regardless of the total sample size for the study (n), the variance*cost product can be minimised by selecting n_i individuals per herd according to the following formula:

$$n_i = \sqrt{\frac{\sigma_i^2}{\sigma_h^2} * \frac{c_h}{c_i}} \quad \text{Eq 2.1}$$

where n_i is the number of individuals to be sampled per herd, and σ_h^2 and σ_i^2 are the between- and within-herd variance estimates and c_h and c_i are the costs of sampling herds and individuals, respectively. The value for n_i needs to be rounded to an integer value and cannot be less than 1. Once the number of individuals per herd has been determined, the number of herds to be sampled is then $n_h = n/n_i$.

Keep in mind that cluster and multistage sampling almost always require more subjects for the same precision than simple random sampling. Example 2.1 describes a stratified, multistage sampling approach. Multistage sampling, as the name suggests, can be extended to more than the 2 levels discussed above.

Example 2.1 Multistage sampling

data = dairy_dis

A study was conducted in the 3 Maritime provinces of eastern Canada to determine the prevalence of serologic reactions to 3 infectious diseases of dairy cattle: Johne's disease (*Mycobacterium avium* subspecies *paratuberculosis*—Map), enzootic bovine leukemia virus (leukosis) and *Neospora caninum* (VanLeeuwen J *et al*, 2001). The dataset is described in Chapter 31. The study had the following characteristics:

- The target population was all dairy herds in the region.
- The **source population** was all dairy herds in the region that participated in an official milk recording programme (approximately 70%).
- The **sampling frame** consisted of a list of all herds in the source population and subsequently, a list of all cows in each herd selected for the study (both provided by the milk-production testing programme).
- Sampling was **stratified** by province with 30 herds being randomly selected within each of the 3 provinces.
- Sampling was carried out as **multistage sampling** with the herds being selected first and then 30 cows randomly selected within each of the herds.
- The **study sample** consisted of the animals selected for participation in the study from which a blood sample could be obtained.
- All **random sampling** was performed using **computer-generated random numbers**.

These data will be used in Examples 2.2 through 2.4.

2.9 TARGETED (RISK-BASED) SAMPLING

Animal disease surveillance programs (particularly for rare or absent diseases) is increasingly being based on targeted sampling plans. Targeted sampling involves the stratification of the source population into strata based on one, or more, characteristic(s) which are thought to be associated with the probability of disease occurrence. However, unlike stratified sampling, targeted sampling may involve sampling only from strata in which the probability of finding cases of disease is highest (Salman, 2003; Stärk *et al*, 2006), or at least weighting the sample heavily in favour of high risk strata. Consequently, some animals may have a zero probability of being included in the sample. Methods for targeted sampling have recently been developed and are an active area of research.

In targeted sampling, animals are assigned point values based on the probability of them having the disease of interest and sampling is proportional to that estimate of risk (Thurmond, 2003). Sampling proceeds until animals with the predetermined number of points have been sampled. Population inference from a targeted sample requires 2 key epidemiological parameters: an estimate of how the characteristic used to create the strata relate to the probability of disease (*ie* an estimate of the risk ratio (see Chapter 4) for the characteristic), and an estimate of the distribution (frequency) of the characteristic in the source population (Williams *et al*, 2009b). The advantage of targeted sampling is that it will require a much smaller sample size than other forms of sampling if the outcome of interest (disease) is rare and characteristics that strongly influence the probability of an animal having the outcome can be identified. A disadvantage is that key epidemiological parameters might not be known. Specifically, the effects of the characteristic of interest (*ie* the risk ratio) is often not known for the population being studied and must be derived from evidence in other populations. In addition, the proportion of animals with the characteristic of interest also might not be known. Uncertainty in these 2 estimates

should be taken into account when planning a targeted sampling program (Williams *et al*, 2009b). Poisson sampling is an unequal probability sampling strategy that can be used for targeted sampling programs (Williams *et al*, 2009a).

Targeted sampling has been used extensively in BSE (bovine spongiform encephalopathy) surveillance programs (Prattley *et al*, 2007a; Prattley *et al*, 2007b). In this instance, sampling is focused on the following strata (also called ‘streams’): cattle with clinical signs compatible with BSE, dead stock (cattle that die on the farm), and casualty slaughter (unhealthy cattle slaughtered at the slaughter house). A simulation study used to evaluate the performance of targeted sampling for disease prevalence estimation concluded that targeted sampling is appropriate provided justifiable estimates of the key epidemiological parameters are available (Wells *et al*, 2009).

2.10 ANALYSIS OF SURVEY DATA

The sampling plan needs to be taken into account when analysing data from any research project involving a complex sampling plan. (**Note** Although referred to as ‘survey’ data, the concepts discussed in this chapter apply equally to the analysis of data from analytic studies based on complex sampling plans.) There are 3 important concepts that have been raised in the above discussion of various sampling plans: stratification, sampling weights and clustering. In addition to these, the possibility of adjusting estimates derived from finite populations must be considered.

2.10.1 Stratification

If the population sampled is divided into strata prior to sampling, then this needs to be accounted for in the analysis. For example, in a study of the prevalence of Johne’s disease in cattle herds, the herds might be divided into dairy and beef. The advantage of such stratification is that it provides separate stratum-specific estimates of the outcome of interest. If the factor upon which the population is stratified is related to the outcome (*eg* prevalence of Johne’s in the 2 strata), then the standard error (SE) of the overall prevalence estimate might also be lower than if a non-stratified sample was taken. Correctly accounting for the stratified nature of the sample requires that the total population size in each stratum be known in order to get the sampling weights correct (Section 2.10.2).

In Example 2.2, the *Neospora* data have been analysed ignoring the stratification by province, and then by taking it into account.

2.10.2 Sampling weights

Although probability sampling requires that a formal random process be used to select the sample, it does not imply that all units sampled have the same probability of selection. If a sample of herds is selected from a source population, and a sample of cows is selected within each of those herds, then the probability of selection for any given cow can be computed as:

$$p(\text{selection}) = \frac{n}{N} * \frac{m}{M} \tag{Eq 2.2}$$

where n is the number of herds in the sample, N is the number of herds in the source population,

Example 2.2 Analysis of stratified survey data

data = dairy_dis

Valid test values for *Neospora caninum* were obtained from 2,425 cows. A simple estimate (treating the sample as a simple random sample) of the overall seroprevalence was 0.1905 (19.05%) and the SE of that estimate was 0.0080 (0.80%).

If the data are stratified by province, the seroprevalence estimates are as follows:

Province	Number of samples	Seroprevalence	
		Prevalence	SE (prevalence)
1	810	0.1012	0.0106
2	810	0.2111	0.0143
3	805	0.2596	0.0155
Overall	2425	0.1905	0.0079

There are considerable differences across the provinces in terms of the seroprevalence of *N. caninum*. The SE of the overall estimate from the stratified sample is slightly smaller than when the data were treated as a simple random sample, but the difference is minimal. Stratification alone does not change the overall point estimate of the prevalence. **Note** This analysis is provided for pedagogical purposes only. It would not be correct to assume equal sampling weights (Section 2.10.2) given that non-proportional sampling was carried out across strata.

m is the number of cows that were selected from the sampled herd, and M is the number of cows in that herd. For example, assume that 10 herds are selected out of 100 in a region and, that in each herd, 20 animals are sampled. If herd A is an 80-cow herd, the probability that a cow in that herd will ultimately end up in the sample is:

$$10/100 * 20/80 = 0.025 (2.5\%)$$

Similarly, if herd B is a 200-cow herd, the probability that a cow in that herd will be in the sample is:

$$10/100 * 20/200 = 0.01 (1\%)$$

These different probabilities of selection need to be taken into account in order to obtain the correct point estimate of the parameter of interest.

The most common way of forming sampling weights is to make them equal to the inverse of the probability of being sampled. This value reflects the number of animals that each of the sampled individuals represent. For example, a cow in herd A would actually represent $1/0.025=40$ cows in total. A cow in herd B would have a sampling weight of $1/0.01=100$ because she had a much smaller probability of selection.

In Example 2.3, the overall prevalence of *Neospora* has been computed taking sampling weights into consideration.

2.10.3 Clustering

Cluster sampling and multistage sampling involve the sampling of animals within groups.

Example 2.3 Analysis of stratified and weighted survey data

data = dairy_dis

Cows within the study population had different probabilities of being selected for the sample. Two factors influenced this:

- the probability that the herd would be selected
- the probability that the cow would be selected within the herd.

Herd selection probability: Within each province, the probability of a herd being selected was 30 divided by the total number of herds on the milk-recording programme in the province. For example, herd 2 was in province 3, in which there were 242 herds on milk-recording. Consequently, the probability of this herd being selected was $30/242=0.1240$ (12.40%).

Cow selection probability: Within each herd, the probability of a cow being selected was the total number of cows sampled within the herd divided by the total number of cows in the herd on the day the herd list was generated. For example, 26 samples were obtained in herd 2, from the 128 cows on the herd list. A cow in this herd (eg cow # 86) has a selection probability of $26/128=0.2031$ (20.31%).

Overall selection probability: The overall selection probability for cow 86 in herd 2 was the product of the above 2 probabilities: $0.1240*0.2031=0.0252$ (2.52%).

Sampling weights: The sampling weight applied to cow 86 in herd 2 was the inverse of the overall selection probability: $1/0.0252=39.7$. Effectively, the results from this cow were considered to represent almost 40 cows in the population.

Taking the sampling weights into consideration, the overall estimate of the prevalence of *N. caninum* was 0.2021 (20.21%), with an SE of 0.0095 (0.95%). Incorporating weights into the analysis changed the point estimate of the prevalence and also increased the SE.

Animals within groups are usually more alike (with regard to the outcome being measured) than animals chosen randomly from the population. From a statistical perspective, this means that these observations are no longer independent and this lack of independence must be taken into account in the analysis. Failure to do so will almost always result in estimated SEs that are smaller than they should be.

Clustering may occur at multiple levels. For example, udder quarters are clustered within a cow while the cows are clustered within a herd. In Chapters 20-22, we discuss techniques for evaluating the degree of clustering at each of the possible levels. However, when analysing survey data, one often wants to simply deal with the clustering as a nuisance factor in order to obtain correct estimates of the SEs of the parameters being estimated. The simplest and most common approach is to identify the PSU (eg herd) and use this to adjust the estimates for all clustering effects at levels at, or below, this level (eg clustering within cows and within herds).

Computation of the appropriate variance estimates in the presence of clustering and other elements of the survey design is not straightforward and requires specialised software. While the details of the procedure are beyond this text, the most common technique is **variance linearisation** (Dargatz & Hill, 1996; Kreuter & Vallian, 2007). It has the advantage that analytical solutions for SEs for most statistics computed from survey data (eg proportions, means) are available. However, the procedure requires a large number of PSUs to be reliable. Variance linearisation is the approach used in Example 2.4 in which the overall prevalence of *Neospora* has been estimated taking the within-herd clustering into account (herds were the PSUs and cows were sampled within herds). **Note** Survey design can be incorporated not only

into the estimation of descriptive characteristics (eg prevalence in Example 2.4) but also into many of the regression models described in later chapters of the book. Example 20.2 gives an example of the use of these procedures to account for clustering in a regression analysis.

2.10.4 Design effect

The overall effect of the sampling plan on the precision of the estimates obtained can be expressed as the **design effect** (referred to as **deff**). The deff is the ratio of variance obtained from taking the sampling plan (eg stratification and clustering) into account to the variance that would have been obtained if a comparable-sized, simple random sample had been drawn from the population. A deff >1 reflects the fact that the sampling plan is producing less precise (larger variance) estimates than a simple random sample would have. (Of course, a simple random sample often is impossible to obtain.) The deff of the sampling plan computed in the *Neospora* study is also presented in Example 2.4. If an independent estimate of the deff is available, it can be incorporated into methods to account for clustering in the analysis of survey data (see Section 20.5.5)

2.10.5 Finite population correction

In most surveys, sampling is carried out **without replacement**. That is, once a study subject has been sampled, it is not put back into the population and potentially sampled again. If the proportion of the population sampled is relatively high (eg >10%), then this could substantially

Example 2.4 Analysis of multistage survey data
 data = dairy_dis

The dairy disease data were sampled in a **multistage** manner with herds being the **primary sampling unit**. If the multistage nature of the sample was taken into account (in addition to the stratification and sampling weights), the overall prevalence estimate remains at 0.2020 (20.20%) but the SE increases to 0.0192 (1.92%). (Clustering was accounted for using a variance linearisation approach to computing the SE.)

A summary of the estimates of the overall seroprevalence taking various features of the sampling plan into account is shown below.

Type of analysis	Seroprevalence	
	Estimate	SE
Assuming it was a simple random sample	0.1905	0.0080
Taking stratification into account	0.1905	0.0079
Taking stratification and sampling weights into account	0.2021	0.0095
Taking clustering into account	0.1905	0.0191
Taking stratification, sampling weights and clustering into account	0.2021	0.0192

The last row contains the most appropriate estimates for the seroprevalence (and SE) of *Neospora caninum*. The design effect from this analysis was $(0.0191/0.0080)^2=5.7$ which indicates that taking the sampling plan into consideration produces an estimate of the variance of the prevalence which is 5.7 times larger than the estimate would have been if a simple random sample of the same size ($n=2,425$) had been drawn.

increase the precision of the estimate over what would be expected from an ‘infinite-sized’ population. Consequently, the estimated variance of the parameter being estimated can be adjusted downward by a **finite population correction (FPC)** factor of:

$$FPC = \frac{N-n}{N-1} \quad \text{Eq 2.3}$$

where N is the size of the population and n is the size of the sample. (**Note** An *FPC* should not be applied in cases where multistage sampling is carried out, even if the number of PSUs sampled is >10% of the population.) A finite population correction also can be used when estimating a sample size (see Section 2.11.5).

2.11 SAMPLE-SIZE DETERMINATION

The choice of sample size involves both statistical and non-statistical considerations. Non-statistical considerations include the availability of resources such as time, money, sampling frames, and some consideration of the objectives of the study. Interestingly, cost can be factored into sample-size calculations, and the greater the cost per sampled study subject, the smaller the sample size when the budget is fixed.

Statistical considerations include the required precision of the estimate, the variance expected in the outcome of interest, the desired level of confidence that the estimate obtained from sampling is close to the true population value ($1-\alpha$) and, in analytic studies, the power ($1-\beta$) of the study to detect real effects.

2.11.1 Precision of the estimate

Whether you want to determine the proportion of cull cows at slaughter that test positive for Johne’s disease or to estimate the average weight of beef calves at weaning, you must determine how precise an estimate you want. The more precise you wish to be, the larger the sample size you will require. If you want to know how many cull cows are Johne’s positive within $\pm 5\%$, you will have to sample more cows than if you were only interested in obtaining an estimate within $\pm 10\%$. Likewise, if you wanted your estimate of the average weaning weight to be within 2 kg of the real population value, you would need to weigh more calves than if you only needed to be within 5 kg of the true population mean.

2.11.2 Expected variation in the data

The natural variation inherent in the data must be taken into account when calculating sample size. The variance of a simple proportion is $p*q$, where p is the proportion of interest and q is $(1-p)$. Consequently, to estimate the sample size necessary to determine a proportion, then (paradoxical as it might seem) you must have a general idea of the proportion (with the outcome of interest) that you expect to find.

The measure of variation used for the estimation of the required sample size of a continuous variable such as weaning weight is the population variance (σ^2). We often don’t know what the standard deviation (σ) is, but we can estimate it. One way to do this is to estimate the range that would encompass 95% of the values and then assume that range is equal to 4σ . For example, if you think that 95% of calves would have weaning weights between 150 kg and 250 kg, then a

rough estimate of the σ would be $(250-150)/4=25$ kg, and the variance would be 625 kg².

2.11.3 Level of confidence

In descriptive studies, we must decide how sure we want to be that the **confidence interval** (CI) for your estimate will include the true population value. Similarly, in analytic studies, we must decide on the certainty we want that any difference we observe between 2 sampled groups is real and not due to chance. This is referred to as **confidence** and it is most commonly set to 95% (assume a Type I (α) error rate of 5%).

2.11.4 Power

The **power** of a study is its ability to detect an effect (*eg* a difference between 2 groups) when a real difference of a defined magnitude exists. For example, if the real difference in weaning weights between male and female calves is 20 kg, then a study with a power of 80% would detect a difference of this magnitude (and declare it statistically significant) 80% of the time. To increase the power, it is necessary to increase the sample size. The Type II (β) error rate is 1-power.

Precision and power have been presented as 2 separate issues although they arise from the same conceptual basis. Sample sizes can be computed using either approach, although they will produce different estimates. (See Section 2.11.8 for an expansion of this topic.)

2.11.5 Sample-size formulae

The formulae for sample size required to estimate a single parameter (proportion or mean), or to compare 2 proportions or means, are shown below the following definitions:

Z_α The value of Z_α required for confidence = $1-\alpha$ $Z_{0.05}=1.96$
 Z_α is the $(1-\alpha/2)$ percentile of a standard normal distribution
Note This is the value for a 2-tailed test or 2-sided confidence interval

Z_β The value of Z_β required for power = $1-\beta$ for power $1-\beta$, $Z_\beta=-0.84$
 Z_β is the $(1-\beta)$ percentile of a standard normal distribution

L The precision of the estimate (also called the ‘allowable error’ or ‘margin of error’) equal to half the desired length of a confidence interval

p *a priori* estimate of the proportion
 $(p_1, p_2$ —estimates in the 2 groups in an analytic study)

q $1-p$

σ^2 *a priori* estimate of the population variance

μ *a priori* estimate of the population mean
 $(\mu_1, \mu_2$ —if estimates are required for 2 groups)

n sample size

Estimating proportions or means (n =total sample size)

To estimate a sample proportion with a desired precision:

$$n = \frac{Z_{\alpha}^2 pq}{L^2} \quad \text{Eq 2.4}$$

To estimate a sample mean with a desired precision:

$$n = \frac{Z_{\alpha}^2 \sigma^2}{L^2} \quad \text{Eq 2.5}$$

Comparing proportions or means (n =sample size per group)

To compare 2 proportions:

$$n = \frac{[Z_{\alpha} \sqrt{(2pq)} - Z_{\beta} \sqrt{p_1 q_1 + p_2 q_2}]^2}{(p_1 - p_2)^2} \quad \text{Eq 2.6}$$

where $p = (p_1 + p_2)/2$ and $q = 1 - p$

To compare 2 means:

$$n = 2 \left[\frac{(Z_{\alpha} - Z_{\beta})^2 \sigma^2}{(\mu_1 - \mu_2)^2} \right] \quad \text{Eq 2.7}$$

Note The formulae shown above are approximations and most software will compute sample sizes using more exact formulae. Particular caution should be exercised with these formulae if the resulting n is small. Example 2.5 shows the calculation of a sample size for a study comparing 2 proportions.

Sampling from a finite population

If you are sampling from a relatively small population, then the required sample size (n') can be adjusted downward using the following *FPC* formula:

$$n' = \frac{1}{1/n + 1/N} \quad \text{Eq 2.8}$$

where n =the original estimate of the required sample size in an infinite population and N =the size of the population.

It is useful to make this finite population adjustment when computing the sample size for a simple or stratified random sample if the sampling fraction exceeds 10%. It is only applied to descriptive studies, not to analytic studies or controlled trial sample size calculations.

2.11.6 Adjustment of sample size for clustering

In veterinary epidemiological research, we often deal with clustered data (eg cows clustered within herds) with observations within the same cluster being more similar to each other with respect to the outcome than observations drawn randomly from the population. If our study is taking place exclusively at the lower (cow) level, with the factor of interest distributed at the cow level independent of the herd, and the outcome (eg days from calving to conception) is

Example 2.5 Sample size for comparing proportions

data = none

Assume that you want to determine if a vaccine (administered at the time of arrival) reduces the risk of respiratory disease in feedlot steers. For the vaccine to be worth using, you would want it to reduce the risk from the current level of 15% to 10% of animals affected. You want to be 95% confident in your result and the study should have a power of 80% to detect the 5% reduction in risk.

$$p_1=0.15 \quad p_2=0.10 \quad p=0.125$$

$$q_1=0.85 \quad q_2=0.90 \quad q=0.875$$

$$Z_\alpha = Z_{0.05} = 1.96 \quad Z_\beta = Z_{0.80} = -0.84$$

$$n = \frac{[1.96 \sqrt{2 * 0.125 * 0.875} - (-0.84) \sqrt{0.15 * 0.85 + 0.10 * 0.90}]^2}{(0.15 - 0.10)^2}$$

$$= 685$$

Consequently, you would require 1,370 (685*2) animals with 685 being vaccinated and the rest not vaccinated. A sample size derived incorporating a continuity correction (see Fleiss JL *et al* (2003)) for details) is 726 animals per group.

measured at the cow level, this clustering does not present a problem when computing the necessary sample size. Such a situation arises when conducting a controlled trial of a treatment that is randomly assigned to cows within herds (ensuring that treatment allocation is independent of herd). (See Chapter 20 for a more complete discussion of this situation.)

However, if the factor of interest is something that occurs at the herd level (*eg* barn type: freestall vs tiestall), then the number of herds in the study becomes a more critical concern than the number of cows (even though the outcome is measured at the cow level). The total sample size will need to be increased with the magnitude of the increase depending on:

1. the degree to which observations within a herd are similar (measured by a parameter called the intra-cluster (or intra-class) correlation coefficient) (Section 20.3.3) and,
2. the number of cows sampled per herd (having many cows sampled within a herd is of little value if the cows within a herd are very similar). The formula for adjusting the sample size is:

$$n' = n(1 + \rho(m - 1)) \tag{Eq 2.9}$$

where n' is the new sample size, n is the original sample size estimate, ρ is the intra-cluster correlation coefficient and m is the number of cows sampled per herd. See Chapter 20 for further discussion of this issue. In Example 2.6, the sample size estimate from Example 2.5 is adjusted for a group-level study. An alternative approach applicable to studies with a dichotomous outcome is to base the sample size on a beta-binomial model with the prevalence of disease within each cluster having a binomial distribution and the prevalences between clusters following a beta distribution (Fosgate, 2007).

If the factor of interest is measured at the cow level (*eg* parity), but also clusters within herds (*ie* some herds have older cows than other herds), then the required sample size can be expected to lie somewhere between the simple estimate (ignoring clustering) and the much more conservative estimate required for herd-level variables. In such cases, a simulation approach

Example 2.6 Sample size with clustering

data = none

If it is not possible to randomly assign the vaccine or placebo to steers within a pen and then keep track of individuals through their feeding period, then you might want to conduct the study by randomly assigning some pens to be vaccinated and other pens to receive the placebo. Rates of respiratory disease tend to be highly clustered within pens and, from previous work, you know the intra-class correlation (ρ) for respiratory disease in pens in feedlots is about 0.3.

Assuming that there are about 50 steers in each pen, the revised sample size that you will need will be:

$$\begin{aligned} n' &= n(1 + \rho(m - 1)) \\ &= 685(1 + 0.3(50 - 1)) \\ &= 10755 \end{aligned}$$

Consequently, you will need 10,755 steers per group or 10,755/50=215 pens allocated to each group. This very large increase in sample size results from the fact that the intra-cluster correlation for respiratory disease is quite high ($\rho=0.3$) and that we are using a large number of observations (50) in each pen.

(Section 2.11.8) may be the best way to estimate a required sample size or assess power.

2.11.7 Adjustment of sample size in multivariable studies

If you want to consider confounding and interaction (Chapter 13) in your study, you generally need to increase your sample size (Smith & Day, 1984). If the confounder is not a strong confounder (odds ratio (*OR*) with disease and exposure between 0.5 and 2), then about a 15% increase is needed. If it is a stronger confounder, then a greater increase in study size should be used. For continuous-scaled confounders, estimate the correlation of the confounder with the exposure variable ρ_{ce} , and then multiply the unadjusted sample size by the factor $(1 - \rho_{ce}^2)^{-1}$. For k covariates, the corresponding formula is,

$$n' = n \left(\frac{1 + (k - 1)\rho_{ce}^2}{1 - \rho_{ce}^2} \right) \tag{Eq 2.10}$$

where ρ_{ce} is an average correlation between the confounders and the exposure variable of interest. Thus, for 5 covariates with a ρ_{ce} approximately equal to 0.3, the increase in study size is 50%.

A similar approach is to start with a simple approach to estimating sample size for the key predictor (exposure) of interest and then modify this for the multivariable situation using the **variance inflation factor (VIF)** (Hsieh *et al*, 1998).

$$n' = n * VIF \tag{Eq 2.11}$$

where $VIF = 1/(1 - \rho^2_{1,2,3,\dots,k})$.

Note that $\rho^2_{1,2,3,\dots,k}$ is the squared multiple correlation coefficient (between the key predictor and the remaining $k-1$ variables) or the proportion of variance of the key predictor that is explained when it is regressed on the other $k-1$ variables. In general, as k increases, then the multiple

correlation increases, as does the *VIF*. The approach to estimating the *VIF* is the same for both continuous and binary covariates.

2.11.8 General approaches to sample-size estimation

As indicated in Section 2.11.4, computing sample size for analytical studies (*eg* comparing 2 means) can be done either by specifying the desired power of the study to detect a difference of a defined magnitude, or by specifying the desired width of the CI for the difference being estimated (*ie* a precision-based approach). In simple situations, these calculations are relatively straightforward. Two approaches to generalising these calculations for more complex study designs are described below.

Precision-based sample-size computations

The general formula for the width of a confidence interval of a parameter is:

$$par \pm Z * SE(par) \tag{Eq 2.12}$$

where *par* is the parameter being estimated, *Z* is the desired percentile of the normal distribution and *SE(par)* is the SE of the parameter estimate.

Note For simplicity, the standard normal distribution will be used as a large sample approximation for the *t*-distribution throughout these examples.

For linear regression models, the SE of any parameter can take the general form of:

$$SE(par) = \sigma * c \tag{Eq 2.13}$$

where σ is the residual standard deviation from the model and *c* is a value which will depend on the design of the study. For example, for estimating a mean in a single sample:

$$c = \sqrt{1/n} = 1/\sqrt{n} \tag{Eq 2.14}$$

where *n* is the sample size.

For a comparison of means from 2 samples:

$$c = \sqrt{2/n}$$

where *n* is the sample size in each of the 2 groups.

The formulae for the CI can be inverted to solve for *n*. For example, to estimate the difference between 2 means with the CI of the estimate being 2*L* units long (*ie* $\pm L$), then:

$$L = Z_{\alpha} * \sigma * \sqrt{2/n} \tag{Eq 2.15}$$

Based on this, the sample size required is:

$$n = \frac{2Z_{\alpha}^2 \sigma^2}{L^2} \tag{Eq 2.16}$$

Eq 2.15 is the 2-sample analogue of Eq 2.5.

Note Unlike in Eq 2.7, we have not specified a Z_{β} nor have we specified hypothesised ‘true’ values for the 2 means. The sample size estimated is the one required to provide a confidence

interval (for the difference) with a desired width ($2L$), regardless of what the actual difference is.

This approach can be generalised to any sort of sample-size estimation, provided that the structure of c can be determined. This is based on the design of the study. For example, computing the sample size required to evaluate a 2-way interaction between 2 dichotomous variables is equivalent to evaluating mean values in each of 4 possible groups (formed by the possible combinations of the 2 variables). Consequently:

$$c = \sqrt{4/n}$$

and the sample size required in each of the 4 groups will be:

$$n = \frac{4Z_{\alpha}^2 \sigma^2}{L^2}$$

This leads to the useful guideline that a study in which you want to evaluate interactions among dichotomous variables needs to be 4 times as large as is required to estimate main effects.

Power calculation by simulation

An approach to power calculation that is applicable to almost any analytical situation is one that is based on simulation (Feivesen, 2002). In general, you simulate a large number of datasets that are representative of the type that you are going to analyse and then compute the proportion of times that the main factor you are interested in has a P-value less than, or equal to, the level you have set for significance (eg 0.05). This approach can be applied to multivariable regression-type models as well as simpler unconditional analyses.

There are 2 scenarios for generating the simulated datasets. In the first (and simplest) approach, you might want to evaluate the power of a study which you have already conducted. For example, let's assume that you have conducted a controlled trial of pre-milking teat-dipping as a means of reducing the frequency of clinical mastitis cases in dairy cows. You did the study in 600 cows (300 in the treatment group, 300 in a control group), with data from one full lactation for each cow. Your outcome (Y) is the number of mastitis cases in each lactation and you are confident that this followed a Poisson distribution. (See Chapter 18 for details of Poisson regression.) Although you randomly assigned cows to the 2 treatment groups, you still want to control for parity in your analysis so ultimately you fit a Poisson model of the following form:

$$\ln E(Y) = \beta_0 + \beta_1(\text{parity}) + \beta_2(\text{treatment})$$

When you analysed the data, the coefficient for treatment was -0.23 (suggesting that treatment reduced the frequency of mastitis), but it was not significant and you want to determine what power the study had to detect an effect of the magnitude that you found.

The steps involved in determining the power by simulation are:

1. For each observation in the dataset, compute the predicted value based on the coefficients from the model and the particular X values (parity and treatment) for the observation.
2. Generate a random value for the outcome from a Poisson distribution with a mean at the predicted value. (In this case, you don't need to worry about the variance of the distribution because the mean and variance of a Poisson distribution are equal.)
3. Reanalyse the data and note the P-value for the coefficient for the treatment (β_2) effect.
4. Repeat steps 1-3 many times (eg 1,000) and determine the proportion of datasets in

which the P-value for the treatment effect is ≤ 0.05 . This is an estimate of the power of the study to detect a true effect corresponding to $\beta_2 = -0.23$.

Note This post-hoc power calculation has been presented because it is the simplest example of the use of simulation methods for sample-size calculation. In general, post-hoc power calculations are not useful (Hoenig & Heisey, 2001; Smith & Bates, 1992).

The second scenario arises if you want to compute sample sizes prior to conducting a study, the process is similar except that you start by creating a hypothetical dataset based on an expected final model. This means that you will need to specify the distributions of the X variables, the size of the dataset, the hierarchical structure of the data (if it is hierarchical in nature; see Chapters 20-22) and all of the relevant variance estimates. An example of the determination of the power of a future study, but based on some existing data (for covariate effects) is shown in Example 2.7.

Example 2.7 Power calculation by simulation

data = pig_adg

You have carried out a study to evaluate the effects of internal parasites (ascarids) and respiratory diseases on growth rates in swine. Your study was carried out in 341 pigs (114 with worms and 227 without). You carry out a regression analysis to evaluate the effects of the presence of adult worms (observed in the intestinal tract at slaughter) on the pig's average daily gain (adg). In this regression analysis, you also adjust for the effects of the sex of the pig and the farm of origin. The important results from that regression analysis are:

- the coefficient for the presence/absence of worms was -7.7 suggesting that pigs with worms in the intestinal tract gained 7.7 gm/day less than pigs without worms.
- the P-value for the coefficient was 0.25 so you have relatively little confidence that the estimate was really different from 0 .
- the standard error of prediction for adg was 46.9 gm/day (this represents the standard deviation of predicted results—see Chapter 14).

Assume that you would like to know the power of a comparable study (same size, same distribution of covariates) to detect a 15 gm/day reduction in growth rate per pig. The simulation process to answer this question is as follows.

You generate 10,000 datasets with randomly generated adg values. For each pig in each dataset, the adg value is drawn from a normal distribution with the following characteristics:

- it has a mean value that corresponds to the predicted value from the real data that you started with (*ie* based on the pig's worm status, sex and farm of origin) except that the effect of worms is set to -15 gm/day
- it has a standard deviation of 46.9 gm/day

You analyse each of these new datasets and determine the proportion that gave a P-value for the worm status coefficient that was ≤ 0.05 . It turns out that the power would be 0.600 (60.0%).

Consequently, if the true effect of worms is to reduce growth rates by 15 gm/day, a study based on 114 positive pigs and 227 negative pigs will have a 60% chance of finding a significant effect of worms. This estimate is substantially lower than a power estimate of 80% based on a simple comparison of 2 groups (computations not shown).

2.12 SAMPLING TO DETECT DISEASE

Sampling to detect the presence (or confirm the absence) of disease is fundamentally different than sampling to estimate a parameter such as the prevalence of disease. If you want to be absolutely certain that a disease is not present in a population, then the only option is to test the entire population (and even this only works if the test you have is perfect). As this is rarely feasible, we rely on the fact that most diseases, if present in a population, will exist at or above some minimal prevalence. For example, we might think that if a contagious disease was present in a population, it would be very unlikely that less than 1% of the population would be infected. Based on this, you can compute a sample size required to be reasonably confident that you would detect the disease if the prevalence was 1% or higher.

If you are sampling from a finite population (*eg* <1,000 animals), then the formula to determine the required sample size is (Cannon, 2001):

$$n = (1 - (\alpha)^{1/D}) \left(N - \frac{D-1}{2} \right) \quad \text{Eq 2.17}$$

where:

- n =required sample size
- α =1-confidence level (usually=0.05)
- D =estimated minimum number of diseased animals in the group (population size*minimum expected prevalence)
- N =population size

If you are sampling from a large (infinite) population, then the following approximate formula can be used:

$$n = \ln \alpha / \ln q \quad \text{Eq 2.18}$$

where n =the required sample size, α is usually set to 0.05 or 0.01, q =(1–minimum expected prevalence).

If you take the required sample and get no positive results (assuming that you set α to 0.05), then you can say that you are 95% confident that the prevalence of the disease in the population is below the minimal threshold which you specified for the disease in question. Thus, you accept this as sufficient evidence of the absence of the disease. Example 2.8 shows the calculation of the required sample size to determine freedom from *Mycoplasma* in a sow herd.

A much more complete discussion of issues related to sampling to determine freedom from disease has been published by Cameron and Baldock (1998a;1998b). Bayesian procedures for sample size calculations for determination of freedom from disease which take into account the fact that the disease tends to cluster (in herds or in regions) have been developed, but are beyond the scope of this text (Branscum *et al*, 2006).

Example 2.8 Sample size for freedom from disease

Assume that you want to document the absence of *Mycoplasma* from a 200-sow herd and that, based on your experience and the literature, a minimum of 20% of sows would have seroconverted if *Mycoplasma* were present in the herd.

$$\begin{aligned}
 N &= 200 & \alpha &= 0.05 & D &= 40 \\
 n &= (1 - (\alpha)^{1/D}) \left(N - \frac{D-1}{2} \right) \\
 &= (1 - (0.05)^{1/40}) \left(200 - \frac{40-1}{2} \right) \\
 &= (0.072)(180.5) \\
 &= 13.02 \approx 13
 \end{aligned}$$

If you test 13 sows and get all negative test results, you can state that you are 95% confident that the prevalence of *Mycoplasma* in the herd is <20%. As you don't believe that the disease would exist at a prevalence <20%, you are confident that it is not present. **Note** This assumes the test is 100% sensitive and specific. See Chapter 5 for a discussion of test characteristics. (If you use the large population formula (Eq 2.18), you get a sample size estimate of 13.4.)

REFERENCES

- Branscum AJ, Johnson WO, Gardner IA. Sample size calculations for disease freedom and prevalence estimation surveys Stat Med. 2006; 25: 2658-74.
- Cameron AR, Baldock FC. A new probability formula for surveys to substantiate freedom from disease Prev Vet Med. 1998a; 34: 1-17.
- Cameron AR, Baldock FC. Two-stage sampling in surveys to substantiate freedom from disease Prev Vet Med. 1998b; 34: 19-30.
- Cannon RM. Sense and sensitivity—designing surveys based on an imperfect test Prev Vet Med. 2001; 49: 141-63.
- Dargartz D, Hill G. Analysis of survey data Prev Vet Med. 1996; 28: 225-37.
- Feivesen A. Power by simulation The Stata Journal. 2002; 2: 107-24.
- Fleiss JL, Levin B, Paik MC. Statistical methods for rates and proportions. 3rd Ed. New York: John Wiley and Sons; 2003.
- Fosgate GT. A cluster-adjusted sample size algorithm for proportions was developed using a beta-binomial model J Clin Epidemiol. 2007; 60: 250-5.
- Hoening JM, Heisey DM. The abuse of power: the pervasive fallacy of power calculations for data analysis The American Statistician. 2001; 55: 19-24.
- Hsieh FY, Bloch DA, Larsen MD. A simple method of sample size calculation for linear and logistic regression Stat Med. 1998; 17: 1623-34.
- Kreuter F, Vallian R. A survey on survey statistics: what is done and can be done in Stata The Stata Journal. 2007; 7: 1-21.

- Levy P, Lemeshow S. Sampling of Populations. Methods and Applications 4th Ed. New York: Wiley-Interscience; 2008.
- Prattley DJ, Cannon RM, Wilesmith JW, Morris RS, Stevenson MA. A model (BSurvE) for estimating the prevalence of bovine spongiform encephalopathy in a national herd *Prev Vet Med.* 2007a; 80: 330-43.
- Prattley DJ, Morris RS, Cannon RM, Wilesmith JW, Stevenson MA. A model (BSurvE) for evaluating national surveillance programs for bovine spongiform encephalopathy *Prev Vet Med.* 2007b; 81: 225-35.
- Rothman K, Greenland S, Lash T. Modern Epidemiology, 3rd Ed. Philadelphia: Lippincott Williams & Wilkins; 2008.
- Salman M. Animal Disease Surveillance. Ames, IA: Iowa State Press; 2003.
- Smith AH, Bates MN. Confidence limit analyses should replace power calculations in the interpretation of epidemiologic studies *Epidemiology.* 1992; 3: 449-52.
- Smith PG, Day NE. The design of case-control studies: the influence of confounding and interaction effects *Int J Epidemiol.* 1984; 13: 356-65.
- Stärk KDC, Regula G, Hernandez J, Knopf L, Fuchs K, Morris RS, Davies P. Concepts for risk-based surveillance in the field of veterinary medicine and veterinary public health: review of current approaches *BMC Health Serv Res.* 2006; 6: 20.
- Thurmond MC. Conceptual foundations for infectious disease surveillance *J Vet Diagn Invest.* 2003; 15: 501-14.
- VanLeeuwen J, Keefe G, Tremblay R, Power C, Wichtel J. Seroprevalence of infection with *Mycobacterium avium* subspecies paratuberculosis, bovine leukemia virus and bovine viral diarrhea virus in Maritime Canada dairy cattle *Canadian Veterinary Journal.* 2001; 42: 193-8.
- Wells SJ, Ebel ED, Williams MS, Scott AE, Wagner BA, Marshall KL. Use of epidemiologic information in targeted surveillance for population inference *Prev Vet Med.* 2009; 89: 43-50.
- Williams MS, Ebel ED, Wells SJ. Population inferences from targeted sampling with uncertain epidemiologic information *Prev Vet Med.* 2009a; 89: 25-33.
- Williams MS, Ebel ED, Wells SJ. Poisson sampling: a sampling strategy for concurrently establishing freedom from disease and estimating population characteristics *Prev Vet Med.* 2009b; 89: 34-42.