

Comparison of Epidemiologic Study Designs

	Cross-sectional	Ecological	Experimental	Retrospective Cohort	Prospective Cohort	Case-control
Study population	Sample of population; exposure and outcome measured at same point in time	Groups	Voluntary participants at risk for developing the outcome of interest at baseline	Sample of population at risk for developing the outcome of interest at baseline	Sample of population at risk for developing the outcome of interest at baseline	Sample of population; cases and controls from the same source population
Persons of interest	Exposed persons or Prevalent cases	Exposed groups	Persons assigned to a treatment or other exposure	Exposed persons	Exposed persons	Persons with disease (cases)
Comparison group	Non-exposed persons or Persons without disease	Non-exposed groups	Persons assigned to not receive treatment being investigated (control / placebo group)	Non-exposed persons	Non-exposed persons	Persons without disease (controls)
Measures of occurrence	Prevalence Prevalence odds	Group-level prevalence Group-level prevalence odds Group-level risk Group-level rate Group-level odds Average or trend in: risk, rate, prevalence, or odds	Risk Rate Odds Hazard	Risk Rate Odds Hazard	Risk Rate Odds Hazard	Odds of exposure
Measures of association	Prevalence odds ratio Prevalence ratio Prevalence difference	Prevalence ratio Prevalence difference Prevalence odds ratio Risk ratio Risk difference Rate ratio Rate difference Correlation coefficients Regression coefficients	Risk ratio Risk difference Rate ratio Rate difference Odds ratio Odds ratio Hazard ratio Survival curves Efficacy	Risk ratio Risk difference Rate ratio Rate difference Odds ratio Hazard ratio Survival curves	Risk ratio Risk difference Rate ratio Rate difference Odds ratio Hazard ratio Survival curves	Odds ratio Which, depending on sampling, can approximate: • Risk ratio • Rate ratio • Hazard ratio
Temporal relationship	Can be hard to establish	Can be hard to establish	Easy to establish	Sometimes hard to establish	Easy to establish	Sometimes hard to establish
Multiple associations	Can assess several exposures and outcomes	Can assess several exposures and outcomes	Multiple interventions on single outcome or effect of single intervention on more than one outcome	Often one exposure with multiple outcomes, though there are exceptions	Often one exposure with multiple outcomes, though there are exceptions	One outcome with multiple exposures
Time required for study	Relatively short	Relatively short	Usually short, depends on disease	Moderate, depends on obtaining follow-	Long, depends on length of follow-up	Relatively short, unless real-time case acquisition



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	progression	up data	



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Cost of study	Generally inexpensive	Generally inexpensive	Very expensive	Generally less expensive than prospective cohort study	Expensive	Relatively inexpensive
Population size needed	Can be large or small	Usually large since entire populations are studied	Relatively small	Relatively large	Relatively large	Much smaller than other similarly- powered studies (i.e. cohort)
Potential biases	 Survival bias Reverse causation Confounding Information bias 	Ecological fallacy Reverse causation Confounding	Assessment of outcome Information bias Loss to follow-up	Assessment of outcome Selection bias Confounding Information bias	Assessment of outcome Selection bias Confounding Information bias Loss to follow-up	 Assessment of exposure Selection bias Confounding Information bias
Best when	Onset of disease is prolonged Rapid-response settings Measuring descriptive information	Individual level information is unavailable Studying a community-level exposure	Evaluating treatment options (drug, counseling) Vaccine trials	Exposure is rare	Exposure is rare	Outcome is rare
Advantages	Inexpensive Fast Can often be done using publically-available data Usually good generalizability	Inexpensive Fast Can often be done using publically-available data Can draw conclusions about group-level characteristics	Provides clearest evidence of causality	Can directly estimate risks and rates of disease Usually good generalizability	Can directly estimate risks and rates of disease Fewer problems establishing temporality Usually good generalizability	Relatively inexpensive Fast Can estimate risks and rates of disease (under specific sampling parameters) Needs fewer participants than cohort
Challenges	Sometimes temporality cannot be established Cannot measure incidence of disease Prevalence varies with duration of disease	• Inappropriate conclusions may be drawn regarding relationships at the individual level based on ecological data (ecological fallacy)	Ethical problems (equipoise): very few exposures can be assigned Low generalizability Very expensive	Selection of non-exposed comparison group often difficult. Changes over time in disease diagnosis / treatment criteria and research methods Loss to follow-up	Selection of non-exposed comparison group often difficult. Changes over time in disease diagnosis / treatment criteria and research methods Loss to follow-up	Selection of appropriate controls often difficult Incomplete information on exposure