#### Hormonal correlates of pathogen disgust: Testing the Compensatory Prophylaxis Hypothesis

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Supplemental information (e.g., data files and analysis scripts) available at https://osf.io/93n2d/

BCJ, LMD, ACH, and CIF designed the study; ACH, CIF, HW, and MK collected data; LMD, BCJ, HW, MK, and AJL analyzed the data; BCJ, LMD, and JT drafted the manuscript; and all authors revised the manuscript.

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#### **Abstract**

Raised progesterone during the menstrual cycle is associated with suppressed physiological immune responses, reducing the probability that the immune system will compromise the blastocyst's development. The Compensatory Prophylaxis Hypothesis proposes that this progesterone-linked immunosuppression triggers increased disgust responses to pathogen cues, compensating for the reduction in physiological immune responses by minimizing contact with pathogens. Although a popular and influential hypothesis, there is no direct, within-woman evidence for correlated changes in progesterone and pathogen disgust. To address this issue, we used a longitudinal design to test for correlated changes in salivary progesterone and pathogen disgust (measured using the pathogen disgust subscale of the Three Domain Disgust Scale) in a large sample of women (N=375). Our analyses showed no evidence that pathogen disgust tracked changes in progesterone, estradiol, testosterone, or cortisol. Thus, our results provide no support for the Compensatory Prophylaxis Hypothesis of variation in pathogen disgust.

#### Introduction

Suppressed physiological immune responses during the luteal phase of the menstrual cycle (when raised progesterone prepares the body for pregnancy) reduce the probability that the immune system will compromise the development of the blastocyst (reviewed in Fleischman & Fessler, 2011). The Compensatory Prophylaxis Hypothesis proposes that this progesterone-linked immunosuppression is associated with increased disgust toward pathogen cues, compensating for the reduction in physiological immune responses by reducing the probability of contact with pathogens (Fessler et al., 2005; Fleischman & Fessler, 2011; Żelaźniewicz et al., 2016).

Fleischman and Fessler (2011) and Żelaźniewicz et al. (2016) have presented the strongest evidence for (and most direct tests of) the Compensatory Prophylaxis Hypothesis to date. In both studies, women with higher progesterone levels reported stronger disgust toward pathogen cues. Another study reporting stronger disgust responses to pathogen cues during the first (i.e., highest-progesterone) trimester of pregnancy has also been interpreted as supporting the Compensatory Prophylaxis Hypothesis (Fessler et al., 2005). However, these three studies employed between-subject designs, which have been shown to be weak (e.g., underpowered) tests for hypotheses concerning hormone-linked changes in behavior (Gangestad et al., 2016) and allow only indirect tests of the hypothesis that within-woman changes in pathogen disgust and progesterone are correlated. The two studies that measured progesterone levels (Fleischman & Fessler, 2011; Żelaźniewicz et al., 2016) employed relatively small sample sizes (Ns of 79 and 30, respectively), meaning that they were likely underpowered (see Gangestad et al., 2016).

Other studies often cited as evidence for the Compensatory Prophylaxis
Hypothesis are also problematic. For example, greater hostility to out-group
individuals during the first trimester of pregnancy has been interpreted as
evidence for the Compensatory Prophylaxis Hypothesis because out-group

individuals putatively pose a greater pathogen threat than do in-group individuals (Navarette et al., 2007). However, the hypothesis that hostility to out-group individuals necessarily reflects pathogen avoidance has recently been extensively critiqued (Aarøe et al., 2016; de Barra & Curtis, 2012; Tybur et al., 2016). Reports that women show stronger aversions to individuals displaying facial cues of illness (e.g., pallor) at high-progesterone points in the menstrual cycle (Jones et al., 2005) have also been interpreted as evidence for the Compensatory Prophylaxis Hypothesis. These results were not replicated in a higher-powered study that directly tested for correlated changes in measured progesterone and aversions to facial cues of illness (Jones et al., 2017a).

In summary, considering its influence in both the emotion and endocrinology literatures, the Compensatory Prophylaxis Hypothesis is supported by a surprisingly weak body of evidence. In the current study, we rigorously tested the Compensatory Prophylaxis Hypothesis by using a longitudinal design to investigate whether within-woman changes in steroid hormone levels (including progesterone) and changes in components of disgust sensitivity (including pathogen disgust) were correlated in a large sample of women (N=375). We assessed disgust sensitivity using Tybur et al.'s (2009) Three Domain Disgust Scale, which assesses disgust sensitivity in three different domains: pathogen disgust, sexual disgust, and moral disgust. The Compensatory Prophylaxis Hypothesis predicts that pathogen disgust will track changes in women's progesterone levels (Fessler et al., 2005; Fleischman & Fessler, 2011; Żelaźniewicz et al., 2016). Indeed, the studies testing the Compensatory Prophylaxis Hypothesis have each used either the Three Domain Disgust Scale, similar self-report measures of disgust or contamination sensitivity, or disgust ratings of images portraying cues to pathogens (Fessler et al., 2005; Fleischman & Fessler, 2011; Želaźniewicz et al., 2016).

#### Methods

#### **Participants**

We tested 375 heterosexual women (mean age=21.6 years, SD=3.3 years), all of whom reported that they were not using any form of hormonal contraceptive (i.e., reported having natural menstrual cycles). Participants completed up to three blocks of test sessions. Each of the three blocks of test sessions consisted of five weekly test sessions. Women participated as part of a large study of possible effects of steroid hormones on women's behavior (Jones et al., 2017a). The data analyzed here are all responses from blocks of test sessions where women were not using any form of hormonal contraceptive and test sessions where they completed at least one subscale of Tybur et al.'s (2009) Three Domain Disgust Scale. Following these restrictions, 337 women had completed five or more test sessions and 98 of these women completed ten test sessions. Thirty-eight women completed fewer than five test sessions.

#### Three Domain Disgust Scale

Participants completed Tybur et al.'s (2009) Three Domain Disgust Scale in each test session. This 21-item measure asks participants to rate each of 21 actions from not at all disgusting (0) to extremely disgusting (6). The actions were divided into three domains: pathogen disgust (e.g., stepping on dog poop), sexual disgust (e.g., hearing two strangers having sex), and moral disgust (e.g., deceiving a friend). Question order was fully randomized. The full instructions for the questionnaire were: "The following items describe a variety of concepts. Please rate how disgusting you find the concepts described in the items, where 0 means that you do not find the concept disgusting at all, and 6 means that you find the concept extremely disgusting."

The mean score on the pathogen disgust subscale was 25.99 (SD=7.98), the mean score on the sexual disgust subscale was 19.95 (SD=8.71), and the mean score on the moral disgust subscale was 27.82 (SD=8.32). Intra-class correlation coefficients were high for each subscale (pathogen: .82; 95% CIs: .80, .85; sexual: .88; 95% CIs: .86, .89; moral=.79; 95% CIs: .76, .82). Consistent with past research (Olatunji et al., 2012), these intra-class correlation coefficients indicate that scores on the Three Domain Disgust

Scale are stable over time (or, at least, over the time span sampled in the current study). Nevertheless, small fluctuations in disgust sensitivity could covary with variation in hormones.

#### Saliva samples

Participants provided a saliva sample via passive drool (Papacosta & Nassis, 2011) in each test session. Participants were instructed to avoid consuming alcohol and coffee in the 12 hours prior to participation and avoid eating, smoking, drinking, chewing gum, or brushing their teeth in the 60 minutes prior to participation. Each woman's test sessions took place at approximately the same time of day to minimize effects of diurnal changes in hormone levels (Veldhuis et al., 1988; Bao et al., 2003).

Saliva samples were frozen immediately and stored at -32°C until being shipped, on dry ice, to the Salimetrics Lab (Suffolk, UK) for analysis, where they were assayed using the Salivary 17β-Estradiol Enzyme Immunoassay Kit 1-3702 (M=3.30 pg/mL, SD=1.27 pg/mL, sensitivity=0.1 pg/mL, intra-assay CV=7.13%, inter-assay CV=7.45%), Salivary Progesterone Enzyme Immunoassay Kit 1-1502 (M=148.59 pg/mL, SD=96.20 pg/mL, sensitivity=5 pg/mL, intra-assay CV=6.20%, inter-assay CV=7.55%), Salivary Testosterone Enzyme Immunoassay Kit 1-2402 (M=87.57 pg/mL, SD=27.19 pg/mL, sensitivity<1.0 pg/mL, intra-assay CV=4.60%, inter-assay CV=9.83%), and Salivary Cortisol Enzyme Immunoassay Kit 1-3002 (M=0.23 µg/dL, SD=0.16 μg/dL, sensitivity<0.003 μg/dL, intra-assay CV=3.50%, inter-assay CV=5.08%). Although Fleischman and Fessler (2011) and Zelaźniewicz et al. (2016) only reported progesterone in their studies, we measured and report analyses of estradiol, cortisol, and testosterone, in addition to progesterone, to test whether links between pathogen disgust and hormonal status are driven specifically by progesterone, as the Compensatory Prophylaxis Hypothesis proposes. Mean minimum and maximum hormone levels are given in our Supplemental Information.

Hormone levels more than three standard deviations from the sample mean for that hormone or where Salimetrics indicated levels were outside the sensitivity range of their relevant ELISA were excluded from the dataset (~1% of hormone measures were excluded for these reasons). The descriptive statistics given above do not include these excluded values. Values for each hormone were centered on their subject-specific means to isolate effects of within-woman changes in hormones. They were then scaled (i.e., divided by a constant) so the majority of the distribution for each hormone varied from -.5 to .5 to facilitate calculations in the linear mixed models. Since hormone levels were centered on their subject-specific means, women with only one value for a hormone could not be included in the analyses.

#### **Analyses**

Linear mixed models were used to test for possible effects of hormonal status on disgust sensitivity. Analyses were conducted using R version 3.3.2 (R Core Team, 2016), with Ime4 version 1.1-13 (Bates et al., 2014) and ImerTest version 2.0-33 (Kuznetsova et al., 2013). The dependent variable was Three Domain Disgust subscale score (separate models were run for each of the three disgust subscales). Predictors were the scaled and centered hormone levels. Random slopes were specified maximally following Barr et al. (2013) and Barr (2013). That is, random slopes were included for all within-woman predictors and, for analyses including interactions between different withinwoman predictors (see Barr et al., 2013), the random slope for the interaction was included instead of the random slopes for each of the individual predictors (see Barr, 2013). Simulations have shown that models that do not include these random slopes have unacceptably high false positive rates (Barr et al., 2013; Barr, 2013). Full model specifications and full results for each analysis are given in our Supplemental Information. Data files and analysis scripts are publicly available at https://osf.io/93n2d/.

#### Results

Scores for each Three Domain Disgust subscale were analyzed separately. For each subscale score we ran three models. Our first model (Model 1) included estradiol, progesterone, and their interaction as predictors. Our

second model (Model 2) included estradiol, progesterone, and estradiol-toprogesterone ratio as predictors. Our third model (Model 3) included testosterone and cortisol as predictors, but did not consider possible effects of estradiol or progesterone. This analysis strategy is identical to that used in Jones et al. (2017a) and Jones et al. (2017b) to investigate the hormonal correlates of women's face preferences and sexual desire, respectively. We adopted this analysis strategy because Model 1 closely follows the model used by Puts et al. (2013) to assess within-woman, fertility-linked effects. We include Model 2 because some research has used estradiol-to-progesterone ratio, rather than the interaction between estradiol and progesterone, to test for the combined effects of estradiol and progesterone (e.g., Eisenbruch et al., 2015). Model 3 is included because, although not typically considered in those models, testosterone and cortisol have been found to predict within-woman changes in behavior in other work (e.g., Ditzen et al., 2017; Welling et al., 2007). Thus, our models were chosen a priori to represent the variety of methods used in the literature on effects of hormone levels on women's behavior.

**Pathogen disgust.** Model 1 revealed no significant effects of progesterone (estimate=0.32, t=0.74, p=.46), estradiol (estimate=0.30, t=0.61, p=.55), or the interaction between estradiol and progesterone (estimate=0.22, t=0.09, p=.93). Model 2 also revealed no significant effects of progesterone (estimate=0.02, t=0.05, p=.96), estradiol (estimate=0.45, t=0.89, p=.38), or estradiol-to-progesterone ratio (estimate=-0.35, t=-1.04, p=.31). Model 3 showed no significant effects of either testosterone (estimate=0.35, t=0.71, p=.48) or cortisol (estimate=0.02, t=0.06, p=.95).

**Sexual disgust.** Model 1 revealed no significant effects of progesterone (estimate=0.26, t=0.70, p=.48), estradiol (estimate=-0.16, t=-0.36, p=.72), or the interaction between estradiol and progesterone (estimate=1.01, t=0.47, p=.64). Model 2 also revealed no significant effects of progesterone (estimate=0.39, t=0.92, p=.36), estradiol (estimate=-0.19, t=-0.43, p=.67), or estradiol-to-progesterone ratio (estimate=0.11, t=0.49, p=.63). Model 3

showed no significant effects of either testosterone (estimate=0.07, t=0.15, p=.88) or cortisol (estimate=0.24, t=0.74, p=.46).

*Moral disgust.* Model 1 revealed no significant effects of progesterone (estimate=0.34, t=0.71, p=0.48), estradiol (estimate=0.32, t=0.57, p=.57), or the interaction between estradiol and progesterone (estimate=2.39, t=0.86, p=.39). Model 2 also revealed no significant effects of progesterone (estimate=0.47, t=0.86, p=.39), estradiol (estimate=0.30, t=0.53, p=.60), or estradiol-to-progesterone ratio (estimate=0.07, t=0.24, p=.81). Model 3 showed no significant effects of either testosterone (estimate=0.98, t=1.73, p=.084) or cortisol (estimate=-0.92, t=-1.88, p=.064).

#### Additional analyses

We conducted some additional exploratory analyses at the request of an anonymous reviewer. First, we repeated each of the analyses described above controlling for test session order. No significant hormonal effects were evident in these analyses. Second, we tested for a zero-order effect of progesterone on pathogen disgust (i.e., ran Model 1 with progesterone as the only predictor). This test showed no significant effect of progesterone. Third, we tested for a between-women progesterone-pathogen disgust correlation using data from each participant's first test session only. This analysis also showed no significant association between progesterone and pathogen disgust. These analyses are reported in full in our Supplemental Information.

#### **Discussion**

The current study presents the strongest test to date of the Compensatory Prophylaxis Hypothesis by examining correlations between changes in salivary progesterone and pathogen disgust. We found no evidence that pathogen disgust tracked changes in women's salivary progesterone. By contrast with previous research (Fleischman and Fessler, 2011; Żelaźniewicz et al., 2016), our results show no support for the hypothesis that raised progesterone levels are associated with increased disgust responses to pathogen cues (Fessler et al., 2005; Fleischman & Fessler, 2011). We also

found no evidence that pathogen disgust tracked changes in estradiol, testosterone, or cortisol.

Fessler and Naverrete (2003) reported that sexual disgust increased during the high-fertility phase of the menstrual cycle. They hypothesized that this hormone-linked change in sexual disgust functioned to reduce the likelihood of sexual behaviors that could harm a woman's reproductive fitness. By contrast with Fessler and Naverrete (2003), we found no evidence that sexual disgust tracked changes in women's hormonal status, including changes that are highly correlated with fertility (e.g., changes in estradiol-to-progesterone ratio, Gangestad et al., 2016). Recent research has raised questions about the robustness of some hypothesized links between aspects of women's hormonal status and mating psychology (see, e.g., Gangestad et al., 2016 for a discussion of some of these questions). Our null results for sexual disgust raise similar questions about the robustness of hypothesized links between women's hormonal status and an aspect of mating psychology (sexual disgust) that had not yet been reassessed in the context of this discussion.

We believe that the current study provides the best test to date of the Compensatory Prophylaxis Hypothesis, for multiple reasons. First, we measured changes in both progesterone and disgust sensitivity within women over multiple observations. Second, our sample size was approximately four times larger than that used in earlier compensatory prophylaxis work (Fleischman & Fessler, 2011). Furthermore, although our work relied upon self-report, earlier work reporting support for the Compensatory Prophylaxis Hypothesis also used self-report (e.g., Fleischman & Fessler, 2011). That said, studies using psychophysiological measures of disgust sensitivity (see, e.g., De Smet et al., 2014) could yet reveal hormone-linked changes in disgust sensitivity that are not evident in analyses of self-report measures.

Whereas we administered the Three Domain Disgust Scale at multiple time point, some of the items administered by Fleischman and Fessler (2011) asked participants about pathogen avoidance specifically within the past 24

hours. Such item phrasing might be more sensitive to day-to-day fluctuations compared to the Three Domain Disgust Scale. That said, Fleischman and Fessler (2011) also asked participants to report disgust toward visual cues to pathogens, with a response format similar to that used in the current study. They reported the same support for the Compensatory Prophylaxis Hypothesis using this response format that did not mention behavior over the past 24 hours.

In conclusion, our results provide no support for the Compensatory
Prophylaxis Hypothesis of pathogen disgust. We also found no evidence that
sexual disgust tracks changes in women's hormonal status. These results
underline the importance of employing longitudinal designs, hormone
measurements, and large samples to investigate hypothesized links between
hormonal status and emotional responses.

#### **Open Practices**

Data files and analysis scripts are publicly available via Open Science Framework at <a href="https://osf.io/93n2d/">https://osf.io/93n2d/</a>.

#### References

- Aarøe, L., Osmundsen, M., & Petersen, M. B. (2016). Distrust as a disease avoidance strategy: Individual differences in disgust sensitivity regulate generalized social trust. *Frontiers in Psychology*, 7, 1038.
- Bao, A. M., Liu, R. Y., Van Someren, E.J, Hofman, M. A., Cao, Y. X., & Zhou, J. N. (2003). Diurnal rhythm of free estradiol during the menstrual cycle. *European Journal of Endocrinology*, 148, 227 232.
- Barr, D. J. (2013) Random effects structure for testing interactions in linear mixed-effects models. *Frontiers in Psychology*, 4, 328.
- Barr, D. J., Levy, R., Scheepers, C., & Tily, H. J. (2013) Random effects structure for confirmatory hypothesis testing: Keep it maximal. *Journal of Memory & Language*, 68, 255–278.
- Bates, D., Maechler, M., Bolker, B., & Walker, S. (2014). Ime4: Linear mixed-effects models using Eigen and S4. R package version, 1.1-13.

- Curtis, V., Aunger, R., & Rabie, T. (2004). Evidence that disgust evolved to protect from risk of disease. *Proceedings of the Royal Society of London B*, 271, S131-S133.
- de Barra, M., & Curtis, V. (2012). Are the pathogens of out-groups really more dangerous?. *Behavioral & Brain Sciences*, 35, 85-86.
- De Smet, D., Van Speybroeck, L., & Verplaetse, J. (2014). The Westermarck effect revisited: A psychophysiological study of sibling incest aversion in young female adults. *Evolution & Human Behavior*, *35*, 34–42.
- Ditzen, B., Palm-Fischbacher, S., Gossweiler, L., Stucky, L., & Ehlert, U. (2017). Effects of stress on women's preference for male facial masculinity and their endocrine correlates.

  Psychoneuroendocrinology, in press.
- Eisenbruch, A. B., Simmons, Z. L., & Roney, J. R. (2015). Lady in red. *Psychological Science*, *26*, 1332 – 1338.
- Fessler, D.M.T. & Navarrete, C.D. (2003) Domain-specific variation in disgust sensitivity across the menstrual cycle. *Evolution & Human Behavior*, 24, 406–417.
- Fessler, D. M., Eng, S. J., & Navarrete, C. D. (2005). Elevated disgust sensitivity in the first trimester of pregnancy: Evidence supporting the compensatory prophylaxis hypothesis. *Evolution & Human Behavior*, 26, 344-351.
- Fleischman, D. S., & Fessler, D. M. (2011). Progesterone's effects on the psychology of disease avoidance: Support for the Compensatory Behavioral Prophylaxis Hypothesis. *Hormones & Behavior*, 59, 271-275.
- Gangestad, S. W., Haselton, M. G., Welling, L. L., Gildersleeve, K., Pillsworth, E. G., Burriss, R. P., ... & Puts, D. A. (2016). How valid are assessments of conception probability in ovulatory cycle research? Evaluations, recommendations, and theoretical implications. *Evolution & Human Behavior*, 37, 85-96.
- Jones, B. C., Hahn, A. C., Fisher, C. I., Wang, H., Kandrik, M., Han, C., ... DeBruine, L. M. (2017a). Women's preferences for facial masculinity

- are not related to their hormonal status. *bioRxiv*. doi.org/10.1101/136549.
- Jones, B. C., Hahn, A. C., Fisher, C. I., Wang, H., Kandrik, M., & DeBruine, L. M. (2017b). General sexual desire, but not desire for uncommitted sexual relationships, tracks changes in women's hormonal status. bioRxiv. doi.org/10.1101/155788.
- Jones, B. C., Perrett, D. I., Little, A. C., Boothroyd, L. G., Cornwell, R. E., Feinberg, D. R., ... Moore, F. R. (2005). Menstrual cycle, pregnancy and oral contraceptive use alter attraction to apparent health in faces. *Proceedings of the Royal Society of London B*, 272, 347–354.
- Kuznetsova, A., Brockhoff, P. B., & Christensen, R. H. B. (2013). ImerTest: Tests for random and fixed effects for linear mixed effect models (Imer objects of Ime4 package). R package version 2.0-33.
- Navarrete, C. D., Fessler, D. M., & Eng, S. J. (2007). Elevated ethnocentrism in the first trimester of pregnancy. *Evolution & Human Behavior*, 28, 60-65.
- Olatunji, B. O., Adams, T., Ciesielski, B., David, B., Sarawgi, S., & Broman-Fulks, J. (2012). The Three Domains of Disgust Scale: Factor structure, psychometric properties, and conceptual limitations.

  Assessment. 19, 205-225.
- Papacosta, E., & Nassis, G. P. (2011). Saliva as a tool for monitoring steroid, peptide and immune markers in sport and exercise science. *Journal of Science & Medicine in Sport*, 14, 424 434.
- Puts, D. A., et al., (2013). Women's attractiveness changes with estradiol and progesterone across the ovulatory cycle. *Hormones & Behavior, 63*. 13 19.
- R Core Team (2016). R: A language and environment for statistical computing. R Foundation for Statistical Computing, Vienna, Austria.
- Tybur, J. M., Lieberman, D., & Griskevicius, V. (2009). Microbes, mating, and morality: Individual differences in three functional domains of disgust. *Journal of Personality & Social Psychology*, 97, 103-122.
- Tybur, J. M., Inbar, Y., Aarøe, L., Barclay, P., Barlow, F. K., de Barra, M.,... Žeželj, I. (2016). Parasite stress and pathogen avoidance relate to

- distinct dimensions of political ideology across 30 nations. *Proceedings* of the National Academy of Sciences, 113, 12408-12413.
- Veldhuis, J. D., Christiansen, E., Evans, W. S., Kolp, L. A., Rogol, A. D., & Johnson, M. L. (1988). Physiological profiles of episodic progesterone release during the midluteal phase of the human menstrual cycle: analysis of circadian and ultradian rhythms, discrete pulse properties, and correlations with simultaneous luteinizing hormone release. *The Journal of Clinical Endocrinology & Metabolism*, 66, 414-421.
- Welling, L. L. M., et al. (2007). Raised salivary testosterone in women is associated with increased attraction to masculine faces. *Hormones & Behavior*, *52*, 156 161.
- Żelaźniewicz, A., Borkowska, B., Nowak, J., & Pawłowski, B. (2016). The progesterone level, leukocyte count and disgust sensitivity across the menstrual cycle. *Physiology & Behavior*, 161, 60-65.

Code ▼

# Hormonal correlates of pathogen disgust: testing the Compensatory Prophylaxis Hypothesis

Jones et al.

```
# Load packages
library(tidyverse)
library(lubridate)
library(lme4)
library(lmerTest)
library(knitr)
library(Hmisc)
library(car)
options(scipen=999)
sessionInfo()
```

```
R version 3.4.2 (2017-09-28)
Platform: x86 64-apple-darwin15.6.0 (64-bit)
Running under: macOS Sierra 10.12.6
Matrix products: default
BLAS: /System/Library/Frameworks/Accelerate.framework/Versions/A/Frameworks/vecLib.
framework/Versions/A/libBLAS.dylib
LAPACK: /Library/Frameworks/R.framework/Versions/3.4/Resources/lib/libRlapack.dylib
locale:
[1] en GB.UTF-8/en GB.UTF-8/en GB.UTF-8/en GB.UTF-8
attached base packages:
             graphics grDevices utils
                                           datasets methods
[1] stats
                                                               hase
other attached packages:
 [1] bindrcpp_0.2
                    car_2.1-6
                                    Hmisc 4.0-3
                                                    Formula 1.2-2
                                                                    survival 2.41-
[6] lattice 0.20-35 knitr 1.17
                                    lmerTest 2.0-33 lme4 1.1-14
                                                                    Matrix 1.2-12
[11] lubridate_1.7.1 forcats_0.2.0
                                    stringr_1.2.0
                                                    dplyr_0.7.4
                                                                    purrr_0.2.4
[16] readr 1.1.1
                   tidyr 0.7.2
                                    tibble 1.3.4
                                                   ggplot2 2.2.1 tidyverse 1.2.
loaded via a namespace (and not attached):
[1] httr 1.3.1
                        jsonlite 1.5
                                            splines 3.4.2
                                                                modelr 0.1.1
 [5] assertthat 0.2.0
                        highr 0.6
                                            latticeExtra 0.6-28 cellranger 1.1.0
```

[9] yaml_2.1.14	backports_1.1.1	quantreg_5.34	glue_1.2.0
[13] digest_0.6.12	RColorBrewer_1.1-2	checkmate_1.8.5	rvest_0.3.2
[17] minqa_1.2.4	colorspace_1.3-2	htmltools_0.3.6	plyr_1.8.4
[21] psych_1.7.8	pkgconfig_2.0.1	broom_0.4.3	SparseM_1.77
[25] haven_1.1.0	scales_0.5.0	MatrixModels_0.4-1	htmlTable_1.9
[29] mgcv_1.8-22	nnet_7.3-12	lazyeval_0.2.1	pbkrtest_0.4-7
[33] cli_1.0.0	mnormt_1.5-5	magrittr_1.5	crayon_1.3.4
[37] readxl_1.0.0	evaluate_0.10.1	nlme_3.1-131	MASS_7.3-47
[41] xml2_1.1.1	foreign_0.8-69	tools_3.4.2	data.table_1.10.4-
[45] hms_0.4.0	munsell_0.4.3	cluster_2.0.6	compiler_3.4.2
[49] rlang_0.1.4	grid_3.4.2	nloptr_1.0.4	rstudioapi_0.7
[53] htmlwidgets_0.9	labeling_0.3	base64enc_0.1-3	rmarkdown_1.8
[57] gtable_0.2.0	reshape2_1.4.2	R6_2.2.2	gridExtra_2.3
[61] bindr_0.1	rprojroot_1.2	stringi_1.1.6	parallel_3.4.2
[65] Rcpp_0.12.13	rpart_4.1-11	acepack_1.4.1	tidyselect_0.2.3

```
# calculate standard errors
se <- function(x, na.rm = FALSE) {</pre>
  if (na.rm) {
    the.SE <- sqrt(var(x,na.rm=TRUE)/length(na.omit(x)))</pre>
  } else {
    the.SE <- sqrt(var(x,na.rm=FALSE)/length(x))</pre>
  }
  return(the.SE)
}
# short summaries for lmerTest
mySummary<-function(lmer summary) {</pre>
  coefTable <- lmer_summary$coefficients %>%
    round(3) %>%
    as.data.frame() %>%
    rownames_to_column()
  if (ncol(coefTable)>5) {
    coefTable <- coefTable %>%
      mutate(
        sig = ifelse(.[6]<.001, "***",
              ifelse(.[6]<.01,
               ifelse(.[6]<.05,
               ifelse(.[6]<.10,
                                 "+", "")))))
  }
  return(list(lmer summary$ngrps, kable(coefTable)))
}
```

#### **Process Data**

#### Load full dataset

Data entered from all white, heterosexual women not using hormonal contraceptives.

Each row is all data from a single session (i.e. oc\_id:date)

- "oc\_id" = ID of the subject
- "block" = testing block (1, 2 or 3)
- "age" = age (in years) of subject on day of testing
- "ethnicity" = ethnic group of subject (all white)
- "sexpref" = sexual preference of subject (all heterosexual)
- "date" = date of testing session
- "pill" = whether subject was using hormonal contraceptives (all 0)
- "block\_N" = how many testing sessions completed in that block
- "prog" = salivary progesterone for that session
- "estr" = salivary estradiol for that session
- "test" = salivary testosterone for that session
- "cort" = salivary cortisol for that session

- "manip" = TDDS subscale: pathogen\_disgust, sexual\_disgust, moral\_disgust
- "rating" = score on the TDDS subscale

```
data_all <- read_csv("OCMATE_disgust_anon.csv")
```

```
Missing column names filled in: 'X1' [1]Parsed with column specification:
cols(
  X1 = col integer(),
  oc_id = col_character(),
  block = col_integer(),
  age = col double(),
  ethnicity = col_character(),
  sexpref = col_character(),
  date = col_date(format = ""),
  pill = col integer(),
  block_N = col_integer(),
  prog = col_double(),
  estr = col_double(),
  test = col_double(),
  cort = col double(),
 manip = col character(),
  rating = col_integer()
```

```
======
9 %
|=========
|-----
28%
38%
48%
|-----
______
67%
______
77%
______
97%
100%
```

## **Descriptive Stats**

### Age

Hide

```
# mean age at start of testing
data_all %>%
  group_by(oc_id) %>%
  summarise(
    min_age = min(age)
) %>%
  ungroup() %>%
  group_by() %>%
  summarise(
    n = n(),
    mean_age = mean(min_age, na.rm = TRUE),
    sd_age = sd(min_age, na.rm = TRUE)
) %>% t()
```

```
[,1]
n 375.00000
mean_age 21.56176
sd_age 3.30910
```

#### The number of sessions completed per woman

```
data_all %>%
  group_by(oc_id) %>%
  summarise(
    sessions = n_distinct(date)
) %>%
  group_by(sessions) %>%
  summarise(
    n = n()
) %>%
  spread(sessions, n) %>%
  t()
```

```
15
1
2
       9
3
      5
4
       9
5
    233
6
7
8
      2
9
      2
10
    98
```

#### **Block Intervals**

Hide

```
# get interval between end of a block and start of next block
data_all %>%
  group_by(oc_id, block) %>%
  summarise(
   min_date = min(date),
    max date = max(date)
  ) %>%
  ungroup() %>%
  gather(key, value, c(min_date, max_date)) %>%
  mutate( key = paste0(key, block)) %>%
  select(-block) %>%
  spread(key, value) %>%
  mutate(
    int1to2 = interval( ymd(max_date1), ymd(min_date2)) / ddays(1)
  ) %>%
  group_by() %>%
  summarise(
    int1to2 mean = mean(int1to2, na.rm = TRUE),
    int1to2_sd = sd(int1to2, na.rm = TRUE),
    int1to2_se = se(int1to2, na.rm = TRUE)
  ) %>% gather("stat", "value", 1:length(.))
```

stat <chr></chr>	value <dbl></dbl>
int1to2_mean	223.46154
int1to2_sd	179.30881
int1to2_se	17.58268
3 rows	

Hide

NA

## **Exclusions**

## Exclude observations with missing estr, prog and test

```
## Exclude observations with EPT missing hormone values
sub_hormones_no_EPT <- data_all %>%
  filter(
   !is.na(prog) |
   !is.na(estr) |
   !is.na(test)
)
```

## Exclude subjects with only a single session in a block

This is necessary because you can't calculate subject-centered means with only one data point.

Hide

```
check_single_session <- sub_hormones_no_EPT %>%
  group_by(oc_id, block) %>%
  summarise(sessions = n_distinct(date)) %>%
  ungroup() %>%
  filter(sessions == 1)
sub_hormones_multisession <- sub_hormones_no_EPT %>%
  anti_join(check_single_session, by=c('oc_id', 'block'))
```

#### Remove outlier hormone values

Remove below bottom sensitivity thresholds for assays (progesterone < 5, estrogen < 0.1), and remove outlier values (+/- 3SD from the mean)

Hide

#### Numbers excluded and included

```
# how many included?
check_hormone_exclusions <- sub_hormones_no_outliers %>%
  group_by(oc_id, date) %>%
  summarise(
    e = is.na(mean(estr)),
    p = is.na(mean(prog)),
   t = is.na(mean(test)),
    c = is.na(mean(cort))
  ) %>%
 ungroup() %>%
  select(e:c) %>%
  gather('hormone','na', e:c) %>%
  group by(hormone) %>%
  summarise(
    'valid' = n() - sum(na),
    'excluded' = sum(na)
  ) %>%
  arrange(hormone)
  kable(check_hormone_exclusions)
```

hormone	valid	excluded
С	2155	11
е	2146	20
р	2125	41
t	2143	23

NA

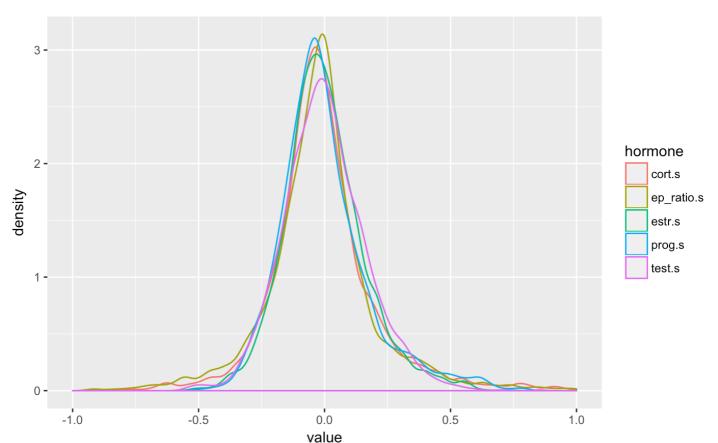
```
check_hormone_exclusions %>%
  group_by() %>%
  summarise(
   total_hormone_samples_valid = sum(valid),
   total_hormone_samples_excluded = sum(excluded)
) %>% gather("stat", "value", 1:length(.))
```

stat <chr></chr>	value <int></int>
total_hormone_samples_valid	8569
total_hormone_samples_excluded	95
2 rows	

#### Subject-mean-centre hormones

Divide results by a constant to put all hormones on ~ -0.5 to +0.5 scale

```
# subject-mean-centre hormones
# and divide by a constant to put all hormones on \sim -0.5 to +0.5 scale
data_hormones <- sub_hormones_no_outliers %>%
 group_by(oc_id) %>%
 mutate(prog.s = (prog-mean(prog, na.rm=TRUE))/400,
         estr.s = (estr-mean(estr, na.rm=TRUE))/5,
         test.s = (test-mean(test, na.rm=TRUE))/100,
         cort.s = (cort-mean(cort, na.rm=TRUE))/0.5,
         ep ratio.s = ((estr/prog)-mean(estr/prog, na.rm=TRUE))/0.075) %>%
 ungroup() %>%
 as.data.frame() %>%
 # add session n
 arrange(oc_id, date) %>%
 group by(oc id) %>%
 mutate(session_n = dense_rank(as.character(date)) - 1) %>%
 ungroup()
data hormones %>%
  group_by(oc_id, date, prog.s, estr.s, test.s, cort.s, ep_ratio.s) %>%
  summarise(n = n()) %>%
 ungroup() %>%
 gather("hormone", "value", prog.s:ep_ratio.s) %>%
 ggplot(aes(value, colour=hormone)) +
 geom_density(alpha=.5) +
  scale x continuous(limits = c(-1,1))
```



NA

#### Mean Hormone Levels

Hide

```
data hormones %>%
  group_by(oc_id, date, prog, estr, test, cort) %>%
  summarise(n = n()) %>%
  ungroup() %>%
  group_by() %>%
  summarise(
     mean_prog = mean(prog, na.rm = TRUE),
      sd_prog =
                 sd(proq, na.rm = TRUE),
                  se(prog, na.rm = TRUE),
      se prog =
     mean_estr = mean(estr, na.rm = TRUE),
      sd estr =
                sd(estr, na.rm = TRUE),
      se_estr = se(estr, na.rm = TRUE),
     mean_test = mean(test, na.rm = TRUE),
                sd(test, na.rm = TRUE),
      sd test =
      se test =
                 se(test, na.rm = TRUE),
     mean_cort = mean(cort, na.rm = TRUE),
      sd_cort =
                 sd(cort, na.rm = TRUE),
                  se(cort, na.rm = TRUE)
      se_cort =
  ) %>% gather("stat", "value", 1:length(.)) %>%
   mutate(value = round(value, 4)) %>%
    separate(stat, c("stat", "hormone")) %>%
    spread(stat, value)
```

	hormone <chr></chr>	mean <dbl></dbl>	<b>sd</b> <dbl></dbl>	se <dbl></dbl>
1	cort	0.2290	0.1644	0.0035
2	estr	3.3006	1.2733	0.0275
3	prog	148.5903	96.2178	2.0873
4	test	87.5719	27.1929	0.5874
4 rc	ows			

Hide

NA

#### Mean hormone ranges

```
data_hormones %>%
  group_by(oc_id, date, prog, estr, test, cort) %>%
  summarise() %>%
  gather("hormone", "value", c(prog, estr, test, cort)) %>%
  filter(!is.na(value)) %>%
  group_by(oc_id, hormone) %>%
  summarise(
    min = min(value),
    max = max(value)
) %>%
  group_by(hormone) %>%
  summarise(
    mean_min = mean(min),
    mean_max = mean(max)
)
```

hormone <chr></chr>	mean_min <dbl></dbl>	mean_max <dbl></dbl>
cort	0.1355347	0.3839401
estr	2.5054307	4.4491824
prog	78.8391233	258.2080653
test	68.3310997	110.4479658
4 rows		

## Descriptive Stats for moral, pathogen, and sexual disgust

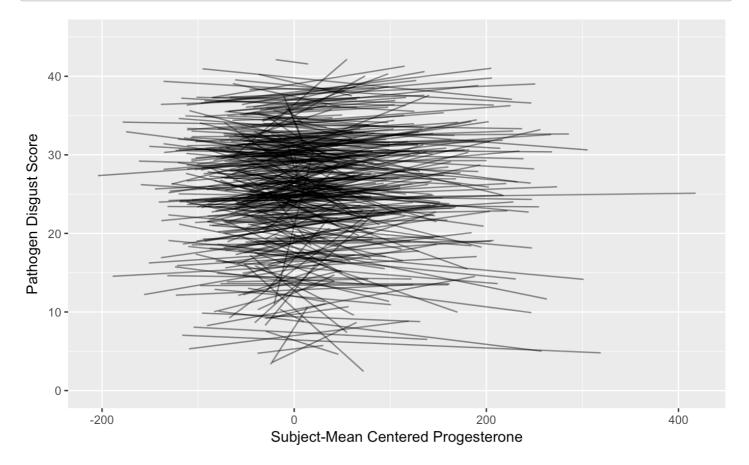
```
data_hormones %>%
  group_by(manip) %>%
  summarise(
    N_valid = sum(!is.na(rating)),
    N_missing = sum(is.na(rating)),
    mean_score = mean(rating, na.rm = TRUE),
    sd_score = sd(rating, na.rm = TRUE)
)
```

manip <chr></chr>	<b>N_valid</b> <int></int>	N_missing <int></int>	mean_score <dbl></dbl>	sd_score <dbl></dbl>
moral_disgust	2096	70	27.82347	8.321714
pathogen_disgust	2100	66	25.99095	7.980229
sexual_disgust	2077	89	19.94704	8.713160

#### Relationship between P and Pathogen Disgust

Hide

```
pd <- data_hormones %>%
  filter(manip == "pathogen_disgust") %>%
  select(oc_id, block, date, session_n, rating, prog.s, prog) %>%
  mutate(prog.c = prog.s * 400)
ggplot(pd, aes(prog.c, rating, group = oc_id)) +
  geom_line(stat = "smooth", method = "lm", alpha = 0.5, size = 0.5) +
  ylab("Pathogen Disgust Score") +
  xlab("Subject-Mean Centered Progesterone") +
  ylim(0, 45)
```



## Pathogen Disgust

Model 1: pathogen\_disgust ~ E + P + E x P

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	25.794	0.395	350.670	65.366	0.000 ***
estr.s	0.300	0.497	1645.589	0.605	0.545
prog.s	0.315	0.425	1111.875	0.743	0.458
estr.s:prog.s	0.218	2.549	64.338	0.085	0.932

#qqPlot(resid(model.PD.horm.EP), envelope=.95)

## Model 2: pathogen\_disgust ~ E + P + EP\_ratio

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	25.795	0.394	348.641	65.480	0.000 ***

estr.s	0.454	0.511	1451.636	0.888	0.375
prog.s	0.024	0.525	199.637	0.045	0.964
ep_ratio.s	-0.347	0.334	34.686	-1.037	0.307

```
#qqPlot(resid(model.PD.horm.EPratio), envelope=.95)
```

## Model 3: pathogen\_disgust ~ T + C

Hide

```
[[1]]
block:oc_id oc_id
437 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	25.801	0.394	347.387	65.528	0.000 ***
test.s	0.346	0.490	1488.080	0.706	0.480
cort.s	0.023	0.377	112.534	0.060	0.952

Hide

```
#qqPlot(resid(model.PD.horm.TC), envelope=.95)
```

## Model 4: pathogen\_disgust ~ P

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	25.809	0.394	348.480	65.513	0.000 ***
prog.s	0.384	0.414	158.458	0.927	0.355

#qqPlot(resid(model.PD.horm.P), envelope=.95)

## **Sexual Disgust**

### Model 1: sexual\_disgust ~ E + P + E x P

```
[[1]]
block:oc_id oc_id
435 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	20.213	0.445	347.455	45.464	0.000 ***

estr.s	-0.156	0.440	1676.519	-0.355	0.723	
prog.s	0.263	0.374	1638.968	0.703	0.482	
estr.s:prog.s	1.008	2.165	1642.403	0.465	0.642	

```
#qqPlot(resid(model.SD.horm.EP), envelope=.95)
```

#### Model 2: sexual\_disgust ~ E + P + EP\_ratio

Hide

```
[[1]]
block:oc_id oc_id
435 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	20.221	0.444	346.210	45.534	0.000 ***
estr.s	-0.193	0.448	1675.378	-0.430	0.667
prog.s	0.392	0.424	1630.059	0.923	0.356
ep_ratio.s	0.105	0.216	1613.211	0.488	0.626

Hide

```
#qqPlot(resid(model.SD.horm.EPratio), envelope=.95)
```

#### Model 3: sexual\_disgust ~ T + C

```
[[1]]
block:oc_id oc_id
434 345

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	20.248	0.446	345.149	45.395	0.000 ***
test.s	0.065	0.437	1681.863	0.150	0.881
cort.s	0.242	0.329	1695.784	0.735	0.462

```
#qqPlot(resid(model.SD.horm.TC), envelope=.95)
```

## Moral disgust

## Model 1: moral\_disgust ~ E + P + E x P

Hide

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname Estimate Std. Error df t value Pr(>|t|) sig

(Intercept)	27.906	0.405	351.750	68.909	0.000 ***
estr.s	0.319	0.565	1696.283	0.565	0.572
prog.s	0.341	0.480	1658.137	0.710	0.478
estr.s:prog.s	2.385	2.778	1675.827	0.858	0.391

```
#qqPlot(resid(model.MD.horm.EP), envelope=.95)
```

### Model 2: moral\_disgust ~ E + P + EP\_ratio

Hide

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	27.927	0.404	349.176	69.108	0.000 ***
estr.s	0.304	0.575	1695.429	0.529	0.597
prog.s	0.467	0.544	1648.061	0.858	0.391
ep_ratio.s	0.067	0.278	1629.129	0.240	0.810

Hide

```
#qqPlot(resid(model.SD.horm.EPratio), envelope=.95)
```

## Model 3: moral\_disgust ~ T + C

```
[[1]]
block:oc_id oc_id
437 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	27.890	0.406	346.788	68.662	0.000 ***
test.s	0.979	0.565	1591.428	1.732	0.084 +
cort.s	-0.915	0.488	98.602	-1.876	0.064 +

```
#qqPlot(resid(model.MD.horm.TC), envelope=.95)
```

# Pathogen Disgust (controlling for session) Model 1: pathogen\_disgust ~ E + P + E x P

Hide

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname Estimate Std. Error df t value Pr(>|t|) sig

(Intercept)	25.830	0.410	409.573	62.938	0.000 ***
estr.s	0.292	0.498	1647.083	0.586	0.558
prog.s	0.324	0.425	1111.783	0.761	0.447
session_n	-0.014	0.043	1036.398	-0.319	0.750
estr.s:prog.s	0.201	2.545	63.238	0.079	0.937

```
#qqPlot(resid(model.PD.horm.EP), envelope=.95)
```

## Model 2: pathogen\_disgust ~ E + P + EP\_ratio

Hide

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	25.841	0.410	406.887	63.084	0.000 ***
estr.s	0.442	0.512	1446.973	0.862	0.389
prog.s	0.035	0.526	200.246	0.066	0.947
ep_ratio.s	-0.348	0.334	34.529	-1.042	0.305
session_n	-0.017	0.042	1043.191	-0.405	0.686

```
#qqPlot(resid(model.PD.horm.EPratio), envelope=.95)
```

#### Model 3: pathogen\_disgust ~ T + C

Hide

```
[[1]]
block:oc_id oc_id
437 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	25.861	0.409	405.535	63.158	0.000 ***
test.s	0.344	0.490	1490.038	0.702	0.483
cort.s	0.028	0.378	113.755	0.074	0.941
session_n	-0.022	0.042	1029.238	-0.532	0.595

Hide

```
#qqPlot(resid(model.PD.horm.TC), envelope=.95)
```

## Model 4: pathogen\_disgust ~ P

Hide

unable to evaluate scaled gradientModel failed to converge: degenerate Hessian with 1 negative eigenvaluesError in calculation of the Satterthwaite's approximation. The output of lme4 package is returned summary from lme4 is returned some computational error has occurred in lmerTest

```
mySummary(model.PD.horm.P)
```

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	t value
(Intercept)	25.850	0.410	63.110
prog.s	0.383	0.411	0.933
session_n	-0.016	0.042	-0.369

#qqPlot(resid(model.PD.horm.P), envelope=.95)

# Sexual Disgust (controlling for session) Model 1: sexual\_disgust ~ E + P + E x P

```
[[1]]
block:oc_id oc_id
435 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	20.771	0.455	384.153	45.668	0.000 ***
estr.s	-0.277	0.437	1675.039	-0.634	0.526
prog.s	0.407	0.372	1635.469	1.093	0.274

session\_n -0.213 0.038 1169.483 -5.538 0.000 \*\*\*

estr.s:prog.s 0.814 2.148 1643.325 0.379 0.705

Hide

#qqPlot(resid(model.SD.horm.EP), envelope=.95)

#### Model 2: sexual\_disgust ~ E + P + EP\_ratio

Hide

```
[[1]]
block:oc_id oc_id
435 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	20.778	0.454	382.680	45.736	0.000 ***
estr.s	-0.310	0.445	1673.602	-0.697	0.486
prog.s	0.518	0.421	1627.802	1.229	0.219
ep_ratio.s	0.092	0.214	1613.565	0.431	0.666
session_n	-0.213	0.038	1169.288	-5.540	0.000 ***

Hide

```
#qqPlot(resid(model.SD.horm.EPratio), envelope=.95)
```

#### Model 3: sexual\_disgust ~ T + C

```
[[1]]
block:oc_id oc_id
434 345
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	20.825	0.456	381.294	45.653	0.000 ***
test.s	0.055	0.433	1682.475	0.127	0.899
cort.s	0.300	0.326	1696.778	0.919	0.358
session_n	-0.219	0.038	1146.019	-5.745	0.000 ***

```
#qqPlot(resid(model.SD.horm.TC), envelope=.95)
```

# Moral disgust (controlling for session) Model 1: moral\_disgust ~ E + P + E x P

Hide

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	28.279	0.425	427.014	66.532	0.000 ***
estr.s	0.230	0.564	1694.858	0.407	0.684
prog.s	0.434	0.480	1653.979	0.904	0.366
session_n	-0.140	0.049	1155.278	-2.874	0.004 **
estr.s:prog.s	2.300	2.772	1676.167	0.830	0.407

```
#qqPlot(resid(model.MD.horm.EP), envelope=.95)
```

## Model 2: moral\_disgust ~ E + P + EP\_ratio

Hide

```
[[1]]
block:oc_id oc_id
438 347

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	28.302	0.424	424.067	66.723	0.000 ***
estr.s	0.221	0.580	232.855	0.381	0.704
prog.s	0.544	0.544	1630.772	1.002	0.317
ep_ratio.s	0.055	0.277	1571.188	0.200	0.842
session_n	-0.141	0.049	1154.469	-2.895	0.004 **

```
#qqPlot(resid(model.SD.horm.EPratio), envelope=.95)
```

#### Model 3: moral\_disgust ~ T + C

Hide

```
[[1]]
block:oc_id oc_id
437 346

[[2]]
```

rowname	Estimate	Std. Error	df	t value	Pr(> t ) sig
(Intercept)	28.264	0.426	419.952	66.341	0.000 ***
test.s	0.960	0.564	1600.187	1.701	0.089 +
cort.s	-0.883	0.491	101.417	-1.799	0.075 +
session_n	-0.140	0.048	1113.559	-2.900	0.004 **

Hide

```
#qqPlot(resid(model.MD.horm.TC), envelope=.95)
```

#### **Cross-sectional**

#### Model 1: pathogen\_disgust ~ P

```
data_1st <- data_hormones %>%
  filter(manip=="pathogen_disgust") %>%
  group_by(oc_id) %>%
  filter(date == min(date))
model.cross.horm.P <- lm(rating ~ prog.s, data = data_1st)
summary(model.cross.horm.P)</pre>
```

```
Call:
lm(formula = rating ~ prog.s, data = data_1st)
Residuals:
              1Q Median
    Min
                                3Q
                                       Max
-21.9608 -4.1143 0.5943 4.7694 15.9586
Coefficients:
           Estimate Std. Error t value
                                                 Pr(>|t|)
                       0.3753 69.189 < 0.0000000000000000 ***
(Intercept) 25.9700
                       2.2965 -0.647
           -1.4854
                                                    0.518
prog.s
---
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
Residual standard error: 6.841 on 332 degrees of freedom
  (18 observations deleted due to missingness)
Multiple R-squared: 0.001259, Adjusted R-squared: -0.00175
F-statistic: 0.4184 on 1 and 332 DF, p-value: 0.5182
```