Survival Multiple timescales Competing risks

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IDEG 2019 training day, Seoul,

29 November 2019 http://BendixCarstensen/Epi/Courses/IDEG2019

From /home/bendix/teach/Epi/IDEG2019/slides/slides.tex



Steno Diabetes Center Copenhagen Rates and Survival

Lifetable estimators

Kaplan-Meier estimators

The Cox-model

Who needs the Cox-model anyway?

Multiple time scales

Rates and Survival

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Survival data

Persons enter the study at some date.

Persons exit at a later date, either dead or alive.

Observation:

Actual time span to death ("event")

or

Some time alive ("censoring")

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estimators

Kaplan-Meier estimators

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Examples of time-to-event measurements

- Time from diagnosis of cancer to death.
- ▶ Time from randomisation to death in a cancer clinical trial
- Time from HIV infection to AIDS.
- Time from marriage to 1st child birth.
- Time from marriage to divorce.
- ▶ Time to re-offending after being released from jail

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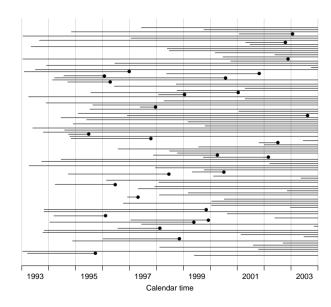
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Multiple time scales

Each line a person

Each blob a death

Study ended at 31 Dec. 2003



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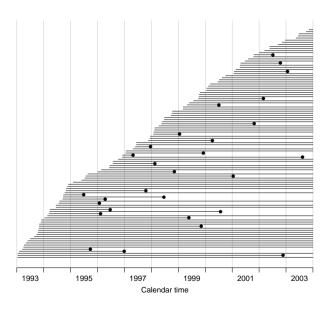
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Ordered by date of entry

Most likely the order in your database.



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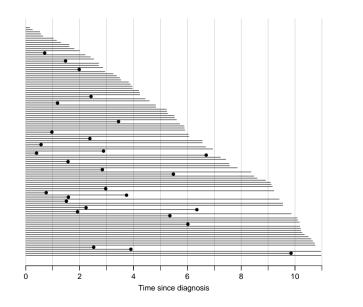
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Timescale changed to "Time since diagnosis".



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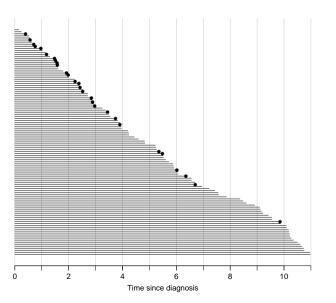
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Patients ordered by survival time.



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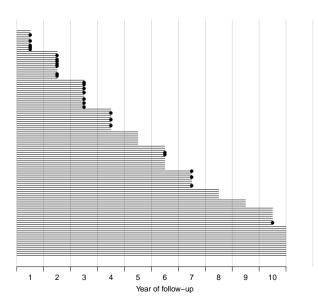
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Survival times grouped into bands of survival.



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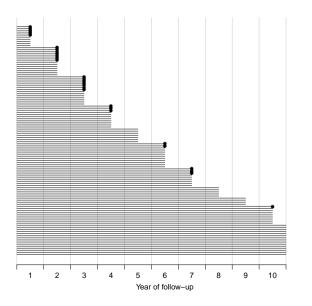
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Patients ordered by survival status within each band.



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Survival after Cervix cancer

	0	Stage I		Stage II		
Year	N	D	L	N	D	L
1 2 3 4 5 6 7 8 9 10	110 100 86 72 61 54 42 33 28 24	5 7 3 0 2 3 0 0 1	5 7 8 7 10 6 5 4 8	234 207 169 129 105 85 73 62 49 34	24 27 31 17 7 6 5 3 2 4	$ \begin{array}{r} 3 \\ 11 \\ 9 \\ 7 \\ 13 \\ 6 \\ 6 \\ 10 \\ 13 \\ 6 \end{array} $

Estimated risk in year 1 for Stage I women is 5/107.5 = 0.0465Estimated 1 year survival is 1 - 0.0465 = 0.9535

Raleifer table (sestimator.

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Survival function

Persons enter at time 0:

Date of birth, date of randomization, date of diagnosis.

How long do they survive? Survival time T — a stochastic variable.

Distribution is characterized by the survival function:

$$S(t) = P \{ \text{survival at least till } t \}$$

= P { T > t } = 1 - P { T ≤ t } = 1 - F(t)

F(t) is the cumulative risk of death before time t.

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Intensity / rate / hazard — same same

- The intensity or hazard function
- Probability of event in interval, relative to interval length:

 $\lambda(t) = P \left\{ \text{event in } (t, t+h] \mid \text{alive at } t \right\} / h$

- Characterizes the distribution of survival times as does *f* (density) or
 E (sumulative distibution)
 - F (cumulative distibution).
- Theoretical counterpart of a(n empirical) rate.

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Survival and rate

Survival from rate — and vice versa;

$$S(t) = \exp\left(-\int_0^t \lambda(s) \,\mathrm{d}s\right) \qquad \lambda(t) = \frac{S'(t)}{S(t)}$$

Survival is a **cumulative** measure, the rate is an **instantaneous** measure.

Note: A cumulative measure requires an origin! ... it is always survival **since** some timepoint — here 0

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Empirical rates for individuals

- At the *individual* level we introduce the empirical rate: (d, y),
 number of events (d ∈ {0,1}) during y risk time.
- ► A person contributes several observations of (*d*, *y*), with associated covariate values.
- Empirical rates are **responses** in survival analysis.

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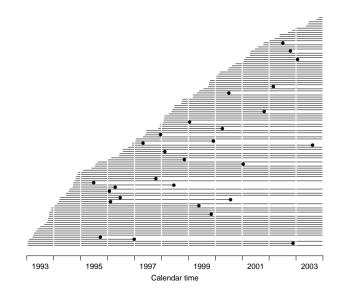
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Empirical rates by calendar time.



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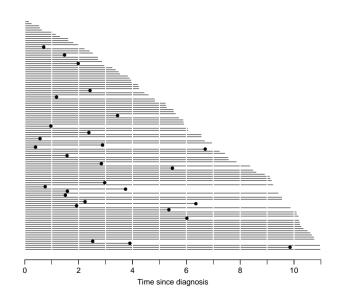
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Empirical rates by time since diagnosis.



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Statistical inference: Likelihood

Two things needed:

- Data what did we actually observe
 Follow-up for each person:
 Entry time, exit time, exit status, covariates
- Model how was data generated Rates as a function of time: Probability machinery that generated data

Likelihood is the probability of observing the data, assuming the model is correct.

Maximum likelihood estimation is choosing parameters of the model that makes the likelihood maximal.

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Competing risks

Rates and Survival (surv-rate)

Likelihood from one person

The likelihood from several empirical rates from one individual is a product of conditional probabilities:

$$P \{ \text{event at } t_4 | t_0 \} = P \{ \text{survive } (t_0, t_1) | \text{ alive at } t_0 \} \times \\P \{ \text{survive } (t_1, t_2) | \text{ alive at } t_1 \} \times \\P \{ \text{survive } (t_2, t_3) | \text{ alive at } t_2 \} \times \\P \{ \text{event at } t_4 | \text{ alive at } t_3 \}$$

- Log-likelihood from one individual is a sum of terms.
- Each term refers to one empirical rate (d, y)

 $- y = t_i - t_{i-1} \text{ and mostly } d = 0.$

• t_i is the timescale (covariate).

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Poisson likelihood

The log-likelihood contributions from follow-up of **one** individual:

$$d_t \log(\lambda(t)) - \lambda(t)y_t, \quad t = t_1, \dots, t_n$$

is also the log-likelihood from several independent Poisson observations with mean $\lambda(t)y_t$, i.e. log-mean $\log(\lambda(t)) + \log(y_t)$

Analysis of the rates, (λ) can be based on a Poisson model with log-link applied to empirical rates where:

- $\log(\lambda)$ is modelled by covariates
- $\blacktriangleright d$ is the response variable and
- $\log(y)$ is the offset variable,

using the poisson family

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- $\log(\lambda)$ is modelled by covariates
- (d, y) is the response variable

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Competing risks

Poisson likelihood, for one rate, based on 17 events in 843.7 PY:

Poisson likelihood, two rates, or one rate and RR :

```
D <- c(17,28) ; Y <- c(843.7,632.3) ; gg <- factor(0:1)
m2 <- glm( D ~ gg, offset=log(Y/1000), family=poisson)
ci.exp( m2 )</pre>
```

exp(Est.) 2.5% 97.5% (Intercept) 20.149342 12.526051 32.412130 gg1 2.197728 1.202971 4.015068 Survival Multiple timescales Competing risks

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ci.exp(m2)</pre>

exp(Est.) 2.5% 97.5% (Intercept) 20.149342 12.526051 32.412130 gg1 2.197728 1.202971 4.015068

m2r <- glm(cbind(D,Y/1000) ~ gg, family=poisreg)
ci.exp(m2r)</pre>

exp(Est.) 2.5% 97.5% (Intercept) 20.149342 12.526051 32.412130 gg1 2.197728 1.202971 4.015068

```
Note the family=poisreg
```

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Example using R

Poisson likelihood, two rates, or one rate and RR:

```
D <- c(17,28); Y <- c(843.7,632.3); gg <- factor(0:1)
m2 <- glm( cbind(D,Y/1000) ~ gg, family=poisreg )</pre>
 ci.exp( m2 )
           exp(Est.) 2.5% 97.5%
(Intercept) 20.149342 12.526051 32.412130
            2.197728 1.202971 4.015068
gg1
m3 \leq glm(cbind(D, Y/1000) ~ gg - 1, family=poisreg)
 ci.exp(m3)
   exp(Est.) 2.5% 97.5%
gg0 20.14934 12.52605 32.41213
gg1 44.28278 30.57545 64.13525
```

You do it!

Rates and Survival (surv-rate)

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Survival analysis

- \blacktriangleright Response variable: Time to event, T
- Censoring time, Z
- We observe $(\min(T, Z), \delta = 1\{T < Z\}).$
- This gives time a special status, and mixes the response variable (risk)time with the covariate time(scale).
- Originates from clinical trials where everyone enters at time 0, and therefore Y = T 0 = T

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The life table method

The simplest analysis is by the "life-table method":

interval	alive	dead	cens.	
i	n_i	d_i	l_i	p_i
1	77	5	2	5/(77 - 2/2) = 0.066
2	70	7	4	7/(70 - 4/2) = 0.103
3	59	8	1	8/(59-1/2)=0.137

$$p_i = P \{ \text{death in interval } i \} = d_i / (n_i - l_i / 2)$$

$$S(t) = (1 - p_1) \times \cdots \times (1 - p_t)$$

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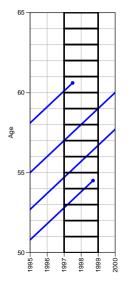
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> The Cox-model

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Observations for the lifetable



Life table is based on person-years and deaths accumulated in a short period.

Age-specific rates — cross-sectional! Survival function:

$$S(t) = e^{-\int_0^t \lambda(a) da} = e^{-\sum_0^t \lambda(a)}$$

— assumes stability of rates to be interpretable for actual persons.

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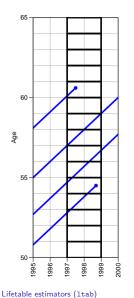
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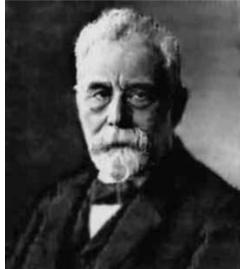
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Observations for the lifetable



This is a **Lexis** diagram.



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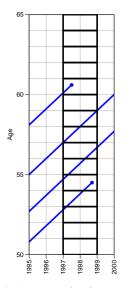
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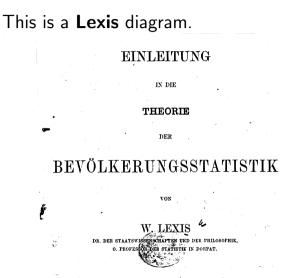
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Life table approach

- ► The **population** experience:
 - *D*: Deaths (events).
 - Y: Person-years (risk time).
- The classical lifetable analysis compiles these for prespecified intervals of age, and computes age-specific mortality rates.
- Data are collected crossectionally, but interpreted longitudinally.
- The rates are the basic building bocks used for construction of:
 - ► RRs
 - cumulative measures (survival and risk)

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The Kaplan-Meier Method

- The most common method of estimating the survival function.
- A non-parametric method.
- Divides time into small intervals where the intervals are defined by the unique times of failure (death).
- Based on conditional probabilities as we are interested in the probability a subject surviving the next time interval given that they have survived so far.

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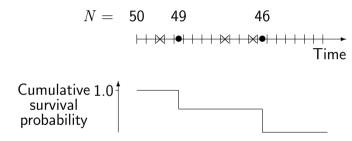
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Kaplan–Meier method illustrated

(• = failure and \times = censored):



- Steps caused by multiplying by (1-1/49) and (1-1/46) respectively
- Late entry can also be dealt with

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Using R: Surv()

library(survival)
data(lung)
head(lung, 3)

inst time status age sex ph.ecog ph.karno pat.karno meal.cal wt.loss 1 3 306 2 74 90 100 1175 NΑ 1 2 3 3 455 2 68 1 1225 15 90 90 1 56 15 3 1010 1 0 90 90 NA with(lung, Surv(time, status==2))[1:10] [1] 306 455 1010+ 210 883 1022+ 310 361 218 166 (s.km <- survfit(Surv(time, status==2)~1, data=lung)) Call: survfit(formula = Surv(time, status == 2) ~ 1, data = lung) events median 0.95LCL 0.95UCL n 228 165 310 285 363 mlat(a lom)

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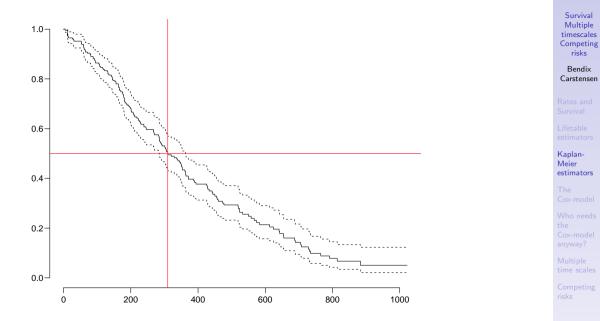
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The proportional hazards model

$$\lambda(t, x) = \lambda_0(t) \times \exp(x'\beta)$$

• The baseline hazard rate, $\lambda_0(t)$, is the hazard rate when all the covariates are 0

— since then $\exp(x'\beta) = 1$

 The form of the above equation means that covariates act multiplicatively on the baseline hazard rate Survival Multiple timescales Competing risks

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The proportional hazards model

$$\lambda(t, x) = \lambda_0(t) \times \exp(x'\beta)$$

- Time (t) is a covariate (albeit modeled in a special way).
- The baseline hazard is a function of time and thus varies with time.
- No assumption about the shape of the underlying hazard function.
- ▶ but you will never see the shape of the baseline hazard ...

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Interpreting Regression Coefficients

- If x_j is binary, exp(β_j) is the estimated hazard ratio for subjects corresponding to x_j = 1 compared to those where x_j = 0.
- If x_j is continuous, exp(β_j) is the estimated increase/decrease in the hazard rate for a unit change in x_j.
- With more than one covariate, interpretation is similar, i.e. exp(β_j) is the hazard ratio between persons who **only** differ with respect to covariate x_j
- ... assuming that the effect of x_j is the same across all other covariate values

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Fitting a Cox- model in R

```
library( survival )
data(bladder)
bladder <- subset( bladder, enum<2 )
head( bladder)</pre>
```

	id	rx	number	size	stop	event	enum
1	1	1	1	3	1	0	1
5	2	1	2	1	4	0	1
9	3	1	1	1	7	0	1
13	4	1	5	1	10	0	1
17	5	1	4	1	6	1	1
21	6	1	1	1	14	0	1

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Fitting a Cox-model in R

What is the meaning of the two regression parameters?

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Plotting the base survival in R

```
plot( survfit(c0) )
lines( survfit(c0), conf.int=F, lwd=3 )
```

The plot.coxph plots the survival curve for a person with an average covariate value

— which is **not** the average survival for the population considered. . .

- and not necessarily meaningful

c(mean(bladder\$number), mean(bladder\$size))

[1] 2.105882 2.011765

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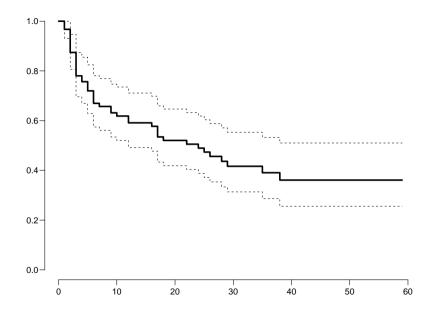
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Plotting the base survival in R

You can plot the survival curve for specific values of the covariates, using the newdata= argument:

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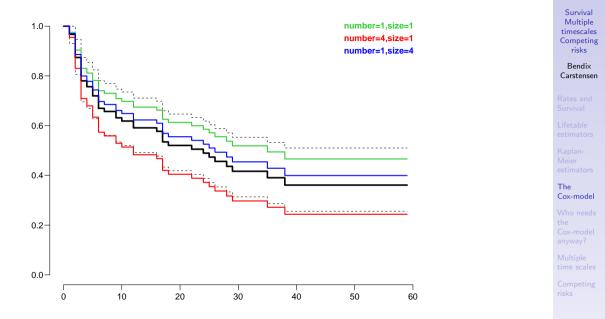
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WntCma

A look at the Cox model

$$\lambda(t, x) = \lambda_0(t) \times \exp(x'\beta)$$

A model for the rate as a function of t and x.

The covariate t has a special status:

- Computationally, because all individuals contribute to (some of) the range of t.
- ... the scale along which time is split (the risk sets)
- ► Conceptually *t* is just a covariate that varies within individual.

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The Cox-likelihood as profile likelihood

 One parameter per death time to describe the effect of time (i.e. the chosen timescale).

$$\log(\lambda(t, x_i)) = \log(\lambda_0(t)) + \beta_1 x_{1i} + \dots + \beta_p x_{pi} = \alpha_t + \eta_i$$

- Profile likelihood:
 - Derive estimates of α_t as function of data and β s
 - assuming constant rate between death times
 - Insert in likelihood, now only a function of data and βs
 - Turns out to be Cox's partial likelihood
 - The full likelihood is that of a Poisson model

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Implications

- ► The Cox-model is a special case of a Poisson model
- ... a model with one parameter per time (censoring or death)
 typically hundreds of parameters
- A more sensible model would be one with a smooth effect of time.
- bendixcarstensen.com/WntCma.pdf gives a complete
 account
- ... but here is a quick tour of how-to

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The Cox-model

Who needs the Cox-model anyway?

Multiple time scales

Set up a Lexis object (outcome as a factor), and split time in small intervals (at all times):

NOTE: entry.status has been set to "Alive" for all. NOTE: entry is assumed to be 0 on the tfe timescale. Bendix Carstensen

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Multiple time scales

Split the follow-up in small intervals

sL <- splitMulti(Lx, tfe=c(0,sort(unique(Lx\$lex.dur))))</pre> summary(Lx) Transitions: То From Alive Dead Records: Events: Risk time: Persons: Alive 63 165 228 165 69703.91 228 summary(sL) Transitions: То From Alive Dead Records: Events: Risk time: Persons: Alive 25941 165 26106 165 69703.91 228

The Cox model and the identical Poisson model on the Lexis data frames:

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```
c0 <- coxph( Surv(tfe,tfe+lex.dur,lex.Xst=="Dead") ~ sex + age, data=Lx )</pre>
 cx <- coxph.Lexis( Lx, tfe ~ sex + age )</pre>
survival::coxph analysis of Lexis object Lx:
Rates for the transition Alive->Dead
Baseline timescale: tfe
 px <- glm.Lexis( sL, ~ factor(tfe) + sex + age )</pre>
stats::glm Poisson analysis of Lexis object sL with log link:
Rates for the transition: Alive->Dead
 length( coef(px) )
[1] 230
Fit smooth parametric model for baseline:
 ps <- gam.Lexis( sL, formula= ~ s(tfe) + sex + age )</pre>
mgcv::gam Poisson analysis of Lexis object sL with log link:
Rates for the transition: Alive->Dead
```

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Compare estimates:

Cox 0.5989669 0.4313805 0.8316587 1.017154 0.9989336 1.035708 Pois-F 0.5989669 0.4313805 0.8316587 1.017154 0.9989336 1.035708 Pois-S 0.6017620 0.4335052 0.8353245 1.016415 0.9982477 1.034912 Survival Multiple timescales Competing risks

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Multiple time scales

Prediction data frame for rates and survival — at what times do you want the rates and the survival shown for a 65 year old man, using the Poisson model with smooth effects:

```
ps <- gam.Lexis( sL, formula= ~ s(tfe) + sex + age )</pre>
```

mgcv::gam Poisson analysis of Lexis object sL with log link: Rates for the transition: Alive->Dead

nd <- data.frame(tfe=seq(0,900,20)+10, sex="M", age=65)
rate <- ci.pred(ps, nd)*365.25 # per year, not per day
surv <- ci.surv(ps, nd, int=20) # int is interval between times in nd</pre>

Plot the rates and the survival function for 65 year old man

```
par( mfrow=c(1,2), mar=c(3,3,1,1), mgp=c(3,1,0)/1.6 )
matshade( nd$tfe, rate, lwd=2, log="y", plot=TRUE )
matshade( nd$tfe-10, surv, lwd=2, yaxs="i", ylim=c(0,1), plot=TRUE )
lines( survfit( cx, newdata=nd[1,] ), col='red' )
```

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Lifetable estimators

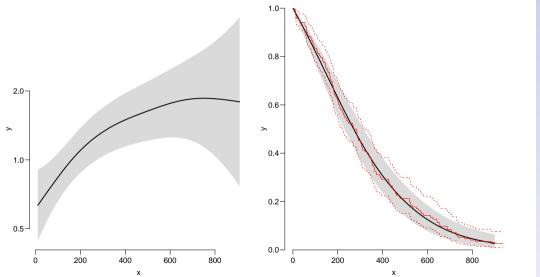
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The Cox-model

Who needs the Cox-model anyway?

Multiple time scales

Rates and survival, 65 year old man



Who needs the Cox-model anyway? (WntCma)

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Kaplan-Meier estimators

> The Cox-model

Who needs the Cox-model anyway?

Multiple time scales

Multiple time scales

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Senior Statistician, Steno Diabetes Center Copenhagen

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Timescales

Mortality rates as a function of

- ► current age, a
- duration of diabetes, d
- age at diagnosis, e = a d (not a timescale!)

$$\blacktriangleright \Rightarrow a - d - e = 0$$

- this relation must be kept in any dataset

Model for mortality depending on current age and age at entry:

$$\log(\mu(a,d)) = f(a) + h(e)$$

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Two variables: age and age at diagnosis $\log(\mu(a, d)) = f(a) + h(e)$

NOTE: only superficially that this does not include duration since d = a - e, we may write:

$$\log(\mu(a,d)) = f(a) + h(e) + \beta d - \beta d$$

= f(a) + h(e) + \beta(a - e) - \beta d
= (f(a) + \beta a) + (h(e) - \beta e) - \beta d

We can claim any duration effect we like!

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All three variables

Remember: a - d - e = 0

$$\log(\mu(a,d)) = f(a) + g(d) + h(e)$$

= $f(a) + g(d) + h(e) + \gamma(a - d - e)$
= $(f(a) + \gamma a) + (g(d) - \gamma d) + (h(e) - \gamma e)$
= $\tilde{f}(a) + \tilde{g}(d) + \tilde{h}(e)$

I makes no sense to show (any) one of the effects:

We can choose any slope for one of the effects, as long as we adjust the slopes of the two others.

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Multiple time scales

Predicted mortality

```
age: current age; tfd: duration; ain: age at DX:
       <- gam.Lexis( transform(Sdm,ain=age-tfd), ~ s(age) + s(tfd) + s(ain)
 made
       <- gam.Lexis( transform(Sdm,ain=age-tfd), ~ s(age) + s(tfd) )
 mad
 anova( made, mad, test="Chisq" )
Analysis of Deviance Table
Model 1: cbind(trt(Lx$lex.Cst, Lx$lex.Xst) %in% trnam, Lx$lex.dur) ~ s(age) + The
    s(tfd) + s(ain)
Model 2: cbind(trt(Lx$lex.Cst, Lx$lex.Xst) %in% trnam, Lx$lex.dur) ~ s(age)
                                                                             + Who needs
    s(tfd)
  Resid. Df Resid. Dev
                            Df Deviance Pr(>Chi)
    280378
                 24000
1
2
     280378
                 24000 0.28932 0.42647
                                          0.1664
```

... no **non-linear** effect of age at diagnosis—use model mad.

Multiple time scales (multi-scales)

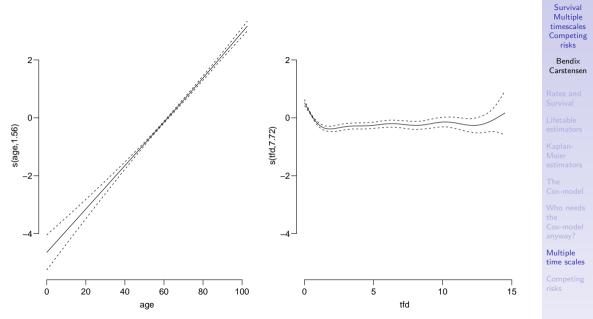
Multiple

time scales

Survival

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Multiple time scales (multi-scales)

Predicted mortality

tfd ain age 0.0 30 30.0 2 30 30.1 3 0.1 4 0.2 30 30.2 30 30.3 5 0.3 6 0.4 30 30.4 7 0.5 30 30.5

Predictions of mortality for these values of: age: current age; tdf: duration and ain: age at DX. Survival Multiple timescales Competing risks

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Lifetable estimators

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Multiple time scales

Mortality rates, not effects

Predict mortality rates for Danish diabetes patients by age and duration of diabetes for persons diagnosed at ages 30, 40 etc.

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Rates and Survival

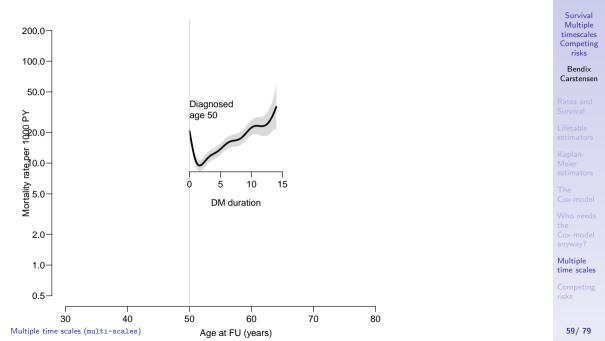
Lifetable estimators

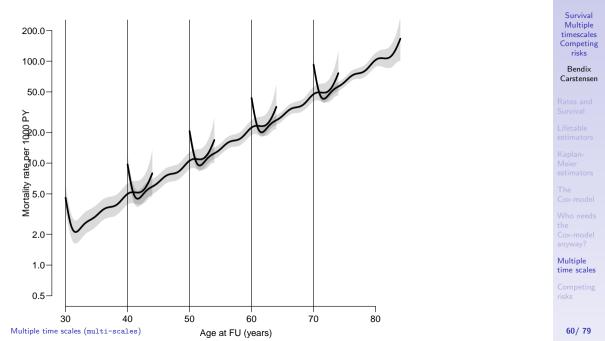
Kaplan-Meier estimators

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Multiple time scales





Analysis by sex

```
mm <- gam.Lexis( subset( Sdm, sex=="M" ), ~ s(age) + s(tfd) )</pre>
```

mgcv::gam Poisson analysis of Lexis object subset(Sdm, sex == "M") with log lightensen Rates for the transition: Alive->Dead

mw <- gam.Lexis(subset(Sdm, sex=="F"), ~ s(age) + s(tfd))</pre>

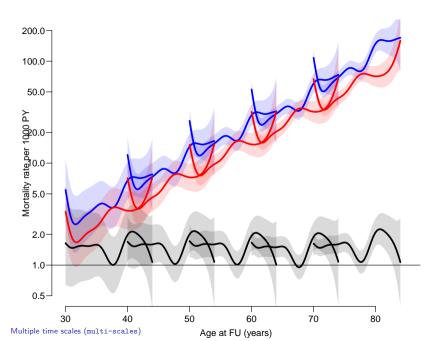
mgcv::gam Poisson analysis of Lexis object subset(Sdm, sex == "F") with log link: Rates for the transition: Alive->Dead

```
matshade( nd$age, cbind( ci.pred( mm, nd )*1000,
                         ci.pred( mw. nd )*1000.
               ci.ratio( ci.pred( mm, nd ),
                         ci.pred( mw. nd ) ) ), plot=TRUE,
          lwd=3, lty=1, log="y", las=1, col=c("blue", "red"."black").
          xlim=c(30,85), vlim=c(1/2,200),
          xlab="Age at FU (vears)".
          ylab="Mortality rate per 1000 PY" )
abline(h=1)
```

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Multiple time scales



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Lifetable estimators

Kaplan-Meier estimators

> The Cox-model

Who needs the Cox-model anyway?

Multiple time scales

... for you

- What is is your conclusion for the effect of duration and age at diagnosis on the mortality rates?
- What is the effect of age at diagnosis?
- Your turn do the analysis on your own computer.

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Competing risks

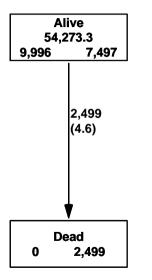
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Survival analysis



One rate (the arrow) One probability — P {alive at t}

Some patients begin pharmaceutical treatment, they have follow-up **before** Drug treatment and **after** beginning Drug treatment Survival Multiple timescales Competing risks

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Lifetable estimators

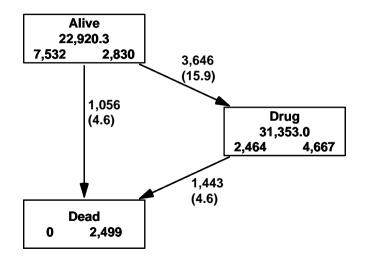
Kaplan-Meier estimators

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Multiple time scales

Three states, three transitions



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Multiple time scales

Cut follow-up at beginning of drug therapy summary(Sdm) Transitions: To From Alive Dead Records: Events: Risk time: Persons: Alive 277890 2499 280389 2499 54273.27 9996 Sdm\$dodr <- pmin(Sdm\$dooad,Sdm\$doins,na.rm=TRUE)</pre> $S3 \leq -cutLexis(data = Sdm.)$ cut = Sdm \$ dodr.timescale = "per", new.state = "Drug". precursor.states = "Alive") summary(S3) Transitions: То From Alive Drug Dead Records: Events: Risk time: Persons: Alive 140147 3646 1056 144849 4702 22920.27 7532 Drug 0 137743 1443 139186 1443 31353.00 6110 140147 141389 2499 54273.27 Sum 284035 6145 9996

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Lifetable estimators

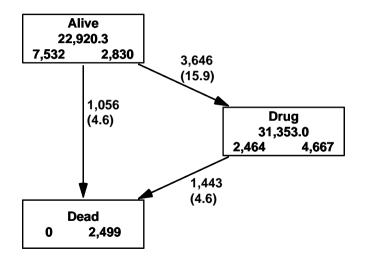
Kaplan-Meier estimators

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Multiple time scales

Three states, three transitions



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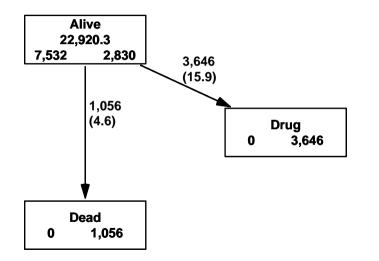
Kaplan-Meier estimators

> The Cox-model

Who needs the Cox-model anyway?

Multiple time scales

Three states, two (competing) transitions



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Multiple time scales

Competing risk analysis

lex.Xst is factor with three levels:

levels(S3\$lex.Xst)

[1] "Alive" "Drug" "Dead"

... use it as response (event) variable in Surv:

Computes the Aalen-Johansen estimator of state-probabilities — probability of being in each of the states assumed by lex.Xst

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Kaplan-Meier estimators

> The Cox-model

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Multiple time scales

Competing risk analysis

```
[1,] 0.002737851 0.9956187 0.003319172 0.001062135
[2,] 0.005475702 0.9901745 0.008232201 0.001593273
[3,] 0.008213552 0.9875188 0.010356754 0.002124411
[4,] 0.010951403 0.9847304 0.012614091 0.002655550
[5,] 0.013689254 0.9784895 0.018589397 0.002921119
[6,] 0.016427105 0.9727797 0.024033564 0.003186688
[7,] 0.019164955 0.9652100 0.031470515 0.003319491
```

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Rates and Survival

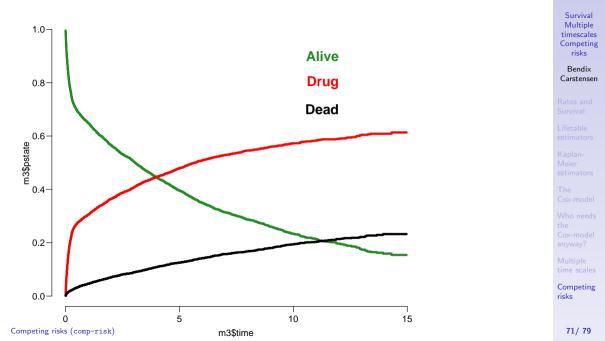
Lifetable estimators

Kaplan-Meier estimators

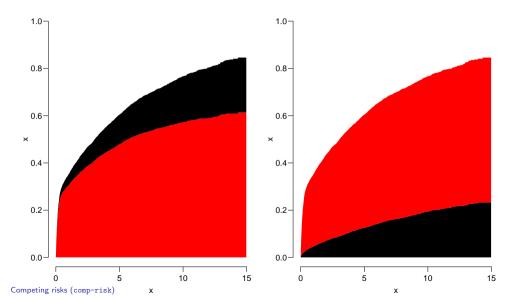
The Cox-model

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Multiple time scales



The stacked probabilities



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Kaplan-Meier estimators

> The Cox-model

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Multiple time scales

Competing risks

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Getting it wrong

- It is commonly seen that a traditional survival analyses are conducted where transition to Drug is taken as event and deaths just counted as censorings.
- This is wrong; it will overestimate the probability of going on drugs.
- But nothing wrong with the estimate of the rate of initiating drugs.
- Only the calculation of the cumulative probability is wrong

 the probability of having initiated a drug depends on both
 the rate of drug initiation and the mortality rate.

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Rates and Survival

Lifetable estimators

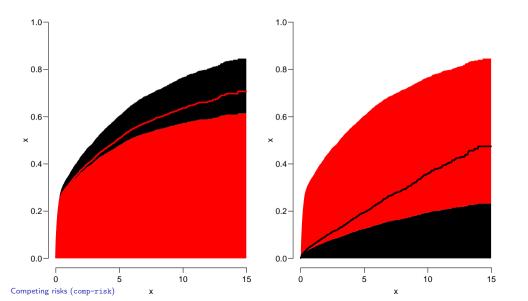
Kaplan-Meier estimators

The Cox-model

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Multiple time scales

The stacked probabilities + the wrong ones



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Multiple time scales

Competing risks

74/79

What are the wrong probabilities?

Probability of Drug under the assumptions:

- Dead does not occur
- Drug occurs at the same rate as when Dead was a possibility
- hypothetical scenario about which there is no information in data
- ... and about which no data can be collected

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Rates and Survival

estimators

Kaplan-Meier estimators

The Cox-model

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Multiple time scales

Getting the maths right

- rate of drug initiation (Alive \rightarrow Drug): $\lambda(t)$ mortality before drug initiation (Alive \rightarrow Dead): $\mu(t)$
- ► ⇒ probability of being alive without drug treatment at time t is:

$$S(t) = \exp\left(-\int_0^t \lambda(s) + \mu(s) \,\mathrm{d}s\right)$$

cumulative risk of Drug before time t is:

$$\underline{R}_{\text{Drug}}(t) = \int_{0}^{t} \lambda(u) S(u) \, \mathrm{d}u = \int_{0}^{t} \lambda(u) \exp\left(-\int_{0}^{u} \lambda(s) + \mu(s) \, \mathrm{d}s\right)$$

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the Cox-model anyway? **U** Multiple time scales

Where is the error

- Error only in the calculations of the cumulative risk the probability of transition to Drug.
- The "wrong" red line in the figure comes from omitting the green term $\mu(s)$ (the mortality rate) from the formula
- The temptations:
 - the mathematics becomes nicer if you compute the wrong thing
 - it is what comes out of standard programs when regarding Drug as the only type of event...
 - the hazard **ratios** are correct.
 - ... the program does not know there is a competing event if you don't tell
 - so the cumulative risks are wrong

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Multiple time scales

Competing risks — practicalities

- Cause-specific rates can be modeled separately: cause-specific rates and HRs are perfectly valid
- Regression models for cause-specific rates translates to predicted probabilities for given covariates
- Fine-Gray models
 - the subdistribution hazard for cause $c: \frac{\partial}{\partial t} \log(1 F_c(t))$
 - not a hazard, it's a mathematical transformation of the cumulative risk.
 - will not give probabilities that sum to 1 across causes
 - ... not recommended

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Competing risks summary

- No such thing as a competing risks analysis of event rates
- the competing risks aspect comes about only when you want to address cumulative risk of a particular event

 in which case you probably want to look at cumulative risks of all types of events.

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