

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`



Rates and Survival
Lifetable estimators
Kaplan-Meier estimators
The Cox-model
Who needs the Cox-model anyway?
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Rates and Survival

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surv-rate

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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Examples of time-to-event measurements

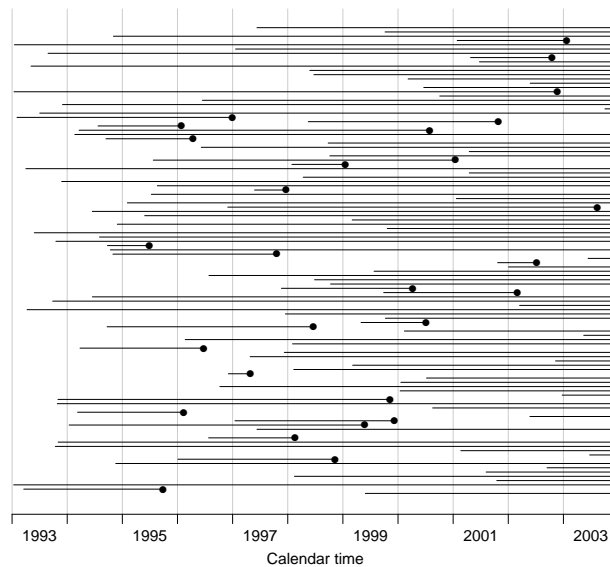
- ▶ Time from diagnosis of cancer to death.
- ▶ Time from randomisation to death in a cancer clinical trial
- ▶ Time from HIV infection to AIDS.
- ▶ Time from marriage to 1st child birth.
- ▶ Time from marriage to divorce.
- ▶ Time to re-offending after being released from jail

Rates and Survival (surv-rate)

Each line a person

Each blob a death

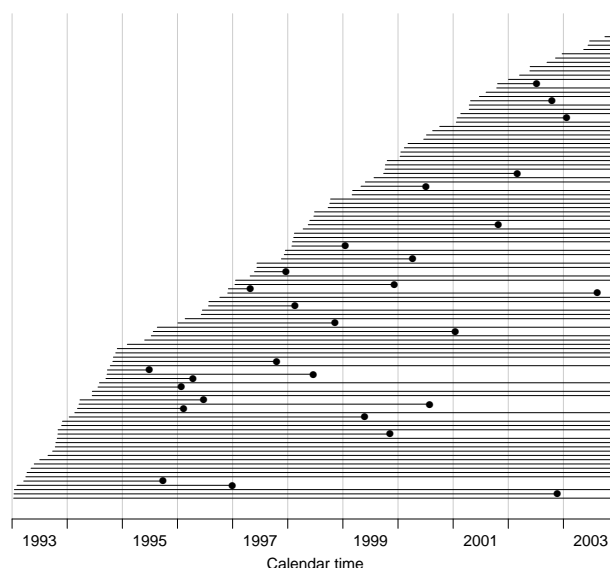
Study ended at 31 Dec. 2003



Rates and Survival (surv-rate)

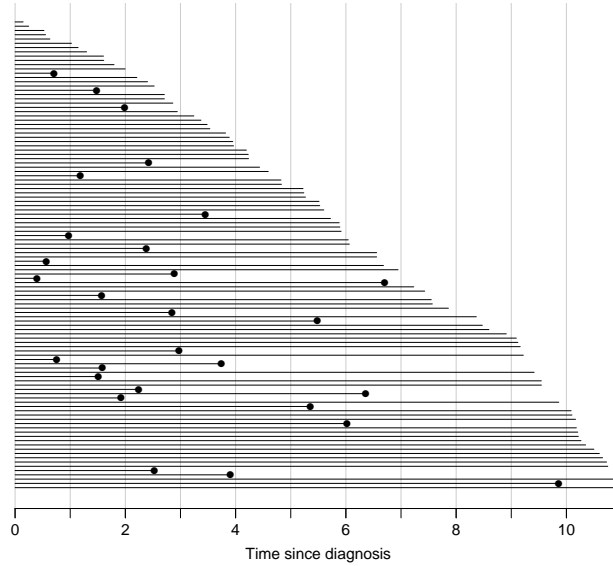
Ordered by date of entry

Most likely the order in your database.



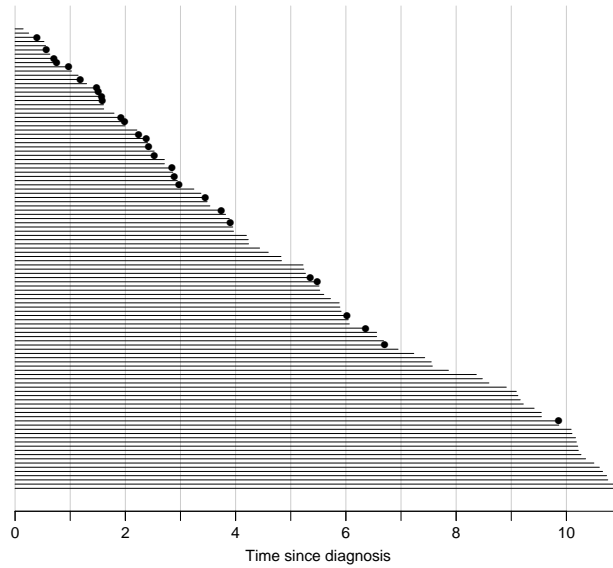
Rates and Survival (surv-rate)

Timescale changed to "Time since diagnosis".



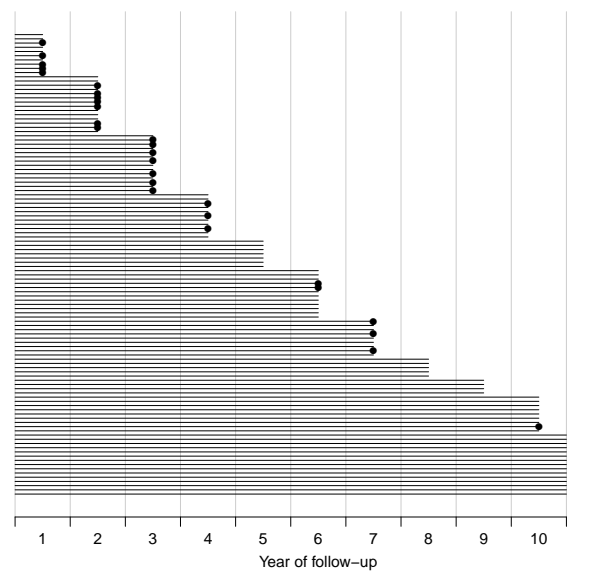
Rates and Survival (surv-rate)

Patients ordered by survival time.



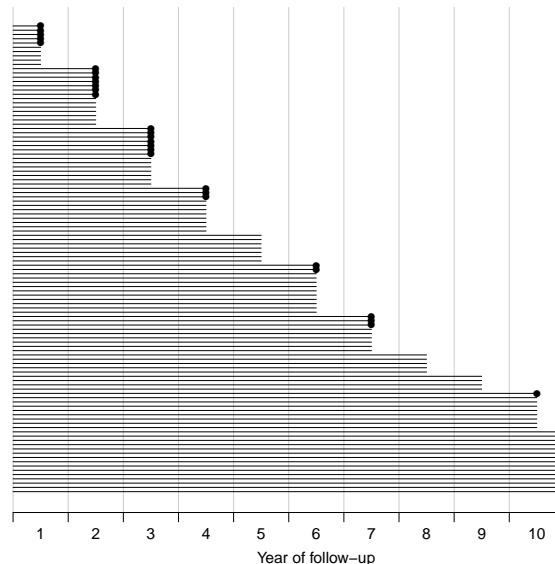
Rates and Survival (surv-rate)

Survival times grouped into bands of survival.



Rates and Survival (surv-rate)

Patients ordered by survival status within each band.



Rates and Survival (surv-rate)

Survival after Cervix cancer

Year	Stage I			Stage II		
	<i>N</i>	<i>D</i>	<i>L</i>	<i>N</i>	<i>D</i>	<i>L</i>
1	110	5	5	234	24	3
2	100	7	7	207	27	11
3	86	7	7	169	31	9
4	72	3	8	129	17	7
5	61	0	7	105	7	13
6	54	2	10	85	6	6
7	42	3	6	73	5	6
8	33	0	5	62	3	10
9	28	0	4	49	2	13
10	24	1	8	34	4	6

Estimated risk in year 1 for Stage I women is $5/107.5 = 0.0465$

Estimated 1 year survival is $1 - 0.0465 = 0.9535$

Life-table estimator.

Rates and Survival (surv-rate)

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:

$$\begin{aligned}
 S(t) &= P \{ \text{survival at least till } t \} \\
 &= P \{ T > t \} = 1 - P \{ T \leq t \} = 1 - F(t)
 \end{aligned}$$

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

Rates and Survival (surv-rate)

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Intensity / rate / hazard — same same

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

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

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

Rates and Survival (surv-rate)

Survival and rate

Survival from rate — and vice versa;

$$S(t) = \exp \left(- \int_0^t \lambda(s) ds \right) \quad \lambda(t) = \frac{S'(t)}{S(t)}$$

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

Rates and Survival (surv-rate)

Empirical rates for individuals

- ▶ At the *individual* level we introduce the **empirical rate:** (d, y) ,
— number of events ($d \in \{0, 1\}$) 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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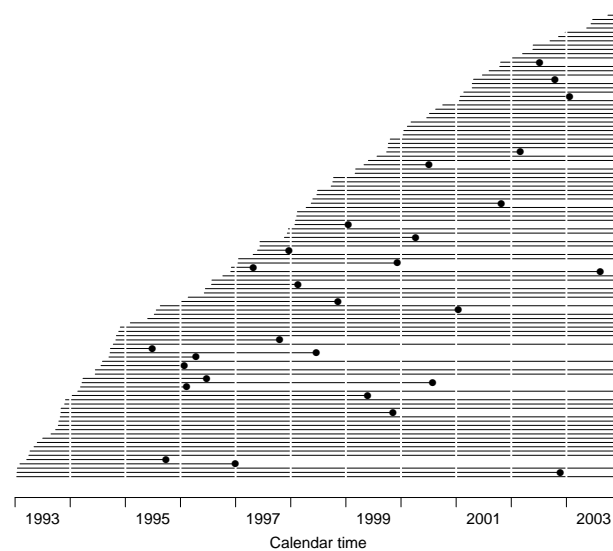
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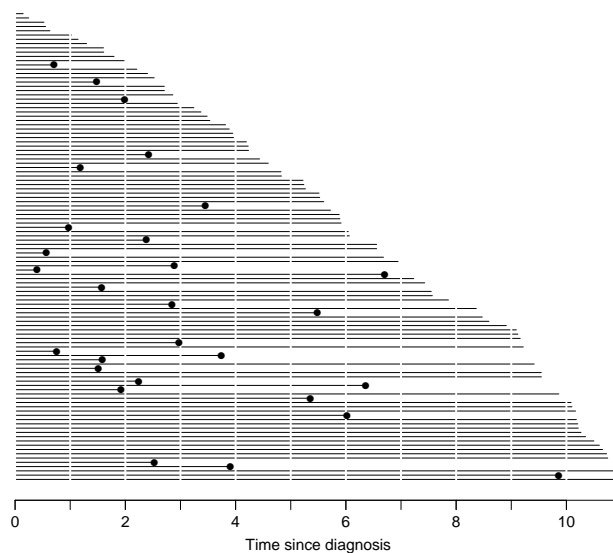
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Empirical rates
by
calendar time.



Rates and Survival (surv-rate)

Empirical rates
by
time since
diagnosis.



Rates and Survival (surv-rate)

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.

Rates and Survival (surv-rate)

Likelihood from one person

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

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

- ▶ Log-likelihood from one individual is a sum of terms.
- ▶ Each term refers to one empirical rate (d, y)
 - $y = t_i - t_{i-1}$ and mostly $d = 0$.
- ▶ t_i is the timescale (covariate).

Rates and Survival (surv-rate)

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
- ▶ d is the response variable and
- ▶ $\log(y)$ is the offset variable, using the **poisson** family

Rates and Survival (surv-rate)

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 (d, y)

- ▶ $\log(\lambda)$ is modelled by covariates
- ▶ (d, y) is the response variable
- ▶ ... using the **poisreg** family

Rates and Survival (surv-rate)

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

```
library( Epi )
D <- 17 ; Y <- 843.7
m1 <- glm( D ~ 1, offset=log(Y/1000), family=poisson)
ci.exp( m1 )
```

	exp(Est.)	2.5%	97.5%
(Intercept)	20.14934	12.52605	32.41213

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 )
```

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

Rates and Survival (surv-rate)

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 )
```

	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 )
```

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

Note the **family=poisreg**

Rates and Survival (surv-rate)

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 )
ci.exp( m2 )
```

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

```
m3 <- 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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1tab

Survival analysis

- ▶ 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 $Y = T - 0 = T$

Lifetable estimators (1tab)

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	$8/(59 - 1/2) = 0.137$

$$p_i = P\{\text{death in interval } i\} = d_i / (n_i - l_i/2)$$
$$S(t) = (1 - p_1) \times \cdots \times (1 - p_t)$$

Lifetable estimators (1tab)

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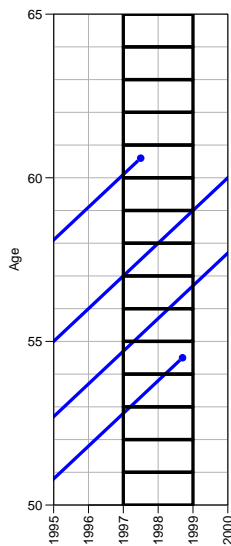
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Observations for the lifetable



Lifetable estimators (ltab)

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

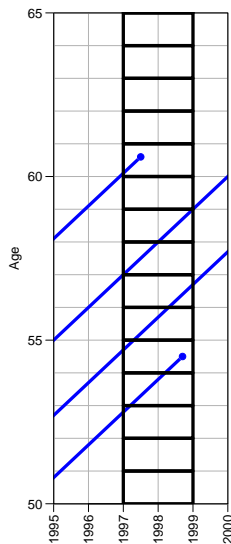
Age-specific rates — cross-sectional!

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.

Observations for the lifetable

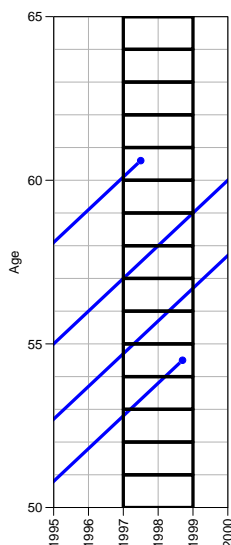


Lifetable estimators (ltab)

This is a **Lexis** diagram.

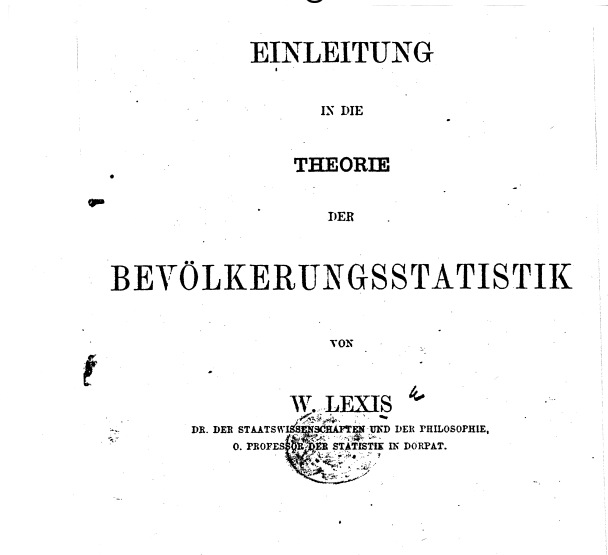


Observations for the lifetable



Lifetable estimators (ltab)

This is a **Lexis** diagram.



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 crosssectionally, but interpreted longitudinally.
- ▶ The **rates** are the basic building blocks — used for construction of:
 - ▶ RRs
 - ▶ cumulative measures (survival and risk)

Lifetable estimators (1tab)

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km-na

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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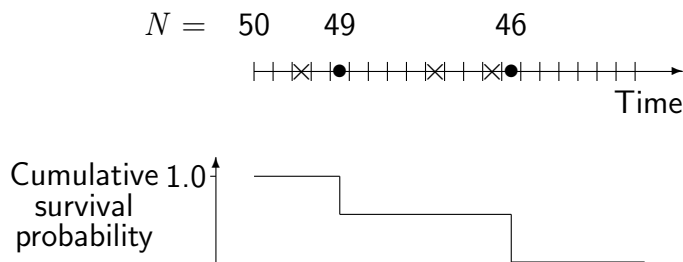
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Kaplan-Meier estimators (km-na)

Kaplan–Meier method illustrated

(● = failure and × = censored):



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

Kaplan-Meier estimators (km-na)

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  1     1         90       100     1175     NA
2     3  455     2  68  1     0         90        90     1225     15
3     3 1010     1  56  1     0         90        90        NA     15

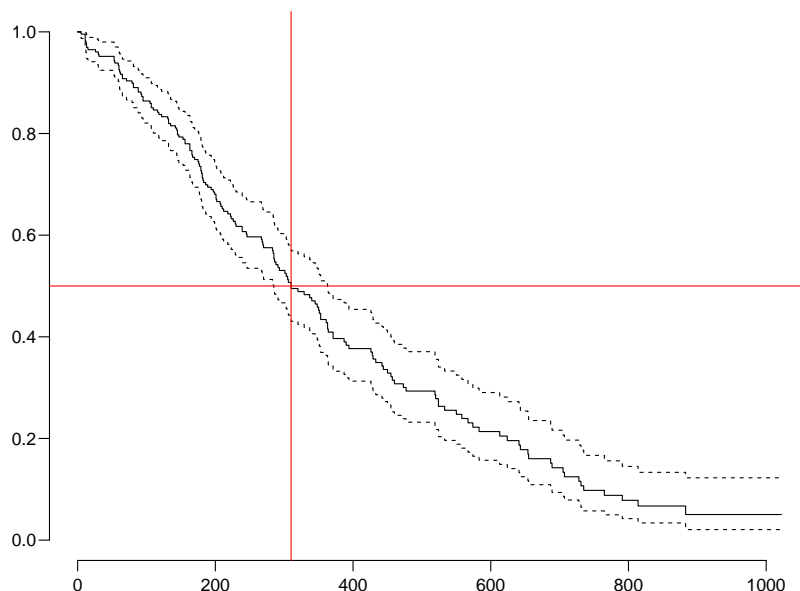
with( lung, Surv( time, status==2 ) )[1:10]

[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)

      n  events  median 0.95LCL 0.95UCL
 228   165    310    285    363

plot( s.km )
abline( v=310, h=0.5, col="red" )
```

Kaplan-Meier estimators (km-na)



Kaplan-Meier estimators (km-na)

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cox

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

The Cox-model (cox)

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 . . .

The Cox-model (cox)

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Interpreting Regression Coefficients

- ▶ If x_j is binary, $\exp(\beta_j)$ is the estimated hazard ratio for subjects corresponding to $x_j = 1$ compared to those where $x_j = 0$.
- ▶ If x_j is continuous, $\exp(\beta_j)$ 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. $\exp(\beta_j)$ 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

The Cox-model (cox)

Fitting a Cox- model in R

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

	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

The Cox-model (cox)

Fitting a Cox-model in R

```
c0 <- coxph( Surv(stop,event) ~ number + size, data=bladder )
c0
```

Call:

```
coxph(formula = Surv(stop, event) ~ number + size, data = bladder)
```

	coef	exp(coef)	se(coef)	z	p
number	0.20491	1.22742	0.07036	2.912	0.00359
size	0.06135	1.06327	0.10328	0.594	0.55254

Likelihood ratio test=7.04 on 2 df, p=0.02963
n= 85, number of events= 47

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 )
```

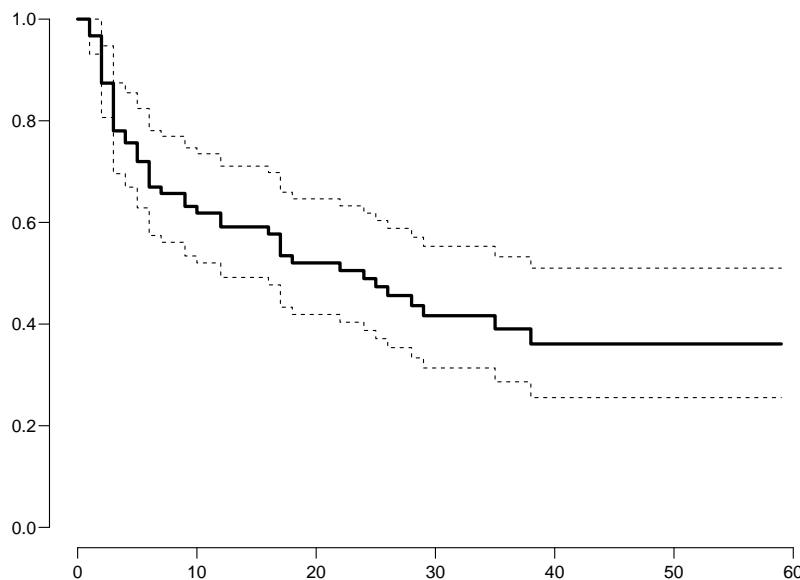
The `plot.coxph` plots the survival curve for a person with an average covariate value

— 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
```

The Cox-model (cox)



The Cox-model (cox)

Plotting the base survival in R

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

```
plot( survfit(c0) )  
lines( survfit(c0), conf.int=F, lwd=3 )  
lines( survfit(c0, newdata=data.frame(number=1,size=1)),  
       lwd=2, col="limegreen" )  
text( par("usr")[2]*0.98, 1.00, "number=1,size=1",  
      col="limegreen", font=2, adj=1 )
```

The Cox-model (cox)

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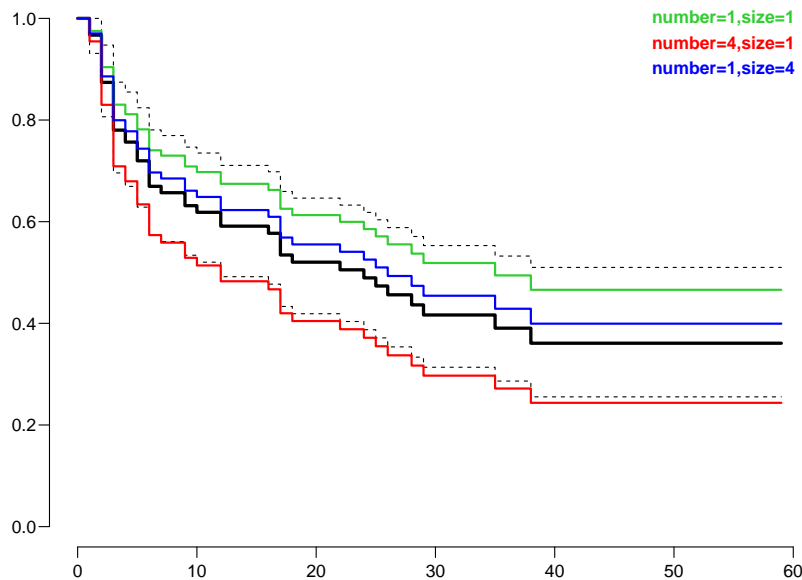
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The Cox-model (cox)

Who needs the Cox-model anyway?

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Competing risks
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29 November 2019

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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.

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 β s
 - ▶ Turns out to be Cox's partial likelihood
 - ▶ The full likelihood is that of a Poisson model

Who needs the Cox-model anyway? (WntCma)

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

Who needs the Cox-model anyway? (WntCma)

```
library(Epi)
library(popEpi)
library(mgcv)
library(survival)
data(lung)
lung <- transform( lung, sex=factor(sex,labels=c("M","F")),
                  time=time+runif(nrow(lung)) )
```

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

```
Lx <- Lexis( exit=list(tfe=time),
            exit.status=factor(status,labels=c("Alive","Dead")),
            data=lung )
```

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

Who needs the Cox-model anyway? (WntCma)

Split the follow-up in small intervals

```
sL <- splitMulti( Lx, tfe=c(0,sort(unique(Lx$lex.dur))) )
summary( Lx )
```

Transitions:

```
  To
From  Alive Dead  Records:  Events: Risk time:  Persons:
  Alive   63 165      228      165   69703.91      228
```

```
summary( sL )
```

Transitions:

```
  To
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:

Who needs the Cox-model anyway? (WntCma)

```
c0 <- coxph( Surv(tfe,tfe+lex.dur,lex.Xst=="Dead") ~ sex + age, data=Lx )
cx <- coxph.Lexis( Lx, tfe ~ sex + age )
```

survival::coxph analysis of Lexis object Lx:
Rates for the transition Alive->Dead
Baseline timescale: tfe

```
px <- glm.Lexis( sL, ~ factor(tfe) + sex + age )
```

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 )
```

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

Who needs the Cox-model anyway? (WntCma)

Compare estimates:

```
Ests <- cbind( rbind( ci.exp(cx,subset="sex"),
                    ci.exp(px,subset="sex"),
                    ci.exp(ps,subset="sex") ),
              rbind( ci.exp(cx,subset="age"),
                    ci.exp(px,subset="age"),
                    ci.exp(ps,subset="age") ) )
rownames(Ests) <- c("Cox","Pois-F","Pois-S")
colnames(Ests)[c(1,4)] <- c("sex","age")
round( Ests, 7 )
```

	sex	2.5%	97.5%	age	2.5%	97.5%
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

Who needs the Cox-model anyway? (WntCma)

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 )
```

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

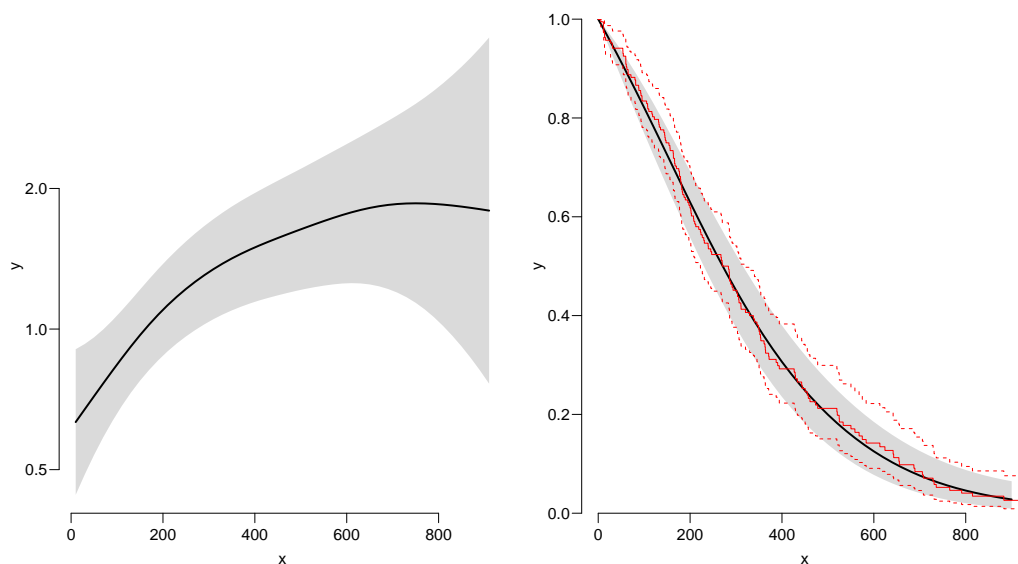
```
nd <- data.frame( tfe=seq(0,900,20)+10, sex="M", age=65 )
rate <- ci.pred( ps, nd )*365.25 # per year, not per day
surv <- ci.surv( ps, nd, int=20 ) # int is interval between times in nd
```

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' )
```

Who needs the Cox-model anyway? (WntCma)

Rates and survival, 65 year old man



Who needs the Cox-model anyway? (WntCma)

Multiple time scales

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Survival

Multiple timescales

Competing risks

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29 November 2019

Timescales

Mortality rates as a function of

- ▶ current age, a
- ▶ duration of diabetes, d
- ▶ age at diagnosis, $e = a - d$ (not a timescale!)
- ▶ $\Rightarrow a - d - e = 0$
 - this relation must be kept in any dataset

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

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

Multiple time scales (multi-scales)

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:

$$\begin{aligned}\log(\mu(a, d)) &= f(a) + h(e) + \beta d - \beta d \\ &= f(a) + h(e) + \beta(a - e) - \beta d \\ &= (f(a) + \beta a) + (h(e) - \beta e) - \beta d\end{aligned}$$

We can claim any duration effect we like!

Multiple time scales (multi-scales)

All three variables

Remember: $a - d - e = 0$

$$\begin{aligned}\log(\mu(a, d)) &= f(a) + g(d) + h(e) \\ &= f(a) + g(d) + h(e) + \gamma(a - d - e) \\ &= (f(a) + \gamma a) + (g(d) - \gamma d) + (h(e) - \gamma e) \\ &= \tilde{f}(a) + \tilde{g}(d) + \tilde{h}(e)\end{aligned}$$

It 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.

Multiple time scales (multi-scales)

Predicted mortality

age: current age; tfd: duration; ain: age at DX:

```
made <- gam.Lexis( transform(Sdm,ain=age-tfd), ~ s(age) + s(tfd) + s(ain) )
mad <- gam.Lexis( transform(Sdm,ain=age-tfd), ~ s(age) + s(tfd) )
```

```
anova( made, mad, test="Chisq" )
```

Analysis of Deviance Table

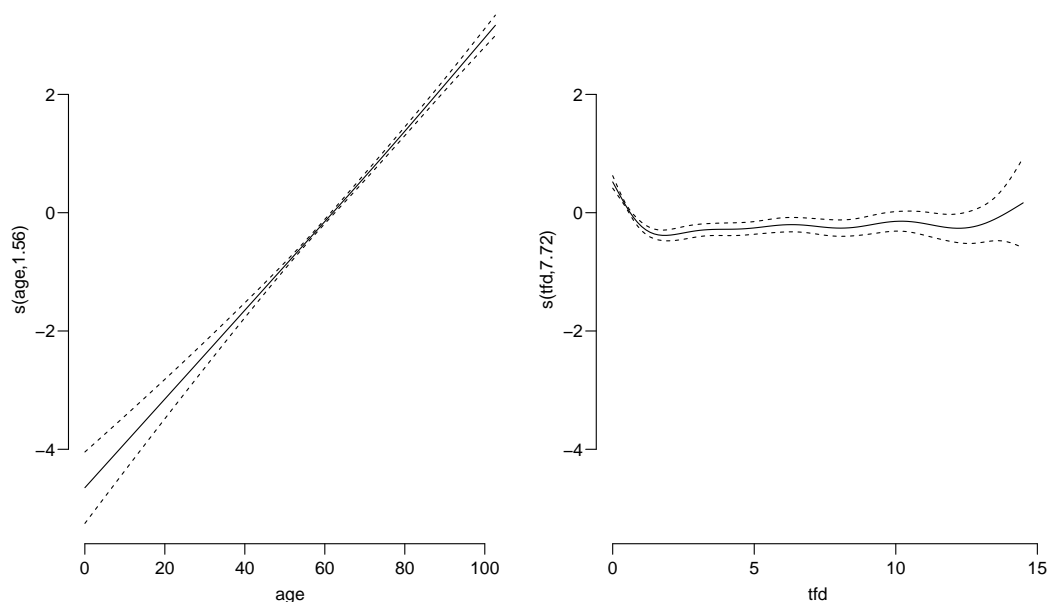
Model 1: cbind(trt(Lx\$lex.Cst, Lx\$lex.Xst) %in% trnam, Lx\$lex.dur) ~ s(age) + s(tfd) + s(ain)

Model 2: cbind(trt(Lx\$lex.Cst, Lx\$lex.Xst) %in% trnam, Lx\$lex.dur) ~ s(age) + s(tfd)

	Resid. Df	Resid. Dev	Df	Deviance	Pr(>Chi)
1	280378	24000			
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 (multi-scales)

Predicted mortality

```
nd <- data.frame( expand.grid( tfd=c(NA,seq(0,14,.1)),
                              ain=c(3:7*10) ) )[-1,]
nd$age = nd$ain + nd$tfd
head( nd )
```

tfd	ain	age
2	0.0	30 30.0
3	0.1	30 30.1
4	0.2	30 30.2
5	0.3	30 30.3
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.

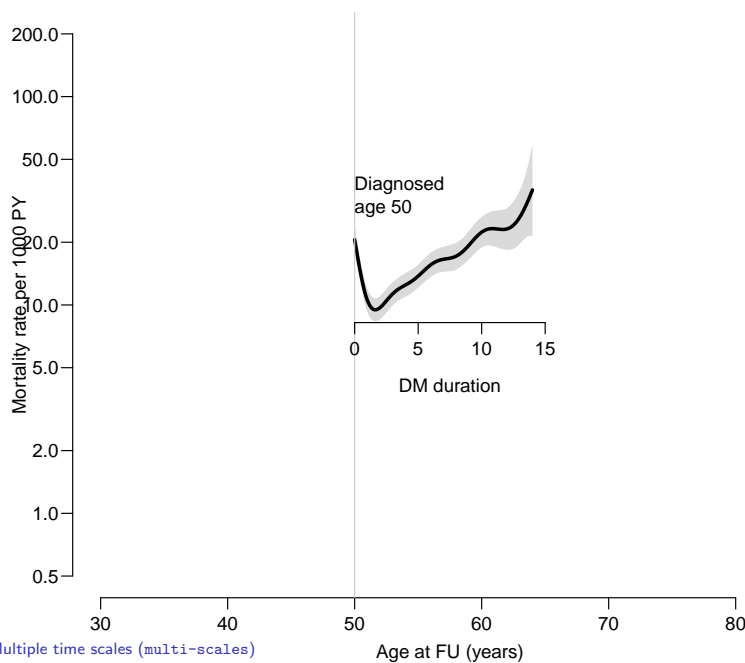
Multiple time scales (multi-scales)

Mortality rates, not effects

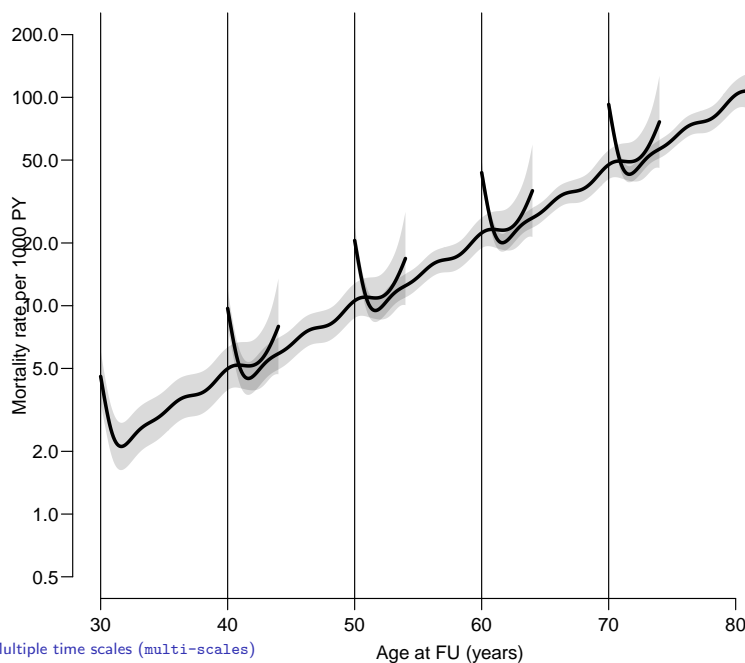
Predict mortality rates for Danish diabetes patients by age and duration of diabetes for persons diagnosed at ages 30, 40 etc.

```
matshade( nd$age, ci.pred( mad, nd )*1000, plot=TRUE,
          lwd=3, lty=1, log="y", las=1,
          xlim=c(30,85), ylim=c(1/2,200),
          xlab="Age at FU (years)",
          ylab="Mortality rate per 1000 PY" )
abline( v=3:7*10 )
```

Multiple time scales (multi-scales)



Multiple time scales (multi-scales)



Multiple time scales (multi-scales)

Analysis by sex

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

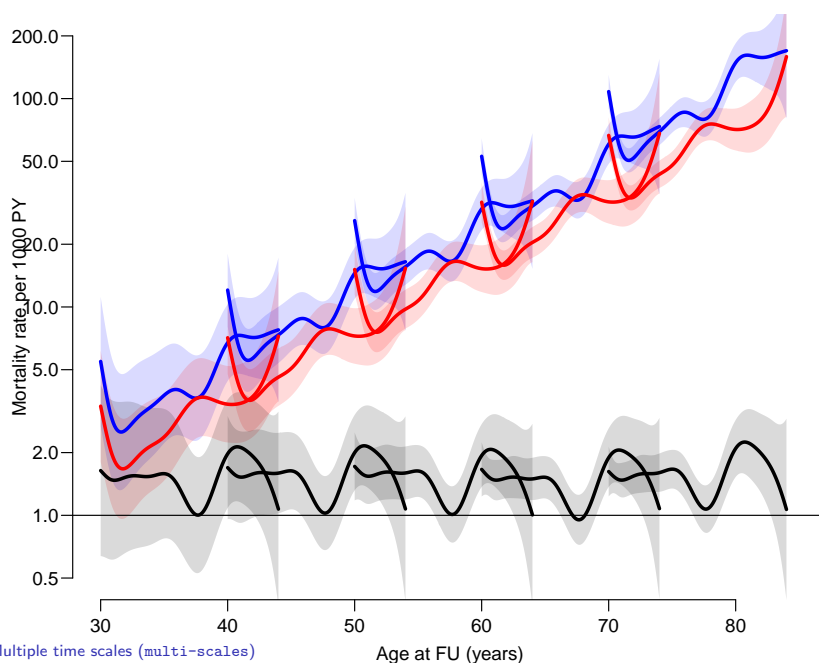
mgcv::gam Poisson analysis of Lexis object subset(Sdm, sex == "M") with log link:
Rates for the transition: Alive->Dead

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

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), ylim=c(1/2,200),  
          xlab="Age at FU (years)",  
          ylab="Mortality rate per 1000 PY" )  
abline( h=1 )
```

Multiple time scales (multi-scales)



Multiple time scales (multi-scales)

... for you

- ▶ What 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.

Multiple time scales (multi-scales)

Competing risks

Bendix Carstensen

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Survival

Multiple timescales

Competing risks

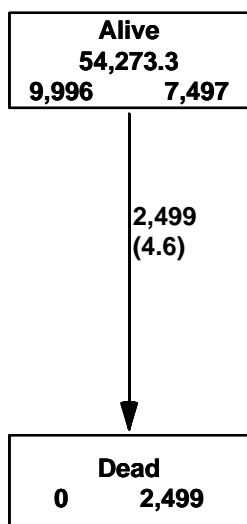
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comp-risk

Survival analysis

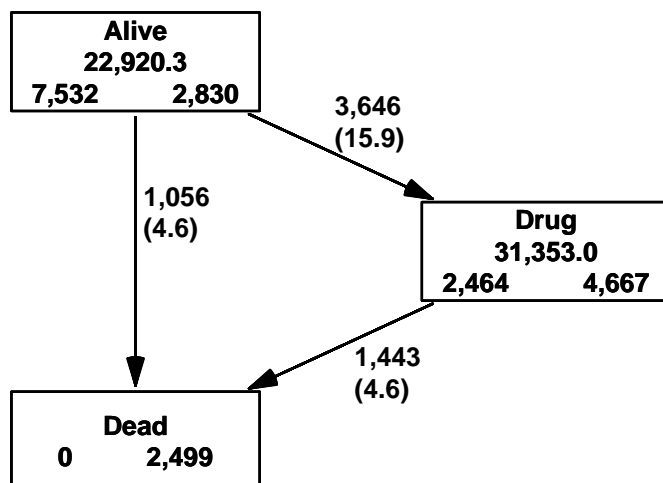


One rate (the arrow)
One probability — $P\{\text{alive at } t\}$

Some patients begin pharmaceutical treatment, they have follow-up **before Drug** treatment and **after** beginning **Drug** treatment

Competing risks (comp-risk)

Three states, three transitions



Competing risks (comp-risk)

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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

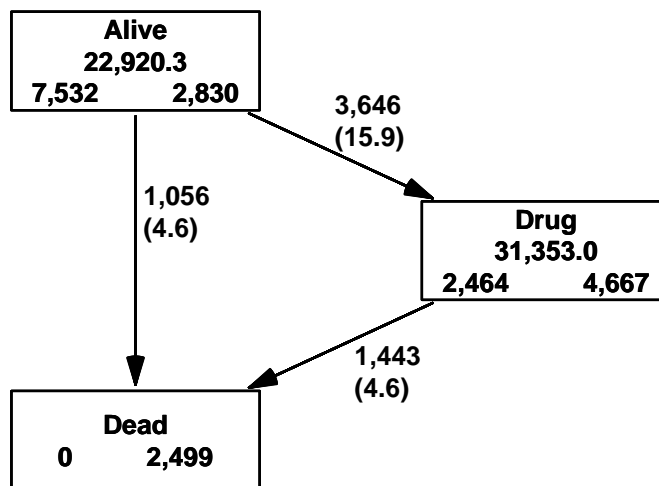
```
Sdm$dodr <- pmin(Sdm$doad,Sdm$doins,na.rm=TRUE)
S3 <- cutLexis( data = Sdm,
               cut = Sdm$dodr,
               timescale = "per",
               new.state = "Drug",
               precursor.states = "Alive" )
summary( S3 )
```

Transitions:
To

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
Sum	140147	141389	2499	284035	6145	54273.27	9996

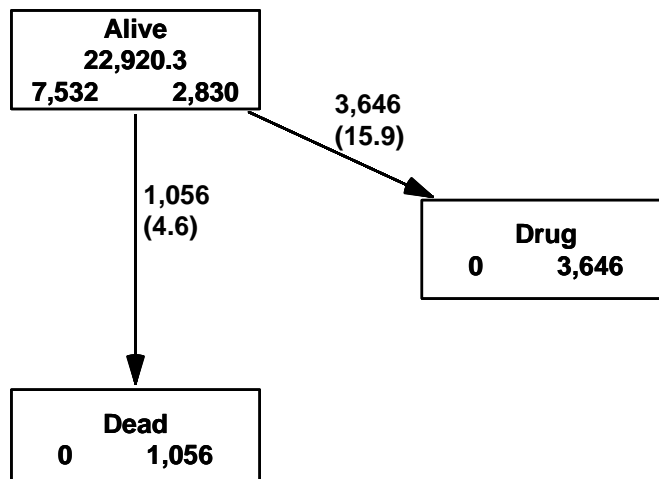
Competing risks (comp-risk)

Three states, three transitions



Competing risks (comp-risk)

Three states, two (competing) transitions



Competing risks (comp-risk)

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`:

```
m3 <- survfit( Surv( tfd, tfd+lex.dur, lex.Xst ) ~ 1,
               data = subset(S3,lex.Cst=="Alive"), id=lex.id )
```

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

Competing risks (comp-risk)

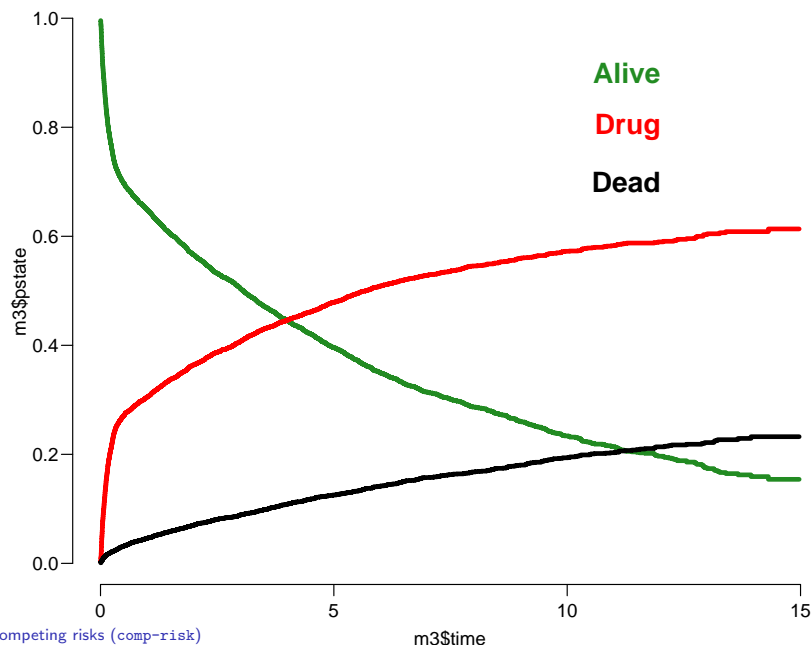
Competing risk analysis

```
m3 <- survfit( Surv( tfd, tfd+lex.dur, lex.Xst ) ~ 1,
               data = subset(S3,lex.Cst=="Alive"), id=lex.id )
head( cbind(time=m3$time,m3$pstate), 7 )
```

```
      time
[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
```

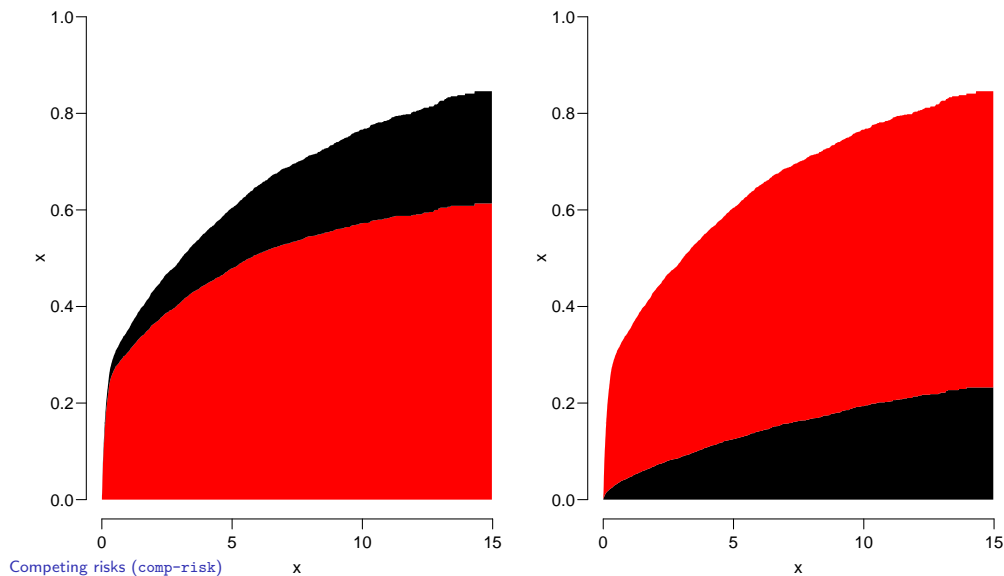
```
matplot( m3$time, m3$pstate,
         type="s", lty=1, lwd=4,
         col=c("forestgreen","red","black") )
text( 12, 9:7/10, levels(S3$lex.Xst), adj=1, font=2, cex=1.5,
      col=c("forestgreen","red","black") )
```

Competing risks (comp-risk)



Competing risks (comp-risk)

The stacked probabilities

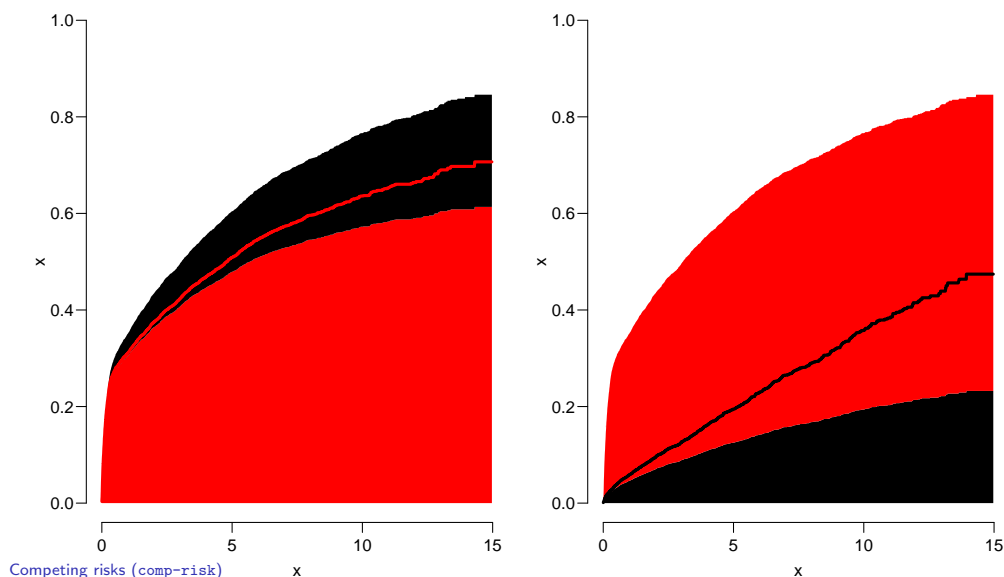


Getting it wrong

- ▶ 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.

Competing risks (comp-risk)

The stacked probabilities + the wrong ones



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

Competing risks (comp-risk)

Getting the maths right

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

$$S(t) = \exp\left(-\int_0^t \lambda(s) + \mu(s) ds\right)$$

- ▶ cumulative risk of Drug before time t is:

$$R_{\text{Drug}}(t) = \int_0^t \lambda(u) S(u) du = \int_0^t \lambda(u) \exp\left(-\int_0^u \lambda(s) + \mu(s) ds\right) du$$

— and similarly for cumulative risk of Dead

Competing risks (comp-risk)

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

Competing risks (comp-risk)

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

Competing risks (comp-risk)

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.

Competing risks (comp-risk)

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