# Practical Multistate Modeling with $\boldsymbol{R}$ and Epi::Lexis 

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## Preface

The first three words of the title of this book are meant literally. It has a particular emphasis on data-representation and -manipulation. Which also means that it is presented in terms of computer code for all analyses - in this case using R.

In order to analyze and report results from a multistate set-up you must have a proper overview of the raw data. That is provided by the Lexis machinery from the Epi package.

The other main focus is the outcome(s) of statistical analysis, i.e. the quantities that are desirable to derive from the data base, and how best to convey these to the audience.

The probability and statistical considerations in between the two are technicalities of lesser primary interest. But they are of crucial importance in getting the analysis right, and they should take the structure of the data into account. And hence they are carefully explained in relation to the structure of the basic data.

This is transmitted by worked examples that explain the rationale of analyses as well as the practical details from definition to final reporting.

Methodologically, the main focus will be on parametric models for intensity rates, as these are not only biologically credible but also the simplest approach to derivation of the quantities of interest.
...now input from intro

## Chapter 1

## Introduction

### 1.1 A simple multistate example

In figure 1.1 is an example where persons with diabetes (DM, diabetes mellitus) in Denmark have been followed from date of diagnosis of DM for initiation of insulin treatment and death in the period 1996-2009. Persons begin their follow-up either as persons with diabetes not on insulin (state DM) or as persons with DM currently treated with insulin (Ins).


Figure 1.1: Simple multistate model for beginning of insulin use and death among diabetes patients.
. ./graph/intro-box1

Those beginning without insulin can move to the insulin state some time during their follow-up. From either state persons can die; we keep track of whether persons were on insulin or not at the time of death by having two different death states. Some persons are still alive (in DM or in Ins) when follow-up is ended; we say that the follow-up of these persons is censored alive.

In figure 1.2 the model has been annotated with numbers derived from the database, showing:

- The total sojourn time (time spent) in state DM is $45,885.5$ years
- The total sojourn time (time spent) in state Ins is $8,387.8$ years
- 9,899 persons started the follow-up in the state DM, that is as persons with diabetes not using insulin. Out of these


Figure 1.2: Multistate model for beginning of insulin use and death among diabetes patients. The number in the center of each box is the total follow-up time. The numbers at the bottom of each state are the number of persons beginning, resp. ending their follow-up in the state. The numbers on the arrows are the number of transitions and in brackets the transition rates per 1000 person-years.
. ./graph/intro-box2

- 2,048 died without ever using insulin-corresponding to a mortality rate of $2,048 / 45,885.5 \mathrm{PY}=44.6$ per 1000 PY .
- 1,694 went on to use insulin-corresponding to a rate of beginning insulin of $1,694 / 45,885.5 \mathrm{PY}=36.9$ per 1000 PY .
- 6,157 reached end of follow-up (2009-31-12) alive while not using insulin
- 97 persons were already using insulin at the inclusion in the study
- There were $97+1.694=1791$ ever on insulin. Out of these
- 451 died on insulin-corresponding to a mortality rate of $451 / 8,387.8 \mathrm{PY}=53.8$ per 1000 PY .
- 1,340 reached end of follow-up (2009-31-12) alive while using insulin
- The mortality rates among persons on insulin is almost $20 \%$ higher than among those not on insulin ( 53.8 vs. 44.6 per 1000 PY).

The data base from which these numbers were derived is merely a set of dates for each person (some of which may be missing), namely:

- date of entry to the study
- date of first insulin use (which may be before or at the date of entry)
- date of death
- date of end of follow-up

So we see that we from information on 4 dates for each person can determine quite a number of characteristics of the follow-up of the DM population studied.

The information needed for a multistate model for each person is a set of pairs of (date in, date out, state); the date the person is first, respectively last seen in the state. We will also need to know the date where the person is last seen alive (the censoring data).In most practical clinical settings, the dates and corresponding states will also be the way data on persons are initially recorded.

### 1.1.1 Time scales

When modeling transition rates we may be interested in the effect of time-scales such as age and disease duration, which will require that the origins of these are recorded too, i.e. dates of birth, disease onset etc.

In general it is advisable to keep dates of all relevant events, it will facilitate calculation of other time-related quantities such as age and disease duration at given dates.

### 1.1.2 Transient and absorbing states

Two types of states are normally distinguished: transient and absorbing. Transient states are states from which it is possible to exit, absorbing states are states from which it is impossible to exit, typically death. In figure 1.2, the states DM and Ins are transient states, while Dead and Dead(Ins) are absorbing states.

### 1.2 Quantities of interest in multistate models

From the follow-up for the persons through the multiple states we can answer questions in three realms, quantities that all will be functions of one or more time scales:
rates, measured in time ${ }^{-1}$; this is the same scale as the observed data

- What are the mortality rates among persons on insulin and among persons not on insulin?
- What is the rate of beginning insulin treatment?
- How do the two mortality rates compare (rate-ratio or rate difference)?
probabilities, dimensionless, but requires an origin:
- As a function of time since some origin:
- What is the survival of diabetes patients since diagnosis (ignoring use of insulin)?
- What is the survival of diabetes patients since start of insulin?
- What is the cumulative risk of beginning insulin since the diagnosis of DM.
- What is the probability of ever visiting the insulin state?

Note that the origin may be defined arbitrarily; we could ask for conditional survival given survival to some fixed time point. This is also sometimes called landmarking.

- As a function of some time $t$ :
- What is the probability that a person who is in state A at time $t$ is in state B at a later time $t_{x}$ for some fixed $t_{x}(>t)$.
An example would be asking what the probability of survival till, say, 5 years $\left(t_{x}\right)$ after diagnosis is, given that you already survived $1,2, \ldots$ years $(t)$ after diagnosis
times, measured in units of time, requiring an interval (origin and endpoint)
- What is the expected lifetime after diagnosis of diabetes
- What is the expected lifetime spent without insulin?
- What is the expected lifetime spent using insulin?
- How much lifetime is lost between persons not on insulin and persons currently on insulin.
- How much time will a person spend in, say, state A, between times $t_{e}$ and $t_{x}$. This is sometimes called the sojourn time in state A.

Mathematically speaking, the first group (the rates) is at the same level as the basic observations-we observe data in the form of events and risk time, interpret able as rates (events per time, with dimension time ${ }^{-1}$ ). The second group (probabilities) are (transformations of the) integrals of the rates w.r.t. time, so of dimension time $\times$ time $^{-1}$, i.e. dimensionless. The third group of measures are integrals of the probabilities w.r.t. time, so of dimension time.

In practice we will also want to know how these quantities vary by age, sex calendar time etc. One way of doing this is modeling the rates as functions of these covariates. Note that so far we have not said anything about estimation of the rates, let alone the other quantities mentioned.

The rest of this book will show how to handle and analyze multistate data, in order to be able to answer questions as those above-after posing them in a precise (that is, answerable) form. Thus, as in most realms of statistics and data analysis it is not about what questions you would like to answer, but about the questions that are possible to answer from the available data. Listing the questions that are possible to answer tends to fool you to think that these are the only relevant ones. We shall however also touch on questions that cannot be answered in this framework.

The basis for answering the questions will be knowledge of the transition rates. So we should estimate them from data as accurately as possible. In real applications we will of course allow rates to depend on sex, age at diagnosis, current age etc., and thus let the derived measures depend on these factors as well.

### 1.3 Traditional approaches to rates

The prevailing approach to modeling of multistate event history data is via semi-parametric (some call it non-parametric) models for the transition rates. Which in most practical instances boils down to fitting Cox-models for transition rates, and using some variant of the Aalen-Johansen estimator to compute state occupancy probabilities.

Even if these are models for the rates, in practice only estimates of cumulative risk or survival are derived together with hazard ratios, but hardly ever are actual rates presented, see e.g. [7]. This is largely a consequence of the model structure that does not allow extraction of the baseline hazard-some may formulate it by saying that the hazard is not part of the model at all.

Royston \& Lambert [10] and Crowther \& Lambert [4] have reasonably argued that a more natural and biologically plausible model for transition rates would be a model that assumes some smooth shape of the rates as function of time.

Both of these approaches mainly use one timescale to describe occurrence rates, presumably because it is a requirement for the Aalen-Johansen machinery and its cousins to work. Incidentally this has also had the consequence that most example datasets only provide information of one time scale of interest. But in most practical applications the single time scale seems to be an over-simplification; I would personally have a hard time convincing my diabetes clinical colleagues that mortality among diabetes patients depend only on current age and not on diabetes duration, or vice versa. They would likely also maintain that age at diagnosis influence the mortality rates [5].

### 1.4 Components of multistate models

The machinery chosen for estimation of rates is alien to the discussion of what measures are of interest in description of the multistate model. It is therefore useful to separate the different components of modeling and reporting of measures of interest.

- model specification: what are the states of interest and relevant transitions between them.
- rate specification: what are the relevant covariates in the models for the rates, particularly what time scales to include in the description of the rates.
- specification of measures of interest: rates, rate-ratios, survival, cumulative risks, sojourn times, lifetime lost.
- practical derivation of the desired quantities from the estimated rates.

The first two points are prerequisites for constructing a data frame representing the follow-up through the multiple states, a so-called Lexis object.

The last point is in principle just an application of standard probability theory for stochastic processes using the estimated transition rates as building blocks to construct the quantities of interest. This is occasionally termed the "plug in" approach; estimates of the rates are plugged into the formulae linking the rates to the quantity of interest.

There are statistical methods around that do not rely on estimating rates.

### 1.5 Terminology

In the survival, multistate and demographic modeling literature there is a plethora of overlapping terms that mean the same, and also instances of the same term used about different concepts. Here are some groups of synonyms, the first one mentioned in each group being the one (mainly) used in this book.
cumulative intensity, integrated intensity, cumulative rate. Note that this is neither a probability nor a rate. Dimensionless.
cumulative risk, probability, risk; a probability. Dimensionless.
event, outcome-indicator of transition to a new state; the variable assumes only a finite number of values (namely the names of states to which transitions are considered events). Sometimes it is a count, occasionally restricted to 0,1 .
follow-up, history, observation, outcome, response-a bivariate structure consisting of (event indicator, risk time).
interaction, non-proportional hazards, see below under "time scale interaction".
rate, intensity, transition intensity, hazard, hazard rate, occurrence rate, mortality rate, morbidity rate, incidence density. Measured in units of time ${ }^{-1}$.
rate ratio, hazard ratio. Ratio of two rates. Sometimes wrongly termed relative risk or risk ratio. Dimensionless.
risk ratio, relative risk. Ratio of two probabilities. Dimensionless.
risk time, time, exposure time, follow-up time, exposure: time since a person entered observation-measured in units of time. It is always the difference between two points on a(ny) time scale. Measured in units of time.
sojourn time, time spent in a state, state time, expected life time in a state. Measured in units of time.
state probability, state occupancy probability Dimensionless.
time scale, time. Measured in units of time since some origin (such as date of birth and diagnosis, 1900-1-1, ...) Measured in units of time, an origin is however required.
time scale interaction, non-proportional hazards, violation of proportionality assumption, interaction between a time scale and some other variable(s).
transition probability dimensionless, a probability.

## Chapter 2

## Probability models for multiple states

This section requires a basic knowledge of matrix algebra.
There is a large mathematical theory about multistate models for transitions as shown in figure 1.1, though mostly for models with constant transition rates-Markov models. In the biomedical literature the term "Markov model" is frequently used as a term for just any multistate models. Here we stick to the more formal definition of a Markov model.

### 2.1 Markov models

A Markov ${ }^{1}$ model is a multistate model where the transition probabilities only depend on the current state, not on the history of the person and neither on how long time a person has been in a given state. This implies that the transition rates are constant over time. Probabilists call this a homogeneous Markov model or time-homogeneous Markov model.

If you can leave a state, the state is called a transient state, if you cannot, it is called an absorbing state. Absorbing states would normally be states like "Dead" or "Dead from cancer", but if we were only interested in whether a person had a diagnosis of cardiovascular disease (CVD) and we had no interest in what happened after that, we might define "CVD" as an absorbing state, meaning "CVD and whatever follows".

### 2.1.1 Transition matrix

For a multistate model we can define the transition matrix (really a matrix with functions as entries). Rows and columns are both labeled by the possible states. The entry in row labeled A and column labeled $B$ is the probability of being in state A at time $s$ and in state B at time $t$, more precisely:

$$
P_{\mathrm{AB}}(s, t)=\mathrm{P}\{\text { state } \mathrm{B} \text { at time } t \mid \text { state A at time } s\}
$$

Loosely speaking, the probability of moving from A to B sometime between $s$ and $t$, but note there is no requirement only to consider moves directly from A to B . In a time-homogeneous Markov model $P_{\mathrm{AB}}(s, t)$ only depend on $s$ and $t$ through $t-s$.

For the simple model shown in figure 1.1 the transition matrix would (at first glance) be a $4 \times 4$ matrix (we are omitting the dependence of $s$ and $t$ for notational convenience):

[^0]|  | to |  |  |  |  |  |  |  |
| ---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| from | DM | Ins | Dead | Dead(Ins) |  |  |  |  |
| DM | $1-p_{D I}-p_{D D}$ | $p_{D I}$ | $p_{D D}$ | 0 |  |  |  |  |
| Ins | 0 | $1-p_{I D}$ | 0 | $p_{I D}$ |  |  |  |  |
| Dead | 0 | 0 | 1 | 0 |  |  |  |  |
| Dead(Ins) | 0 | 0 | 0 | 1 |  |  |  |  |


where the rows represent states from which transitions occur and the columns represent states to which transitions occur.

This transition matrix has a 0 entry for the transition DM $\rightarrow \operatorname{Dead}($ Ins) which actually can occur in a given interval of time, namely by first $D M \rightarrow$ Ins and then Ins $\rightarrow \operatorname{Dead}($ Ins $)$. But if the time interval is sufficiently small the matrix above may be a decent approximation, because the probability of two transitions in a single very small interval will be ignorably small.

If we assume a Markov model, where the transition rates are constant over time, the transition probabilities would only depend on the difference between the two times, $t-s$. If we take the rates shown in figure 1.2 as constant, the one-month transition probabilities will be very close to the rates multiplied by $1 / 12$ year, so the one-month transition matrix will be (using: $0.0369 / 12=0.003076 ; 0.0446 / 12=0.003719$; $0.0538 / 12=0.004481$, adjusting the diagonal so that the row sums of the matrix are 1 ):

|  | to |  |  |  |
| ---: | :---: | :---: | :---: | :---: |
| from | DM | Ins | Dead | Dead(Ins) |
| DM | 0.993205 | 0.003076 | 0.003719 | 0 |
| Ins | 0 | 0.995519 | 0 | 0.004481 |
| Dead | 0 | 0 | 1 | 0 |
| Dead (Ins) | 0 | 0 | 0 | 1 |

This matrix tells that for a person with diabetes without insulin use after one month the probability of being in the same state is $99.32 \%$, and the probability of being on insulin is $0.31 \%$ and the probability of being dead is $0.37 \%$.

During the next month, the $99.32 \%$ of persons in the DM state will move to states Dead and Ins with probabilities $0.31 \%$ and $0.37 \%$, and the $0.31 \%$ in Ins at the end of the first month will move to Dead (Ins) with probability $0.45 \%$.

These operations can be recognized as matrix multiplications, where we start with the vector of state occupancy probabilities at the beginning of the first month as a $1 \times 4$ matrix:

```
> (p0 <- c(DM=1, Ins=0, Dead=0, "Dead(Ins)"=0))
    DM 1ns 
```

This just means that everyone is in the state DM at time 0 . Formally it is the probability distribution of states at time 0 , the sum of entries in such vectors will always be 1 .

The transition matrix is defined by the transition probabilities and the probabilities of remaining in a state as 1 minus the sum of the probabilities of leaving the state:

```
> Tm <- matrix(0, 4, 4)
> rownames(Tm) <- colnames(Tm) <- names(p0)
> Tm["DM","Ins"] <- 0.003076
> Tm["DM","Dead"] <- 0.003719
> Tm["Ins","Dead(Ins)"] <- 0.004481
> diag(Tm) <- 1 - apply(Tm, 1, sum)
> Tm
```

|  | DM | Ins | Dead | Dead(Ins) |
| :--- | ---: | ---: | ---: | ---: |
| DM | 0.993205 | 0.003076 | 0.003719 | 0.000000 |
| Ins | 0.000000 | 0.995519 | 0.000000 | 0.004481 |
| Dead | 0.000000 | 0.000000 | 1.000000 | 0.000000 |
| Dead(Ins) | 0.000000 | 0.000000 | 0.000000 | 1.000000 |

CODE EXPLAINED: Tm is first defined as a 4 by 4 matrix of 0 s , and assigned the state names both for row and columns. The transition probabilities are then assigned to the relevant entries in Tm. Finally apply is used so compute the row sums of Tm , and the diagonal is then filled filled with 1 minus the row-sums, so that row-sums of the resuting matrix Tm are all 1 .

### 2.1.2 Using the transition matrix

We can now compute the state occupancy probabilities after one month by matrix multiplication-this is when you should consult your knowledge of how to compute the matrix product of the $1 \times 4$ matrix p 0 with the $4 \times 4$ matrix Tm to form the vector (really a $1 \times 4$ matrix) of probabilities of being in each of the four states after one month. In R matrix multiplication is $\% * \%$ :

```
\(>(p 1<-p 0 \% * \% ~ T m)\)
    DM Ins Dead Dead (Ins)
\([1] \quad 0.9932050 .0030760 .003719 \quad\),
```

These are the probabilities of being in each of the states after one month, assuming you start in state DM. You will recognize p1 as the first row of Tm.

The handy thing is that we can compute the state occupancy probabilities after two, three etc. months the same way:

```
>(p2<- p1%*% Tm)
DM Ins Dead Dead(Ins)
[1,] 0.9864562 0.006117315 0.007412729 1.378356e-05
> (p3 <- p2 %*% Tm)
\begin{tabular}{rl} 
DM & Ins Dead \\
Dead(Ins)
\end{tabular}
```

We can see that after two months there is a positive, albeit small, probability of being dead after initiating insulin. That was not the case after one month, which is not quite true, it was merely a consequence of the assumption that two transitions do not occur during a single one month period.

If we want the probabilities at 60 months ( $=5$ years) we can use a loop:

```
> px <- p0
> for(m in 1:60) px <- px %*% Tm
> px
    DM Ins Dead Dead(Ins)
[1,] 0.6642535 0.1323121 0.1837588 0.0196756
```

Here we see that the 5 -year transition probability from DM to Dead (Ins) is about $2 \%$ and from DM to Dead about $18 \%$.

The 1-month transition probabilities are very well approximated by the rates multiplied by the length of the interval, e.g. $\lambda \ell$, but formally the probability of remaining in the DM state for a duration of $\ell$ is
$\exp (-(\lambda+\mu) \ell)$, the probability of being in the state Dead after a period of $\ell$ is
$\lambda /(\lambda+\mu) \times(1-\exp (-(\lambda+\mu) \ell))$ and the probability of being in the state Ins is
$\mu /(\lambda+\mu) \times(1-\exp (-(\lambda+\mu) \ell))$. We therefore use these formulae to populate the matrix of 1 month transition probabilities, starting with the rates:

```
> lambda <- 1694 / 45885.5
    muD <- 2048 / 45885.5
    muI <- 451 / 8387.8
SDM <- exp( -(lambda + muD) / 12)
SIn <- exp( - muI / 12)
> pDI <- lambda / (lambda + muD) * (1-SDM)
> pDD <- muD / (lambda + muD) * (1-SDM)
> pID <- 1 - SIn
```

CODE EXPLAINED: We first compute the rates (per 1 PY) from the numbers in figure 1.2 , then the 1 month survival probabilities for the two transient states, and finally the 1 month transition probabilities from the transient states.

If we use these numbers in the matrix Tm instead we get a slightly different transition matrix:

```
> Tm["DM","Ins"] <- pDI
> Tm["DM","Dead"] <- pDD
> Tm["Ins","Dead(Ins)"] <- pID
> diag(Tm) <- 0
> diag(Tm) <- 1 - apply(Tm, 1, sum)
> Tm
\begin{tabular}{lrrrr} 
& DM & Ins & Dead & Dead(Ins) \\
DM & 0.9932271 & 0.003066068 & 0.003706793 & 0.000000000 \\
Ins & 0.0000000 & 0.995529309 & 0.000000000 & 0.004470691 \\
Dead & 0.0000000 & 0.000000000 & 1.000000000 & 0.000000000 \\
Dead (Ins) & 0.0000000 & 0.000000000 & 0.000000000 & 1.000000000
\end{tabular}
```

We can then inspect how the state occupancy probabilities at 60 months are influenced by this different calculation:

```
> pm <- p0
> for(i in 1:60) pm <- pm %*% Tm
> round(cbind(appr = as.vector (px),
+ theor = as.vector(pm),
+ diff = as.vector(pm-px)), 5)
    appr theor diff
[1,] 0.66425 0.66514 0.00089
[2,] 0.13231 0.13201-0.00030
[3,] 0.18376 0.18327-0.00049
[4,] 0.01968 0.01958-0.00010
```

We see that the difference between the two approaches is negligible; less than $1 / 1000$ on the probability scale, so for small intervals, or more precisely for small transition probabilities we get a reasonable approximation.

### 2.1.3 Multiple transitions in the same time interval

In the above, we have made the formally incorrect assumption that a person cannot within the same month both move to the Ins state and then further to the Dead (Ins) state. This is most likely a reasonable approximation for a 1 month interval, but we can empirically investigate how other interval lengths perform relative to this.

First we do the calculations by 3-month intervals-stored in p3:

```
> SDM <- exp( - (lambda + muD) / 4)
> SIn <- exp( - muI / 4)
> pDI <- lambda / (lambda + muD) * (1-SDM)
> pDD <- muD / (lambda + muD) * (1-SDM)
> pID <- 1 - SIn
> T3 <- Tm * O
> T3["DM","Ins"] <- pDI
> T3["DM","Dead"] <- pDD
> T3["Ins","Dead(Ins)"] <- pID
> diag(T3) <- 1 - apply(T3, 1, sum)
> p3 <- p0
> for(i in 1:(5*3)) p3 <- p3 %*% T3
```

Then the same by 1-week intervals ( $1 / 52$ year)—stored in pw:

```
> SDM <- exp( -(lambda + muD) / 52)
> SIn <- exp( - muI / 52)
> pDI <- lambda / (lambda + muD) * (1-SDM)
> pDD <- muD / (lambda + muD) * (1-SDM)
> pID <- 1 - SIn
> Tw <- Tm * O
> Tw["DM","Ins"] <- pDI
> Tw["DM","Dead"] <- pDD
> Tw["Ins","Dead(Ins)"] <- pID
> diag(Tw) <- 1 - apply(Tw, 1, sum)
> pw <- p0
> for(i in 1:(5*52)) pw <- pw %*% Tw
```

Finally we do the same by 1-day intervals (1/365 year)—stored in pd:

```
> SDM <- exp( - llambda + muD) / 365)
> SIn <- exp( - muI / 365)
> pDI <- lambda / (lambda + muD) * (1-SDM)
> pDD <- muD / (lambda + muD) * (1-SDM)
> pID <- 1 - SIn
> Td <- Tm * 0
> Td["DM","Ins"] <- pDI
> Td["DM","Dead"] <- pDD
> Td["Ins","Dead(Ins)"] <- pID
> diag(Td) <- 1 - apply(Td, 1, sum)
> pd <- pO
> for(i in 1:(5*365)) pd <- pd %*% Td
```

We have now made the calculations using intervals of length 3 and 1 months, 1 week and 1 day. Clearly, the calculation using 1 day intervals must be the most accurate because the assumption about no two transitions during 1 day is the least restrictive.

We can now compare the estimated 5 -year state probabilities from the different approximations; as well as the difference to the 1-day approximation:

```
> five <- cbind("3mon" = as.vector(p3),
    "1mon" = as.vector(pm),
    "week" = as.vector(pw),
    "day" = as.vector(pd),
    "3-d" = as.vector(p3-pd),
    "m-d" = as.vector(pm-pd),
    "w-d" = as.vector(pw-pd))
rownames(five) <- names(p0)
round(five, 6)
    3mon 1mon week day 3-d m-d w-d
DM 0.736522 0.665142 0.665142 0.665142 0.071380 0.000000 0.0e+00
Ins 0.108193 0.132011 0.131783 0.131725 -0.023532 0.000286 5.8e-05
Dead 0.144202 0.183268 0.183268 0.183268 -0.039066 0.000000 0.0e+00
Dead(Ins) 0.011083 0.019579 0.019806 0.019865 -0.008782 -0.000286 -5.8e-05
```

So we see that the approximation when using 3 month is really bad, whereas the difference between the results from using a month, a week or a day as interval are quite small. Inspection of the transition matrices Tm , Tw and Td would indicate that it is wise to make the intervals so small that we keep transition probabilities to transient states to $1 / 1000$ or less.

### 2.1.4 The analytic solution

Of course there is a mathematical solution corresponding to making the intervals smaller and smaller ad infinitum. This is based on the intensity matrix that has the rates (transition intensities) in the off-diagonal entries and the diagonal adjusted so that the row-sums are 0 :

```
Q <- Tm * O
Q["DM","Ins"] <- lambda
Q["DM","Dead"] <- muD
Q["Ins","Dead(Ins)"] <- muI
diag(Q) <- -apply(Q, 1, sum)
> Q
```

|  | DM | Ins | Dead | Dead(Ins) |
| :--- | ---: | ---: | ---: | ---: |
| DM | -0.08155082 | 0.03691798 | 0.04463284 | 0.00000000 |
| Ins | 0.00000000 | -0.05376857 | 0.00000000 | 0.05376857 |
| Dead | 0.00000000 | 0.00000000 | 0.00000000 | 0.00000000 |
| Dead (Ins) | 0.00000000 | 0.00000000 | 0.00000000 | 0.00000000 |

The mathematically accurate transition probability matrix for say 5 years is then $\operatorname{Exp}(Q \times 5)$ years, where Exp here is the matrix exponential function ${ }^{2}$. Of course it does not make any sense to have a scaled quantity such as the rates in the matrix $Q$, the entries we put there were really the 1-year integrated intensities (dimensionless), and the expression $Q \times 5$ is the matrix of 5 -year integrated intensities. As always it is important to keep track of the units in which quantities are measured.

Calculation of the matrix exponential is implemented in the function MatrixExp in the msm package. .
The 5-year transition matrix based on 1-day transition probabilities with an assumption of no two transitions in one day is:

```
> T5 <- Td
> for(i in 2:(365*5)) T5 <- T5 %*% Td
> T5
\begin{tabular}{lrrrr} 
& DM & Ins & Dead & Dead(Ins) \\
DM & 0.6651424 & 0.1317249 & 0.1832679 & 0.01986481 \\
Ins & 0.0000000 & 0.7642634 & 0.0000000 & 0.23573664 \\
Dead & 0.0000000 & 0.0000000 & 1.0000000 & 0.00000000 \\
Dead (Ins) & 0.0000000 & 0.0000000 & 0.0000000 & 1.00000000
\end{tabular}
```

CODE EXPLAINED: The transition matrix for a period of two days is merely the matrix product of Td by itself. For three days we should multiply by Td once more. And for 5 years a total of $365 \times 5$ times.

The mathematically accurate calculation is:

```
> library(msm)
> (Q5 <- MatrixExp(Q * 5))
\begin{tabular}{lrrrr} 
& DM & Ins & Dead & Dead(Ins) \\
DM & 0.6651424 & 0.1317152 & 0.1832679 & 0.01987451 \\
Ins & 0.0000000 & 0.7642634 & 0.0000000 & 0.23573664 \\
Dead & 0.0000000 & 0.0000000 & 1.0000000 & 0.00000000 \\
Dead (Ins) & 0.0000000 & 0.0000000 & 0.0000000 & 1.00000000
\end{tabular}
```

> Q5 - T5

|  | DM | Ins | Dead | Dead(Ins) |
| :--- | ---: | ---: | ---: | ---: |
| DM | $-1.44329 \mathrm{e}-15$ | $-9.702158 \mathrm{e}-06$ | $1.720846 \mathrm{e}-15$ | $9.702158 \mathrm{e}-06$ |
| Ins | $0.00000 \mathrm{e}+00$ | $-7.083223 \mathrm{e}-14$ | $0.000000 \mathrm{e}+00$ | $7.152612 \mathrm{e}-14$ |
| Dead | $0.00000 \mathrm{e}+00$ | $0.000000 \mathrm{e}+00$ | $0.000000 \mathrm{e}+00$ | $0.000000 \mathrm{e}+00$ |
| Dead (Ins) | $0.00000 \mathrm{e}+00$ | $0.000000 \mathrm{e}+00$ | $0.000000 \mathrm{e}+00$ | $0.000000 \mathrm{e}+00$ |

So we see that there is no practically noticeable difference between the two transition matrices.
Finally note that the first row of Q5 is practically identical the 5 -year state probabilities computed using the 1-day transition probabilities:

|  | Q | pD |
| :---: | :---: | :---: |
| DM | 0.66514243 | 0.66514243 |
| Ins | 0.13171520 | 0.13172491 |
| Dead | 0.18326785 | 0.18326785 |
| Dead (Ins) | 0.01987451 | 0.01986481 |

[^1]
### 2.1.5 States by time

In the loops above we computed the probability of being in each state at a certain time, specifically at 5 years after entry. We can redo the calculations while at the same time collecting the state probabilities and then plot the state probabilities as a function of time (we make the calculation to 10 years this time):

```
> pt <- NArray(list(month = 0:120,
+ state = names(p0)))
> pt["O",] <- pO
> for(i in 1:120) pt[i+1,] <- pt[i,] %*% Tm
> pt[1:5,]
    state
month DM Ins Dead Dead(Ins)
    0 1.0000000 0.00000000000.000000000 0.000000e+00
    1 0.9932271 0.003066068 0.003706793 0.000000e+00
    2 0.9865001 0.006097663 0.007388481 1.370744e-05
    3 0.9798187 0.009095079 0.011045233 4.096821e-05
    4 0.9731825 0.012058609 0.014677218 8.162949e-05
```

CODE EXPLAINED: pt will be an array of dimension 121 by 4 , where the rows refer to the times $0,1,2, \ldots, 120$ months, and each column represents one of the 4 states. The first row (labeled " 0 ") is assigned the initial state distribution ( $1 \mathrm{in} \mathrm{DM}, 0$ in the rest), and the remaining are computed from the previous distribution by multiplying by the transition matrix.

We can now plot these 4 probabilities as functions of time by stacking them—remember at any time after entry, the sum of these 4 probabilities is 1 :

```
> par(mar=c(3,3,1,2))
m2p <- mat2pol(pt, perm = c(1,2,4,3), x=0:120 / 12,
    col = c(cl <- c("forestgreen", "orange"),
        adjustcolor(cl[2:1], 0.5)),
    xaxs = "i", xlab = "Time since DM (years)",
    yaxs = "i", ylab = "State probability")
lines(0:120/12, m2p[,3], lwd=2)
mid <- function(x) x[-1] - diff(x)/2
text(rep(9, 4),
    mid(m2p[9*12,]),
    colnames(m2p)[-1],
    col = gray(c(1,1,0,0)))
axis(side = 2, at = 0:10 / 10, labels = NA, tcl=-0.3)
axis(side = 4, at = 0:10 / 10)
axis(side = 4, at = 0:20 / 20, labels = NA, tcl=-0.3)
axis(side = 4, at = 0:100/100, labels = NA, tcl=-0.2)
> axis(side = 4, pos = 5, col = "white", at = 0:10 / 10, labels = NA)
> axis(side = 4, pos = 5, col = "white", at = 0:20 / 20, labels = NA, tcl=-0.3)
> axis(side = 4, pos = 5, col = "white", at = 0:100/100, labels = NA, tcl=-0.2)
```

CODE EXPLAINED: mat2pol (matrix 2 polygons) takes the matrix of state probabilities (pt) as input and show them as stacked coloured polygons, ordered as indicated by perm=. The lines draws the survival curve in black ( $3^{\text {rd }}$ column of the m 2 p ; where m 2 p is the result from met2pol).

Finally, the midpoint of the polygons at 9 years is computed (via the ad-hoc function mid) and the state names put on the plot.

In this simple instance with constant rates we could have made the calculations using the facility in MatrixExp to compute the transition matrix from time 0 to a range of times, and then take the first row as representing the state probabilities of a person beginning in the state DM:

```
> qm <- MatrixExp(Q, 0:120/12)
> str (qm)
    num [1:4, 1:4, 1:121] 1 0 0 0 0 1 0 0 0 0 ...
> qm <- t(qm[1,,])
> str (qm)
num [1:121, 1:4] 1 0.993 0.987 0.98 0.973 ...
```



Figure 2.1: State probabilities for DM and Ins from a time-homogenaous Markov model. This is the model shown in figure 1.2 with constant transition rates between states. The green area is the DM state, the orange is the Ins state, and the corresponding pale areas are the two Dead states as annotated. The vertical extent of each color at a given time represents the state probability at that time, conditional on being in the DM (green) state at time 0 (which is the date of DM diagnosis).

Using the scale on the r.h.s. of the plot we can for example see that some $25 \%$ of patients have started insulin during the first 10 years ( $69--44 \%$ ), and that $31 \%$ have died without using insulin ( $100-69 \%$ ). Using the white scale located at 5 years, we can see that some $15 \%$ started insulin during the first 5 years.
../graph/probs-stDMIns

CODE EXPLAINED: We supply a $4 \times 4$ intensity matrix as the first argument to MatrixExp and 121 time points from 0 to 10 years in 1 -month intervals as the second. The results will be a $4 \times 4 \times 121$ array with each of the 121 slices equal to the transition matrix from time 0 to the corresponding time.

Taking the first row of each of these matrices (qm [1, ,]) is the same as pre-multiplying with the state distribution at time $0,(1,0,0,0)$. Therefore, the first row of qm represents the same state probabilities as pt that we computed using the 1-day approximation above.

### 2.2 Time varying rates: inhomogeneous Markov model

The calculations above are easy to program because we have the same transition matrix for every month (i.e. time interval)-it is the same transition matrix every month. This is also the background for the
applicability of the matrix exponential. If rates were not constant, the matrix exponential machinery would not work.

But the transition matrix need not be the same for all months, we could have different transition matrices for each month; as long as all the transition rates are constrained to vary along the same time scale, we can be sure that all persons in any state at any given time have the same transition rates out of the state. Or more simply put, we can be sure that the persons in any one state at any one time are identical w.r.t. transition rates.

A Markov model (or more precisely, a Markov process) with transition intensities varying by time is called a (time-) inhomogeneous Markov model.

In the example above we would have transition rates to depend in some functional form on time since entry, in this case time since diagnosis, in other words on duration of diabetes.

A representation of the time-varying transition rates would then have to be in a form of an array of dimensions states $\times$ states $\times$ times, in the case of 1-month transition probabilities over 5 years of dimension $4 \times 4 \times 120$, and the calculation would change from:
> for (i in 1:120) pt[i+1,] <- pt[i,] \%*\% Tm
to:
> for(i in 1:120) pt[i+1,] <- pt[i,] \%*\% Tm[,,i]
So the matrix machinery would only change slightly, but there would be considerably more effort defining Tm ; in the Markov case it is a $4 \times 4$ matrix, in the latter case it is a $4 \times 4 \times 120$ array, requiring knowledge of the transition probabilities for 120 different intervals. The core assumption here is that all the transition rates vary along the same time scale; in this example it would be time since DM diagnosis.

### 2.3 Semi-Markov models

A semi-Markov model is a multistate model where the transition intensity varies by time since entry to each state.

This type of model will not lend itself to the type of calculations by simple matrix algebra as above. This is because "time" means different things in different states; in state DM it is time since DM diagnosis, in state Ins it is time since beginning of insulin therapy. If we in the state Ins refer to time since DM diagnosis, we will be facing the fact the persons at the same time since DM will have different times since beginning of insulin therapy and hence different transition rates to Dead. And in the DM state we cannot refer to time since beginning of insulin therapy.

A calculation where we successively multiply the state probability vector with the current transition probability matrix rests on the assumption that all persons in any given state at a given time have the same transition probabilities to other states, so the semi-Markov assumption violates this. Thus the calculation of state probabilities in semi-Markov models is not possible with the matrix machinery outlined above.

The semi-Markov model is also occasionally called the "clock-back" model-time starts at 0 at each transition to a new state.

### 2.4 Multiple time scales for rates

Suppose transition rates out of a state depend on another time scale such as age, as well as time since entry to the state. If persons have arrived at different ages, the state will at any given age comprise persons with different time in the state and hence with different transition probabilities. Conversely, at a given time after entry the state will comprise persons at different ages and hence with different transition probabilities. So facing the same problems as in the semi-Markov case.

But this type of model is really the most realistic for transition rates; one time scale throughout for all transition rates from all states is really not a very realistic assumption in real world applications. With the possible exception of calculation of classical demographic measures using age as the only time scale.

If we want to entertain this type of models (or semi-Markov models) for transition rates and compute state probabilities we must resort to simulation: Begin with one person in the initial state, simulate a time and state of transition using the rates out of the initial state. Then, for the time and the state the persons
arrived in, simulate the next transition etc. That gives transition times and -states for this person. If this is repeated for, say, 1000 persons, we will have a simulated dataset where we know who is in what state at any time, and the relevant probabilities can then be computed as the empirical fractions of the initial 1000 persons known to be in each state at a given time.

This machinery is frequently referred to as micro-simulation; we will return to this in chapter ??.

### 2.5 Summary of rate models for transitions

We have four levels of complexity in models for transition intensities; these represent decreasingly strict assumptions about the transition rates, which translates to increasing complexity in computing state probabilities. But also to increasing biological credibility of the models.

The naming of the models (except for item 4) comes from probability theory:

1. Homogeneous Markov: All transition rates are constant over time. This allows calculation of state probabilities using the matrix exponential on the transition intensity matrix. This can be closely approximated by successive matrix multiplication of the state probability vector by the transition probability matrix.
2. Inhomogeneous Markov: Transition rates vary over time but all transition rates vary along the same time scale. This allows calculation of state probabilities by successive multiplication of the state probability vector by the time-specific transition probability matrices. The use of the matrix exponential is not possible.
3. Semi Markov: Transition rates from different states vary by time since entry to the state, so along different time scales in different states. This makes calculations of state probabilities using transition probability matrices impossible. In fact a transition matrix is not even well-defined because transitions from a given state is different between the persons in the state-they may have arrived in the state at different times.
4. Multiple timescales: Transition rates depend on more than one time scale, such as current age and current duration of diabetes. It is by far the most realistic in practical settings, but it requires micro-simulation to compute state probabilities for a given initial state configuration.

The first (homogeneous Markov) model is rarely used, except for exploratory analyses to give a broad overview of the magnitude of transition rates, as for example the ones given on the arrows in figure 1.2.

The second (inhomogeneous Markov) model is by far the the most used in practice because it allows calculations of state probabilities using non-parametric models for the time effects. This is the realm of the Kaplan-Meier and Aalen-Johansen estimators of state proabilities. The drawback of the non-parametric estimators is that you hardly ever get to see estimated rates. Some will even claim that the rates are not part of these models. But the main problem is that the estimated probabilities refer to the study population at hand-hardly ever generalizable.

It is only for the two cases of Markov models (types 1 and 2) that the general probability theory for Markov models is applicable in practise, for the last two the general theory using the transition matrices does not apply. When dealing with the more realistic types of models (types 3 and 4), parametric models for the transition intensities with timescales as covariates are preferable, particularly because this type of model facilitates micro-simulation of data. The concept of micro-simulation is covered in chapter 7.

## Chapter 3

## Multistate likelihood: rates

When fitting statistical models to observed data, the standard procedure is to use maximum likelihood, which means that we find the values of model parameters that maximizes the probability of the observed data. Therefore we must be able to compute the probability of observing a given set of follow-up data from a multistate model as a function of the model parameters. This is what is derived in this chapter.

But you will not find a full exposition of the theory of maximum likelihood here. It suffices to know that the likelihood machinery allows calculation of uncertainty of parameters based on the likelihood function alone, so we need to establish the likelihood for multistate observations, in order to come up with parameters and associated uncertainties.

Outcome data from a multistate model consists of risk time in each state and the (type of) event (if any) at the end of this, often several observations per person. Normally a number of covariates will be available for each of these observations, including one or more time scales.

In practice the available data for a person is a sequence of dates: date of entry to the study, dates of each event, and date of end of study-often date of death will be both an event time as well as end of study time. If date of birth is available we will also have age available as a covariate; similarly for other dates: date of diagnosis will allow calculation of the disease duration, etc.

The point here is that we observe transition rates as a bivariate observation of time at risk and no. of events ( 0 or 1 ) of each possible type.

### 3.1 Survival model

The simplest multistate model is a survival model with states Alive and Dead and one possible transition; that from Alive to Dead. From this model we can estimate 1) the mortality rate (typically as a function of age or time since entry), 2) as a transformation of the integral of this, the survival function and 3 ) as the integral of the survival, the expected lifetime.

So even in the simplest possible case we have all three types of derived measures mentioned in section available.

The basic observation for each person is the (empirical) rate in the form $(d, y)$, where $d$ is the event count ( 0 or 1 ) and $y$ is the risk time, i.e. the time the person has been at risk of dying. Some formulate this as the survival time $T$ and the indicator $\delta$ of whether the person died or was censored at time $T$.

In order to derive the probability of this as a function of the occurrence rate we need a precise definition of a theoretical mortality rate. This is defined as the probability of death in small interval, relative to the length of the interval ( $h$ ). The rate is often called $\lambda$ (the Greek letter "lambda"):

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

Formally, the rate is the limit of this quantity as $h \rightarrow 0$.

### 3.1.1 Likelihood for a single rate

To derive the likelihood we must compute the probability of an observation from a single person as a function of the rate. Suppose a person is alive from time $t_{e}$ (entry) to $t_{x}$ (exit) and that the person's status
at $t_{x}$ is $d$, where $d=0$ means alive and $d=1$ means dead. If we choose, say, two time points, $t_{1}, t_{2}$ between $t_{e}$ and $t_{x}$, standard use of conditional probability (formally, repeated use of Bayes' formula) gives

$$
\begin{align*}
\mathrm{P}\left\{d \text { at } t_{x} \mid \text { entry at } t_{e}\right\}= & \mathrm{P}\left\{\text { survive }\left(t_{e}, t_{1}\right] \mid \text { alive at } t_{e}\right\} \times \\
& \mathrm{P}\left\{\text { survive }\left(t_{1}, t_{2}\right] \mid \text { alive at } t_{1}\right\} \times \\
& \mathrm{P}\left\{\text { survive }\left(t_{2}, t_{x}\right] \mid \text { alive at } t_{2}\right\} \times \\
& \mathrm{P}\left\{d \text { at } t_{x} \mid \text { alive just before } t_{x}\right\} \tag{3.1}
\end{align*}
$$

By choosing more intermediate time points we can make the intervals arbitrarily small, so we just need to derive the probability of surviving a small piece of time, as a function of the mortality rate.

For a start assume that the mortality is constant over time $\lambda(t)=\lambda$. From the definition of a rate we have (conditional on being alive at $t$ ):

$$
\begin{align*}
& \mathrm{P}\{\text { death during }(t, t+h]\} \approx \lambda h  \tag{3.2}\\
& \quad \Rightarrow \mathrm{P}\{\text { survive }(t, t+h]\} \approx 1-\lambda h
\end{align*}
$$

where the approximation gets better the smaller $h$ is. Suppose we have survival for a time span $y=t_{x}-t_{e}$ and that this is subdivided in $N$ intervals, each of length $h=y / N$, then the survival probability for the entire span from $t_{e}$ to $t_{x}$ is the product of probabilities of surviving each of the small intervals, conditional on being alive at the beginning of each interval:

$$
\mathrm{P}\left\{\text { survive } t_{e} \text { to } t_{x}\right\} \approx(1-\lambda h)^{N}=\left(1-\frac{\lambda y}{N}\right)^{N}
$$

From mathematics it is known that $(1+x / n)^{n} \rightarrow \exp (x)$ as $n \rightarrow \infty$ (some define $\exp (x)$ this way). So if we divide the time span $y$ in successively smaller pieces we will have that $N \rightarrow \infty$, and hence that:

$$
\begin{equation*}
\mathrm{P}\left\{\text { survive } t_{e} \text { to } t_{x}\right\} \approx\left(1-\frac{\lambda y}{N}\right)^{N} \rightarrow \exp (-\lambda y), \quad N \rightarrow \infty \tag{3.3}
\end{equation*}
$$

Therefore the contribution to the likelihood from a person observed for a time span of length $y$ is $\exp (-\lambda y)$, and the contribution to the log-likelihood is therefore $-\lambda y$.

If we observe a person dying at the end of the last interval, the contribution to the likelihood from the last interval will be the probability surviving till just before the end of the interval, multiplied by the probability of dying in the last tiny instant (of length $\epsilon$ ) of the interval (the last term in (3.1)). This probability is by (3.2) $\lambda \epsilon$, and hence the log-likelihood contribution from this last instant is $\log (\lambda \epsilon)=\log (\lambda)+\log (\epsilon)$.

The total likelihood for one person is the product of all these terms from the follow-up intervals $(i)$ for the person; and the log-likelihood $(\ell)$ is therefore:

$$
\begin{aligned}
\ell(\lambda) & =-\lambda \sum_{i} y_{i}+\sum_{i} d_{i} \log (\lambda)+\sum_{i} d_{i} \log (\epsilon) \\
& =\sum_{i}\left(d_{i} \log (\lambda)-\lambda y_{i}\right)+\sum_{i} d_{i} \log (\epsilon)
\end{aligned}
$$

where $y_{i}$ is observation time (risk time or person-years) in the $i^{\text {th }}$ interval and $d_{i}$ the death indicator ( $0 / 1$ ) for the $i^{\text {th }}$ interval (which is 0 for all intervals, except possibly for the last). We want to estimate $\lambda$, so terms that does not involve $\lambda$ can be ignored-such as the last term. Very convenient, we then do not have to decide precisely how small $\epsilon$ is.

Thus we have established that the contribution to the log-likelihood from a single person's follow-up is the sum of a number of terms of the form $d_{i} \log (\lambda)-\lambda y_{i}$ where $d_{i}$ is the event indicator ( $0 / 1$ ) and $y_{i}$ the length of the $i^{\text {th }}$ interval.

If we subdivide the follow-up of a person across several records, each representing $y_{i}$ of follow-up, and keep track of the deaths in each interval, $d_{i}$ (which is 0 for all intervals, except possibly for the last if the person dies), then each record $\left(d_{i}, y_{i}\right)$ will represent a contribution to the log-likelihood. This will be exploited in the practical modeling of rates.

By the assumption that the rate $\lambda$ is constant over time, the log-likelihood contribution from a person with $d$ deaths ( 0 or 1 ) at the end of a follow-up period of $y$ is $d \log (\lambda)-\lambda y$. But once we have subdivided
follow-up we do not need the assumption of a constant rate across the intervals, we can allow separate rates $\left(\lambda_{i} \mathrm{~s}\right)$ in different intervals, relaxing the assumption to only constant rates within each of the very small intervals. These rates can of course not be estimated based on the observation from a single person. A model for the $\lambda_{i}$ s must be specified in terms of covariates associated with each interval. Among these will normally be the value of one or more time scales at the beginning of each interval.

### 3.1.2 Poisson likelihood

The Poisson distribution with mean $\mu$ is a distribution on the non-negative integers ( $x=0,1,2,3, \ldots$ ), where:

$$
\mathrm{P}\{X=x\}=\frac{\mu^{x} \exp (-\mu)}{x!}
$$

Thus, the $\log$-likelihood from observation of a Poisson variate $x$ with mean $\mu$ is $x \log (\mu)-\mu-\log (x!)$. The last term does not depend on the parameter $\mu$ so it can be omitted when maximizing the log-likelihood over values of $\mu$.

Changing the notation, the log-likelihood contribution from a Poisson-variate $d$ with mean $\lambda y$ is $d \log (\lambda y)-\lambda y=d \log (\lambda)-\lambda y+d \log (y)$, which is the same as the likelihood for $d$ events during $y$ follow-up time with rate $\lambda$, except for the term $d \log (y)$. But this term does not depend on the parameter $\lambda$ and therefore can be ignored when maximizing the log-likelihood.

This means that maximum-likelihood estimation for observations from follow up, $(d, y)$, can be done using a function that can maximize the likelihood for independent Poisson variables. We just need to pretend that the $d$ s are independent Poisson variates with means $\lambda y$.

In R we have the functions glm and gam to do this, depending on how we will model the covariate effects.

### 3.1.3 Implications for analysis

The derivation in equation 3.1 (page 18) has the implication that we can split the follow-up for a person in many small intervals and use a model that assigns different (albeit constant) rates to each interval. The intervals just need to be sufficiently small to entertain the assumption of a constant rate within each interval as reasonable. The log-likelihood for a person's follow-up will then be the sum of the log-likelihood contributions from each interval (record in the dataset).

### 3.1.3.1 Time as covariate

If we keep track of the value of the time scales (e.g. calendar time or age) at the beginning of each interval we can compute the value of other time scales at the beginning of each interval. These values can then be used as covariates in parametric models estimating the effect of different time scales on the rates. Note that we are not necessarily assigning a separate parameter to each interval, we will normally use the time scales as quantitative (metric) variables with a smoothly varying effect on the rates.

This is called time-varying rates; it corresponds to the time inhomogeneous Markov models mentioned in chapter 2 , p. 16 . If time since state entry is used as covariate, we have a semi-Markov model, if more time scales are used we have a model with multiple time scales, which, formally speaking is not a Markov model.

### 3.1.3.2 Likelihood, not model

It is important to note that the central feature we use is that the likelihood from a single person is a product of terms; there is no assumption about the contributions being independent. It is the product form of (3.1) that makes the likelihood for one person look like the likelihood for many independent Poisson variates (the $d_{i} \mathrm{~s}$ ).

There is namely not a one-to-one correspondence between likelihoods and models; here we have two different models:

1. the model for follow-up of a person assuming constant rate in each of a sequence of small intervals; outcome data for interval $i$ is $\left(d_{i}, y_{i}\right)$, parameter is $\lambda_{i}$.
2. the model for independent Poisson variates; outcome data for interval $i$ is $d_{i}$, parameter is $\lambda_{i} y_{i}$.

The ( $\log -$ )likelihood from both these models is the same. Since practical estimation only uses the likelihood and not the model, we can fit the follow-up model by telling the program that we have independent Poisson variates $d_{i}$ with mean $\lambda_{i} y_{i}$-even if they are neither Poisson nor independent.

The offset Since the mean parameter in the Poisson-model corresponding the rate model is $\lambda_{i} y_{i}$, then if we use the logarithm as link function, the model for the linear predictor will be $\log \left(\lambda_{i} y_{i}\right)=\log \left(\lambda_{i}\right)+\log \left(y_{i}\right)$. Therefore, if we want a linear model for $\log \left(\lambda_{i}\right)$, we must accommodate the term $\log \left(y_{i}\right)$ as a separate term in the linear predictor with a fixed regression coefficient of 1 , a so-called offset.

This is the background for the phrase normally seen in description of analysis of rates: "... we fitted a Poisson model for the number of deaths with the log of the person years as offset..." or something similar. Some even write that they assumed the number of deaths to be Poisson-distributed. But they are just fitting a model for piecewise constant rates by maximum likelihood; the Poisson machinery is purely a computational technicality.

If the occurrence rate is constant, then the observed survival times will follow an exponential distribution, so occasionally the machinery will be described as "exponential model", "piecewise exponential model" or "model with exponentil life times", but it is still the same machinery.

Note that the offset is closely linked to the log-link, so if we instead want a model with identity link the risk time ( $y$ ) must be accommodated differently. We shall return to this in section ??.

Identity link model If we want to fit an additive model for the rates, we still need to specify a model for the link if the mean, but with identity link we are facing the specification of a linear function of $\lambda_{i} y_{i}$, which is not so straight forward as for the logarithmic link.

There are a number of work-arounds that will alleviate this; they are described in the chapter on additive rate models, ?? on page ??.

### 3.1.3.3 Real Poisson data

A theorem in probability theory states that the number of events (deaths) observed over a fixed period of time will be Poisson-distributed, if we at each death replace the dead person with an identical living person, and include this person in the follow up.

So it is actually possible to get Poisson-distributed counts in follow-up studies, but the study logistics will be complicated The scenario is somewhat more realistic if we consider testing life-time of light-bulbs and not people.

### 3.2 Multistate model

### 3.2.1 One transition

For a possible transition from state A to state B, say, the likelihood conditional on being in state A and available for transition to $B$ depends on the rate-parameter $\lambda$ for the transition as well as on the observed data, which for a single person is $(d, y)$, the number of transitions $d(0$ or 1$)$ and the risk time, $y$, spent in A .

The rate parameter for the transition A to B is defined as:

$$
\lambda_{\mathrm{AB}}(t)=\lim _{h \rightarrow 0} \mathrm{P}\{\mathrm{~A} \rightarrow \mathrm{~B} \text { during }(t, t+h] \mid \text { in } \mathrm{A} \text { at } t\} / h
$$

For convenience we will leave out the subscript AB for $\lambda$ in the following.
If the rate is assumed constant over time $(\lambda(t)=\lambda)$, then the log-likelihood contribution from $(d, y)$ is $d \log (\lambda)-\lambda y$, where $d$ is the sum of the $d_{t} \mathrm{~s}$ and $y$ the sum of the $y_{t} \mathrm{~s}$. As noted above, this is also the log-likelihood from a Poisson variate $d$ with mean $\lambda y$.

### 3.2.1.1 Time varying rates

If the rate is allowed to vary by time, we can accommodate this by subdividing the observation $(d, y)$ in several small intervals each with a separate $\left(d_{t}, y_{t}\right)$ where $\sum d_{t}=d$ and $\sum y_{t}=y$-note that all the $d_{t} \mathrm{~s}$
from one person will be 0 except possibly the last one which will be 1 if a transition occurs, so the sum is just the last $d_{t}$ from each person.

This subdivision of data allows us to make the less restrictive assumption that the rate is only constant in each of the small intervals, and the log-likelihood can be expressed as $\sum_{t}\left(d_{t} \log \left(\lambda_{t}\right)-\lambda_{t} y_{t}\right)$. This is because the likelihood contribution from interval $t$ is the conditional probability of the observation $\left(d_{t}, y_{t}\right)$ given that the person is alive and at risk of transition to $B$ at the beginning of the interval. So the total likelihood for a person is a product of conditional probabilities, one for each small interval the person lives through.

### 3.2.1.2 Time as covariate (when)

In the context of time-varying rates $t$ is a covariate; a variable upon which the the outcome, the rate $\lambda_{t}$, depends. By that token, $\lambda_{t}$ could be modeled as a smooth function of $t$, we do not necessarily need a separate rate parameter for each $t$, we can use $t$ as a quantitative (metric) variate. Note that $t$ has not been specified as age or calendar time or disease duration; it could be any of these.

In fact it could be all three of them, in the sense that $\lambda$ could be a smooth function of all of these three; the data requirement is just that they be evaluated at the beginning of each of the small intervals. This is referred to as models with multiple time scales.

In this context time $(t)$ refers to when a person is at risk, where "when" could refer to more than one time scale.

### 3.2.1.3 Time as response (how long)

We saw above that the log-likelihood contribution from one person is the same as the log-likelihood contribution from a set of independent Poisson variates $d_{t}$ with mean $\lambda_{t} y_{t}$. Therefore practical modeling of the transition rate $\mathrm{A} \rightarrow \mathrm{B}$ can proceed as if observations were independent Poisson variates. This is straightforward with the usual glm machinery in R , once the split (subdivided) records $\left(d_{t}, y_{t}\right)$ are generated; in this context $\left(d_{t}, y_{t}\right)$ is the response (outcome). Thus the risk time $y_{t}$ is part of the response, often referred to as risk time or person years.

In this context time ( $y$ ) refers to how long a person is at risk, where "how long" will be the same on any time scale.

### 3.2.2 Competing risks

If more than one type of event can occur, we have what is called competing risks-several risks compete for the exit from the current state.

Specifically, suppose that in addition to the transition A $\rightarrow$ B a transition from A to some other state C were also possible, with rate parameter $\mu$ where:

$$
\mu_{\mathrm{AC}}=\lim _{h \rightarrow 0} \mathrm{P}\{\mathrm{~A} \rightarrow \mathrm{C} \text { during }(t, t+h] \mid \text { in } \mathrm{A} \text { at } t\} / h
$$

Let the observation of this transition be $k_{t} \in(0,1)$, say, so formally we have the observation $\left(d_{t}, k_{t}, y_{t}\right)$ where at most one of $d_{t}$ and $k_{t}$ are 1-events are mutually exclusive; they are "competing". Note that the $y_{t} \mathrm{~S}$ (the risk time) are identical for the $\mathrm{A} \rightarrow \mathrm{B}$ and $\mathrm{A} \rightarrow \mathrm{C}$ transitions-it is the time the person is at risk (in state A) of any of the two transitions.

In the derivation of the likelihood for a single rate the likelihood contribution from surviving an interval of length $h$, say, was $\exp (-\lambda h)$; but in this case the person has to escape both the rate $\mathrm{A} \rightarrow \mathrm{B}$ and $\mathrm{A} \rightarrow \mathrm{C}$, so the likelihood contribution will be $\exp (-(\lambda+\mu) h)$. If we observe a transition to $\mathrm{B}\left(d_{t}=1, k_{t}=0\right)$ we will have a final contribution of $\lambda \epsilon$ and if a transition to $\mathrm{C}\left(d_{t}=0, k_{t}=1\right)$ a contribution of $\mu \epsilon$. The log-likelihood contribution from the observation of $\left(d_{t}, k_{t}, y_{t}\right)$ is therefore:

$$
\begin{align*}
\ell(\lambda, \mu) & =-(\lambda+\mu) y_{t}+d_{t} \log (\lambda \epsilon)+k_{t} \log (\mu \epsilon)  \tag{3.4}\\
& =\left(d_{t} \log (\lambda)-\lambda y_{t}\right)+\left(k_{t} \log (\mu)-\mu y_{t}\right)+\left(d_{t}+k_{t}\right) \log (\epsilon)
\end{align*}
$$

where we can disregard the term $\left(d_{t}+k_{t}\right) \log (\epsilon)$ that does not depend on the parameters $\lambda$ and $\mu$.
This is precisely the same as the sum of contributions from each of the transitions as if they each were the only possible transition. This means that we can model the transitions separately, but we will be forced to assume that $\lambda$ and $\mu$ are specified without common parameters.

### 3.2.2.1 Stacked data for joint likelihood

If the models for two transition rates do have common parameters we can still construct the log-likelihood contributions from each transition separately. And since the total log-likelihood is a sum of the two, we can treat all of the contributions as contributions from independent Poisson variates in a joint model-as described above in section 3.2.2 on competing risks. But in order to get a representation of all the likelihood contributions each record of follow-up time must appear twice; one time with the transition to $\mathbf{B}$ as event (the $d_{i}$ ) and one time with the transition to $\mathbf{C}$ as event (the $k_{i}$ ).

In practice this is done by "stacking" the data sets relating to each of the transitions from A: take $d_{t}$ and the $y_{t}$ as variables D and Y , along with a variable Tr with value A 2 B , and put this dataset head-to-foot with a dataset with $k_{t}$ and the $y_{t}$ as variables D and Y , along with the variable Tr with value A2C. Other covariates of interest will be carried over as well, and the values will thus appear twice in the stacked dataset. In the resulting dataset each interval for a person contributes two records in the calculation of the $\log$-likelihood, one for ( $d_{t}, y_{t}$ ) and one for ( $k_{t}, y_{t}$ ) -with the same $y_{t}$ component and the same set of covariates.

Any parameter specified in a model using the resulting stacked data set will be common for the two transitions. But if an interaction with the Tr variable is specified, then we will have a parameter value for each level of Tr. Thus the stacked dataset allows models where parameters are common for the two rates, but also, via interactions with the Tr variable, effects which differ between the two sets of rates.

Note however that the stacked dataset is a representation of the components of the log-likelihood, not of the follow-up.

If more than two transitions from A are possible the same setup applies, with one contribution for each type of possible transition from the state.

### 3.2.2.2 A small illustration of stacking data

Suppose we have 3 persons in state A, at risk for events B and C, one seeing event B, one seeing event C and one seeing neither (censored alive). The representation of the follow up would be, with ptime being the risk time and x and z being some covariates:

```
event ptime x z
    B 12.3 5.23 170
    C 8.7 0.52 1757
cens 14.14.22 3803
```

The dataset for analysis of the rates of $B$ would be:

|  |  | id | d | $y$ | x |
| :--- | ---: | ---: | ---: | ---: | ---: |
| 1 | 1 | 1 | 12.3 | 5.23 | 170 |
| 2 | 2 | 0 | 8.7 | 0.52 | 1757 |
| 3 | 3 | 0 | 14.1 | 4.22 | 3803 |

Using ( $\mathrm{d}, \mathrm{y}$ ) as the data (outcome) and the rate $\lambda_{\mathrm{B}}$ as parameter, each record in this dataset would correspond to a $\log$-likelihood contribution for a model for the rate of $B$ occurrence, $\mathrm{d} \log \left(\lambda_{\mathrm{B}}\right)-\lambda_{\mathrm{B}} \mathrm{y}$.

The analysis dataset for analysis of the rates of C would be:

| id | $d$ | $y$ | $x$ | $z$ |
| ---: | ---: | ---: | ---: | ---: |
| 1 | 0 | 12.3 | 5.23 | 170 |
| 2 | 1 | 8.7 | 0.52 | 1757 |
| 3 | 0 | 14.1 | 4.22 | 3803 |

Each record in this dataset corresponds to a log-likelihood contribution for a model for the rate of C occurrence, $\mathrm{d} \log \left(\lambda_{\mathrm{c}}\right)-\lambda_{\mathrm{c}} \mathrm{y}$. The only difference between the two analysis datasets is the coding of d , the event indicator; in the first case it is the indicator of an B outcome, in the second it is the indicator of a C outcome.

If we were to model occurrence rates of B and C together, with, say, identical effects of x on the two transition rates, but different effect of z on the two rates, we would need to combine the two datasets, in order to get all contributions to the likelihood as in equation (3.4)

|  | id | d | $y$ | x | Z | Tr |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| 1 | 1 | 1 | 12.3 | 5.23 | 170 | A $->\mathrm{B}$ |
| 2 | 2 | 0 | 8.7 | 0.52 | 1757 | $\mathrm{~A}->\mathrm{B}$ |
| 3 | 3 | 0 | 14.1 | 4.22 | 3803 | $\mathrm{~A}->\mathrm{B}$ |
| 4 | 1 | 0 | 12.3 | 5.23 | 170 | $\mathrm{~A}->\mathrm{C}$ |
| 5 | 2 | 1 | 8.7 | 0.52 | 1757 | $\mathrm{~A}->\mathrm{C}$ |
| 6 | 3 | 0 | 14.1 | 4.22 | 3803 | $\mathrm{~A}->\mathrm{C}$ |

or equivalently:

|  | id | d | $y$ | x | $z$ | Tr |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| 1 | 1 | 1 | 12.3 | 5.23 | 170 | $\mathrm{~A}->\mathrm{B}$ |
| 4 | 1 | 0 | 12.3 | 5.23 | 170 | $\mathrm{~A}->\mathrm{C}$ |
| 2 | 2 | 0 | 8.7 | 0.52 | 1757 | $\mathrm{~A}->\mathrm{B}$ |
| 5 | 2 | 1 | 8.7 | 0.52 | 1757 | $\mathrm{~A}->\mathrm{C}$ |
| 3 | 3 | 0 | 14.1 | 4.22 | 3803 | $\mathrm{~A}->\mathrm{B}$ |
| 6 | 3 | 0 | 14.1 | 4.22 | 3803 | $\mathrm{~A}->\mathrm{C}$ |

Note that we have added the variable Tr indicating which type of transition each record refers to; for persons with an event of either type the two records differ on the event indicator $d$, but for the person that sees no event, the two records are identical, except for the Tr. We see that in the stacked dataset there is at most one of the $d$ that is 1 within each person.

A model with identical $x$ effect on both rates would just have $x$ as a main effect, while different effects of $z$ for the two transitions would require an interaction between $z$ and $\operatorname{Tr}$.

In the Epi package there is a function stack. Lexis that does this type of data expansion for rate data represented as Lexis objects, see section ??.

However, it is not very realistic to encounter two different transition out of a single state that share parameter values. For example, an assumption that the male/female mortality rate-ratio were the same for death from cancer and from cardiovascular disease is not very likely to be of any practical relevance.

### 3.2.3 Multiple transitions

If we have two completely separate transitions $A \rightarrow c$ and $B \rightarrow E$, say, then the likelihood contribution from the two transitions would be completely independent, and the log-likelihood from the two transitions would just be the sum of the two separate likelihoods from each of the transitions.

Now, suppose it was possible to make a further transition from $C$ to $D$. The likelihood contribution for this from a person would be the conditional probability of transition to D , given that the person were available in C for a $\mathrm{C} \rightarrow \mathrm{D}$ transition. So by Bayes' theorem the likelihood for $\mathrm{A} \rightarrow \mathrm{C}$ and $\mathrm{C} \rightarrow \mathrm{D}$ would be the probability of the first $(A \rightarrow C)$ multiplied by the conditional probability of the second $(C \rightarrow D)$ given that the first $(A \rightarrow C)$ had occurred.

In this case, some persons would contribute two terms to the likelihood and two data records $\left(d=1, y_{\mathrm{A}}\right)$ and $\left(d, y_{\mathrm{C}}\right)$, other persons would contribute only one $\left(d=0, y_{\mathrm{A}}\right)$, where $y_{\mathrm{A}}$ and $y_{\mathrm{C}}$ are risk times contributed in states $A$ and $C$ respectively. But again, the likelihood contribution from a single persons would be a product of terms, each one looking like a Poisson likelihood term.

### 3.2.4 Total log-likelihood for a multistate model

We have seen that the log-likelihood for all transitions in the multistate model is the sum of the separate log-likelihoods for each of the transitions, where we treat each transition as if it were the only possible transition from the origin state.

This implies that for states from which transition to more than one other state is possible, the same risk time will be represented multiple times, one for each possible transition. It will also imply that the sum of risk time over all records will be larger that the total risk time in the study.

The Lexis machinery (chapter 4) represents follow-up, not log-likelihood contributions, so if more than one transition from a given state is modeled in the same model, the Lexis representation cannot be used to evaluate the log-likelihood.

In principle we can set up one large model for all transitions where we have the possibility of having common parameters between different transitions.

Alternatively we could model each transition rate separately if we assumed that no two transitions had common parameters. The latter will only require a subset of the Lexis representation to construct the log-likelihood. Actually, we can model several transitions jointy from records in a Lexis object provided only that no two transitions are from the same state.
...now input from datarep

## Chapter 4

## Lexis: data representation and analysis of rates

In chapter 2 on probability models we looked at a simple multistate model for mortality and insulin use among diabetes patients. This chapter illustrates how to construct a Lexis object to represent and manipulate the multistate information, and gives some examples of analysis of transition rates using the Poisson likelihood derived in chapter 3

The key to understanding the purpose of the Lexis machinery is the likelihood of a rate as derived in chapter 3 on multistate likelihood. In particular the formula 3.1 on page 18, which tells us that we can split the follow-up in many small pieces and analytically treat event indicators $(0 / 1)$ in these as if they were independent Poisson variates, and still arrive at the correct likelihood.

In Lexis objects (data frames) we represent person follow-up with one record per interval lived, along with information about the interval:

- the position of the beginning of the interval on each time scale of interest (age, calendar time, disease duration, ...)
- the time spent in the interval (length of interval)
- the state in which the time is spent
- the state to which the person moves next (if any)
- the current status of the person with respect to other covariates of interest, such as sex, marital status, blood pressure or other clinical variables, drug exposure etc.

This chapter shows how to manipulate information on follow-up and covariates into a Lexis object that allows splitting in many small intervals suitable for statistical analysis of transition rates.
...now input from DMlate

### 4.1 Using the Lexis function

The following example is illustrating the basic set-up of follow-up data as a Lexis ${ }^{1}$ object for multistate data with multiple time scales, allowing simple summarizing, graphics and analysis. A Lexis object is just a data frame where each record represents an interval of follow-up, with some extra variables and attributes that define features of the follow-up. Lexis objects allow definition of multistate models with multiple states, and different ways of looking at these.

[^2]Ultimately the Lexis representation is going to be used for modeling of rates, so a few simple modeling examples are included in this section too.

### 4.1.1 Defining a Lexis object

First we define the total follow-up for all persons in DMlate; persons enter the follow-up at date of diabetes, dodm ${ }^{2}$, and end follow up at date of exit, dox. A person who ends his follow-up as dead has a non-missing dodth. The dates are all coded in units of years ( 365.25 days) with 1970-01-01 represented as 1970.000; for example, 1996.5 represents $2^{\text {nd }}$ July 1996.

```
data(DMlate)
dmL <- Lexis(entry = list(Per = dodm,
                        Age = dodm - dobth,
                    DMdur = 0 ),
    exit = list(Per = dox),
    exit.status = factor(!is.na(dodth),
                            labels = c("DM", "Dead")),
        data = DMlate)
NOTE: entry.status has been set to "DM" for all.
NOTE: Dropping 4 rows with duration of follow up < tol
```

CODE EXPLAINED: The Lexis function defines time-scales of follow-up at the time of study entry on each time scale, in this case the time scales Per-calendar time ("Period"), Age-current age and DMdur-duration of diabetes. The variables are given in a named list, the names will be the names of the time scales, which will appear as new variables in the resulting data frame.

The follow-up time (risk time) is defined via the time of exit on one of the time scales; exit is also a named list, but only one element is required since risk time is the same measured on any time scale, in this case we use Per=dox, so the risk time is computed as dox - dodm.

Finally we must define the exit status, this should be a factor-the standard way of representation of a variable that only takes a finite no. of values. Here we use the indicator of a valid death date as variable and turn it into a factor with levels DM and Dead. The expression !is.na(dodth) returns a logical, and for logicals, FALSE<TRUE, so if ! is.na (dodth) is FALSE (meaning date of death is missing) the exit. status will be DM, if it is TRUE it will be Dead, because DM is mentioned before Dead in labels=.

The 4 dropped persons are persons with date of diabetes equal to date of death.

We can summarize the follow-up as defined in the Lexis object dmL in tabular form:

```
> summary(dmL)
Transitions:
            To
From DM Dead Records: Events: Risk time: Persons:
    DM 7497 2499 9996 2499 54273.27 9996
```

CODE EXPLAINED: summary (really summary. Lexis because dmL is a Lexis object) gives an overview of the follow-up from entry to death or censoring. We see that 9,996 persons contribute some 54,000 person-years, and 2499 deaths.

### 4.1.2 Printing a Lexis object

The result from Lexis is a data frame of class Lexis, basically the original data frame, DMlate, amended with the time scales and some extra variables (with prefix lex.):
$>d m L[1: 5,1: 10]$

[^3]| lex.id | Per | Age | DMdur | lex.dur | lex. Cst | lex. Xst | sex | dobth |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | dodm

CODE EXPLAINED: When the name of a Lexis object is given, $R$ will invoke the function print. Lexis if it exists (and it does exist) otherwise the print. default function. print. Lexis function will print the columns of the Lexis object in order with id and the time scales first, followed by the state indicators. Time scales and lex. dur rounded to 2 decimals, and other variables rounded to 3 decimals. This latter behaviour can be changed by calling print. Lexis directly, see ?print. Lexis.

We list only the first five rows and the first 10 columns of dmL; this is sufficient for illustration.
The function Lexis has added variables with the three defined time scales Per, Age and DMdur; they represent the value of the time scale at the beginning of the follow-up interval of length lex.dur. lex. Cst (Current state) is the state in which the follow-up takes place, whereas lex. Xst (eXit state) is the next state the person occupies after lex. dur time in lex. Cst. If lex. Xst is the same as lex. Cst it means that the person is censored in the state; no transition is recorded. lex.id is the person identifier, if not explicitly set (via the id= argument) when calling Lexis it will be a simple consecutive numbering of the records in the input data.

Thus, each record in the Lexis object represents follow-up for a period of lex. dur in the state recorded in lex. Cst, starting at calendar time Per in age Age and diabetes duration DMdur, after which the person continues in the state recorded in lex. Xst.

The default behaviour of Lexis is to assume the each record in the data represents the follow-up of one person, but a person may enter with multiple records, for example if the person has been emigrated for a period. In this case the argument id should be used, but Lexis provides no check of consistency between records with the same id.

### 4.2 Modeling mortality

### 4.2.1 Effect of age at diagnosis

We can model mortality as a function of Age, it will be a model with the age at entry (diagnosis of diabetes) as explanatory variable, assuming that mortality is constant over the follow-up. This is not very realistic, but the only possibility with this dataset. A Poisson model can be fitted (using the Lexis features of dmL ):
> library(mgcv)
$>m 0$ <- gam.Lexis (dmL, ~ s(Age))
mgcv::gam Poisson analysis of Lexis object dmL with log link:
Rates for the transition:
DM->Dead

CODE EXPLAINED: gam.Lexis fits a rate model (Poisson likelihood) where the mortality is assumed constant during follow-up of each person (i.e. the follow-up represented in each record of dmL), but where the magnitude of this constant mortality is determined by smooth function of Age, which in dmL is the age at diagnosis of diabetes). This is because dmL is a data frame with only one record per person, each record representing the entire follow-up of the person. So not a very interesting model.

The default for gam.Lexis is to model all transitions to any absorbing state, but in this case there is only one absorbing state, namely Dead, and only one transition to it, namely DM $\rightarrow$ Dead. In full detail we would have written:

```
> mO <- gam.Lexis(dmL, ~ s(Age), from = "DM", to = "Dead")
```

Further, gam.Lexis is merely a wrapper for gam; in this case the call of gam. Lexis is tantamount to:

```
> gam(cbind(lex.Xst %in% "Dead" & lex.Xst != lex.Cst,
lex.dur) ~ s(Age),
family = poisreg,
    data = subset(dmL, lex.Cst %in% "DM"))
```

Note the logical clause lex. Xst $!=$ lex. Cst which is necessary when handling transitions to transient states. So gam.Lexis makes life a bit easier.

The family poisreg uses the likelihood derived for follow-up data in chapter 3 ; it is an improvement of the poisson family that would have provided the same fit by:

```
> gam((lex.Xst %in% "Dead" & lex.Xst != lex.Cst) ~ s(Age),
+ offset = log(lex.dur),
+ family = poisson,
+ data = subset(dmL, lex.Cst %in% "DM"))
```

A similar wrapper, glm.Lexis, exists for glm.

### 4.2.2 Splitting follow up for analysis by current age

It is of considerably more interest to quantify how the current age (also called attained age) determines the mortality. In order to do this we must split the follow-up in intervals so small that we can safely assume that mortality rate is constant within each interval and then use the current age for the interval. This done by either splitLexis from the Epi package or splitMulti from the popEpi package-the latter slightly faster and with a simpler syntax:

```
> library(popEpi)
> options("popEpi.datatable" = FALSE)
> system.time(dmS <- splitLexis(dmL, breaks = seq(0, 120, 0.25),
+ time.scale = "Age"))
    user system elapsed
    2.32 0.30 2.63
> system.time(dmS <- splitMulti(dmL, Age = seq(0, 120, 0.25)))
    user system elapsed
    1.47 0.26 1.61
> summary(dmL)
Transitions:
        To
From DM Dead Records: Events: Risk time: Persons:
    DM 7497 2499 9996 2499 54273.27 9996
> summary(dmS)
Transitions:
            To
From DM Dead Records: Events: Risk time: Persons:
    DM 224557 2499 227056 2499 54273.27 9996
> (who <- subset(dmL, lex.Xst == "Dead")[4,'lex.id'])
[1] 24
> subset(dmL, lex.id == who)[,1:10]
    lex.id Per Age DMdur lex.dur lex.Cst lex.Xst sex dobth dodm
        24 1996.89 63.16 0 1.43 DM Dead M 1933.723 1996.886
> subset(dmS, lex.id == who) [,1:10]
    lex.id Per Age DMdur lex.dur lex.Cst lex.Xst sex dobth dodm
        24 1996.89 63.16 0.00 0.09 DM DM M 1933.723 1996.886
        24 1996.97 63.25 0.09 0.25 DM DM M 1933.723 1996.886
        24 1997.22 63.50 0.34 0.25 DM DM M 1933.723 1996.886
        24 1997.47 63.75 0.59 0.25 DM DM M 1933.723 1996.886
        24 1997.72 64.00 0.84 0.25 DM DM M 1933.723 1996.886
        24 1997.97 64.25 1.09 0.25 DM DM M 1933.723 1996.886
        24 1998.22 64.50 1.34 0.09 DM Dead M 1933.723 1996.886
```

CODE EXPLAINED: We split the follow-up in 3-month intervals ( 0.25 years) with splitLexis and splitMulti, showing the time difference using system.time, but with the same result, except that splitMulti returns a data.table, unless told to not to by setting the option popEpi.datatable to FALSE. So dmS is of class data.frame in this case.

The summary shows that the number of deaths and amount of follow-up is the same in dmS as in dmL, but dmS has about 23 times as many records.

We extract the lex.id for a person-here the $4^{\text {th }}$ person (who has lex.id 24) that ends follow-up in Dead, and show the person's records in the two datasets.

We see that person 24 in the split dataset dmS only have one transition to Dead as in dmL, and also that the sum of the lex.dur is the same in the two datasets. But the values for Per, Age and DMdur vary between records, the values of these refer to the time scale values at the beginning of each of the intervals.
Therefore, if we model mortality by Age using dmS we will be modeling the effect of Age at the beginning of each of these small intervals, so effectively modeling the effect of current age:

```
>m1 <- gam.Lexis(dmS, ~ s(Age))
mgcv::gam Poisson analysis of Lexis object dmS with log link:
Rates for the transition:
DM->Dead
```

The only difference between $m 0$ and $m 1$ is the dataset used; using dmL assumes the mortality constant over the entire follow-up for each person using the age at entry to the study as variable, using dmS we assume mortality constant only in 3-month intervals using the age at the beginning of each interval as explanatory variable.

Thus the first model (m0) is showing mortality as function of age at diagnosis (assuming that mortality does not depend on current age or disease duration), the latter (m1) shows mortality as function of current age (assuming that mortality does not depend on age at onset or disease duration).

We can compare the two estimated age-effects models by making predictions for ages 30 through 90 , say, from both models. Strictly speaking the graph is nonsense, one of the curves has $x$-axis as age at entry, the other $x$-axis as current age; the deception lies in the sloppiness of using the word "age" without further specification.

```
nd <- data.frame(Age = 30:90)
matshade(nd$Age, cbind(ci.pred(m0, nd),
            ci.pred(m1, nd)) * 100,
    plot = TRUE,
    xlab = "Age", ylab = "Mortality per 100 PY",
    col = c('green','orange'), lwd = 2, log = "y")
axis(side = 1, at = seq(65,75,5), labels = NA, pos = 5, tcl = 0.3)
axis(side = 1, at = seq(65,75,1), labels = NA, pos = 5, tcl = 0.2)
axis(side = 1, at = seq(65,75,5), labels = NA, pos = 5, tcl = -0.3)
> axis(side = 1, at = seq(65,75,1), labels = NA, pos = 5, tcl = -0.2)
```

CODE EXPLAINED: nd is a data frame with values of the explanatory variable(s) in the model(s), in this case only Age. ci.pred computes the predicted mortality rates from the models, cbind puts the columns side-by-side and finally matshade plots these with shaded confidence intervals, green for the model with age at diagnosis, and orange for the model with current age. The log="y" argument makes the $y$-axis logarithmic.

The axis statements each draw a horizontal axis without labels, at ages 65 to 75 years, located at $y=5($ pos=5). The tcl argument determines the size and direction of the tick marks; default value is -0.5 , here we use $\pm 0.2$ and $\pm 0.3$

Both estimates of mortality show an exponentially increasing mortality (straight lines when using a log-scale), almost parallel. The orange curve shows the effect of current age, i.e. each of the many 3 -month interval for a person has its own mortality, whereas the green curve refer to the age at entry (age at diabetes diagnosis) where the entire follow-up for a person has the same mortality. As seen from the small axis in the middle of the display, the curves are offset horizontally about 4 years. The average follow-up time (lex.dur) in the two data sets in the intervals where death occur are:


Figure 4.1: Two models for mortality in DM patients. The green curve is based on estimates from data with one record per person (in which case Age represents age at DM diagnosis), the orange on data with 3-month intervals of follow-up (which means that Age represents current age).
. ./graph/DMlate-mort0

```
> with(subset(dmL, lex.Xst=="Dead"), mean(lex.dur))
[1] 4.12682
> with(subset(dmS, lex.Xst=="Dead"), mean(lex.dur))
```

[1] 0.1180175

We see that the difference of these means is about 4 years; so the age at onset is on average 4 years earlier than the left endpoint of the intervals representing current age. This is what is reflected in the horizontal distance of 4 years between the two curves. This is formally an inaccurate statement, there is nothing in the code that restricts the two curves to be parallel, they just happen to be so approximately.

The purpose of this example is to show that the modeling of rates as function of current age (or any other time scale) requires data subdivided so finely that the assumption of constant rates in the intervals is reasonable, but also that the left endpoint should be a reasonable representation of the age at risk (specifically the value of the time scale). These are credible assumptions for 3 month intervals, but hardly for intervals of 4 years or more.

Note that this is an analysis that targets the rates so this analysis does not have a counterpart in the Cox-model, that bypasses the baseline hazard (rate) and only yields hazard ratios (rate ratios).

### 4.3 Survival analysis

The analyses presented in figure 4.1 shows the mortality as a function of age at diagnosis respectively current age. We might instead postulate that the mortality primarily depends on time since diagnosis of diabetes. All persons in our dataset are at risk from time 0 on this time scale, which is certainly not the case for the age as time scale.

With a common origin of time it makes sense to ask for the survival probabilities, the probability that a person with diabetes survives, say, 5 years from diagnosis. We can fit a model describing the mortality as a function of time since diagnosis using the time-split dataset dms; the modeling looks very similar to the model with age as time scale:

```
> m2 <- gam.Lexis(dmS, ~ s(DMdur))
mgcv::gam Poisson analysis of Lexis object dmS with log link:
Rates for the transition:
DM->Dead
```

CODE EXPLAINED: The dataset dmS was split along the age-scale in intervals of 0.25 years, but the other time scales were calculated at these split times as well, see p. 28. Therefore we can just use the split times on the DMdur scale from in split dataset dmS when modeling the effect of diabetes duration.

And as for the mortality as function of age we can show the mortality as a function of time since diagnosis:

```
nd <- data.frame(DMdur = seq(0, 15, 0.2))
matshade(nd$DMdur, ci.pred(m2, nd) * 100,
    plot = TRUE,
        lwd = 2,
    ylim = 0:1*10,
    xaxs = "i",
    yaxs = "i",
    xlab = "Time since DM diagnosis (years)",
    ylab = "Mortality per 100 PY")
```

CODE EXPLAINED: The data frame nd contains the times for DMdur where we want the mortality evaluated, used as $2^{\text {nd }}$ argument to ci.pred to get the predicted rates with confidence intervals.

We are not using a log-scale for the rates because we will be using the cumulative rates, that is the integral-the area under the curve from 0 up to a given time (since diagnosis). By the same token we also show the origins of the axes at exactly 0 (xaxs="i" and yaxs="i"); this way the area shown in the plot corresponds to the cumulative rate.

We see from figure 4.2 that the mortality declines from time of diagnosis for the first 2 years, and only then start to increase slightly. The figure shows how the mortality looks as a function of time since diagnosis, but we wanted to see the survival, the probability of being alive at time $t$ after diagnosis. The survival function is related to the mortality rate by:

$$
S(t)=\exp \left(-\int_{0}^{t} \mu(s) \mathrm{d} s\right)
$$

where $\mu(s)$ is the function in figure 4.2. Since the survival is a closed form function of the mortality rate, so is the (approximate) confidence intervals for the survival a function of the standard error of the estimated (log-) mortality, albeit a complicated one. This is conveniently wrapped in the function ci.surv which takes a model and a prediction data frame as arguments, assuming the records in the prediction frame correspond to equidistant times at which we want the survival probability computed:

```
matshade(nd\$DMdur, ci.surv(m2, nd, intl = 0.2),
    plot = TRUE,
        lwd \(=2\),
    xaxs = "i",
    yaxs = "i",
    xlab = "Time since DM diagnosis (years)",
    ylab = "Survival probabiliy")
lines(survfit(Surv(dmL\$lex.dur,
+ \(\quad{ }^{(r e d ")}\) dmL\$lex.Xst == "Dead") ~ 1),
+ col = "red")
```



Figure 4.2: Mortality of Danish diabetes patients as a function of diabetes duration. . ./graph/DM1ate-mort2

CODE EXPLAINED: The function ci.surv takes the estimated mortalities from the model m 2 at the points given in the data frame nd. Since the calculation of the survival requires numerical integration we must also supply the length of the intervals between points in nd, this is in the argument intl. ci.surv then computes the survival function at the points given in the second argument (called ctr.mat), and returns a 3-column matrix with estimated survival as the first column, and the confidence limits as the next two.

For comparison we also show the Kaplan-Meier curve derived by survfit.

From figure 4.3 we see that there is no practical difference between the two approaches to computing the survival function; the traditional Kaplan-Meier approach has some notches at the far end of the curve that are not biologically credible. But it is only the parametric approach that produces an estimate of the mortality function as in figure 4.2 .

### 4.4 Multiple states: cutting follow-up

When splitting the follow-up we use a set of predefined (deterministic) points on a time scale, see page 28. A different type of subdividing the follow-up is cutting at times of (random) events. This will typically be at the time a person moves to a new state, such as "Insulin treated".

Note the terminology we have introduced here: Splitting is reserved for division of follow-up at pre-determined points on a time-scale (typically many breaks); cutting is reserved for division of follow-up at time of some intermediate event, typically constituting a transition to a new state.

These two endeavours are handled by different functions, splitting by splitLexis or splitMulti (the latter from the popEpi package), cutting by cutLexis and its cousins mcutLexis and rcutLexis.

### 4.4.1 Cutting follow-up at one intermediate event

To accommodate the beginning of insulin therapy, which starts at doins, follow-up must be cut in two for persons that begin insulin therapy, one piece before (that is, not on insulin) and one after (that is,


Figure 4.3: Parametric and non-parametric survival curves. For clarity the y-axis does not start in 0. The smooth black curve and the shaded confidence interval are based on a parametric model for the mortality rates; the ragged red curve with broken lines as confidence interval is the Kaplan-Meier estimator of the survival function.
. ./graph/DMlate-DMsurv
currently on insulin, or more precisely, ever on insulin). This is done by the function cutLexis:

```
dmL <- sortLexis(dmL)
dmI <- cutLexis(dmL,
                        cut = dmL$doins,
        timescale = "Per",
        new.state = "Ins",
        new.scale = "tfIns",
    split.states = TRUE,
    precursor.states = "DM")
```

CODE EXPLAINED: The cut argument is a vector of transition times (possibly with missing values) of length equal to nrow (dmL) -in this case a column in dmL, but it need not be. The timescale argument indicates which of the time scales the values of the cut argument refer to. new. state is the name of the state the person transitions to, and new. scale is the name of the time scale defined as time since entry to
the new state. split.states=TRUE indicates that the Dead state should be subdivided according to whether the entry to Dead is from state Ins or state DM.

Finally, precursor.states names those states that will be overridden by the new state; if a person that begins insulin previously ended in DM (that is, censored in DM), the person should now end in Ins (that is, still censored, but now in Ins), so DM is a precursor state. If a person previously ended in Dead the person should still end as dead after beginning insulin, so Dead is not a precursor state. The default value for precursor.states is transient (dmL), the set of transient states-in this case only DM. It is rarely relevant to use anything but the default, so this argument is usually omitted.

```
> summary(dmI, timeScales = TRUE)
Transitions:
\begin{tabular}{crrlrrrr}
\multicolumn{9}{c}{ To } & & & & & \\
From & DM & Ins & Dead & Dead(Ins) & Records: & Events: & Risk time:
\end{tabular} Persons:
Timescales:
    Per Age DMdur tfIns
```

CODE EXPLAINED: We see from the summary that the total number of persons and deaths is the same in dmI as in dmL. But the number of records is larger.

Asking for the time scales in dmI shows the four time scale variables, and that tfIns is defined as time since entry to the Ins state, whereas none of the other time scales are defined as time since entry

We can illustrate the result of cutting time by listing records from a few selected persons both from dmL and dmI. We select one person for each combination of missing/non-missing of dodth and doins

```
> (who <- cl
+ subset(dmL, !is.na(dodth) & !is.na(doins))[1,"lex.id"],
+ subset(dmL, is.na(dodth) & !is.na(doins))[1,"lex.id"],
+ subset(dmL, !is.na(dodth) & is.na(doins))[1,"lex.id"],
+ subset(dmL, is.na(dodth) & is.na(doins))[1,"lex.id"]))
[1] }28\quad15 6 1
> subset(dmL, lex.id %in% who)[,c(1:7,13)]
\begin{tabular}{rrrrrrrr} 
lex.id & Per & Age & DMdur & lex.dur & lex. Cst & lex. Xst & doins \\
1 & 1998.92 & 58.66 & 0 & 11.08 & DM & DM & NA \\
6 & 2007.89 & 80.02 & 0 & 2.04 & DM & Dead & NA \\
15 & 2002.55 & 58.13 & 0 & 7.45 & DM & DM & 2005.354 \\
28 & 1998.52 & 73.72 & 0 & 9.68 & DM & Dead 2007.221
\end{tabular}
> subset(dmI, lex.id %in% who) [,1:8]
lex.id Per Age DMdur tfIns lex.dur lex.Cst lex.Xst
        1 1998.92 58.66 0.0 NA 11.08 NM NM
        6 2007.89 80.02 0.0 NA 2.04 DM N N N N
        2002.55 58.13 0.0 NA 2.80 DM Ins
```



```
        28 1998.52 73.72 
```

    CODE EXPLAINED: We select one person (the first, by " [1,") among those who have or have not a valid
    date of death, respectively date of insulin, and list the relevant variables for the four chosen persons from
    dmL and dmI .
    Persons 1 and 6 do not have a date of insulin so they have one record each in both data sets, with lex. Cst equal to DM. Persons 15 and 28 both have a doins, so their follow-up is cut in two pieces at doins. Person 15 remains in state Ins (is censored there), while person 28 dies. So cutLexis keeps track of the absorbing
states (in this case Dead), and makes sure that transitions to absorbing states are maintained, as is the case for person 28.

Note that the total lex.dur is the same within persons in the two data sets, but in the data frame dmI persons 15 and 28 spend their time in two different states, as indicated in lex.Cst.

The time scale tfins (time from Insulin) is NA for the records representing follow up in state DM, and 0 for the new records-at the beginning of insulin the time since insulin is of course 0 , but the variable tfIns is now defined as a time scale and will therefore be properly updated when we split follow-up.

### 4.4.1.1 Graphical representation of states and transitions

Lexis version A graphical version of the summary is provided by the boxes. Lexis function, that shows each state as a box and each transition as an arrow, optionally annotated by the summaries:

```
> boxes(dmI, boxpos = list(x = c(15,85,15,85),
+ y = c(85,85,15,15)),
+ scale.R = 1000,
+ show.BE = TRUE)
```



Figure 4.4: Multistate model for beginning of insulin use and death among diabetes patients. The number in the center of each box is the total follow-up time. The numbers at the bottom of each box are the number of persons beginning, resp. ending their follow-up in the state. The numbers on the arrows are the number of transitions and in brackets the transition rates per 1000 person-years.
. ./graph/DM1ate-box3
code explained: The boxes derives the states from the Lexis object dmI, the argument boxpos places the boxes in a coordinate system that ranges from 0 to 100 in both directions; the x and y are the coordinates of the center of the boxes. scale. $R$ scales the rates that are printed along the transition arrows, in this case to rates per 1000 PY. show. BE prints the number of persons that begin resp. end their follow-up in each state.

The resulting plot is the same as the one in the introduction in chapter 1.
cohorttools version There is a function in the cohorttools package that automatically puts the states in an order attempting to avoid crossing arrows. It gives access to a lot of features from the graphviz program devised for drawing of graphs:

```
library(cohorttools)
kk <- boxesLx(dmI, layout = "dot",
    rankdir = "LR", # Left to Right
    show.gr = FALSE,
    scale.Y = 100,
        show.persons = TRUE,
        prop.penwidth = TRUE)
gv2image(kk, file = "../graph/DMlate-gvboxes", type = "pdf")
```



Figure 4.5: graphviz version of multiple states graph. The prop. penwidth makes the widths of the arrows porportional to the log-rates.
. ./graph/DMlate-gvboxes

The funny filename of the graph is chosen to comply with those automatically generated by Sweave for the other graphs in this book.

The beauty of the result of boxesLx can be debated, but graphviz has a lot of possible parameters available that can be accessed from boxesLx, see ?boxesLx for links etc.

### 4.4.2 Cutting follow-up at multiple intermediate events

When multiple intermediate events can occur, A and B, say, it will matter which order you cut your follow-up; if the time sequence for a person is B then A, and we cut data first at occurrence of A and then at B, we might accidentally override the state A by B. Handling this is really clumsy; the solution is basically to cut in order of occurrence of the events for each person, but it will involve a lot of subsetting, cutting and stacking.

Therefore, there is a function mcutLexis that does this properly and keeps track of the history; here we cut at the date of beginning insulin therapy (doins) and date of starting oral anti-diabetic drugs (dooad)—note that we are starting all over again from the dmL object with no cuts:

```
> dmIO <- mcutLexis(dmL,
+ wh = c("dooad", "doins"),
        timescale = "Per",
        new.states = c("OAD", "Ins"),
        new.scales = c("t.OAD", "t.Ins"),
        ties.resolve = 1/365.25)
NOTE: Precursor states set to DM
NOTE: }15\mathrm{ records with tied events times resolved (adding 0.002737851 random uniform),
    so results are only reproducible if the random number seed was set.
```

CODE EXPLAINED: mcutLexis assumes that the times of the transitions are stored as variables in dmL, named in the argument wh-so a bit more restrictive data requirements than for cutLexis. mcutLexis requires that there is at most one record per person per state. Thus transition to a state (lex. Xst) can occur at most once for each person.

The names of the new states assumed at the times given in the variables named by wh are given in the argument new. states. There is also the possibility of defining new time scales defined as time since entry
into each of the two states, via the new.scales. Finally, where the two dates dooad and doins are identical, a decision must be made as to which occurred first. If you do not resolve that by hand prior to calling mcutLexis, ties.resolve=TRUE will add a bit of random noise to the identical dates so ties are broken. If ties.resolve=FALSE, the function will fail if any two transition dates for a person are recorded as equal.

To see what happens with mcutLexis we can list the result for two select persons:

```
> wh1 <- subset(dmIO, lex.Cst == "OAD-Ins")$lex.id[1]
> wh2 <- subset(dmIO, lex.Cst == "Ins-OAD")$lex.id[1]
> who <- c(wh1, wh2)
> subset(dmIO, lex.id %in% who)[,1:9]
lex.id Per Age DMdur t.OAD t.Ins lex.dur lex.Cst lex.Xst
18 1996.75 \(61.72 \quad 0.00\) NA NA \(1.17 \quad\) DM \begin{tabular}{llll}
18 & NAD
\end{tabular}
18 1997.92 62.89 1.17 0.00 NA 8.08 OAD OAD-Ins
\(18 \quad 2005.99 \quad 70.97 \quad 9.25 \quad 8.08 \quad 0.00 \quad\) 4.00 OAD-Ins OAD-Ins
\begin{tabular}{rrrrrrrr}
38 & 2008.37 & 63.93 & 0.00 & NA & NA & 0.09 & DM \\
38 & 2008.46 & 64.02 & 0.09 & NA & 0.00 & 0.21 & Ins \\
Ins-0AD
\end{tabular}
\(382008.6764 .24 \quad 0.31 \quad 0.00 \quad 0.21 \quad 1.33\) Ins-OAD Dead
```

Code explained: First we extract the ids of persons who has been in states Ins-OAD, or OAD-Ins, and take the first of each of these. We then print the records from the cut data frame dmIO for these persons. Note the new time scales (t.OAD and t.OAD); they are NA until the state is assumed, at which point they are 0 , the time since, say, $O A D$ at the time of beginning $O A D$.

```
> summary(dmL)
Transitions:
        To
From DM Dead Records: Events: Risk time: Persons:
    DM 7497 2499 9996 2499 54273.27 9996
> dmIO <- Relevel(dmIO, c("DM","Ins","Ins-OAD",
+ "OAD","OAD-Ins","Dead"))
> summary(dmIO)
Transitions:
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|}
\hline From & DM & Ins & Ins-0AD & OAD & OAD-Ins & Dead & Records: & Events: & Risk time: & Persons: \\
\hline DM & 2830 & 688 & 0 & 2958 & 0 & 1056 & 7532 & 4702 & 22920.27 & 7532 \\
\hline Ins & 0 & 462 & 171 & 0 & 0 & 152 & 785 & 323 & 3883.07 & 785 \\
\hline Ins-0AD & 0 & 0 & 137 & 0 & 0 & 34 & 171 & 34 & 715.24 & 171 \\
\hline OAD & 0 & 0 & 0 & 3327 & 1006 & 992 & 5325 & 1998 & 22965.25 & 5325 \\
\hline OAD-Ins & 0 & 0 & 0 & 0 & 741 & 265 & 1006 & 265 & 3789.45 & 1006 \\
\hline Sum & 2830 & 1150 & 308 & 6285 & 1747 & 2499 & 14819 & 7322 & 54273.27 & 9996 \\
\hline
\end{tabular}
```

CODE EXPLAINED: When comparing to dmL we see that the number of records in dmIO is some $50 \%$ larger because of the extra records for persons that see an intermediate event.

The ordering of states in the resulting Lexis object depends on the dataset, so you will often want to reorder states "by hand", using Relevel in order to get a meaningful ordering of states in the summary.

From the summary we see that mcutLexis generates not only states OAD and Ins, but also the states OAD-Ins and Ins-OAD according to the order in which states were visited. There is an argument to mcutLexis, seq. states=FALSE that will cause the two latter states to be merged to the state Ins+OAD (ordering of state names is alphabetic).

When there are many states are in the model, a graphical representation is particularly important; here we show the multistate data with and without distinguishing between the sequence of OAD and Ins:

```
par(mfrow = c(2,1))
boxes (dmIO,
    boxpos = list(x = c(15,50,85,50,85,50),
                                    y =c(50,90,70,15,30,50)),
    scale.R = 1000,
    show.BE = TRUE)
boxes(Relevel(dmIO,
        list("DM", "OAD","Ins+OAD" = c(3,5),"Ins","Dead"),
        first = FALSE),
    boxpos = list(x = c(15,50,85,50,50),
        y=c(50,90,50,15,50)),
    scale.R = 1000,
    show.BE = TRUE)
```

CODE EXPLAINED: We reordered the levels of dmIO, and so the ordering of the components of the boxpos list elements codex and codey will refer to this ordering. The scale.R scales the rates shown on the arrows and show. $\mathrm{BE}=$ TRUE shows the number of persons who begin and end follow-up in each state.

We can also use boxesLx that automatically places boxes and draws non-interfering arrows, but it only allows arrows in one direction (either horizontal or vertical):

```
> kk <- boxesLx(dmIO, layout = "dot",
+ rankdir = "LR", # Left to Right
        show.gr = FALSE,
        scale.Y = 100,
        show.persons = TRUE,
    prop.penwidth = TRUE)
gv2image(kk, file="../graph/DMlate-xxboxes", type="pdf")
```


### 4.5 Joint model for several transition rates

We can use the Lexis object dmIO as basis for modeling the 5 different mortality rates, it is however apparent from figure 4.6 that the transition Ins-OAD $\rightarrow$ Dead is poorly determined with only 33 transitions so we will merge the two states Ins-OAD and OAD-Ins, so we only model the 4 mortality rates in the lower panel of figure 4.6.

The reason that we can model the 4 mortality rates in one model based on the Lexis data frame dmIO is that the four rates originate from 4 different states, so the joint likelihood only include each piece of risk time once - see the section on likelihood for multiple transitions, p. 23.

But first we must split the follow-up in small intervals in order to be able to interpret effects of age and diabetes duration as current age and current duration. We use 3 month intervals as before:


CODE EXPLAINED: Before we split the follow-up, we use Relevel to merge the states Ins-OAD and OAD-Ins to one called Ins+OAD. Note that we redundantly mention Dead in Relevel; it has the effects of putting Dead as the last level, giving a nicer summary, while the first = FALSE puts the newly created levels as the last ones.


Figure 4.6: States and transitions for the DMlate data with and without distinguishing between the sequence of OAD and Ins.
../graph/DM1ate-mbox2

We can model the mortality rates in one model, where we take the rates to be proportional between the states before death, simply by including lex.Cst as a covariate. Because we still have only one absorbing state and we model all transitions into this it is particularly simple to specify the model for all mortality rates taking current age and diabetes duration into account:
$>m p h<-$ gam.Lexis(sIO, $\sim s(A g e)+s(D M d u r)+l e x . C s t)$
Formally we would use:
> system.time(
$+m p h<-$ gam.Lexis(sIO, ~s(Age) + s(DMdur) + lex.Cst,
$+\quad$ to $=$ "Dead"))
mgcv::gam Poisson analysis of Lexis object sIO with log link:
Rates for transitions:
DM->Dead
Ins->Dead
OAD->Dead


Figure 4.7: graphviz version of the multiple states. The graph is drawn with arrow-widths proportional to the corresponding rates.
. ./graph/DMlate-xxboxes

```
Ins+OAD->Dead
    user system elapsed
    25.23 2.14 27.40
```

CODE EXPLAINED: If neither from or to are specified as arguments in gam. Lexis, the default is to model all transitions into any absorbing state. In this case the only absorbing state is Dead, so the default is to model all 4 mortality rates together in the same model.

If only to is specified, all rates into the states indicated in to are modeled. If only from is specified, all rates out of the states indicated in from are modeled.

We model the mortality rates as depending on both age (Age) and duration of diabetes (DMdur), and also include the factor lex. Cst in the model; this will introduce different levels of mortality for the four different states. But we assume the same (non-linear) shape of effects of age and diabetes duration for all 4 mortality rates; a proportional hazards model, that is.

```
> summary(mph)
Family: poisson
Link function: log
Formula:
cbind(trt(Lx$lex.Cst, Lx$lex.Xst) %in% trnam, Lx$lex.dur) ~ s(Age) +
    s(DMdur) + lex.Cst
Parametric coefficients:
    Estimate Std. Error z value Pr (>|z|)
(Intercept) - 3.795076 0.040907 -92.774 <2e-16 ***
lex.CstIns 0.991018 0.088113 11.247 <2e-16 ***
lex.Cst0AD -0.008453 0.044946 -0.188 0.851
lex.CstIns+OAD 0.659929 0.070357 9.380 <2e-16 ***
Signif. codes: 0 '***' 0.001 '**' 0.01 '*'0.05 '.' 0.1 ' ' 1
Approximate significance of smooth terms:
            edf Ref.df Chi.sq p-value
s(Age) 1.006 1.011 1987.5 <2e-16 ***
s(DMdur) 7.523 8.453 136.3 <2e-16 ***
Signif. codes: 0 '***' 0.001 '**' 0.01 '*'0.05 '.' 0.1 ' ' 1
```

```
R-sq.(adj) = 0.00212 Deviance explained = 9.31%
UBRE = -0.89139 Scale est. = 1 n = 231877
> round(ci.exp(mph, subset = "lex"), 2)
    exp(Est.) 2.5% 97.5%
lex.CstIns 2.69 2.27 3.20
lex.CstOAD 0.99 0.91 1.08
lex.CstIns+OAD 1.93 1.69 2.22
```

CODE EXPLAINED: summary gives a summary of the model, including the parameters associated with lex.Cst, which are the log rate ratios of mortality relative to the DM state. The section on smooth terms reveals the the effective degrees of freedom (edf) for the Age term is just about 1, meaning that the age term is almost linear. The p-value is not a test of non-linearity, it is a test of no effect.
ci.exp extracts those parameters with a name where "lex" appear, and exponentiates them, so we get the mortality rate-ratios relative to the mortality in the DM state.

We see that the persons in OAD alone do not have a different mortality from those not treated (DM), the reference level. Those on Ins alone have a mortality RR of 2.7 and those on both a RR of 1.9, significantly different since the confidence intervals do not overlap.

The model mph is a proportional hazards model since we assume that the 4 mortality rates are proportional; the mortality rates depend on age and disease duration in the same way: the RR between persons in any two of the states is assumed to be the same regardless of age and duration of diabetes.

### 4.5.1 Two time scales

The model mph is a proportional hazards model and we can get an impression of how mortality rates looks for different combinations of age and duration, by defining a prediction data frame; a dataset with select values for the covariates in the model mph:

```
# traditional approach
nd <- transform(data.frame(expand.grid(DMdur = c(NA, seq(0, 15, 0.2)),
                        AgeDM = seq(40, 70, 10)),
            lex.Cst = "DM"),
            Age = AgeDM + DMdur)
# tidyverse approach
nd <- expand.grid(DMdur = c(NA, seq(0, 15, 0.2)),
                        AgeDM = seq(40, 70, 10)) %>%
    mutate(lex.Cst = "DM",
                        Age = AgeDM + DMdur)
head (nd)
DMdur AgeDM lex.Cst Age
    NA 40 DM NA
    0.0 40 DM 40.0
    0.2 40 DM 40.2
    0.4 40 DM 40.4
    0.6 40 DM 40.6
    0.8 40 DM 40.8
matshade(nd$Age, ci.pred(mph, nd) * 100,
    plot = TRUE,
        log = "y",
        lwd = 2,
        ylim = c(0.25, 50),
        xlab = "Current age (years)",
        ylab = "Mortality per 100 PY")
xa <- seq(40, 70, 10)
ya <- exp(seq(log(8), log(50),, 4))
for (i in 1:4)
    {
axis(side = 3, at = 0:3*5+ xa[i], labels = 0:3*5, pos = ya[i])
axis(side = 3, at = 0:15 + xa[i], labels = NA , pos = ya[i],
```

```
t tcl = -0.3)
matshade (nd$Age,
    ci.pred(mph,
    transform(nd, lex.Cst = "Ins")) * 100,
    1wd = 3,
    Ity = "22")
```

CODE EXPLAINED: We want a prediction data frame with variables Age and DMdur, but for combinations of (a few) ages at diagnosis and a range of values of diabetes duration. expand.grid returns a data frame with all combinations of the arguments, the first argument varying fastest. The model does not have AgeDM (Age at DM diagnosis) as predictor but rather Age (current age), so this is computed in mutate. WE have shown the data frame manipulation if two different ways; it gives the same result.

Note we inserted an NA at the beginning of the DMdur values; this is in order to break the predicted line at each new age at diagnosis; otherwise the curves would have been connected. In general if there is an NA in either the $x$ or the $y$ coordinate when a vector plotted as a line, then the two points on either side of the NA will not be connected.

To illustrate the joint effects of age and duration we also included horizontal axes showing the duration of diabetes for the four curves-xa are the left end points of the axes, ya are the vertical position the axes used in the pos argument.


Figure 4.8: Mortality by current age and duration of diabetes for persons in states DM and Ins. Full lines are for persons in state DM, broken lines for persons in state Ins. There is one curve for each age at diagnosis: 40, 50, 60 and 70, and an axis indicating the diabetes duration for each of the four curves.
Note that mortality rates actually decline the first two (well 1.7) years after diagnosis. ../graph/DM1ate-age-dur

Figure 4.8 shows the mortality among persons in the DM state as a function of current age and diabetes duration, for persons diagnosed with DM at ages 40, 50, 60 and 70 .

We see that the mortality is high at time of diagnosis, but decreases during the two first years, and subsequently increase exponentially by age, with no detectable difference between different ages at diagnosis. Since there is no interaction between Age, DMdur and lex. Cst, we have a proportional hazards model; the hazard ratio (mortality rate-ratio) between the 4 states is assumed to be constant on both of the two time scales.

Note however that the 8 curves in figure 4.8 are not identical even though they look so in this case; they consist of a duration curve over the span 1-15 years (identical for all 8 curves) but combined by the effect of current age over the span 40-85. Thus the curves in full lines and broken lines are pairwise proportional. But the 4 curves in each line type are slightly different; they look deceptively similar because the age-effect in this case is almost linear.

The initial peak (at duration 0) in mortality is presumably a clinical artifact: some of the newly diagnosed persons are diagnosed in connection with some other severe disease, such as for example cardiovascular disease. Therefore there is an over-representation of quite sick people among the newly diagnosed. They contribute to the initial high mortality, but as this part of the newly diagnosed die out, the mortality among the remaining reflect the mortality among "normal" diabetes patients.

### 4.5.2 Proportional hazards?

In normal statistical terms this would simply be called a main-effects model, but "proportional hazards" has become the standard terminology when analyzing occurrence rates. Which is unfortunate since "test for non-proportionality" has become a term used for test of interactions with time scales. In this instance a test of non-proportionality would be to test against a model with interactions between the time scales and lex.Cst:

```
> mnph <- gam.Lexis(sIO, ~ s(Age , by = lex.Cst) +
+ s(DMdur, by = lex.Cst) +
+ lex.Cst)
> anova(mnph, mph, test = "Chisq")
```

We may also use a more elaborate interaction where we have an interaction between age and duration, here via a non-linear term in the difference, and fitted by glm using natural splines. There are many different ways of specifying an interaction, but the code to graph the estimated mortality rates will be the same if the interactions are specified in terms of the original variables (and no special variables are constructed):

```
> mpph <- glm.Lexis(sIO, ~ Ns(Age , knots = 1:4*20) * lex.Cst +
    Ns(DMdur, knots = c(0,1,5,10)) * lex.Cst +
    Ns(Age -
        DMdur, knots = 5:8*10) * lex.Cst +
    lex.Cst)
stats::glm Poisson analysis of Lexis object sIO with log link:
Rates for transitions:
DM->Dead
Ins->Dead
OAD->Dead
Ins+OAD->Dead
```

But besides the test for interaction we will of course want to know how the interaction looks; in this case we have estimated 4 different curves for age-effect and 4 different curves for the effect of diabetes duration. For each state they can of course be combined as in the previous section; the graph is produced by the same code, only the model is changed:

```
clr <- c("forestgreen","darkorange")
matshade(nd$Age, ci.pred(mpph,
                            transform(nd, lex.Cst = "DM")) * 100,
    plot = TRUE,
        log = "y",
        lwd = 2, lty = 1, col = clr[1], alpha = 0.10,
        ylim = c(0.25, 50),
        xlab = "Current age (years)",
        ylab = "Mortality per 100 PY")
xa <- seq(40, 70, 10)
```

```
ya <- exp(seq(log(8), log(50),, 4))
for (i in 1:4)
{
axis(side = 3, at = 0:3*5+ xa[i], labels = 0:3*5, pos = ya[i])
axis(side = 3, at = 0:15 + xa[i], labels = NA , pos = ya[i],
    }
matshade(nd$Age,
    ci.pred(mpph,
    transform(nd, lex.Cst = "Ins")) * 100,
    lwd = 2, lty = "22", col = clr[1], alpha = 0.10)
matshade(nd$Age,
        ci.pred(mpph,
            transform(nd, lex.Cst = "OAD")) * 100,
        lwd = 2, lty = 1, col = clr[2], alpha = 0.10)
matshade(nd$Age,
            ci.pred(mpph,
                transform(nd, lex.Cst = "Ins+OAD")) * 100,
        lwd = 2, lty = "22", col = clr[2], alpha = 0.10)
```



Figure 4.9: Mortality by current age and duration of diabetes for persons in all states. Full lines are for persons in states not including insulin (DM, DAD), dotted lines for persons in Ins or Ins+OAD. Green line are persons not on OAD, orange for persons on OAD. There is one curve for of each type and color for each age at diagnosis: 40, 50, 60 and 70, and an axis indicating the diabetes duration for each of the four curves. ../graph/DMlate-age-dur-int

The model we are using has four transient states, defined by cross-classification of the presence or absence of insulin and of oral antidiabetic drugs. The mortality rates from different states are shown in dotted lines if the originating state is an insulin state and full lines if not. And they are colored orange if the state includes oral antidiabetic drugs and green if not. This is a specific feature for this particular model: the states correspond to a cross-classification of two factors, and the colours and line types correspond to the two factors (insulin respectively OAD) that defines the 4 states. On top of this we have curves for select values of age at diagnosis, but those are clear from the location of the curves.

### 4.6 Recurrent multiple intermediate events

In cases of recurrent (for example curable or regressing) disease states we may not be interested in keeping track of the entire history of visited states of a person, but only care about the current (i.e. latest visited) state. One example would be kidney disease as assessed by albuminuria, where urine albumin levels $<30$ $\mathrm{mmol} / \mathrm{l}$ is considered normal and levels above 30 and $300 \mathrm{mmol} / \mathrm{l}$ are called micro-, respectively macro-albuminuria (this is not the correct clinical diagnosis, though). In this case we would only be interested in the state a person is currently in, not the (sequence of) states previously visited.

The construction of Lexis objects that correspond to this type of multistate model is handled by the function rcutLexis, which besides a Lexis object takes as input times and (names of) states entered at these times for each person.

This is illustrated in detail in section 4.8, "A real world example" below. The situation where one type of event is repeatedly observed in the same person is illustrated in chapter 5

### 4.7 Adding time-varying covariate information

So far we have only been concerned with time-dependent transitions between states, but we will also want to assess the effect of covariates measured at irregular time points on the transition rates.

When adding time-varying covariate information, we will gain the possibility to assess how the value of these influence the transition rates between states. But we will lose the possibility of predicting state probabilities-we shall return to this later.

There are (at least) two substantially different types of added time-varying covariate information:

1. Information obtained at a given date is carried unchanged forward until the next piece of information becomes available. This is normally called "last observation carried forward" (LOCF). This will typically be used for clinical measurements taken at different follow-up times, such as cholesterol, blood pressure etc.
2. Interpolation between adjacent measurements is used to assign covariate values at given times between the two measurement times.
This will typically be used to construct covariates such as cumulative amounts of drug consumed or other exposure measurements in pharmaco-epidemiological studies. Since we are doing some sort of interpolation from the raw data, we can in principle compute the covariate values at any time of follow-up, so this will also require decisions about the times at which we evaluate the exposure.

### 4.7.1 Adding clinical measurements: addCov.Lexis

Persons may attend clinical visits or there may be administrative updates performed at (possibly irregular) times. In that case we would like to amend the follow-up in a Lexis object with values of the most recent measurements from the clinical visits, but without defining a new state in the model.

One way to do this is to introduce a cut of the follow-up at the date of each clinical visit, in order to add the clinical variables measured at the visit to records representing follow-up after the clinical visit (until the next). This is known as last observation carried forward (LOCF). This is also the way that splitLexis, cutLexis, mcutLexis and rcutLexis operates; when the follow-up in a record is cut in two, both resulting records will have the same values as for all variables in the original record.

Furthermore, we might want to keep track of the time since the most recent visit. These features are available in the function addCov.Lexis. This is further detailed in the appendix, section 11.2.1, where the function is described and contrasted to addDrug.Lexis, and also illustrated in section 4.8 "A real world example" below in this chapter

### 4.7.2 Adding drug exposure: addDrug. Lexis

In pharmaco-epidemiology we want to add information on drug exposure to the Lexis object; we want the current drug exposure status computed at each time represented in the Lexis object. The data on drug exposure will come from either records of drug purchases (filled prescriptions) or records of issued prescriptions.

In both cases we will for each person have date of drug (purchase or prescription), amount of drug and possibly a prescribed dosage (how much to take per day).

We want the Lexis object amended with the current drug exposure at the beginning of each interval represented in the Lexis object.

There are a many different ways to define current drug exposure such as: 1 ) is the person currently on drug, 2) time since first exposure, 3) cumulative time on the drug or 4) cumulative dose of the drug. The calculation of these variables for each record is implemented in addDrug.Lexis, with a choice of method for defining the 4 mentioned variables from the purchase / prescription records. .

Unlike adding clinical measurements by addCov. Lexis, the use of addDrug. Lexis must be the last operation on the Lexis object. This is because addDrug. Lexis computes exposure variables at each time point in the Lexis object by interpolation. Thus any further subdivision of time using LOCF will generate time points with the variable values copied from previous time points, and thus not computed by interpolation as desired.

This aspect is further detailed in the appendix, section 11.2, where the function addDrug. Lexis is described and contrasted to addCov.Lexis.

### 4.8 Recurrent events and time dependent covariates: Steno2 trial

We shall illustrate the facilities of Lexis, rcutLexis, addCov.Lexis and splitMulti using the Steno2 data (read the documentation using ?steno2).

Briefly, the data is a simulated version of the original Steno 2 data; no persons can be identified; but the results will be broadly similar to analysis based on the original Steno 2 data. The study randomized T2 diabetes patients with micro-albuminuria to either standard treatment or intensive treatment. Enrollment were from beginning of 1993 through mid 1994. There were 80 patients in each group; the intensive care turned out to be superior, so in 2001 it was decided to put all on the intensive care arm. The dataset steno 2 contains follow-up till the end of 2014.

The dates in steno2 are stored in Date format so we convert all of them to cal.yr format using the function cal.yr:
> data(steno2)
> steno2 <- cal.yr(steno2)
CODE EXPLAINED: The data frame steno2 has all dates represented as Date variables, so by cal. yr argument) we convert them all to cal. yr format, so risk time will be counted in years (defined as 365.25 days).

### 4.8.1 A Lexis object

We then devise a Lexis object with the follow-up from baseline of the study, doBase, to end of follow-up, doEnd:

```
# ------------------------------
# to be fixed in the data: a few deaths are a few days after doEnd
steno2$doEnd <- pmax(steno2$doEnd, steno2$doDth, na.rm = TRUE)
# ------------------------------
> L2 <- Lexis(entry = list(per = doBase,
        age = doBase - doBth),
        exit = list(per = doEnd),
        exit.status = factor((!is.na(doDth)) + deathCVD,
                        labels=c("Mic", "D(oth)", "D(CVD)")),
            id = id,
        data = steno2)
NOTE: entry.status has been set to "Mic" for all.
```

```
> summary(L2)
```

Transitions:

|  |  |  |  |  |  |  |
| :---: | ---: | ---: | ---: | ---: | ---: | ---: |
| From | Mic | D(oth) | D(CVD) | Records: | Events: Risk time: | Persons: |
| Mic | 67 | 55 | 38 | 160 | 93 | 2421.31 |

Code explained: The dates doBase and doEnd both refer to calendar time, here called per.
We code the exit status 0 for those alive, 1 for those who have a date of death, and 2 for those who also have an indicator of death from CVD. All included persons start in the Mic state, hence the naming of the first level of the exit status (where (!is.na(doDth)) + deathCVD is 0 ).

Note that we need to write (!is.na(doDth)) + deathCVD because " + " has higher precedence then "!"; that is, + is calculated before "!". Omitting the outer brackets would give the same result as ! (is.na(doDth) + deathCVD) which would be a logical, FALSE if the expression in brackets is 0 , otherwise TRUE-not what we want. You may want to consult the operator precedence order by ?Syntax.

### 4.8.2 Definition of intermediate states

We can now cut the follow-up at the occasions where albumin has been measured, that is, dates at which we consider a transition can take place. Depending on measurements, persons are classified as being in one of the states normo-albuminuria, micro-albuminuria or macro-albuminuria, in order of severity:
Norm < Mic < Mac. Recall that one of the entry criteria were that the persons should be in the state Mic.
This will not necessarily produce a transition at every date where current state is recorded; persons may have the same status at a given visit as they had on the previous. But there is no harm done in having a data representation of a transition from a given state to itself:

```
> data(st2alb)
> str(st2alb)
'data.frame': 563 obs. of 3 variables:
    $ id : num 1 1 1 1 1 2 2 2 2 2 ...
    $ doTr : Date, format: "1993-06-12" "1995-05-13" ...
$ state: Factor w/ 3 levels "Norm","Mic","Mac": 2 1 2 1 2 1 2 3 2 2 ...
> cut2 <- with(st2alb,
+ data.frame(lex.id = id,
+ cut = cal.yr(doTr),
+ new.state = state))
> head(cut2)
    lex.id cut new.state
1 1 1993.444 Mic
2 1 1995.361 Norm
3 2000.067 Mic
4 1 2001.984 Norm
5 1 2007.317 Mic
6 2 1993.786 Norm
> L3 <- rcutLexis(L2, cut2, timescale = 'per')
> levels(L3)
[1] "Mic" "Norm" "Mac" "D(oth)" "D(CVD)"
> L3 <- Relevel(L3, 2:1)
> summary(L3)
Transitions:
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline \multicolumn{10}{|l|}{To} \\
\hline From & Norm & Mic & Mac & D (oth) & D (CVD) & Records: & Events: & Risk time: & Persons: \\
\hline Norm & 90 & 31 & 5 & 14 & 7 & 147 & 57 & 608.84 & 69 \\
\hline Mic & 72 & 299 & 65 & 27 & 13 & 476 & 177 & 1383.65 & 160 \\
\hline Mac & 3 & 20 & 44 & 14 & 18 & 99 & 55 & 428.81 & 64 \\
\hline Sum & 165 & 350 & 114 & 55 & 38 & 722 & 289 & 2421.31 & 160 \\
\hline
\end{tabular}
```

CODE EXPLAINED: In order to cut the follow-up at the dates in doTr we must transform these dates to cal. yr format to align them with the dates in L2. And we must devise a data frame with the variable names lex.id, cut and new. state.

This is generated as cut2, to be used as input to rcutLexis, which cuts the follow up at the dates of transitions in cut2 and only keeps track of the most recent state occupied.

We finally reorder the levels of L3 with Relevel; note that we only need to care about the first two levels, the remaining levels will remain in the original order.

From the summary we see there are a few recorded transitions Norm $\rightarrow$ Mac and vice versa, but on physiological grounds we will not allow these; we put an artificial visit to the state Mic in between Norm and Mac:

```
set.seed(1952)
dd <- subset(L3, (lex.Cst == "Mac" & lex.Xst == "Norm") |
(lex.Xst == "Mac" & lex.Cst == "Norm"))
cut3 <- data.frame(lex.id = dd$lex.id,
            cut = dd$per +
                dd$lex.dur * runif(nrow(dd), 0.1, 0.9),
            new.state = "Mic")
cut3
lex.id cut new.state
1 70 2001.789 Mic
    86 2012.232 Mic
    130 2001.488 Mic
    131 2001.032 Mic
    136 1997.610 Mic
    136 2000.780 Mic
    171 1997.057 Mic
    175 2013.472 Mic
L4 <- rcutLexis(L3, cut3)
summary(L4)
Transitions:
    To
\begin{tabular}{crrrrrrrrr} 
From & Norm Mic & Mac & D (oth) & D(CVD) & Records: & Events: & Risk time: & Persons: \\
Norm & 90 & 35 & 0 & 13 & 6 & 144 & 54 & 581.91 & 66 \\
Mic & 72 & 312 & 65 & 30 & 14 & 493 & 181 & 1437.48 & 160 \\
Mac & 0 & 22 & 41 & 12 & 18 & 93 & 52 & 401.91 & 60 \\
Sum & 162 & 369 & 106 & 55 & 38 & 730 & 287 & 2421.31 & 160
\end{tabular}
```

CODE EXPlained: We find those records in L3 that represent direct transition between Norm and Mac, and put them in the data frame dd. We then choose a random time point in the middle $80 \%$ of the time represented in each of these (runif (nrow (dd), 0.1, 0.9) returns nrow (dd) random numbers between 0.1 and 0.9 ) and use these as the transition times to Mic, and finally these are used as cut points supplied to rcutLexis.

Note that there are now no direct transitions between Mac and Norm in L4. We show the course for two select persons that both have 4 transitions (the maximum in the dataset):

```
> addmargins(table(tt <- with(subset(L4, lex.Cst != lex.Xst),
+ table(lex.id))))
1rrrrrr
> who <- names(tt[tt==4]) [10:11]
> subset(L4, lex.id %in% who) [,1:6]
\begin{tabular}{rrrrrr} 
lex.id & per & age lex.dur lex. Cst & lex. Xst \\
143 & 1993.95 & 57.11 & 0.05 & Mic & Mac \\
143 & 1994.00 & 57.17 & 2.35 & Mac & Mic \\
143 & 1996.35 & 59.52 & 3.07 & Mic & Norm \\
143 & 1999.41 & 62.58 & 3.07 & Norm & D (oth) \\
159 & 1994.02 & 67.50 & 0.13 & Mic & Mic \\
159 & 1994.16 & 67.63 & 2.66 & Mic & Norm \\
159 & 1996.82 & 70.29 & 2.37 & Norm & Mic \\
159 & 1999.20 & 72.67 & 7.32 & Mic & Mac \\
159 & 2006.52 & 79.99 & 3.99 & Mac & D (CVD)
\end{tabular}
```

Code explained: First we select the records that represent a transition (i.e. where lex. Cst is different from lex. Xst), and make a table, tt, of the number of this type of records for each person. A table of the entries in tt shows that there are 11 persons with 4 transitions, and among these we select the two last, and print the 6 first variables for these two persons for illustration.

Once we have a Lexis object with all desired transitions we can get a graphical overview of the transitions between states:

```
> clr <- c("forestgreen", "orange", "red", "blue", gray(0.4))
> boxes(L4, boxpos = list(x = c(10,10,10,90,90),
                    y =c(5,50,95,25,75)),
    show.BE = "nz",
    scale.R = 1000,
    pos.arr = c(0.25,0.5)[c(2,2,1,1,2,1,1,2,1,1)],
        col.bg = clr,
    col.txt = c("white", "black")[c(1,2,1,1,1)],
    col.border = c(clr[1:3], rep("black", 2)),
        lwd = 3)
```



Figure 4.10: Transitions between states of albuminuria and death in the Steno2 study. The numbers in the center of the boxes are the total risk time (person-years), the numbers in the bottom of the boxes are the number of persons starting (left), resp. ending (right) their follow-up in each state; note that all persons start in the Mic state. The numbers on the arrows are the number of transitions and (rates per 1000 PY).
. ./graph/st2-albbox

CODE EXPLAINED: When we set show. BE to "nz" we do not have 0s printed in the boxes where the number of persons entering and exiting are printed.

The pos.arr argument determines where on the transition arrows the annotation is located-numbers between 0 and 1,0 corresponding to the root of the arrow, and 1 to the tip of the arrow. It is a vector of length equal to the number of transitions; the ordering of the transitions (arrows) is row-wise among the non- 0 , non-diagonal entries in the transition matrix as shown by summary.

The col. arguments set the background, text and border color of the boxes.

### 4.8.2.1 Defining transition times: interval censoring

We used the recorded test-times as transition times to new levels of micro- or macro-albuminuria. Instead we might have used the midpoints or some randomly generated time between the two measurements. Strictly speaking we have interval-censored data; the transition occurred sometime between the two measurements. We might even have generated several copies of the dataset where we randomly generated transition times; these could could then be analyzed in parallel and estimates combined in the usual way for multiple imputation. This type of analysis was done by Bjerg et al. [2].

### 4.8.3 Adding clinical measurements

When modeling the transition rates between states we may be interested in the effect of measured variables obtained at clinical visits, visits that are unrelated to state transition times. The follow-up of persons should then be divided at the time of the clinical visit, and the follow-up time after the visit have the values of measurements as covariates.

In the Steno2 study, we have also clinical measurements at different visits in the dataset st2clin:

```
> data(st2clin)
> str(st2clin)
'data.frame': 750 obs. of 5 variables:
    $ id : num 1 2 3 4 5 6 7 8 9 10 ...
$ doV : Date, format: "1993-05-07" "1993-05-05" ...
$ a1c : num 87.3 66.5 73 61.2 102.7 ...
$ chol: num 3.9 6.6 5.6 5.2 6 4.8 8.6 5.1 4.2 5.4 ...
$ crea: num 83 83 68 97 149 55 56 78 123 79 ...
> table(table(st2clin$id))
1
2 6 23 38 31 60
```

We can add this clinical information to the follow-up by cutting the follow-up at these times using the addCov.Lexis function. It takes as arguments a Lexis object and a data frame of clinical measurements classified by person and date. It is required that the data frame with the clinical data set has a lex.id variable and a variable with the same name as one of the time scales in the Lexis object. The remaining variables are considered to be clinical measurement values.

```
> clin <- mutate(st2clin,
+ lex.id = id,
    per = as.numeric(cal.yr(doV))) %>%
    select(-id, -doV)
> head(clin[order(clin$lex.id, clin$per),], 8)
    a1c chol crea lex.id per
1 87.3 3.9 83 1 1993.346
161 68.9
317 63.7 4.4 63 1 1997.477
466 50.6 3.0 105 1 2001.083
594 74.9 3.2 107 1 2006.715
687 32.8
2 66.5
162 54.8 5.7 105 2 1995.487
> str(clin)
```

```
'data.frame': 750 obs. of 5 variables:
    $ a1c : num 87.3 66.5 73 61.2 102.7 ...
    $ chol : num 3.9 6.6 5.6 5.2 6 4.8 8.6 5.1 4.2 5.4 ...
    $ crea : num 83 83 68 97 149 55 56 78 123 79 ...
    $ lex.id: num 1 2 3 4 5 6 7 8 9 10 ...
    $ per : num 1993 1993 1993 1993 1993 ...
> L5 <- addCov.Lexis(L4,
+ clin,
+ timescale = 'per',
+ tfc = 'tsClin')
> summary(L4)
```

Transitions:

|  |  |  |  |  |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| From | Norm Mic | Mac | D (oth) | D (CVD) | Records: | Events: Risk time: | Persons: |  |
| Norm | 90 | 35 | 0 | 13 | 6 | 144 | 54 | 581.91 |

> summary (L5, timeScales = TRUE)
Transitions:

|  |  |  |  |  |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| From | Norm | Mic | Mac | D(oth) | D(CVD) | Records: | Events: | Risk time: |
| Persons: |  |  |  |  |  |  |  |  |
| Norm | 231 | 35 | 0 | 13 | 6 | 285 | 54 | 581.91 |

Timescales:

| per age tsClin |  |
| ---: | ---: | ---: |
| "" | "" |

Code explained: We use mutate to devise the variables lex.id and per (the timescale for the measurement times), and select to remove variables that we do not want carried over to the Lexis object. All other variables than lex.id and the time scale variable will namely be carried over to the extended Lexis object as clinical variables.

The resulting object, clin, is then used to extend the L4 object using addCov.Lexis.
Note that when the time scales are listed, per and age are listed as "", which means that neither of them are defined as time since entry into a state. tsClin is marked as " X ", which means that it is a deficient time scale: it is not defined for some follow-up (namely that preceding the the first clinical visit), and that it is reset at each new clinical visit. But it must be defined a time-scale because it must be updated at subsequent splitting and cutting.

We see that transitions and risk time are the same in L4 and L5, but that L5 has more records, due to the cut of follow-up at the clinical visit times.

```
> (wh.var <- names(L5)[c(4,1:2, 25,3,19:23)])
    [1] "lex.id" "per" "age" "tsClin" "lex.dur" "lex.Cst" "lex.Xst" "exnam"
    [9] "a1c" "chol"
> subset(L5, lex.id %in% who) [,wh.var]
    lex.id per age tsClin lex.dur lex.Cst lex.Xst exnam a1c chol
        143 1993.95 57.11 0.01 0.05 Mic Mac ex1 69.3 4.6
        143 1994.00 57.17 0.06 1.50 Mac Mac ex1 69.3 4.6
        143 1995.50 58.67 0.00 0.85 Mac Mic ex2 55.2 4.4
        143 1996.35 59.52 0.85 1.16 Mic Mic ex2 55.2 4.4
        143 1997.51 60.68 0.00 1.91 Mic Norm ex3 73.6 5.4
        143 1999.41 62.58 1.91 1.87 Norm Norm ex3 73.6 5.4
        143 2001.28 64.45 0.00 1.20 Norm D(oth) ex4 75.5 3.5
        159 1994.02 67.50 NA 0.03 Mic Mic <NA> NA NA
        159 1994.06 67.53 0.00 0.10 Mic Mic ex1 64.0 4.4
        159 1994.16 67.63 0.10 1.35 Mic Mic ex1 64.0 4.4
        159 1995.51 68.98 0.00 1.32 Mic Norm ex2 50.5 5.0
```

| 159 | 1996.82 | 70.29 | 1.32 | 0.66 | Norm | Norm | ex2 | 50.5 | 5.0 |
| ---: | ---: | ---: | ---: | :--- | :---: | ---: | :--- | :--- | :--- |
| 159 | 1997.48 | 70.95 | 0.00 | 1.71 | Norm | Mic | ex3 | 43.9 | 3.9 |
| 159 | 1999.20 | 72.67 | 1.71 | 2.40 | Mic | Mic | ex3 | 43.9 | 3.9 |
| 159 | 2001.60 | 75.07 | 0.00 | 4.92 | Mic | Mac | ex4 | 49.8 | 3.8 |
| 159 | 2006.52 | 79.99 | 4.92 | 0.18 | Mac | Mac | ex4 | 49.8 | 3.8 |
| 159 | 2006.69 | 80.16 | 0.00 | 3.82 | Mac | D (CVD) | ex5 | 59.7 | 3.1 |

CODE EXPLAINED: We select names of relevant variables in the data frame we want to see, and invoke the print method for Lexis objects to show the records from two of the persons.

For person 143 the first value of tsClin is not 0 , because the earliest clinical measurement is before entry to the study (albeit only by 19 days $(0.052 \times 365.25=18.993)$ ).

Also, the time scale tsClin has missing values; namely for those pieces of follow-up that are before the first clinical measurement as is seen for person 159. This is something to be wary of when modeling rates-if ignored you may accidentally miss some observation time in your analysis.

Finally, for analysis of the transition rates we can split time in smaller intervals; the point of having tsClin as covariate is that we may use it to model how the effect of the clinical variables changes with the time since measurement. Therefore it is defined as a time scale by addCov.Lexis:

| ```> options("popEpi.datatable" = FALSE) > L6 <- splitMulti(L5, per = seq(1980, 2020, 0.5)) > summary(L5)``` |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Transitions: To |  |  |  |  |  |  |  |  |  |
| From Norm |  | Mic | Mac D (oth) D |  | D (CVD) | Records: | Events: R | Risk time: | Persons: |
| Norm | 231 | 35 | 0 | 13 | 6 | 285 | 54 | 581.91 | 66 |
| Mic | 72 | 708 | 65 | 30 | 14 | 889 | 181 | 1437.48 | 160 |
| Mac | 0 | 22 | 136 | 12 | 18 | 188 | 52 | 401.91 | 60 |
| Sum | 303 | 765 | 201 | 55 | 38 | 1362 | 287 | 2421.31 | 160 |
| > summary (L6) |  |  |  |  |  |  |  |  |  |
| Transitions: To |  |  |  |  |  |  |  |  |  |
| From | Norm | Mic | Mac | c D(oth) | ) $\mathrm{D}(\mathrm{CVD})$ | Records: | Events: | : Risk time: | Persons: |
| Norm | 1396 | 35 |  | 013 | 36 | 1450 | 54 | 4581.91 | 66 |
| Mic | 72 | 3565 | 65 | 530 | 0 14 | 3746 | 181 | 1437.48 | 160 |
| Mac | 0 | 22 |  | 512 | 218 | 997 | 52 | 2401.91 | 60 |
| Sum | 1468 | 3622 | 1010 | 055 | 538 | 6193 | 287 | 72421.31 | 160 |

CODE EXPLAINED: We use the splitMulti function from the popEpi package, it returns a data.table instead of a data.frame, unless we set the options popEpi.datatable to FALSE as shown. This will make the function a bit slower, though.

We see that tsClin behaves like a time scale and is properly expanded by the time-splitting. But it should not be used as a time scale to split along, because it is not guaranteed that the result is sensible.
... now input from datarep

### 4.9 Summary of multistate data representation

As we have seen, the raw observations in multistate models are just recordings of dates (times, in general) where transitions from one state to another occur along with the information of the states from and to which the transition occur. We assume that the precise time of each transition is known. These are the basic data items required to construct the relevant dataset(s) for estimation of transition rates.

In the Epi package is implemented the Lexis machinery for representation and manipulation of multistate date; a complete overview of all relevant functions is given in chapter ??.

We use the term "cut" for the operation of subdividing follow-up at one time point, typically some sort of event representing a transition to a new state. We are using the term "split" for the operation of subdividing follow-up into many small intervals along some time scale.

### 4.9.1 Prerequisites and construction of a Lexis object

1. Make sure that all times of interest are recorded as absolute dates; date of birth, date of entry, date of exit from the study, date of death and date of any intermediate events of interest. This allows calculation of age, disease duration etc. at any time required.
2. First determine the total follow-up period for each person. As a start set up the total follow-up (basically starting with entry in some "alive" state and either ending in some absorbing "dead" state or being censored alive).
The function Lexis [9] will create a data frame with additional structure, called a Lexis object which allows representation of multistate follow-up on multiple time scales, and provides tools for manipulation and display of multistate data.
3. Then subdivide the total follow-up according to the state currently occupied. Keep track of how much time is spent in each state, and which transitions occur.
Tools for subdivision of follow-up in a Lexis object at transition times are cutLexis, mcutLexis and rcutLexis. Note that there is no dot (".") before the "Lexis" in these function names.
(a) cutLexis will cut records representing follow-up at times where an intermediate event occurs; only one event per person is allowed. For some persons one record will be replaced by two, representing follow-up pre- and post-event, with different values of the state variables.
There is no requirement that the intermediate event time should be within the observation window for a person; if the event occurs before the beginning of follow-up for a person, all the follow-up of the person will be classified in the new state. If the event occurs after the end of follow-up, no change to the representation of the person's follow-up is made.
(b) mcutLexis will do the same but for several types of intermediate events, that occur at most once each for a person, and where we want to keep track of which events has occurred in which order for each person (the history).
(c) rcutLexis will also cut at multiple events for a person, but it only keeps track of the most recent event type, and moreover multiple occurrences of event types (transitions) are allowed. This will typically be in situations where we are modeling different degrees of illness, and where improvement may occur too.
4. Defining time-dependent variables in a Lexis object is done by addCov.Lexis and addDrug.Lexis. These functions are S 3 methods for Lexis objects, so when calling them you can leave out the ".Lexis".
(d) addCov.Lexis will add clinical covariates to follow-up time in Lexis objects, and keep track of the time since recording of them. This is a bit like cutLexis for the event "most recent clinical visit", without recording this as a state, but keeping the time since last visit as a time scale. The latter will not be a proper timescale, because it is reset to 0 at every clinical visit, so it is only useful as a covariate, but it will be respected by the time-splitting functions, so properly updated by the split and cut functions.
(e) addDrug. Lexis will add drug exposure variables to the Lexis object. The object will be cut at all dates of drug purchase plus dates of computed drug expiration. Records representing follow-up between these will receive exposure variables.
The added covariates are computed from the exposure records, they refer to the level of exposure at the beginning of each interval, according to the chosen exposure algorithm.
This has the consequence that time-splitting or -cutting is not meaningful after using addDrug.Lexis. Splitting and cutting will carry all covariate values forward in time, and this is not meaningful for the covariates generated by addDrug. Lexis.
This is why the addDrug. Lexis should be changed so that no new cuts are added-data will normally already be split. A possible exception might be the date of first purchases of each drug, allowing a more precise assessment of drug allocation effects.

The resulting Lexis object will have (at least) one record for each state occupied by a person, with the time at entry to the state defined on all time scales (one variable for each time scale), as well as a variable with the sojourn time in the state and an indication of the state to which transition occur at the end of the sojourn.
The Lexis object represents the follow-up through the states, and will be the basis for analysis of transition rates between states.
5. Since we only ever consider models for a finite number of states, the states are represented by levels of a factor - the designated way in R to represent a variable that only assumes values in a pre-specified finite set. The Lexis machinery does allow representation of states as numbers, but it is discouraged since it makes your code more error-prone and results less readable.
6. The follow-up in Lexis objects can be summarized in tabular form by summary (that is summary.Lexis), and as a diagram with states as boxes by boxes (boxes.Lexis). Finally, follow-up on two select time scales can be illustrated in a Lexis diagram by the plot (plot. Lexis) function for Lexis objects.
7. If we want to model transition rates using smooth functions for the effect of the time scales [6], we must split the follow-up in intervals so small that an assumption of constant rate within each interval is a reasonable assumption; this can be done by splitLexis. For most chronic diseases a reasonable interval length would be 0.5 years.
The functionality of splitLexis is duplicated and expanded (in a faster version, with more intuitive syntax) by splitMulti from the popEpi package. splitMulti derives its name from the ability to split follow-up time along multiple time scales simultaneously.
8. The time splitting is not necessary if you model the cumulative rates by smooth functions [10], but that will effectively restrict you to models with only one time scale in the description of the rates.

### 4.10 Summary of analysis of transition rates

A Lexis object is a data frame representation of the follow-up of persons through states. This can be exploited to simplify model specification for transition rates because the likelihood for a specific transition rate is a sum of terms that correspond to records in the Lexis object.

Joint models for several rates can be specified as well, provided that no two transition rates originate in the same state. This will be the case for most models of practical interest.

Rate models based on Lexis objects are specified by one of three functions:

- glm. Lexis fits a Poisson model using glm with the poisreg family.
- gam. Lexis fits a Poisson model using gam with the poisreg family; this is a machinery that allows use of penalized splines for the effect of quantitative variables through the function $s()$.
- coxph-Lexis fits a Cox model.

The Cox modeling requires that a baseline time scale be specified as a response, i.e. as the l.h.s. of a formula. For the other two functions only the r.h.s. of a formula can be specified because the baseline time scale(s) are part of the explanatory variables.

For a complete specification of a multistate model it is necessary to have a model for all of the observed transitions in the model. The models need not all be different, some groups of transitions may be described by the same model. Normally the lex. Cst will then be among the covariates, allowing the estimated rates to depend on the originating state for the model.

At this point we are not going beyond the models for the transition rates; this will be detailed in the chapters on competing risks (6, p. 92) and and estimation from multistate models (7, p. 107).

## Chapter 5

## Recurrent events

When an event can occur multiple times for an individual, such as bone fracture or more realistically, hypoglycemia ${ }^{1}$ in diabetes patients, the event occurrence is said to be recurrent. If the number of times the event occurs is not vast (no more than 15 per person), the normal way of modeling the events is in a multistate model with states $0,1,2, \ldots$ indicating the attained number of occurrences of the event. The rates of the transitions $0 \rightarrow 1,1 \rightarrow 2,2 \rightarrow 3$ etc.will typically be modeled with the same effects, but with an additional parameter for each extra occurrence of a transition to accommodate the effect of the attained number of recurrences (that is, the current state).

In practical applications, the estimated effect of the currently attained state on the rate of transition to the next is likely to be increasing by state number because of selection: persons more likely to have many events will be increasingly over-represented by increasing state (that is, increasing no. of events), and by that token the rate of the next event will tend to increase by the number of events so far.

This phenomenon can also be regarded as a reflection of an empirical fact, usable for prediction of rates conditional on the number of attained events. By considering it a true effect we would be assuming that the sheer number of attained events were a determinant of the rate of the next event.

When a person can have more events during follow-up it is (at least in theory) possible to estimate a person-specific parameter which is common across the rates in a given model. This can be interpreted as a person-specific propensity for the event of interest, normally termed "frailty", and usually taken to be a multiplicative term on the rate scale.

It will only be possible to estimate a separate (fixed) frailty parameter for each person if all persons have at least one transition in the model. Which is very rarely the case. Therefore, a frailty distribution is postulated-note that the particular distribution chosen essentially is a statement about the specific study population at hand.

By that token, it would be desirable to estimate the shape of the frailty distribution-in many practical applications it can be suspected that there is a certain fraction of the population that is effectively immune to the recurrent event, corresponding to a frailty distribution with an atom, for example taken to be at 1 . This would be a mixture model, that could either be specified flexibly using JAGS or some other Bayesian MCMC machinery or using mixture models like the ones available in the gnlm package.

If we consider multiplicative models for the transition rates we may use a normal distribution for the (log-)frailty, by including the frailty as an additive term on the log-rates scale. In the literature it has become the convention to refer to the frailty as the multiplicative term, so the model with a normally distributed term for the log-rates will be referred to as a model with log-normal frailty distribution.

Thus, if we have possible repeat events for each person we may consider using a random effects model. And then report some measure of the random effects distribution, for example the median absolute difference (or ratio) of frailties between two randomly chosen persons, see [8].

It is not possible to separate the frailty effect from the actual effect of number of events conceptually, but computationally we will normally be able to separate the effects. However, the separation (i.e.the estimated effects of state) will depend on a particular distributional assumption for the random effects-the systematic effects of state (attained no. of events) is the "residual" not picked up by the random effects.

[^4]
### 5.1 Example: Hospitalized hypoglycemia (HH)

First we load the packages needed:

```
    [,1]
    "R version 4.2.0 (2022-04-22 ucrt)"
LibPath "C:/util/R/R-4.2.0/library"
Package "Epi"
Version "2.47"
```


### 5.1.1 Data set of recurrences

First we load the two datasets, one with one record per person ( pp ) and one with one record per hypoglycaemaia event (hh). In the person data set we define sex as a proper factor (as it should always be-like any other categorical variable):

```
> # load(file = "~/teach/SPE/MSbook/data/HH.Rda", v = T)
> load(file = "../data/HH.Rda", v = T)
Loading objects:
    pp
    hh
> pp$sex <- factor(pp$sex, levels = 1:2, labels = c("M","W"))
> str(pp)
'data.frame': 18314 obs. of 14 variables:
    $ dob : num 1954 1972 1968 1935 1951 ...
    $ id : int 1 3 4 7 8 9 10 11 12 13 ...
    $ bmi : num 26 26.1 25.6 23.5 24.8 ...
    $ dodm: num 2003 1980 2002 1969 1996 ...
    $ doe : num 2007 2006 2006 2009 2008 ...
    $ dox : num 2012 2013 2012 2012 2010 ...
    $ dod : num NA NA NA NA NA NA NA NA NA NA ...
    $ sex : Factor w/ 2 levels "M","W": 1 2 2 1 1 2 1 1 2 2 ...
    $ hba : num 39.9 76 61.7 45.4 42.1 ...
    $ alb : num NA NA NA 0.1 NA ...
    $ sbp : int 134 160 144 135 135 145 142 115 116 120 ...
    $ aht : int 1 1 1 2 2 1 1 2 1 1 ...
    $ llt : int 1 1 1 2 2 1 1 1 1 1 ...
$ smk : Factor w/ 5 levels "Daily smoker",..: 3 1 1 2 1 1 1 4 3 3 ...
> str(hh)
'data.frame': }16194\mathrm{ obs. of 3 variables:
    $ id : int 11 11 11 11 11 11 11 16 16 16 ...
    $ doh: num 2002 2003 2004 2005 2011 ...
    $ nh : int 1 2 3 4 5 6 7 1 2 3 ...
```

The data frame pp only contains follow-up w.r.t. death for the period May 2005 through January 2013:

```
> summary(pp$dod, na.rm=TRUE)
    Min. 1st Qu. Median Mean 3rd Qu. Max. NA's
    2007 2010 2010 2010 2011 2012 17641
```

The dates in the datasets are in cal.yr format, but we can convert them to human-readable form by as.Date.cal.yr:
> as.Date.cal.yr(range (pp\$doe))
[1] "2005-05-02" "2012-09-05"
> as.Date.cal.yr (range (pp\$dox))
[1] "2006-07-12" "2013-01-13"
> as.Date.cal.yr(range(pp\$dod, na.rm = TRUE))
[1] "2007-01-06" "2012-01-10"
recur

The recorded dates of HH span a somewhat longer range back in time, enabling us to assign an absolute ("lifetime") number of each recorded hypoglycemia episode:

```
> as.Date.cal.yr(range(hh$doh))
[1] "1985-02-21" "2013-11-20"
```

We also explore how the entry and exit dates relate in the pp data frame:

```
> with(pp, plot(doe, dox, pch = 16, cex = 0.3,
    xlim = c(2005,2013), ylim = c(2005,2013)))
> for (i in 0:6) abline(i, 1, col = "red", lty = "24")
> abline(v = 2005 + 0:8 + (31 + 15)/365.25,
+ h = 2005 + 0:8 + (31 + 15)/365.25,
+ col = "forestgreen", lty = "24")
> for(si in 1:2) axis(side = si, at = 2005:2013, labels = NA)
```



Figure 5.1: Entry and exit dates in the hypoglycemia study. Note that the green broken lines are located at $15^{\text {th }}$ February each year, both for date of entry (doe) and date of exit (dox), while the broken red lines represent integer differences between date of exit and entry.
../graph/recur-doenex

From figure ?? it is pretty clear that there is a preference of having the exit date an integer number of years after the entry date (the red dotted lines). Also, there seems to be preferential values both for entry and exit dates at approximately $15^{\text {th }}$ February each year (indicated by green dotted lines). This illustrates how important it is to explore the relationships between dates in the original data. For this data set we do not have any explanations of the pattern, but it is typical for the effect of some kind of date-rounding.

### 5.1.1.1 Removing presumed duplicated HH events

First we provide an overview of how many persons have how many HH events

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 2775 | 1248 | 664 | 335 | 244 | 146 | 108 | 86 | 46 | 58 | 26 | 23 | 14 | 13 | 10 | 11 | 8 | 9 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 32 | 33 | 36 | 39 | 44 | 46 |
| 6 | 5 | 4 | 3 | 3 | 3 | 2 | 5 | 1 | 1 | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 2 |
| 49 | 53 | 56 | 63 | 83 | Sum |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 | 1 | 1 | 2 | 1 | 5874 |  |  |  |  |  |  |  |  |  |  |  |  |

CODE EXPLAINED: First we determine the number of rows in hh and then make a table of ids, ( tt ), with the number of records for each person. A tabulation of $t t$ then shows how many persons have 1,2 , ....recorded episodes.

HH events occurring too close together can be suspected to be repeat recordings of the same event. Hence, we want to remove HH episodes too close to the previous one. To this end we first make a histogram of the time between successive HH episodes for those with at least two recorded:
> hh\$gap <- c(NA,diff(hh\$doh))
> dgap <- hh\$gap[duplicated(hh\$id)] * 365.25
> dgap <- dgap [dgap < 100]
> hist(dgap, col = 1, breaks = 0:100,
$+\quad$ main $=$ "", xlab = "Gap lengths (days)")
CODE EXPLAINED: First we compute the successive differences between HH dates using diff. The first value of this within each person is not relevant-it is the difference to a date from the previous person. So we will exclude first record for each person. This is achieved by using duplicated that returns the indicator of records with an earlier value of the variable, in this case id. Finally we restrict to gaps that are smaller than 100 days, and make a histogram of these.

We see from figure 5.2 that the frequencies of gaps is sinking from 0 through 4 weeks, so there is no clear data feature to reveal a threshold below which we consider two recordings to be one event. Therefore we more or less arbitrarily choose 14 days as an arbitrary cut-off for considering two recordings as being one HH episode:

```
> wh.keep <- which((hh$gap > 13.5/365.25 & duplicated(hh$id)) |
+ !duplicated(hh$id))
> length(wh.keep)
[1] 14270
```

Having done this, we must re-number the HH episodes within each individual, i.e. update the nh variable:

```
> hh <- data.frame( hh[wh.keep,]
+ %>% group_by(id)
+ %>% mutate(nh = row_number())
+ %>% select(c(id, doh, nh))
+ )
```

So hh is now thinned to have only consecutive episodes of HH that are at least 14 days apart.

### 5.1.2 Constructing a Lexis object

### 5.1.2.1 Initial Lexis data frame

First we construct a Lexis data frame with follow-up from entry (doe) to exit (dox) and with exit status dead (Dead) or alive (coded $0 . \mathrm{HH}$ as the default is 0 HHs until information on HH is added):


Figure 5.2: Distribution of within-person gaps between successive HH events; shown in oneday bins. A person may contribute more than one gap in the histogram, but only persons with at least two recorded HH dates contribute.

```
> Lx <- Lexis(data = pp,
+ entry = list(per = doe,
    age = doe - dob,
        dur = doe - dodm),
        exit = list(per = dox),
            id = id,
    exit.status = factor(!is.na(dod),
                            labels = c("O.HH","Dead")))
NOTE: entry.status has been set to "O.HH" for all.
NOTE: Dropping 1 rows with duration of follow up < tol
> summary(Lx, t = T)
Transitions:
\begin{tabular}{crrrrr}
\multicolumn{2}{c}{ To } & & & & \\
From & 0. HH Dead & Records: & Events: Risk time: & Persons: \\
0. HH & 17640 & 673 & 18313 & 673 & 73223.02
\end{tabular}
```

[^5]Once this has been established, we will use rcutLexis to repeatedly cut the follow-up of each person, however only the first 15 HH occurrences:

```
cutHH <- mutate(subset(hh, nh <= 10),
                    lex.id = id,
                        cut = doh,
            new.state = ifelse(nh < 10,
                                    pasteO(nh, ".HH"),
                                    "10+HH")) %>%
        select(lex.id, cut, new.state)
head(cutHH, 15)
    lex.id cut new.state
            1 1 2 0 0 2 . 1 7 4 ~ 1 . H H
            11 2003.375 2.HH
            11 2004.269 3.HH
            11 2004.565 4.HH
            11 2011.312 5.HH
            11 2013.051 6.HH
            11 2013.522 7.HH
            16 2003.414 1.HH
            16 2003.818 2.HH
            16 2009.943 3.HH
            17 1999.275 1.HH
            19 2013.610 1.HH
            23 2002.245 1.HH
            2002.319 2.HH
            23 2008.304 3.HH
> table(cutHH$new.state)
\begin{tabular}{lrrrrrrrrr} 
1. HH & \(10+\mathrm{HH}\) & \(2 . \mathrm{HH}\) & 3. HH & \(4 . \mathrm{HH}\) & \(5 . \mathrm{HH}\) & \(6 . \mathrm{HH}\) & \(7 . \mathrm{HH}\) & \(8 . \mathrm{HH}\) & \(9 . \mathrm{HH}\) \\
5874 & 160 & 2826 & 1605 & 997 & 680 & 481 & 351 & 257 & 200
\end{tabular}
> system.time(
+ Rx <- rcutLexis(Lx,
+ cut = cutHH,
+ timescale = "per"))
    user system elapsed
    5.96 0.14 6.09
```

CODE EXPLAINED: In order to cut the follow-up at multiple dates (but not keeping track of the history of state visits), we need a data frame with the dates of events (in a variable cut, here from hh\$doh) and the names of the states that events induces to (in the variable new. state, here it takes values $x . H H$, where $x$ is the number of the hypoglycemic event)—and of course the person id, lex.id.

Using this data frame as argument to rcutLexis we also need to tell what timescale in Lx the values in variable cut refer to.

Even if several of the transitions occur before follow-up, the number of HHs before start of follow-up will be correctly counted by rcutLexis.

In the output from summary ( $R x$ ) we see the characteristic transition matrix for recurrent events; the only possible transitions from, say, state $3 . \mathrm{HH}$ are $3 . \mathrm{HH}$ (censoring in state 3. HH ), 4. HH (the next HH event) or Dead:

| Transit | y( $R x$ ) ions: |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| From | $0 . \mathrm{HH}$ | 1. HH | 2. HH | 3. HH | 4. HH | 5. HH | $6 . \mathrm{HH}$ | 7. HH | 8. HH | 9. HH | 10+HH | Dead | Records: | Events: |
| $0 . \mathrm{HH}$ | 12434 | 887 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 335 | 13656 | 1222 |
| 1. HH | 0 | 2787 | 568 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 141 | 3496 | 709 |
| 2. HH | 0 | 0 | 1112 | 373 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 62 | 1547 | 435 |
| 3. HH | 0 | 0 | 0 | 498 | 260 | 0 | 0 | 0 | 0 | 0 | 0 | 47 | 805 | 307 |
| 4. HH | 0 | 0 | 0 | 0 | 275 | 193 | 0 | 0 | 0 | 0 | 0 | 30 | 498 | 223 |
| 5. HH | 0 | 0 | 0 | 0 | 0 | 168 | 144 | 0 | 0 | 0 | 0 | 11 | 323 | 155 |
| 6. HH | 0 | 0 | 0 | 0 | 0 | 0 | 101 | 105 | 0 | 0 | 0 | 9 | 215 | 114 |
| 7. HH | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 68 | 70 | 0 | 0 | 13 | 151 | 83 |

recur


We can illustrate the pattern of the recurrent events with a plot of the states:

```
angles <- seq(pi, -pi * 0.8, length.out = 11)
boxes(Rx, boxpos = list(x = c(cos(angles) * 42 + 50, 50),
    y =c(sin(angles)*42 + 50, 50)),
    show.BE = "nz", cex = 0.9,
    scale.R = 100,
    pos.arr = 0.4)
```

CODE EXPLAINED: The function boxes (really boxes.Lexis) takes a Lexis object as the first argument and as the second (boxpos) a list with $x$ and $y$ coordinates of the centers of the boxes. The Lexis object Rx has 12 states, so we must provide 12 coordinate-pairs. In order to place the 11 first states on an (almost) full circle we compute 11 equidistant angles from $\pi$ to $-\pi \times 7 / 9$; pi is a built-in constant in R (guess its value). The $x$ and $y$ coordinates of the boxes are then made by cos, resp. sin of these angles, multiplied by 42 to make a circle of diameter 84 , and offset by 50 in both directions in order to center it in the display of $(0,100)$ in both directions in which boxes operate. Finally, 50 is appended as both $x$ and $y$ coordinate of the last state (Dead) in the center of the display.

The show. BE puts two numbers at the bottom om each box, showing how many Begin, respectively End their follow-up in each state. The scale. R scales the Rates on the arrows by a factor 1000 , and the pos.arr positions the number of events and rates on the arrows at $55 \%$ from the beginning of the arrow.

From figure 5.3 we see that there are quite a number of persons who enter the study with several previous instances of HH. We also see that both rates of next hypoglycemia and mortality rates increase by the number of hypoglycemic events.

### 5.1.2.2 Time since last HH as time scale

In the more detailed analysis of rates we want to keep track of the time since the most recent hypoglycemic event, so we define a variable to do this. Some persons enter the study after HH, so we must retrieve the dates of all HH events, including those that occur before study entry.

```
> Rx <- left_join(Rx, rename(cutHH, doHH = cut),
    by = c("lex.id" = "lex.id",
    "lex.Cst" = "new.state"))
> Rx <- factorize(Rx)
> Rx <- Relevel(Rx, c(pasteO(0:9,".HH"),"10+HH","Dead"))
> Rx$tfHH <- with(Rx, ifelse(lex.Cst == "O.HH", NA, per - doHH))
> attr(Rx, "time.scales") <- c(attr(Rx, "time.scales"), "tfHH")
> attr(Rx, "time.since" ) <- c(attr(Rx, "time.since" ), "")
> attr(Rx, "breaks") <- c(attr(Rx, "breaks"), list(tfHH = NULL))
>str(RX)
```



Figure 5.3: Transitions by recurrences of hypoglycemia. The numbers in the middle of the boxes are the risk time (total sojourn time), at the bottom left the number of persons starting follow-up in the state, at the bottom right the number of persons ending follow-up in the state. The numbers on the arrows are the number of transitions and (rates per 100 person-years). ../graph/recur-HH-rec-box

```
Classes 'Lexis' and 'data.frame': 21017 obs. of 23 variables:
    $ per : num 2007 2006 2006 2009 2008 ...
    $ age : num 52.7 34.5 37.9 74 57 ...
    $ dur : num 4.13 26.31 4.21 40.05 11.64 ...
    $ lex.dur: num 5.28 6.58 6.1 2.95 2.06 ...
    $ lex.Cst: Factor w/ 12 levels "0.HH","1.HH",...: 1 1 1 1 1 1 1 1 1 1 1 5 6 1 ....
    $ lex.Xst: Factor w/ 12 levels "0.HH","1.HH",..: 1 1 1 1 1 1 1 6 6 1 ...
    $ lex.id : int 1 3 4 7 8 9 10 11 11 12 ...
    $ dob : num 1954 1972 1968 1935 1951 ...
    $ id : int 1 3 4 7 8 9 10 11 11 12 ...
    $ bmi : num 26 26.1 25.6 23.5 24.8 ...
    $ dodm : num 2003 1980 2002 1969 1996 ..
    $ doe : num 2007 2006 2006 2009 2008 ...
    $ dox : num 2012 2013 2012 2012 2010 ...
    $ dod : num NA NA NA NA NA NA NA NA NA NA ...
    $ sex : Factor w/ 2 levels "M","W": 1 2 2 1 1 1 2 1 1 1 2 ...
    $ hba : num 39.9 76 61.7 45.4 42.1 ...
    $ alb : num NA NA NA 0.1 NA ...
```

recur

```
$ sbp : int 134 160 144 135 135 145 142 115 115 116 ...
$ aht : int 1 1 1 2 2 1 1 2 2 1 ...
$ llt : int 1 1 1 2 2 1 1 1 1 1 ...
$ smk : Factor w/ 5 levels "Daily smoker",..: 3 1 1 2 1 1 1 4 4 3 ...
$ doHH : num NA NA NA NA NA ...
$ tfHH : num NA NA NA NA NA ...
- attr(*, "time.scales")= chr [1:4] "per" "age" "dur" "tfHH"
- attr(*, "time.since")= chr [1:4] "" "" "" ""
- attr(*, "breaks")=List of 4
..$ per : NULL
..$ age : NULL
..$ dur : NULL
..$ tfHH: NULL
```

CODE EXPLAINED: In the data frame cutHH we used for cutting follow-up at the dates of HH, we have the dates of HH in the variable cut, and the state in the variable new. state. We then do a left_join of this to the Lexis object Rx , matching on the variables lex.Cst/new.state. This way we get the date of the HH event that is the basis for lex.Cst, since lex.Cst is the state in which follow-up starting at the date per takes place.

The factorize is necessary in order to make lex.Cst a factor, a propterty that was lost by using left_join, and the Relevel is then needed because factorize puts levels in standard alphabetical order.

In the data frame created by rcutLexis we have precisely one record for each state defined by no. of hypoglycemic events, where the number of events seen so far is indicated in lex.Cst. For records representing follow-up with at least one HH we set the new variable tfHH to time since this event (per-doHH), and for the state without any HH ( $0 . \mathrm{HH}$ ) we set tfHH to NA.

Most importantly however, we declare tfHH as a timescale: a Lexis object has a number of attributes that are used for manipulation of the object. Among these is time.scales-a character vector with the names of the variables that represent time scales, time.since-the names of the states that have a time scale representing the time since entry to a particular state and breaks-a vector of points where the corresponding time scale is split. These attributes are expanded to include tfHH as a time scale, so that the variable tfHH will be properly updated when follow-up is split in smaller intervals.

For illustrational purposes we fish out persons that have spent time both in $0 . \mathrm{HH}$ and $4 . \mathrm{HH}$, and take the first of these:

```
> (wh0 <- intersect(subset(Rx, lex.Cst == "4.HH")[,"lex.id"],
+ setdiff(subset(Rx, lex.Cst == "3.HH")[,"lex.id"],
+
    subset(Rx, lex.Cst == "O.HH")[,"lex.id"]))[1])
[1] 27
> (wh1 <- intersect(subset(Rx, lex.Cst == "3.HH")[,"lex.id"],
+ subset(Rx, lex.Cst == "O.HH")[,"lex.id"])[1])
[1] }49
> whc <- grep("HH", names(Rx))
> subset(Rx, lex.id %in% c(wh0, wh1)) [,c(1:7,whc)]
\begin{tabular}{rrrrrrrrr} 
lex.id & per & age & dur & tfHH & lex.dur & lex. Cst & lex. Xst & doHH \\
27 & 2006.97 & 19.62 & 8.32 & 6.08 & 1.69 & \(3 . \mathrm{HH}\) & \(4 . \mathrm{HH}\) & 2000.887 \\
27 & 2008.65 & 21.31 & 10.01 & 0.00 & 2.56 & \(4 . \mathrm{HH}\) & \(5 . \mathrm{HH}\) & 2008.655 \\
27 & 2011.21 & 23.87 & 12.57 & 0.00 & 0.68 & \(5 . \mathrm{HH}\) & \(5 . \mathrm{HH}\) & 2011.210 \\
495 & 2009.38 & 60.27 & 2.41 & NA & 0.21 & \(0 . \mathrm{HH}\) & \(1 . \mathrm{HH}\) & NA \\
495 & 2009.59 & 60.47 & 2.62 & 0.00 & 0.40 & \(1 . \mathrm{HH}\) & \(2 . \mathrm{HH}\) & 2009.592 \\
495 & 2009.99 & 60.87 & 3.01 & 0.00 & 0.53 & \(2 . \mathrm{HH}\) & \(3 . \mathrm{HH}\) & 2009.988 \\
495 & 2010.52 & 61.40 & 3.55 & 0.00 & 1.63 & \(3 . \mathrm{HH}\) & \(3 . \mathrm{HH}\) & 2010.518
\end{tabular}
```

CODE EXplained: To illustrate how tfHH is coded, we select ids of a person that has both a $3^{\text {rd }}$ and $4^{\text {th }}$ HH but no recorded follow up in 0. HH, and of a person that has follow-up both in 0.HH and 3.HH. We see that person 27 begins follow-up in state 3 . HH some 6 years after the $3^{\text {rd }} \mathrm{HH}$, and that when the $4^{\text {th }}$ occur, the time scale tfHH is reset to 0 . Also we see for person 495 , the tfHH is textttNA while follow up is in state $0 . \mathrm{HH}$.

Note that even if whc-which includes the column number of the tfHH variable-is mentioned last, it is anyway printed beside the other three timescale variables. This is because the Lexis object is printed using the print.Lexis method which puts the lex.id first, then the timescales and finally the other lex. variables. This is however only in the print, the internal ordering of the variables in the Lexis object remains the same. If you want variables printed in the order they occur in the data frame, you must use print.data.frame.

It is seen that person 27 begins follow-up in state 3 . HH some 6 years after the $3^{\text {rd }} \mathrm{HH}$. Also we see that person 495 begins follow-up in state $0 . \mathrm{HH}$, that is without HH , and hence with a NA value for tfHH , and that tfHH is reset to 0 at every HH occurrence.

### 5.1.3 Simple modeling of crude rates

We can summarize the rates of next HH and rates of death by fitting simple models for the rates (corresponding to the overall rates shown in figure 5.3); for the mortality we also fit a model where 5th HH is collapsed with the subsequent ones, that is where mortality rates from states $5 . \mathrm{HH}, 6 . \mathrm{HH}$ etc. are assumed identical.

But all models assume all transitions to be constant; not varying by any of the defined time scales. Hence we need not split follow-up time in smaller intervals.

We use the facility in glm. Lexis that if to but not from is given, then all transitions to any state in to are modeled with the same model. And also the facility that if neither of the arguments from or to are given, then all transitions into any absorbing state (in this case only Dead) are modeled with the same model.

This does not necessarily mean that we do not distinguish different transitions, we will normally use lex. Cst as a covariate to provide models where some covariate effects vary between transitions.

We fit the models twice, using two different parametrizations, one without an intercept, which gives the overall rates as also shown in figure 5.3 (the 0 models), and the other with an intercept, which gives rate-ratios relative to rates originating from state $0 . \mathrm{HH}$ :

```
> levels(Rx)
    [1] "O.HH" "1.HH" "2.HH" "3.HH" "4.HH" "5.HH" "6.HH" "7.HH" "8.HH" "9.HH"
[11] "10+HH" "Dead"
> mh0<- glm.Lexis(Rx, ~ lex.Cst + 0, to = levels(Rx)[2:11])
stats::glm Poisson analysis of Lexis object Rx with log link:
Rates for transitions:
0.HH->1.HH
1. HH->2. HH
2. HH->3.HH
3. HH->4.HH
4. HH->5.HH
5.HH->6.HH
6. HH->7.HH
7. HH->8.HH
8.HH->9.HH
9. HH->10+HH
> mh <- glm.Lexis(Rx, ~ lex.Cst , to = levels(Rx)[2:11])
stats::glm Poisson analysis of Lexis object Rx with log link:
Rates for transitions:
0.HH->1.HH
1.HH->2.HH
2. HH->3.HH
3. HH->4.HH
4.HH->5. HH
5. HH->6.HH
6. HH->7.HH
7.HH->8.HH
8. HH->9.HH
9. HH->10+HH
> mdO<- glm.Lexis(Rx, ~ lex.Cst + 0)
```

recur

```
stats::glm Poisson analysis of Lexis object Rx with log link:
Rates for transitions:
0.HH->Dead
1. HH->Dead
2.HH->Dead
3.HH->Dead
4.HH->Dead
5. HH->Dead
6. HH->Dead
7.HH->Dead
8.HH->Dead
9.HH->Dead
10+HH->Dead
> md <- glm.Lexis(Rx, ~ lex.Cst)
stats::glm Poisson analysis of Lexis object Rx with log link:
Rates for transitions:
0.HH->Dead
1.HH->Dead
2. HH->Dead
3.HH->Dead
4.HH->Dead
5.HH->Dead
6. HH->Dead
7.HH->Dead
8.HH->Dead
9. HH->Dead
10+HH->Dead
> mdg<- glm.Lexis(Rx, ~ Relevel(lex.Cst,
+ first = FALSE,
+ list("5+" = 6:11)))
stats::glm Poisson analysis of Lexis object Rx with log link:
Rates for transitions:
0.HH->Dead
1.HH->Dead
2.HH->Dead
3.HH->Dead
4.HH->Dead
5.HH->Dead
6. HH->Dead
7.HH->Dead
8.HH->Dead
9. HH->Dead
10+HH->Dead
```

With the models fitted we can test whether it is a reasonable reduction of the mortality models to lump $5^{\text {th }}$ and subsequent HHs together as far as mortality rates are concerned:

```
> anova(md, mdg, test = "Chisq")
Analysis of Deviance Table
Model 1: cbind(trt(Lx$lex.Cst, Lx$lex.Xst) %in% trnam, Lx$lex.dur) ~ lex.Cst
Model 2: cbind(trt(Lx$lex.Cst, Lx$lex.Xst) %in% trnam, Lx$lex.dur) ~ Relevel(lex.Cst,
    first = FALSE, list(`5+` = 6:11))
    Resid. Df Resid. Dev Df Deviance Pr(>Chi)
1 21006 5560.2
2 21011 5569.7 -5 -9.5219 0.08997.
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
```

From the anova we see that there is no compelling evidence against pooling states to $5+$ for mortality rates. We can show the overall rates (per 100 PY ) corresponding to the rates shown in figure 5.3

```
> round(ci.exp(mh0) * 100, 1) # HH incidence rates
```

|  | exp(Est.) | 2.5\% | 97.5\% |
| :---: | :---: | :---: | :---: |
| lex.Cst0.HH | 1.7 | 1.6 | 1.8 |
| lex.Cst1.HH | 4.8 | 4.5 | 5.2 |
| lex.Cst2.HH | 8.4 | 7.6 | 9.3 |
| lex.Cst3.HH | 12.9 | 11.4 | 14.6 |
| lex.Cst4.HH | 17.4 | 15.1 | 20.0 |
| lex.Cst5.HH | 22.9 | 19.5 | 27.0 |
| lex.Cst6.HH | 27.4 | 22.6 | 33.1 |
| lex.Cst7.HH | 29.6 | 23.4 | 37.4 |
| lex.Cst8.HH | 32.6 | 25.1 | 42.5 |
| lex.Cst9.HH | 42.1 | 31.8 | 55.7 |
| > round(ci.exp (md0) * 100, 1) \# mortality rates |  |  |  |
|  | $\exp$ (Est.) | 2.5\% | 97.5\% |
| lex.Cst0.HH | 0.6 | 0.6 | 0.7 |
| lex.Cst1. HH | 1.2 | 1.0 | 1.4 |
| lex.Cst2.HH | 1.4 | 1.1 | 1.8 |
| lex.Cst3.HH | 2.3 | 1.8 | 3.1 |
| lex.Cst4.HH | 2.7 | 1.9 | 3.9 |
| lex.Cst5.HH | 1.8 | 1.0 | 3.2 |
| lex.Cst6.HH | 2.3 | 1.2 | 4.5 |
| lex.Cst7.HH | 5.5 | 3.2 | 9.5 |
| lex.Cst8.HH | 2.4 | 0.9 | 6.3 |
| lex.Cst9.HH | 4.3 | 1.8 | 10.3 |
| lex.Cst10+HH | 3.5 | 2.2 | 5.7 |

We recognize the rates as those from figure ??, but after modeling we also have confidence limits for the rates.

In order to show how the rate ratios relative to $0 . \mathrm{HH}$ depends on the HH state we make a forest plot of the RRs:

```
> # only the RRs
> rrH <- ci.exp(mh)[-1,]
> rrD <- ci.exp(md)[-1,]
> rrG <- ci.exp (mdg)[c(2:5,rep (6,6)),]
> # groom the parameter labels
> rownames(rrD) <- gsub("lex.Cst", "", rownames(rrD))
> plotEst(rrD, y = 9:0 - 0.05, col = gray(0.5),
+ xlog = TRUE, lwd = 3, xlim = c(1,30),
+ xlab = "RR of death / next HH, relative to rates from state O.HH (= no HH)")
> linesEst(rrH, y = 9:1 + 0.1, col = "blue", lwd = 3)
> linesEst(rrG, y = 9:0 - 0.2, col = gray(0.0), lwd = 3)
> axis(side = 1, at = c(1,15,30))
> axis(side = 1, at =c(2:10,15,20,25), labels = NA)
```

From figure 5.4 we see that the rates of HH increase by increasing number of HH episodes, whereas mortality only do so till about 5. HH, and less so than rates of HH.

This analysis of rates is however rudimentary; the only covariate we use is the state, lex.Cst, rates are assumed to be constant over time; so we have basically just reproduced the raw rates shown in figure 5.3, albeit with confidence intervals.

### 5.1.4 Proper analysis of HH rates

A proper analysis of rates of HH and mortality will include both effects of age, diabetes duration as well as time since the most recent HH event ( tfHH as we defined above). Therefore, proper analysis of rates requires that follow-up be split in intervals so that we can use the value of the time scales at the beginning of each interval. Of course we will make the intervals sufficiently small to make the assumption of constant rates in each interval reasonable.

### 5.1.4.1 Splitting the follow-up

This can be achieved by splitMulti; in this instance we split follow-up in intervals of 3 months length along the age-scale. It does not matter much which time scale we use; all time scales are updated by the splitting machinery:


Figure 5.4: Rate-ratios of death and next HH relative to the 0.HH state. The blue bars are the RRs of next HH event, the black and gray bars are from the two different models for the mortality rates; the black bars are from the model with identical effect for no. of HHs equal to 5 or more.
../graph/recur-RRforest

```
> Sx <- splitMulti(Rx, age = seq(0, 90, 1/4))
> rbind(nrow(Rx), nrow(Sx))
    [,1]
[1,] 21017
[2,] 313771
> whx <- subset(Rx, lex.Cst == "O.HH" & lex.dur > 0.4 & lex.dur < 0.9)$lex.id
> why <- subset(Rx, lex.Cst == "1.HH" & lex.dur > 0.4 & lex.dur < 0.9)$lex.id
> (wh2 <- intersect(whx, why)[1])
[1] 378
> subset(Rx, lex.id %in% wh2)[,c(1:8,23)]
lex.id per age dur tfHH lex.dur lex.Cst lex.Xst dob
    378 2006.80 53.42 11.32 NA 0.60 0.HH 1.HH 1953.383
    378 2007.40 54.01 11.92 0 0.66 1.HH 2.HH 1953.383
    378 2008.06 54.68 12.58 0 0.80 2.HH Dead 1953.383
> subset(Sx, lex.id %in% wh2) [,1:9]
\begin{tabular}{rrrrrrrrr} 
lex.id & per & age & dur & tfHH & lex. dur & lex. Cst & lex. Xst & dob \\
378 & 2006.80 & 53.42 & 11.32 & NA & 0.08 & \(0 . \mathrm{HH}\) & \(0 . \mathrm{HH}\) & 1953.383 \\
378 & 2006.88 & 53.50 & 11.41 & NA & 0.25 & \(0 . \mathrm{HH}\) & \(0 . \mathrm{HH}\) & 1953.383 \\
378 & 2007.13 & 53.75 & 11.66 & NA & 0.25 & \(0 . \mathrm{HH}\) & \(0 . \mathrm{HH}\) & 1953.383 \\
378 & 2007.38 & 54.00 & 11.91 & NA & 0.01 & \(0 . \mathrm{HH}\) & \(1 . \mathrm{HH}\) & 1953.383 \\
378 & 2007.40 & 54.01 & 11.92 & 0.00 & 0.24 & \(1 . \mathrm{HH}\) & \(1 . \mathrm{HH}\) & 1953.383 \\
378 & 2007.63 & 54.25 & 12.16 & 0.24 & 0.25 & \(1 . \mathrm{HH}\) & \(1 . \mathrm{HH}\) & 1953.383 \\
378 & 2007.88 & 54.50 & 12.41 & 0.49 & 0.18 & \(1 . \mathrm{HH}\) & \(2 . \mathrm{HH}\) & 1953.383 \\
378 & 2008.06 & 54.68 & 12.58 & 0.00 & 0.07 & \(2 . \mathrm{HH}\) & \(2 . \mathrm{HH}\) & 1953.383 \\
378 & 2008.13 & 54.75 & 12.66 & 0.07 & 0.25 & \(2 . \mathrm{HH}\) & \(2 . \mathrm{HH}\) & 1953.383 \\
378 & 2008.38 & 55.00 & 12.91 & 0.32 & 0.25 & \(2 . \mathrm{HH}\) & \(2 . \mathrm{HH}\) & 1953.383 \\
378 & 2008.63 & 55.25 & 13.16 & 0.57 & 0.23 & \(2 . \mathrm{HH}\) & Dead 1953.383
\end{tabular}
```

CODE EXPLAINED: splitMulti subdivides the follow-up time across several records, each representing a small interval of follow-up, in this case intervals of 6 months age.

For illustration of the data for a single person, we select persons with follow-up in both 0. HH and 1. HH between 0.4 (to be sure that the split creates more than one interval) and 0.8 (to be sure that the split does not create too many intervals) - and then just select the first of the intersection of the two sets of persons.

From the last part of the output we see that the timescale tfHH is reset to 0 at every new HH occurrence, but also that tfHH is correctly updated at the following points of time-splitting, and is correctly propagated as NA for the intervals with no preceding HH.

| lex.id | per | age | dur | tf HH | lex.dur | lex.Cst | lex. Xst | dob |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 378 | 2006.80 | 53.42 | 11.32 | 0.00 | 0.08 | $0 . \mathrm{HH}$ | $0 . \mathrm{HH}$ | 1953.383 |
| 378 | 2006.88 | 53.50 | 11.41 | 0.00 | 0.25 | $0 . \mathrm{HH}$ | $0 . \mathrm{HH}$ | 1953.383 |
| 378 | 2007.13 | 53.75 | 11.66 | 0.00 | 0.25 | $0 . \mathrm{HH}$ | $0 . \mathrm{HH}$ | 1953.383 |
| 378 | 2007.38 | 54.00 | 11.91 | 0.00 | 0.01 | $0 . \mathrm{HH}$ | 1. HH | 1953.383 |
| 378 | 2007.40 | 54.01 | 11.92 | 0.00 | 0.24 | 1. HH | 1. HH | 1953.383 |
| 378 | 2007.63 | 54.25 | 12.16 | 0.24 | 0.25 | 1. HH | 1. HH | 1953.383 |
| 378 | 2007.88 | 54.50 | 12.41 | 0.49 | 0.18 | 1. HH | 2. HH | 1953.383 |
| 378 | 2008.06 | 54.68 | 12.58 | 0.00 | 0.07 | 2. HH | 2. HH | 1953.383 |
| 378 | 2008.13 | 54.75 | 12.66 | 0.07 | 0.25 | 2. HH | 2. HH | 1953.383 |
| 378 | 2008.38 | 55.00 | 12.91 | 0.32 | 0.25 | 2. HH | 2. HH | 1953.383 |
| 378 | 2008.63 | 55.25 | 13.16 | 0.57 | 0.23 | 2. HH | Dead | 1953.383 |

CODE EXPLAINED: The function tsNA20 (time scales NA 20 ) changes NAs in time scale variables to 0 , to make modeling with tfHH viable.

In the modeling we need to change the NAs in tfHH to 0 in order to be able to use tfHH as covariate in a model-records with tfHH equal to NA would be excluded from computations. We distinguish records that refer to follow up before any HH by the variable lex.Cst, which will be $0 . \mathrm{HH}$ before any HH , and 1. HH , 2. HH etc. as more instances of HH occur.

We have to keep this coding in mind when manipulating $S x$-for example it would be meaningless to further split along a(ny) time scale, because the time in 0 . HH would not preserve tfHH as 0 as it should.

### 5.1.5 More realistic models for rates

The relevant variables in models for HH rates will be current age, current duration of diabetes and time since last HH event. Note that the latter is only defined for persons with at least one HH, therefore the time scale representing time since most recent HH ( tfHH ) was initially coded as NA, but for analysis converted to 0 in order to be included in the modeling.

We define a model where we have a common effect of duration of diabetes (dur) regardless of HH status.
On top of this there will be a separate effect of time since last HH ( tfHH ) for each level of no. of previous HHs. This is where the recoding of the NA is important; 0 will both refer to the 0. HH state (at any time of follow-up), but also to the first intervals in each of the states $\mathrm{x} . \mathrm{HH}$ for any x . Therefore, a model must necessarily include state as a factor, otherwise we will impose the restriction on the initial rates in each $\mathrm{x} . \mathrm{HH}$ state that they are equal to the rates in the $0 . \mathrm{HH}$ state-a completely silly assumption.

Thus, the HH effect for persons in state $1 . \mathrm{HH}$ will be the ratio of the rate of the $2^{\text {nd }} \mathrm{HH}$ relative to the rate of the $1^{\text {st }} \mathrm{HH}$, as a function of the time since $1^{\text {st }} \mathrm{HH}$. The effect for persons in state $2 . \mathrm{HH}$ will be the rate-ratio of the $3^{\text {rd }} \mathrm{HH}$ relative to the rate of the $1^{\text {st }} \mathrm{HH}$, as a function of the time since $2^{\text {nd }} \mathrm{HH}$.

Alternatively we could show the rate-ratio of the $3^{\text {rd }} \mathrm{HH}$ relative to the rate of the $2^{\text {nd }} \mathrm{HH}$, as a function of the time since $2^{\text {nd }} \mathrm{HH}$-the most recent HH .

Note that in both cases, we will be comparing rates at a given time since $2^{\text {nd }} \mathrm{HH}$ with rates at the same time since $1^{\text {st }}$.

Ultimately, we will of course be showing both sets of parameter estimates from the model; the first one will have the $0 . \mathrm{HH}$ state as reference, the second will be comparisons of rates of HH between successive levels of no. of HH events.

In addition to this we will have a separate effect of age for each sex, and an effect of diabetes duration (dur), so the model we will be using can be coded as:

```
> system.time(
+ mAC <- glm.Lexis(Sx,
+ ~ lex.Cst *Ns(tfHH, knots =c(0,1,3,6)) +
                        Ns(dur, knots =c(1:5 * 10)) +
            sex * Ns(age, knots = c(4:8 * 10)),
            to = levels(Sx)[2:11],
            scale = 100))
stats::glm Poisson analysis of Lexis object Sx with log link:
Rates for transitions:
0.HH->1.HH
1.HH->2.HH
2. HH->3.HH
3.HH->4.HH
4.HH->5.HH
5.HH->6.HH
6. HH->7. HH
7.HH->8.HH
8. HH->9.HH
9. HH->10+HH
, lex.dur (person-time) scaled by }10
        user system elapsed
    22.12 0.79 22.92
> round(ci.exp(mAC), 2)
```

(Intercept)
lex.Cst1.HH
lex. Cst2. HH
lex.Cst3.HH
lex.Cst4. HH
lex.Cst5. HH
lex.Cst6. HH
lex.Cst7. HH
lex.Cst8. HH
lex.Cst9. HH
Ns (tfHH, knots $=c(0,1,3,6)) 1$
$\mathrm{Ns}(\mathrm{tfHH}, \mathrm{knots}=\mathrm{c}(0,1,3,6)) 2$
Ns (tfHH, knots $=c(0,1,3,6)) 3$
Ns $($ dur, knots $=c(1: 5 * 10)) 1$
Ns (dur, knots $=c(1: 5 * 10)) 2$
Ns (dur, knots $=c(1: 5 * 10)) 3$
Ns (dur, knots $=c(1: 5 * 10)) 4$
sexW
Ns (age, knots $=c(4: 8 * 10)) 1$
Ns (age, knots $=c(4: 8 * 10)) 2$
Ns (age, knots $=c(4: 8 * 10)) 3$
Ns (age, knots $=c(4: 8 * 10)) 4$
lex.Cst1.HH:Ns(tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst2.HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst3. HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst4.HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst5. HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst6.HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst7.HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst8.HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst9.HH:Ns (tfHH, knots $=c(0,1,3,6)) 1$
lex.Cst1.HH:Ns (tfHH, knots $=c(0,1,3,6)) 2$
lex.Cst2.HH:Ns(tfHH, knots $=c(0,1,3,6)) 2$
lex.Cst3. HH:Ns (tfHH, knots $=c(0,1,3,6)) 2$
lex.Cst4.HH:Ns(tfHH, knots $=c(0,1,3,6)) 2$
lex.Cst5. HH:Ns (tfHH, knots $=c(0,1,3,6)) 2$
lex.Cst6.HH:Ns(tfHH, knots $=c(0,1,3,6)) 2$
$\exp$ (Est.) 2.5\% 97.5\%
$1.74 \quad 1.58 \quad 1.91$
15.0712 .0018 .92
$20.07 \quad 15.77 \quad 25.54$
$20.51 \quad 15.43 \quad 27.27$
$32.18 \quad 24.1342 .93$
$32.16 \quad 23.1144 .75$
$35.39 \quad 24.40 \quad 51.33$
$49.79 \quad 33.75 \quad 73.47$
$49.90 \quad 31.4579 .18$
38.6022 .3166 .79
$1.23 \quad 0.40 \quad 3.76$
$0.23 \quad 0.06 \quad 0.94$
$1.09 \quad 0.45 \quad 2.63$
$0.94 \quad 0.79 \quad 1.13$
$1.23 \quad 1.05 \quad 1.43$
$\begin{array}{lll}1.20 & 1.00 & 1.44\end{array}$
$\begin{array}{lll}1.16 & 1.02 & 1.33\end{array}$
$0.84 \quad 0.74 \quad 0.95$
$1.14 \quad 0.89 \quad 1.45$
$0.95 \quad 0.75 \quad 1.20$
$1.02 \quad 0.85 \quad 1.22$
$1.31 \quad 1.04 \quad 1.65$
$\begin{array}{lll}0.30 & 0.10 & 0.95\end{array}$
$0.19 \quad 0.06 \quad 0.63$
$\begin{array}{lll}0.35 & 0.11 & 1.17\end{array}$
$0.19 \quad 0.06 \quad 0.65$
$0.54 \quad 0.15 \quad 1.98$
$0.4310 .11 \quad 1.67$
$0.23 \quad 0.04 \quad 1.22$
$0.42 \quad 0.08 \quad 2.21$
$1.00 \quad 1.00 \quad 1.00$
$0.15 \quad 0.03 \quad 0.69$
$0.22 \quad 0.05 \quad 1.02$
$0.51 \quad 0.11 \quad 2.44$
$0.25 \quad 0.05 \quad 1.23$
$\begin{array}{lll}0.41 & 0.08 & 2.14\end{array}$
$0.42 \quad 0.08 \quad 2.32$
$0.13 \quad 0.02 \quad 0.85$


| 0.20 | 0.03 | 1.40 |
| :--- | :--- | :--- |
| 1.00 | 1.00 | 1.00 |
| 0.42 | 0.17 | 1.04 |
| 0.27 | 0.11 | 0.67 |
| 0.29 | 0.12 | 0.75 |
| 0.24 | 0.09 | 0.64 |
| 0.30 | 0.11 | 0.82 |
| 0.39 | 0.13 | 1.14 |
| 0.16 | 0.04 | 0.60 |
| 0.29 | 0.08 | 1.09 |
| 1.00 | 1.00 | 1.00 |
| 0.67 | 0.45 | 1.01 |
| 1.43 | 1.00 | 2.03 |
| 1.43 | 1.12 | 1.81 |
| 1.42 | 1.04 | 1.93 |

Note that we set the scale argument to 100 , so that the parameters and predictions we get automatically are rescaled to rates per 100 years (or more precisely, per 100 units of lex.dur).

The parameter estimates from the model are not informative per se, we can only report the model estimates as curves of predicted rates and rate ratios for select values of the covariates.

We show rates of first HH in ages 30 through 80 for men and women in state 0 . HH with diabetes duration 20 years (approximately the median duration at follow-up) and time since HH equal to 0 (this is the only value that tfHH assumes in state $0 . \mathrm{HH}$, (lex.Cst $=0 . \mathrm{HH} \Rightarrow \mathrm{tfHH}=0$ ).

Note that since we fix duration of diabetes at 20 years, we are showing cross-sectional rates, not rates as they evolve for a cohort of persons:

```
pra <- data.frame(age = 30:80,
            dur = 20,
            tfHH = 0,
    lex.Cst = factor("0.HH", levels = levels(Sx)),
            sex = factor( "M", levels = levels(Sx$sex)))
matshade(pra$age, cbind(aa <- ci.pred(mAC, pra),
                ci.pred(mAC, transform(pra, sex = "W"))),
    plot = TRUE, col = c("blue", "red"),
    log = "y", lwd = 3, ylim = c(1,100),
    xlab = "Attained age (years)",
    ylab = "Rate of first HH (men) per 100 PY")
abline(h = aa[21,1], lty = "42", lwd = 2)
points(50, aa[21,1], pch = 16, cex = 1.4, col = "white")
> points(50, aa[21,1], pch = 1, cex = 1.4, col = "blue", lwd = 3)
```

We also want to show how the effect of $\mathrm{x} . \mathrm{HH}$, so we show the rates of next HH for a 50 year old man for different levels of HH (lex. Cst):

```
tHH <- 0:50 / 10
prx <- function(x, sx){
data.frame(age = 50,
        dur = 20,
        tfHH = tHH,
    lex.Cst = factor(pasteO(x,".HH"), levels = levels(Sx)),
        sex = factor(sx, levels = levels(Sx$sex)))
                            }
for(x in 1:9)
    {
matshade(prx(x, "M")$tfHH,
    # the pmin/pmax is just a dirty trick to allow the c.i.
    # shades to be shown - it is a windows graphics driver
    # problem.
    # pmax(pmin(
    zz <- ci.pred(mAC, prx(x, "M")),
    # 100), 1),
    plot = (x == 1),
    log = "y", lwd = 3, col = gray(x/12),
    ylim = c(1,100),
    xlab = "Time since latest HH (years)",
```

```
+ ylab = "Rate of n'th HH (men) per 100 PY")
+ text(0, zz[1,1], paste(x), adj = 1.6)
+ }
> text(0, 100, "HH number", adj = 0.5)
> abline(h = aa[21,1], lty = "42", lwd = 2)
```



Figure 5.5: Effects of age (left) and time since last HH (right) at diabetes duration 20 years. The horizontal dotted lines correspond to the rates for men aged 50 in the left panel, as illustrated by the blob.

The rightmost panel in figure 5.5 is a graphical rendering of the interaction between HH level and time since last HH. The curves have largely the same shape just different levels, so it actually makes sense to assess whether the interaction really is there by fitting the model without interaction between lex. Cst and tf HH:

```
> system.time(
+ mAc <- glm.Lexis(\underset{~}{Sx},
+ ~ lex.Cst + Ns(tfHH, knots =c(0,1,3,6)) +
                Ns(dur, knots =c(1:5 * 10)) +
            to = levels(Sx)[2:11],
            scale = 100))
stats::glm Poisson analysis of Lexis object Sx with log link:
Rates for transitions:
0.HH->1.HH
1. HH->2.HH
2.HH->3.HH
3. HH->4.HH
4.HH->5.HH
5. HH->6. HH
6. HH->7.HH
7. HH->8.HH
8.HH->9.HH
9. HH->10+HH
, lex.dur (person-time) scaled by }10
    user system elapsed
    6.84 0.51 7.36
> anova(mAC, mAc, test = "Chisq")
```


## Analysis of Deviance Table

```
Model 1: cbind(trt(Lx\$lex.Cst, Lx\$lex.Xst) \%in\% trnam, Lx\$lex.dur) ~ lex.Cst *
    \(\mathrm{Ns}(\mathrm{tfHH}, \mathrm{knots}=\mathrm{c}(0,1,3,6))+\mathrm{Ns}(\) dur, knots \(=\mathrm{c}(1: 5 *\)
    10)) + sex * Ns (age, knots \(=c(4: 8 * 10))\)
Model 2: cbind (trt(Lx\$lex.Cst, Lx\$lex.Xst) \%in\% trnam, Lx\$lex.dur) ~ lex.Cst +
        \(\mathrm{Ns}(\mathrm{tfHH}, \mathrm{knots}=\mathrm{c}(0,1,3,6))+\mathrm{Ns}(\) dur, knots \(=c(1: 5 *\)
        10) ) + sex * Ns (age, knots \(=c(4: 8 * 10))\)
    Resid. Df Resid. Dev Df Deviance Pr(>Chi)
\(1311758 \quad 27848\)
\(2311782 \quad 27896-24 \quad-48.271 \quad 0.002336\) **
Signif. codes: \(0^{\prime} * * *^{\prime} 0.001^{\prime} * *^{\prime} 0.01^{\prime} *^{\prime} 0.05 '^{\prime} 0.1\) ' ' 1
```

The formal likelihood ratio tests rejects the addititivity hypothesis, confirming an interaction between HH state and time since most recent HH, on strict testing grounds. But we also see that the deviance to d.f. ratio is only about 2 . We will use this observation as a the basis for reporting from the model with no interaction between state and time.

The code for predicting from the model is precisely the same as for the interaction model, here in a 2 by 1 layout:

```
# function to plot age effect
plage <- function() {
matshade(pra$age, aa <<- ci.pred(mAc, pra),
    plot = TRUE, col = "white",
    log = "y", lwd = 3, ylim = c(1,100),
    xlab = "Attained age (years)",
    ylab = "Rate of first HH per 100 PY")
abline(h = aa[21,1], lty = "42", lwd = 2, col = "gray")
matshade(pra$age, aa, lwd = 3, col = "blue")
matshade(pra$age, ci.pred(mAc, mutate(pra, sex = "W")),
                    lwd = 3, col = "red")
points(50, aa[21,1], pch = 16, cex = 1.4, col = "white")
points(50, aa[21,1], pch = 1, cex = 1.4, lwd = 2, col = "blue")
# function to plot duration effects
pldur <- function() {
for(x in 9:1)
    {
matshade(prx(x, "M")$tfHH,
        dd <<- ci.pred(mAc, prx(x, "M")),
        plot = ( }x==9)
        log = "y", lwd = 3, ylim = c(1,100), col = gray(x/12),
        xlab = "Time since last HH (years)",
        ylab = "Rate of next HH (men, aged 50) per 100 PY")
text(0, dd[1,1], paste(x), adj = 1.6)
    }
text(0, 100, "HH number", adj = 0.2)
abline(h = aa[21,1], lty = "42", lwd = 2, col = "gray")
    }
par(mfrow = c(1, 2), oma = c(0,0,0,2.5),
    mgp = c(3,1,0) / 1.6, las = 1, bty = "n")
plage()
pldur()
```

This will show the rates of first HH for men and women in different ages as well as the absolute rates of next HH in 50 year old men as a function of time since most recent HH for different numbers of HHs seen so far. The corresponding curves for women or men in other ages would look precisely the same (by model assumption) just at a different absolute level, because there is no interaction between tfHH and other variables.

It is seen (figure 5.6) that the rates of the next HH are very high shortly after a HH episode; there is a drop by a factor 2.5 over the first two years. Also, the rates of next HH are increasing by number of previous HH episodes, most pronounced in the beginning where rates for persons with 1,2 and 3 previous HH episodes are some 5, 10 and 15 times higher than those of persons with no previous HH episodes.

### 5.1.5.1 Choice of reference

Since the time scale tfHH is not defined for persons without HH (and hence coded 0 for these) the rate-ratio of rate of next HH between person with $1,2,3 \ldots \mathrm{HH}$ episodes and persons with 0 episodes will look precisely the same as the right panel in figure 5.6, except for the $y$-axis, that would have the dotted lines at a $y$-value of 1 . There is no interaction between tfHH and age and sex, so it is immaterial what reference for age and sex that was used.

However the confidence limits of the rate-ratios will not be the same, because we will be making a comparison between rates in state 1. HH, say, and state 0. HH. Here we compute and graph the estimated RRs relative to persons with 0 prior HH :

```
> # function to plot RR relative to O.HH
> plRR <- function(yl) {
+ prO <- data.frame(age = 50,
            dur = 20,
            tfHH = 0,
        lex.Cst = factor("0.HH", levels = levels(Sx)),
            sex = factor("M", levels = levels(Sx$sex)))
for(x in 9:1)
    {
matshade(prx(x, "M")$tfHH,
            rr <<- ci.exp(mAc,
                            list(prx(x, "M"),
                prO[,colnames(prx(x, "M"))])),
    plot = (x == 9),
    log = "y", lwd = 3, ylim = yl, col = gray(x/12),
    xlab = "Time since last HH (years)",
    ylab = "RR of next HH for men, aged 50, relative to 0 HH")
    text(0, rr[1,1], paste(x), adj = 1.6)
    }
text(0, 100, "HH number", adj = 0.2)
abline(h = 1, lty = "42", lwd = 2, col = "gray")
```

With the RR function we can now plot the three sets of estimates next to each other:

```
> par(mfrow=c(1,3), mar =c(3,3,0,0), oma =c c(0,0,0,0),
+ mgp =c(3,1,0) / 1.6, las = 1, bty = "n")
plage()
pldur()
# yl <- (10^par("usr")[3:4]) / aa[21,1]
yl <- c(1,100) / aa[21,1]
plRR(yl)
```

The shape of the curves corresponds to a decline in rates of about 3.8 fold during the first two years:

```
> round(rbind(
+ c(dd[1,1], dd[21,1], dd[1,1] / dd[21,1]),
+ c(rr[1,1], rr[21,1], rr[1,1] / rr[21,1])), 2)
    [,1] [,2] [,3]
[1,] 20.98 5.48 3.83
[2,] 12.75 3.33 3.83
```

Moreover, there is a clear increase of rates of next HH by the number of HHs already seen, most pronounced in the beginning.

We have collected the absolute rates at time 1 in the matrix dd and the rate-ratios at time in rr, and we see that the rate ratio is equal to the rates divided by the reference rate, but also that the the confidence intervals for the rr are narrower:

```
> R <- cbind(rates = dd[1,],
+ "rates/ref" = dd[1,]' / aa[21,1],
+ "real RR" = rr[1,])
> rbind(R, "rel. width" = R[3,] / R[2,])
```



Figure 5.6: Effects of age, sex and time since last HH from a model with no interaction between HH number of $H H$ and time since latest $H H$. The left panel shows the rate of $1^{\text {st }}$ $H H$ as a function of age for men and women, while the middle panel shows the rate of next HH for 50 year old men with 1, 2,. . previous HH episodes as function of the time since the most recent HH episode, and the rightmost panel shows the $R R$ of next HH episode between persons in states $\mathrm{x} . \mathrm{HH}(\mathrm{x}=1,2, \ldots)$ and persons in state 0.HH.
The horizontal dotted lines correspond to the blob at age 50 for men in the left panel, that is rates of first HH in 50 year old men.
. ./graph/recur-R3add

|  | rates | rates/ref | real RR |
| :--- | ---: | ---: | ---: |
| Estimate | 20.983117 | 12.746024 | 12.746024 |
| $2.5 \%$ | 17.795702 | 10.809855 | 10.985318 |
| $97.5 \%$ | 24.741434 | 15.028984 | 14.788933 |
| rel. width | 1.390304 | 1.390304 | 1.346245 |

Heuristically speaking, the confidence intervals for the rate ratios are narrower (lower limit larger, upper linit smaller) because they do not involve the estimates of the absolute rates, but only the ratios.

### 5.2 Random effects: frailty

We have seen that the rate of HH occurrence increases by the number of HH episodes seen, and that the rate decreases by time since the most recent one. These two features are typical of selection by frailty-the individual propensity to event occurrence: Early after a HH the most frail experience another event, so as time goes by, the average frailty among those left in a given state drops, causing the rate of events among those (alive and) still without event to decrease.

A similar effect is seen as the number of HH events increase; among those who have another HH event, the average frailty is higher than in those who do not, so the more HH events a person has had the more likely it is that the person has a high frailty, and thus yet another HH event. That is why the rate of the next HH event increases by the number of HH events already seen.

It would be useful if we could estimate a separate frailty for each person, but this is not possible for persons without any HH events, and very shaky for persons with only very few events.

So the way to go about this is using a random effects model, where we instead of estimating the frailty explicitly for each person estimate characteristics of the frailty distribution. With that done, we can then derive the posterior me(di)an of each person's frailty.

It is common to use a normal distribution for the frailty on the linear predictor scale; corresponding to a log-normal distribution on the rate scale. However, with 18,000 persons of which slightly less than 6,000 see an HH event, the normal distribution is not a credible distribution-those without events would be expected to have a very small frailty.

The logical thing would be to allow for an atom close to 0 in the distribution of the frailty on the rate scale, very large and negative on the on the log-rate scale. Almost all persons with no HH events would be put in that class, we could call it the "immunity" class with a very small rate of first HH. It may very well be so that not all the persons without observed HH event are effectively immune to HH .

If we knew the underlying rates of first HH (as a function of time, age etc.), we could for each person without a HH event compute the survival probability for the person's observed sojourn time in the 0.HH state, given a frailty of 1 . The larger this survival probability is, the more likely it is that the true frailty of the person is very small (that is numerically large but negative).

The proper formulation of this would be that there is some probability that a person belongs to the immune class where the frailty is 0 , and with the complementary probability belongs to the class of susceptible where the distribution of frailties is log-normal, say.

Having fitted that sort of model we can for each person compute the posterior probability that the person belongs to one of the two classes, as well as the posterior mean conditional on being in the susceptible class. We could illustrate this by showing the posterior probabilities of immunity, as well as the distribution of frailties among persons with posterior probability of non-immunity larger than $0,0.1,0.2$ etc.

The main purpose of fitting such a model would be to see how much the frailty between persons could explain of the effect of number of HHs. But we do not currently have any software that would fit these models. Except possibly for JAGS that would estimate parameters by MCMC, but with the analysis dataset $S x$ with $300,000+$ records this is likely to be very time consuming.

### 5.2.0.1 Cox-models

We can fit two different Cox models that mimic the Poisson model, by naming one of the time-scales to be the baseline scale; recall that the Poisson model was specified as:

```
> mha <- glm.Lexis(Sx,
+ ~ lex.Cst + Ns(tfHH, knots =c(0,1,3,6)) +
Ns(dur, knots =c(1:5 * 10)) +
                sex * Ns(age, knots =c(4:8 * 10)),
to = levels(Sx)[2:11])
stats::glm Poisson analysis of Lexis object Sx with log link:
Rates for transitions:
0.HH->1.HH
1. HH->2. HH
2.HH->3.HH
3. HH->4.HH
4. HH->5. HH
5. HH->6.HH
6. HH->7.HH
7. HH->8.HH
8.HH->9.HH
9. HH->10+HH
```

When using dur as underlying time scales we will do:

```
> system.time(
+ cmd <- coxph.Lexis(Sx,
+ dur ~ factor(lex.Cst) +
                                    Ns(tfHH, knots =c(0,1,3,6)) +
                sex * Ns(age, knots =c(4:8 * 10)),
                to = levels(Sx)[2:11]))
survival::coxph analysis of Lexis object Sx:
Rates for transitions:
0.HH->1.HH
1.HH->2.HH
2. HH->3.HH
```

3. $\mathrm{HH}->4 . \mathrm{HH}$
4. HH->5. HH
5. HH $->6$. HH
6. $\mathrm{HH}->7$. HH
7. $\mathrm{HH}->8 . \mathrm{HH}$
8. HH->9. HH
9. $\mathrm{HH}->10+\mathrm{HH}$

Baseline timescale: dur user system elapsed
$20.87 \quad 0.48 \quad 21.36$
CODE EXPlained: Note that we use factor(lex. Cst) in the model specification; this is to avoid extra aliased parameters in the coefficients-it returns a factor with only the levels actually assumed. coxph does not remove non-existing factor levels from the coefficients vector.

But if we want to use age as underlying time scales we must accommodate the fact that we have a model with separate age-effects for the two sexes. That is normally called a stratified model in Cox-model lingo, and fitted by adding a strata() function in the model formula:

```
> system.time(
+ cma <- coxph.Lexis(Sx,
+ age ~ factor(lex.Cst) +
                                    Ns(tfHH, knots = c(0,1,3,6)) +
                                    Ns(dur, knots =c(1:5 * 10)) +
                                    strata(sex),
                                    to = levels(Sx)[2:11]))
survival::coxph analysis of Lexis object Sx:
Rates for transitions:
0.HH->1.HH
1. HH->2. HH
2.HH->3.HH
3. HH->4.HH
4.HH->5.HH
5.HH->6.HH
6. HH->7.HH
7. HH->8.HH
8.HH->9.HH
9. HH->10+HH
Baseline timescale: age
    user system elapsed
    10.61 0.40 11.03
```

We can compare the estimated regression parameters from the two Cox models with those from the Poisson model where all effects are modeled parametrically. We an extract the regression parameters from each of the Cox models and compare with the corresponding parameters from the Poisson-model.

Note the two extra rows of NAs to make up for the fact that coxph also produces estimates for factor levels not in the model:

```
> # dirty trick to shrink 1st column label so we get nicer prints
> ci.exp <- function(...){ z<- Epi::ci.exp(...)
+ colnames(z)[1] <- " Est"; z }
> round(cbind(
+ ci.exp(mha, subset = "lex.Cst"),
+ ci.exp(cmd, subset = "lex.Cst"),
+ ci.exp(cma, subset = "lex.Cst")), 2)
Est 2.5% 97.5% Est 2.5% 97.5%
12.75 10.99 14.79 12.69 10.82 14.88
lex.Cst2.HH 18.36 15.71 21.45 18.28 15.47 21.60 18.69 15.81 22.08
lex.Cst3.HH 24.65 20.87 29.13 24.51 20.68 29.05 24.92 21.03 29.53
lex.Cst4.HH }31.06 25.94 37.20 30.89 25.61 37.26 31.16 25.80 37.64
lex.Cst5.HH }36.02 29.60 43.84 36.17 29.62 44.18 36.95 30.20 45.22
lex.Cst6.HH 39.63 31.79 49.39 39.68 31.52 49.95 39.74 31.53 50.09
lex.Cst7.HH 42.34 32.76 54.74 43.79 33.76 56.79 43.13 32.87 56.59
lex.Cst8.HH 45.65 34.32 60.73 45.52 33.97 60.99 45.57 33.96 61.14
lex.Cst9.HH 51.63 38.25 69.68 52.97 39.17 71.62 52.61 38.87 71.20
```

recur

```
> round(cbind(
+ ci.exp(mha, subset = "tfHH"),
+ ci.exp(cmd, subset = "tfHH"),
+ ci.exp(cma, subset = "tfHH")), 2)
```



```
> round(cbind(
+ ci.exp(mha, subset = "dur"),
+ ci.exp(cma, subset = "dur")), 2)
\begin{tabular}{llllllrrr} 
& & Est & \(2.5 \%\) & \(97.5 \%\) & Est & \(2.5 \%\) & \(97.5 \%\) \\
Ns (dur, knots \(=c(1: 5 * 10)) 1\) & 0.96 & 0.80 & 1.15 & 1.00 & 0.82 & 1.22 \\
Ns (dur, knots \(=c(1: 5 * 10)) 2\) & 1.23 & 1.06 & 1.43 & 1.20 & 1.02 & 1.40 \\
Ns (dur, knots \(=c(1: 5 * 10)) 3\) & 1.21 & 1.01 & 1.45 & 1.21 & 1.00 & 1.45 \\
Ns (dur, knots \(=c(1: 5 * 10)) 4\) & 1.17 & 1.03 & 1.33 & 1.16 & 1.02 & 1.33
\end{tabular}
```

```
> round(cbind(
```

> round(cbind(

+ ci.exp(mha, subset = c("age","sex")),
+ ci.exp(mha, subset = c("age","sex")),
+ ci.exp(cmd, subset =c("age","sex"))), 2)
+ ci.exp(cmd, subset =c("age","sex"))), 2)

| Ns (age, knots $=c(4: 8 * 10)) 1$ | 1.140 .90 | 1.46 | 1.14 | 0.88 | 1.49 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Ns (age, knots $=c(4: 8 * 10)) 2$ | 0.950 .75 | 1.20 | 0.94 | 0.73 | 1.21 |
| Ns (age, knots $=c(4: 8 * 10)) 3$ | 1.020 .86 | 1.22 | 1.02 | 0.85 | 1.22 |
| Ns (age, knots $=c(4: 8 * 10)) 4$ | 1.321 .05 | 1.66 | 1.31 | 1.03 | 1.66 |
| sexW:Ns (age, knots $=c(4: 8 * 10)$ ) 1 | 0.680 .45 | 1.01 | 0.68 | 0.45 | 1.03 |
| sexW:Ns(age, knots = c(4:8* 10)) 2 | 1.431 .01 | 2.04 | 1.40 | 0.96 | 2.05 |
| sexW:Ns(age, knots $=c(4: 8 * 10)) 3$ | 1.421 .12 | 1.80 | 1.43 | 1.12 | 1.84 |
| sexW:Ns(age, knots $=c(4: 8 * 10)) 4$ | 1.421 .05 | 1.94 | 1.45 | 1.07 | 1.97 |
| sexW | 0.840 .74 | 0.94 | 0.83 | 0.74 | 0.95 |
| sexW:Ns (age, knots $=c(4: 8 * 10)) 1$ | $0.68 \quad 0.45$ | 1.01 | 0.68 | 0.45 | 1.03 |
| sexW:Ns(age, knots $=c(4: 8 * 10)) 2$ | 1.431 .01 | 2.04 | 1.40 | 0.96 | 2.05 |
| sexW:Ns(age, knots $=c(4: 8 * 10)) 3$ | 1.421 .12 | 1.80 | 1.43 | 1.12 | 1.84 |
| sexW:Ns (age, knots $=c(4: 8 * 10)) 4$ | 1.421 .05 | 1.94 | 1.45 | 1.07 | 1.97 |

> \# important to clean up so we call Epi::ci.exp by default
> rm(ci.exp)

```

CODE EXPLAINED: To get a nicer print we redefine ci.exp as a local copy that just has a slightly different name for the first column. At the end we remove the local copy, so that future calls of ci.exp will (again) be calls of Epi: :ci.exp.

We see that we get almost identical parameter estimates, whether we use age (age) or duration (dur) as baseline time scale. The Cox-model does however not provide estimates of the effect of the baseline timescale, as we get from the Poisson model, so the last two comparisons are only with one of the Cox models.

\subsection*{5.2.0.2 Cox or Poisson model(s)?}

So it seems that we could get the estimates of all time scales if we just fit two Cox models with different underlying time scales. But the prerequisite for this is that we from regression parameters in the Cox model can estimate the effect of the timescale(s) that is not the baseline-that is from the linear predictor. This will only be possible if we have fitted the Cox models to a split dataset (Sx in this case). But if we already have a finely split dataset we might as well fit the Poisson model in the first place and get estimates of the effects of both time scales in one go.

The real reason to set up the Cox models here is that there is a simple machinery to incorporate random effects in Cox models via the coxme package.

\subsection*{5.2.0.3 coxme: Cox model with mixed effects}

The rate models we operated can be expanded with an extra random effect term in the linear predictor:
\[
\log \left(\lambda_{p t}\right)=\eta_{p t}+A_{p}, \quad A_{p} \sim \mathcal{N}\left(0, \sigma^{2}\right)
\]
where we assume the \(A_{p}\) s to be independent, so the \(\sigma\) is the between-persons standard deviation of the log-rates. Formally this is a 2-level model; first level is the specification of the random effects (the \(A_{p} \mathrm{~s}\) marginal) and the second level is the specification of the rates conditional on the random effects.

We want to see how the effect of no. of HHs will change by introduction of a random person-effect, and currently the simplest way to do this is to use the coxme function from the package of the same name.

We can now fit the mixed effects Cox-models corresponding to the two Cox-models and inspect the random effects and the parameter estimates.
```

> rdur <- coxme(Surv(dur,

+ dur + lex.dur,
dur + lex.dur,
lex.Xst != lex.Cst)
~ factor(lex.Cst) +
Ns(tfHH, knots =c(0,1,3,6)) +
sex * Ns(age, knots =c(4:8*10)) +
(1 / lex.id),
data = subset(Sx, lex.Cst %in% levels(Sx) [1:10]))

```
> summary(rdur)
Cox mixed-effects model fit by maximum likelihood
    Data: subset (Sx, lex.Cst \%in\% levels (Sx) [1:10])
    events, \(\mathrm{n}=2700\), 311808
    Iterations= 976
    NULL Integrated Fitted
Log-likelihood -19278.55 -17683.02 -17186.6
\begin{tabular}{rrrrrr} 
& & Chisq & df & p & AIC \\
Integrated loglik & 3191.06 & 22.00 & 0 & 3147.06 & 3017.24 \\
Penalized loglik & 4183.90 & 506.27 & 0 & 3171.35 & 183.83
\end{tabular}

Model: Surv(dur, dur + lex.dur, lex.Xst \%in\% levels(Sx)[2:11] \& lex.Xst != lex.Cst) ~ factor(]
Fixed coefficients
factor (lex.Cst) 1. HH
factor (lex.Cst) 2. HH
factor (lex.Cst) 3. HH
factor(lex.Cst)4.HH
factor(lex.Cst)5.HH
factor(lex.Cst)6. HH
factor (lex.Cst) 7. HH
factor(lex.Cst)8.HH
factor(lex.Cst) 9. HH
\(\mathrm{Ns}(\mathrm{tfHH}, \mathrm{knots}=\mathrm{c}(0,1,3,6)) 1\)
Ns (tfHH, knots \(=c(0,1,3,6)) 2\)
Ns (tfHH, knots \(=c(0,1,3,6)) 3\)
sexW
Ns (age, knots \(=c(4: 8 * 10)) 1\)
Ns (age, knots \(=c(4: 8 * 10)) 2\)
Ns (age, knots \(=c(4: 8 * 10)) 3\)
\(\mathrm{Ns}(\) age, knots \(=c(4: 8 * 10)) 4\)
sexW:Ns(age, knots \(=c(4: 8 * 10)) 1\)
sexW•Ns (age 0.38016556
sexW:Ns(age, knots \(=c(4: 8 * 10)) 30.39799401\)
sexW:Ns(age, knots \(=c(4: 8 * 10)) 40.40297340\)
\begin{tabular}{rrrrr} 
coef & exp(coef) & se(coef) & \(z\) & \(p\) \\
2.28887083 & 9.86379351 & 0.07815933 & 29.28 & 0.0000 \\
2.64561203 & 14.09206722 & 0.08183166 & 32.33 & 0.0000 \\
2.93592249 & 18.83887371 & 0.08799412 & 33.36 & 0.0000 \\
3.15814402 & 23.52689003 & 0.09575695 & 32.98 & 0.0000 \\
3.31363874 & 27.48495428 & 0.10499416 & 31.56 & 0.0000 \\
3.39389894 & 29.78184382 & 0.11843776 & 28.66 & 0.0000 \\
3.48552078 & 32.63942058 & 0.13774713 & 25.30 & 0.0000 \\
3.48705669 & 32.68959046 & 0.15429226 & 22.60 & 0.0000 \\
3.65616606 & 38.71263615 & 0.16379351 & 22.32 & 0.0000 \\
-0.88565274 & 0.41244487 & 0.07907967 & -11.20 & 0.0000 \\
-2.33707000 & 0.09661029 & 0.13685038 & -17.08 & 0.0000 \\
-0.83513836 & 0.43381445 & 0.06845402 & -12.20 & 0.0000 \\
-0.18975302 & 0.82716340 & 0.06377963 & -2.98 & 0.0029 \\
0.12858617 & 1.13721942 & 0.12858876 & 1.00 & 0.3200 \\
-0.05022957 & 0.95101108 & 0.12717992 & -0.39 & 0.6900 \\
0.01660617 & 1.01674482 & 0.09677114 & 0.17 & 0.8600 \\
0.28447054 & 1.32905816 & 0.12725513 & 2.24 & 0.0250 \\
-0.38016556 & 0.68374820 & 0.21225148 & -1.79 & 0.0730 \\
0.32702490 & 1.38683600 & 0.19005297 & 1.72 & 0.0850 \\
0.39799401 & 1.48883511 & 0.12962200 & 3.07 & 0.0021 \\
0.40297340 & 1.49626708 & 0.16912908 & 2.38 & 0.0170
\end{tabular}

Random effects
Group Variable Std Dev Variance
lex.id Intercept 0.44541540 .1983949
```

> sqrt(VarCorr(rdur)$lex.id)
Intercept
0.4454154
> sd(ranef(rdur)$lex.id)

```
[1] 0.07265774
CODE EXPLAINED: The syntax for coxme is almost the same as for coxph, except that coxme allows random effects terms in the model formula, such as (1 | lex.id). This means a random intercept for each person (lex.id).

We do not have a coxme. Lexis that does all the hard work of getting data from a Lexis object; so we must do the subsetting and event-definition by hand:

We are modeling the occurrence rates of next HH , so we restict data to be only those at risk of HH , that is subset to records with lex. Cst equal to levels \(0 . \mathrm{HH}\) through \(9 . \mathrm{HH}\) (levels 1 though 10).

And we only want events to be where lex. Xst is among the levels 1. HH through \(10+\mathrm{HH}\) ( 2 through 11), but since the dataset is split, we should only count records where we have a transition, that is where lex. Xst is different from lex. Cst.

We see that the estimated standard deviation of the random effects is 0.445 - this is the standard deviation of the random effects that are assumed to be normal variates on the log-rate scale. We can interpret this as the between-person variation of frailties-a population characteristic specific for this population.

This implies that the difference between the random effect terms for two randomly chosen persons is normally distributed with standard deviation of \(\sqrt{2} \times 0.445\); so the absolute difference follows a half-normal distribution. The median in a half-normal is the \(75 \%\) quantile of the normal distribution, hence the median absolute difference between two randomly chosen persons is ([8]:
```

> qnorm(0.75) * sqrt(2) * sqrt(VarCorr(rdur)\$lex.id)
Intercept
0.4248696

```

This means that the median rate-ratio (the one \(>1\) ) of HH -occurrence between two randomly chosen persons is:
\(>\exp (q n o r m(0.75) * \operatorname{sqrt}(2) * \operatorname{sqrt}(V a r C o r r(r d u r) \$ l e x . i d))\)
Intercept
1.529391

We might instead argue that the relevant quantity to base our reporting on was the empirical standard deviation of the posterior random effects:
```

> exp(qnorm(0.75) * sqrt(2) * sd(ranef(rdur)\$lex.id))

```
[1] 1.071764

This would imply that the median absolute rate ratio (that is the one \(>1\) ) between two randomly chosen persons were only 1.07 .

Either way, the between-person sd of the frailties is a population characteristic, so refers to the specific study population at hand; it is not a residual error we may expect to find in other study populations. Moreover, the calculations assume that the (prior) distribution of the log-frailties is normal which is certainly not the case for the posterior as we shall see.

\subsection*{5.2.0.4 The other Cox model}

We can also fit the other Cox-model, with age as time scale
```

rage <- coxme(Surv(age,
age + lex.dur,
lex.Xst %in% levels(Sx)[2:11] \&
lex.Xst != lex.Cst)
~ factor(lex.Cst) +
Ns(tfHH, knots = c(0,1,3,6)) +
Ns(dur, knots = c(1:5 * 10)) +
strata(sex) +
(1 | lex.id),
data = subset(Sx, lex.Cst %in% levels(Sx)[1:10]))

```
```

> summary(rage)
Cox mixed-effects model fit by maximum likelihood
Data: subset(Sx, lex.Cst %in% levels(Sx)[1:10])
events, n = 2700, 311808
Iterations= 9 76
NULL Integrated Fitted
Log-likelihood -17108.89 -15551.62 -15073.11

|  |  | Chisq | df | p | AIC |
| ---: | ---: | ---: | ---: | ---: | ---: | BIC

Model: Surv(age, age + lex.dur, lex.Xst %in% levels(Sx)[2:11] \& lex.Xst != lex.Cst) ~ factor(]
Fixed coefficients
factor(lex.Cst)1.HH
factor(lex.Cst)2.HH
factor(lex.Cst)3.HH
factor(lex.Cst)4.HH
factor(lex.Cst)5.HH
factor(lex.Cst)6.HH
factor(lex.Cst)7.HH
factor(lex.Cst)8.HH
factor(lex.Cst)9.HH
Ns(tfHH, knots = c(0, 1, 3, 6))1 -0.90041888 0.40639939 0.07903074 -11.39 0.000
Ns(tfHH, knots =c(0, 1, 3, 6))2 -2.39192310 0.09145364 0.13772059-17.37 0.000
Ns(tfHH, knots =c(0, 1, 3, 6))3 -0.84148005 0.43107204 0.06848138 -12.29 0.000
Ns(dur, knots =c(1:5 * 10))1 0.01377948 1.01387486 0.09809459 0.14 0.890
Ns(dur, knots =c(1:5 * 10))2 0.19432355 1.21448917 0.08295019 2.34 0.019
Ns(dur, knots =c(1:5 * 10))3 0.20475620 1.22722583 0.09499085 2.16 0.031
Ns(dur, knots =c(1:5 * 10))4 0.16836010 1.18336266 0.06971433 2.41 0.016
Random effects
Group Variable Std Dev Variance
lex.id Intercept 0.4376666 0.1915521
> sqrt(c(VarCorr(rage)$lex.id, VarCorr(rdur)$lex.id))
Intercept Intercept
0.4376666 0.4454154
> c(sd(ranef(rage)$lex.id), sd(ranef(rdur)$lex.id))
[1] 0.07012529 0.07265774

```

So the random variation between persons is very similar in the two models, as is the discrepancy between the estimated sd and the empirical sd of the individual posterior random effects. The discrepancy between the estimated sd and and the empirical sd of the posterior random effects is partly attributable to the fact that the sd is a really bad summary of a distribution that is so far from symmetry as this one is.

\subsection*{5.2.0.5 Individual random effects}

We also inspect if the estimated random effects ("posterior" person effects) are similar between the two models
```

> table(names(rage$frail$lex.id) == names(rdur$frail$lex.id))
TRUE
18215
> range(c(rdur$frail$lex.id, rage$frail$lex.id))
[1] -0.2336867 1.1589616
> \#\# plot(rage$frail$lex.id,
> \#\# rdur$frail$lex.id,
> \#\# pch = 16, cex = 0.4,
> \#\# xlim = c(-0.25, 1.2), ylim = c(-0.25, 1.2),
> \#\# xlab = "log-frailty using age as timescale",

```
recur
```

> \#\# ylab = "log-frailty using duration as timescale")
> \#\# abline(0, 1, lty = 3)
> \#\# abline(h = 0, v = 0, lty = 3)
> plot(exp(rage$frail$lex.id),

+ exp(rdur$frail$lex.id),
pch = 16, cex = 0.5, log = "xy",
xlim}=\operatorname{exp}(c(-0.25,1.2)), ylim = exp(c(-0.25, 1.2)),
xlab = "Frailty using age as timescale",
ylab = "Frailty using duration as timescale")
abline(0, 1, lty = 3)
abline(h = 1, v = 1, lty = 3)

```


Figure 5.7: Estimated frailties (on the log-rate-scale) for the Cox-models with duration respectively age as baseline timescale.

From figure 5.7 we see that quite a number of the random effects are below 0 , so we would like to see how the posterior frailties relate to the number of events for each person:
```

> tt <- with(subset(Sx, lex.Cst %in% levels(Sx)[1:10]),

+ table(lex.id, lex.Cst != lex.Xst \& lex.Xst != "Dead"))[,2]
> table(tt)
tt

| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 16401 | 1289 | 342 | 92 | 47 | 21 | 9 | 10 | 2 | 2 |

```
```

> table(names(tt) == names(rdur$frail$lex.id))
TRUE
18215
> exp(c(-0.25,1.2))
[1] 0.7788008 3.3201169
> axpt <- c(0.8,seq(1, 3, 0.5))
> frails <-

+ function(frails, mod)
+ {
+ plot(jitter(tt, a = 0.35),
+ frails,
+ pch = 16, cex = 0.5,
+ xlab = "Total no. HH events", xaxt ="n",
+ ylab = "Frailty (log-rate scale)", ylim = c(-0.25, 1.2))
+ abline(h = 0, lty = 3)
+ axis(side = 1, at = 0:9, labels = 0:9,
+ col = "white", col.lab = "black")
+ axis(side = 2, at = -2:12/10, labels = NA, tcl = -0.3)
+ axis(side=4, at = log(axpt), labels = axpt)
+ text(0, 1.2, mod, adj = c(0, 1))
+ }
> par(mfrow=c(1,2), mar=c(3,3,1,3), mgp=c(3,1,0)/1.6, las = 1, bty = "n")
> frails(rdur$frail$lex.id, "Duration baseline model")
> frails(rage$frail$lex.id, "Age baseline model")

```


\(\begin{array}{lllccccccc}0 & 1 & 2 & 3 & 4 & 5 & 6 & 7 & 8 & 9\end{array}\)
\[
\begin{array}{lllcccccc}
0 & 1 & 2 & 3 & 4 & 5 & 6 & 7 & 8 \\
& & & 9 \\
\text { Total no. HH events }
\end{array}
\]

Figure 5.8: Posterior frailties (log-rate scale) for the two Cox-models, plotted against the number of HH events for each person. Baseline timescales are dur (left) resp. age (right). . ./graph/recur-frail-ev

We see that the two mixed effects Cox-models give essentially the same fit; they are both cousins of the Poisson-model, with the same time-scales as covariates, the difference is only which one we have profiled out when forming the Cox-model. So these are not models using different timescales; all three time scales (age, diabetes duration and time since last HH) are in all three models. The Cox models just hide one of the time scales.

\subsection*{5.2.1 RR by no. of HH}

From figure 5.8 we see that the average frailty increases by the total number of HH events seen, so by the frailty arguments above we will expect that the fixed effect estimates of the no. of HH events to be somewhat diluted by inclusion of person-specific random effects.

Since the two Cox-models with different baseline time scale give substantially the same fit, we only report these measures from the Cox-model model with diabetes duration as baseline time scale.

When we want the RRs relative to state 0 . HH the RR depends on the time since latest HH, here we choose 2 years as reference point. The facility to estimate the effect of the difference between two prediction frames in ci.exp is not implemented for coxme objects, so we will do the contrast matrix coding by hand; fortunately it only involves the lex. Cst and tfHH variables:
```

> t2 <- Ns(rep (2,9), knots =c(0, 1, 3, 6))
> t0 <- Ns (rep (0,9), knots =c(0, 1, 3, 6))
> Cd <- diag(9)
>CO <- Cd * O
> (CM <- cbind(Cd,t2) - cbind(CO,t0))

| 3 |  |  |  |  |  |  |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | ---: | ---: | ---: | ---: |
| $[1]$, | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[2]$, | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[3]$, | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[4]$, | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[5]$, | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[6]$, | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[7]$, | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[8]$, | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0.1190646 | 0.5676795 | -0.3422997 |
| $[9]$, | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0.1190646 | 0.5676795 | -0.3422997 |

```

We can then compute and plot the RRs relative to \(0 . \mathrm{HH}\)
```

> round(ci.exp(rdur, subset = c("Cst","tfHH")), 2)
exp(Est.) 2.5% 97.5%
factor(lex.Cst)1.HH
9.86 8.46 11.50
14.09 12.00 16.54
factor(lex.Cst)3.HH
factor(lex.Cst)4.HH
factor(lex.Cst)5.HH
factor(lex.Cst)6.HH
factor(lex.Cst)7.HH
factor(lex.Cst)8.HH
factor(lex.Cst)9.HH
Ns(tfHH, knots = c(0, 1, 3, 6))1

```

```

Ns(tfHH, knots =c(0, 1, 3, 6))3 0.43}00.380.5
> rrr <- ci.exp(rdur, subset = c("Cst","tfHH"), ctr.mat = CM)
> round(ci.exp(mAc, subset = c("Cst","tfHH")), 2)
exp(Est.) 2.5% 97.5%
lex.Cst1.HH
12.75 10.99 14.79
lex.Cst2.HH
18.36 15.71 21.45
24.65 20.87 29.13
lex.Cst3.HH
lex.Cst4.HH 31.06 25.94 37.20
lex.Cst5.HH 36.02 29.60 43.84
lex.Cst6.HH 39.63 31.79 49.39
lex.Cst7.HH 42.34 32.76 54.74
lex.Cst8.HH
45.65 34.32 60.73
lex.Cst9.HH
51.63 38.24 69.70
Ns(tfHH, knots =c(0, 1, 3, 6))1 0.33 0.28 0.38
Ns(tfHH, knots =c(0, 1, 3, 6))2 0.06 0.05 0.08
Ns(tfHH, knots =c(0, 1, 3, 6))3 0.36}00.31 0.41
> ccc <- ci.exp(mAc , subset = c("Cst","tfHH"), ctr.mat = CM)
> rownames(rrr) <- pasteO(1:9, ".HH")
> round(cbind(rrr, ccc), 3)

```


\subsection*{5.2.1.1 RRs between successive states}

It would also be of interest to see the ratio of hazards of next HH versus that in the previous state. This would be rates from state \(n\). HH versus rates from the state \(n-1\). HH, for \(n\) from 1 to 9 . This amounts to a contrast matrix relating to the lex. Cst parameters
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline & [,1] & [,2] & [,3] & [,4] & [,5] & [,6] & [,7] & [,8] & [,9] \\
\hline [1, ] & -1 & 1 & 0 & 0 & 0 & 0 & 0 & 0 & 0 \\
\hline [2,] & 0 & -1 & 1 & 0 & 0 & 0 & 0 & 0 & 0 \\
\hline [3,] & 0 & 0 & -1 & 1 & 0 & 0 & 0 & 0 & 0 \\
\hline [4, ] & 0 & 0 & 0 & -1 & 1 & 0 & 0 & 0 & 0 \\
\hline [5, ] & 0 & 0 & 0 & 0 & -1 & 1 & 0 & 0 & 0 \\
\hline [6, ] & 0 & 0 & 0 & 0 & 0 & -1 & 1 & 0 & 0 \\
\hline [7, ] & 0 & 0 & 0 & 0 & 0 & 0 & -1 & 1 & 0 \\
\hline [8,] & 0 & 0 & 0 & 0 & 0 & 0 & 0 & -1 & 1 \\
\hline
\end{tabular}

While this is constant over time for \(\mathrm{n}>1\) by the very structure of the model (no interaction between lex.Cst and other variables), the RR between between \(1 . \mathrm{HH}\) and 0 . HH depends on time since \(1^{\text {st }} \mathrm{HH}\), because tfHH is 0 for any record with lex. Cst equal to \(0 . \mathrm{HH}\), so we omit this:
```

> ci.exp(rdur, subset = "Cst")
exp(Est.) 2.5% 97.5%
factor(lex.Cst)1.HH 9.863794 8.462811 11.49670
factor(lex.Cst)2.HH 14.092067 12.003820 16.54360
factor(lex.Cst)3.HH 18.838874 15.854561 22.38493
factor(lex.Cst)4.HH 23.526890 19.500963 28.38396
factor(lex.Cst)5.HH 27.484954 22.372980 33.76496
factor(lex.Cst)6.HH 29.781844 23.612240 37.56349
factor(lex.Cst)7.HH 32.639421 24.916778 42.75560
factor(lex.Cst)8.HH 32.689590 24.158817 44.23268
factor(lex.Cst)9.HH 38.712636 28.082221 53.36715
> ci.exp(cmd , subset = "Cst")
exp(Est.) 2.5% 97.5%
factor(lex.Cst)1.HH 12.68617 10.81829 14.87656
factor(lex.Cst)2.HH 18.27919 15.46970 21.59893
factor(lex.Cst)3.HH 24.51320 20.68414 29.05109
factor(lex.Cst)4.HH 30.89188 25.61215 37.25998
factor(lex.Cst)5.HH 36.17100 29.61616 44.17662
factor(lex.Cst)6.HH 39.67913 31.52301 49.94554
factor(lex.Cst)7.HH 43.78903 33.76462 56.78961
factor(lex.Cst)8.HH 45.52099 33.97474 60.99122
factor(lex.Cst)9.HH 52.96816 39.17351 71.62050
> ci.exp(rdur, subset = "Cst", ctr.mat = RM)

```
\begin{tabular}{lrrr} 
& \(\exp\) (Est.) & \(2.5 \%\) & \(97.5 \%\) \\
{\([1]\),} & 1.428666 & 1.2471014 & 1.636665 \\
{\([2]\),} & 1.336842 & 1.1343411 & 1.575494 \\
{\([3]\),} & 1.248848 & 1.0291594 & 1.515432 \\
{\([4]\),} & 1.168236 & 0.9323518 & 1.463798 \\
{\([5]\),} & 1.083569 & 0.8325148 & 1.410331 \\
{\([6]\),} & 1.095950 & 0.7981266 & 1.504908 \\
{\([7]\),} & 1.001537 & 0.6922460 & 1.449018 \\
{\([8]\),} & 1.184250 & 0.7896019 & 1.776145
\end{tabular}
```

> CCC <- ci.exp(cmd , subset = "Cst", ctr.mat = RM)
> RRR <- ci.exp(rdur, subset = "Cst", ctr.mat = RM)
> rownames(RRR) <- pasteO(2:9," vs. ", 1:8)
> round(cbind(RRR, CCC), 3)
exp(Est.) 2.5% 97.5% exp(Est.) 2.5% 97.5%
2 vs.1 1.429 1.247 1.637 1.441 1.260 1.647
3 vs.2 1.337 1.134 1.575 1.341 1.143 1.574
4 vs. 3 1.249 1.029 1.515 1.260 1.048 1.515
5 vs. 4 1.168 0.932 1.464 1.171 0.946 1.449
6 vs. 5 1.084 0.833 1.410 1.097 0.855 1.407
7 vs. 6 1.096 0.798 1.505 1.104 0.826 1.475
8 vs. 7 1.002 0.692 1.449 1.040 0.737 1.467
9 vs. 8 1.184 0.790 1.776 1.164 0.778 1.739

```

For comparison we re-plot the RRs versus 0 . HH to get a complete overview:
```

par(mfrow=c(1,2))

# 

par(xaxt = "n")
plotEst(rrr,
xlog = TRUE, lwd = 3, xlim = c(0.5,20),
xlab = paste("Hazard ratio of next HH (at 2 years):",
"current vs. no HH (O.HH)"))
par(xaxt = "s")
axis(side = 1, at = c(0.5,1:10,15), labels = NA)
axis(side = 1, at = c(0.5,1,2,5,10,20),
labels = c("0.5",paste(c(1,2,5,10, 20))))
linesEst(ccc, lwd = 3, y = 9:1 - 0.2, col = "gray")
abline(v = 1, lty = 3)

# 

par(xaxt = "n")
plotEst(rbind(NA,RRR),
xlog = TRUE, lwd = 3, xlim = c(0.5,20),
xlab = "Hazard ratio of next HH: current vs. previous HH")
par(xaxt = "s")
axis(side = 1, at = c(0.5,1:10,15), labels = NA)
axis(side = 1, at = c(0.5,1,2,5,10,20),
labels = c("0.5",paste(c(1,2,5,10,20))))
linesEst(rbind(NA,CCC), lwd = 3, y = 9:1 - 0.2, col = "gray")
abline(v = 1, lty = 3)

```

From figure ?? we see there is only a very slight dilution of the effect of no. HHs by introducing a frailty term, but also that regardless of model, there is an increase in rates of next HH up to about 5 HHs , after which the rate of next HH does not increase by further HH occurrences.

So even if there is some variation between individuals in their frailties it does not explain much of the variation between HH states. The coxme model uses an assumption of normally distributed frailties (on the log-rate scale) which is not an obvious choice when we have a large fraction of the population who see no HH , and therefore might be considered immune (and so should have a frailty of 1 ).
before


Figure 5.9: Hazard ratios of next HH event relative to the rate of the first event, respectively previous event. Left panels: The hazard ratio of next HH event relative to the rate of the first event, computed at 2 years after last HH event ( \(\mathrm{tfHH}=2\) 2). Right panel: Ratio of rate of next HH versus rate of previous rate.
The black estimates are from the mixed-effects Cox model with random person-effect, while the gray estimates are from the usual Cox model; both with diabetes duration as baseline timescale, and separate age-effects for the two sexes.
../graph/recur-cmp-dur

\subsection*{5.3 Unknown history of events before entry}

In some instances the number of events seen before entry to the study is not known, so a proper analysis is not possible. In most practical circumstances, all event dates will not be known; only a time-limited set of events will be known.

It is presumably quite common that only events after entry instead, so there will be a larger variation in rates between persons, but the frailty/selection effects within persons will have similar characteristics. In particular, the state without any recorded events will be contaminated with follow-up time after event(s).

As an example we look at the example pretending that HH events before entry were not known:
```

> summary(Lx, t = T)
Transitions:
To
From 0.HH Dead Records: Events: Risk time: Persons:
0.HH 17640 673 18313 673 73223.02 18313
Timescales:
per age dur
> summary(hh)

| id | doh | nh |
| :---: | :---: | :---: |
| Min. : 11 | Min. :1985 | Min. : 1.000 |
| 1st Qu.: 5580 | 1st Qu.:2000 | 1st Qu.: 1.000 |
| Median :11548 | Median :2004 | Median : 2.000 |
| Mean :11492 | Mean :2004 | Mean : 3.535 |
| 3rd Qu. : 17192 | 3rd Qu. : 2009 | 3rd Qu.: 4.000 |
| Max. :23268 | Max. :2014 | Max. : 54.000 |

```

In order to mimic the absence of events prior to study entry we extract the entry times of persons from Lx
```

> hhx <- left_join(rename(hh, lex.id = id),

+ subset(Lx, select = c(lex.id, per)))
> hhx <- data.frame( subset(hhx, per < doh)
+ %>% group_by(lex.id)
+ %>% mutate(nh = row_number())
+ %>% select(c(lex.id, doh, nh))
+ )
> str(hh)
'data.frame': }14270\mathrm{ obs. of }3\mathrm{ variables:
\$ id : int 11 11 11 11 11 11 11 16 16 16 ...
\$ doh: num 2002 2003 2004 2005 2011 ...
\$ nh : int 1 2 3 4 5 6 7 1 2 3 ...
> str(hhx)
'data.frame': 4142 obs. of 3 variables:
\$ lex.id: int 11 11 11 19 27 27 27 27 27 27 ...
\$ doh : num 2011 2013 2014 2014 2009 ...
\$ nh : int 1 2 3 1 1 2 3 4 5 6 %..

```

So we see there is a substantial number of event occurring before entry; the number of events we count is not quite the same because the limit of 10 now refers to the number of events after entry and not the total number of events recorded.
```

> cutHHx <- mutate(subset(hhx, nh <= 10),
cut = doh,
new.state = ifelse(nh < 10,
pasteO(nh, ".HH"),
"10+HH")) %>%
select(lex.id, cut, new.state)
> system.time(

+ Rxx <- rcutLexis(Lx,
+ cut = cutHHx,
+ timescale = "per"))
user system elapsed
6.05 0.17 6.22

```
\(>\operatorname{summary}(R x)\)
Transitions:
                To
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline From & 0. HH & 1. HH & 2. HH & 3. HH & 4. HH & 5.HH & 6. HH & 7. HH & 8. HH & 9. HH & 10+HH & Dead & Records: & Events: \\
\hline \(0 . \mathrm{HH}\) & 12434 & 887 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 335 & 13656 & 1222 \\
\hline 1. HH & 0 & 2787 & 568 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 141 & 3496 & 709 \\
\hline 2. HH & 0 & 0 & 1112 & 373 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 62 & 1547 & 435 \\
\hline 3. HH & 0 & 0 & 0 & 498 & 260 & 0 & 0 & 0 & 0 & 0 & 0 & 47 & 805 & 307 \\
\hline 4. HH & 0 & 0 & 0 & 0 & 275 & 193 & 0 & 0 & 0 & 0 & 0 & 30 & 498 & 223 \\
\hline 5. HH & 0 & 0 & 0 & 0 & 0 & 168 & 144 & 0 & 0 & 0 & 0 & 11 & 323 & 155 \\
\hline 6. HH & 0 & 0 & 0 & 0 & 0 & 0 & 101 & 105 & 0 & 0 & 0 & 9 & 215 & 114 \\
\hline 7. HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 68 & 70 & 0 & 0 & 13 & 151 & 83 \\
\hline 8. HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 47 & 55 & 0 & 4 & 106 & 59 \\
\hline 9. HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 23 & 49 & 5 & 77 & 54 \\
\hline 10+HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 127 & 16 & 143 & 16 \\
\hline Sum & 12434 & 3674 & 1680 & 871 & 535 & 361 & 245 & 173 & 117 & 78 & 176 & 673 & 21017 & 3377 \\
\hline
\end{tabular}
\begin{tabular}{|c|c|c|}
\hline \multicolumn{3}{|l|}{Transitions: To} \\
\hline From & Risk time: & Persons: \\
\hline \(0 . \mathrm{HH}\) & 51936.45 & 13656 \\
\hline 1. HH & 11750.50 & 3496 \\
\hline 2. HH & 4425.94 & 1547 \\
\hline 3. HH & 2010.91 & 805 \\
\hline 4. HH & 1110.91 & 498 \\
\hline 5.HH & 628.43 & 323 \\
\hline 6. HH & 383.83 & 215 \\
\hline 7. HH & 236.76 & 151 \\
\hline 8.HH & 168.51 & 106 \\
\hline 9.HH & 116.50 & 77 \\
\hline 10+HH & 454.30 & 143 \\
\hline Sum & 73223.02 & 18313 \\
\hline
\end{tabular}
```

> summary(Rxx)

```
Transitions:
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline From & \(0 . \mathrm{HH}\) & 1. HH & 2. HH & 3. HH & 4. HH & 5. HH & 6. HH & 7. HH & 8. HH & 9. HH & 10+HH & Dead & Records: & Events: \\
\hline \(0 . \mathrm{HH}\) & 15894 & 1869 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 550 & 18313 & 2419 \\
\hline 1. HH & 0 & 1219 & 574 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 76 & 1869 & 650 \\
\hline 2. HH & 0 & 0 & 328 & 218 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 28 & 574 & 246 \\
\hline 3. HH & 0 & 0 & 0 & 94 & 117 & 0 & 0 & 0 & 0 & 0 & 0 & 7 & 218 & 124 \\
\hline 4. HH & 0 & 0 & 0 & 0 & 48 & 62 & 0 & 0 & 0 & 0 & 0 & 7 & 117 & 69 \\
\hline 5. HH & 0 & 0 & 0 & 0 & 0 & 23 & 37 & 0 & 0 & 0 & 0 & 2 & 62 & 39 \\
\hline 6. HH & 0 & 0 & 0 & 0 & 0 & 0 & 14 & 22 & 0 & 0 & 0 & 1 & 37 & 23 \\
\hline 7. HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 9 & 11 & 0 & 0 & 2 & 22 & 13 \\
\hline 8. HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 1 & 10 & 0 & 0 & 11 & 10 \\
\hline 9. HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 4 & 6 & 0 & 10 & 6 \\
\hline 10+HH & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 6 & 0 & 6 & 0 \\
\hline Sum & 15894 & 3088 & 902 & 312 & 165 & 85 & 51 & 31 & 12 & 14 & 12 & 673 & 21239 & 3599 \\
\hline
\end{tabular}
\begin{tabular}{lrr}
\multicolumn{3}{l}{ Transitions: } \\
To & \\
From & Risk time: & Persons: \\
\(0 . \mathrm{HH}\) & 68335.16 & 18313 \\
1.HH & 3628.12 & 1869 \\
\(2 . \mathrm{HH}\) & 813.85 & 574 \\
3.HH & 238.43 & 218 \\
\(4 . \mathrm{HH}\) & 96.20 & 117 \\
5. HH & 47.39 & 62 \\
\(6 . \mathrm{HH}\) & 31.04 & 37 \\
\(7 . \mathrm{HH}\) & 15.23 & 22 \\
\(8 . \mathrm{HH}\) & 4.68 & 11 \\
\(9 . \mathrm{HH}\) & 3.40 & 10 \\
\(10+\mathrm{HH}\) & 9.51 & 6 \\
Sum & 73223.02 & 18313
\end{tabular}

We see that the amount of risk time and number of deaths is the same; we have more events in total, but the events are more concentrated in the early states.

\subsection*{5.3.1 Comparison with the full data}

We can compare the results of analyzing this dataset withe those of the "real" one above, we need to define tfHH as a time scale, where we only are concerned about time since events that occur after entry. It is basically the same code as above, but with the new definition of the recurrence numbers and -dates:
```

> \# join with the cut dates
> Rxx <- left_join(Rxx, rename(cutHHx, doHH = cut),
by = c("lex.id" = "lex.id",
"lex.Cst" = "new.state"))
> \# make lex.Cst a factor, and reorder levels
> Rxx <- factorize(Rxx)
> Rxx <- Relevel(Rxx, c(pasteO(0:9,".HH"),"10+HH","Dead"))
> \# define new timescale
> Rxx\$tfHH <- with(Rxx, ifelse(lex.Cst == "O.HH", NA, per - doHH))
> attr(Rxx, "time.scales") <- c(attr(Rxx, "time.scales"), "tfHH")
> attr(Rxx, "time.since" ) <- c(attr(Rxx, "time.since" ), "")
> attr(Rxx, "breaks") <- c(attr(Rxx, "breaks"), list(tfHH = NULL))
> \# split follow-up and convert NAs to O
> Sxx <- splitMulti(Rxx, age = seq(0, 90, 1/4))
> Sxx <- tsNA2O(Sxx, all = TRUE)
> \# then fit the model
> system.time(

+ mAcx <- glm.Lexis(Sxx,
+ ~ lex.Cst + Ns(tfHH, knots = c(0,1,3,6)) +
Ns(dur, knots = c(1:5 * 10)) +
sex * Ns(age, knots = c(4:8 * 10)),
to = levels(Sxx)[2:11],
+ scale = 100))

```
```

stats::glm Poisson analysis of Lexis object Sxx with log link:

```

Rates for transitions:
0.HH->1.HH
1. \(\mathrm{HH}->2\). HH
2. \(\mathrm{HH}->3\). HH
3. \(\mathrm{HH}->4\). HH
4. HH->5. HH
5. HH->6. HH
6. \(\mathrm{HH}->7\). HH
7. HH->8. HH
8. HH->9. HH
9. \(\mathrm{HH}->10+\mathrm{HH}\)
, lex.dur (person-time) scaled by 100
user system elapsed
\(6.72 \quad 0.80 \quad 7.54\)

We now have a fitted model of exactly the same structure and naming of covariates as the previous one, but fitted to a Lexis object with a different definition of the recurrent event. The events will be the same but with a differing numbering, all with an identical or smaller number. Since we in both cases use 10 as the cut-off number, the data frame only counting after study entry will have some more events in total.

Therefore we can plot the parameter estimates using the same function as before:
```


# function to plot age effect

plage <- function(mAc) {
matshade(pra$age, aa <<- ci.pred(mAc, pra),
    plot = TRUE, col = "white",
    log = "y", lwd = 3, ylim = c(1,350),
    xlab = "Attained age (years)",
    ylab = "Rate of first HH per 100 PY")
abline(h = aa[21,1], lty = "42", lwd = 2, col = "gray")
matshade(pra$age, aa, lwd = 3, col = "blue")
matshade(pra\$age, ci.pred(mAc, mutate(pra, sex = "W")),
lwd = 3, col = "red")
points(50, aa[21,1], pch = 16, cex = 1.4, col = "white")
points(50, aa[21,1], pch = 1, cex = 1.4, lwd = 2, col = "blue")

# function to plot duration effects

pldur <- function(mAc) {
for(x in 9:1)
{
matshade(prx(x, "M")\$tfHH,
dd <<- ci.pred(mAc, prx(x, "M")),
plot = (x == 9),
log = "y", lwd = 3, ylim = c(1,350), col = gray(x/12),
xlab = "Time since last HH (years)",
ylab = "Rate of next HH (men, aged 50) per 100 PY")
text(0, dd[1,1], paste(x), adj = 1.6)
}
text(0, 350, "HH number", adj = 0.2)
abline(h = aa[21,1], lty = "42", lwd = 2, col = "gray")

```

We can then use the functions to plot the two different sets of estimates together.
```

par(mfcol =c(2, 2), oma =c(0,0,0,2.5),
mgp =c(3,1,0)/1.6, las = 1, bty = "n")
plage(mAc)
pldur(mAc)
plage(mAcx)
pldur(mAcx)

```

From figure 5.10 we see that the age-effects are aprroximately the same, but the effects of HH number are somewhat larger in the follow-up only data set. This is because the events in this are assigned a smaller number, and since the number of event increases the rate of next event, the absoute effect of event number must be larger.


Figure 5.10: Estimates from two different definitions of recurrence number. The left panels are using all available data, including information of HH events prior to start of follow-up, the right panels are counting only HH events ocurring after strat of follow-up. ../graph/recur-ageHHaddx

This is a demonstration that the way event counts are defined from original data may have a profound influence on the estiamted recurrence rates. Unless there is certainty that no events have occurred before start of follow-up, results may be strongly dependent on how recurrent events are numbered.

\subsection*{5.4 Summary of recurrent events}

When the same event can occur multiple times for the same person, this should be addressed by defining different states corresponding to the number of recurrent events encountered. The current number of events should be included as a covariate in order to accomodate the effects of increasing number of events.

Since the same person may see several events, it is possible to introduce a dependency structure in the models by adding random effects. Here we have shown how this is accomodated in a Cox model using coxme, and how the random effects model dilutes the effects of the event number.

In some instances of recurrent events there may be (large) fraction of the population that is effectively immune to having an event. This implies that if a random effects is introduced, then it shoudl have an allowance for an atom in 0 on the rate scale ( \(-\infty\) on the log-rate scale), ideally some compound model with a binomial model for the probability of being in the immune class.

In probability terms a model is formulated in terms of susceptibility:
\[
\mathrm{P}\{\text { susceptible }\} \times \mathrm{P}\{\text { next event } \mid \text { susceptible }\}
\]
where the first terms is a binomial model and the latter a rate model possibly with some random effect allowance.
...now input from comprisk

\section*{Chapter 6}

\section*{Competing risks in practice}

Suppose that persons in a given state, 'alive', say, are subject to a number of different causes of deaths, 'cause1', 'cause2' etc. Causes of death are required to be exhaustive and mutually exclusive. Exhaustive means that any person will eventually died from one if the causes; exclusive means that you can only die from from one cause. In situations where the causes are not causes of death but other events, it is implicit that we only consider the first occurrence of an event from the state 'alive', and ignore what occurs after.

So a competing risk set-up is a special multistate model; one with a singe initial state, and a finite number of absorbing states that can be reached directly from the initial state. By that token the three levels of quantities of interest will also be of relevance here (depending, of course, on the subject matter): 1) cause-specific rates 2 ) cumulative risks for each cause and 3 ) expected life time and life time lost to each cause.

The likelihood for observations from a competing risk scenario is a function of the cause-specific transition rates, and is product of the likelihoods that would emerge if we considered each cause the only one. Thus analysis is in principle straight forward; just estimate a model for each of the cause-specific rates. These will together form a complete model for the competing risks problem. Note that it is not because the types of event (causes of death) are independent, but because the log-likelihood is a sum with each term depending only on one of the cause-specific rates, see (3.4), p. 21.

If the cause-specific rates are all we want to assess then we will be done.
But often we would like also to have estimates of the cumulative risks, that is the probability of dying from a specific cause before a given time as function of time. Each of these cumulative risks are functions of all cause-specific rates. Specifically, if the cause-specific rates are \(\lambda_{j}(t), j=1,2, \ldots\), then the cumulative risk of death from cause \(c\) before time \(y, R_{c}(t)\) is (where \(S(u)\) is the survival function):
\[
\begin{aligned}
R_{c}(t) & =\int_{0}^{t} \lambda_{c}(u) S(u) \mathrm{d} u \\
& =\int_{0}^{t} \lambda_{c}(u) \exp \left(-\int_{0}^{u} \sum_{j} \lambda_{j}(s) \mathrm{d} s\right) \mathrm{d} u \\
& =\int_{0}^{t} \lambda_{c}(u) \exp \left(-\sum_{j} \int_{0}^{u} \lambda_{j}(s) \mathrm{d} s\right) \mathrm{d} u \\
& =\int_{0}^{t} \lambda_{c}(u) \exp \left(-\sum_{j} \Lambda_{j}(s)\right) \mathrm{d} u
\end{aligned}
\]
\(\Lambda_{j}(s)\) is the cumulative rate (integrated intensity) for the \(j^{\text {th }}\) cause of death.
Even if we from the modeling of the \(\lambda \mathrm{s}\) have standard errors of \(\log \left(\lambda_{c}\right)\) the standard errors of \(R_{c} \mathrm{~s}\) will be analytically intractable from these.

The only viable way to get confidence intervals for the cumulative risks, \(R_{c}\), is by simulation. This is implemented through calculation of simulated rates \(\lambda(t)\) by sampling from the posterior distribution of the parameters in the models for \(\log (\lambda(s))\), and computing the integrals numerically for each simulated sample.

The simulation approach also allows calculation of confidence intervals for sums of the cumulative risks, \(R_{1}(t)+R_{2}(t)\) for example, which will be needed if we want to show stacked cumulative risks.

Finally, simulation will also allow calculation of standard errors of sojourn times in each of the states
'alive' and 'cause1', 'cause2', etc. While the latter two may not be of direct interest, then differences between such sojourn times between different groups can be interpreted as years of life lost to each cause between groups.

\subsection*{6.1 Example data}

As an illustrative data example we use the (fake) diabetes register data; we set up the Lexis object, cut the follow-up time at dates of OAD, resp Ins. There is a considerable fraction of persons who are put on medication immediately at diagnosis a who claim their medication during the first one or two months, so we disregard the first two months of follow up to get a more realistic picture of beginning of medication among persons initially without medication. This is done by moving the date of DM diagnosis 2 months, which also has the effect of increasing the number of persons beginning their follow-up on OAD or insulin.
```

> library(Epi)
> library(popEpi)
> data(DMlate)
> DMlate$dodm <- DMlate$dodm + 2/12
> Ldm <- Lexis(entry = list(per = dodm,

+ age = dodm - dobth,
tfd = 0),
exit = list(per = dox ),
exit.status = factor(!is.na(dodth), labels = c("DM", "Dead") ),
+ data = DMlate)
NOTE: entry.status has been set to "DM" for all.
NOTE: Dropping 284 rows with duration of follow up < tol

```

The 284 rows dropped are persons in the original data that end follow-up less than 2 months after date of diabetes (dodm).
```

> summary(Ldm)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 7383 2333 9716 2333 52633.05 9716

```

We can cut the follow-up at the dates of beginning OAD (dooad and insulin (doins:
```

> set.seed(1952)
> Mdm <- mcutLexis(Ldm,

+ wh = c('dooad', 'doins'),
+ new.states = c('OAD', 'Ins'),
+ precursor = 'DM',
+ seq.states = FALSE,
+ ties = TRUE)
NOTE: }14\mathrm{ records with tied events times resolved (adding 0.01 random uniform),
so results are only reproducible if the random number seed was set.
> summary(Mdm)
Transitions:
To

| From | DM | Dead | OAD | Ins | Ins+OAD | Records: | Events: | Risk time: | Persons: |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| DM | 2775 | 925 | 2044 | 234 | 0 | 5978 | 3203 | 21817.05 | 5978 |
| OAD | 0 | 968 | 3271 | 0 | 952 | 5191 | 1920 | 22498.35 | 5191 |
| Ins | 0 | 141 | 0 | 461 | 126 | 728 | 267 | 3821.08 | 728 |
| Ins+OAD | 0 | 299 | 0 | 0 | 876 | 1175 | 299 | 4496.57 | 1175 |
| Sum | 2775 | 2333 | 5315 | 695 | 1954 | 13072 | 5689 | 52633.05 | 9716 |

```

CODE EXPLAINED: mcutLexis cuts the follow-up at multiple event times keeping track of the persons' history, but requires that each type of event occurs at most once, see 4.4.2 on pages 36 ff .

Also requires that no two events occur at the same time; if that is so arbitrary (small) random quantities are added to the times in order to break the tie.

In order to model the cause-specific rates by duration we initially split the the follow-up by duration of diabetes in intervals of \(1 / 48\) year (about 1 week) for the two first months and after that in intervals of 1 month ( \(=1 / 12\) year), creating a Lexis object for a competing risks situation with three possible event types:
```

> Sdm <- splitMulti(factorize(subset(Mdm, lex.Cst == "DM")),

+ tfd = c(seq( 0, 2/12, 1/48),
+ seq(3/12, 100, 1/12)))
> summary(Sdm)
Transitions:
To
From DM Dead OAD Ins Records: Events: Risk time: Persons:
DM 295344 925 2044 234

```

CODE EXPLAINED: We subset the Mdm to the follow-up in state DM in order to have a proper competing risks set-up. We need to use the factorize in order to restrict the levels of lex. Cst and lex. Xst to those actually present in data set. The summary (Sdm) shows that this cuts the number of persons and risk time substantially-compare to summary (Mdm), or see figure ??,

In order to be able to model the effect of duration at early durations we split the early follow-up finely along the diabetes duration (tfd, time from diagnosis).

We can illustrate the follow-up in the full data set and in the data set restricted to those at risk in the DM state:
```

> par(mfrow =c(1,2))
boxes (Mdm,
boxpos = list (x = c(18, 50, 18, 82, 82),
y = c(85, 50, 15, 85, 15)),
scale.R = 100,
show.BE = TRUE)
boxes (Sdm,
boxpos = list (x = c(18, 50, 18, 82),
y=c(85, 50, 15, 85)),
scale. R = 100,
show.BE = 'nz' )

```

The following is concerned with analysis of the follow-up shown in the right panel of figure 6.1.

\subsection*{6.2 Models for rates}

Now that we have set up a dataset with three competing events, we can model the cause-specific rates separately by time from diagnosis as the only underlying time scale. Note that we only need to specify the to \(=\) argument because there is only one possible from for each to (incidentally the same for all to states), namely DM.

We can use either gam models with penalized smoothing, where we only set an initial upper bound for the degrees of effective degrees of freedom used:
```

> mD <- gam.Lexis(Sdm, ~ s(tfd, k = 6), to = 'Dead')
> m0 <- gam.Lexis(Sdm, ~ s(tfd, k = 6), to = 'OAD' )
> mI <- gam.Lexis(Sdm, ~ s(tfd, k=6), to = 'Ins')

```

It turns out that this automated approach also requires some grooming in order to render credible estimates, so in this context we refrain from that. The code is given above, but not run; it is left as an exercise to the reader to try out this set of model, varying the \(k\) to see what happens.

A bit more brutal approach is to use natural spline (restricted cubic splines) with a predefined set of knots - here we explicitly use 7 knots corresponding to 7 degrees for freedom for the tfd term-that is each model uses a total of 7 parameters
```

> kn <- c(0,0.2,0.5,1,3,7,10)
> mD <- glm.Lexis(Sdm, ~ Ns(tfd, knots = kn), to = 'Dead')

```


Figure 6.1: The transitions in the multistate model with and without follow-up extended after beginning of first drug exposure. Follow-up begins two months after the recorded date of diagnosis of diabetes. Rates in brackets are per 100 PY. In the rightmost panel only persons in the DM state contribute person-years - all follow-up after exit from the DM state is discarded; a characteristic of a competing risks situation.
. ./graph/crisk-boxes54
```

stats::glm Poisson analysis of Lexis object Sdm with log link:
Rates for the transition:
DM->Dead
> mO <- glm.Lexis(Sdm, ~ Ns(tfd, knots = kn), to = 'OAD' )
stats::glm Poisson analysis of Lexis object Sdm with log link:
Rates for the transition:
DM->OAD
> mI <- glm.Lexis(Sdm, ~ Ns(tfd, knots = kn), to = 'Ins' )
stats::glm Poisson analysis of Lexis object Sdm with log link:
Rates for the transition:
DM->Ins

```

With these models fitted we can compute the rates, cumulative rates and risks and sojourn times in different states using the usual formulae-basically integrating the rates. First we compute the rates in intervals of length \(1 / 100\) years. Note that these models only have time since diagnosis as covariates, so in that sense they are similar to Nelson-Aalen estimates, albeit in a biologically more meaningful guise, and they provide estimates on the rate scale, not on the scale of the cumulative rates.

The points where we compute the predicted rates are midpoints of intervals of length \(1 / 100\) year. These points are unrelated to the follow-up intervals in which we split the data for analysis-those were 1 month intervals ( \(1 / 12\) year), here we use \(1 / 100\) year (about 3.7 days) throughout:
```

> int <- 1/100
> nd <- data.frame(tfd = seq(0, 14, int))
> rownames(nd) <- nd\$tfd
> str(nd)
'data.frame': }1401\mathrm{ obs. of 1 variable:
\$ tfd: num 0 0.01 0.02 0.03 0.04 0.05 0.06 0.07 0.08 0.09 ...

```

With this we can show the rates as a function of the time since diagnosis:
```

> par(mfrow = c(1,2))
> matshade(nd\$tfd, cbind(ci.pred(mD, nd),

+ ci.pred(mI, nd),
+ ci.pred(mO, nd))*1000,

```
```

+ ylim = c(1,300), yaxt = "n", xlim = c(0,10),
ylab = "Rates per 1000 PY",
xlab = "Time since DM diagnosis (years)",
col = c("black","red","blue"), log = "y", lwd = 3,
plot = TRUE)
axis(side = 2, at = ll<-outer(c(1,2,5),-2:3,function(x,y) x*10^y),
labels = formatC(ll,digits = 4), las = 1)
axis(side = 2, at = ll<-outer(c(1.5,2:9),-2:3,function(x,y) x*10^y),
labels = NA, tcl = -0.3)
text(0, 2.5*0.7^c(1,2,0),
c("Dead","Ins","OAD"),
col = c("black","red","blue"), adj = 0)
matshade(nd\$tfd, cbind(ci.pred(mD, nd),
ci.pred(mI, nd),
ci.pred(mO, nd))*1000,
ylim = c(0,300), yaxs = "i", xlim = c(0,10),
ylab = "Rates per 1000 PY",
xlab = "Time since DM diagnosis (years)",
col = c("black","red","blue"), lwd = 3, plot = TRUE)
axis(side = 2, at = 1:9 * 50,
labels = NA, tcl = -0.3)

```


Figure 6.2: Estimated rates of \(O A D\), Ins and Dead from the DM state. Estimates are from glm models fitted to data split in 1 month intervals (1/12 year, that is), using natural splines. The \(y\)-axis is linear in the rates and starts exactly at 0, so allowing visualization of the integrals as areas under the curves.
. ./graph/crisk-rates

Note that the graphs in figures ?? (logarithmic \(y\)-scale) and 6.2 are not normally shown in analyses of competing risks; the competing cause-specific rates are hardly ever shown. I suspect that this is largely because they are often modeled by a Cox model and so are buried in the model.

\subsection*{6.3 Cumulative rates and risks}

For the calculation of the cumulative rates and state probabilities, we need just the rates without CIs:
```

> \# utility to compute midpoints in a vector x
> mp <- function(x) x[-1] - diff(x) / 2
> \# rates at midpoints
> lD <- mp(ci.pred(mD, nd)[,1])
> lI <- mp(ci.pred(mI, nd)[,1])
> lO <- mp(ci.pred(m0, nd)[,1])
> \# cumulative rates at right border of the intervals
> LD <- cumsum(ID) * int
> LI <- cumsum(II) * int
> LO <- cumsum(10) * int
> \# but when integrating to get the cumulative risks we use the average
> \# of the survival function at the two endpoints (adding 1 as the first)
> Sv <- c(1, exp(-LD - LI - LO))
> rD <- c(O, cumsum(lD * mp(Sv)) * int)
> rI <- c(O, cumsum(II * mp(Sv)) * int)
> rO <- c(0, cumsum(10 * mp(Sv)) * int)

```

Now we have the cumulative risks for the three causes and the survival, computed at the end of each of the intervals, at any time point the sum of the 3 cumulative risks and the survival should be 1 :
```

> summary(Sv + rD + rI +r0)
Min. 1st Qu. Median Mean 3rd Qu. Max.
i rrrrin Median Mean 3rd qu.j Max.
> oo <- options(digits = 20)
> cbind(summary(Sv + rD + rI + r0))
[,1]
Min. 1.0000000000000000000
1st Qu. 1.0000003131293013769
Median 1.0000003337919416424
Mean 1.0000003247574191789
3rd Qu. 1.0000003432689923422
Max. 1.0000003488362141368
> options(oo)

```

We can then plot the 3 cumulative risk functions together:
```

> zz <- mat2pol(cbind(rD, rI, r0, Sv), x = nd\$tfd,

+ xlim = c(0,10), xaxs = "i", yaxs = "i", las = 1,
xlab = "Time since DM diagnosis (years)",
ylab = "Probability",
col = c(gray(0.3),"red","blue","forestgreen"))
> mm <- t(apply(zz, 1, mp))
> text(9, mm[900,], c("Dead","Ins","OAD", "DM"), col = "white")
> box(col = "white",lwd = 3)

```

\subsection*{6.4 Confidence intervals for cumulative risks}

We want confidence intervals for each of the 4 cumulative risks, but we may also be interested in confidence intervals for sums of any subset of the cumulative risks, corresponding to the borders between the colors in figure 6.3. If we only had two competing risks (and hence three states) the latter would not be an issue, because the sum of any two cumulative risks will be 1 minus the cumulative risk of the remainder, so we could get away with the confidence intervals for the single cumulative risks. This is the reason we have chosen an example with 3 competing risks and not just 2 ; we then have 4 probabilities to sum in different order.

A short look at the formulae for cumulative risks will reveal that analytic approximation to the standard error of these probabilities (or some transform of them) is not really a viable way to go. Particularly if we also want confidence intervals of sums of the state probabilities as those shown in stacked plots.


Figure 6.3: Probabilities of being in the 4 different states as a function of time since diagnosis. Note that OAD means that OAD was initiated first, and similarly for Ins. We are not concerned about what occur after these events. Dead means dead without being on any drug. ../graph/crisk-stack

So in practice, if we want confidence intervals not only for the state probabilities, but also for any sum of subsets of them we would want a large number of simulated copies of the cumulative risks, each copy of the same structure as the one we just extracted from the model.

Moreover, we might also want confidence intervals for sojourn times (i.e. time spent) in each state up to a given time, which would come almost for free from the simulation approach.

This means that we must devise a method to make predictions from the estimated model, but where we instead of the estimated model parameters use a sample from the posterior distribution of the estimated parameters. The posterior distribution of the parameters is taken to be multivariate normal with mean equal to the vector of parameter estimates and variance-covariance matrix equal to the estimated variance-covariance matrix of the parameters (the Hessian).

The simulation is taking place at the parameter level and the transformation to survival and cumulative risks is simply a function applied to every simulated set of parameters.

This simulation scheme is sometimes called the parametric bootstrap.

\subsection*{6.5 Joint models for several transitions}

We have implicitly been assuming that the transition rates are modeled separately. If some transitions are modeled jointly-for example assuming that the rates of OAD and Ins are proportional as functions of time since entry, using one model-we are in trouble, because we then need one sample from the posterior generating two predictions, one for each of the transitions modeled together. Moreover the model will have to be a model fitted to a stack. Lexis object (see p. 22), so a little more complicated to work with.

A simple way to program this would be to reset the seed to the same value before simulating with different values of nd, this is what is intended to be implemented, but is not yet. This is mainly the complication of having different prediction frames for different risks in this case.

However, this is not a very urgent need, since the situation where you want common parameters for
different rates out of a common state is quite rare. Try to come up with an example like: We assumed that for persons in state A the effect of covariate \(Z\) was the same for the rates of B and C.

\subsection*{6.6 Simulation based confidence intervals}
...has been implemented in the function ci. Crisk (confidence intervals for Cumulative risks) in the Epi package. The confidence intervals for the cause-specific rates are easily derived from the models using ci.pred, but confidence intervals for the cumulative risks and the sojourn times are from a practical point of view analytically intractable, hence a function to do this by simulation (parametric bootstrap).

We can now run the function using the model objects for the three competing events, using a common prediction data frame, nd for the rates:
```

> system.time(

+ res <- ci.Crisk(list(OAD = mO,
Ins = mI,
Dead = mD),
nd = data.frame(tfd = seq(0, 10, 0.01)),
nB = 500,
perm = 4:1))
NOTE: Times are assumed to be in the column tfd at equal distances of 0.01
user system elapsed
11.39 0.35 11.75
> str(res)
List of 4
\$ Crisk: num [1:1001, 1:4, 1:3] 1 0.992 0.984 0.977 0.97 ...
..- attr(*, "dimnames")=List of 3
.. ..\$ tfd : chr [1:1001] "0" "0.01" "0.02" "0.03" ...
.. ..\$ cause: chr [1:4] "Surv" "OAD" "Ins" "Dead"
.. ..\$ : chr [1:3] "50%" "2.5%" "97.5%"
\$ Srisk: num [1:1001, 1:3, 1:3] 0 0.000609 0.001211 0.001803 0.002389 ...
..- attr(*, "dimnames")=List of 3
.. ..\$ tfd : chr [1:1001] "0" "0.01" "0.02" "0.03" ...
.. ..\$ cause: chr [1:3] "Dead" "Dead+Ins" "Dead+Ins+OAD"
.. ..\$ : chr [1:3] "50%" "2.5%" "97.5%"
\$ Stime: num [1:1001, 1:4, 1:3] 0 0.00996 0.01983 0.02964 0.03937 ...
..- attr(*, "dimnames")=List of 3
.. ..\$ tfd : chr [1:1001] "0" "0.01" "0.02" "0.03" ...
.. ..\$ cause: chr [1:4] "Surv" "OAD" "Ins" "Dead"
.. ..\$ : chr [1:3] "50%" "2.5%" "97.5%"
\$ time : num [1:1001] 0 0.01 0.02 0.03 0.04 0.05 0.06 0.07 0.08 0.09 ...
- attr(*, "int")= num 0.01

```

CODE EXPLAINED: ci.Crisk requires as input a list of fitted models for the cause-specific rates (first argument), and a data frame of prediction points which will be used for all models in the list. nB gives the number of simulated replicates of the rates.

The result is a list with 4 elements, three 3 -way arrays and a vector of times associate with each row of the matrices.

One of slots in the returned object will refer to sums of probabilities of causes (stacked probabilities), the perm argument governs in what order the sum is formed. perm must have one more component than the list in the first argument; the first will refer to the survival. Thus in this case we will have the components Dead, Dead + Ins and Dead + Ins + OAD.

As we see, the returned object (res) is a list of length 4, the first three elements are 3 -way arrays, and the last a vector of times. The three first components of res are:
- Crisk Cumulative risks for each state
- Srisk Stacked cumulative risks across states
- Stime Sojourn time for each state, truncated at each point of the time dimension, hence the first slice in the time-dimension is uniformly 0 .

The first dimension of each is time starting with 0 , and named corresponding to endpoints of intervals of length int. The second dimension is states (or combinations thereof). The last dimension of the arrays is the type of statistic; \(50 \%\) the median of the samples, and the confidence intervals as defined by the the alpha argument to ci. Crisk.

The argument perm governs in which order the state probabilities are stacked in the Srisk element of the returned list, the default is the Surv (survival, probability of being in initial state) followed by states in the order given in the list of models in the first argument to ci. Crisk.

\subsection*{6.6.1 Keeping the bootstrap samples}

If we want the bootstrap samples for other calculations we can ask the function to return the bootstrap samples of the rates by using the argument sim.res='rates' (defaults to 'none'):
```

> \# prediction data frame
> prfr <- data.frame(tfd = seq(0.01, 10, 0.01) - 0.01/2)
> system.time(

+ rsm <- ci.Crisk(list(OAD = mO,
+ Ins = mI,
+     + Ins }=m|,\mp@code{m,
+ nd = prfr,
+ . nB = 2000,
+ sim.res = 'rates'))
NOTE: Times are assumed to be in the column tfd at equal distances of 0.01
user system elapsed
0.31 0.00 0.31
> str(rsm)
num [1:1000, 1:3, 1:2000] 0.603 0.563 0.525 0.49 0.458 ···.
- attr(*, "dimnames")=List of 3
..\$ time: chr [1:1000] "0.005" "0.015" "0.025" "0.035" ...
..\$ mod : chr [1:3] "OAD" "Ins" "Dead"
..\$ sim : chr [1:2000] "1" "2" "3" "4" ...
    - attr(*, "int")= num 0.01
- attr(*,'"time")= num [1:1000] 0.005 0.015 0.025 0.035 0.045 0.055 0.065 0.075 0.085 0.095 ...

```

These are 2000 (parametric) bootstrap samples of the rates evaluated at the 1000 midpoints of intervals of length \(1 / 100\) year between 0 and 10 years of diabetes duration.

Alternatively we can get the bootstrap samples of the cumulative risks by setting sim.res='crisk':
```

> system.time(

+ csm <- ci.Crisk(list(OAD = m0,
+ Ins = mI,
Dead = mD),
nd = prfr,
nB = 2000,
sim.res = 'crisk'))
NOTE: Times are assumed to be in the column tfd at equal distances of 0.01
user system elapsed
21.47 0.28 21.76
> str(csm)
num [1:1000, 1:4, 1:2000] 1 0.991 0.983 0.976 0.969 ...
    - attr(*, "dimnames")=List of 3
..\$ tfd : chr [1:1000] "0.005" "0.015" "0.025" "0.035" ...
..\$ cause: chr [1:4] "Surv" "OAD" "Ins" "Dead"
..\$ sim : chr [1:2000] "1" "2" "3" "4" ...
    - attr(*, "int")= num 0.01

```

This is the bootstrap samples of cumulative risks evaluated at the 1001 endpoints of the 1000 intervals, and also includes the survival probability in the first slot of the \(1^{\text {st }}\) dimension of rsm.

\subsection*{6.6.2 Rates}

In figure 6.2 we showed the rates with confidence intervals from the model. But in rsm we have 2000 (parametric) bootstrap samples of the occurrence rates, so we can derive the bootstrap medians and the bootstrap c.i. We use the function Epi: : : mnqt to compute the model estimate and the mean, median and quantiles of the simulated values.
```

> Epi:::mnqt
function (x, alpha = 0.05)
{
c(quantile(x, probs = c(0.5, alpha/2, 1 - alpha/2), na.rm = TRUE))
}
<bytecode: 0x000001fe50c0bef0>
<environment: namespace:Epi>
> Brates <- aperm(apply(rsm, 1:2, Epi:::mnqt), c(2,3,1))
> str(Brates)
num [1:1000, 1:3, 1:3] 0.596 0.553 0.513 0.476 0.442 ···.

- attr(*, "dimnames")=List of 3
..\$ time: chr [1:1000] "0.005" "0.015" "0.025" "0.035" ...
..\$ mod : chr [1:3] "OAD" "Ins" "Dead"
..\$ : chr [1:3] "50%" "2.5%" "97.5%"

```

Then we can plot the bootstrap estimates on top of the estimates based on the normal approximation to the distribution of the parameters. They are (not surprisingly) in close agreement since they are both based on an assumption of normality of the parameters on the log-rate scale:
```

matshade(nd\$tfd, cbind(ci.pred(mD, nd),
ci.pred(mI, nd),
ci.pred(m0, nd))*1000,
ylim = c(1,500), yaxt = "n",
ylab = "Rates per 1000 PY",
xlab = "Time since DM diagnosis (years)",
col = c("black","red","blue"), log = "y", lwd = 3, plot = TRUE)
matlines(as.numeric(dimnames(Brates) [[1]]),
cbind(Brates[,"Dead",],
Brates[,"Ins" ,],
Brates[,"OAD" ,])*1000,
col = c("white","black","black"), lty = 3, lwd=c(3,1,1))
axis(side = 2, at = ll <- outer(c(1,2,5), -2:3, function(x,y) x * 10^y),
labels = formatC(ll,digits = 4), las = 1)
axis(side = 2, at = ll <- outer(c(1.5,2:9),-2:3, function(x,y) x * 10^y),
labels = NA, tcl = -0.3)
text(0, 2.5*0.7^c(1,2,0),
c("Dead","Ins","OAD"),
col = c("black","red","blue"), adj = 0)

```

\subsection*{6.6.3 Cumulative risks}

In the Crisk component of res we have the cumulative risks as functions of of time, with bootstrap confidence intervals, so we can immediately plot the three cumulative risks:
```

matshade(res$time,
    cbind(res$Crisk[,"Dead",],
res$Crisk[,"OAD" ,],
            res$Crisk[,"Ins" ,]), plot = TRUE,
xlim = c(0,10), xaxs = "i", yaxs = "i", las = 1,
xlab = "Time since DM diagnosis (years)",
ylab = "Cumulative probability",
col = c("black","blue","red"))
text(8, 0.3 + c(1,2,0)/25,
c("Dead","OAD","Ins"),
col = c("black","blue","red"), adj = 0)

```


Figure 6.4: Estimated rates (log-scale) from the DM state. Estimates are from glm models with natural splines fitted to data split in 1 month intervals (1/12 year, that is). The white dotted curves are the bootstrap medians, black dotted curves are the bootstrap \(95 \%\) c.i.s. ../graph/crisk-rates-ci

\subsection*{6.6.4 Stacked cumulative risks}

With the single cumulative risks we have a confidence interval for each cumulative risk, but if we want to show the stacked probabilities we must deliver the confidence intervals for the relevant sum of cumulative risks (state probabilities). These are in the Srisk component of res. We can use these to show the stacked cumulative probabilities with confidence intervals:
```

> zz <- mat2pol(res$Crisk[,c("Dead","Ins", "OAD", "Surv"), "50%"],
    x = res$time,
xlim = c(0,10), xaxs = "i", yaxs = "i", las = 1,
xlab = "Time since DM diagnosis (years)",
ylab = "Probability",
col = c("black","red","blue","forestgreen") )
mm <- t(apply(zz, 1,mp))
text(9, mm["9",], c("Dead","Ins", "OAD", "DM"), col = "white" )
matshade(res$time,
    cbind(res$Srisk[,"Dead",],
res$Srisk[,"Dead+Ins",],
        res$Srisk[,"Dead+Ins+OAD",]),
col = 'transparent', col.shade = "white", alpha = 0.4)

```

CODE EXPLAINED: The stacked probabilities are plotted as stacked polygons using mat2pol (matrix to polygon), where the input required is the single components from the Crisk component. Then we can add the confidence intervals by using matshade with the components of the Srisk component to add white semi-transparent confidence intervals, while asking for a fully transparent curve.


Figure 6.5: Cumulative risks for the three types of events, with 95\% bootstrap-based confidence intervals as shades.
../graph/crisk-crates

\subsection*{6.6.5 Sojourn times}

From the Stime component of the res we can derive the estimated time spent in each state during the first, say, \(1,2,5\) or 10 years:
```

> ftable(round(res\$Stime[paste(c(1,3,5,10)),,], 2), row.vars = 2)
tfd 1 3 5 10
cause
Surv $\quad 0.870 .86 \quad 0.872 .28 \quad 2.25 \quad 2.31 \quad 3.39 \quad 3.33 \quad 3.44 \quad 5.29 \quad 5.17 \quad 5.40$

| OAD | 0.09 | 0.08 | 0.09 | 0.48 | 0.45 | 0.50 | 1.06 | 1.02 | 1.11 | 3.04 | 2.93 | 3.16 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |


| Ins | 0.02 | 0.02 | 0.02 | 0.08 | 0.07 | 0.09 | 0.15 | 0.13 | 0.17 | 0.35 | 0.30 | 0.40 |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |

$\begin{array}{llllllllllllllll}\text { Dead } & 0.02 & 0.02 & 0.03 & 0.16 & 0.15 & 0.18 & 0.40 & 0.37 & 0.43 & 1.33 & 1.24 & 1.41\end{array}$

```
code explained: The first dimension of the component Stime is the time, and the names of this are the endpoints of the intervals in the time scale (time since diagnosis). Thus if want the ones referring to specific times, we must supply these as a character vector, if we index by a numerical vector we would be referring to the sequence numbers. Hence the paste().

So we see that the expected life lived without pharmaceutical treatment during the first 10 years after DM diagnosis is 5.29 years with a \(95 \%\) CI of \((5.17 ; 5.4)\) and during the first 5 years \(3.39(3.33 ; 3.44)\) The quantity OAD is the years spent after OAD medication, regardless of subsequent insulin medication or death, and similarly for Ins and Dead.

\subsection*{6.7 Aalen-Johansen approach}

Another estimator of the cumulative risk is the Aalen-Johansen estimator, which is a so-called non-parametric estimator of the cumulative risks or more precisely the state probabilities.


Figure 6.6: Probabilities of being in the 4 different states as a function of time since diagnosis. Note that OAD means that OAD was initiated first, and similarly for Ins. We are not concerned about what occurs after these events. Dead means dead without being on any drug. The white shadings around the borders between colored areas represent the \(95 \%\) confidence intervals for the (sum of) probabilities.
../graph/crisk-stack-ci

The following is based on the dataset which has one record per person, where the outcome is defined by a factor; precisely what is present in the Lexis object Rdm, but we must first subset it to those at risk in the state DM:
```

> library(survival)
> Rdm <- factorize(subset(Mdm, lex.Cst == "DM"))

```

In order to use the multistate machinery from the survival package, the initial state must be the first of the states in the factor lex. Xst-this can be checked by levels:
```

> levels(Rdm)
[1] "DM" "Dead" "OAD" "Ins"
> aaj <- survfit(Surv(tfd, tfd + lex.dur, lex.Xst) ~ 1,

+ id = lex.id,
+ data = Rdm)
> names(aaj)

| $[1]$ | "n" | "time" | "n.risk" | "n.event" | "n.censor" |
| ---: | :--- | :--- | :--- | :--- | :--- | "pstate"

```

In the Epi package is a wrapper for survfit that uses the features of a Lexis object, so that you only have to write:
```

> aaj <- AaJ.Lexis(Rdm, ~ 1, "tfd")
NOTE: Timescale is tfd

```

There are 4 columns in each of slots in pstate, lower and upper, representing the states in the order of the factor lex. Xst, also available in the slot states. Here we only want the 3 last from each, namely the ones referring to the cumulative risks of Dead, OAD and Ins. We want estimate, lower, upper for each in that order:
```

> aaj$states
[1] "DM" "Dead" "Ins" "OAD"
>(wh <-c(2 + 0:2*4,3+0:2*4,4 + 0:2*4))
[1] 
> aajCr <- with(aaj, cbind(pstate, lower, upper)[,wh])
> colnames(aajCr) <- rep(c("Est", "lo", "up"), 3)
> colnames(aajCr)[c(1,4,7)] <- aaj$states[-1]
> round(head(aajCr), 4)

|  | Dead | lo | up | Ins | lo | up | OAD | lo | up |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| $[1]$, | 0 e +00 | NA | NA | 0.0003 | 0.0001 | 0.0013 | 0.0018 | 0.0010 | 0.0033 |

[2,] 0e+00 NA NA 0.0007 0.0003 0.0018 0.0030}00.0019 0.0048
[3,] 3e-04 1e-04 0.0013 0.0010 0.0005 0.0022 0.0059 0.0042 0.0081
[4,] 3e-04 1e-04 0.0013 0.0015 0.0008 0.0029 0.0074 0.0055 0.0099
[5,] 3e-04 1e-04 0.0013 0.0023 0.0014 0.0040 0.0082 0.0062 0.0108
[6,] 3e-04 1e-04 0.0013 0.0030 0.0019 0.0048 0.0090 0.0069 0.0118

```

CODE EXPLAINED: Each of the elements pstate, lower and upper have 4 columns corresponding the the elements in states, but we only want columns 2,3 and 4 from each. wh gives the columns in the object we get from cbinding the elements, in the desired order.

Finally we provide column names for better readability.


Figure 6.7: Cumulative risks for the three types of events based on parametric models, compared to the Nelson-Aalen estimator 95\% bootstrap-based confidence intervals shown as shades, Aalen-Johansen estimator in green; we see that the two approaches give very similar results.
```

matshade(res$time,
    cbind(res$Crisk[,"Dead",],
res$Crisk[,"OAD" ,],
            res$Crisk[,"Ins" ,]), plot = TRUE,
xlim = c(0,10), xaxs = "i", yaxs = "i", las = 1,
xlab = "Time since DM diagnosis (years)",
ylab = "Cumulative probability",
col = c("black","blue","red"))
matshade(aaj\$time, aajCr, col = "forestgreen", lty = 1, alpha = 0.1)
text(8, 0.3 + c(1,2,0)/25,
c("Dead","Ins", "OAD"),
col = c("black","blue","red"), adj = 0)

```

From figure 6.7 we see that the general pattern of cumulative risks is the same as from the parametric model, but with a tendency of estimating the cumulative risks of Ins and OAD a bit higher than the parametric model. This is a consequence of early events that are captured differently in the parametric model, even if we excluded the first two months of observation.

\subsection*{6.8 Interpretation}

In the example here we used only time since diagnosis as explanatory variable for the rates. But there is presumably a substantial effect of age and calendar time as well. So the results shown here are for a diabetes population with the age-distribution of the Danish, observed over a calendar time as the Danish. So not necessarily of major interest outside of Denmark.

But we could get results that were more generalizable if we included effects of, say, sex, age and calendar time in models for the rates too. This could be done with the parametric models as well as with Cox-models for the cause-specific rates.

That would provide estimates of the multiplicative effects of the covariates on the rates, but only the parametric approach would make it possible to show the cumulative risks and sojourn times for select values of the covariates-the only thing required would be a suitably constructed prediction data frame as nd argument to ci.Crisk.

\section*{Chapter 7}

\section*{Estimation from multistate models}

If we set up a multistate model for the follow-up of a cohort of persons, and estimate rate-models for all transitions, we will in principle have a complete probabilistic description of the model. This means that for any person (i.e. any set of initial covariate values) in any state at any time we can compute the person's probability of being in any state at any future time.

Because it is implicit that any covariate value should be known at any time in the future, this excludes models where transition rates depend on clinical measurements obtained during follow-up. In practice this means that only initial clinical measurements can be accommodated. This does not apply to future state occupancy, because the state occupancy is a part of the probability model.

Unlike the situation for simple survival and competing risks, there is no practically tractable expression for the state probabilities in a general multistate model for a given person at a given time in a given state. Let alone for sojourn times and other measures derived from the state probabilities.

State probabilities can instead be estimated as empirical fractions of persons in each state in a simulated data set based on the model. The drawback is that if we estimate the state probabilities from a simulated dataset there is no simple way of getting a handle on the uncertainty of the estimates as for example confidence intervals.

Generating simulated datasets of persons from a multistate model is often termed micro-simulation; this is because we are simulating the history of individuals and not of populations.

\subsection*{7.1 Simulated multistate objects}

When a multistate model has been set up (states and transitions) and models for all transition rates have been estimated, we have a complete statistical model for the multistate data.

This means that we can generate data in the form of (events, time) from the multistate model, that is state-histories for a given set of persons beginning follow-up in the defined states.

The requirements for this endeavor are:
- A data set with initial values of state, time scales and other covariates for a set of persons (a cohort).
- A statistical model for each of the possible transitions between states. This is basically a means to produce transition rates at any future time for all possible transitions out of each state, based on the status at entry to the state.
- Technical parameters: the position of time points for evaluation of transition rates and the length of simulation time before censoring.

The (life-)course of each of the initial persons through the states can then be simulated. The simulated data will be in the same form as the original multistate data; the simLexis function will produce a Lexis object-a simulated follow-up of the initial cohort.

From the simulated data we can then derive the desired quantities such as state probabilities, expected sojourn times in states etc.

\subsection*{7.1.1 Simulation machinery}

Inside the simLexis the simulation works as follows. Suppose we have a person in some current state (either the initial state or newly arrived from a previous one) and that we want to simulate a transition time and transition type out of the current state.

If there are a number of possible transitions out of the current state, with transition rates \(\lambda_{i}(t), i=1,2, \ldots\) we simulate a transition time from each, pretending that the specific rate is the rate of the only possible exit from the current state as follows.

The survival function in this case is \(S_{i}(t)=\mathrm{e}^{-\Lambda_{i}(t)}\), where \(\Lambda_{i}(t)=\int_{0}^{t} \lambda(s) \mathrm{d} s\). Some call the function \(S_{i}(t)\) the net survival, but it really does not refer to any probability of this world.

We then choose independent random uniform variates \(u_{i} \in[0,1]\), and solve numerically for \(t_{i}\) :
\[
S_{i}\left(t_{i}\right)=u \quad \Leftrightarrow \quad-\log \left(u_{i}\right)=\Lambda\left(t_{i}\right)
\]

In practice we compute \(\Lambda_{i}(t)\) at a number of times by numerical integration of the predicted rates, \(\hat{\lambda}_{i}\) and then find \(t_{i}\) by linear interpolation, by finding two successive \(t\)-values that have \(\Lambda\)-values on either side of \(-\log (u)\).

This way we get a transition time \(t_{i}\) for each of the states reachable from the current state. We then pick the smallest of these times and the corresponding state as the time and state for transition out of the current state. If there is only one possible transition out of the current state we only have one time and one state to choose between, so much simpler.

This is then repeated in the next state till the person reaches an absorbing state or exceeds the stipulated censoring time. The result is a dataset that resembles follow-up of the persons through the possible states.

\subsection*{7.1.1.1 Alternative simulation scheme}

A time and type of transition can also be simulated by first simulating the transition time, \(t\), using the sum of the intensities, \(\sum_{i} \lambda_{i}(t)\), and hence survival function \(S_{i}(t)=\mathrm{e}^{-\sum_{i} \Lambda_{i}(t)}\). Subsequently we then simulate the type of event at \(t\) as a random draw from the multinomial distribution with probabilities \(p_{i}=\lambda_{i}(t) / \sum_{j} \lambda_{j}(t)\).

It can be shown that this produces the same joint distribution of events and event times as the one used in simLexis described above.

\subsection*{7.2 Using simulated multistate data}

Once a complete model (states, transitions and models for the transitions) has been set up and a suitably large cohort of persons have been simulated, we can use the simulated data to derive measures of interest:
- State probabilities can be derived as the fraction of the initial cohort in each state at the time points of interest
- Sojourn times (in a given set of states between specified time points) can be derived by aggregating these among the simulated persons
- Probability of ever visiting a given state can be derived by simply enumerating the fraction ever visiting the state.

Trivial as they may sound, these operations on the simulated cohort are not simple, so special functions are needed to perform them.

But note that the results depend both on the multistate model and the chosen initial population; the derived statements will refer to a population of a particular composition (for example a population of identical individuals).

\subsection*{7.3 A worked example of using simLexis}

\subsection*{7.3.1 Lexis object for the steno2 data frame}

The steno2 dataset is a simulated dataset with the same structure and characteristics as the original data from the 20 year follow-up; it is described a bit more thorough in chapter 4, ??, p. 46.

First we convert dates to cal. yr to get a natural unit of time (years- 365.25 days, that is). Because of the way data were anonymized, the doEnd is not perfectly aligned to doDth, which we remedy on the fly by resetting doEnd if a doDth is known. Also, we make Conv (conventional treatment) the first level of the allocation factor; this will give estimates of intervention effects directly in the standard parametrization:
```

> data(steno2)
> steno2 <- cal.yr(steno2) %>%

+ mutate(doEnd = ifelse(!is.na(doDth),
doDth,
doEnd),
allo = relevel(allo, 2))
> str(steno2)
'data.frame': }160\mathrm{ obs. of }14\mathrm{ variables:
\$ id : num 1 2 3 4 5 6 7 8 9 10 ...
\$ allo : Factor w/ 2 levels "Conv","Int": 2 2 1 1 1 1 1 2 2 2 ...
\$ sex : Factor w/ 2 levels "F","M": 2 2 2 2 2 2 1 2 2 2 ...
\$ baseCVD : num 00000100000...
\$ deathCVD: num 0 0 0 0 1 0 0 0 1 0 ···..
\$ doBth : 'cal.yr' num 1932 1947 1943 1945 1936 ...
\$ doDM : 'cal.yr' num 1991 1982 1983 1977 1986 ...
\$ doBase : 'cal.yr' num 1993 1993 1993 1993 1993 ...
\$ doCVD1 : 'cal.yr' num 2014 2009 2002 1995 1994 ...
\$ doCVD2 : 'cal.yr' num NA 2009 NA 1997 1995 ...
\$ doCVD3 : 'cal.yr' num NA 2010 NA 2003 1998 ...
\$ doESRD : 'cal.yr' num NaN NaN NaN NaN 1998 ...
\$ doEnd : num 2015 2015 2002 2003 1998 ...
\$ doDth : 'cal.yr' num NA NA 2002 2003 1998 ...

```

We then define a Lexis data frame for the entire follow-up time for each person; from entry (doBase, date of baseline) to exit, doEnd. Note that we name the initial state Mic(roalbuminuria), because all patients in the Steno2 study had this status at entry-it was one of the inclusion criteria:
```

L2 <- Lexis(entry = list (per = doBase,
age $=$ doBase - doBth,
tfi $=0$ ),
exit $=$ list $($ per $=$ doEnd $)$,
exit.status $=$ factor $($ deathCVD + !is.na $($ doDth $)$,
labels = c("Mic", "D(oth)","D(CVD)")),
id $=i d$,
data $=$ steno2)
NOTE: entry.status has been set to "Mic" for all.

```

CODE EXPLAINED: We set up a Lexis object with 3 time scales: calendar time, per; current age age and time from inclusion, tfi.

The coding of exit.status is as follows: deathCVD is 1 if the person died from cardiovascular disease, otherwise 0 . Therefore, the expression deathCVD + !is.na(doDth) is \(0+0=0\) if no death occurs, \(0+1=1\) if a non-CVD death occur and \(1+1=2\) if a CVD death occur at the end of the person's follow-up. \({ }^{1}\)
```

> summary(L2)
Transitions:
To
From Mic D(oth) D(CVD)

```

In this set-up we can study the CVD and the non-CVD mortality rates, a classical competing risks problem, but we also want to see how the mortality rates depend on albuminuria status (lex.Cst) and treatment allocation (allo).

In order to allocate follow-up (person-time and events) to current albuminuria status we need to know when persons change status; this is recorded in the data frame st2alb. We will cut the follow-up at each
date of albuminuria measurement allowing the patients to change between states Normoalbuminuria, Microalbuminuria and Macroalbuminuria at each of these dates, possibly several times per person.

To this we end use the function rcutLexis (recurrent cuts); this function does not keep track of the state-history, but only records the current state. It requires a data frame of transitions with columns lex.id, cut (time of transition) and new. state (the state that the transition is to) -see ?rcutLexis.

We change the scale of the date of transition in st2alb to year by cal.yr (to align with the per variable in L2), and in order to comply with the requirements of rcutLexis we rename the id variable id to lex.id, the date variable doTr to cut and the state variable state to new. state:
```

> data(st2alb)
> cut2 <- rename(cal.yr(st2alb),

+ lex.id = id,
+ cut = doTr,
+ new.state = state)
> str(cut2)
'data.frame': }563\mathrm{ obs. of 3 variables:
\$ lex.id : num 1111112 2 2 2 2 ...
\$ cut : 'cal.yr' num 1993 1995 2000 2002 2007 ...
\$ new.state: Factor w/ 3 levels "Norm","Mic","Mac": 2 1 2 1 2 1 2 3 2 2 ...

```

An alternative way of achieving the same is to start with st2alb and then pipe it through cal. yr and rename. This can be done in different styles according to your preferences:
```

    ( st2alb
    %>% cal.yr
%>% rename(lex.id = id,
cut = doTr,
new.state = state)
) -> cut2

# 

# or:

# 

cut2 <- st2alb %>%
cal.yr %>%
rename(lex.id = id,
cut = doTr,
new.state = state)
str(cut2)
'data.frame': }563\mathrm{ obs. of 3 variables:
\$ lex.id : num 1 1 1 1 1 2 2 2 2 2 ...
\$ cut : 'cal.yr' num 1993 1995 2000 2002 2007 ...
\$ new.state: Factor w/ 3 levels "Norm","Mic","Mac": 2 1 2 1 2 1 2 3 2 2 ...

```

CODE EXPLAINED: The initial data frame, st2alb is first processed by cal. yr which turns all date variables to class cal. yr, that is measured in years (chunks of 365.25 days that is) since 1970-1-1. have Then variables are renamed (newname \(=\) oldname) as needed for rcutLexis, and finally assign the result to a data frame cut2. The layout of the code is the point here; the pipe operators ( \(\%>\%\) ) are placed at the beginning of the lines, so that they are aligned and clearly indicates where each step starts. Finally, after the data operations, the result (a data frame) is assigned to cut2. It is the initial opening bracket that makes it possible to place the pipes at the beginning of each line; it ensures that the expression is not complete till the last closing bracket. If you place the pipe operators at the end of the line you do not have that worry, but they are less easily noted when reading the code.

We see that 156 persons have recorded transitions, mostly 3,4 or 5 of them:
```

> with(cut2, addmargins(table(table(lex.id))))
1 2 3 4 5 Sum
4

```

We then cut at intermediate transition times (note that rcutLexis by default assumes that values in the cut column refer to the first timescale, and the first of the timescales in L2 is per, so we need not use the timescale argument:
```

> L3 <- rcutLexis(L2, cut2)
> summary(L3)
Transitions:
To

| From | Mic | Norm | Mac | D (oth) | D (CVD) | Records: | Events: | Risk time: |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | Persons:

```

We note that there are transitions both ways between all three transient states Norm, Mic and Mac, which is a bit illogical, since we have a natural ordering of states: Norm \(<\) Mic \(<\) Mac, so transitions from Norm to Mac (and vice versa) should therefore go through Mic. In order to remedy this anomaly we find all transitions Norm \(\rightarrow\) Mac and provide a transition Norm \(\rightarrow\) Mic in between. And of course similarly for transitions Mac \(\rightarrow\) Norm.

The relevant "jump" transitions are easily found (we keep all timescales to be able to use the print method for Lexis objects):
```

> (jump <-

+ subset(L3, (lex.Cst == "Norm" \& lex.Xst == "Mac") |
+ (lex.Xst == "Norm" \& lex.Cst == "Mac"))[,
+ c("lex.id",timeScales(L3),"lex.dur","lex.Cst","lex.Xst")])
lex.id per age tfi lex.dur lex.Cst lex.Xst
70 1999.49 64.68 6.42 2.67 Mac Norm
86 2001.76 68.88 8.34 12.82 Norm Mac
130 2000.91 61.42 7.12 1.88 Mac Norm
131 1997.76 65.99 3.85 4.24 Norm Mac
136 1997.21 47.41 3.26 0.47 Mac Norm
136 1997.69 47.88
171 1996.39 56.89 2.08

```

CODE EXPLAINED: The jumps we are interested in are records representing time in Norm ending in a jump to Mac, that is where lex.Cst is Norm and lex. Xst is Mac. Or vice versa.

What we need to do for each of these "jumps" is to provide an extra transition to Mic at a time during the stay in either Norm or Mac, i.e. somewhere between per and per + lex.dur in these records; we choose a random time in the middle \(80 \%\) between the dates. What we are doing here is really single imputation; we know there is a missing transition time to Mic and we just invent one and pretend it is a real data point.
```

> set.seed(1952)
> xcut <- select(transform(as.data.frame(jump),
cut = per + lex.dur * runif(per, 0.1, 0.9),
new.state = "Mic"),
c(lex.id, cut, new.state))
xcut
lex.id cut new.state
291 70 2001.789 Mic
353 86 2012.232 Mic
506 130 2001.488 Mic
511 131 2001.032 Mic
525 136 1997.610 Mic
526 136 2000.780 Mic
654 171 1997.057 Mic
676 175 2013.472 Mic

```

Then we make extra cuts (transitions to Mic) at these dates using rcutLexis with xcut on the L3 object:
```

> L4 <- rcutLexis(L3, xcut)
> summary(L4)

```
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline \multicolumn{10}{|l|}{Transitions: To} \\
\hline From & Mic & Norm & Mac & D (oth) & D (CVD) & Records: & Events: & Risk time: & Persons: \\
\hline Mic & 312 & 72 & 65 & 30 & 14 & 493 & 181 & 1437.39 & 160 \\
\hline Norm & 35 & 90 & 0 & 13 & 6 & 144 & 54 & 581.83 & 66 \\
\hline Mac & 22 & 0 & 41 & 12 & 18 & 93 & 52 & 401.70 & 60 \\
\hline Sum & 369 & 162 & 106 & 55 & 38 & 730 & 287 & 2420.91 & 160 \\
\hline
\end{tabular}

We see that there are now no transitions directly between Norm and Mac in L4, so we can make a plot of the transitions to consider:
```

> clr <- c("forestgreen", "orange", "red", "blue", gray(0.4))
> boxes(L4, boxpos = list(x = c(20,20, 20,80,80),
y =c(50,90,10,75,25)),
scale.R = 100,
show.BE = "nz",
pos.arr = c(2,2,1,1,2,1,1,2,1,1)*0.25,
font = 2,
col.bg = clr,
col.txt = c("white", "black")[c(1,2,1,1,1)],
col.border = c(clr[1:3], rep("black", 2)),
lwd = 2, cex = 1.1)

```


Figure 7.1: Transitions between albuminuria and death states in the Steno2 study. ../graph/simLex-boxL4

CODE EXPLAINED: The function boxes.Lexis has a zillion arguments to regulate colors and other appearance parameters of boxes and arrows.

The boxpos argument is a list with \(x\) and \(y\) coordinates (between 0 and 100) of the midpoints of the state-boxes. scale. R scales the rates printed along the arrows, show. BE shows the number of persons beginning, respectively ending their follow-up in each state. pos. arr sets the position of the arrow annotation (as a fraction, measured from the base of the arrow); it is a vector referring to the internal numbering of the arrows (see below), here the annotation between the transient states is at the middle, and the annotation of transitions to the absorbing states at 0.25 from the origin.
font \(=2\) sets the display font to 2 which is bold face.
The col. arguments set the background, text and border color of the boxes. Note the we initially put the colors in a vector for later use. Finally, cex sets the font size relative to the font size of the current driver-the default value for the argument cex is 1.4.

Here are two functions that show the sequence of the arrows used in the arguments to boxes that modifies arrow appearances:
```

arr.no <-

```
function(Lx) \# arrow numbers
\{
ttm <- t(tmat(Lx))
ano <- cumsum(!is.na(ttm)) * as.vector(!is.na(ttm))
\(\operatorname{ttm}[]<\),- ifelse (ano \(==0\), NA, ano)
\(t\) (ttm)
\}
arr.ft <-
function(Lx) \# arrows From To
    \{
tt <- arr.no(Lx)
\(f t<-\) data.frame (expand.grid(from \(=\) rownames \((t t)\),
    to \(=\) colnames \((t t))\),
arrow = as.vector (tt))
ft <- subset(ft, !is.na(arrow))
ft[order(ft\$arrow),]
    \}
arr.no(L4)
    Mic Norm Mac D(oth) D(CVD)
\begin{tabular}{lrrrrr} 
& Mic & Norm & Mac & D(oth) & D(CVD) \\
Mic & NA & 1 & 2 & 3 & 4 \\
Norm & 5 & NA & NA & 6 & 7 \\
Mac & 8 & NA & NA & 9 & 10 \\
D (oth) & NA & NA & NA & NA & NA \\
D (CVD) & NA & NA & NA & NA & NA
\end{tabular}
> arr.ft(L4)
\begin{tabular}{lrrr} 
& from & to & arrow \\
6 & Mic & Norm & 1 \\
11 & Mic & Mac & 2 \\
16 & Mic & D (oth) & 3 \\
21 & Mic & D (CVD) & 4 \\
2 & Norm & Mic & 5 \\
17 & Norm & D (oth) & 6 \\
22 & Norm & D (CVD) & 7 \\
3 & Mac & Mic & 8 \\
18 & Mac & D(oth) & 9 \\
23 & Mac & D (CVD) & 10
\end{tabular}

Within this multistate model we fit models for the mortality rates to see how they depend on the current albuminuria state and treatment allocation, as well as models for the transition rates between the different albuminuria states and assess how these depend on various other covariates.

First we look at how the mortality rates depends on albuminuria status. We will model the mortality rates with parametric functions, so we must split the dataset along some time scale; we will use 3 month intervals (they should be sufficiently small to accommodate an assumption of constant rates in each interval):
\(>S 4<-\) splitMulti \((L 4, t f i=\operatorname{seq}(0,25,1 / 4))\)
> summary(S4)
Transitions:
\begin{tabular}{lrrrrrrrrr} 
To \\
From & Mic & Norm & Mac & D (oth) & D(CVD) & Records: & Events: Risk time: & Persons: \\
Mic & 5986 & 72 & 65 & 30 & 14 & 6167 & 181 & 1437.39 & 160 \\
Norm & 35 & 2418 & 0 & 13 & 6 & 2472 & 54 & 581.83 & 66 \\
Mac & 22 & 0 & 1644 & 12 & 18 & 1696 & 52 & 401.70 & 60 \\
Sum & 6043 & 2490 & 1709 & 55 & 38 & 10335 & 287 & 2420.91 & 160
\end{tabular}
> summary(Relevel(S4, 2:1))
Transitions:
\begin{tabular}{lrrrrrrrrr}
\multicolumn{9}{c}{ To } & \\
From & Norm & Mic & Mac & D (oth) & D(CVD) & Records: & Events: Risk time: & Persons: \\
Norm & 2418 & 35 & 0 & 13 & 6 & 2472 & 54 & 581.83 & 66 \\
Mic & 72 & 5986 & 65 & 30 & 14 & 6167 & 181 & 1437.39 & 160 \\
Mac & 0 & 22 & 1644 & 12 & 18 & 1696 & 52 & 401.70 & 60 \\
Sum & 2490 & 6043 & 1709 & 55 & 38 & 10335 & 287 & 2420.91 & 160
\end{tabular}

We see that the number of events (transitions) and person-years are the same, but the number of records in S4 is substantially larger than in L4.

We fit separate models for the two causes of death, using the wrapper glm.Lexis, allowing different allocation effects for different levels of albuminuria:
```

> mo <- glm.Lexis(S4, ~ Ns(tfi, knots = seq( 0, 20, 5)) +

+ Ns(age, knots = seq(50, 80, 10)) +
lex.Cst / allo,
to = "D(oth)")
stats::glm Poisson analysis of Lexis object S4 with log link:
Rates for transitions:
Mic->D(oth)
Norm->D(oth)
Mac->D(oth)
> round(ci.exp(mo), 3)
(Intercept)
Ns(tfi, knots = seq(0, 20, 5))1
Ns(tfi, knots = seq(0, 20, 5))2
exp(Est.) 2.5% 97.5%
0.000 0.000 9.000000e-03
Ns(tfi, knots = seq(0, 20, 5))3 50328.536 6.222 4.070989e+08
Ns(tfi, knots = seq(0, 20, 5))4 2.460 0.412 1.468400e+01
Ns(age, knots = seq(50, 80, 10))1 2.680 0.887 8.100000e+00
Ns(age, knots = seq(50, 80, 10))2 1.547 0.148 1.615100e+01
Ns(age, knots = seq(50, 80, 10))3 11.777 4.223 3.284100e+01
lex.CstNorm 0.965 0.396 2.353000e+00
lex.CstMac 0.569 0.208 1.556000e+00
lex.CstMic:alloInt 0.519 0.249 1.080000e+00
lex.CstNorm:alloInt 0.558 0.183 1.695000e+00
lex.CstMac:alloInt 1.538 0.484 4.890000e+00
> mC <- glm.Lexis(S4, ~ Ns(tfi, knots = seq( 0, 20, 5)) +
+ Ns(age, knots = seq(50, 80, 10)) +
+ lex.Cst / allo,
+ to = "D(CVD)")

```
stats::glm Poisson analysis of Lexis object \(S 4\) with log link:
Rates for transitions:
Mic->D (CVD)
Norm->D (CVD)
Mac->D (CVD)
> round (ci.exp (mC), 3)
\begin{tabular}{|c|c|c|c|c|}
\hline & & \(\exp\) (Est.) & 2.5\% & 97.5\% \\
\hline (Intercept) & & 0.001 & 0.000 & 0.015 \\
\hline Ns (tfi, knots \(=\) seq (0, & 20, 5))1 & 1.042 & 0.150 & 7.244 \\
\hline Ns (tfi, knots \(=\) seq(0, & 20, 5))2 & 2.230 & 0.350 & 14.206 \\
\hline Ns (tfi, knots \(=\) seq (0, & 20, 5))3 & 1.242 & 0.016 & 96.367 \\
\hline
\end{tabular}
\begin{tabular}{lrrrr} 
Ns (tfi, knots = seq(0, 20, 5)) 4 & 0.125 & 0.015 & 1.022 \\
Ns (age, knots = seq(50, 80, 10))1 & 7.340 & 1.120 & 48.117 \\
Ns (age, knots = seq(50, 80, 10))2 & 702.868 & 1.940 & 254610.105 \\
Ns (age, knots = seq(50, 80, 10))3 & 21.053 & 4.747 & 93.374 \\
lex.CstNorm & & 1.026 & 0.270 & 3.902 \\
lex.CstMac & 4.438 & 1.842 & 10.690 \\
lex.CstMic:alloInt & 0.594 & 0.204 & 1.727 \\
lex.CstNorm:alloInt & 0.717 & 0.142 & 3.613 \\
lex.CstMac:alloInt & 0.206 & 0.058 & 0.733
\end{tabular}

For a complete description of all transitions in the model we also need models for the transitions between albuminuria states; we will use different models for deterioration and improvement of albuminuria status:
```

> det <- glm.Lexis(S4, ~ Ns(tfi, knots = seq( 0, 20, 5)) +
Ns(age, knots = seq(50, 80, 10)) +
lex.Cst / allo,
from = c("Norm","Mic"),
to = c("Mic","Mac"))
stats::glm Poisson analysis of Lexis object S4 with log link:
Rates for transitions:
Norm->Mic
Mic->Mac
> round(ci.exp(det), 3)

```
\begin{tabular}{|c|c|c|c|}
\hline & \(\exp\) (Est.) & 2.5\% & 97.5\% \\
\hline (Intercept) & 0.055 & 0.028 & 0.109 \\
\hline Ns(tfi, knots \(=\) seq(0, 20, 5))1 & 0.635 & 0.243 & 1.659 \\
\hline Ns(tfi, knots \(=\operatorname{seq}(0,20,5)) 2\) & 0.270 & 0.077 & 0.947 \\
\hline Ns(tfi, knots \(=\operatorname{seq}(0,20,5)) 3\) & 0.278 & 0.045 & 1.739 \\
\hline Ns(tfi, knots \(=\operatorname{seq}(0,20,5)) 4\) & 0.220 & 0.064 & 0.757 \\
\hline Ns(age, knots \(=\operatorname{seq}(50,80,10)) 1\) & 1.988 & 0.841 & 4.702 \\
\hline Ns (age, knots \(=\operatorname{seq}(50,80,10)) 2\) & 3.548 & 0.939 & 13.405 \\
\hline Ns(age, knots \(=\operatorname{seq}(50,80,10)) 3\) & 2.692 & 0.773 & 9.382 \\
\hline lex.CstNorm & 0.634 & 0.296 & 1.358 \\
\hline lex.CstMic:alloInt & 0.510 & 0.305 & 0.850 \\
\hline lex.CstNorm:alloInt & 2.044 & 0.925 & 4.517 \\
\hline
\end{tabular}
> imp <- glm.Lexis(S4, ~ Ns(tfi, knots = seq( 0, 20, 5)) +
\(+\quad\) Ns (age, knots \(=\operatorname{seq}(50,80,10))+\)
+ lex.Cst / allo,
\(+\quad\) from \(=c(" M a c ", " M i c ")\),
\(+\quad\) to \(=c(\) "Mic","Norm"))
stats::glm Poisson analysis of Lexis object \(S 4\) with log link:
Rates for transitions:
Mac->Mic
Mic->Norm
> round(ci.exp(imp), 3)
(Intercept)
Ns (tfi, knots \(=\operatorname{seq}(0,20,5)) 1\)
Ns (tfi, knots \(=\) seq \((0,20,5)) 20.0670 .0110 .420\)
Ns(tfi, knots \(=\) seq(0, 20, 5))3 0.0460 .0080 .273
Ns (tfi, knots \(=\) seq(0, 20, 5)) 400.1760 .0340 .913
Ns (age, knots \(=\operatorname{seq}(50,80,10)) 1 \quad 0.8410 .2892 .453\)
Ns (age, knots \(=\) seq \((50,80,10)) 20.3400 .0681 .712\)
Ns (age, knots \(=\) seq(50, 80, 10)) \(3 \quad 0.5710 .0694 .715\)
lex.CstMac
    2.6891 .3835 .230
lex.CstMic:alloInt \(\quad 1.9021 .1703 .093\)
lex.CstMac:alloInt 0.7480 .3041 .841

For the two deterioration rates (Norm \(\rightarrow\) Mic and Mic \(\rightarrow\) Mac) the effects of the intervention is in different directions. This is also the case for the improvement rates (Mic \(\rightarrow\) Norm and Mac \(\rightarrow\) Mic):
```

> Wald(det, subset="allo")

```
```

    Chisq d.f. P
    9.76430733 2.00000000 0.00758067
> Wald(imp, subset="allo")
Chisq d.f. P
7.12765757 2.00000000 0.02833015
> Wald(det, subset="allo", ctr.mat = rbind(c(1,-1)))
Chisq d.f. P
8.299873983 1.000000000 0.003964783
> Wald(imp, subset="allo", ctr.mat = rbind(c(1,-1)))
Chisq d.f. P
3.1991556 1.0000000 0.0736763

```

We see that the Wald-tests based on the parameters are all (almost) significant, so not only are there significant allocation effects, but they are also different within each direction.

However, we are mostly interested in how the rates impact the probabilities of being in different states as a function of time, not in the individual rates between albuminuria states.

\subsection*{7.3.2 Simulation of state probabilities}

We have fitted statistical models for all transitions, a model for each of the two sets of cause specific mortality rates, and models for transitions in either direction between albuminuria states. All models include smooth effects of time since study entry (tfi) and current age (age), as well as state-specific effects of the treatment allocation.

We can therefore assess the probability of being in each of the states at a given time after entry to the study, separately for the the two intervention groups. These probabilities depend on the age at entry to the study because current age (age) and time since entry, (tfi) are both in the model. They also depend on the treatment allocation.

The state probabilities can be approached in (at least) two different ways, defined by how the initial population from which we simulate is defined:
- Use a population with the same covariate distribution as the entire study population, and compute the state probabilities for this. This would be an approximation to the results from the Aalen-Johansen estimator of state probabilities.
- Evaluate the probabilities for persons with specific covariate values at entry. This is an approach we could call the conditional (on the specific initial values).

In either case, the state probabilities are not trivial to compute, from a practical point of view they can only be computed by simulation. \({ }^{2}\)

For simulation of state probabilities we need a data frame of persons, each record indicating a person's initial status. simLexis will then simulate individual trajectories through states (what transitions take place when) and produce a simulated cohort of persons in the form of a Lexis object. The initial data frame should be a Lexis object, but the values of lex. Xst and lex.dur need not be given, since these will be simulated. The initial object must have class Lexis, in order to identify the variables that are time scales, and which of these that are defined as time since entry into a given state. The reason that it should be a Lexis object is that the time scale variables must be updated during the simulation process.

Of course the object should contain all variables in any of the models fro the transition rates. Hence, we first construct a cohort with the same covariates as the entire study for each of the allocation groups. The intention is to simulate what would have happened if the entire Steno2 population were assigned to either Int or Conv:
```

> ini <- L2[,c("per", "age", "tfi")]
> ini <- rbind(transform(ini, allo = "Int"),

+ transform(ini, allo = "Conv")) %>%
+ mutate(lex.Cst = factor("Mic", levels = levels(L4)),
+ allo = factor(allo))
> str(ini)

```

\footnotetext{
\({ }^{2}\) A detailed description of the use of simLexis is available in the vignette in the Epi package, also available in a more detailed form as http://bendixcarstensen.com/Epi/simLexis.pdf
}
```

Classes 'Lexis' and 'data.frame': 320 obs. of 5 variables:
\$ per : 'cal.yr' num 1993 1993 1993 1993 1993 ...
\$ age : 'cal.yr' num 61.1 46.6 49.9 48.5 57.3 ...
\$tfi : num 0 0 0 0 0 0 0 0 0 0 ...
\$ allo : Factor w/ 2 levels "Conv","Int": 2 2 2 2 2 2 2 2 2 2 ...
\$ lex.Cst: Factor w/ 5 levels "Mic","Norm","Mac",..: 1 1 1 1 1 1 1 1 1 1 ...
- attr(*, "time.scales")= chr [1:3] "per" "age" "tfi"
- attr(*, "time.since")= chr [1:3] "" "" ""
- attr(*, "breaks")=List of 3
..\$ per: NULL
..\$ age: NULL
..\$ tfi: NULL

```

CODE EXPLAINED: The ini data frame should contain the variables that are in any of the models for the transitions; in this case tfi, age and lex. Cst. But also all of the timescale variables from the Lexis object used for fitting the models. Finally, it should also contain lex. Cst even if this variable were not in any of the models.

We take the ini as the time scale columns of L2, the (Lexis) data frame with one record per person. This is then duplicated with each half assigned one of the two levels of allo, Int, respectively Conv, and finally lex. Cst is set to Mic, but defined as a factor with all possible states as levels.

These will be the initial values in the cohort we follow through states. allo will remain the same during follow-up, but lex. Cst, age and tfi will change during follow-up-the two latter will change deterministically; they are time scales.

Note that we could not have used mutate here; mutate does not have Lexis method, here we are using transform. Lexis and rbind.Lexis, because ini is a Lexis object.

We also need a specification of what transitions the rate models refer to, since the simulated transitions will be using predictions from these models. This is specified in a list of lists:
```

Tr <- list(Norm = list(Mic = det,
"D(oth)" = mo,
"D(CVD)" = mC),
Mic = list(Mac = det,
Norm = imp,
"D(oth)" = mo,
"D(CVD)" = mC),
Mac = list(Mic = imp,
"D(oth)" = mo,
"D(CVD)" = mC))

```

For example, the object Tr\$Norm\$Mic is a model for the transition rate Norm \(\rightarrow\) Mic; we see that there are 10 entries in the specification of Tr , corresponding to each of the 10 transitions in the diagram in figure ??. Note that some of the entries in Tr point to the same model; all the models fitted were actually joint models for more than one transition. The models all include an effect of lex. Cst, the indicator of the current state; the state from which the transition goes.

\subsection*{7.3.3 Using the Steno2 population}

First we simulate transitions from a large cohort that looks like the study population, say 20 copies of each person in the original data set (well, 40 actually, ini contains two copies of each person; one assumed allocated to Conventional treatment and one to Intensive treatment)—see ?simLexis. So we will simulate histories of \(160 \times 2 \times 50=16000\) persons:
```

set.seed(181783)
system.time(
Sorg <- simLexis(Tr = Tr, \# models for each transition
init = ini, \# cohort of starters
N = 50, \# how many copies of each person in ini
t.range = 21, \# when do we censor follow-up
n.int = 85) \# how many intervals for evaluating rates
)

```
```

    user system elapsed
    59.98 7.11 67.17
    > summary(Sorg)
Transitions:
To

| From | Mic | Norm | Mac | D(oth) | D(CVD) | Records: | Events: | Risk time: |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | Persons:

> save(Sorg, file = "Sorg.rda")
> load(file = "Sorg.rda", v = TRUE)
Loading objects:
Sorg

```

There is no guaranteed order of the states in the resulting object Sorg, so we explicitly reorder the states:
```

> levels(Sorg)
[1] "Mic" "Norm" "Mac" "D(oth)" "D(CVD)"
> Sorg <- Relevel(Sorg, c("Norm", "Mic", "Mac", "D(CVD)", "D(oth)"))
> summary(Sorg)
Transitions:
To
From Norm Mic Mac D(CVD) D(oth) Records: Events: Risk time: Persons:

| Norm | 1878 | 3442 | 0 | 601 | 1301 | 7222 | 5344 | 60628.02 |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Mic | 7222 | 3267 | 6651 | 1296 | 2944 | 21380 | 18113 | 141932.98 |
| Mac | 0 | 1938 | 1544 | 1933 | 1236 | 6651 | 5107 | 40701.84 |
| Sum | 9100 | 8647 | 8195 | 3830 | 5481 | 35253 | 28564 | 243262.85 |

```

For illustration we show the simulated records for 5 select persons:
```

> subset(Sorg, lex.id %in% 28:32)

| lex.id | per | age | tfi | lex.dur | lex.Cst | lex.Xst | allo | cens |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 28 | 1993.33 | 61.05 | 0.00 | 12.29 | Mic | D (oth) | Int | 2014.326 |
| 29 | 1993.33 | 61.05 | 0.00 | 6.38 | Mic | Mac | Int | 2014.326 |
| 29 | 1999.70 | 67.43 | 6.38 | 12.26 | Mac | D (oth) | Int | 2014.326 |
| 30 | 1993.33 | 61.05 | 0.00 | 18.74 | Mic | D (oth) | Int | 2014.326 |
| 31 | 1993.33 | 61.05 | 0.00 | 6.48 | Mic | Norm | Int | 2014.326 |
| 31 | 1999.81 | 67.53 | 6.48 | 5.20 | Norm | Mic | Int | 2014.326 |
| 31 | 2005.01 | 72.73 | 11.68 | 9.32 | Mic | Mic | Int | 2014.326 |
| 32 | 1993.33 | 61.05 | 0.00 | 0.86 | Mic | Mac | Int | 2014.326 |
| 32 | 1994.19 | 61.91 | 0.86 | 4.37 | Mac | Mic | Int | 2014.326 |
| 32 | 1998.56 | 66.28 | 5.23 | 15.77 | Mic | Mic | Int | 2014.326 |

```

We see that there is a considerable difference between persons in the number of records simulated:
```

> addmargins(table(table(Sorg\$lex.id)))

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 4252 | 6845 | 2909 | 1533 | 334 | 111 | 12 | 4 |
| 16000 |  |  |  |  |  |  |  |

```

We count how many of the original 3200 persons are in each of the states at each of a prespecified set of times; this is done by the function nState:
```

> system.time(

+ Nst <- nState(Sorg,
+ at = \operatorname{seq}(0,20,0.1),
+ from = 0,
user system elapsed
16.42 0.42 16.84

```
```

> str(Nst)
'table' int [1:201, 1:5] 0 209 403 611 799 992 1175 1344 1480 1630 ...
- attr(*, "dimnames")=List of 2
..\$ when : chr [1:201] "0" "0.1" "0.2" "0.3" ..
..\$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...
> head(Nst)
State

| when | Norm | Mic | Mac | D (CVD) | D (oth) |
| :---: | ---: | ---: | ---: | ---: | ---: |
| 0 | 0 | 16000 | 0 | 0 | 0 |
| 0.1 | 209 | 15710 | 75 | 6 | 0 |
| 0.2 | 403 | 15433 | 154 | 10 | 0 |
| 0.3 | 611 | 15148 | 227 | 14 | 0 |
| 0.4 | 799 | 14882 | 299 | 19 | 1 |
| 0.5 | 992 | 14606 | 378 | 23 | 1 |

```

This is however not necessarily a relevant summary; we would be interested in seeing how things look for each of the allocation groups, Int and Conv.
```

> Nconv<- nState(subset(Sorg, allo == "Conv"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi")
head (Nconv)
State
when Norm Mic Mac D(CVD) D(oth)
0 0 8000 0 0 0
0.1

```



```

    0.5
    > Nint <- nState(subset(Sorg, allo == "Int"),

+ at = \operatorname{seq}(0,20, 0.1),
+ from = 0,
+ time.scale = "tfi")
> head(Nint)

| State |  |  |  |  |  |
| :---: | ---: | ---: | ---: | ---: | ---: |
| When | Norm | Mic | Mac | D(CVD) | D(oth) |
| 0 | 0 | 8000 | 0 | 0 | 0 |
| 0.1 | 130 | 7841 | 27 | 2 | 0 |
| 0.2 | 257 | 7685 | 55 | 3 | 0 |
| 0.3 | 402 | 7510 | 83 | 5 | 0 |
| 0.4 | 519 | 7364 | 111 | 6 | 0 |
| 0.5 | 646 | 7206 | 141 | 7 | 0 |

```

If we divide each of these by 3200 , we get the probabilities of being in each if the states at the different times since entry.

If we want the cumulated state probabilities over states we can derive these by pState, that yields a matrix with the cumulative state probabilities. This requires an ordering of that states; this is why we ordered the states in the desired order:
```

> Pconv <- pState(Nconv)
> Pint <- pState(Nint )
> str(Pint)
'pState' num [1:201, 1:5] 0 0.0163 0.0321 0.0503 0.0649 ...
- attr(*, "dimnames")=List of 2
..\$ when : chr [1:201] "0" "0.1" "0.2" "0.3" ..
..\$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...
> head(Pint)

```
\begin{tabular}{crrrrr}
\multicolumn{3}{c}{ State } & & & \\
When & Norm & Mic & Mac & D(CVD) & D(oth) \\
0 & 0.000000 & 1.000000 & 1.000000 & 1 & 1 \\
0.1 & 0.016250 & 0.996375 & 0.999750 & 1 & 1 \\
0.2 & 0.032125 & 0.992750 & 0.999625 & 1 & 1 \\
0.3 & 0.050250 & 0.989000 & 0.999375 & 1 & 1 \\
0.4 & 0.064875 & 0.985375 & 0.999250 & 1 & 1 \\
0.5 & 0.080750 & 0.981500 & 0.999125 & 1 & 1
\end{tabular}

CODE EXPLAINED: For each time point (row of nState result) pState generates the cumulative sum of the state probabilities; this is just a convenience for plotting the stacked state probabilities.

There is a standard plotting method for a pState object, it will plot the stacked state probabilities stacked in the order given by the perm argument (not used here because the states are already in the order we want, so the default of \(1: \mathrm{n}\) is used):
```

par(mfrow =c(1,2), mar=c(3,3,2,2))

# we previously assigned this vector of colors - this is just a reminder

# clr <- c("forestgreen", "orange", "red", "blue", gray(0.4))

# 

plot(Pconv, col = clr, xlim = c(0, 19.5))

# the survival curve

lines(as.numeric(rownames(Pconv)), Pconv[,"Mac"], lwd = 2, col = "white")

# state names

text(rownames (Pconv) [150],
Pconv[150,] - diff(c(0, Pconv[150,]))/2,
colnames(Pconv),
col = "white")

# 

plot(Pint, col = clr, xlim = c(19.5, 0))

# the survival curve

lines(as.numeric(rownames(Pint)), Pint[,"Mac"], lwd = 2, col = "white")

# state names

text(rownames(Pint) [150],
Pint[150,] - diff(c(0, Pint[150,]))/2,
colnames(Pint),
col = "white")

# 

mtext(c("Conv","Int"), side = 3, at = c(1,3)/4, outer = TRUE, line = - 2)

```

CODE EXPLAINED: Remember that we put the colors in a vector clr so that they can be used a several different places, it is then easier to change colors should we want so. The plot is really plot.pState since Pconv is of class pState; it plots the state probabilities cumulated over states (which is what is in Pconv). The column "Mac" is the sum of the state probabilities for Norm, Mic and Mac, that is the probability of being alive. The rownames of Pconv is the time, and for the \(150^{\text {th }}\) time point we have the cumulated state probabilities in Pconv[150,]; these are used to compute the midpoints of each of the areas at this time.

The same is repeated for the state probabilities for the intervention group, Pint (with reversed \(x\)-axis), and finally mtext annotates the two panels,

The plot 7.2 is however of limited interest, the probabilities here are really "the probability that a randomly chosen person from the Steno 2 study...". So we are referring to a universe that is not generalizable, the reference is to a particular distribution of ages at entry into the study. The plot is only partially relevant for showing the intervention effect, the absolute sizes of the state probabilities are irrelevant, since they refer to the particular distribution of age (and other possible determinants) in the Steno2 patient population.

Even if we take the modeling background deeply serious and accept that occurrence rates depend only on current age (age), time since entry (tfi) and treatment allocation (allo), the assumption of age-distribution as in the Steno 2 study is quite absurd; who wants to refer to this?

Often this is disguised in deceptive terms such as "population averaged".


Figure 7.2: State probabilities for the two intervention groups, for populations of the same structure w.r.t. age as the original total Steno2 population. Clearly, the main difference is that the intervention group has a much smaller CVD-mortality compared to the conventional group.
../graph/simLex-pStates

\subsection*{7.3.4 Age-stratified initial data}

Therefore, it would be more relevant to show the results for a homogeneous population of persons that enter at a few select ages.

This would just require a different init data frame:
```

> ini <- S4[1:6,c(timeScales(S4), "lex.dur", "lex.Cst", "allo")]
> ini[,"per"] <- 1993 \# not used but it is a time scale in S4
> ini[,"ain"] <- \# entry age, not changed in the simulation

+ ini[,"age"] <- rep(seq(45,65,10), 2) \# current age
> ini[,"tfi"] <- 0
> ini[,"lex.Cst"] <- factor("Mic",
levels = c("Norm","Mic","Mac","D(CVD)","D(oth)"))
> ini[,"allo"] <- factor(rep(c("Int","Conv"), each = 3))
> ini
per age tfi lex.dur lex.Cst allo ain
1993 45 0 0.12 Mic Int 45
1993 55 0 0.13 Mic Int 55
1993 65 0 0.25 Mic Int 65
1993 45 0 0.25 Mic Conv 45
1993 55 0 0.25 Mic Conv 55
1993 65 0 0.25 Mic Conv 65

```

CODE EXPLAINED: We make a copy of the first 6 rows of \(S 4\), to make sure that the relevant Lexis attributes necessary are present in the ini object. The rest is just replacing the values with the desired ones for the simulation.

We must enter the variable lex.Cst as a factor with the same levels as states in the Lexis object S 4 , in the order we want the states when reporting results.

The predictor allo must also be entered as a factor, otherwise it is not possible to compute predictions from the models where allo were included as a factor.

For each of these combinations of age (at entry) and treatment allocation we will simulate 5000 persons from each age / sex combination (note that we are using the same transition rates as before, from the models in Tr ):
```

> set.seed(181783)
> system.time(

+ Sdef <- simLexis(Tr = Tr, \# models for each transition
+ init = ini, \# cohort of starters
+ N = 5000, \# how many copies of each person in ini
+ t.range = 21, \# how long should we simulate before censoring
n.int = 85)) \# no points to evaluate rates
user system elapsed
113.42 13.03 126.58
> save(Sdef, file = "Sdef.rda")

```

Once simulated, we can take a look at the simulated cohort:
```

> summary(Sdef)
Transitions:
To

| From | Norm | Mic | Mac | D(CVD) | D (oth) | Records: | Events: | Risk time: | Persons: |
| :---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| Norm | 3639 | 6593 | 0 | 1065 | 2545 | 13842 | 10203 | 115595.65 | 12658 |
| Mic | 13842 | 6129 | 12134 | 2527 | 5600 | 40232 | 34103 | 262698.91 | 30000 |
| Mac | 0 | 3639 | 2706 | 3343 | 2446 | 12134 | 9428 | 71434.07 | 11110 |
| Sum | 17481 | 16361 | 14840 | 6935 | 10591 | 66208 | 53734 | 449728.62 | 30000 |

> subset(Sdef, lex.id < 5)
lex.id per age tfi lex.dur lex.Cst lex.Xst allo ain cens
1 1993.00 45.00 0.00 7.23 Mic Norm Int 45 2014
1 2000.23 52.23 7.23 13.77 Norm Norm Int 45 2014
2 1993.00 45.00 0.00 2.67 Mic Norm Int 45 2014
2 1995.67 47.67 2.67 18.33 Norm Norm Int 45 2014
3 1993.00 45.00 0.00 7.92 Mic D(oth) Int 45 2014
4 1993.00 45.00 0.00 1.66 Mic Norm Int 45 2014
41994.66 46.66 1.66 19.34 Norm Norm Int 45 2014

```

We now repeat the graph above by generating a pState for each of the 6 combinations of age at enrollment (ain), and allocation; we start with the 45 year old allocated to Int:
```

> P45i <- nState(subset(Sdef, ain == 45 \& allo == "Int"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi")
> head(P45i)
State
when Norm Mic Mac D(CVD) D(oth)
0 0 5000 0 0 0
0.1

```


```

    lllllll
    > head(pState(P45i))

|  | ate |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| when | Norm | Mic |  | D (CVD) | D (oth) |
| 0 | 0.0000 | 1.0000 | 1 | 1 | 1 |
| 0.1 | 0.0248 | 0.9972 | 1 | 1 | 1 |
| 0.2 | 0.0522 | 0.9956 | 1 | 1 | 1 |
| 0.3 | 0.0738 | 0.9932 | 1 | 1 | 1 |
| 0.4 | 0.0958 | 0.9906 | 1 | 1 | 1 |
| 0.5 | 0.1170 | 0.9888 | 1 | 1 |  |

```

This should then be repeated for all three ages at enrollment and the two allocations, but now we only store the (cumulated) state probabilities:
```

P45c <- pState(nState(subset(Sdef, ain == 45 \& allo == "Conv"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi"))
P45i <- pState(nState(subset(Sdef, ain == 45 \& allo == "Int"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi"))
P55c <- pState(nState(subset(Sdef, ain == 55 \& allo == "Conv"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi"))
P55i <- pState(nState(subset(Sdef, ain == 55 \& allo == "Int"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi"))
P65c <- pState(nState(subset(Sdef, ain == 65 \& allo == "Conv"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi"))
P65i <- pState(nState(subset(Sdef, ain == 65 \& allo == "Int"),
at = seq(0, 20, 0.1),
from = 0,
time.scale = "tfi"))

```

We can then plot these in a multiple lay-out:
```

par(mfrow = c(3,2),
mar = c(1,2,0,0),
oma = c(3,3,1,0),
mgp =c(3,1,0)/1.6)
plot(P45c, col = clr, xlim = c(0,20))
plot(P45i, col = clr, xlim =c(20,0))
plot(P55c, col = clr, xlim = c(0,20))
plot(P55i, col = clr, xlim =c(20,0))
plot(P65c, col = clr, xlim = c(0,20))
plot(P65i, col = clr, xlim =c(20,0))
mtext(c("Conv","Int"), side = 3, at = c(1,3)/4, outer = TRUE, line = 0)
mtext(paste(seq(45,65,10)), side = 2, at = (3:1*2-1)/6,
outer = TRUE, line = 1, las = 1)

```

This approach entails a lot of hard-coding; we would like to be able to easily get a plot with any set of ages at entry. To this end it is more convenient to collect the state probabilities in an array:
```

> (ain <- seq(45, 65, 10))
[1] 45 55 65
> (agr <- levels(S4\$allo))
[1] "Conv" "Int"
> pdef <- NArray(c(list(ain = ain,

+ allo = agr),
+ dimnames(P45i)))
> str(pdef)
logi [1:3, 1:2, 1:201, 1:5] NA NA NA NA NA NA ...
    - attr(*, "dimnames")=List of 4
..\$ ain : chr [1:3] "45" "55" "65"
..\$ allo : chr [1:2] "Conv" "Int"
..\$ when : chr [1:201] "0" "0.1" "0.2" "0.3" ..
..\$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...

```

CODE EXPLAINED: NArray defines an empty array (full of NAs), classified by the vectors given in a list argument. Note that the way lists are concatenated is by "c".

We lose the pState class of the results, so we resort to the mat2pol function that stacks probabilities (well any set of columns of a matrix) and plots them, so we simply take the result from nState and divide by the number in the initial state (Mic) using sweep:


Figure 7.3: Predicted probabilities of being in each of the states for persons aged 45, 55 and 65 at entry, separately for the two intervention groups. Clearly the graph needs some doctoring.
. ./graph/simLex-panel5
```

> for(aa in ain)

+ for(gg in agr)
pdef[paste(aa), gg, ,] <-
nState(subset(Sdef, ain == aa \& allo == gg),
at = as.numeric(dimnames(pdef)[["when"]]),
from = 0,
time.scale = "tfi")
pdef <- sweep(pdef,
1:2,
pdef[,,1,"Mic"],
"/")
str(pdef)
num [1:3, 1:2, 1:201, 1:5] 0 0 0 0 0 0 0.014 0.0082 0.0062 0.0248 ...
- attr(*, "dimnames")=List of 4
..\$ ain : chr [1:3] "45" "55" "65"
.. ${ }^{\text {allo : chr [1:2] "Conv" "Int" }}$
.. \$ when : chr [1:201] "0" "0.1" "0.2" "0.3" ..
.. \$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...

```

CODE EXPLAINED: Each iteration of the loop over ain (age at entry) and all (allocation) computes the number of person in each of the 5 states at a set of times ( \(3^{\text {rd }}\) dimension of pdef).
```


# panel3, fig = TRUE, width = 8, height = 9

ain <- seq(45, 65, 10)
par(mfrow = c(length(ain), 2),
mar = c(1,0,1,0)/20,
oma =c(3,5,2,3),
mgp =c(3,1,0) / 1.6,
xaxt = "n", yaxt = "n",
xaxs = "i", yaxs = "i", las = 1)
for(aa in ain)
{
mat2pol(pdef[paste(aa),"Conv",,], col = clr, xlim = c(0,20))
axis(side = 2, yaxt = "s", at = 0:10/10, labels = NA )
axis(side = 2, yaxt = "s", at = (1:5*2-1)/10)
axis(side = 4, yaxt = "s", at = 0:10/10,
labels = NA, tcl = 0.4, col="white")
axis(side = 4, yaxt = "s", at = 0:20/20,
labels = NA, tcl = 0.3, col="white")
axis(side = 4, yaxt = "s", at = 0:100/100,
labels = NA, tcl = 0.2, col="white")
if(aa == ain[length(ain)]) axis(side = 1, xaxt = "s")
mat2pol(pdef[paste(aa),"Int" ,,], col = clr, xlim = c(20,0), yaxt = "n")
axis(side = 2, yaxt = "s", at = 0:10/10,
labels = NA, tcl = 0.4, col="white")
axis(side = 2, yaxt = "s", at = 0:20/20,
labels = NA, tcl = 0.3, col="white")
axis(side = 2, yaxt = "s", at = 0:100/100,
labels = NA, tcl = 0.2, col="white")
axis(side = 4, yaxt = "s", at = 0:10/10, labels = NA )
axis(side = 4, yaxt = "s", at = (1:5*2-1)/10)
if(aa == ain[length(ain)]) axis(side = 1, xaxt = "s")
}
mtext(c("Conv","Int"), side = 3, at = c(1,3)/4, outer = TRUE, line = 0,
cex = 0.67)
mtext(paste("Age\n",ain),
side = 2,
at = (length(ain):1 * 2 - 1) / (length(ain) * 2) + 0.1,
outer = TRUE, line = 2.5, cex = 0.67)
mtext("Time since entry (years)", side = 1, line = 3/1.6,
outer = TRUE, cex=0.67)

```

\subsection*{7.3.5 Time spent in albuminuria states}

We have observation time till almost 22 years, but we have only made predictions of state probabilities in pdef till a bit longer than 20 years; pdef contains the state probabilities by time since entry for all combinations of age at entry and treatment allocation:
```

> str(pdef)
num [1:3, 1:2, 1:201, 1:5] 0 0 0 0 0 0 0.014 0.0082 0.0062 0.0248 ...

- attr(*, "dimnames")=List of 4
..\$ ain : chr [1:3] "45" "55" "65"
..\$ allo : chr [1:2] "Conv" "Int"
..\$ when : chr [1:201] "0" "0.1" "0.2" "0.3" ..
..\$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...
> ftable(pdef[,,1:5,], row.vars = c(1,3))

```


Figure 7.4: Predicted probabilities of being in each of the states for persons aged 45, 55 and 65 at entry, separately for the two intervention groups. Estimates are based on proportional hazards models with spline effects of time since entry and current age, and hazard ratios depending on treatment allocation (Conv/Int), and current microalbuminuria status (current state) (Norm/Mic/Mac).
../graph/simLex-panel3
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline & & \begin{tabular}{l}
allo \\
State
\end{tabular} & \begin{tabular}{l}
Conv \\
Norm
\end{tabular} & Mic & Mac & D (CVD) & D (oth) & \begin{tabular}{l}
Int \\
Norm
\end{tabular} & Mic & Mac & D (CVD) & D (oth) \\
\hline \multicolumn{13}{|l|}{ain when} \\
\hline \multirow[t]{5}{*}{45} & 0 & & 0.0000 & 1.0000 & 0.0000 & 0.0000 & 0.0000 & 0.0000 & 1.0000 & 0.0000 & 0.0000 & 0.0000 \\
\hline & 0.1 & & 0.0140 & 0.9816 & 0.0044 & 0.0000 & 0.0000 & 0.0248 & 0.9724 & 0.0028 & 0.0000 & 0.0000 \\
\hline & 0.2 & & 0.0264 & 0.9642 & 0.0094 & 0.0000 & 0.0000 & 0.0522 & 0.9434 & 0.0044 & 0.0000 & 0.0000 \\
\hline & 0.3 & & 0.0418 & 0.9432 & 0.0150 & 0.0000 & 0.0000 & 0.0738 & 0.9194 & 0.0068 & 0.0000 & 0.0000 \\
\hline & 0.4 & & 0.0518 & 0.9302 & 0.0178 & 0.0000 & 0.0002 & 0.0958 & 0.8948 & 0.0094 & 0.0000 & 0.0000 \\
\hline \multirow[t]{5}{*}{55} & 0 & & 0.0000 & 1.0000 & 0.0000 & 0.0000 & 0.0000 & 0.0000 & 1.0000 & 0.0000 & 0.0000 & 0.0000 \\
\hline & 0.1 & & 0.0082 & 0.9858 & 0.0056 & 0.0004 & 0.0000 & 0.0154 & 0.9808 & 0.0034 & 0.0004 & 0.0000 \\
\hline & 0.2 & & 0.0162 & 0.9734 & 0.0096 & 0.0008 & 0.0000 & 0.0270 & 0.9666 & 0.0060 & 0.0004 & 0.0000 \\
\hline & 0.3 & & 0.0222 & 0.9600 & 0.0166 & 0.0012 & 0.0000 & 0.0430 & 0.9480 & 0.0084 & 0.0006 & 0.0000 \\
\hline & 0.4 & & 0.0296 & 0.9472 & 0.0220 & 0.0012 & 0.0000 & 0.0538 & 0.9334 & 0.0120 & 0.0008 & 0.0000 \\
\hline \multirow[t]{5}{*}{65} & 0 & & 0.0000 & 1.0000 & 0.0000 & 0.0000 & 0.0000 & 0.0000 & 1.0000 & 0.0000 & 0.0000 & 0.0000 \\
\hline & 0.1 & & 0.0062 & 0.9838 & 0.0086 & 0.0012 & 0.0002 & 0.0138 & 0.9814 & 0.0042 & 0.0006 & 0.0000 \\
\hline & 0.2 & & 0.0126 & 0.9650 & 0.0190 & 0.0032 & 0.0002 & 0.0266 & 0.9634 & 0.0084 & 0.0016 & 0.0000 \\
\hline & 0.3 & & 0.0206 & 0.9466 & 0.0276 & 0.0048 & 0.0004 & 0.0394 & 0.9462 & 0.0118 & 0.0026 & 0.0000 \\
\hline & 0.4 & & 0.0256 & 0.9334 & 0.0350 & 0.0056 & 0.0004 & 0.0510 & 0.9300 & 0.0154 & 0.0036 & 0.0000 \\
\hline
\end{tabular}

CODE EXPLAINED: The str shows that pdef is a 4-way array; the ftable prints the first 5 levels of the \(3^{\text {rd }}\) dimension, with the \(1^{\text {st }}\) and \(3^{\text {rd }}\) as the row classification in a flat table layout.

\subsection*{7.3.5.1 Using estimated probabilities}

We may want to compare groups by the expected time spent in the normoalbuminuric state during the first, say, 20 years. The expected time in a state is simply the time-integral of the probabilities, so we can easily compute it from pdef; each probability in pdef represents is computed at a specific time, the times being 0.1 year apart, so we just take the midpoint of the probabilities at the ends of each interval and multiply by the interval width:
```

> mid <- function(x) x[-1] - diff(x) / 2
> pmid <- apply(pdef, c(1,2,4), mid)
> str(pmid)
num [1:200, 1:3, 1:2, 1:5] 0.007 0.0202 0.0341 0.0468 0.059 ...
- attr(*, "dimnames")=List of 4
..\$ : chr [1:200] "0.1" "0.2" "0.3" "0.4" ...
..\$ ain : chr [1:3] "45" "55" "65"
..\$ allo : chr [1:2] "Conv" "Int"
..\$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...
> pyr <- apply(pmid[1:200,,,], 2:4, sum) * 0.1
> str(pyr)
num [1:3, 1:2, 1:5] 4.69 2.72 1.27 7.11 4.31 ...
- attr(*, "dimnames")=List of 3
..\$ ain : chr [1:3] "45" "55" "65"
..\$ allo : chr [1:2] "Conv" "Int"
..\$ State: chr [1:5] "Norm" "Mic" "Mac" "D(CVD)" ...
> round(ftable(pyr, col.vars = 3:2), 1)

|  | State | Norm |  | Mic |  | Mac |  | D (CVD) |  | D (oth) |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | allo | Conv | Int | Conv | Int | Conv | Int | Conv | Int | Conv | Int |
| ain |  |  |  |  |  |  |  |  |  |  |  |
| 45 |  | 4.7 | 7.1 | 9.5 | 9.2 | 2.5 | 1.6 | 0.6 | 0.3 | 2.7 | 1.8 |
| 55 |  | 2.7 | 4.3 | 8.7 | 10.2 | 3.1 | 2.3 | 3.0 | 1.3 | 2.4 | 1.9 |
| 65 |  | 1.3 | 2.3 | 5.8 | 7.9 | 2.2 | 2.0 | 5.7 | 2.8 | 5.0 | 5.0 |

```

CODE EXPLAINED: The mid function will return the midpoints between successive values in a vector, a result that is one shorter than the argument. The apply returns an array classified by dimensions 1,2 and 4 of pdef and (as the first dimension) the result of the mid function applied to the remaining dimensions of pdef (in this case only the \(3^{\text {rd }}\) ).

The second apply adds the first 200 entries of the first dimension of pmid, which, when multiplied by the interval length give the integral of the state probabilities over the first 20 years ( 200 intervals) of follow-up.

Note that the apply function automatically keeps track of the three dimensions by which we want the result classified.

These numbers are the expected time (in years) spent in each state during the first 20 years after enrollment; we see that the intervention group spend far more time in Norm than do the conventional group, regardless of the age at entry.

The time spent in the two dead states are not really interpretable, it would be something like the number of years (during the first 20 years after enrollment) lost to each of the causes. We see that the most dramatic differences are for the CVD deaths.

We can also take a look at the differences in sojourn times between the two intervention groups; this is the advantage of having results stored in an array-it is quite easy to do simple manipulations across multiple dimensions:
```

> round(pyr[,"Int",] - pyr[,"Conv",], 1)
State
ain Norm Mic Mac D(CVD) D(oth)
45 2.4 -0.3 -1.0 -0.4 -0.8
55 1.6 1.5 -0.9 (1.7 -1.7 -0.6
65 1.0 2.0 -0.2 -2.9 0.0

```

\subsection*{7.3.5.2 Using simulated sojourn times}

We also have the possibility to compute the sojourn times directly from the simulated object; this however will not include time spent in the absorbing states, as this is not part of the simulated follow-up:


Discrepancy to numerical integrals We see that the simulated sojourn times are longer than those computed from the integration of the simulated state probabilities. Suppose namely that we censored all simulated sojourn times immediately after the times where we calculated the state probabilities. Then the simulated probabilities would still be the same, but the simulated sojourn times would be smaller. So we see that the numerical integration gives downward biased sojourn times; the actually simulated sojourn times gives the most correct result.

Time spent in absorbing states The time spent in the dead states during the first 20 years of follow-up is however available from Sdef (only the results from the absorbing states are meaningful):
```

> apyr <- with(subset(Sdef, lex.Xst %in% absorbing(Sdef)),

+ tapply(20 - (tfi + lex.dur),
+ list(ain, allo, lex.Xst),
+ sum)) / 2000
> round(ftable(pmin(apyr, tpyr, na.rm = TRUE), col.vars = 3:2), 1)
Norm Mic Mac D(CVD) D(oth)
Conv Int Conv Int Conv Int Conv Int Conv Int
45 12.2 18.5 24.4 24.0
55 7.0 11.1 22.3 26.4 8.1 6.0 7.4 7.4 3.3
65
> round(ftable( pyr, col.vars = 3:2), 1)

```

```

ain

```

```

55 2.7 4.3 8.7 10.2 3.1 2.3 2.3 3.0
65 1.3 2.3 5.8 7.9 2.2 2.0

```

\subsection*{7.4 State probabilities from the Aalen-Johansen estimator in survival}

The survival package allows estimation of state probabilities by the Aalen-Johansen estimator similar to what we did in competing risks. However, the Aalen-Johansen machinery in the survival package is not aligned with the way Lexis objects are defined, so a naive application will give wrong results or crash the survfit function.

Therefore, a wrapper for the multistate version of survfit has been devised, called AaJ. Lexis, so we can just do:
```

> AaJ4 <- AaJ.Lexis(L4, time = "tfi")
NOTE: Timescale is tfi

```

The result is an object which is a list that inherits from survfitms and survfit. Each element of the list are referred to as a slot. The predicted state probabilities from survfit are in the slot called pstate, and the confidence intervals in the corresponding slots lower and upper.
```

> class(AaJ4)
[1] "survfitms" "survfit"
> names(AaJ4)

```

```

> colnames(AaJ4$pstate) <- AaJ4$states
> head(cbind(time = AaJ4\$time,

+ AaJ4\$pstate))

|  | time | Mic | Norm | Mac | D (CVD) | D (oth) |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| $[1]$, | 0.05201916 | 0.99375 | 0.00000 | 0.00625 | 0 | 0 |
| $[2]$, | 0.05749487 | 0.98750 | 0.00625 | 0.00625 | 0 | 0 |
| $[3]$, | 0.06570842 | 0.98750 | 0.00625 | 0.00625 | 0 | 0 |
| $[4]$, | 0.09034908 | 0.98125 | 0.01250 | 0.00625 | 0 | 0 |
| $[5]$, | 0.09308693 | 0.98125 | 0.01250 | 0.00625 | 0 | 0 |
| $[6]$, | 0.10130048 | 0.98125 | 0.01250 | 0.00625 | 0 | 0 |

```

We can now graphically show the Aalen-Johansen estimator of the state probabilities:
```

> mat2pol(AaJ4\$pstate,

+ perm =c(2,1,3,5,4),
x = AaJ4$time,
          col = clr)
lines(AaJ4$time,
apply(AaJ4\$pstate[,1:3], 1, sum),
lwd = 1,
col = "White")

```


Figure 7.5: Aalen-Johansen estimator of state probabilities for the total Steno2 study population, disregarding intervention allocation.

CODE EXPLAINED: mat 2 pol plots the columns of the first argument (a matrix) as coloured areas stacked on top of each other, perm gives the order in which they are stacked. The x argument is the common \(x\)-coordinate against which the columns of the first argument is plotted. col is a vector of colours used for the areas.

Formally, the Aalen-Johansen estimator is a step function, so instead of just connecting the points we should have made a proper step-function, but this is a minor point with a dataset of this size.

However, we are interested in seeing the results from each of the allocation groups, so we use the formula argument to AaJ.Lexis (which is just passed on to Survfit):
```

> AaJg <- AaJ.Lexis(L4, ~ allo, time = "tfi")
NOTE: Timescale is tfi

```

The result for the state probabilities is in a long vector of time and a matrix pstate, the two parts corresponding to Int and Conv put after one another, with the length of each part in strata
```

> AaJg$strata
allo=Conv allo=Int
    337 375
> wh <- rep(substr(names(AaJg$strata), 6, 9), AaJg\$strata)
> table(wh)
wh
Conv Int
3 3 7 3 7 5

```

So we can now make the plots for the two subsets and place them next to each other as before:
```

par(mfrow = c(1,2), mar=c(3,3,0,0), oma=c(0,0,1,1), mgp = c(3,1,0)/1.6)
mat2pol(AaJg$pstate[wh=="Conv",],
    perm =c(2,1,3:5),
        x = AaJg$time[wh=="Conv"],
col = clr, xlim = c(0,21), xaxs = "i", yaxs = "i")
lines(AaJg$time[wh=="Conv"],
    apply(AaJg$pstate[,1:3], 1, sum)[wh=="Conv"],
lwd = 2, col = "white")
mat2pol(AaJg$pstate[wh=="Int",],
            perm = c(2,1,3:5),
            x = AaJg$time[wh=="Int"],
col = clr, xlim = c(21,0), xaxs = "i", yaxs = "i")
lines(AaJg$time[wh=="Int"],
    apply(AaJg$pstate[,1:3], 1, sum) [wh=="Int"],
lwd = 2, col = "white")
mtext(c("Conv","Int"), side = 3, at = c(1,3)/4, outer = TRUE, line = 0)

```

\subsection*{7.4.1 Relation to the simulation approach by simLexis}

The Aalen-Johansen estimators for the two allocation groups can be considered the empirical counterpart of the simulation based estimates in figure 7.2 ; the state probabilities for a population like the one in the study. But not quite so; the models underlying figure 7.2 are proportional hazards models in the sense that the effects of current age and time since enrollment are assumed proportional between allocation groups with proportionality depending on current state. Moreover, the effect of age is assumed to be the same at all times since enrollment and vice versa. Basically "proportional hazards" just means models without interaction with any of the time scales.

The plots in figure 7.6 are based on separate models for the effect of time from entry (tfi) for each transition and allocation, and with no effect of current age or age at entry. So an unspecified interaction between tfi and allocation, separately for each transition.

In the Aalen-Johansen approach in survfit we get confidence intervals for each of the state probabilities in the slots lower and upper, but not for sums of subsets of these. Since it is the sums of state probabilities we have shown in the graph, we cannot directly use the confidence intervals for the single state probabilities.

We would also want confidence intervals for areas under the curves-the sojourn times. Neither are available from the Aalen-Johansen approach nor from the simulation approach-at least not in its current state of development.

Both the results in figure 7.2 and figure 7.6 refer to a patient population identical to the study population. Thus to the extent that age also has an effect on the transition rates in the model in figure 7.1 the results will depend on the age-distribution in the study population. The two approaches are not identical, but both answer the question of state probabilities as a function of time on study for a population with the same age-distribution as the Steno2 study population.


Figure 7.6: Aalen-Johansen estimator of the state probabilities for the two intervention groups, for the original total Steno2 population, subdivided by intervention allocation.
../graph/simLex-AaJstates

A parametric counterpart of the Aalen-Johansen estimator would entail fit of separate models for each of the 10 transitions using a spline model for the effect of time since entry and for each transition separate models for each of the two intervention groups Conv and Int (corresponding to the baseline hazards). The simulation of cohorts would then be done separately for the two groups-they would be quite similar because of the randomization, though. It would still not be identical to the Aalen-Johansen analysis, but the basic assumptions about the intensities would be the same:
1. Time since entry is the only covariate for all transitions
2. Separate models for the two randomization groups
3. There is no relationship between models for different transitions

If we instead want to assess how e.g. age influences state probabilities we would fit models with age-effect on the transition rates and use simulation to translate these to the effects on state probabilities such as figure 7.4. This depends both on the chosen models for the transition rates and on the choice of initial cohort to simulate from.

\section*{Chapter 8}

\section*{Multistate packages}

\subsection*{8.1 The msm package}

\subsection*{8.1.1 Relationship between Lexis and msm}

The Lexis representation of follow-up assumes that times of all transitions between states are known, so a Lexis object is a an exact representation of persons entire follow-up through the states. Each record in a Lexis object represents a piece of follow-up in a state (lex. Cst) of a certain length (lex.dur), at the end of which a transition to the next state (lex. Xst) occurs.

The msm package is unlike the Lexis machinery aimed at partially observed multistate models-what is often referred to as "panel data"; it is assumed that you only know the state of a person at a finite set of times, but nothing is known about the exact transition times. There is though a provision in the msm package to assume that some or all transition times are are known exactly. This will typically be the case with transitions to "Dead" states, but it is required that this is for all transitions to a given state.

\subsection*{8.1.2 Exact transition times?}

When states are disease states where transitions times are defined as date of recording of a given diagnosis, it may be argued that some conditions (such as for example bladder cancer) in reality may have occurred some time before the recording date. This is however to some extent a matter of state-definition; using the recorded date of the event as an exact occurrence date means that model is not a model for the occurrence of bladder cancer but for the occurrence of recorded bladder cancer. This is essentially just moving the problem to another realm; the relationship between occurrence and recording of bladder cancer is in this way moved outside the realm of the practical modeling, and into the realm of results interpretation.

If we want to use msm for data recorded in a Lexis object we must restructure it. The Lexis representation is as the state in which follow-up time occurs (lex.Cst) as well as the next state (lex.Xst-which however may be the same as lex.Cst).

But if we have a Lexis object with, say, \(n\) consecutive intervals with the follow-up of a person we must supply to msm the states occupied at the beginning of each interval (which will be the "next" state for the previous interval if any), but also the state at the end of the last interval, so a total of \(n+1\) records.

For the first \(n\) intervals the time will be the values of the timescale, while the time we need for the last "extra" record is the time of transition, which for time scale ts will be ts + lex.dur.

However, if we have non-consecutive follow-up intervals for a person, this will have to be done for each set of consecutive intervals within each person.

\subsection*{8.2 Data transformation from Lexis to msm}

The function Lexis2msm in the Epi package does exactly this job.
```

> library(Epi)
> library(msm)
> library(tidyverse)

```

For illustration we run (a slight extension) of the example code for mcutlexis to provide a Lexis object with 5 states:
```

set.seed(1952)
dd <- data.frame(id = 1:30,
doN = round(runif(30,-30, 0),1), \# birth
doE = round(runif(30, 0,20),1), \# entry
doX = round(runif(30, 50,60),1), \# exit
doD = round(runif(30, 50,60),1), \# death
\# these are the event times fo A and B
doA = c(NA,21,NA,27,35,NA,52, 5,43,80,
NA, 22,56, 28,53,NA,51, 5,43, 80,
NA, 23,NA, 33, 51,NA, 55, 5, 43, 80),
doB = c(NA,20,NA,53,27,NA, 5,52,34,83,
NA, 20, 23, 37, 35,NA, 52, 8, 33,NA,
25,NA, 37, 40,NA,NA, 15, 23, 36, 61))

# set up a Lexis object with time from entry to death/exit

Lx <- Lexis(entry = list(time = doE,
age = doE - doN),
exit = list(time=pmin(doX, doD)),
exit.status = factor(doD < doX, labels = c("OK", "D")),
data = dd)
NOTE: entry.status has been set to "OK" for all.

```
> summary ( Lx )
Transitions:
From OK D Records: Events: Risk time: Persons:
    \(\begin{array}{rrrrrr}\text { OK } & 14 & 16 & 30 & 16 & 1288 \\ 30\end{array}\)
    \# cut the follow-up at dates doA and doB
    L3 <- mcutLexis( Lx, "time",
                        wh' = c ("doA", "doB"),
        new.states \(=c(" A ", " B ")\),
        precursor.states \(=\) "OK",
        seq.states \(=\) FALSE,
        new.scales \(=c(" t f A ", " t f B "))\)
    L3 <- Relevel (L3, c ("OK", "A", "B", "A+B", "D"))
    summary (L3)
Transitions:
        To
\begin{tabular}{crrrrrrrrr} 
From & OK & A & B & A+B & D & Records: & Events: & Risk time: & Persons: \\
OK & 6 & 6 & 10 & 0 & 3 & 25 & 19 & 743.8 & 25 \\
A & 0 & 0 & 0 & 6 & 2 & 8 & 8 & 143.5 & 8 \\
B & 0 & 0 & 3 & 6 & 3 & 12 & 9 & 196.9 & 12 \\
A+B & 0 & 0 & 0 & 5 & 8 & 13 & 8 & 203.8 & 13 \\
Sum & 6 & 6 & 13 & 17 & 16 & 58 & 44 & 1288.0 & 30
\end{tabular}
> \# Make a graphical display of the data
\(>\) boxes \((L 3\), boxpos \(=\) list \((x=c(12,12,88,88,50)\),
\(+\quad y=c(88,12,88,12,50))\),
+ scale. \(R=1000\), show. \(B E=\) TRUE)

With this data set we can illustrate how the Lexis2msm works -we just use the three first persons for illustration:
```

> (Lx <- subset(L3, lex.id %in% 1:3))
lex.id time age tfA tfB lex.dur lex.Cst lex.Xst id doN doE doX doD doA doB
1 16.5 18.0 NA NA 36.7 OK OK 1 - -1.5 16.5 53.2 55.1 NA NA
3 11.9 34.1 NA NA 40.9 OK N
2

```



Figure 8.1: Simple artificial example of a 5-state model. The numbers in the middle of each box is the risk time spent in each state (in years), and teh numbers at the bottom are the number of persons beginning, resp. ending follow-up in the state. The number of transitions and the empirical rates are given (per 1000 PY) on the transition arrows.
../graph/msm-exbox


Note that if we delete a record of follow-up for person 2 in state A, we still get the same results even if we have a "hole" in the follow-up of person 2, because the surrounding two records have the states occupied.
```

> (Lx <- subset(Lx, !(lex.id == 2 \& lex.Cst == "A")))
lex.id time age tfA tfB lex.dur lex.Cst lex.Xst id doN doE doX doD doA doB
1 16.5 18.0 NA NA N
3 11.9 34.1 NA NA 40.9 OK D D 3 -22.2 11.9 53.1 52.8 NA NA
2
llrrrrrrrarB
> Lexis2msm(Lx, v = T)
Object with state occupied at time points on the time scales:
time age tfA tfB

```
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline & lex.id & time & age & tfA & tfB & te & id & doN & doE & doX & doD & doA & doB \\
\hline & 1 & 16.5 & 18.0 & NA & NA & OK & 1 & -1.5 & 16.5 & 53.2 & 55.1 & NA & A \\
\hline & 1 & 53.2 & 54.7 & NA & NA & OK & 1 & -1.5 & 16.5 & 53.2 & 55.1 & NA & NA \\
\hline & 2 & 3.0 & 6.1 & NA & NA & OK & 2 & -3.1 & 3.0 & 50.1 & 55.3 & 21 & 20 \\
\hline 6 & 2 & 20.0 & 23.1 & NA & 0.0 & B & 2 & -3.1 & 3.0 & 50.1 & 55.3 & 21 & 20 \\
\hline & 2 & 21.0 & 24.1 & 0.0 & 1.0 & A+B & 2 & -3.1 & 3.0 & 50.1 & 55.3 & 21 & 20 \\
\hline & 2 & 50.1 & 53.2 & 29.1 & 30.1 & A+B & 2 & -3.1 & 3.0 & 50.1 & 55.3 & 21 & 20 \\
\hline & 3 & 11.9 & 34.1 & NA & NA & OK & 3 & -22.2 & 11.9 & 53.1 & 52.8 & NA & NA \\
\hline & 3 & 52.8 & 75.0 & NA & NA & D & 3 & -22.2 & 11.9 & 53.1 & 52.8 & N & N \\
\hline
\end{tabular}

The more realistic example is:
```

> mLx <- Lexis2msm(L3)
> c(nid(L3), nid(mLx))
[1] 30 30
> c(nrow(L3), nrow(mLx))
[1] 58 88
> str(mLx)
Classes 'msmLexis' and 'data.frame': }88\mathrm{ obs. of }13\mathrm{ variables:
\$ lex.id: int 1 1 2 2 2 2 3 3 4 4 ...
\$ time : num 16.5 53.2 3 20 21 50.1 11.9 52.8 14.7 27 ...
\$ age : num 18 54.7 6.1 23.1 24.1 53.2 34.1 75 19.4 31.7 ...
\$ tfA : num NA NA NA NA 0 29.1 NA NA NA O ...
\$ tfB : num NA NA NA 0 1 30.1 NA NA NA NA ...
\$ state : Factor w/ 5 levels "OK","A","B","A+B",..: 1 1 1 3 4 4 1 5 1 2 ...
\$ id : int 1 1 2 2 2 2 3 3 4 4 ...
\$ doN: num -1.5 -1.5 -3.1 -3.1 -3.1 -3.1 -22.2 -22.2 -4.7 -4.7 ···..
\$ doE : num 16.5 16.5 3 3 3 3 11.9 11.9 14.7 14.7 ...
\$ doX : num 53.2 53.2 50.1 50.1 50.1 50.1 53.1 53.1 60 60 ...
\$ doD : num 55.1 55.1 55.3 55.3 55.3 55.3 52.8 52.8 55.6 55.6 ...
\$ doA : num NA NA 21 21 21 21 NA NA 27 27 ...
\$ doB : num NA NA 20 20 20 20 NA NA 53 53 ...

- attr(*, "time.scales")= chr [1:4] "time" "age" "tfA" "tfB"
- attr(*, "time.since")= chr [1:4] "" "" "A" "B"

```

We see that the data frame is of class msmLexis, and nicely sorted, but also that there are more records in the msmLexis dataset, namely the number of records in the original data set plus the number of persons in the dataset. The latter is only true because all persons have consecutive follow-up intervals in the Lexis data frame.

\subsection*{8.3 Analysis of rates}

\subsection*{8.3.1 Follow-up analysis using glm. Lexis}

We can use the glm.Lexis function to model all 8 transitions; 4 mortality transitions in one model and the transitions to other transient states in two other. Note that we are not providing any values for the arguments from and to for the mortality analyses, because the default behaviour of glm.Lexis is to model all transitions to all absorbing states-in this case Dead is the only absorbing state:
```

> library(Epi)
> \# mortality rates
> mm <- glm.Lexis(L3, ~ lex.Cst - 1)
stats::glm Poisson analysis of Lexis object L3 with log link:
Rates for transitions:
OK->D
A->D
B}->
A+B->D
> \# occurrence of A then B
> mab <- glm.Lexis(L3, ~ lex.Cst -1,

+ from = c("OK", "A"),
+ to =c("A","A+B"))

```
```

stats::glm Poisson analysis of Lexis object L3 with log link:
Rates for transitions:
OK->A
A->A+B
> \# occurrence of B then A
> mba <- glm.Lexis(L3, ~ lex.Cst -1,

+ from = c("OK","B"),
+ to = c("B","A+B"))
stats::glm Poisson analysis of Lexis object L3 with log link:
Rates for transitions:
OK->B
B->A+B

```

We can arrange the estimated rates and the corresponding confidence intervals from the three models nicely:
```

rates <- rbind(ci.exp(mab),
ci.exp(mba),
ci.exp(mm))
from <- gsub("lex.Cst", "", rownames(rates))
to <- c("A","B", "A+B", "D") [c(1,3,2,3,4,4,4,4)]
rownames(rates) <- NULL
colnames(rates) <- c("Rate", "L", "U")
data.frame(from, to, round(rates * 1000, 1))
from to Rate L U
OK A 8.1 3.6 18.0
A A+B 41.8 18.8 93.1
OK B 13.4 7.2 25.0
B A+B 30.5 13.7 67.8
OK D 4.0 1.3 12.5
A D 13.9 3.5 55.7
B D 15.2 4.9 47.2
A+B D 39.3 19.6 78.5

```

We see that we reproduce the empirical rates as shown in the plot with the boxes. This is a model assuming that all rates are constant, a model that can also be fitted using msm

\subsection*{8.3.2 Markov analysis by msm}

We can also fit the model using msm by specifying that times given are excact times. However, msm requires that that states be numbered (and not, and moreover we want estimated rates in rates per 1000 PY, so we rescale time:
```

> Lm <- Lexis2msm(L3)
> Lt <- transform(Lm, state = as.integer(state),

+ t1000 = time / 1000)

```

We illustrate that we have the same transition matrix
```

> library(msm)
> summary(L3)
Transitions:
To

| From | OK | A | B | A+B | D | Records: | Events: Risk time: | Persons: |  |
| :---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| OK | 6 | 6 | 10 | 0 | 3 | 25 | 19 | 743.8 | 25 |
| A | 0 | 0 | 0 | 6 | 2 | 8 | 8 | 143.5 | 8 |
| B | 0 | 0 | 3 | 6 | 3 | 12 | 9 | 196.9 | 12 |
| A+B | 0 | 0 | 0 | 5 | 8 | 13 | 8 | 203.8 | 13 |
| Sum | 6 | 6 | 13 | 17 | 16 | 58 | 44 | 1288.0 | 30 |

> statetable.msm(state, lex.id, data = Lm)

```
\begin{tabular}{rrrrrr}
\multicolumn{3}{c}{ to } \\
from & OK & A & B & A+B & D \\
1 & 6 & 6 & 10 & 0 & 3 \\
2 & 0 & 0 & 0 & 6 & 2 \\
3 & 0 & 0 & 3 & 6 & 3 \\
4 & 0 & 0 & 0 & 5 & 8
\end{tabular}

We need to specify a transtion matrix:
```

> qm <- tmat(L3) / 10
> qm[is.na(qm)] <- 0
> rownames(qm) <-

+ colnames(qm) <- 1:5
> qm

```

```

100.6 1 0.0 0.3
200.0 0 0.6 0.2
300.0 0 0.6 0.3
400.0 0 0.0 0.8
500.000.0 0.0

```

Then we can specify the Markov model:
```

> msmM <- msm(state ~ t1000,

+ subject = lex.id,
+ data = Lt,
+ qmatrix = qm,
+ obstype = 2)
> msmM
Call:
msm(formula = state ~ t1000, subject = lex.id, data = Lt, qmatrix = qm, obstype = 2)
Maximum likelihood estimates
Transition intensities
Baseline
1-1 -25.545 (-40.048,-16.29)
1-2 8.067 ( 3.624, 17.96)
1-3 13.445 ( 7.234, 24.99)
1 - 5 4.033 ( 1.301, 12.51)
2 - 2 -55.749 (-111.477,-27.88)
2-4 41.812 ( 18.784, 93.07)
2 - 5 13.938 ( 3.486, 55.73)
3-3-45.709(-87.848,-23.78)
3-4 30.473 ( 13.690, 67.83)
3-5 15.236 ( 4.914, 47.24)
4 - 4 -39.254 ( -78.493,-19.63)
4-5 39.254 ( 19.631, 78.49)
-2 * log-likelihood: -168.7931

```

We can extract the estimated transition rates with c.i. using the extractor function qmatrix.msm:
```

> str(qmatrix.msm(msmM))
List of 5
\$ estimates: num [1:5, 1:5] -25.5 0 0 0 0 ...
..- attr(*, "dimnames")=List of 2
.. ..\$ : chr [1:5] "1" "2" "3" "4" ..
.. ..\$ : chr [1:5] "1" "2" "3" "4" ...
\$ SE : num [1:5, 1:5] 5.86 0 0 0 0 ...
..- attr(*, "dimnames")=List of 2
.. ..\$ : chr [1:5] "1" "2" "3" "4" ...
.. ..\$ : chr [1:5] "1" "2" "3" "4" ...
\$ L : num [1:5, 1:5] -40 0 0 0 0 ...
..- attr(*, "dimnames")=List of 2

```
```

    .. ..$ : chr [1:5] "1" "2" "3" "4" ...
    .. ..$ : chr [1:5] "1" "2" "3" "4" ...
    $ U : num [1:5, 1:5] -16.3 0 0 0 0 ...
    ..- attr(*, "dimnames")=List of 2
    .. ..$ : chr [1:5] "1" "2" "3" "4" ...
    .. ..$ : chr [1:5] "1" "2" "3" "4" ...
    \$ fixed : logi [1:5, 1:5] FALSE FALSE FALSE FALSE FALSE FALSE ...

- attr(*, "class")= chr "msm.est"
> qm <- qmatrix.msm(msmM)$estimates
> ql <- qmatrix.msm(msmM)$L
> qu <- qmatrix.msm(msmM)\$U

```

We can then doctor this to a more readable from by applying state names, and then use these to get the estimated rates in the same form as those from the Lexis analysis:
```

rownames(qm) <- rownames(ql) <- rownames(qu) <-
colnames(qm) <- colnames(ql) <- colnames(qu) <- levels(L3)
data.frame(from, to,
round(rates * 1000, 1),
round(cbind(qm[cbind(from,to)],
ql[cbind(from,to)],
qu[cbind(from,to)]), 1))
from to Rate L U X1 X2 X3
OK A 8.1 3.6 18.0
A A+B 41.8 18.8 93.1 41.8 18.8 93.1
B 13.4 7.2 25.0 13.4 7.2 25.0
A+B 30.5 13.7 67.8 30.5 13.7 67.8
OK D 4.0
A D 13.9 3.5 55.7 13.9 3.5 55.7
B D 15.2 4.9 47.2 15.2 4.9 47.2
A+B D 39.3 19.6 78.5 39.3 19.6 78.5

```
... and bingo, we see we get exactly the same results.
So we can get the same results from msm as from traditional calculation of transition rates. But there are a couple of derivatives that come much easier from msm

\section*{Chapter 9}

\section*{Advice and dogma}

\subsection*{9.1 Practical advice for multistate analysis}

The following is a summary of things to keep in mind when gathering data, doing analysis and reporting multistate models.
1. Record all event times as dates - facilitates calculation of any other time scale.
2. Draw boxes and arrows with person-years and transitions; this gives an overview of the data.
3. Draw Lexis diagrams of follow-up for (all) pairs of time scales, it may reveal (some of the) fishy features of your data.
4. Divide absorbing states by transition type (which state was immediately before the absorbing state, \(e . g\). death with or without previous CVD) - then you will be able to address the risk of ever being in a given state.
5. Different occurrence rates (transition intensities) out of a state are not likely to be proportional. Specifically, they are not likely to depend on time (and other covariates) in the same way. Hence they will therefore normally be modeled separately. For example, it is unlikely that rates of cancer and CVD among persons not suffering from any of them will depend on age in the same way.
6. Transition intensities from different states into the same (type of) state are more likely to depend on time (and other covariates) in the same way. For example it is quite likely that cancer rates depend on age in the same way for persons with and without CVD.
7. The stacking of data (also called the long format, see e.g. [?], and p. ??) when modeling several transition rates with the common parameters is only needed if several rates out of the same state are modeled jointly (that is, with common parameters). If the joint modeling of several rates concerns at most one rate out of any state, the stacked data are not needed, simple subsetting of the the follow-up in the Lexis representations will suffice.
By the previous token, this means the stacking of follow-up data is quite rarely needed. But there is a stack function that will transform a Lexis object to the long format.
8. Adding clinical measurements to a Lexis object naturally induces a time-scale for each (type of) clinical examination, namely the time since the measurement was taken.
This is because we would expect that the effect of a measurement attenuates with time since the measurement. This can be modeled because we will have a timescale variable indicating the time since last clinical measurement. It simply amounts to including an interaction between the measurement value and the time since measurement.
9. Rates are smooth functions of time scales (and other covariates).
10. The choice of timescales to use in modeling is an empirical question, as is the in- or ex-clusion of any other covariate of potential interest from the model.
11. Differences between time scales may be relevant as covariates, e.g. age at diagnosis \(=\) current age disease duration.
12. It is easier to obtain expected sojourn times, cumulative risks and other derived measures when rates are modeled by smooth parametric functions.

\subsection*{9.2 Dogma for multistate analysis}

The following is a collection of dogma that I consider essential to obtain a valid and sensible statistical analysis and reporting from observations in a multistate model with multiple time scales.
1. do not condition on the future (see [1])
2. do not label quantities 'probability' or 'survival' if they are not (see [1])
3. do label interactions "interactions" if they are - it is confusing to invent new words such as "non-proportional hazards"
4. do not test for interactions-quantify them
5. stick to this world:
(a) rates are smooth functions of time scales
(b) rates are likely to depend on more than one time scale - empirical examination is required to establish which
(c) report multiple time scale effects jointly - they advance at the same time in real life

\section*{Chapter 10}

\section*{Useful \(R\) functions and packages}

\subsection*{10.1 Lexis functions}

The Lexis machinery has evolved over time since it was first introduced in a workable version in Epi_1.0.5 in August 2008, as described in [9, 3].

Over the years there have been additions of tools for handling multistate data. Below is a list of the current functions relating to Lexis objects with a very brief description of each; it does not replace the documentation so you have to RTFM. Unless otherwise stated, functions named something. Lexis (with a ".") are S3 methods for Lexis objects, so you can skip the ".Lexis" in daily use.

\section*{Define}

Lexis defines a Lexis object

\section*{Cut and split}
cutLexis cut follow-up at one intermediate event
mcutLexis cut follow-up at several intermediate events, keep track of history, no recurrences allowed rcutLexis cut follow-up at several intermediate events, only most recent event kept, recurrences allowed
countLexis cut follow-up at intermediate event count the no. events so far
addCov.Lexis add clinical measurements at a given date to a Lexis object
splitLexis split follow up along a time scale
popEpi::splitMulti split follow up along a time scale - from the popEpi package, faster and has simpler syntax than splitLexis

\section*{Boxes and plots}
boxes. Lexis draw a diagram of states and transitions
cohorttools: : boxesLx draw a diagram of states and transitions using the graphVz machinery
plot.Lexis draw a standard Lexis diagram
points.Lexis add points to a Lexis diagram
lines.Lexis add lines to a Lexis diagram
PY.ann.Lexis annotate life lines in a Lexis diagram

\section*{Summarize and query}

\footnotetext{
summary.Lexis overview of transitions, risk time etc.
levels.Lexis what are the states in the Lexis object
nid. Lexis number of persons in the Lexis object - how many unique values of lex.id are present
entry entry time
exit exit time
status status at entry or exit
timeBand factor of time bands
timeScales what time scales are in the Lexis object
}
timeSince what time scales are defined as time since a given state breaks what breaks are currently defined absorbing what are the absorbing states transient what are the transient states preceding, before which states precede this succeeding, after which states can follow this tmat. Lexis transition matrix for the Lexis object

\section*{Manipulate}
```

subset.Lexis, [ subset of a Lexis object
merge.Lexis merges a Lexis objects with a data.frame
cbind.Lexis bind a data.frame to a Lexis object
rbind.Lexis put two Lexis objects head-to-foot
transform.Lexis transform and add variables
order.Lexis, orderLexis return order by (lex.id, time scale)
sortLexis sort by (lex.id, time scale)—note: no S3 method available
tsNA20 turn NAs to 0s for time scales
factorize.Lexis make lex.Cst and lex.Xst factors, removing empty levels
Relevel.Lexis reorder and combine states
rm.tr remove transitions from a Lexis object
bootLexis bootstrap sample of persons (lex.id) from a Lexis object

```

\section*{Simulate}
simLexis simulate a Lexis object from specified transition rate models nState, pState count state occupancy from a simulated Lexis object plot.pState, lines.pState plot state occupancy from a pState object

\section*{Stack}
stack. Lexis make a stacked object for simultaneous analysis of transitions - returns a
stacked.Lexis object
subset.stacked.Lexis subsets of a stacked.Lexis object
transform.stacked.Lexis transform a stacked.Lexis object

\section*{Interfaces to other packages}
msdata.Lexis interface to mstate package
etm.Lexis interface to etm package
crr. Lexis interface to cmprsk package
Statistical modeling -these are not S3 methods; you cannot omit .Lexis
glm.Lexis fit a glm model using the poisreg family to (hopefully) time split data
gam. Lexis fit a gam model (from the mgcv package) using the poisreg family to (hopefully) time split data
coxph.Lexis fit a Cox model to follow-up in a Lexis object

\subsection*{10.2 Modeling and reporting functions}
- coxph.Lexis
- glm.Lexis
- gam.Lexis
- ci.lin
- ci.exp
- ci.pred
- ci.cum
- ci.surv
- ci.Crisk

\subsection*{10.3 R Packages}
- survival
- cmprsk
- etm
- flexsurv
- mstate
- msm
- pseudo
- timereg
- cohorttools
...now input from appendix

\section*{Chapter 11}

\section*{Appendices}
... now input from mrcut

\subsection*{11.1 Comparing mout and reut}

This is a short overview of the functioning of these two functions, the situations where they are relevant, and how the results relate to each other.
```

> library(Epi)
> library(popEpi)

```

The following is a modified version of the help page for mcutLexis; where we first set up a data frame of simulated dates, mimicking a multistate model with survival from A to D, and with possible intermediate states Z and W.
```

set.seed(56324)
N <- 500 \# no. persons simulated
> dd <- data.frame(id = 1:N,
doB = runif(N,-30, 0), \# date of birth
doE = runif(N, 0,20), \# date of entry
doX = runif(N, 50,60), \# date of exit
doD = runif(N, 50,60), \# date of death
doZ = runif(N, -6,20), \# date of Z
doW = runif(N, -2,20)) \# date of W
dd$doD[sample(1:N,N/3)] <- NA
dd$doZ[sample(1:N,N/2)] <- NA
dd$doW[sample(1:N,N/4)] <- NA
dd$doZ <- dd$doZ + dd$doE
> dd$doW <- dd$doW + dd$doE
> dd$doX <- pmin(dd$doX, dd$doD, na.rm = TRUE)
> dd[,-1] <- dd[,-1] + }194
round(dd[1:10,], 2)
id doB doE doX doD doZ doW
1 1927.25 1955.39 1995.58 NA 1970.91 1970.46
2 1937.28 1957.90 1992.72 1992.72 NA 1969.56
3 1916.47 1953.62 1996.79 1999.94 1967.15 1954.14
4 1918.35 1950.14 1991.40 1991.40 1956.44 1959.23
5 1935.66 1940.56 1998.77 1998.77 NA 1948.83
6 1938.15 1954.53 1997.71 1998.52 1965.80 1956.97
71922.91 1956.24 1992.41 NA NA 1961.81
8 1930.93 1951.31 1993.38 1993.38 1952.24 1957.62
9 1913.37 1943.33 1997.02 1997.02 NA 1957.69
10 10 1932.00 1941.75 1991.78 1996.55 1939.55 1960.28

```

We then set up a Lexis object with follow-up time from entry to death/exit:
```

> Lx <- Lexis(entry = list(time = doE,
age = doE - doB),
exit = list(time = doX),
exit.status = factor(!is.na(doD),
labels=c("A", "D")),
data = dd)
NOTE: entry.status has been set to "A" for all.
> summary(Lx)

```
Transitions:
From \begin{tabular}{rlr} 
To & D Records: Events: Risk time: Persons:
\end{tabular}

\subsection*{11.1.1 mcutLexis: Cutting at dates of transitions, keeping history}

\subsection*{11.1.1.1 If state sequence matters}

Here we cut the follow-up at dates of \(Z\) and W , keeping track of whether Z occurred before W or vice versa:
```

> L2 <- mcutLexis(Lx, "time",

+ wh = c("doZ", "doW"),
+ new.states = c("Z", "W"),
+ seq.states = TRUE,
+ new.scales = c("tfZ", "tfW"),
+ ties.resolve = TRUE)
NOTE: Precursor states set to A
> levels(L2)
[1] "A" "W" "W-Z" "D" "Z" "Z-W"

```

CODE EXPLAINED: The second argument is the name of the time scale in Lx object that the variables named in the wh argument refer to (here, the calendar time). The new. states argument names the states that persons transition to at these dates. The new. scales names new variables measuring times since entry to the states.

For display reasons we reorder the sequence of the state names (levels):
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|}
\hline \multicolumn{11}{|l|}{\[
\begin{aligned}
& >L 2<-R e l e v e l(L 2, c(" A ", ~ " Z ", ~ " Z-W ", ~ " W ", ~ " W-Z ", ~ " D ")) \\
& >\text { summary(L2) }
\end{aligned}
\]} \\
\hline \multicolumn{11}{|l|}{Transitions:} \\
\hline \multicolumn{11}{|c|}{To} \\
\hline From & A & Z & Z-W & W & W-Z & D & Records: & Events: & Risk time: & Persons: \\
\hline A & 16 & 121 & 0 & 237 & 0 & 45 & 419 & 403 & 5621.22 & 419 \\
\hline Z & 0 & 20 & 109 & 0 & 0 & 44 & 173 & 153 & 3304.06 & 173 \\
\hline Z-W & 0 & 0 & 41 & 0 & 0 & 73 & 114 & 73 & 3582.81 & 114 \\
\hline W & 0 & 0 & 0 & 65 & 70 & 124 & 259 & 194 & 7293.06 & 259 \\
\hline W-Z & 0 & 0 & 0 & 0 & 24 & 48 & 72 & 48 & 2217.43 & 72 \\
\hline Sum & 16 & 141 & 150 & 302 & 94 & 334 & 1037 & 871 & 22018.58 & 500 \\
\hline
\end{tabular}

The reordering makes it a bit easier to get the coordinates for the boxes right:
```

> boxes( L2, boxpos = list(x = c(10, 65, 90, 65, 90, 50),

+ y = c(50, 95, 70, 5, 30, 50)),
+ show.R = FALSE, show.BE = TRUE, cex = 1 )

```

The resulting graph corresponds to the top panel in figure 11.1.

\subsection*{11.1.1.2 If state sequence does not matter}

We may consider the relative timing of the events Z and W irrelevant from the beginning and decide to ignore the order in which Z and W occur by specifying seq. states=FALSE (TRUE is the default), in which case we get a state called \(\mathrm{W}+\mathrm{Z}\). As above we also reorder the states to get an easier readable table:
```

> L3 <- mcutLexis(Lx, "time",
wh $=c(" d o Z ", ~ " d o W ")$,
new.states $=c(" Z ", ~ " W ")$,
seq.states $=$ FALSE,
new.scales $=c(" t f Z ", ~ " t f W ")$,
ties.resolve $=$ TRUE)
NOTE: Precursor states set to A
> L3 <- Relevel(L3, c("A", "Z", "W", "W+Z", "D"))
> summary (L3)
Transitions:

|  |  |  |  |  |  |  |  |  |  |
| :---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| From | A | Z | W | W+Z | D | Records: | Events: Risk time: | Persons: |  |
| A | 16 | 121 | 237 | 0 | 45 | 419 | 403 | 5621.22 | 419 |
| Z | 0 | 20 | 0 | 109 | 44 | 173 | 153 | 3304.06 | 173 |
| W | 0 | 0 | 65 | 70 | 124 | 259 | 194 | 7293.06 | 259 |
| W+Z | 0 | 0 | 0 | 65 | 121 | 186 | 121 | 5800.25 | 186 |
| Sum | 16 | 141 | 302 | 244 | 334 | 1037 | 871 | 22018.58 | 500 |

```
```

> boxes( L3, boxpos = list(x = c(10,70,70,90,45),

```
> boxes( L3, boxpos = list(x = c(10,70,70,90,45),
+ y = c(50,90,10,50,50)),
+ y = c(50,90,10,50,50)),
+ show.R = FALSE, show.BE = TRUE, cex = 1)
```

+ show.R = FALSE, show.BE = TRUE, cex = 1)

```

The resulting graph corresponds to the middle panel in figure 11.1.
It is of course also possible to use Relevel. Lexis to merge the two states in the object L2 "by hand" to obtain the same:
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline \[
\begin{aligned}
& >L 3 m \\
& >\text { summ }
\end{aligned}
\] & <- & \[
\begin{aligned}
& \text { Rele } \\
& y(L 3 m
\end{aligned}
\] & \[
\begin{aligned}
& \text { evel } \\
& \text { m) }
\end{aligned}
\] & & & \[
1,2,4,
\] & "W+Z" = & \(c(" W-Z ", ~ " Z-\) & ), 6)) \\
\hline \multicolumn{10}{|l|}{Transitions:} \\
\hline \multicolumn{10}{|c|}{To} \\
\hline From & A & Z & W & W+Z & D & Records: & Events: & Risk time: & Persons: \\
\hline A & 16 & 121 & 237 & 0 & 45 & 419 & 403 & 5621.22 & 419 \\
\hline Z & 0 & 20 & 0 & 109 & 44 & 173 & 153 & 3304.06 & 173 \\
\hline W & 0 & 0 & 65 & 70 & 124 & 259 & 194 & 7293.06 & 259 \\
\hline W+Z & 0 & 0 & 0 & 65 & 121 & 186 & 121 & 5800.25 & 186 \\
\hline Sum & 16 & 141 & 302 & 244 & 334 & 1037 & 871 & 22018.58 & 500 \\
\hline
\end{tabular}

We see we get the same result as L3. In fact it would have sufficient to say Relevel(L2, list("W+Z" = \(c(" W-Z ", " Z-W "))\) ), but the ordering of the states would have been different.

\subsection*{11.1.2 rcutLexis: Recurrent events - no memory}

A somewhat different variant is where we do not keep track of persons' history but only the currently occupied state. This may for example be the case where it is possible to have both Z and W as recurrent states. This is handled by the function rcutLexis ("r" for recurrent), which requires the cut dates in "long" form, that is with one record per transition with variables lex.id, cut-date of transition and new. state-the state to which a transition occur:
```

> lcut <- with(Lx, rbind(data.frame(lex.id,

+ cut = doZ,
new.state = "Z"),
data.frame(lex.id,
cut = doW,
new.state = "W")))
> lcut <- lcut[!is.na(lcut$cut),]
> lcut <- lcut[order(lcut$lex.id,lcut\$cut),]
> print(lcut[1:10,], row.names=FALSE)

```
\begin{tabular}{rrr} 
lex.id & cut new.state \\
1 & 1970.457 & W \\
1 & 1970.906 & Z \\
2 & 1969.559 & W \\
3 & 1954.139 & W \\
3 & 1967.152 & Z \\
4 & 1956.440 & Z \\
4 & 1959.234 & W \\
5 & 1948.834 & W \\
6 & 1956.971 & W \\
6 & 1965.801 & Z
\end{tabular}
> L4 <- rcutLexis (Lx, cut = lcut)
\(>L 4<-R e l e v e l(L 4, ~ c(" A ", " Z ", " W ", " D "))\)
> summary (L4)
Transitions:
        To
\begin{tabular}{crrrrrrrr} 
From & A & Z & W & D & Records: & Events: & Risk time: & Persons: \\
A & 16 & 121 & 237 & 45 & 419 & 403 & 5621.22 & 419 \\
Z & 0 & 44 & 109 & 92 & 245 & 201 & 5521.49 & 245 \\
W & 0 & 70 & 106 & 197 & 373 & 267 & 10875.87 & 373 \\
Sum & 16 & 235 & 452 & 334 & 1037 & 871 & 22018.58 & 500
\end{tabular}
```

> boxes(L4, boxpos = list(x = c(10,70,70,45),

+ y = c(50,85,15,50)),
+ show.R = FALSE, show.BE = TRUE, cex = 1)

```

The resulting graph corresponds to the lower panel in figure 11.1.
```

par(mfcol = c(3, 1))
boxes(L2, boxpos = list(x = c(10, 70, 95, 70, 95, 45),
y = c(50, 85, 70, 15, 30, 50)),
show.R = FALSE, show. BE = TRUE)
text(5, 90, "Full history\n(mcutLexis)", adj = c(0,1), cex = 1.7)
boxes(L3, boxpos = list(x = c(10, 70, 70, 95,45),
y =c(50,85,15,50,50)),
show.R = FALSE, show.BE = TRUE)
text(5, 90, "Order ignored\n(mcutLexis)", adj = c(0,1), cex = 1.7)
boxes(L4, boxpos = list(x = c(10,70,70,45),
y = c(50,85, 15,50)),
show.R = FALSE, show.BE = TRUE)
text(5, 90, "History ignored\n(rcutLexis)", adj = c(0,1), cex = 1.7)

```

The rcutLexis gives a result corresponding to merging of levels W and \(\mathrm{Z}-\mathrm{W}\) one one hand and Z and \(\mathrm{W}-\mathrm{Z}\) on the other. But rcutLexis also accommodates the more general case where recurrent transitions between \(Z\) and W occur, here is simple illustration:
```

> subset(L4, lex.id == 4)[,1:6]
lex.id time age lex.dur lex.Cst lex.Xst
4 1950.14 31.79 6.30 A Z
4 1956.44 38.09 2.79 Z Z W
41959.23 40.88 32.17 W D
> xcut <- data.frame(lex.id = 4,
cut = c(1956 + 0:4, 1975, 1990, 1995) + 0.1,
new.state = c("W","Z", "W", "Z","W","Z","W","Z") )
xcut
lex.id cut new.state
14 1956.1 W
41957.1 Z
4 1958.1 W
4 1959.1 Z
4 1960.1 W
4 1975.1 Z
4 1990.1 W
4 1995.1 Z

```
```

> subset(X4 <- rcutLexis(L4, xcut), lex.id == 4)[,1:6]
lex.id time age lex.dur lex.Cst lex.Xst
4 1950.14 31.79 5.96 A W
4 1956.10}37.75 0.34 W W W
4 1956.44 38.09 0.66 W W
4 1957.10 38.75 1.00 Z W W
4 1958.10
4 1959.10 40.75 0.13 Z Z Z
4 1959.23 40.88

```


The original transitions to Z at 1956.440 and to W at 1959.234 are preserved, and we also see that the new transition recorded after death (well after end of follow-up) is ignored.

Finally, we demonstrate that it is perfectly admissible with repeat recordings of the same state, it just results in
```

> xcut <- data.frame(lex.id = 4,
cut =c(1956 + 0:4, 1975, 1990, 1995) + 0.1,

+ new.state = c("W","W", "Z", "Z", "W","Z", "W", "Z") )
> xcut
lex.id cut new.state
14 1956.1 W
2 4 1957.1 W
3 4 1958.1 Z
4 4 1959.1 Z
5 4 1960.1 W
6 4 1975.1 Z
7 4 1990.1 W
8 1995.1 Z
> subset(X4 <- rcutLexis(L4, xcut), lex.id == 4)[,1:6]
lex.id time age lex.dur lex.Cst lex.Xst
4 1950.14 31.79 5.96 A W
4 1956.10 37.75 0.34 W
4 1956.44 38.09 0.66 W W
4 1957.10}38.75 1.00 W W Z
4 1958.10}30.75 1.00 Z Z Z
4 1959.10 40.75 0.13 Z Z
4 1959.23 40.88 0.87 Z W
4 1960.10 41.75 15.00 W Z

```

```

    4 1990.10 71.75 1.30 W W
    ```


Figure 11.1: States and transitions in the three different cases.
Top: keeping track of the sequence of states visited, constructed by mcutLexis using the argument seq. states=TRUE (the default).
Middle: keeping track of states visited, bug ignoring visit order. constructed by mcutLexis using the argument seq. states=FALSE. Can be obtained from the top panel by merging states Z-W and W-Z.
Bottom: only keeping track of the last visited state, ignoring history, constructed by rcutLexis. Can be obtained from the top panel by merging states \(\mathrm{Z}-\mathrm{W}\) and W and states \(\mathrm{W}-\mathrm{Z}\) and Z .
. ./graph/cuts-all3

\subsection*{11.2 Adding time-dependent variables}

If time-dependent variables are binary, such as for example "occurrence of CVD diagnosis" it may be relevant to define a new state as, say, CVD; this is the business of cut.Lexis and its cousins. But if we want to append quantitative variables that in principle can take any (positive) value at different times we need special functions for that. The functions addCov.Lexis and addDrug.Lexis are designed for this in different situations. The functions are S3 methods for Lexis objects, so in code you can omit the ".Lexis".

The function addCov. Lexis provides the ability to amend a Lexis object with clinical measurements taken at different times, and propagate the values as LOCF (Last Observation Carried Forward) to all subsequent records. This means that time-splitting of a Lexis object after adding clinical measurements will be meaningful, because both splitLexis and splitMulti will carry variables forward to the split records. The follow-up in the resulting Lexis object will be cut at dates of clinical measurement.

As opposed to this, addDrug.Lexis will use drug information at each date of recorded drug purchase, and subsequently compute cumulative exposure measures at the times in the resulting Lexis object. This is essentially done by linear interpolation, so it will not be meaningful to further split an object resulting from addDrug.Lexis-LOCF is not meaningful for continuously time-varying covariates such as cumulative exposure.

If persons have very frequent drug purchases, the intervals may become very small and the sheer number of records may present an impediment to practical analysis. Therefore the function coarse.Lexis is provided to collapse adjacent follow-up records, to facilitate practical analysis.

In order to illustrate the working of the two functions we load the relevant packages and define a small utility to compactify the printing of data frames with a given number of digits after the decimal point.
```

> Iibrary(Epi)
> library(popEpi)
> library(tidyverse)

```

\subsection*{11.2.1 addCov.Lexis}

\subsection*{11.2.1.1 Rationale}

The function has arisen out of a need to attach values measured at clinical visits to a Lexis object representing follow-up for events constituting a multistate model. Hence the data frame with measurements at clinical visits will be called clin for mnemonic reasons.

\subsection*{11.2.1.2 The example data}

For illustration we devise a small bogus cohort of 3 people, where we convert the character dates into numerical variables (fractional years) using cal.yr. Note that we are using a character variable as id:
```

xcoh <- structure(list(id = c("A", "B", "C"),
birth = c("1952-07-14", "1954-04-01", "1987-06-10"),
entry = c("1965-08-04", "1972-09-08", "1991-12-23"),
exit = c("1997-06-27", "1995-05-23", "1998-07-24"),
fail =c(1, 0, 1) ),
.Names = c("id", "birth", "entry", "exit", "fail"),
row.names = c("1", "2", "3"),
class = "data.frame" )
xcoh$dob <- cal.yr(xcoh$birth)
xcoh$doe <- cal.yr(xcoh$entry)
> xcoh$dox <- cal.yr(xcoh$exit )
> xcoh

|  | id | birth | entry | exit fail | dob | doe | dox |  |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 1 | A | $1952-07-14$ | $1965-08-04$ | $1997-06-27$ | 1 | 1952.533 | 1965.589 | 1997.485 |
| 2 | B | $1954-04-01$ | $1972-09-08$ | $1995-05-23$ | 0 | 1954.246 | 1972.686 | 1995.388 |
| 3 | C | $1987-06-10$ | $1991-12-23$ | $1998-07-24$ | 1 | 1987.437 | 1991.974 | 1998 |

```

\subsection*{11.2.1.3 A Lexis object}

Define this as a Lexis object with timescales calendar time (per, period) and age (age):
```

> Lcoh <- Lexis(entry = list(per = doe),

+ exit = list(per = dox,
+ age = dox - dob),
+ id = id,
+ exit.status = factor(fail, 0:1, c("Alive","Dead")),
+ data = xcoh)
NOTE: entry.status has been set to "Alive" for all.
> str(Lcoh)
Classes 'Lexis' and 'data.frame': 3 obs. of 14 variables:
\$ per : 'cal.yr' num 1966 1973 1992
\$ age : 'cal.yr' num 13.06 18.44 4.54
\$ lex.dur: 'cal.yr' num 31.9 22.7 6.58
\$ lex.Cst: Factor w/ 2 levels "Alive","Dead": 1 1 1
\$ lex.Xst: Factor w/ 2 levels "Alive","Dead": 2 1 2
\$ lex.id : chr "A" "B" "C"
\$ id : chr "A" "B" "C"
\$ birth : chr "1952-07-14" "1954-04-01" "1987-06-10"
\$ entry : chr "1965-08-04" "1972-09-08" "1991-12-23"
\$ exit : chr "1997-06-27" "1995-05-23" "1998-07-24"
\$ fail : num 1 0 1
\$ dob : 'cal.yr' num 1953 1954 1987
\$ doe : 'cal.yr' num 1966 1973 1992
\$ dox : 'cal.yr' num 1997 1995 1999
    - attr(*, "time.scales")= chr [1:2] "per" "age"
    - attr(*, "time.since")= chr [1:2] "" ""
    - attr(*, "breaks")=List of 2
..\$ per: NULL
..\$ age: NULL
> (Lx <- Lcoh[,1:6])
lex.id per age lex.dur lex.Cst lex.Xst
A 1965.59 13.06 31.90 Alive Dead
B 1972.69 18.44 22.70 Alive Alive
C 1991.97 4.54 6.58 Alive Dead

```

\subsection*{11.2.1.4 Factor or character lex.id?}

Note that when the id argument to Lexis is a character variable then the lex.id will be a factor. Which, if each person has a lot of records may save time, but if you subset a Lexis object may be a waste of space. Moreover, merging (i.e. joining in the language of tidyverse) may present problems with different levels of factors. merge from the base R, will coerce to factor with union of levels as levels (including also levels that are not assumed in data), whereas the _join functions from dplyr will coerce to character.

Thus the most reasonable strategy thus seems to keep lex.id as a character variable.
```

> Lx$lex.id <- as.character(Lx$lex.id)
> str(Lx)
Classes 'Lexis' and 'data.frame': 3 obs. of 6 variables:
\$ per : 'cal.yr' num 1966 1973 1992
\$ age : 'cal.yr' num 13.06 18.44 4.54
\$ lex.dur: 'cal.yr' num 31.9 22.7 6.58
\$ lex.Cst: Factor w/ 2 levels "Alive","Dead": 1 1 1
\$ lex.Xst: Factor w/ 2 levels "Alive","Dead": 2 1 2
\$ lex.id : chr "A" "B" "C"
- attr(*, "time.scales")= chr [1:2] "per" "age"
- attr(*, "time.since")= chr [1:2] "" ""
- attr(*, "breaks")=List of 2
..\$ per: NULL
..\$ age: NULL
> LX

```
```

lex.id per age lex.dur lex.Cst lex.Xst
A 1965.59 13.06 31.90 Alive Dead
B 1972.69 18.44 22.70 Alive Alive
C 1991.97 4.54 6.58 Alive Dead

```

\subsection*{11.2.1.5 Clinical measurements}

Then we generate data frame with clinical examination data, that is date of examination in per, some bogus clinical measurements and also names of the examination rounds:
```

> clin <- data.frame(lex.id = c("A", "A", "A", "C", "B", "C"),

+ per =c(1983.3, 1975.2, 1971.7,1996.2, 1990.6, 1989.2),
bp =c(120, 135, 140, 160, 157, 145),
chol = c(6,NA, 5, 8, 9, 6),
xnam = c("X3", "X2", "X1", "X1", "X2", "XO"),
stringsAsFactors = FALSE)
+ str(clin)
'data.frame': 6 obs. of 5 variables:
\$ lex.id: chr "A" "A" "A" "C" ...
\$ per : num 1983 1975 1972 1996 1991 ...
\$ bp : num 120 135 140 160 157 145
\$ chol : num 6 NA 5 8 9 6
\$ xnam : chr "X3" "X2" "X1" "X1" ...
> clin
lex.id per bp chol xnam
1 A 1983.3 120 6 X3
2 A 1975.2 135 NA X2
3 A 1971.7 140 5 X1
4 C 1996.2 160 8 X1
5 llllll

```

Note that we have chosen a measurement for person C from 1989-before the person's entry to the study, and have an NA for chol for person A.

\subsection*{11.2.1.6 Adding clinical data}

There is a slightly different behaviour according to whether the variable with the name of the examination is given or not, and whether the name of the (incomplete) time scale is given or not:
```

> (Cx <- addCov.Lexis(Lx, clin))

| lex.id | per | age | tfc | lex.dur | lex.Cst | lex. Xst | exnam | p | 1 | xnam |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A | 1965.59 | 13.06 | NA | 6.11 | Alive | Alive | <NA> | NA | NA | <NA> |
| A | 1971.70 | 19.17 | 0.00 | 3.50 | Alive | Alive | ex1 | 140 | 5 | X1 |
| A | 1975.20 | 22.67 | 0.00 | 8.10 | Alive | Alive | ex2 | 135 | NA | X2 |
| A | 1983.30 | 30.77 | 0.00 | 14.19 | Alive | Dead | ex3 | 120 | 6 | X3 |
| B | 1972.69 | 18.44 | NA | 17.91 | Alive | Alive | <NA> | NA | NA | <NA> |
| B | 1990.60 | 36.35 | 0.00 | 4.79 | Alive | Alive | ex1 | 157 | 9 | X2 |
| C | 1991.97 | 4.54 | 2.77 | 4.23 | Alive | Alive | ex1 | 145 | 6 | X0 |
| C | 1996.20 | 8.76 | 0.00 | 2.36 | Alive | Dead | ex2 | 160 |  |  |

```

Note that the clinical measurement preceding the entry of person \(C\) is included, and that the tfc (time from clinical measurement) is correctly rendered, we a non-zero value at date of entry.

We also see that a variable exnam is constructed with consecutive numbering of examinations within each person, while the variable xnam is just carried over as any other.

If we explicitly give the name of the variable holding the examination names we do not get a constructed exnam. We can also define the name of the (incomplete) timescale to hold the time since measurement, in this case as tfCl :
```

> (Dx <- addCov.Lexis(Lx, clin, exnam = "xnam", tfc = "tfCl"))

```
\begin{tabular}{rrrrrrrrrr} 
lex.id & per & age & tfCl & lex.dur & lex. Cst & lex. Xst & xnam & bp & chol \\
A & 1965.59 & 13.06 & NA & 6.11 & Alive & Alive & <NA> & NA & NA \\
A & 1971.70 & 19.17 & 0.00 & 3.50 & Alive & Alive & X1 & 140 & 5 \\
A & 1975.20 & 22.67 & 0.00 & 8.10 & Alive & Alive & X2 & 135 & NA \\
A & 1983.30 & 30.77 & 0.00 & 14.19 & Alive & Dead & X3 & 120 & 6 \\
B & 1972.69 & 18.44 & NA & 17.91 & Alive & Alive & <NA> & NA & NA \\
B & 1990.60 & 36.35 & 0.00 & 4.79 & Alive & Alive & X2 & 157 & 9 \\
C & 1991.97 & 4.54 & 2.77 & 4.23 & Alive & Alive & X0 & 145 & 6 \\
C & 1996.20 & 8.76 & 0.00 & 2.36 & Alive & Dead & X1 & 160 & 8
\end{tabular}
```

> summary(Dx, t=T)
Transitions:
To
From Alive Dead Records: 者 Events: Risk time:
Timescales:
per age tfCl

```

\subsection*{11.2.1.7 Exchanging split and add}

As noted before addCov. Lexis uses LOCF, and so it is commutative with splitLexis:
```

> \# split BEFORE add
> Lb <- addCov.Lexis(splitLexis(Lx,

+ time.scale = "age",
breaks = seq(0, 80, 5)),
clin,
exnam = "xnam" )
Lb
lex.id per age tfc lex.dur lex.Cst lex.Xst xnam bp chol
A 1965.59 13.06 NA 1.94 Alive Alive <NA> NA NA
A 1967.53 15.00 NA 4.17 Alive Alive <NA> NA NA
A 1971.70 19.17 0.00 0.83 Alive Alive X1 140 5
A 1972.53 20.00 0.83 2.67 Alive Alive X1 140 5
A 1975.20 22.67 0.00 2.33 Alive Alive X2 135 NA
A 1977.53 25.00 2.33 5.00 Alive Alive X2 135 NA
A 1982.53 30.00 7.33 0.77 Alive Alive X2 135 NA
A 1983.30 30.77 0.00
A 1992.53 40.00 9.23 4.95 Alive Dead X3 120 6
B 1972.69 18.44 NA 1.56 Alive Alive <NA> NA NA
B 1974.25 20.00 NA 5.00 Alive Alive <NA> NA NA
B 1979.25 25.00 NA N
B 1989.25 35.00 NA 1.35 Alive Alive <NA> NA NA
B 1990.60 36.35 0.00 3.65 Alive Alive X2 157 9
B 1994.25 40.00 3.65 1.14 Alive Alive X2 157 9
C 1991.97 4.54 2.77 0.46 Alive Alive X0 145 6
C 1992.44
C 1997.44 10.00 1.24 1.12 Alive Dead X1 160 8
> \#
> \# split AFTER add
> La <- splitLexis(addCov.Lexis(Lx,
clin,
exnam = "xnam" ),
time.scale = "age",
breaks = seq(0, 80, 5))
> La
lex.id per age tfc lex.dur lex.Cst lex.Xst xnam bp chol
A 1965.59 13.06 NA NA N N N N 94 Alive

```
CovDrug
\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|}
\hline A & 1971 & 19.17 & 0.00 & 0.83 & Alive & Alive & X1 & 140 & 5 \\
\hline A & 1972.53 & 20.00 & 0.83 & 2.67 & Alive & Alive & X1 & 140 & 5 \\
\hline A & 1975.20 & 22.67 & 0.00 & 2.33 & Alive & Alive & X2 & 135 & NA \\
\hline A & 1977.53 & 25.00 & 2.33 & 5.00 & Alive & Alive & X2 & 135 & NA \\
\hline A & 1982.53 & 30.00 & 7.33 & 0.77 & Alive & Alive & X2 & 135 & NA \\
\hline A & 1983.30 & 30.77 & 0.00 & 4.23 & Alive & Alive & X3 & 120 & 6 \\
\hline A & 1987.53 & 35.00 & 4.23 & 5.00 & Alive & Alive & X3 & 120 & 6 \\
\hline A & 1992.53 & 40.00 & 9.23 & 4.95 & Alive & Dead & X3 & 120 & 6 \\
\hline B & 1972.69 & 18.44 & NA & 1.56 & Alive & Alive & <NA> & NA & NA \\
\hline B & 1974.25 & 20.00 & NA & 5.00 & Alive & Alive & <NA> & NA & NA \\
\hline B & 1979.25 & 25.00 & NA & 5.00 & Alive & Alive & <NA> & NA & NA \\
\hline B & 1984.25 & 30.00 & NA & 5.00 & Alive & Alive & <NA> & NA & NA \\
\hline B & 1989.25 & 35.00 & NA & 1.35 & Alive & Alive & <NA> & NA & NA \\
\hline B & 1990.60 & 36.35 & 0.00 & 3.65 & Alive & Alive & X2 & 157 & 9 \\
\hline B & 1994.25 & 40.00 & 3.65 & 1.14 & Alive & Alive & X2 & 157 & 9 \\
\hline C & 1991.97 & 4.54 & 2.77 & 0.46 & Alive & Alive & X0 & 145 & 6 \\
\hline C & 1992.44 & 5.00 & 3.24 & 3.76 & Alive & Alive & X0 & 145 & 6 \\
\hline C & 1996.20 & 8.76 & 0.00 & 1.24 & Alive & Alive & X1 & 160 & 8 \\
\hline & 1997.44 & 10.00 & 1.24 & 1.12 & Alive & Dead & X1 & 160 & 8 \\
\hline
\end{tabular}

We see that the results are identical bar the sequence of variables and attributes.
We can more explicitly verify that the resulting data frames are the same:
> La\$tfc == Lb\$tfc
[1] NA NA TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE NA NA NA NA NA
[16] TRUE TRUE TRUE TRUE TRUE TRUE
> La\$age == Lb\$age
[1] TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE
[16] TRUE TRUE TRUE TRUE TRUE TRUE
> La\$per == Lb\$per
[1] TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE
[16] TRUE TRUE TRUE TRUE TRUE TRUE

The same goes for splitMulti:
```

> \# split BEFORE add
>Mb <- addCov.Lexis(splitMulti(Lx, age = seq(0, 80, 5)),

+ clin,
exnam = "xnam" )
> \#
> \# split AFTER add
> Ma <- splitMulti(addCov.Lexis(Lx,
+ clin,
exnam = "xnam" ),
+ age = seq(0, 80, 5))
> La$tfc == Lb$tfc

```
[1] NA NA TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE NA NA NA NA NA [16] TRUE TRUE TRUE TRUE TRUE TRUE
```

> Ma$tfc == Mb$tfc

```
[1] NA NA TRUE TRUE TRUE TRUE TRUE TRUE TRUE TRUE NA NA NA NA NA [16] TRUE TRUE TRUE TRUE TRUE TRUE

In summary, because both addCov. Lexis and splitLexis/splitMulti use LOCF for covariates the order of splitting and adding does not matter.

This is certainly not the case with addDrug.Lexis as we shall see.

\subsection*{11.2.1.8 Filling the NAs}

As mentioned in the beginning, clinical measurements given as NA in the clin data frame are carried forward. If you want to have these replaced by 'older' clinical measurements you can do that explicitly by dplyr::fill:
> cov <- c("bp", "chol")
> Lx <- La
> Lx[,cov] <- as.data.frame(group_by(La, lex.id) \%>\% fill(cov))[,cov]
> La
    lex.id per age tfc lex.dur lex.Cst lex.Xst xnam bp chol
        A 1965.5913 .06 NA 1.94 Alive Alive <NA> NA NA
        A 1967.53 15.00 NA 4.17 Alive Alive <NA> NA NA
        \(\begin{array}{llllllllll}\text { A } 1971.70 & 19.17 & 0.00 & 0.83 & \left.\text { Alive Alive } \begin{array}{ll}\text { X1 } & 140 \\ 5\end{array}\right)\end{array}\)
        A 1972.5320 .000 .83 2.67 Alive Alive X1 1405
        A \(1975.2022 .670 .00 \quad 2.33\) Alive Alive X2 135 NA
        \(\begin{array}{lllllllll}\text { A } & 1977.53 & 25.00 & 2.33 & 5.00 & \text { Alive } & \text { Alive } & \text { X2 } & 135 \\ \text { A } & 1982.53 & 30.00 & 7.33 & 0.77 & \text { NA } \\ \text { Alive } & \text { Alive } & \text { X2 } & 135 & \text { NA }\end{array}\)
        \(\begin{array}{llllllllll}\text { A } & 1983.30 & 30.77 & 0.00 & 4.23 & \text { Alive } & \text { Alive } & \text { X3 } & 120 & 6 \\ \text { A } & 1987.53 & 35.00 & 4.23 & 5.00 & \text { Alive } & \text { Alive } & \text { X3 } & 120 & 6\end{array}\)
        \(\begin{array}{lllllll}\text { A } & 1992.53 & 40.00 & 9.23 & 4.95 & \text { Alive Dead X3 } 120 & 6\end{array}\)
        \(\begin{array}{llllllll}\text { B } & 1972.69 & 18.44 & \text { NA } & 1.56 & \text { Alive } & \text { Alive <NA> } & \text { NA } \\ \text { B } & 1974.25 & 20.00 & \text { NA } & 5.00 & \text { Alive } & \text { Alive <NA> } & \text { NA } \\ \text { NA }\end{array}\)
        B 1979.2525 .00 NA 5.00 Alive Alive <NA> NA NA
        B 1984.2530 .00 NA 5.00 Alive Alive <NA 10 NA NA
        B 1989.2535 .00 NA 1.35 Alive Alive <NA> NA NA
        \begin{tabular}{lllllllll} 
B & 1990.60 & 36.35 & 0.00 & 3.65 & Alive & Alive & X2 & 157 \\
B & 1994.25 & 40.00 & 3.65 & 1.14 & Alive & Alive & X2 & 157 \\
\hline
\end{tabular}
        \(\begin{array}{llllllll}\text { C } & 1991.97 & 4.54 & 2.77 & 0.46 & \left.\text { Alive Alive } \begin{array}{ll}\text { X0 } & 145 \\ 6\end{array}\right)\end{array}\)
        \begin{tabular}{lllllllll} 
C & 1992.44 & 5.00 & 3.24 & 3.76 & Alive & Alive & X0 & 145 \\
C & 1996.20 & 8.76 & 0.00 & 1.24 & Alive & Alive & X1 & 160 \\
\hline
\end{tabular}
        C 1997.4410 .00 1.24 1.12 Alive Dead X1 1608
\(>L X\)
lex.id per age tfc lex.dur lex.Cst lex.Xst xnam bp chol
        A 1965.59 13.06 NA 1.94 Alive Alive <NA> NA NA
        A 1967.53 15.00 NA 4.17 Alive Alive <NA> NA NA
        \(\begin{array}{llllllll}\text { A } 1971.70 & 19.17 & 0.00 & 0.83 & \text { Alive Alive X1 } 140 \quad 5\end{array}\)
        A \(1972.5320 .000 .83 \quad 2.67\) Alive Alive X1 \(140 \quad 5\)
        \(\begin{array}{lllllllll}\text { A } 1975.20 & 22.67 & 0.00 \quad 2.33 \quad \text { Alive Alive X2 } 135 \quad 5\end{array}\)
        \(\begin{array}{lllllllll}\text { A } & 1977.53 & 25.00 & 2.33 & 5.00 & \text { Alive } & \text { Alive } & \text { X2 } & 135 \\ \text { A } & 1982.53 & 30.00 & 7.33 & 0.77 & \text { Alive } & \text { Alive } & \text { X2 } & 135 \\ 5\end{array}\)
        \begin{tabular}{lllllllll} 
A & 1983.30 & 30.77 & 0.00 & 4.23 & Alive & Alive & X3 & 120 \\
A & 1987.53 & 35.00 & 4.23 & 5.00 & Alive & Alive & X3 & 120 \\
\hline
\end{tabular}
    \(\begin{array}{llllllll}A & 1992.53 & 40.00 & 9.23 & 4.95 & \text { Alive Dead X3 } 120 \quad 6\end{array}\)
    B 1972.69 18.44 NA 1.56 Alive Alive <NA> NA NA
    B \(1974.2520 .00 \mathrm{NA} \quad 5.00\) Alive Alive <NA> NA NA
    B 1979.25 25.00 NA 5.00 Alive Alive <NA> NA NA
    B 1984.2530 .00 NA 5.00 Alive Alive <NA> NA NA
    B 1989.25 35.00 NA 1.35 Alive Alive <NA> NA NA
    \(\begin{array}{lllllllll}B & 1990.60 & 36.35 & 0.00 & 3.65 & \text { Alive Alive X2 } & 157 \quad 9\end{array}\)
    \begin{tabular}{lrrrlllll} 
B & 1994.25 & 40.00 & 3.65 & 1.14 & Alive & Alive & X2 & 157 \\
C & 1991.97 & 4.54 & 2.77 & 0.46 & Alive & Alive & X0 & 145 \\
\hline
\end{tabular}
    \begin{tabular}{lllllllll} 
C & 1992.44 & 5.00 & 3.24 & 3.76 & Alive & Alive & X0 & 145 \\
C & 1996.20 & 8.76 & 0.00 & 1.24 & Alive & Alive & X1 & 160 \\
\hline
\end{tabular}
    \(\begin{array}{lllllllll}C & 1997.44 & 10.00 & 1.24 & 1.12 & \text { Alive Dead X1 } 160 & 8\end{array}\)

The slightly convoluted code where the covariate columns are explicitly selected, owes to the fact that the dplyr functions will strip the data frames of the Lexis attributes. So you need to use fill to just generate the covariates and not touch the Lexis object itself.

The facility of propagating older clinical measurements should of course be built into addCov.Lexis as a separate argument.

Note that the tfc, time from clinical measurement is now not a valid variable any more; the 5 in chol is measured in 1971.5 but tfc is reset to 0 at 1977.3, despite only bp but not chol is measured at that time. If you want that remedied you will have to use addCov.Lexis twice, one with a clin data frame with only
bp and another with a data frame with only chol, each generating a differently named time from clinical measurement.

This is a problem that comes from the structure of the supplied data not from the program features; in the example we had basically measurements of different clinical variables at different times, and so necessarily also a need for different times since last measurement.

\subsection*{11.2.2 addDrug.Lexis}

The general purpose of the function is to amend a Lexis object with drug exposure data. The data base with information on a specific drug is assumed to be a data frame with one entry per drug purchase (or prescription), containing the date and the amount purchased and optionally the prescribed dosage (that is how much is supposed to be taken per time). We assume that we have such a data base for each drug of interest, which also includes an id variable, lex.id, that matches the lex.id variable in the Lexis object.

For each type of drug the function derives 4 variables:
ex : logical, is the person currently exposed
tf : numeric, time since first purchase
ct : numeric, cumulative time on the drug
cd : numeric, cumulative dose of the drug
These names are pre- or suf-fixed by the drug name, so that exposures to different drugs can be distinguished; see the examples. The variables all refer to the status of the perons at the beginning of the intervals.

The resulting Lexis object has extra records corresponding to cuts at each drug purchase and at each expiry date of a purchase. For each purchase the coverage period is derived (different methods for this are available), and if the end of this (the expiry date) is earlier than the next purchase of the person, the person is considered off the drug from the expiry date, and a cut in the follow-up is generated with ex set to FALSE.

\subsection*{11.2.2.1 The help example}

The following is a slight modification of the code from the example subsection of the help page for addDrug.Lexis

First we generate follow-up of 2 persons, and split the follow-up in intervals of length 0.6 years along the calendar time scale, per:
```

> fu <- data.frame(doe =c(2006, 2008),

+ dox = c(2015, 2018),
dob = c(1950, 1951),
xst = factor(c("A","D")))
Lx <- Lexis(entry = list(per = doe,
age = doe- dob),
exit = list(per = dox),
exit.status = xst,
data = fu)
NOTE: entry.status has been set to "A" for all.
> Lx <- subset(Lx, select = -c(doe, dob, dox, xst))
> Sx <- splitLexis(Lx, "per", breaks = seq(1990, 2020, 0.6))
> summary(Sx)
Transitions:

|  | To |  |  |  |  |
| ---: | ---: | ---: | ---: | ---: | ---: |
| From | A | D | Records: | Events: Risk time: | Persons: |
| A 32 | 1 | 33 | 1 | 19 | 2 |

```

Then we generate drug purchases for these two persons, one data frame for each of the drugs F and G. Note that we generate lex.id \(\in(1,2)\) referring to the values of lex.id in the lexis object Sx.
```

set.seed(1952)
rf <- data.frame(per = c(2005 + runif(12, 0, 10)),
amt = sample(2:4, 12, replace = TRUE),
lex.id = sample(1:2, 12, replace = TRUE)) %>%
arrange(lex.id, per)
rg <- data.frame(per = c(2009 + runif(10, 0, 10)),
amt = sample(round(2:4/3,1), 10, replace = TRUE),
lex.id = sample(1:2, 10, replace = TRUE)) %>%
arrange(lex.id, per)

```

We do not need to sort the drug purchase data frames (it is done internally by addDrug. Lexis), but it makes it easier to grasp the structure.

The way purchase data is supplied to the function is in a list where each element is a data frame of purchase records for one type of drug. The list must be named, the names will be used as prefixes of the generated exposure variables. We can show the resulting data:
```

> pdat <- list(F = rf, G = rg)
> pdat
\$F
per amt lex.id
2013.964 4 1
2014.251 4 1
2014.509 3 1
2014.990 2 1
2005.311 2 2
2007.595 3 2
2011.710 4 2
2011.812 3 2
2012.865 2 2
2013.331 2 2
2013.417 2 2
2013.932 2 2
per amt lex.id
2009.630 1.3 1
2012.987 1.3 1
2013.018 1.3 1
2016.954 0.7 1
2017.924 1.0 1
2009.089 1.3 2
2011.599 0.7 2
2014.566 1.0 2
2016.912 0.7 2
2017.004 1.0 2
> Lx
lex.id per age lex.dur lex.Cst lex.Xst

```

Note that we have generated data so that there are drug purchases of drug F that is before start of follow-up for person 2.

We can then expand the time-split Lexis object, Sx with the drug information. addDrug.Lexis not only adds 8 variables ( 4 from each drug), it also adds records representing cuts at the purchase dates and possible expiry dates.
```

> summary(Sx) ; names(Sx)
Transitions:

```


NOTE: timescale taken as 'per'
NOTE: end of exposure based on differences in purchase times (per) and amount purchased (amt).
> summary(ex1) ; names(ex1)
Transitions:
To
From A D Records: Events: Risk time: Persons:
\begin{tabular}{llllll} 
A 64 & 1 & 65 & 1 & 19 & 2
\end{tabular}
[1] "lex.id" "per" "age" "lex.dur" "lex.Cst" "lex.Xst" "F.ex"
[8] "F.tf" "F.ct" "F.cd" "G.ex" "G.tf" "G.ct" "G.cd"
> ex1
lex.id per age lex.dur lex.Cst lex.Xst F.ex F.tf F.ct F.cd G.ex
\(12006.0056 .00 \quad 0.20\) A A FALSE 0.0000 .000 0.000 FALSE
\(12006.2056 .20 \quad 0.60 \quad\) A \(\quad\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
12006.8056 .80 A A FALSE \(0.0000 .000 \quad 0.000\) FALSE
\(12007.4057 .40 \quad 0.60\) A A FALSE \(0.0000 .000 \quad 0.000\) FALSE
\(12008.0058 .00 \quad 0.60\) A A FALSE 0.0000 .000 0.000 FALSE
\(12008.6058 .60 \quad 0.60\) A A FALSE \(0.0000 .000 \quad 0.000\) FALSE
12009.2059 .20 A A FALSE 0.0000 .000 0.000 FALSE
12009.6359 .63 A 0.17 A FALSE \(0.0000 .000 \quad 0.000\) TRUE
\begin{tabular}{llllllllll}
1 & 2009.80 & 59.80 & 0.60 & A & A FALSE & 0.000 & 0.000 & 0.000 & TRUE \\
1 & 2010.40 & 60.40 & 0.60 & A & A FALSE & 0.000 & 0.000 & 0.000 & TRUE
\end{tabular}
\(12011.0061 .00 \quad 0.60\) A A FALSE \(0.0000 .000 \quad 0.000\) TRUE
\(2011.6061 .60 \quad 0.60\) A A FALSE \(0.0000 .000 \quad 0.000\) TRUE
\(2012.2062 .20 \quad 0.60 \quad\) A A FALSE \(0.0000 .000 \quad 0.000\) TRUE
\(2012.8062 .80 \quad 0.19\) A A FALSE \(0.0000 .000 \quad 0.000\) TRUE
2012.9962 .99 A 0.03 A FALSE \(0.0000 .000 \quad 0.000\) TRUE
2013.0263 .02 A A A FALSE \(0.0000 .000 \quad 0.000\) TRUE
2013.0563 .05
0.35

A FALSE \(0.000 \quad 0.000 \quad 0.000\) FALSE
A FALSE \(0.0000 .000 \quad 0.000\) FALSE
2013.4063 .40 2013.9663 .96 2013.9663 .96 2014.0064 .00 2014.2564 .25 2014.2564 .25 2014.5164 .51 2014.5164 .51 2014.6064 .60 2014.7064 .70 2014.7064 .70 12014.9964 .99 2008.0057 .00 22008.6057 .60 2009.0958 .09 2009.2058 .20 22009.8058 .80 2010.4059 .40 22011.0060 .00 22011.0260 .02 2011.0260 .02 2011.6060 .60 2011.6060 .60 2011.7160 .71 2011.7160 .71 2011.8160 .81 22011.8960 .89 22012.2061 .20 2012.8061 .80 2012.8761 .87 2012.9561 .95 2013.3362 .33 2013.4062 .40 2013.4262 .42 \(2013.5062 .50 \quad 0.43 \quad\) A A FALSE 5.503 4.243 16.000 FALSE
2013.9362 .93 A 0.07 A TRUE 5.932 4.243 16.000 FALSE
\(2014.0063 .00 \quad 0.45\) A A TRUE 6.0004 .31116 .265 FALSE
2014.4563 .45 A 0.12 A FALSE 6.4474 .75818 .000 FALSE
22014.57 63.57 \(0.03 \quad\) A FALSE \(6.5664 .758 \quad 18.000\) TRUE
A FALSE 6.6004 .75818 .000 TRUE
2015.20 64.20 0.60 A A FALSE 7.200 4.758 18.000 TRUE
2 2015.80 64.80 0.60 A FALSE 7.800 4.758 18.000 TRUE
2016.40 65.40 0.51 A FALSE 8.400 4.75818 .000 TRUE
22016.9165 .91 A 0.09 A FALSE 8.912 4.758 18.000 TRUE
2017.0066 .00 A A FALSE 9.000 4.75818 .000 TRUE
2017.0066 .00 A 0.13 A FALSE 9.0044 .75818 .000 TRUE
2017.14 66.14 0.46 A FALSE 9.1354 .75818 .000 FALSE
\(22017.6066 .60 \quad 0.40 \quad\) D FALSE 9.6004 .75818 .000 FALSE
G.tf G.ct G.cd
0.0000 .0000 .000
\(0.000 \quad 0.0000 .000\)
0.0000 .0000 .000
\(0.000 \quad 0.0000 .000\)
\(0.000 \quad 0.0000 .000\)
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
\(0.170 \quad 0.1700 .066\)
\(0.770 \quad 0.770 \quad 0.298\)
\(1.370 \quad 1.370 \quad 0.531\)
\(1.970 \quad 1.970 \quad 0.763\)
2.5702 .5700 .995
3.1703 .1701 .228
\(3.357 \quad 3.3571 .300\)
3.3883 .3882 .600
3.4203 .4203 .900
3.7703 .4203 .900
\(4.334 \quad 3.420 \quad 3.900\)
4.3343 .4203 .900
\(4.370 \quad 3.420 \quad 3.900\)
\(4.6213 .420 \quad 3.900\)
\(4.6213 .420 \quad 3.900\)
\(4.8793 .420 \quad 3.900\)
\(4.879 \quad 3.420 \quad 3.900\)
\(4.970 \quad 3.420 \quad 3.900\)
\(5.073 \quad 3.4203 .900\)
\(5.073 \quad 3.420 \quad 3.900\)
5.3603 .4203 .900
\(0.000 \quad 0.0000 .000\)
0.0000 .0000 .000
\(0.000 \quad 0.000 \quad 0.000\)
0.1110 .1110 .057
\(0.711 \quad 0.711 \quad 0.368\)
1.3111 .3110 .679
1.9111 .9110 .990
1.9331 .9331 .001
1.9331 .9331 .001
2.5102 .5101 .300
2.5112 .5111 .300
2.6212 .6211 .358
2.6212 .6211 .358
2.7232 .7231 .410
2.8002 .8001 .450
3.1113 .1111 .611
3.7113 .7111 .922
\(3.776 \quad 3.776 \quad 1.956\)
3.8623 .8622 .000
4.2423 .8622 .000
4.3113 .8622 .000
4.3283 .8622 .000
4.4143 .8622 .000
\begin{tabular}{lll}
4.843 & 3.862 & 2.000 \\
4.911 & 3.862 & 2.000 \\
5.357 & 3.862 & 2.000 \\
5.477 & 3.862 & 2.000 \\
5.511 & 3.895 & 2.014 \\
6.111 & 4.495 & 2.270 \\
6.711 & 5.095 & 2.526 \\
7.311 & 5.695 & 2.782 \\
7.822 & 6.207 & 3.000 \\
7.911 & 6.295 & 3.673 \\
7.914 & 6.299 & 3.700 \\
8.046 & 6.430 & 4.700 \\
8.511 & 6.430 & 4.700
\end{tabular}
> ex2 <- addDrug.Lexis(Sx, pdat, method = "ext", grace = 0.5)
NOTE: timescale taken as 'per'
Values of grace has been recycled across 2 drugs
NOTE: end of exposure based on differences in purchase times (per)
    and amount purchased (amt).
> summary(ex2)
Transitions:
\begin{tabular}{rlrrl} 
To & & & \\
From & A D D Records: & Events: Risk time: & Persons: \\
A 62 & 1 & 63 & 1 & 19
\end{tabular}
NOTE: timescale taken as 'per'
NOTE: end of exposure based on purchase and dosage (dpt).
> summary(dos)
Transitions:
        To
From A D Records: Events: Risk time: Persons:
    \(\begin{array}{lllllll}\text { A } & 66 & 1 & 67 & 1 & 19 & 2\end{array}\)
\(>\) dos
lex.id per age lex.dur lex.Cst lex.Xst F.ex F.tf F.ct F.cd G.ex
        \(12006.0056 .00 \quad 0.20 \quad\) A A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        12006.2056 .20 A 0.60 A FALSE 0.0000 .000 0.000 FALSE
        \(12006.8056 .80 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12007.4057 .40 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12008.0058 .00 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12008.6058 .60 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12009.2059 .20 \quad 0.43 \quad\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        12009.6359 .63 A 0.17 A FALSE \(0.0000 .000 \quad 0.000\) TRUE
        12009.8059 .80 A A FALSE 0.05 .000 \(0.000 \quad 0.000\) TRUE
        12009.85 59.85 0.55 A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12010.4060 .40 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12011.0061 .00 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12011.6061 .60 \quad 0.60\) A FALSE 0.0000 .000 0.000 FALSE
        \(2012.2062 .20 \quad 0.60 \quad\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        2012.8062 .80 A 0.19 A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(2012.9962 .99 \quad 0.03\) A A FALSE \(0.000 \quad 0.000 \quad 0.000\) TRUE
        12013.0263 .02 A 0.22 A FALSE \(0.0000 .000 \quad 0.000\) TRUE
        12013.23 63.23 A 0.17 A FALSE 0.0000 .000 0.000 FALSE
        \(12013.4063 .40 \quad 0.56\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        12013.96 A 6.96 A TRUE 0.00 A \(0.000 \quad 0.000\) FALSE
        12013.96 A \(3.96 \quad 0.04 \quad\) A TRUE \(0.0000 .000 \quad 0.000\) FALSE
        \(12014.0064 .00 \quad 0.25\) A A TRUE \(0.0360 .036 \quad 0.497\) FALSE
        \(12014.2564 .25 \quad 0.00 \quad\) A A TRUE 0.2860 .286 4.000 FALSE
        \(2014.2564 .25 \quad 0.26\) A A TRUE 0.2860 .286 4.000 FALSE
        2014.5164 .51 A 0.00 A TRUE \(0.5450 .545 \quad\) 8.000 FALSE
        2014.5164 .51 A 0.09 A TRUE 0.5450 .545 8.000 FALSE
        \(2014.6064 .60 \quad 0.39 \quad\) A TRUE \(0.636 \quad 0.636 \quad 8.567\) FALSE
        \(2014.9964 .99 \quad 0.00 \quad\) A TRUE 1.0251 .02511 .000 FALSE
        \(12014.9964 .99 \quad 0.01 \quad\) A A TRUE 1.0251 .02511 .000 FALSE
\begin{tabular}{lllll}
2 & 2008.00 & 57.00 & 0.10 & A \\
2 & 2008.10 & 57.10 & 0.00 & A \\
2 & 2008.10 & 57.10 & 0.50 & A \\
2 & 2008.60 & 57.60 & 0.49 & A \\
2 & 2009.09 & 58.09 & 0.11 & A \\
2 & 2009.20 & 58.20 & 0.11 & A \\
2 & 2009.31 & 58.31 & 0.49 & A \\
2 & 2009.80 & 58.80 & 0.60 & A \\
2 & 2010.40 & 59.40 & 0.60 & A \\
2 & 2011.00 & 60.00 & 0.60 & A \\
2 & 2011.60 & 60.60 & 0.00 & A \\
2 & 2011.60 & 60.60 & 0.11 & A \\
2 & 2011.71 & 60.71 & 0.01 & A \\
2 & 2011.72 & 60.72 & 0.10 & A \\
2 & 2011.81 & 60.81 & 0.39 & A \\
2 & 2012.20 & 61.20 & 0.11 & A \\
2 & 2012.31 & 61.31 & 0.49 & A \\
2 & 2012.80 & 61.80 & 0.07 & A \\
2 & 2012.87 & 61.87 & 0.33 & A \\
2 & 2013.20 & 62.20 & 0.13 & A \\
2 & 2013.33 & 62.33 & 0.07 & A \\
2 & 2013.40 & 62.40 & 0.02 & A \\
2 & 2013.42 & 62.42 & 0.33 & A \\
2 & 2013.75 & 62.75 & 0.18 & A \\
2 & 2013.93 & 62.93 & 0.07 & A \\
2 & 2014.00 & 63.00 & 0.27 & A \\
2 & 2014.27 & 63.27 & 0.30 & A \\
2 & 2014.57 & 63.57 & 0.03 & A \\
2 & 2014.60 & 63.60 & 0.13 & A \\
2 & 2014.73 & 63.73 & 0.47 & A \\
2 & 2015.20 & 64.20 & 0.60 & A \\
2 & 2015.80 & 64.80 & 0.60 & A \\
2 & 2016.40 & 65.40 & 0.51 & A \\
2 & 2016.91 & 65.91 & 0.09 & A \\
2 & 2017.00 & 66.00 & 0.00 & A \\
2 & 2017.00 & 66.00 & 0.17 & A \\
2 & 2017.17 & 66.17 & 0.43 & A \\
2 & 2017.60 & 66.60 & 0.40 & A
\end{tabular}
\begin{tabular}{lrrrrr} 
A & TRUE & 0.000 & 0.405 & 2.428 & FALSE \\
A & FALSE & 0.095 & 0.500 & 3.000 & FALSE \\
A & FALSE & 0.095 & 0.500 & 3.000 & FALSE \\
A & FALSE & 0.600 & 0.500 & 3.000 & FALSE \\
A & FALSE & 1.089 & 0.500 & 3.000 & TRUE \\
A & FALSE & 1.200 & 0.500 & 3.000 & TRUE \\
A & FALSE & 1.306 & 0.500 & 3.000 & FALSE \\
A & FALSE & 1.800 & 0.500 & 3.000 & FALSE \\
A & FALSE & 2.400 & 0.500 & 3.000 & FALSE \\
A & FALSE & 3.000 & 0.500 & 3.000 & FALSE \\
A & FALSE & 3.599 & 0.500 & 3.000 & TRUE \\
A & FALSE & 3.600 & 0.500 & 3.000 & TRUE \\
A & TRUE & 3.710 & 0.500 & 3.000 & TRUE \\
A & TRUE & 3.716 & 0.506 & 3.216 & FALSE \\
A & TRUE & 3.812 & 0.602 & 7.000 & FALSE \\
A & TRUE & 4.200 & 0.990 & 9.326 & FALSE \\
A & FALSE & 4.312 & 1.102 & 10.000 & FALSE \\
A & FALSE & 4.800 & 1.102 & 10.000 & FALSE \\
A & TRUE & 4.865 & 1.102 & 10.000 & FALSE \\
A & FALSE & 5.199 & 1.435 & 12.000 & FALSE \\
A & TRUE & 5.331 & 1.435 & 12.000 & FALSE \\
A & TRUE & 5.400 & 1.504 & 13.606 & FALSE \\
A & TRUE & 5.417 & 1.521 & 14.000 & FALSE \\
A & FALSE & 5.750 & 1.855 & 16.000 & FALSE \\
A & TRUE & 5.932 & 1.855 & 16.000 & FALSE \\
A & TRUE & 6.000 & 1.923 & 16.409 & FALSE \\
A & FALSE & 6.265 & 2.188 & 18.000 & FALSE \\
A & FALSE & 6.566 & 2.188 & 18.000 & TRUE \\
A & FALSE & 6.600 & 2.188 & 18.000 & TRUE \\
A & FALSE & 6.733 & 2.188 & 18.000 & FALSE \\
A & FALSE & 7.200 & 2.188 & 18.000 & FALSE \\
A & FALSE & 7.800 & 2.188 & 18.000 & FALSE \\
A & FALSE & 8.400 & 2.188 & 18.000 & FALSE \\
A & FALSE & 8.912 & 2.188 & 18.000 & TRUE \\
A & FALSE & 9.000 & 2.188 & 18.000 & TRUE \\
A & FALSE & 9.004 & 2.188 & 18.000 & TRUE \\
A & FALSE & 9.170 & 2.188 & 18.000 & FALSE \\
D & FALSE & 9.600 & 2.188 & 18.000 & FALSE \\
& & & &
\end{tabular}
G.tf G.ct G.cd
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
\(0.000 \quad 0.000 \quad 0.000\)
0.0000 .0000 .000
\(0.170 \quad 0.1701 .020\)
0.2170 .2171 .300
\(0.770 \quad 0.217 \quad 1.300\)
1.3700 .2171 .300
1.9700 .2171 .300
\(2.5700 .217 \quad 1.300\)
3.1700 .2171 .300
\(3.357 \quad 0.2171 .300\)
3.3880 .2482 .600
3.6050 .4653 .900
\(3.770 \quad 0.465 \quad 3.900\)
\(4.334 \quad 0.465 \quad 3.900\)
4.3340 .4653 .900
\(4.370 \quad 0.465 \quad 3.900\)
\(4.621 \quad 0.465 \quad 3.900\)
4.6210 .4653 .900
4.8790 .4653 .900
4.8790 .4653 .900
\(4.970 \quad 0.4653 .900\)
```

5.360 0.465 3.900
5.360 0.465 3.900
0.000 0.000 0.000
0.000 0.000 0.000
0.000 0.000 0.000
0.000 0.000 0.000
0.000 0.000 0.000
0.111 0.111 0.665
0.217 0.217 1.300
0.711 0.217 1.300
1.311 0.217 1.300
1.911 0.217 1.300
2.510 0.217 1.300
2.511 0.217 1.304
2.621 0.328 1.967
2.627 0.333 2.000
2.723 0.333 2.000
3.111 0.333 2.000
3.223 0.333 2.000
3.711 0.333 2.000
3.776 0.333 2.000
4.109 0.333 2.000
4.242 0.333 2.000
4.311 0.333 2.000
4.328 0.333 2.000
4.661 0.333 2.000
4.843 0.333 2.000
4.911 0.333 2.000
5.176 0.333 2.000
5.477 0.333 2.000
5.511 0.367 2.201
5.644 0.500 3.000
6.111 0.500 3.000
6.711 0.500 3.000
7.311 0.500 3.000
7.822 0.500 3.000
7.911 0.588 3.673
7.914 0.592 3.700
8.081 0.759 4.700
8.511 0.759 4.700

```
> fix <- addDrug.Lexis(Sx, pdat, method = "fix", maxt = 1)
NOTE: timescale taken as 'per'
Values of maxt has been recycled across 2 drugs
NOTE: end of exposure based on fixed coverage time of 1 .
> summary(fix)
Transitions:
    To
From A D Records: Events: Risk time: Persons:
        \(\begin{array}{llllll}\text { A } 63 & 1 & 64 & 19 & 2\end{array}\)
> fix
    lex.id per age lex.dur lex.Cst lex.Xst F.ex F.tf F.ct F.cd G.ex
        \(12006.0056 .00 \quad 0.20 \quad\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12006.2056 .20 \quad 0.60 \quad\) A A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12006.8056 .80 \quad 0.60\) A FALSE 0.0000 .000 0.000 FALSE
        \(12007.4057 .40 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12008.0058 .00 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12008.6058 .60 \quad 0.60\) A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        12009.2059 .20 A 0.43 A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        12009.63 59.63 0.17 A FALSE 0.0000 .000 0.000 TRUE
        12009.80 A \(5.80 \quad 0.60 \quad\) A FALSE \(0.000 \quad 0.000 \quad 0.000\) TRUE
        12010.4060 .40 A 0.23 A FALSE \(0.0000 .000 \quad 0.000\) TRUE
        12010.6360 .63 A 0.37 A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        2011.00 61.00 A 0.60 A FALSE \(0.0000 .000 \quad 0.000\) FALSE
        \(12011.6061 .60 \quad 0.60\) A A FALSE \(0.0000 .000 \quad 0.000\) FALSE
\begin{tabular}{|c|c|c|c|}
\hline 2012.20 & 62.20 & 0.60 & A \\
\hline 2012.80 & 62.80 & 0.19 & A \\
\hline 2012.99 & 62.99 & 0.03 & A \\
\hline 2013.02 & 63.02 & 0.38 & A \\
\hline 2013.40 & 63.40 & 0.56 & A \\
\hline 2013.96 & 63.96 & 0.00 & A \\
\hline 2013.96 & 63.96 & 0.04 & A \\
\hline 2014.00 & 64.00 & 0.02 & A \\
\hline 2014.02 & 64.02 & 0.23 & A \\
\hline 12014.25 & 64.25 & 0.00 & A \\
\hline 2014.25 & 64.25 & 0.26 & A \\
\hline 12014.51 & 64.51 & 0.00 & A \\
\hline 2014.51 & 64.51 & 0.09 & A \\
\hline 2014.60 & 64.60 & 0.39 & A \\
\hline 2014.99 & 64.99 & 0.00 & A \\
\hline 12014.99 & 64.99 & 0.01 & A \\
\hline 22008.00 & 57.00 & 0.60 & A \\
\hline 22008.60 & 57.60 & 0.00 & A \\
\hline 22008.60 & 57.60 & 0.00 & A \\
\hline 22008.60 & 57.60 & 0.49 & A \\
\hline 2009.09 & 58.09 & 0.11 & A \\
\hline 2 2009.20 & 58.20 & 0.60 & A \\
\hline 2009.80 & 58.80 & 0.29 & A \\
\hline 2010.09 & 59.09 & 0.31 & A \\
\hline 2010.40 & 59.40 & 0.60 & A \\
\hline 2011.00 & 60.00 & 0.60 & A \\
\hline 2011.60 & 60.60 & 0.00 & A \\
\hline 2011.60 & 60.60 & 0.11 & A \\
\hline 2011.71 & 60.71 & 0.10 & A \\
\hline 2011.81 & 60.81 & 0.39 & A \\
\hline 2012.20 & 61.20 & 0.40 & A \\
\hline 22012.60 & 61.60 & 0.20 & A \\
\hline 22012.80 & 61.80 & 0.01 & A \\
\hline 22012.81 & 61.81 & 0.05 & A \\
\hline 22012.87 & 61.87 & 0.47 & A \\
\hline 22013.33 & 62.33 & 0.07 & A \\
\hline 22013.40 & 62.40 & 0.02 & A \\
\hline 22013.42 & 62.42 & 0.51 & A \\
\hline 22013.93 & 62.93 & 0.07 & A \\
\hline 22014.00 & 63.00 & 0.57 & A \\
\hline 22014.57 & 63.57 & 0.03 & A \\
\hline 22014.60 & 63.60 & 0.33 & A \\
\hline 22014.93 & 63.93 & 0.27 & A \\
\hline 2 2015.20 & 64.20 & 0.37 & A \\
\hline 22015.57 & 64.57 & 0.23 & A \\
\hline 22015.80 & 64.80 & 0.60 & A \\
\hline 22016.40 & 65.40 & 0.51 & A \\
\hline 22016.91 & 65.91 & 0.09 & A \\
\hline 22017.00 & 66.00 & 0.00 & A \\
\hline 22017.00 & 66.00 & 0.60 & A \\
\hline 22017.60 & 66.60 & 0.40 & A \\
\hline
\end{tabular}
\begin{tabular}{|c|c|c|c|c|c|}
\hline & & & & & \\
\hline & & & & & \\
\hline & & & & & \\
\hline & FALSE & & & & \\
\hline & FAL & & & & \\
\hline & TRUE & & & & \\
\hline & UE & & & & \\
\hline & RUE & & & & \\
\hline & RUE & & & & \\
\hline & JE & & & & \\
\hline & JE & & & & \\
\hline & JE & & & & \\
\hline & JE & & & & \\
\hline & & & & & \\
\hline & & 1.025 & & 11 & \\
\hline & JE & & & & \\
\hline & & & & & \\
\hline & E & 0.595 & & & \\
\hline & E & 0. & & & \\
\hline & E & 0. & & & \\
\hline & E & & & & \\
\hline & E & & & & \\
\hline & & & & & \\
\hline & & 2. & & & \\
\hline & & 2. & & & \\
\hline & & 3. & & & \\
\hline & & 3. & & & \\
\hline & FALSE & 3.600 & & & \\
\hline & & & & & \\
\hline & & 3. & & & \\
\hline & & 4. & & & \\
\hline & & 4. & & & \\
\hline & & 4.800 & 2. & & \\
\hline & FALSE & 4. & & & \\
\hline & & 4. & & & \\
\hline & & 5. & & & \\
\hline & & 5.400 & & & \\
\hline & & 5.417 & 2. & & \\
\hline & & 5.932 & & & \\
\hline & & 6.000 & 3.237 & 16. & \\
\hline & & 6.566 & & 17. & \\
\hline & & 6.600 & & 17 & \\
\hline & FALSE & 6.932 & & & \\
\hline & FALSE & 7.200 & & & \\
\hline & FALSE & 7.566 & & & \\
\hline & FALSE & 7. & 4.16 & & \\
\hline & FALSE & 8.400 & 4.168 & 18. & \\
\hline & FALSE & 8.912 & 4.168 & 18. & \\
\hline & FALSE & 9. & 4.168 & 18. & \\
\hline & E & 9.004 & 4.168 & 18. & \\
\hline & & . & . 1 & & \\
\hline
\end{tabular}
G.tf G.ct G.cd
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
0.0000 .0000 .000
\(0.000 \quad 0.0000 .000\)
0.0000 .0000 .000
\(0.170 \quad 0.170 \quad 0.221\)
\(0.770 \quad 0.770 \quad 1.001\)
1.0001 .0001 .300
1.3701 .0001 .300
1.9701 .0001 .300
2.5701 .0001 .300
```

3.170 1.000 1.300
3.357 1.000 1.300
3.388 1.031 2.600
3.770 1.413 3.096
4.334 1.978 3.830
4.334 1.978 3.830
4.370 2.013 3.876
4.388 2.031 3.900
4 . 6 2 1 2 . 0 3 1 ~ 3 . 9 0 0 ~
4.621 2.031 3.900
4.879 2.031 3.900
4.879 2.031 3.900
4.970 2.031 3.900
5.360 2.031 3.900
5.360 2.031 3.900
0.000 0.000 0.000
0.000 0.000 0.000
0.000 0.000 0.000
0.000 0.000 0.000
0.000 0.000 0.000
0.111 0.111 0.144
0.711 0.711 0.924
1.000 1.000 1.300
1.311 1.000 1.300
1.911 1.000 1.300
2.510 1.000 1.300
2.511 1.001 1.301
2.621 1.111 1.378
2.723 1.213 1.449
3.111 1.601 1.721
3.510 2.000 2.000
3.711 2.000 2.000
3.723 2.000 2.000
3.776 2.000 2.000
4.242 2.000 2.000
4.311 2.000 2.000
4.328 2.000 2.000
4.843 2.000 2.000
4.911 2.000 2.000
5.477 2.000 2.000
5.511 2.034 2.034
5.843 2.365 2.365
6.111 2.634 2.634
6.477 3.000 3.000
6.711 3.000 3.000
7.311 3.000 3.000
7.822 3.000 3.000
7.911 3.088 3.673
7.914 3.092 3.700
8.511 3.688 4.299

```

\subsection*{11.2.2.2 A more realistic example with timing}

Follow-up data: DM1ate As example data we use the DM1ate example data from the Epi package:
```

> data(DMlate) ; str(DMlate)
'data.frame': }10000\mathrm{ obs. of }7\mathrm{ variables:
\$ sex : Factor w/ 2 levels "M","F": 2 1 2 2 1 2 1 1 2 1 ...
\$ dobth: num 1940 1939 1918 1965 1933 ...
\$ dodm : num 1999 2003 2005 2009 2009 ...
\$ dodth: num NA NA NA NA NA ...
\$ dooad: num NA 2007 NA NA NA ...
\$ doins: num NA NA NA NA NA NA NA NA NA NA ...
\$ dox : num 2010 2010 2010 2010 2010 ...

```
```

> Lx <- Lexis(entry = list(per = dodm,
age = dodm - dobth,
tfd = 0),
exit = list(per = dox),
exit.status = factor(!is.na(dodth),
labels = c("DM", "Dead")),
data = DMlate)
NOTE: entry.status has been set to "DM" for all
NOTE: Dropping 4 rows with duration of follow up < tol
> summary(Lx)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 7497 2499 9996 2499 54273.27 9996

```

We split the data along the age-scale (omitting the variables we shall not need):
```

> Sx <- splitMulti(Lx[,1:7], age = 0:120)
> summary(Sx)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:

```

Artificial prescription data To explore how addDrug. Lexis works, we also need some drug exposure data, but these are unfortunately not available, so we simulate three datasets representing three types of drugs:
```

> set.seed(1952)
> purA <-

+ (data.frame(lex.id = rep(Lx\$lex.id,
round(runif(nrow(Lx), 0, 20))))
+ %>% left_join(Lx[,c("lex.id", "dodm", "dox")])
+ %>% mutate(per = dodm + runif(length(dodm), -0.1, 0.99) * (dox - dodm),
+ amt = sample(4:20*10, length(dodm), replace = TRUE),
+ dpt = amt * round(runif(length(dodm), 3, 7)))
+ %>% select(-dodm, -dox)
+ %>% arrange(lex.id, per)
+ )
> addmargins(table(table(purA\$lex.id)))

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 504 | 529 | 474 | 480 | 489 | 445 | 485 | 476 | 494 | 489 | 518 | 487 | 501 | 525 | 522 | 524 |
| 17 | 18 | 19 | 20 | Sum |  |  |  |  |  |  |  |  |  |  |  |

505 524 498 254 9723
> str(purA)
'data.frame': }100736\mathrm{ obs. of 4 variables:
\$ lex.id: int 11111111111 1...
\$ per : num 1999 1999 1999 2000 2000 ...
\$ amt : num 200 160 190 90 160 90 100 90 90 190 ···...
\$ dpt : num 1000 960 1330 360 640 630 500 450 630}9050 ..
> purB <-

+ ( data.frame(lex.id = rep(Lx\$lex.id,
round(pmax(runif(nrow(Lx), -10, 15), 0))))
+ %>% left_join(Lx[,c("lex.id", "dodm", "dox")])
+ %>% mutate(per = dodm + runif(length(dodm), -0.1, 0.99) * (dox - dodm),
+ amt = sample(4:20*10, length(dodm), replace = TRUE),
dpt = amt * round(runif(length(dodm), 5, 9)))
+ %>% select(-dodm, -dox)
+ %>% arrange(lex.id, per)
+ ) -> purB
> addmargins(table(table(purB\$lex.id)))

```
```

1 rrrrrarrrrrrrrrrrrrrern
> str(purB)
'data.frame': 44695 obs. of 4 variables:
\$ lex.id: int 111111111111 ...
\$ per : num 1998 1998 1999 1999 2000 ...
\$ amt : num 100 190 110 140 120 90 140 70 150 180
\$ dpt : num 800 1520 770 980 960 810 1260 560 1050 1440 ...
> purC <-

+ ( data.frame(lex.id = rep(Lx\$lex.id,
+ round(pmax(runif(nrow(Lx), -5, 12), 0))))
+ %>% left_join(Lx[,c("lex.id", "dodm", "dox")])
+ %>% mutate(per = dodm + runif(length(dodm), -0.1, 0.99) * (dox - dodm),
amt = sample(4:20*10, length(dodm), replace = TRUE),
dpt = amt * round(runif(length(dodm), 5, 7)))
+ %>% select(-dodm, -dox)
+ %>% arrange(lex.id, per)
+ )
> addmargins(table(table(purB\$lex.id)))

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: | ---: |
| 374 | 418 | 414 | 406 | 391 | 383 | 361 | 429 | 375 | 415 | 394 | 401 | 375 | 394 | 223 |
| 5753 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

> str(purC)
'data.frame': 42302 obs. of 4 variables:
\$ lex.id: int 1 1 1 1 1 5 5 5 5 5 ...
\$ per : num 1998 2000 2003 2007 2008 ...
\$ amt : num 90 40 200 100 100 160 60 90 170 60 ···...
\$ dpt : num 450 240 1200 600 700 1120 360 630}11190 360 ...
> head(purC)
lex.id per amt dpt
1 1 1998.363 90 450
2 1 2000.059 40 240
3 1 2002.642 200 1200
4 1 2006.568 100 600
5 1 2007.684 100 700
6 5

```

Note that the time scale is in years, so the dpt must be in amount per year, so that dpt/amt is the approximate number of annual drug purchases.

We now have three artificial drug purchase datasets so we can see how addDrug. Lexis performs on larger datasets:

\section*{Using addDrug}

1000 and 500 persons We start out with a small sample and a two month grace period to limit the number of gaps:
```

> Sx1 <- subset(Sx, lex.id < 1000)
> pur <- list(A = subset(purA, lex.id < 1000),

+ B = subset(purB, lex.id < 1000),
+ C = subset(purC, lex.id < 1000))
> system.time(ad1 <- addDrug.Lexis(Sx1, pur, tnam = "per", grace = 1/4))
Values of grace has been recycled across 3 drugs
NOTE: end of exposure based on differences in purchase times (per)
and amount purchased (amt).
user system elapsed
25.42 0.97 26.42
> summary(Sx1)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 6037 241 rrat8 627 (r)

```
```

> summary(ad1)
Transitions:

|  |  |  |  |  |  |
| ---: | ---: | ---: | ---: | ---: | ---: |
| From | DM | Dead | Records: | Events: | Risk time: |
| DM | 28720 | 241 | 28961 | 241 | 5303.26 |

```

We then cut the number of persons in half:
```

> Sx2 <- subset(Sx, lex.id < 500)
> pur <- list(A = subset(purA, lex.id < 500),

+ B = subset(purB, lex.id < 500),
C = subset(purC, lex.id < 500))
> system.time(ad2 <- addDrug.Lexis(Sx2, pur, tnam = "per", grace = 1/6))
Values of grace has been recycled across 3 drugs
NOTE: end of exposure based on differences in purchase times (per)
and amount purchased (amt).
user system elapsed
12.83 0.15 13.02
> summary(Sx2)

```
Transitions:
        To
From DM Dead Records: Events: Risk time: Persons:
    \(\begin{array}{llllll}\text { DM } & 3023 & 118 & 3141 & 118 & 2653.65\end{array}\)
> summary(ad2)
Transitions:
\begin{tabular}{rrrrrr} 
& & & & \\
From & DM & Dead & Records: & Events: Risk time: & Persons: \\
DM & 15413 & 118 & 15531 & 118 & 2653.65
\end{tabular}

It looks like timing is broadly proportional to the number of persons.
Fewer prescription records We can try to cut the number of purchases in half:
```

> pur <- list(A = subset(purA, lex.id < 500 \& runif(nrow(purA)) < 0.5),

+ B = subset(purB, lex.id < 500 \& runif(nrow(purB)) < 0.5),
+ C = subset(purC, lex.id < 500 \& runif(nrow(purC)) < 0.5))
> sapply(pur, nrow)
A B C
255710981063
> system.time(ad3 <- addDrug.Lexis(Sx2, pur, tnam = "per", grace = 1/6))
Values of grace has been recycled across 3 drugs
NOTE: end of exposure based on differences in purchase times (per)
and amount purchased (amt).
user system elapsed
5.84 0.21 6.08
> summary(Sx2)

```
Transitions:
        To
From DM Dead Records: Events: Risk time: Persons:
    \(\begin{array}{llllll}\text { DM } & 3023 & 118 & 3141 & 118 & 2653.65\end{array}\)
> summary(ad3)
Transitions:
\begin{tabular}{rrrrrrr} 
& & & & \\
From & DM & Dead & Records: & Events: Risk time: & Persons: \\
DM 9646 & 118 & 9764 & 118 & 2653.65 & 499
\end{tabular}

It appears that the number of purchases per person is also a determinant of the run time too; the timing is largely proportional to the number of drug records.

In any concrete application it is recommended to run the function on a fairly small sample of persons, say 1000 to get a feel for the run time. It may also be a good idea to run the function on chunks of the persons, to make sure that you do not lose all the processed data in a crash.

Fewer prescription types Finally we try to cut the number of drugs, to assess how this influences the run time:
```

> pur <- list(B = subset(purB, lex.id < 500),

+ C = subset(purC, lex.id < 500))
> sapply(pur, nrow)
B C
21972170
> system.time(ad4 <- addDrug.Lexis(Sx2, pur, tnam = "per", grace = 1/6))
Values of grace has been recycled across 2 drugs
NOTE: end of exposure based on differences in purchase times (per)
and amount purchased (amt).
user system elapsed
4.81 0.08 4.90
> summary(Sx2)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 3023 118 3141 118 2653.65 499
> summary(ad4)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 8976 118 1009 118 2653.65

```

We see that the number of records have been greatly expanded, almost tripled.
Too many records - coarse. Lexis If we look at the length of the intervals as given in lex.dur we see that some are are quite small:
```

> summary(ad1\$lex.dur)
Min. 1st Qu. Median Mean 3rd Qu. Max.
0.00000 0.02848 0.10277 0.18312 0.25620 1.00000

```

Half are smaller then 0.11 years, 40 days. We could without much loss of precision in the analysis merge adjacent records that have total risk time less than 3 months.

The function coarse. Lexis will collapse records with short lex.dur with the subsequent record. The collapsing will use the covariates from the first record, and so the entire follow-up from the two records will have the characteristics of the first. Therefore it is wise to choose first records with reasonably short lex.dur-the approximation will be better than if the first record was with a larger lex.dur. Therefore there are two values supplied to coarse.Lexis; the maximal length of the first record's lex.dur and the maximal length of the lex.dur in the resulting combined record. The larger these parameters are, the more the Lexis object is coarsened.
```

> summary(ad1)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 28720 241 28961 241 5303.26 999
> summary(adc <- coarse.Lexis(ad1, lim = c(1/6,1/2)))
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 14670 241 14911
> summary(adc$lex.dur)
        Min. 1st Qu. Median Mean 3rd Qu. Max.
    0.0000
> min(adc$lex.dur)
[1] 4.547474e-12

```

This could cut the number of units for analysis substantially, in this case from about 27,000 to some 13,000 .

Records to be kept When we are dealing with drug exposure data we will be interested keeping the record that holds the start of a drug exposure. Some may argue that it does not matter much, though.

The records (i.e. beginnings of FU intervals) that should be kept must be given in logical vector in the argument keep:
```

> summary(Sx2)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 3023 118 3141 118 2653.65 499
> system.time(ad4 <- addDrug.Lexis(Sx2,

+ pur,
+ tnam = "per",
+ grace = 1/6))
Values of grace has been recycled across 2 drugs
NOTE: end of exposure based on differences in purchase times (per)
and amount purchased (amt).
user system elapsed
5.34 0.11 5.48
> summary(ad4)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
> \#
> ad5 <- coarse.Lexis(ad4,
+ lim = c(1/4, 1/2))
> summary(ad5)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 5460 118 5578 118 1, 2653.65

```

We can identify the first date of exposure to drug B, say, by the exposure (B. ex) being true and the cumulative time on the drug (B.ct) being 0 :
```

> ad4\$keep <- with(ad4, (B.ex \& B.ct == 0) |

+ (C.ex \& C.ct == 0))
> ad6 <- coarse.Lexis(ad4,
+ lim = c(1/4, 1/2),
+ keep = ad4\$keep)
> summary(ad6)
Transitions:
To
From DM Dead Records: Events: Risk time: Persons:
DM 5578 118

```

We see the expected behaviour when we use coarse. Lexis: we get fewer records, but identical follow-up. And the keep argument gives the possibility to keep selected records, or more precisely beginnings. keep prevents a record to be collapsed with a previous one, but not with a subsequent one.

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\section*{About this book}

This book takes you all the way through multistate models-from data definition and -manipulation through graphical representation of data to modeling of transition rates, and further to calculation of state probabilities and sojourn times.
The book includes the traditional methods based on semiparametric models for rates, but the main emphasis is on more credible parametric models for transition rates, allowing simultaneous dependence on more than one time scale (such as age and disease duration).
You will find a detailed demonstration of parametric modeling of transition rates and the application of these to derive estimates of state probabilities, sojourn times and other relevant measures.
Unlike most other books on this topic, the data representation and manipulation plays a prominent role; using carefully worked examples it covers in detail the Lexis machinery from the Epi and popEpi packages for \(R\) as well as the multistate tools from the R-packages survival, mstate and msm.

The style of the book is to illustrate concepts by examples in \(R\), as close as possible to real modeling. That means that not only is the multistate machinery illustrated, also the paraphernalia to graph and report analyses and results. All the code in the book is also available on the book's website http://bendixcarstensen.com/PMM```


[^0]:    ${ }^{1}$ After the Russian mathematician Andrey Andreyevich Markov (1856-1922)

[^1]:    ${ }^{2}$ For a quadratic matrix $A$ the matrix exponential of $A, \operatorname{Exp}(A)$, is defined as the infinite sum $\sum_{i=0}^{\infty} A^{i} / i!=I+A+A A / 2!+A A A / 3!+\cdots$

[^2]:    ${ }^{1}$ Named after the German demographer and economist Wilhelm Lexis (17 July $1837-24$ August 1914), who in his book "Einleitung in die Theorie der Bevölkerungsstatistik" [Introduction to the theory of population statistics] (1875) devised a diagram showing follow-up of persons on multiple time scales. The diagram is nowadays called a Lexis diagram, even if it is usually drawn in a slightly different manner than that Lexis used in his book.

[^3]:    ${ }^{2}$ The DM/dm used in the code refers to "diabetes mellitus" which in turn refer to the symptoms of the disease, from the Greek diabainein, meaning "to pass through", describing the copious urination, and mellitus, from the Latin meaning "sweetened with honey", referring to sugar in the urine.

[^4]:    ${ }^{1}$ Hypoglycemia is "too low blood sugar", and can for example occur for diabetes patients if the dosing of insulin is not properly regulated. It is a potentially lethal condition, hence feared by diabetes patients.

[^5]:    Timescales:
    per age dur

