A Handbook of Statistical Analyses Using R — 3rd Edition

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CHAPTER 11

Survival Analysis: Glioma Treatment and Breast Cancer Survival

- 11.1 Introduction
- 11.2 Survival Analysis
- 11.3 Analysis Using R

11.3.1 Glioma Radioimmunotherapy

Figure 11.1 leads to the impression that patients treated with the novel radioimmunotherapy survive longer, regardless of the tumor type. In order to assess if this informal finding is reliable, we may perform a log-rank test via

```
R> survdiff(Surv(time, event) ~ group, data = g3)

Call:
survdiff(formula = Surv(time, event) ~ group, data = g3)

N Observed Expected (O-E)^2/E (O-E)^2/V
group=Control 6 4 1.49 4.23 6.06
group=RIT 11 2 4.51 1.40 6.06

Chisq= 6.1 on 1 degrees of freedom, p= 0.0138
```

which indicates that the survival times are indeed different in both groups. However, the number of patients is rather limited and so it might be dangerous to rely on asymptotic tests. As shown in Chapter 4, conditioning on the data and computing the distribution of the test statistics without additional assumptions are one alternative. The function surv_test from package coin (Hothorn et al., 2006, 2013) can be used to compute an exact conditional test answering the question whether the survival times differ for grade III patients. For all possible permutations of the groups on the censored response variable, the test statistic is computed and the fraction of whose being greater than the observed statistic defines the exact p-value:

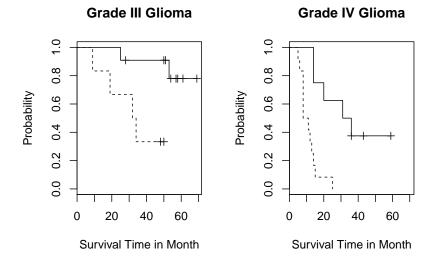


Figure 11.1 Survival times comparing treated and control patients.

which, in this case, confirms the above results. The same exercise can be performed for patients with grade IV glioma

which shows a difference as well. However, it might be more appropriate to

answer the question whether the novel therapy is superior for both groups of tumors simultaneously. This can be implemented by *stratifying*, or *blocking*, with respect to tumor grading:

Here, we need to approximate the exact conditional distribution since the exact distribution is hard to compute. The result supports the initial impression implied by Figure 11.1.

11.3.2 Breast Cancer Survival

Before fitting a Cox model to the GBSG2 data, we again derive a Kaplan-Meier estimate of the survival function of the data, here stratified with respect to whether a patient received hormonal therapy or not (see Figure 11.2).

Fitting a Cox model follows roughly the same rules as shown for linear models in Chapter 6 with the exception that the response variable is again coded as a *Surv* object. For the GBSG2 data, the model is fitted via

```
R> GBSG2_coxph <- coxph(Surv(time, cens) ~ ., data = GBSG2)</pre>
```

and the results as given by the **summary** method are given in Figure 11.3. Since we are especially interested in the relative risk for patients who underwent hormonal therapy, we can compute an estimate of the relative risk and a corresponding confidence interval via

This result implies that patients treated with hormonal therapy had a lower risk and thus survived longer compared to women who were not treated this way

Model checking and model selection for proportional hazards models are complicated by the fact that easy-to-use residuals, such as those discussed in Chapter 6 for linear regression models, are not available, but several possibilities do exist. A check of the proportional hazards assumption can be done by looking at the parameter estimates β_1,\ldots,β_q over time. We can safely assume proportional hazards when the estimates don't vary much over time. The null hypothesis of constant regression coefficients can be tested, both globally as well as for each covariate, by using the cox.zph function

```
R> GBSG2_zph <- cox.zph(GBSG2_coxph)
R> GBSG2_zph
```

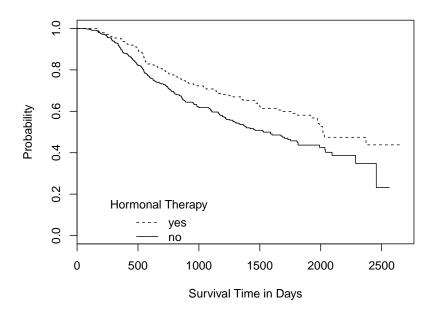


Figure 11.2 Kaplan-Meier estimates for breast cancer patients who either received hormonal therapy or not.

	rho	chisq	p
horThyes	-2.54e-02	1.96e-01	0.65778
age	9.40e-02	2.96e+00	0.08552
menostatPost	-1.19e-05	3.75e-08	0.99985
tsize	-2.50e-02	1.88e-01	0.66436
tgrade.L	-1.30e-01	4.85e+00	0.02772
tgrade.Q	3.22e-03	3.14e-03	0.95530
pnodes	5.84e-02	5.98e-01	0.43941
progrec	5.65e-02	1.20e+00	0.27351
estrec	5.46e-02	1.03e+00	0.30967
GLOBAL	NA	2.27e+01	0.00695

There seems to be some evidence of time-varying effects, especially for age and

```
R> summary(GBSG2_coxph)
coxph(formula = Surv(time, cens) ~ ., data = GBSG2)
  n= 686, number of events= 299
                   coef exp(coef)
                                   se(coef)
                                                 z Pr(>|z|)
             -0.346278
                         0.707316
                                   0.129075 -2.68
                                                   0.00730
horThyes
             -0.009459
                         0.990585
                                   0.009301 -1.02
                                                    0.30913
age
menostatPost
              0.258445
                         1.294915
                                   0.183476
                                              1.41
                                                    0.15895
tsize
              0.007796
                         1.007827
                                   0.003939
                                              1.98
                                                    0.04779
tgrade.L
              0.551299
                         1.735506
                                   0.189844
tgrade.Q
              -0.201091
                         0.817838
                                   0.121965 -1.65
                                                    0.09920
              0.048789
                         1.049998
                                   0.007447
pnodes
                         0.997785
progrec
              -0.002217
                                   0.000574 -3.87
                                                    0.00011
                         1.000197
              0.000197
                                   0.000450
                                                    0.66131
estrec
             exp(coef) exp(-coef) lower .95 upper .95
horThyes
                  0.707
                             1.414
                                       0.549
                  0.991
                             1.010
                                        0.973
                                                  1.009
age
menostatPost
                  1.295
                             0.772
                                        0.904
tsize
                 1.008
                             0.992
                                        1.000
                                                  1.016
                 1.736
                             0.576
                                        1.196
tgrade.L
                                                  2.518
                 0.818
                             1.223
                                        0.644
                                                  1.039
tarade.0
                             0.952
                                        1.035
                 1.050
                                                  1.065
pnodes
                 0.998
                             1.002
                                        0.997
                                                  0.999
progrec
                                       0.999
                 1.000
                             1.000
                                                  1.001
estrec
Concordance= 0.692 (se = 0.018)
Rsquare= 0.142
                 (max possible= 0.995
                            on 9 df.
                                        p=0
Likelihood ratio test= 105
                             on 9 df.
                                        p=0
                     = 115
Wald test
Score (logrank) test = 121
                             on 9 df,
                                        p=0
```

Figure 11.3 R output of the summary method for GBSG2_coxph.

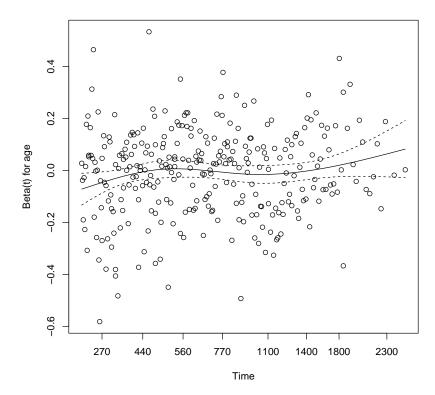
tumor grading. A graphical representation of the estimated regression coefficient over time is shown in Figure 11.4. We refer to Therneau and Grambsch (2000) for a detailed theoretical description of these topics.

The tree-structured regression models applied to continuous and binary responses in Chapter 9 are applicable to censored responses in survival analysis as well. Such a simple prognostic model with only a few terminal nodes might be helpful for relating the risk to certain subgroups of patients. Both rpart and the ctree function from package partykit can be applied to the GBSG2 data, where the conditional trees of the latter select cutpoints based on log-rank statistics

```
R> GBSG2_ctree <- ctree(Surv(time, cens) ~ ., data = GBSG2)
```

and the plot method applied to this tree produces the graphical representation in Figure 11.6. The number of positive lymph nodes (pnodes) is the most important variable in the tree, corresponding to the p-value associated with this variable in Cox's regression; see Figure 11.3. Women with not more than three positive lymph nodes who have undergone hormonal therapy seem to have the best prognosis whereas a large number of positive lymph nodes and a small value of the progesterone receptor indicates a bad prognosis.

R> plot(GBSG2_zph, var = "age")



 $\begin{tabular}{ll} \textbf{Figure 11.4} & \textbf{Estimated regression coefficient for age depending on time for the} \\ & \textbf{GBSG2 data}. \\ \end{tabular}$

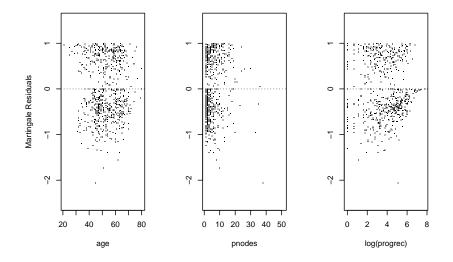


Figure 11.5 Martingale residuals for the GBSG2 data.



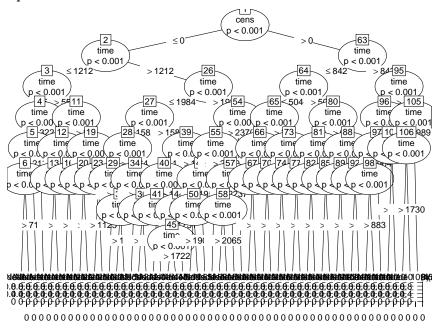


Figure 11.6 Conditional inference tree for the GBSG2 data with the survival function, estimated by Kaplan-Meier, shown for every subgroup of patients identified by the tree.

Bibliography

- Hothorn, T., Hornik, K., van de Wiel, M., and Zeileis, A. (2013), *coin:* Conditional Inference Procedures in a Permutation Test Framework, URL http://CRAN.R-project.org/package=coin, R package version 1.0-23.
- Hothorn, T., Hornik, K., van de Wiel, M. A., and Zeileis, A. (2006), "A Lego system for conditional inference," *The American Statistician*, 60, 257–263.
- Therneau, T. M. and Grambsch, P. M. (2000), *Modeling Survival Data: Extending the Cox Model*, New York, USA: Springer-Verlag.