SA: Simple 3-state Markov model in R

The DARTH workgroup

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- Jalal H, Pechlivanoglou P, Krijkamp E, Alarid-Escudero F, Enns E, Hunink MG. An Overview of R in Health Decision Sciences. Med Decis Making. 2017; 37(3): 735-746. https://journals.sagepub.com/doi/abs/10.1177/0272989X16686559

- Alarid-Escudero F, Krijkamp EM, Enns EA, Yang A, Hunink MGM Pechlivanoglou P, Jalal H. Cohort State-Transition Models in R: A Tutorial. arXiv:200107824v2. 2020:1-48. http://arxiv.org/abs/2001.07824

- Krijkamp EM, Alarid-Escudero F, Enns EA, Jalal HJ, Hunink MGM, Pechlivanoglou P. Microsimulation modeling for health decision sciences using R: A tutorial. Med Decis Making. 2018;38(3):400–22. https://journals.sagepub.com/doi/abs/10.1177/0272989X18754513

- Krijkamp EM, Alarid-Escudero F, Enns E, Pechlivanoglou P, Hunink MM, Jalal H. A Multidimensional Array Representation of State-Transition Model Dynamics. Med Decis Making. Online First https://doi.org/10.1177/0272989X19893973

Change `eval` to `TRUE` if you want to knit this document.

```
rm(list = ls())        # clear memory (removes all the variables from the workspace)
```

01 Load packages

```
if (!require('pacman')) install.packages('pacman'); library(pacman) # use this package to conveniently
# load (install if required) packages from CRAN
p_load( "dplyr", "devtools", "scales", "ellipse", "ggplot2", "lazyeval", "igraph", "ggraph", "reshape2"
# install_github("DARTH-git/dampack", force = TRUE) Uncomment if there is a newer version
# install_github("DARTH-git/darthtools", force = TRUE) Uncomment if there is a newer version
p_load_gh("DARTH-git/dampack", "DARTH-git/darthtools")
```

02 Load functions

```
# all functions are in the darthtools package
```

03 Input model parameters

```
# Strategy names
v_names_str <- c("Standard of Care", "Treatment")

# Markov model parameters
v_n  <- c("Healthy", "Sick", "Dead")  # state names
n_t  <- 60                            # number of cycles

v_init <- c("Healthy" = 1,
            "Sick"    = 0,
            "Dead"    = 0)            # initial cohort distribution (everyone allocated to the
                                      # "healthy" state)

# Transition probabilities
p_HD      <- 0.02                     # probability of dying when healthy
p_HS      <- 0.05                     # probability of becoming sick when healthy, under standard of ca
p_HS_trt  <- 0.03                     # probability of becoming sick when healthy, under treatment
p_SD      <- 0.1                      # probability of dying when sick

# Costs and utilities
c_H       <- 400                      # cost of one cycle in healthy state
c_S       <- 1000                     # cost of one cycle in sick state
c_D       <- 0                        # cost of one cycle in dead state
c_trt     <- 8000                     # cost of treatment (per cycle)
u_H       <- 0.8                      # utility when healthy
u_S       <- 0.5                      # utility when sick
u_D       <- 0                        # utility when dead
```

```
d_e        <- d_c <- 0.03              # discount rate per cycle equal discount of costs and QALYs by 3%

n_str      <- length(v_names_str)      # Number of strategies
n_states   <- length(v_n)              # number of states

# Discount weights for costs and effects
v_dwc      <- 1 / (1 + d_c) ^ (0:n_t)
v_dwe      <- 1 / (1 + d_e) ^ (0:n_t)
```
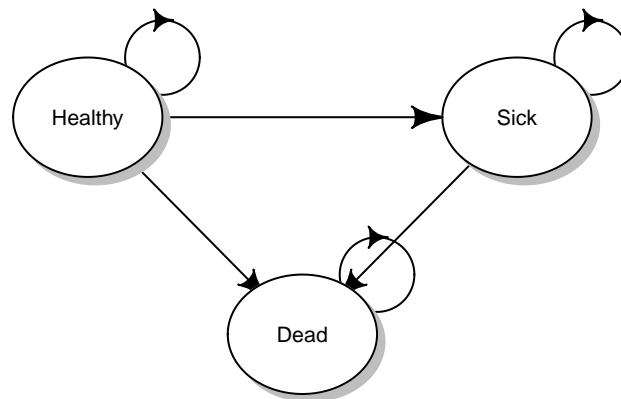
Draw the state-transition cohort model

```
m_P_diag <- matrix(0, nrow = n_states, ncol = n_states, dimnames = list(v_n, v_n))
m_P_diag["Healthy", "Sick"   ]   = ""
m_P_diag["Healthy", "Dead"   ]   = ""
m_P_diag["Healthy", "Healthy"]   = ""
m_P_diag["Sick"   , "Dead"   ]   = ""
m_P_diag["Sick"   , "Sick"   ]   = ""
m_P_diag["Dead"   , "Dead"   ]   = ""
layout.fig <- c(2, 1)
plotmat(t(m_P_diag), t(layout.fig), self.cex = 0.5, curve = 0, arr.pos = 0.8,
        latex = T, arr.type = "curved", relsize = 0.85, box.prop = 0.8,
        cex = 0.8, box.cex = 0.7, lwd = 1)
```

04 Define and initialize matrices and vectors

04.1 Cohort trace

```r
# create the cohort trace
m_M_SoC <- m_M_trt <-  matrix(NA,
                              nrow = n_t + 1 ,  # create Markov trace (n_t + 1 because R doesn't
                                                # understand Cycle 0)
                              ncol = n_states,
                              dimnames = list(0:n_t, v_n))

m_M_SoC[1, ] <- m_M_trt[1, ] <- v_init        # initialize first cycle of Markov trace
```

04.2 Transition probability matrix

```r
# create the transition probability matrices
m_P_SoC  <- m_P_trt <- matrix(0,
                              nrow = n_states, ncol = n_states,
                              dimnames = list(v_n, v_n))  # name the columns and rows of the matrix

# print the probability matrices
m_P_SoC  # for standard of care
```

```
##         Healthy Sick Dead
## Healthy       0    0    0
## Sick          0    0    0
## Dead          0    0    0
```

```r
m_P_trt  # treatment
```

```
##         Healthy Sick Dead
## Healthy       0    0    0
## Sick          0    0    0
## Dead          0    0    0
```

Fill in the transition probability matrix:

```r
# For Standard of Care
# from Healthy
m_P_SoC["Healthy", "Healthy"] <- (1 - p_HD) * (1 - p_HS)
m_P_SoC["Healthy", "Sick"]    <- (1 - p_HD) * p_HS
m_P_SoC["Healthy", "Dead"]    <- p_HD

# from Sick
m_P_SoC["Sick", "Sick"] <- 1 - p_SD
m_P_SoC["Sick", "Dead"] <- p_SD

# from Dead
m_P_SoC["Dead", "Dead"] <- 1
```

```r
# Under treatment
m_P_trt <- m_P_SoC  # Assign the matrix for standard of care to the transition probability matrix for t
# replace values that are different under treatment
m_P_trt["Healthy", "Healthy"] <- (1 - p_HD) * (1 - p_HS_trt)
m_P_trt["Healthy", "Sick"]    <- (1 - p_HD) * p_HS_trt
```

04.3 Check if transition probability structure and probabilities are valid

```r
# Check that transition probabilities are in [0, 1]
check_transition_probability(m_P_SoC, verbose = TRUE)
check_transition_probability(m_P_trt, verbose = TRUE)
# Check that all rows sum to 1
check_sum_of_transition_array(m_P_SoC, n_states = n_states, n_cycles = n_t, verbose = TRUE)
check_sum_of_transition_array(m_P_trt, n_states = n_states, n_cycles = n_t, verbose = TRUE)
```

05 Run Markov model

```r
for (t in 1:n_t){  # loop through the number of cycles
  m_M_SoC[t + 1, ] <- m_M_SoC[t, ] %*% m_P_SoC  # estimate the state vector for the next cycle (t + 1)
  m_M_trt[t + 1, ] <- m_M_trt[t, ] %*% m_P_trt  # for treatment
}
```

06 Compute and Plot Epidemiological Outcomes

06.1 Cohort trace

Standard of Care:
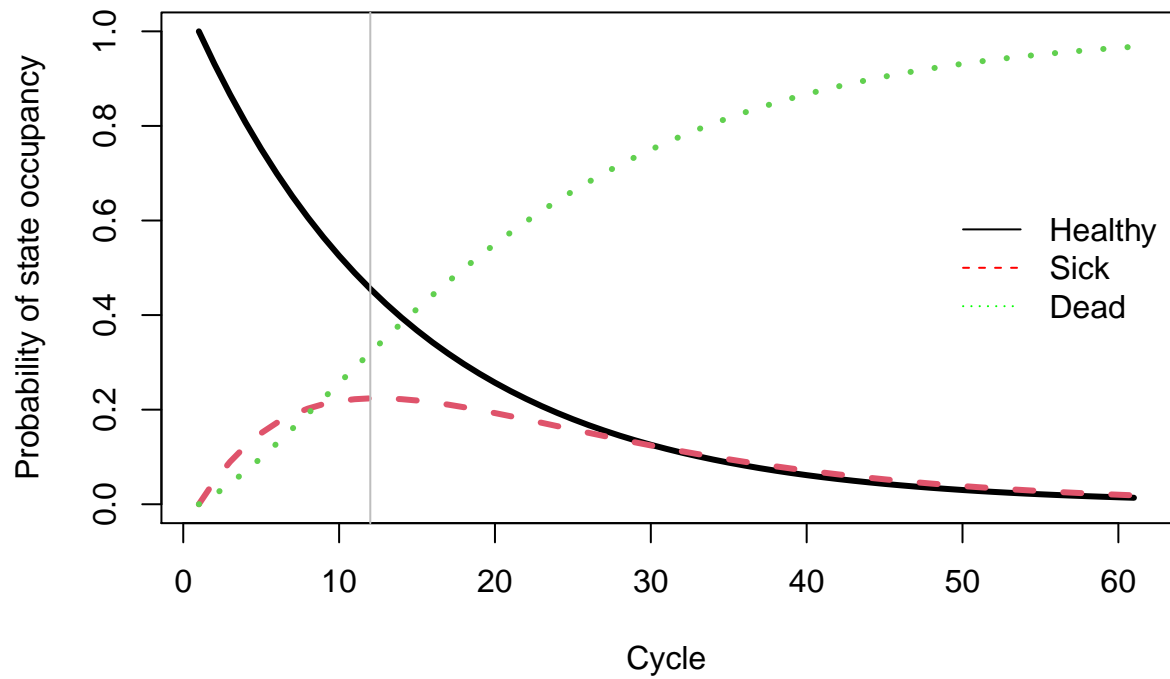
```r
matplot(m_M_SoC, type = 'l',
        ylab = "Probability of state occupancy",
        xlab = "Cycle",
        main = "Cohort Trace - standard of care", lwd = 3)  # create a plot of the data
legend("right", v_n, col = c("black", "red", "green"),
       lty = 1:3, bty = "n")                                # add a legend to the graph

abline(v = which.max(m_M_SoC[, "Sick"]), col = "gray")     # plot a vertical line that helps identifyi
```

Cohort Trace – standard of care
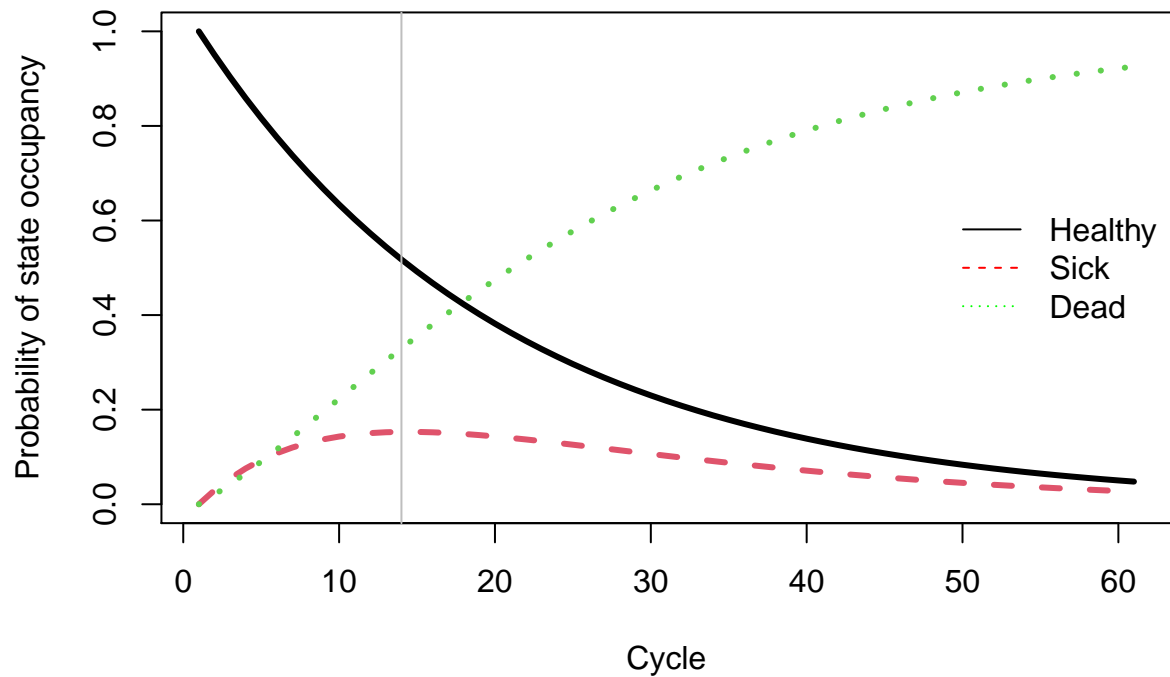

Treatment:

```
matplot(m_M_trt, type = 'l',
        ylab = "Probability of state occupancy",
        xlab = "Cycle",
        main = "Cohort Trace – treatment", lwd = 3)    # create a plot of the data
legend("right", v_n, col = c("black", "red", "green"),
        lty = 1:3, bty = "n")                          # add a legend to the graph

abline(v = which.max(m_M_trt[, "Sick"]), col = "gray")    # plot a vertical line that helps identifyi
```

Cohort Trace – treatment
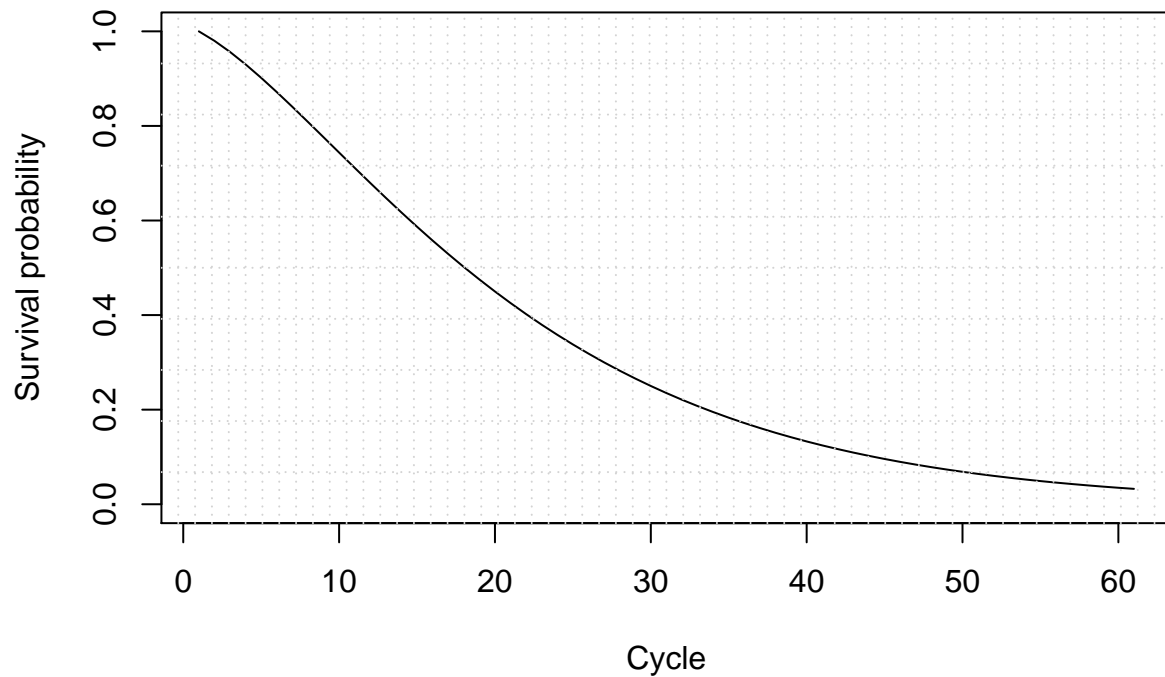

06.2 Overall Survival (OS)

Standard of Care:

```
v_os_SoC <- 1 - m_M_SoC[, "Dead"]      # calculate the overall survival (OS) probability
v_os_SoC <- rowSums(m_M_SoC[, 1:2])    # alternative way of calculating the OS probability

plot(v_os_SoC, type = 'l',
     ylim = c(0, 1),
     ylab = "Survival probability",
     xlab = "Cycle",
     main = "Overall Survival - Standard of Care")  # create a simple plot showing the OS

# add grid
grid(nx = n_t, ny = 10, col = "lightgray", lty = "dotted", lwd = par("lwd"),
     equilogs = TRUE)
```

Overall Survival – Standard of Care
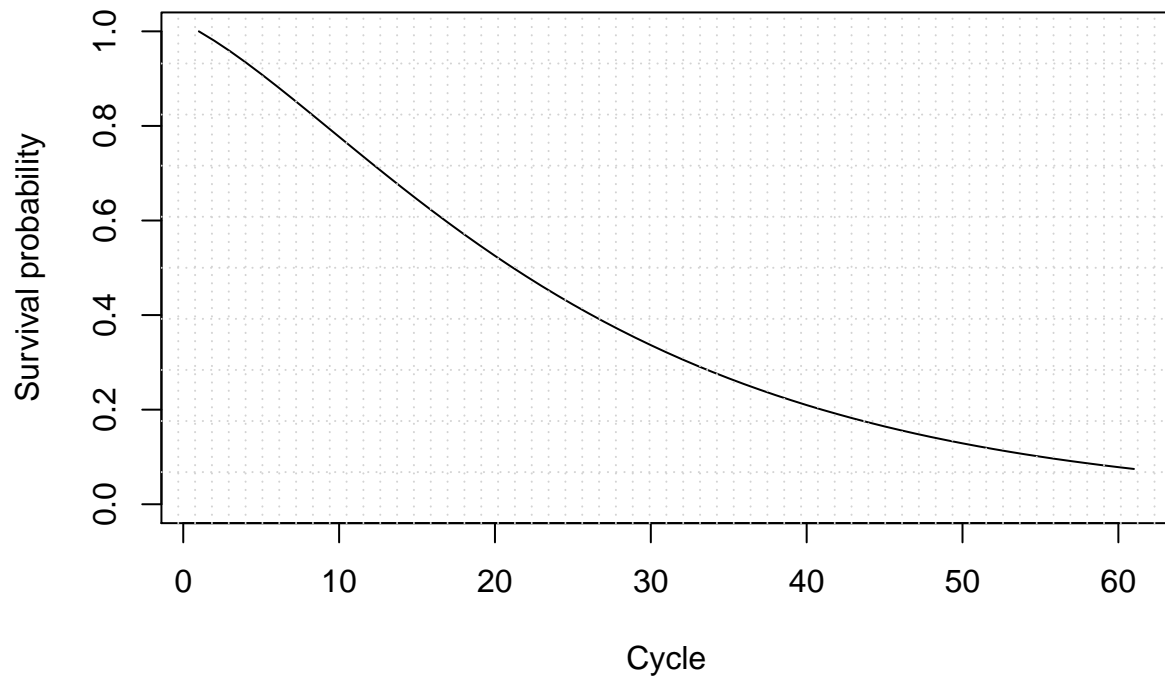

Treatment:

```r
v_os_trt <- 1 - m_M_trt[, "Dead"]      # calculate the overall survival (OS) probability
v_os_trt <- rowSums(m_M_trt[, 1:2])   # alternative way of calculating the OS probability

plot(v_os_trt, type = 'l',
     ylim = c(0, 1),
     ylab = "Survival probability",
     xlab = "Cycle",
     main = "Overall Survival - Treatment")  # create a simple plot showing the OS

# add grid
grid(nx = n_t, ny = 10, col = "lightgray", lty = "dotted", lwd = par("lwd"),
     equilogs = TRUE)
```

Overall Survival – Treatment


06.2.1 Life Expectancy (LE)

```r
v_le_SoC <- sum(v_os_SoC)  # summing probability of OS over time (i.e. life expectancy)
v_le_trt <- sum(v_os_trt)  # summing probability of OS over time (i.e. life expectancy), treatment
```

06.3 Disease prevalence

Standard of Care:

```r
v_prev_SoC <- m_M_SoC[, "Sick"]/v_os_SoC
plot(v_prev_SoC,
     ylim = c(0, 1),
     ylab = "Prevalence",
     xlab = "Cycle",
     main = "Disease prevalence - Standard of care")
```
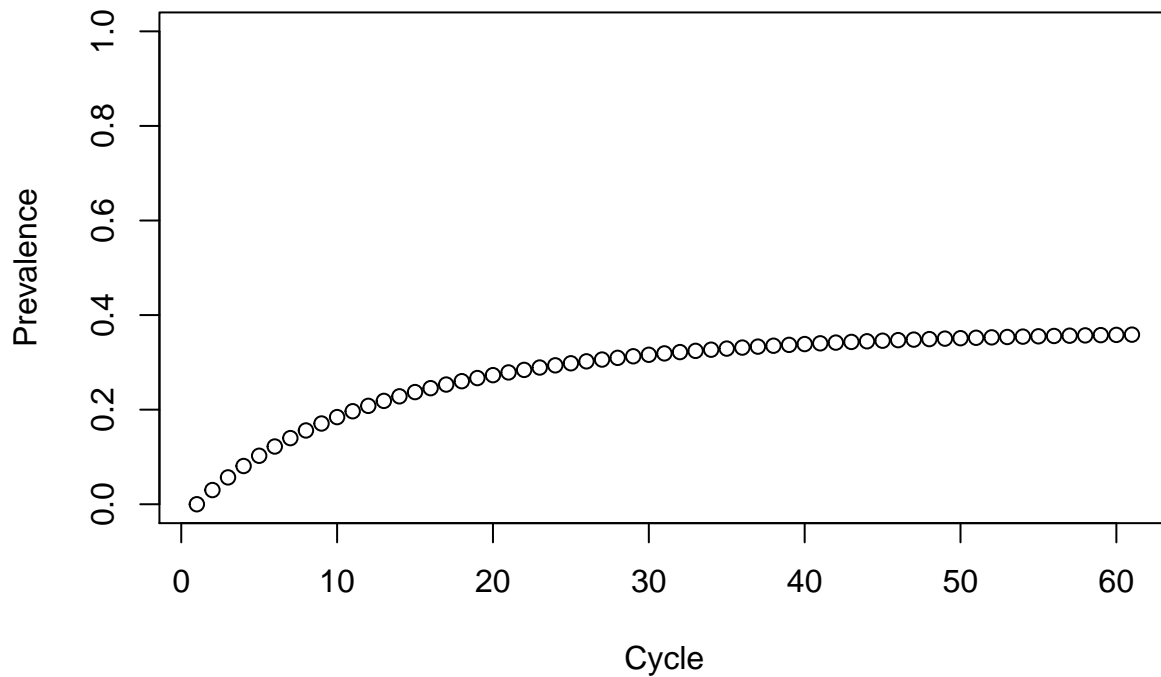
Disease prevalence – Standard of care
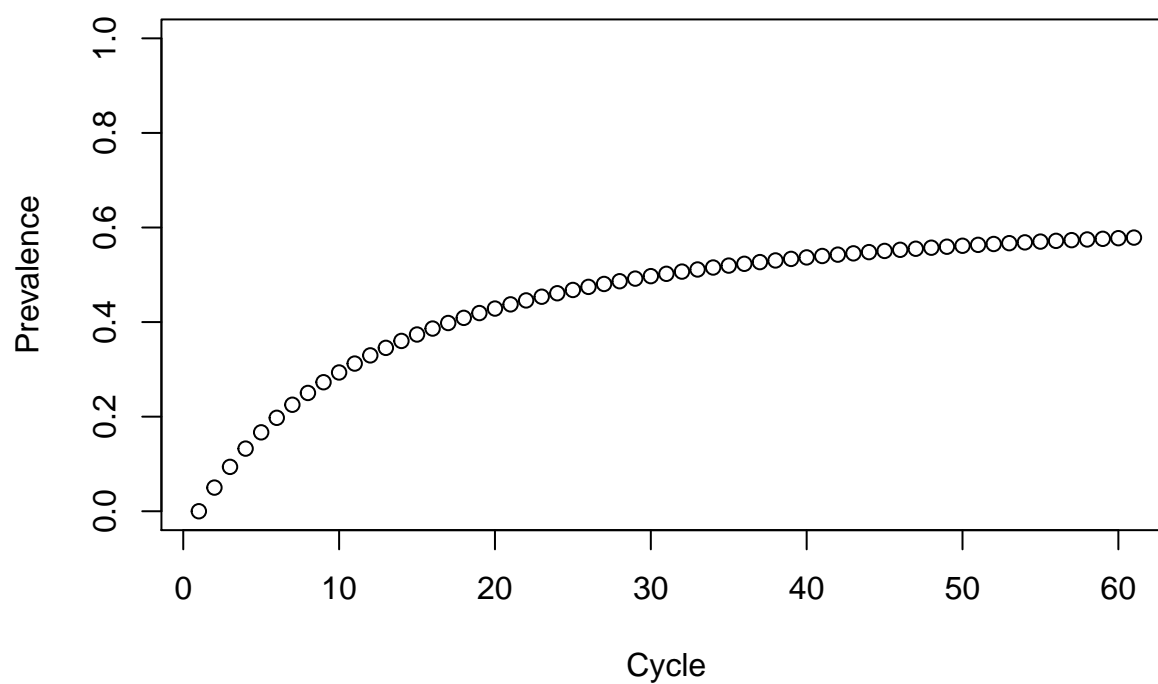
Treatment:

```r
v_prev_trt <- m_M_trt[, "Sick"]/v_os_trt
plot(v_prev_trt,
     ylim = c(0, 1),
     ylab = "Prevalence",
     xlab = "Cycle",
     main = "Disease prevalence - Treatment")
```

Disease prevalence – Treatment

07 Compute Cost-Effectiveness Outcomes

07.1 Mean Costs and QALYs

```r
# per cycle
# calculate expected costs by multiplying m_M with the cost vector for the different
# health states
v_tc_SoC <- m_M_SoC %*% c(c_H, c_S, c_D)   # Standard of Care
v_tc_trt <- m_M_trt %*% c(c_H, c_S, c_D)   # Treatment
# calculate expected QALYs by multiplying m_M with the utilities for the different
# health states
v_tu_SoC <- m_M_SoC %*% c(u_H, u_S, u_D)   # Standard of Care
v_tu_trt <- m_M_trt %*% c(u_H, u_S, u_D)   # Treatment
```

07.2 Discounted Mean Costs and QALYs

```r
# Discount costs by multiplying the cost vector with discount weights
tc_d_SoC  <-  t(v_tc_SoC) %*% v_dwc  # Standard of Care
tc_d_trt  <-  t(v_tc_trt) %*% v_dwc  # Treatment
# Discount QALYS by multiplying the QALYs vector with discount weights
tu_d_SoC  <-  t(v_tu_SoC) %*% v_dwe  # Standard of Care
```

```
tu_d_trt  <-  t(v_tu_trt) %*% v_dwe  # Treatment

# store them into a vector
v_tc_d    <- c(tc_d_SoC, tc_d_trt)
v_tu_d    <- c(tu_d_SoC, tu_d_trt)

# Dataframe with discounted costs and effectiveness
df_ce       <- data.frame(Strategy = v_names_str,
                          Cost     = v_tc_d,
                          Effect   = v_tu_d)
df_ce
```

```
##            Strategy     Cost    Effect
## 1 Standard of Care 8043.139 10.25087
## 2        Treatment 8028.490 11.73928
```

07.3 Compute ICERs of the Markov model

```
df_cea <- calculate_icers(cost       = df_ce$Cost,
                          effect     = df_ce$Effect,
                          strategies = df_ce$Strategy)
df_cea
```

```
##            Strategy     Cost    Effect Inc_Cost Inc_Effect ICER Status
## 1        Treatment 8028.490 11.73928       NA         NA   NA     ND
## 2 Standard of Care 8043.139 10.25087       NA         NA   NA      D
```
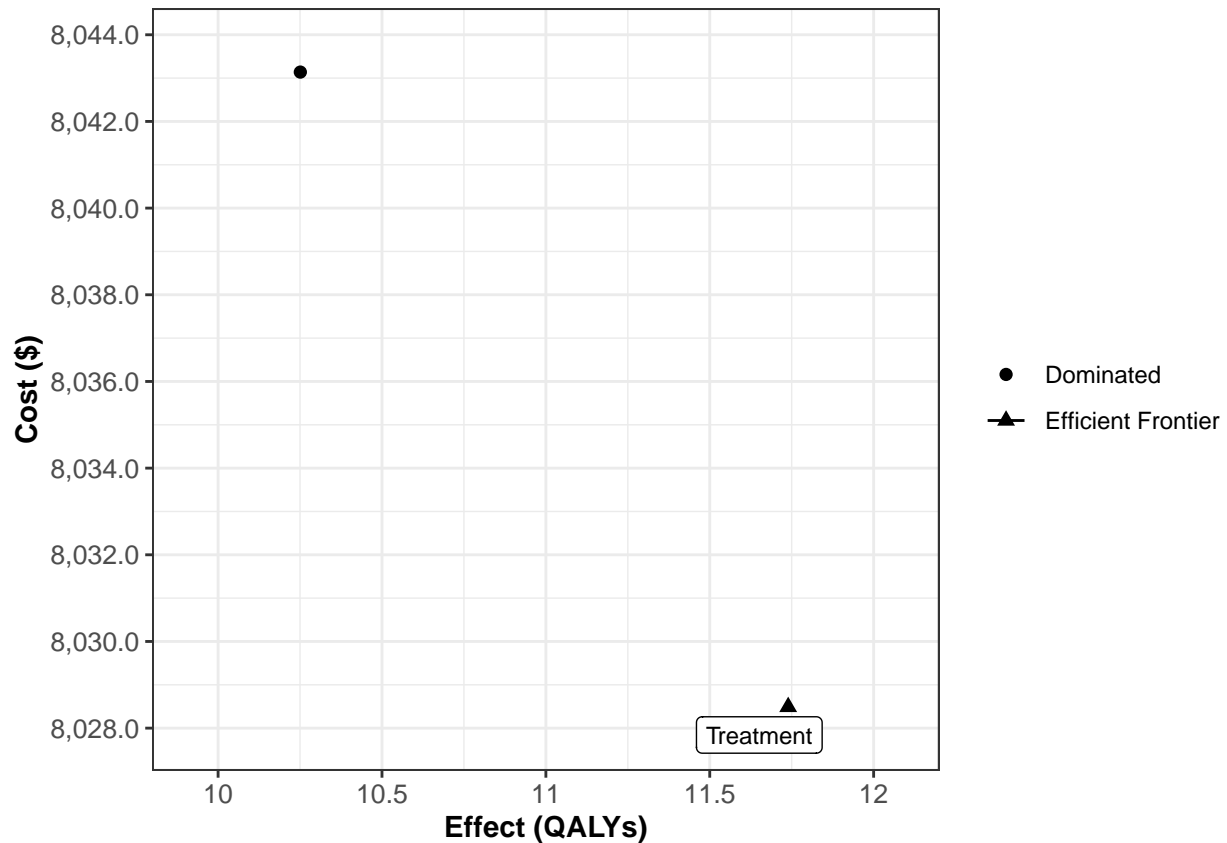
07.4 Plot frontier of the Markov model

```
plot(df_cea, effect_units = "QALYs", xlim = c(10, 12))
```

```
# note: you need to adjust the xlim values to values that are covering the range of effect values in you
```

08 Probabilistic Sensitivity Analysis (PSA)

08.1 List of input parameters

Create list `l_params_all` with all input probabilities, cost and utilities.

```
l_params_all <- as.list(data.frame(
  p_HD     = 0.02,  # probability of dying when healthy
  p_HS     = 0.05,  # probability of becoming sick when healthy, conditioned on not dying
  p_HS_trt = 0.03,  # probability of becoming sick when healthy, conditioned on not dying
  p_SD     = 0.1,   # probability of dying when sick
  c_H      = 400,   # cost of one cycle in healthy state
  c_S      = 1000,  # cost of one cycle in sick state
  c_D      = 0,     # cost of one cycle in dead state
  c_trt    = 800,   # one-time cost of treatment (at first cycle)
  u_H      = 0.8,   # utility when healthy
  u_S      = 0.5,   # utility when sick
  u_D      = 0,     # utility when dead
  d_e      = 0.03,  # discount factor for effectiveness
  d_c      = 0.03   # discount factor for costs
))
```

```
# store the parameter names into a vector
v_names_params <- names(l_params_all)
```

08.2 Load Sick-Sicker Markov model function

```
source("Functions_markov_3state.R")
# Test function
calculate_ce_out(l_params_all)
```

```
##           Strategy      Cost    Effect        NMB
## 1 Standard of Care  8043.139 10.25087  94465.51
## 2         Treatment 10331.262 11.73928 107061.54
```

08.3 Generate PSA datasets

```
# Function to generate PSA input dataset
gen_psa <- function(n_sim = 1000, seed = 071818){
  set.seed(seed) # set a seed to be able to reproduce the same results
  df_psa <- data.frame(
    # Transition probabilities (per cycle)
    # probability to become sick when healthy
    p_HS     = rbeta(n_sim, shape1 = 24, shape2 = 450),
    p_HS_trt = rbeta(n_sim, shape1 = 9,  shape2 = 281),   # under treatment
    # probability of dying when healthy
    p_HD     = rbeta(n_sim, shape1 = 16, shape2 = 767),
    # probability of dying when sick
    p_SD     = rbeta(n_sim, shape1 = 22.4, shape2 = 201.6),

    # Cost vectors with length n_sim
    # cost of remaining one cycle in state H
    c_H      = rgamma(n_sim, shape = 16, scale = 25),
    # cost of remaining one cycle in state S1
    c_S      = rgamma(n_sim, shape = 100, scale = 10),
    # cost of being in the death state
    c_D      = 0,
    # cost of treatment (per cycle)
    c_trt    = rgamma(n_sim, shape = 64, scale = 12.5),

    # Utility vectors with length n_sim
    # utility when healthy
    u_H      = rbeta(n_sim, shape1 =  50.4, shape2 = 12.6),
    # utility when sick
    u_S      = rbeta(n_sim, shape1 = 49.5, shape2 = 49.5),
    # utility when dead
    u_D      = 0
  )
  return(df_psa)
}
# Try it
gen_psa(10)
```

```
##           p_HS     p_HS_trt       p_HD       p_SD       c_H       c_S c_D    c_trt
## 1   0.05116365 0.02717469 0.02650780 0.09350365 331.7253 1001.3478   0 621.7035
## 2   0.04095451 0.01181545 0.02787410 0.15823599 535.2239  995.9279   0 937.7706
## 3   0.05334926 0.01972404 0.01561002 0.12357583 334.2034  955.0140   0 659.1331
## 4   0.03627100 0.03901602 0.02620191 0.08771020 352.7561  990.4764   0 865.2337
## 5   0.04782122 0.02128019 0.01998096 0.10799984 260.4642  943.7245   0 855.5065
## 6   0.07206924 0.02272066 0.01521342 0.12685251 291.1215  983.1453   0 860.4577
## 7   0.04803791 0.04457119 0.01499307 0.08911761 483.8274 1050.5295   0 994.2503
## 8   0.04335723 0.02882206 0.02131098 0.05814786 541.4731  864.3322   0 601.8085
## 9   0.05302297 0.03409499 0.01709267 0.15922549 551.1535 1080.4473   0 757.1225
## 10  0.03096171 0.01553948 0.01983932 0.10406523 315.7027  984.6521   0 787.5281
##          u_H        u_S u_D
## 1   0.8559721 0.4815761   0
## 2   0.7783084 0.5349337   0
## 3   0.8628224 0.5227023   0
## 4   0.8968823 0.4871518   0
## 5   0.8179546 0.5294793   0
## 6   0.6717953 0.5249675   0
## 7   0.8177386 0.5600215   0
## 8   0.8145828 0.5243320   0
## 9   0.8153981 0.5503887   0
## 10  0.8835447 0.5837644   0
```

```r
# Number of simulations
n_sim <- 1000

# Generate PSA input dataset
df_psa_input <- gen_psa(n_sim = n_sim)
# First six observations
head(df_psa_input)
```

```
##           p_HS    p_HS_trt       p_HD       p_SD       c_H       c_S c_D     c_trt
## 1 0.05116365 0.01954245 0.02621456 0.13853135 307.8380  899.5153   0  687.5154
## 2 0.04095451 0.04346716 0.01760834 0.13075427 466.9600 1066.1617   0  875.5292
## 3 0.05334926 0.03357981 0.02404573 0.08454761 235.2890  955.0145   0  658.2810
## 4 0.03627100 0.03806155 0.02716409 0.10457346 306.5100  789.6969   0  702.7446
## 5 0.04782122 0.03737024 0.01716697 0.14474739 535.1188  868.0570   0  566.1605
## 6 0.07206924 0.04257367 0.01710648 0.12289879 353.6715  991.6205   0 1096.0742
##          u_H        u_S u_D
## 1 0.7965014 0.4473598   0
## 2 0.7659582 0.4644020   0
## 3 0.7593770 0.4215045   0
## 4 0.8338376 0.5052819   0
## 5 0.8798517 0.5181703   0
## 6 0.7306958 0.5905503   0
```

```r
# Histogram of parameters
ggplot(melt(df_psa_input, variable.name = "Parameter"), aes(x = value)) +
      facet_wrap(~Parameter, scales = "free") +
      geom_histogram(aes(y = ..density..)) +
      theme_bw(base_size = 16) +
      theme(axis.text = element_text(size=8))
```
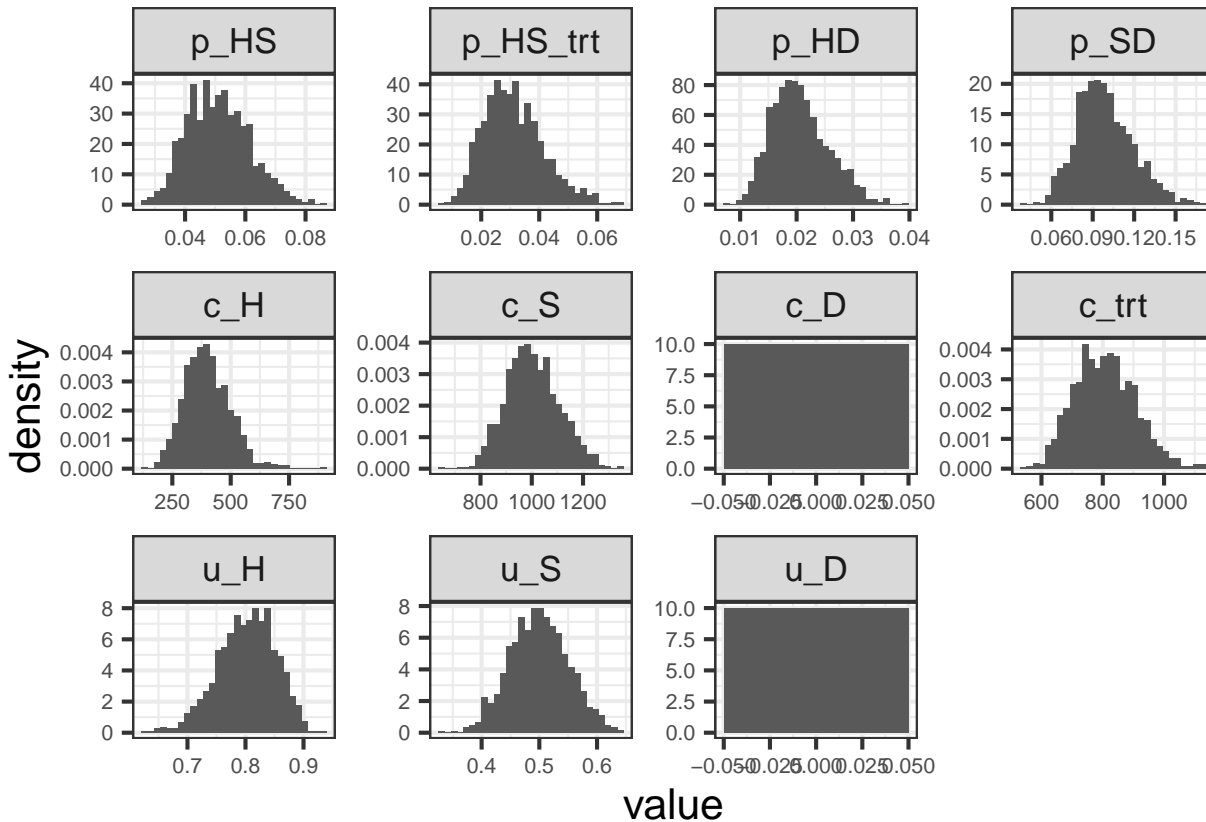
```r
# Initialize dataframes with PSA output
# Dataframe of costs
df_c <- as.data.frame(matrix(0,
                      nrow = n_sim,
                      ncol = n_str))
colnames(df_c) <- v_names_str
# Dataframe of effectiveness
df_e <- as.data.frame(matrix(0,
                      nrow = n_sim,
                      ncol = n_str))
colnames(df_e) <- v_names_str
```

08.4 Conduct probabilistic sensitivity analysis

```r
# Run Markov model on each parameter set of PSA input dataset
for(i in 1:n_sim){
  l_out_temp <- calculate_ce_out(df_psa_input[i, ])
  df_c[i, ] <- l_out_temp$Cost
  df_e[i, ] <- l_out_temp$Effect
  # Display simulation progress
  if(i/(n_sim/10) == round(i/(n_sim/10), 0)) { # display progress every 10%
    cat('\r', paste(i/n_sim * 100, "% done", sep = " "))
  }
}
```

08.4.1 Create PSA object for dampack

```
l_psa <- make_psa_obj(cost         = df_c,
                      effectiveness = df_e,
                      parameters    = df_psa_input,
                      strategies    = v_names_str)
```
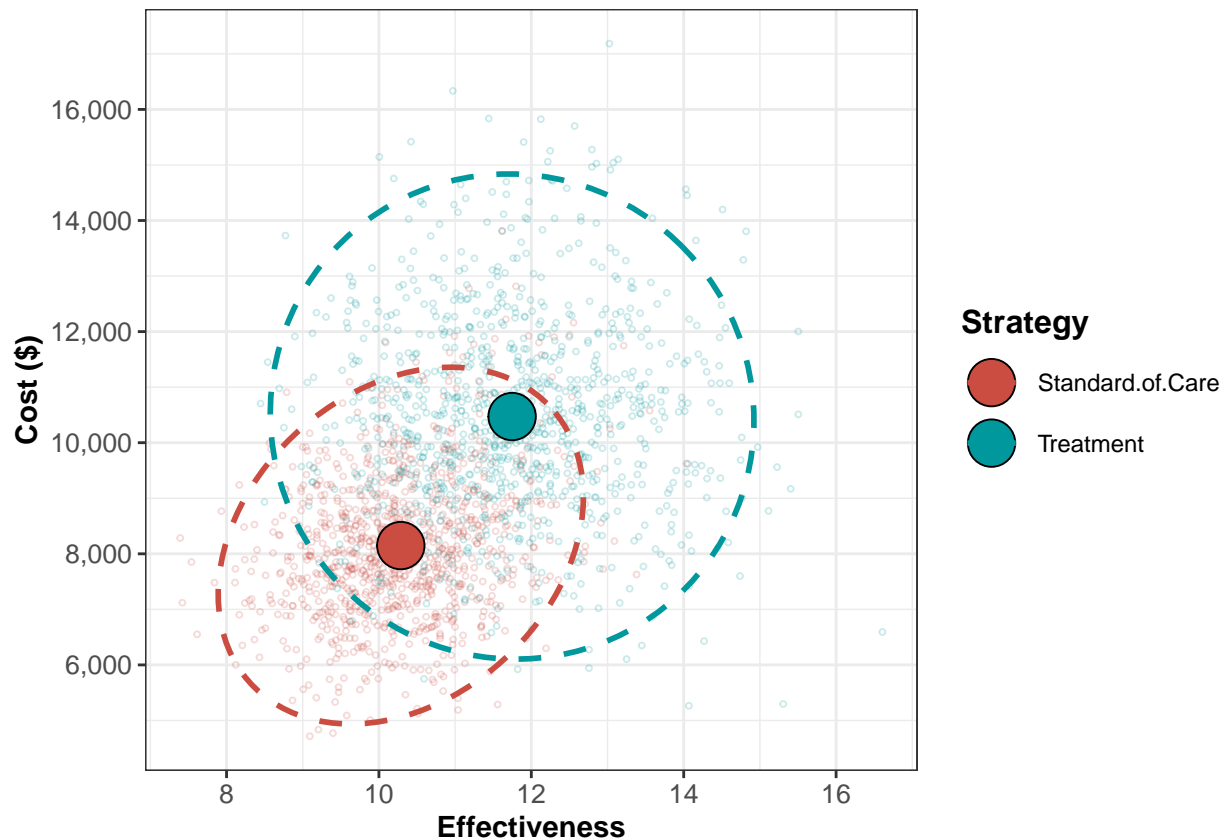
Vector with willingness-to-pay (WTP) thresholds.

```
v_wtp <- seq(0, 5000, by = 1000)
```

08.4.2 Cost-Effectiveness Scatter plot

```
plot(l_psa)
```


08.4.3 Conduct CEA with probabilistic output

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```
# Compute expected costs and effects for each strategy from the PSA
df_out_ce_psa <- summary(l_psa)

# Calculate incremental cost-effectiveness ratios (ICERs)
df_cea_psa <- calculate_icers(cost      = df_out_ce_psa$meanCost,
                              effect    = df_out_ce_psa$meanEffect,
                              strategies = df_out_ce_psa$Strategy)
df_cea_psa
```
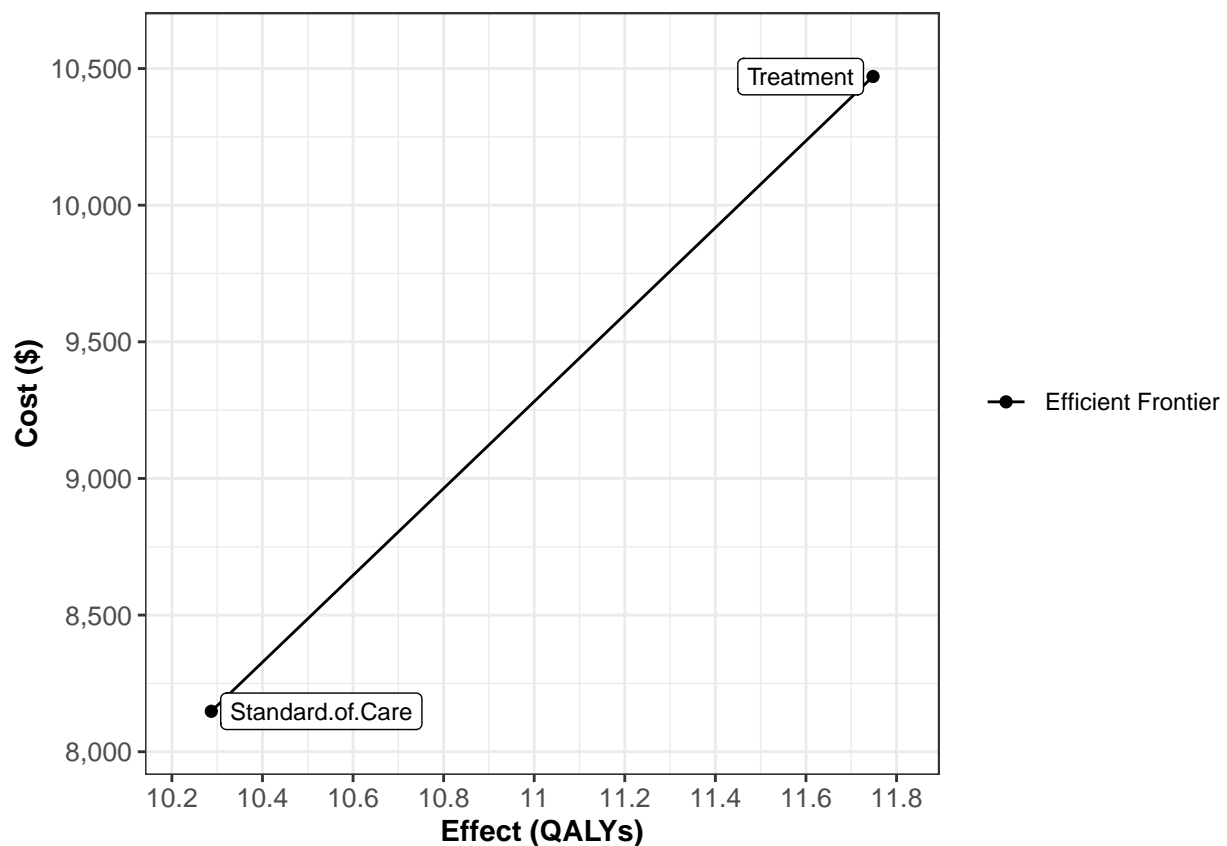
```
##           Strategy       Cost    Effect Inc_Cost Inc_Effect      ICER Status
## 1 Standard.of.Care  8148.004 10.28706       NA         NA        NA     ND
## 2       Treatment 10470.998 11.74808 2322.994   1.461028 1589.972     ND
```

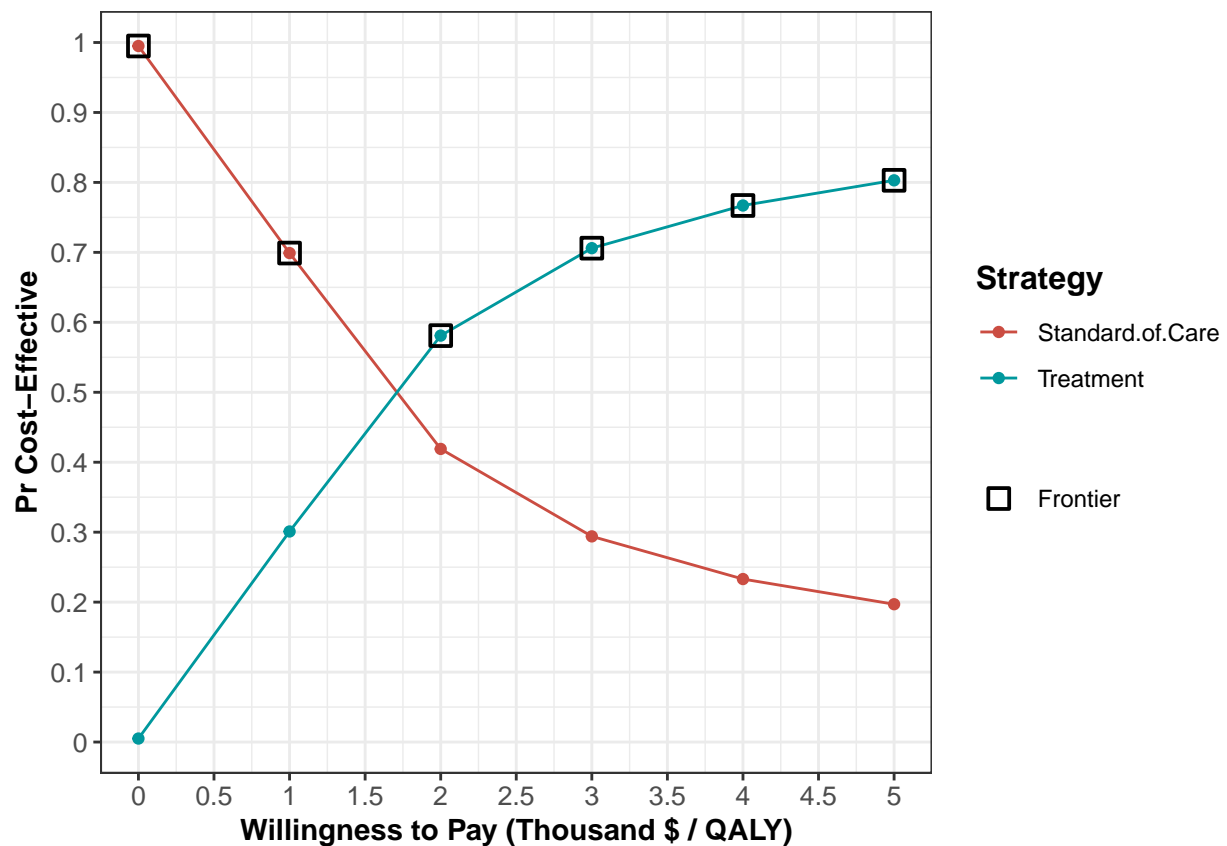## 08.4.4 Plot cost-effectiveness frontier

```
plot(df_cea_psa)
```


08.4.5 Cost-effectiveness acceptability curves (CEACs) and frontier (CEAF)

```
ceac_obj <- ceac(wtp = v_wtp, psa = l_psa)
# Regions of highest probability of cost-effectiveness for each strategy
summary(ceac_obj)
```

```
##   range_min range_max    cost_eff_strat
## 1         0      2000 Standard.of.Care
## 2      2000      5000        Treatment
```

```
# CEAC & CEAF plot
plot(ceac_obj)
```


### 08.4.6 Expected Loss Curves (ELCs)

The expected loss is the the quantification of the foregone benefits when choosing a suboptimal strategy given current evidence.

```
elc_obj <- calc_exp_loss(wtp = v_wtp, psa = l_psa)
elc_obj
```

```
##   WTP          Strategy Expected_Loss On_Frontier
## 1   0 Standard.of.Care       1.92815        TRUE
## 2   0        Treatment    2324.92196       FALSE
```

```
## 3   1000 Standard.of.Care       331.23937         TRUE
## 4   1000          Treatment     1193.20487        FALSE
## 5   2000 Standard.of.Care      1405.42678        FALSE
## 6   2000          Treatment      806.36395         TRUE
## 7   3000 Standard.of.Care      2748.21166        FALSE
## 8   3000          Treatment      688.12052         TRUE
## 9   4000 Standard.of.Care      4173.51938        FALSE
## 10  4000          Treatment      652.39992         TRUE
## 11  5000 Standard.of.Care      5633.16928        FALSE
## 12  5000          Treatment      651.02150         TRUE
```

```
# ELC plot
plot(elc_obj, log_y = FALSE)
```
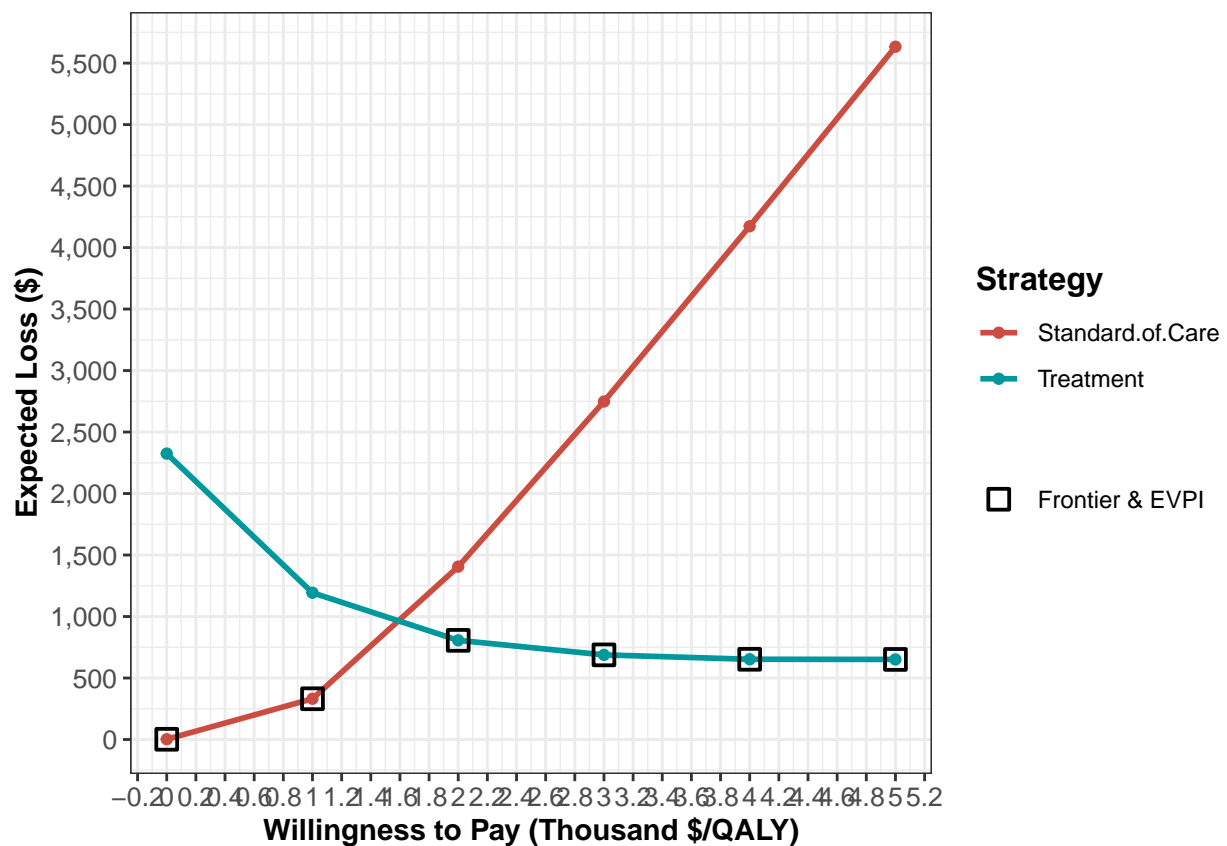

08.4.7 Expected value of perfect information (EVPI)

```
evpi <- calc_evpi(wtp = v_wtp, psa = l_psa)
# EVPI plot
plot(evpi, effect_units = "QALY")
```
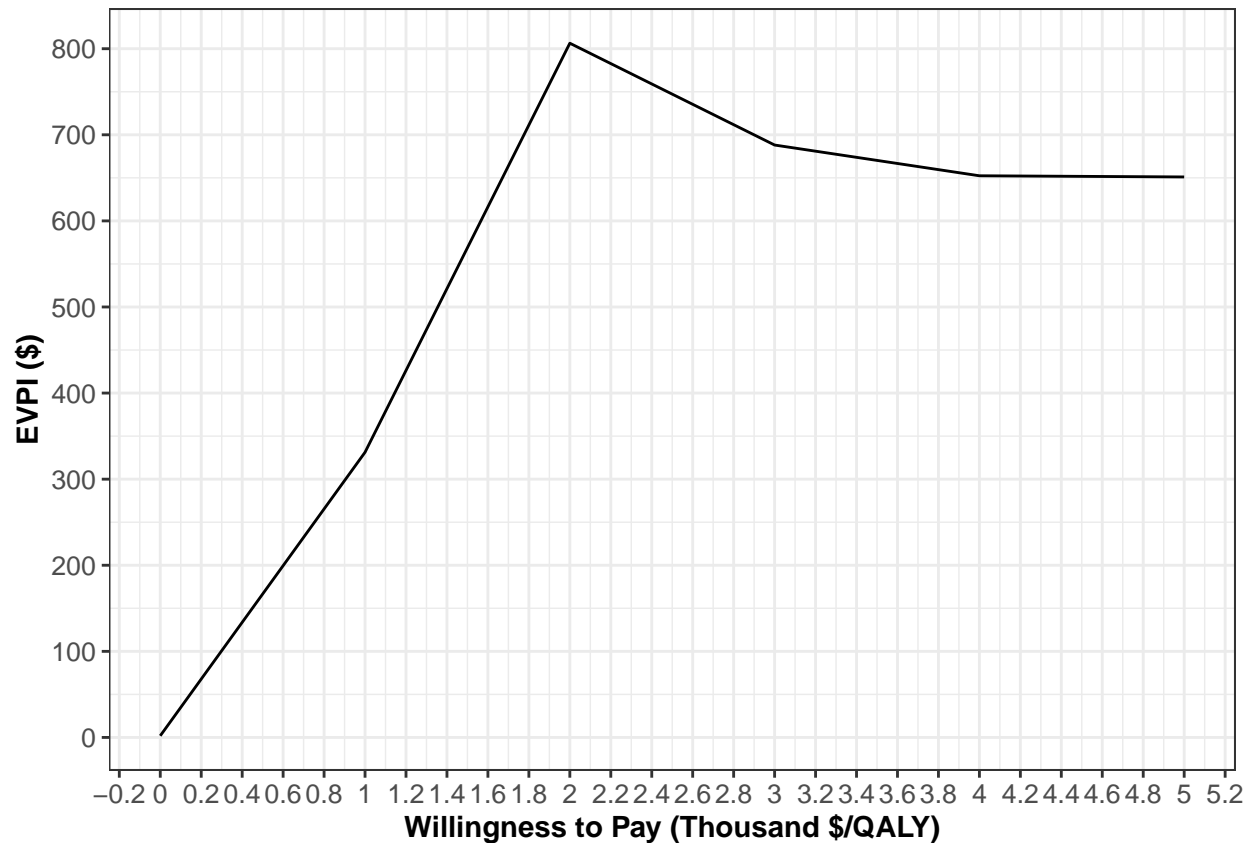
09 Using R package `hesim`

```
p_load("hesim")
```

09.1 Model setup

Here we define target population and intervention strategies.

We have one representative patient here of age 25, we can think of this as a cohort of homogenous patients instead of one individual patient.

```
# define strategies
strategies <- data.frame(
  strategy_id   = 1:n_str,
  strategy_name = v_names_str
  )
# define patient cohort
patients <- data.frame(
  patient_id = 1,
  age        = 25
)
# create dataset with
```

```
hesim_dat <- hesim_data(
  strategies = strategies,
  patients   = patients
)
hesim_dat
```

```
## $strategies
##   strategy_id    strategy_name
## 1           1 Standard of Care
## 2           2        Treatment
##
## $patients
##   patient_id age
## 1          1  25
##
## attr(,"class")
## [1] "hesim_data"
```

09.2 parameters

```
params <- list(
  # medical costs
  c_medical    = c(Healthy = c_H, Sick = c_S),
  c_medical_se = c(Healthy = 100, Sick = 100),
  # treatment costs (embedded in medical costs since only those who are sick get treated)
  c_trt  = c_trt,
  # state utilities
  u_mean = c(Healthy = u_H,  Sick = u_S),
  u_se   = c(Healthy = 0.05, Sick = 0.05)
)
```

09.3 PSA setup

```
rng_def()
```

```
rng_def <- define_rng({
  list( # Parameters to return
    # medical costs
    c_medical = gamma_rng(mean = c_medical, sd = c_medical_se),
    c_trt     = gamma_rng(mean = c_trt,     sd = 1000),
    # state utilities
    u = beta_rng(mean = u_mean, sd = u_se)
  )
}, n = 1000)
```

09.4 Transform parameters

```r
input_data <- hesim::expand(hesim_dat, by = c("strategies", "patients"))
head(input_data)
```

```
##    strategy_id patient_id    strategy_name age
## 1:           1          1 Standard of Care  25
## 2:           2          1        Treatment  25
```

The function `define_tparams()` returns:

- `tpmatrix`: The transition probability matrix

- `utility`: Utility assigned to each health state

- `costs`: Costs assigned to each health state or each cost category

Your task: write mathematical expressions

The function: automatically loops over PSA iterations (running the model on each sampled parameter set)

```r
tparams_def <- define_tparams({
  # treatment reduces the risk of getting sick
  rr <- ifelse(strategy_name == "Standard of Care", 1, p_HS_trt / p_HS) # relative risk

  list(
    tpmatrix = tpmatrix(
      (1 - p_HD) * (1 - p_HS * rr),  (1 - p_HD) * (p_HS * rr),  p_HD,
       0,  C,  p_SD,
       0,  0,  1
    ),

    utility = u,
    costs = list(
      treatment = ifelse(strategy_name == "Standard of Care", 0, c_trt),
      medical   = c_medical
    )
  )
})
```

09.5 Simulation

Construct model:

```r
mod_def <- define_model(tparams_def = tparams_def,
                        rng_def     = rng_def,
                        params      = params)
```

Initialize-model:

```r
cost_args <- list(
  treatment = list(method = "starting"),
  medical   = list(method = "wlos")
)
econmod <- create_CohortDtstm(mod_def, input_data, cost_args = cost_args)
```

Simulate outcomes:

```
econmod$sim_stateprobs(n_cycles = n_t)
head(econmod$stateprobs_)
```

```
##    sample strategy_id patient_id grp_id state_id t      prob
## 1:     1          1          1      1       1 0 1.0000000
## 2:     1          1          1      1       1 1 0.9310000
## 3:     1          1          1      1       1 2 0.8667610
## 4:     1          1          1      1       1 3 0.8069545
## 5:     1          1          1      1       1 4 0.7512746
## 6:     1          1          1      1       1 5 0.6994367
```

```
econmod$sim_qalys(dr = d_e, lys = TRUE, integrate_method = "riemann_right")
head(econmod$qalys_)
```

```
##    sample strategy_id patient_id grp_id state_id   dr    qalys       lys
## 1:     1          1          1      1       1 0.03 6.484607  9.339850
## 2:     1          1          1      1       2 0.03 1.841271  3.861427
## 3:     1          2          1      1       1 0.03 8.199613 11.809992
## 4:     1          2          1      1       2 0.03 1.361197  2.854639
## 5:     2          1          1      1       1 0.03 8.063655  9.339850
## 6:     2          1          1      1       2 0.03 1.849052  3.861427
```

```
econmod$sim_costs(dr = d_c, integrate_method = "riemann_right")
head(econmod$costs_)
```

```
##    sample strategy_id patient_id grp_id state_id   dr  category     costs
## 1:     1          1          1      1       1 0.03 treatment    0.000
## 2:     1          1          1      1       2 0.03 treatment    0.000
## 3:     1          2          1      1       1 0.03 treatment 7819.843
## 4:     1          2          1      1       2 0.03 treatment    0.000
## 5:     2          1          1      1       1 0.03 treatment    0.000
## 6:     2          1          1      1       2 0.03 treatment    0.000
```

09.6 Cost-effectivess analysis

```
ce_sim <- econmod$summarize()
cea_pw_out <- cea_pw(ce_sim,
                     comparator = 1,
                     dr_qalys = 0.03, dr_costs = 0.03,
                     k = seq(0, 5000, 1000))

## @knitr icer
icer_tbl(cea_pw_out, colnames = strategies$strategy_name)
```

```
##                      Standard of Care Treatment
## Incremental QALYs "-"               "1.47 (1.21, 1.72)"
## Incremental costs "-"               "7,990 (6,070, 10,233)"
## Incremental NMB   "-"               "65,685 (52,214, 77,821)"
## ICER              "-"               "5,422"
## Conclusion        "-"               "Cost-effective"
```

10 Overview of `hesim`

Advantages:

- Easy to build models without having to program the complete model structure (easier for novice modelers).

- A lot of the modeling code are implemented for you in the back end.

- Suitable for modelers who are not familiar with `R` programming and functionality.

- Code written in `C++` in the back end, which offers enhanced computational speed.

Disadvantages:

- Its rigid function structure inhibits its ability tweak models or incorporate more complex model components (e.g. tunnel states, transition rewards).

- Does not provide the option for running deterministic analysis or one-way and two-way sensitivity analyses.

- Does not provide the ability to capture information about the specific transitions among health states (transition dynamics).

- Does not provide the ability to easily compute epidemiological outcomes.

- Does not allow costs to be applied to certain health states (at least not easily).

References

```r
citation("hesim")
```

```
##
## To cite package 'hesim' in publications use:
##
##   Devin Incerti and Jeroen P. Jansen (2020). hesim: Health-Economic
##   Simulation Modeling and Decision Analysis. R package version 0.4.1.
##   https://CRAN.R-project.org/package=hesim
##
## A BibTeX entry for LaTeX users is
##
##   @Manual{,
##     title = {hesim: Health-Economic Simulation Modeling and Decision Analysis},
##     author = {Devin Incerti and Jeroen P. Jansen},
##     year = {2020},
##     note = {R package version 0.4.1},
##     url = {https://CRAN.R-project.org/package=hesim},
##   }
```