

AML Survival Analysis

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2025-02-15

1 Study Overview

- **Dataset:** AML patient survival data (**n = 200, 133 events**).
 - **Objective:** Assess the impact of **FLT3 mutation** on survival, adjusting for **age, WBC count, BM blast percentage, and cytogenetic risk classification**.
 - **Statistical Model:** Cox proportional hazards model with **age stratification** (`strata(age_group)`).
 - **Survival Estimation:** Kaplan-Meier curves comparing **FLT3-mutant vs. WT patients** across different **age groups**.
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2 Load Processed Data

```
# Load the processed dataset
aml_data <- readRDS("processed_aml_data.rds") # Use read.csv("processed_aml_data.csv") if saved as CSV

# Show structure of the dataset
str(aml_data)

## 'data.frame':    200 obs. of  19 variables:
## $ patient_ID          : Factor w/ 200 levels "TCGA-AB-2802",...: 1 2 3 4 5 6 7 8 9 10 ...
## $ FLT3_mut_status      : Factor w/ 2 levels "0","1": 1 1 1 1 1 1 1 1 1 2 ...
## $ sex                  : Factor w/ 2 levels "Female","Male": 2 1 2 2 2 1 2 1 1 2 ...
## $ race                  : Factor w/ 13 levels "ASIAN","BLACK",...: 13 13 13 13 13 13 13 13 13 13 ...
## $ FAB                   : Factor w/ 9 levels "M0","M1","M2",...: 5 4 4 1 2 2 3 3 3 5 ...
## $ age_at_diagnosis      : int   50 61 30 77 46 68 23 64 76 81 ...
## $ BM_blast_percentage_at_diagnosis : int   88 44 82 67 90 91 59 60 48 98 ...
## $ WBC_count_at_diagnosis : num   16.9 1 5.7 92 29.4 ...
## $ risk_cyto_at_diagnosis : Factor w/ 4 levels "Good","Intermediate",...: 2 1 2 2 1 2 2 2 2 2 ...
## $ risk_molecular_at_diagnosis : Factor w/ 4 levels "Good","Intermediate",...: 2 1 1 2 1 2 2 2 2 2 ...
## $ date_of_form_completion : Factor w/ 1 level "14/12/2010": 1 1 1 1 1 1 1 1 1 1 ...
## $ date_of_initial_pathologic_diagnosis: Factor w/ 10 levels "2001-00-00","2002-00-00",...: 1 1 1 1 2 2 2 2 2 2 ...
## $ days_to_birth_from_diagnosis : int  -18385 -22584 -11203 -28124 -16892 -25143 -8520 -23679 ...
## $ days_to_death_from_diagnosis : Factor w/ 69 levels "[Not Applicable]",...: 37 60 1 48 68 16 ...
## $ days_to_last_followup_from_diagnosis: Factor w/ 60 levels "[Not Available]",...: 1 1 32 1 1 1 35 1 ...
## $ vital_status          : num    1 1 0 1 1 1 0 1 1 1 ...
## $ survival_time          : int   365 792 2556 576 944 180 2861 62 31 243 ...
## $ age_group              : Factor w/ 3 levels "50","51-65",...: 1 2 1 3 1 3 1 2 3 3 ...
## $ survival_time_years    : num    1 2.17 7 1.58 2.59 ...
```

3 Cox Proportional Hazards Model

```
# Fit the stratified Cox model
cox_model_stratified <- coxph(Surv(survival_time_years, vital_status) ~
  FLT3_mut_status +
  BM_blast_percentage_at_diagnosis +
  WBC_count_at_diagnosis +
  risk_cyto_at_diagnosis +
  strata(age_group),
  data = aml_data)

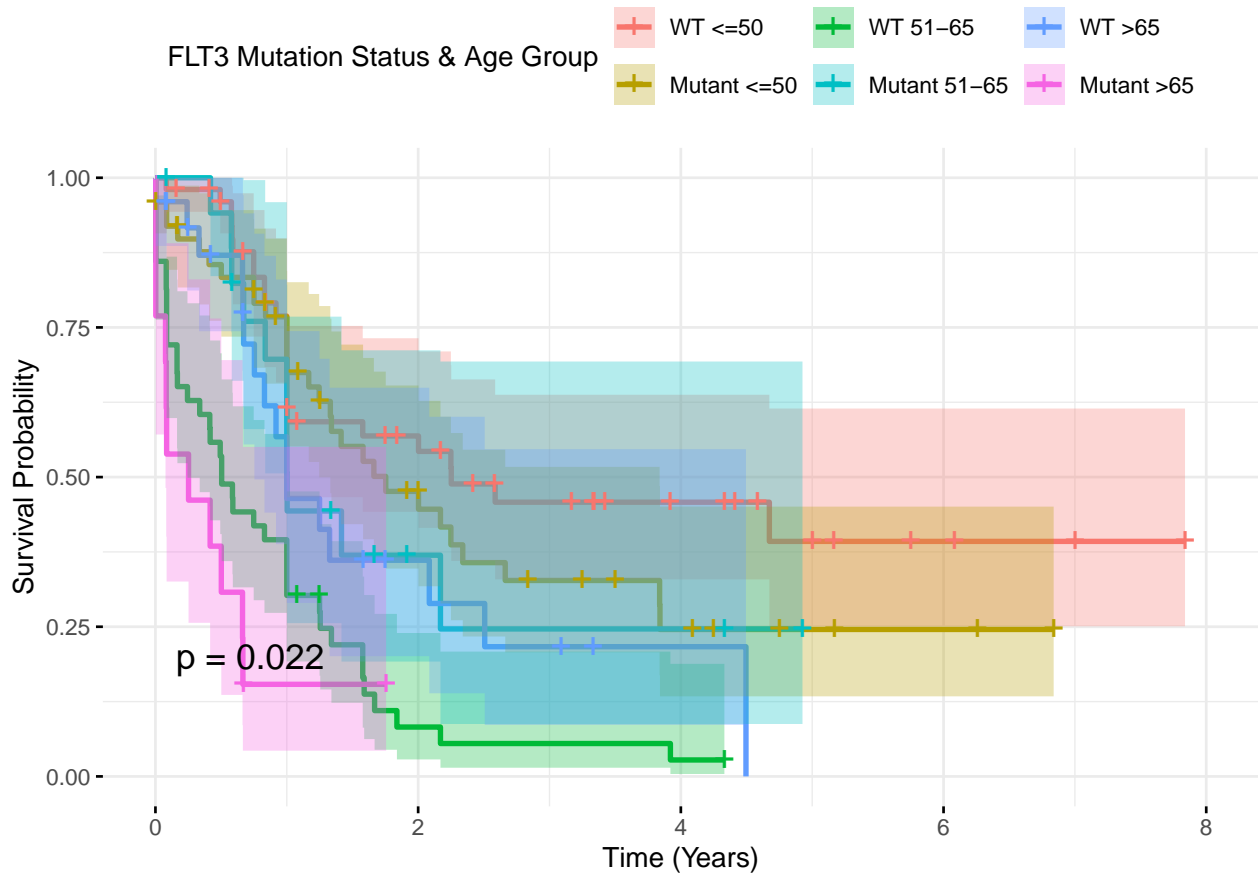
# Display model summary
summary(cox_model_stratified)

## Call:
## coxph(formula = Surv(survival_time_years, vital_status) ~ FLT3_mut_status +
##      BM_blast_percentage_at_diagnosis + WBC_count_at_diagnosis +
##      risk_cyto_at_diagnosis + strata(age_group), data = aml_data)
##
##      n= 200, number of events= 133
##
##              coef exp(coef) se(coef)      z Pr(>|z|)
## FLT3_mut_status1      0.446496   1.562827 0.229073  1.949 0.051279
## BM_blast_percentage_at_diagnosis 0.001728   1.001730 0.004774  0.362 0.717352
## WBC_count_at_diagnosis      0.004484   1.004494 0.002050  2.187 0.028720
## risk_cyto_at_diagnosisIntermediate 0.948034   2.580632 0.322146  2.943 0.003252
## risk_cyto_at_diagnosisN.D.      2.170823   8.765498 0.606042  3.582 0.000341
## risk_cyto_at_diagnosisPoor      1.586612   4.887163 0.351287  4.517 6.28e-06
##
## FLT3_mut_status1      .
## BM_blast_percentage_at_diagnosis
## WBC_count_at_diagnosis      *
## risk_cyto_at_diagnosisIntermediate **
## risk_cyto_at_diagnosisN.D.      ***
## risk_cyto_at_diagnosisPoor      ***
## ---
## Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
##
##              exp(coef) exp(-coef) lower .95 upper .95
## FLT3_mut_status1      1.563      0.6399      0.9975      2.448
## BM_blast_percentage_at_diagnosis 1.002      0.9983      0.9924      1.011
## WBC_count_at_diagnosis      1.004      0.9955      1.0005      1.009
## risk_cyto_at_diagnosisIntermediate 2.581      0.3875      1.3725      4.852
## risk_cyto_at_diagnosisN.D.      8.765      0.1141      2.6725     28.750
## risk_cyto_at_diagnosisPoor      4.887      0.2046      2.4549      9.729
##
## Concordance= 0.654 (se = 0.028 )
## Likelihood ratio test= 38.11 on 6 df,  p=1e-06
## Wald test              = 35.41 on 6 df,  p=4e-06
## Score (logrank) test = 38.7 on 6 df,  p=8e-07
```

4 Kaplan-Meier Survival Analysis

```
# Fit the survival model
surv_obj <- survfit(Surv(survival_time_years, vital_status) ~ FLT3_mut_status + strata(age_group),
                    data = aml_data)

# Plot survival curves
ggsurvplot(surv_obj,
            data = aml_data,
            conf.int = TRUE,
            pval = TRUE,
            legend.title = "FLT3 Mutation Status & Age Group",
            legend.labs = c("WT 50", "Mutant 50",
                           "WT 51-65", "Mutant 51-65",
                           "WT >65", "Mutant >65"),
            xlab = "Time (Years)",
            ylab = "Survival Probability",
            ggtheme = theme_minimal())
```



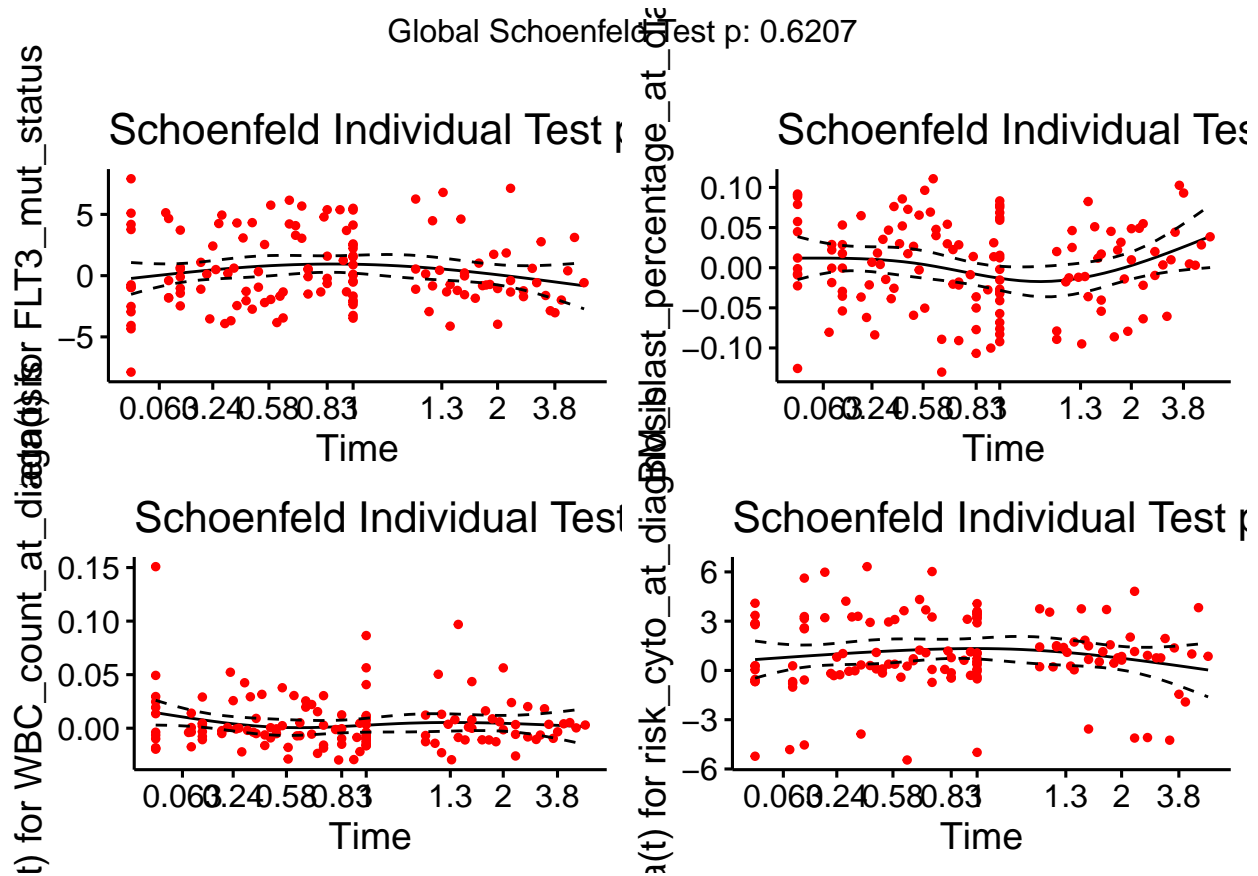
5 Proportional Hazards Assumption Check

```
# Check proportional hazards assumption
ph_test <- cox.zph(cox_model_stratified)
```

```
print(ph_test)
```

```
##                               chisq df    p
## FLT3_mut_status              0.611  1 0.43
## BM_blast_percentage_at_diagnosis 0.444  1 0.51
## WBC_count_at_diagnosis        1.463  1 0.23
## risk_cyto_at_diagnosis        1.355  3 0.72
## GLOBAL                      4.415  6 0.62
```

```
# Plot Schoenfeld residuals
ggcoxzph(ph_test)
```



6 Final Conclusions

- FLT3 mutation is associated with worse survival (HR = 1.56, $p = 0.051$, borderline significant).
- WBC count at diagnosis is a weak predictor of survival ($p = 0.0287$).
- Cytogenetic risk classification is the strongest predictor (HR = 4.89 for poor-risk, $p < 0.001$).
- The proportional hazards assumption is satisfied ($p = 0.62$), validating the model.
- Survival curves confirm FLT3-mutant patients have significantly lower survival probabilities ($p = 0.022$).

7 Next Steps & Recommendations

- Further explore interactions between FLT3 mutation and chemotherapy response.
 - Validate findings with external AML patient datasets.
 - Investigate targeted therapies for FLT3-mutant patients.
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8 References

(Include any relevant citations here.)

Notes

- Generated using R (`survival`, `ggsurvplot`) and Cox regression modeling.
- Kaplan-Meier survival analysis was performed with age stratification (`strata(age_group)`).
- Schoenfeld residuals confirmed model validity ($p = 0.62$).