

# Multistate models

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# Multistate models

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ms-Markov

# Common assumptions in survival analysis

1. Subjects are **either** “healthy” **or** “diseased”, with no intermediate state.
2. The disease is **irreversible**, or requires intervention to be cured.
3. The time of disease incidence is known **exactly**.
4. The disease is **accurately** diagnosed.

These assumptions are true for **death** and many **chronic diseases**.

# A model for cervical cancer

Invasive squamous cell cancer of the cervix is preceded by cervical intraepithelial neoplasia (CIN)



- ▶ Aim of the modeling the **transition rates** between **states**, is to be able predict how population moves between states:
- ▶ **state** occupancy probabilities
- ▶ visit probability
- ▶ length of stay (sojourn time)

# Markov models for multistate diseases

Generalization of Poisson regression to multiple disease states:

- ▶ Transition rates between states depends **only** on current state (and possibly time since start) — the **Markov** property
- ▶ (time-fixed) covariates may influence transition rates
- ▶ the formal Markov property is **very** restrictive
- ▶ **semi**-Markov: rates depend on time since entry to current state
- ▶ In the clinical literature, the term “Markov model” is often used about any type of multistate model
- ▶ ...and the Markov property is handy in probability theory

# Components of a multistate (Markov) model

- ▶ Define the (disease) states
- ▶ Define which transitions between states that occur
- ▶ Select covariates influencing transition rates (may be different between transitions)
- ▶ Constrain some covariate effects to be the same, or zero.
- ▶ Not a trivial task — do we want e.g.
  - ▶ cause of death
  - ▶ disease status at death

# Components of multistate data

Times should be recorded as **dates**

- ▶ birth date
- ▶ entry date
- ▶ entry **state**
- ▶ exit date
- ▶ death date
- ▶ state entry dates — for all states
- ▶ ... some states may be revisited

From this each person's trajectory through states can be constructed

# Likelihood for multistate model

- ▶ The likelihood of the observed data (sojourn times and transitions) depend on the (models for) the transition rates.
- ▶ Assume transition rates are constant in small time intervals
- ▶  $\Rightarrow$  each interval contributes terms to the log-likelihood:
  - ▶ one for each person ( $p$ ) at risk in state  $s$  in the interval
  - ▶ ... for each possible transition ( $s \rightarrow v$ )
  - ▶ each term is a Poisson log-likelihood contribution:

$$d_{psv} \log(\lambda_{psv}) - \lambda_{psv} y_{ps}, \quad \text{where:}$$

- $\lambda_{psv}$  rate for person  $p$  in state  $s$  going to state  $v$
  - $d_{psv}$  did person  $p$  in state  $s$  go to state  $v$  at end of interval
  - $y_{ps}$  how long did person  $p$  spend in state  $s$  (how long is the interval)
- ▶ Total log-lik is sum of terms over persons and transitions



# Practical multistate modeling

- ▶ Total log-lik is sum of terms over persons ( $p$ ) and transitions ( $s \rightarrow v$ )
- ▶ — components **not** independent, but the total likelihood is a product; hence of the same form as the likelihood of independent Poisson variates
- ▶ practical analysis is just analysis of each transition rate separately
- ▶ as long as no two rates **out** of the **same** state are modeled we can use subsets of Lexis objects

# Multistate models with Lexis

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August 2019

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ms-Lexis

## Example: Renal failure data from Steno

Hovind P, Tarnow L, Rossing P, Carstensen B, and Parving H-H: Improved survival in patients obtaining remission of nephrotic range albuminuria in diabetic nephropathy. *Kidney Int.*, 66(3):1180–1186, 2004.

- ▶ 96 patients entering at nephrotic range albuminuria (NRA), i.e.  $\text{U-alb} > 300\text{mg/day}$ .
- ▶ Is remission from this condition (i.e return to  $\text{U-alb} < 300\text{mg/day}$ ) predictive of the prognosis?
- ▶ Endpoint of interest: Death or end stage renal disease (ESRD), i.e. dialysis or kidney transplant.

		Remission	
		Total	
			Yes      No
No. patients		125	32      93
No. events		77	8      69
Follow-up time (years)		1084.7	259.9      824.8
Cox-model:			
Timescale:	Time since nephrotic range albuminuria (NRA)		
Entry:	2.5 years of GFR-measurements after NRA		
Outcome:	ESRD or Death		
Estimates:	RR	95% c.i.	p
Fixed covariates:			
Sex (F vs. M):	0.92	(0.53,1.57)	0.740
Age at NRA (per 10 years):	1.42	(1.08,1.87)	0.011
Time-dependent covariate:			
Obtained remission:	0.28	(0.13,0.59)	0.001

## Features of the analysis

- ▶ Remission is included as a time-dependent variable.
- ▶ Age at entry is included as a fixed variable.

```
renal[1:5,]  
id      dob      doe      dor      dox  event  
17 1967.944 1996.013      NA 1997.094      2  
26 1959.306 1989.535 1989.814 1996.136      1  
27 1962.014 1987.846      NA 1993.239      3  
33 1950.747 1995.243 1995.717 2003.993      0  
42 1961.296 1987.884 1996.650 2003.955      0
```

Note patient 26, 33 and 42 obtain remission.

```

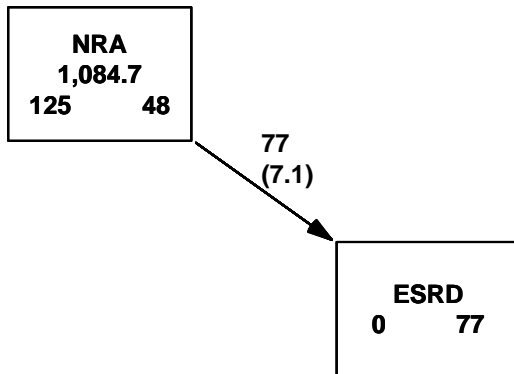
> Lr <- Lexis( entry = list( per=doe,
+                             age=doe-dob,
+                             tfi=0 ),
+             exit = list( per=dox ),
+             exit.status = event>0,
+             states = c("NRA","ESRD"),
+             data = renal )
> summary( Lr )

```

Transitions:

	To					
From	NRA	ESRD	Records:	Events:	Risk time:	Persons:
NRA	48	77	125	77	1084.67	125

```
> boxes( Lr, boxpos=list(x=c(25,75),  
+                          y=c(75,25)),  
+        scale.R=100, show.BE=TRUE )
```



# Cutting follow-up at remission: cutLexis

```
> Lc <- cutLexis( Lr, cut=Lr$dor,  
+               timescale="per",  
+               new.state="Rem",  
+               precursor.states="NRA" )  
> summary( Lc )
```

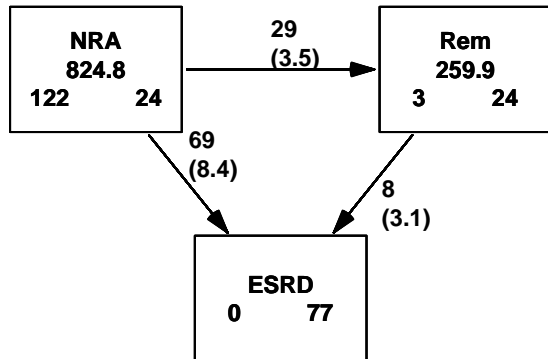
Transitions:

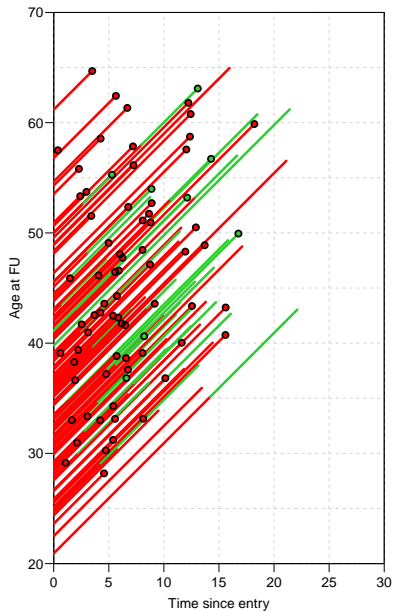
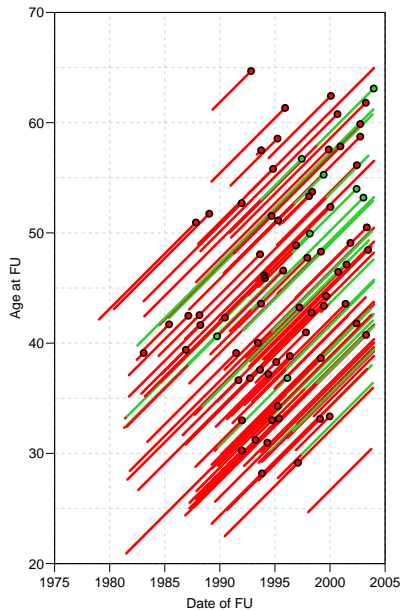
	To						
From	NRA	Rem	ESRD	Records:	Events:	Risk time:	Persons:
NRA	24	29	69	122	98	824.77	122
Rem	0	24	8	32	8	259.90	32
Sum	24	53	77	154	106	1084.67	125



## Showing states and FU: boxes.Lexis

```
> boxes( Lc, boxpos=list(x=c(15,85,50),  
+                          y=c(85,85,20)),  
         scale.R=100, show.BE=TRUE )
```





# Splitting states: cutLexis

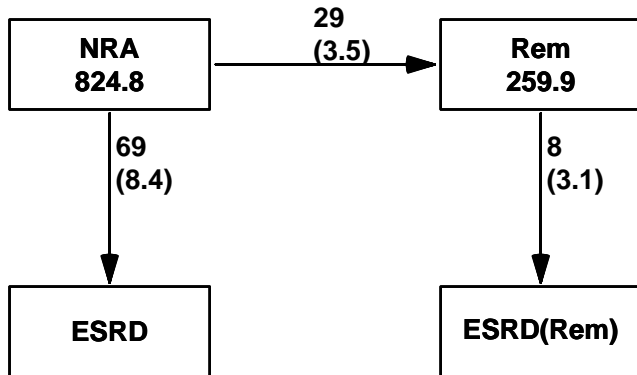
```
> Lc <- cutLexis( Lr, cut=Lr$dor,  
+               timescale="per",  
+               new.state="Rem",  
+               precursor.states="NRA",  
+               split.states=TRUE )  
> summary( Lc )
```

Transitions:

	To							
From	NRA	Rem	ESRD	ESRD (Rem)	Records:	Events:	Risk time:	Persons:
NRA	24	29	69	0	122	98	824.77	122
Rem	0	24	0	8	32	8	259.90	32
Sum	24	53	69	8	154	106	1084.67	125

## Showing states and FU: boxes.Lexis

```
> boxes( Lc, boxpos=list(x=c(15,85,15,85),  
+                          y=c(85,85,20,20)), scale.R=100 )
```



# Likelihood for a general MS-model

- ▶ Product of likelihoods for each transition  
— each one as for a survival model
- ▶ **Risk time** is the risk time in the “From” state
- ▶ **Events** are transitions to the “To” state
- ▶ All other transitions out of “From” are treated as **censorings**
- ▶ Possible to fit models separately for each transition

# Prediction in multistate models: simLexis and renal failure

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Multistate models

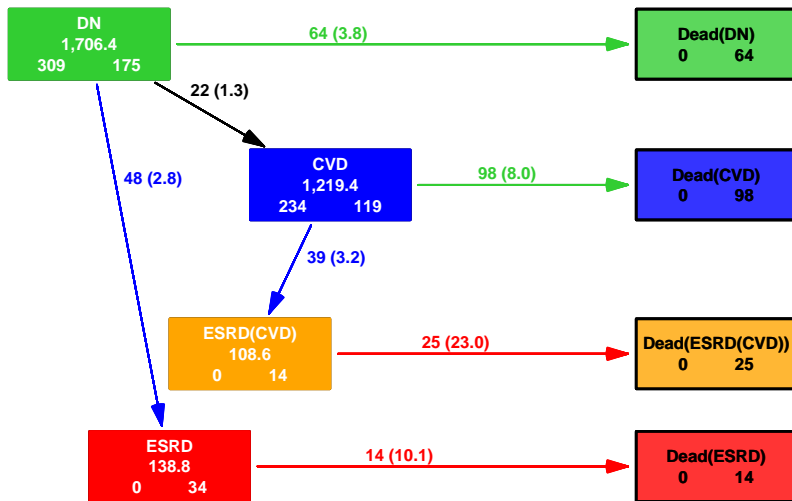
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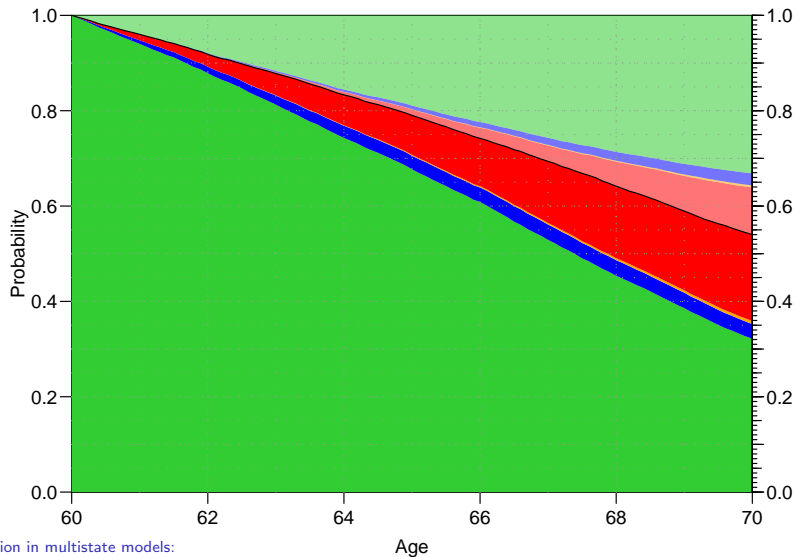
<http://BendixCarstensen.com/SPE>

simRenal

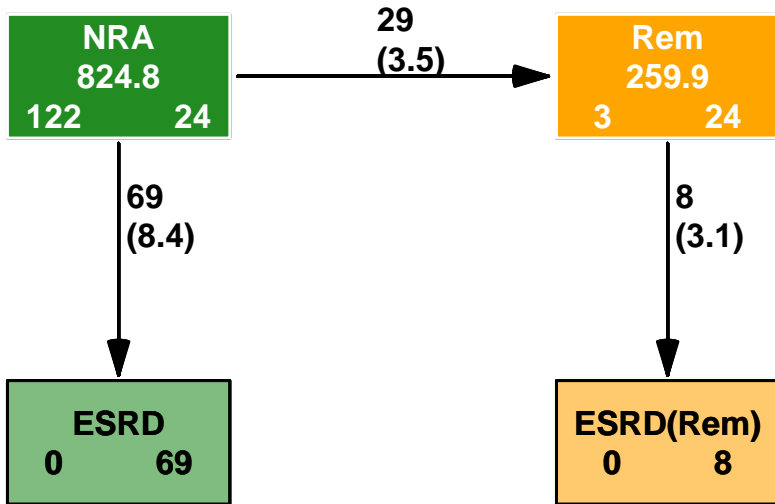
# A more complicated multistate model



# A more complicated multistate model







# Modeling in a multistate model

Each transition modeled by a model for rates (Cox-model, Poisson-model for split data, glm or gam):

```
> sLc <- splitLexis( Lc, "tfi", breaks=seq(0,30,1/12) )
> # Rem-rate
> mr <- gam( cbind(lex.Xst=="Rem",lex.dur)
+           ~ s( tfi, k=10 ) + sex,
+           family = poisreg,
+           data = subset( sLc, lex.Cst=="NRA" ) )
> # ESRD-rates
> mx <- gam( cbind( lex.Xst %in% c("ESRD","ESRD(Ren)"), lex.dur )
+           ~ s(tfi,k=10) + sex + I((doe-dob-40)/10) + I(lex.Cst=="Rem"),
+           family = poisreg,
+           data = subset(sLc, lex.Cst %in% c("NRA","Rem"))) )
```

## ...using the Lexis properties

```
> # Rem-rate  
> mr <- gam.Lexis( sLc, from="NRA", to="Rem",  
+                  formula = ~ s( tfi, k=10 ) + sex )
```

mgcv::gam Poisson analysis of Lexis object sLc with log link:  
Rates for the transition: NRA->Rem

```
> # ESRD-rates  
> mx <- gam.Lexis( sLc, formula = ~ s(tfi,k=10) + sex +  
+                  I((doe-dob-40)/10) + I(lex.Cst=="Rem") )
```

mgcv::gam Poisson analysis of Lexis object sLc with log link:  
Rates for transitions: NRA->ESRD, Rem->ESRD(Rem)

## Default is to model all transitions

# State probabilities

How do we get from rates (Poisson-models) to probabilities:

## 1 Analytic calculations:

- ▶ immensely complicated formulae
- ▶ computationally fast (once implemented)
- ▶ difficult to generalize

## 2 Simulation of persons' histories

- ▶ conceptually simple
- ▶ computationally not quite simple
- ▶ easy to generalize
- ▶ hard to get confidence intervals (bootstrap)

# Simulation of a survival time

- ▶ For a rate function  $\lambda(t)$ ,  $\Lambda(t) = \int_0^t \lambda(s) \, ds$ :

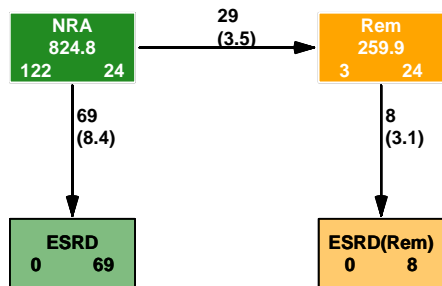
$$S(t) = \exp(-\Lambda(t))$$

- ▶ Simulate a survival probability  $u \in [0, 1]$ :

$$u = S(t) \quad \Leftrightarrow \quad \Lambda(t) = -\log(u)$$

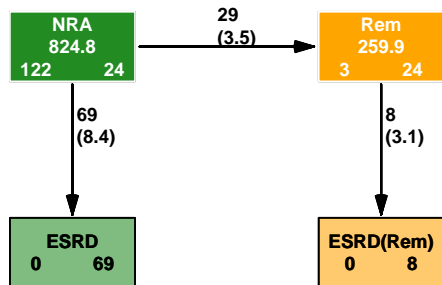
- ▶ Knowledge of  $\Lambda(t)$  makes it easy to find a survival time  
— essentially just linear interpolation.

# Simulation in a multistate model



- ▶ Simulate a “survival time” for each transition **out** of a state.
- ▶ The smallest of these is the transition time.
- ▶ Choose the corresponding transition type as transition.

# Transition objects are glm/gam



```
> Tr <- list( "NRA" = list( "ESRD"      = mx,
+                           "Rem"       = mr ),
+             "Rem" = list( "ESRD(Rem)" = mx ) )
```

## simLexis

Input required:

- ▶ A `Lexis` object representing the initial state of the persons to be simulated.  
(`lex.dur` and `lex.Xst` will be ignored.)
- ▶ A transition object with the estimated Poisson models collected in a list of lists.

Output produced:

- ▶ A `Lexis` object with simulated event histories for many persons
- ▶ Use `nState` to count how many persons in each state at different times



## Using simLexis I

Put one record a new Lexis object (`init`, say). representing a person with the desired covariates.

Must have same structure as the one used for estimation — time scales must be initiated even if not used in models

```
> init <- sLc[NULL,c(timeScales(sLc),"lex.Cst")]
> init[1,"per"] <- 1994
> init[1,"age"] <- 40
> init[1,"tfi"] <- 0
> init[1,"lex.Cst"] <- "NRA"
> init[1,"sex"] <- "M"
> init[1,"dob"] <- 1954
> init[1,"doe"] <- 1994
> init
```

# Using simLexis II

```
      per age tfi lex.Cst sex  dob  doe  
1 1994  40   0      NRA   M 1954 1994
```

```
> system.time(  
+ sim1 <- simLexis( Tr, init, N=10000 ) )
```

```
      user  system elapsed  
49.608  52.279  36.550
```

```
> summary(sim1)
```

Transitions:

To

From	NRA	Rem	ESRD	ESRD(Rem)	Records:	Events:	Risk time:	Persons:
NRA	314	1870	7816	0	10000	9686	74864.10	10000
Rem	0	940	0	930	1870	930	20593.77	1870
Sum	314	2810	7816	930	11870	10616	95457.87	10000

# Using a simulated Lexis object — pState I

```
> NN <- nState( sim1, at = seq(0,15,0.1),  
+               from = 0,  
+               time.scale = "tfi" )  
> head( NN )
```

	State			
when	NRA	Rem	ESRD	ESRD(Rem)
0	10000	0	0	0
0.1	9940	39	21	0
0.2	9891	60	49	0
0.3	9834	83	83	0
0.4	9793	100	107	0
0.5	9731	134	135	0

```
> nw1 <- pState( NN, perm = c(1,2,4,3) )  
> head( nw1, 3 )
```

# Using a simulated Lexis object — pState II

```
      State
when      NRA      Rem ESRD(Rem) ESRD
  0    1.0000 1.0000    1.0000    1
  0.1 0.9940 0.9979    0.9979    1
  0.2 0.9891 0.9951    0.9951    1
```

```
> tail( nw1, 3 )
```

```
      State
when      NRA      Rem ESRD(Rem) ESRD
14.8 0.0996 0.2200    0.2802    1
14.9 0.0971 0.2171    0.2779    1
15   0.0953 0.2151    0.2763    1
```

```
> par( mar=c(3,3,0.1,0.1), mgp=c(3,1,0)/1.6, las=1 )
> plot( nw1, col=clr[c(2,1,4,3)] )
> lines( as.numeric(rownames(nw1)), nw1[,2] )
```

# Using a simulated Lexis object — pState III

```
> nw2 <- pState( NN, perm = c(4,2,1,3) )  
> head( nw2, 3 )
```

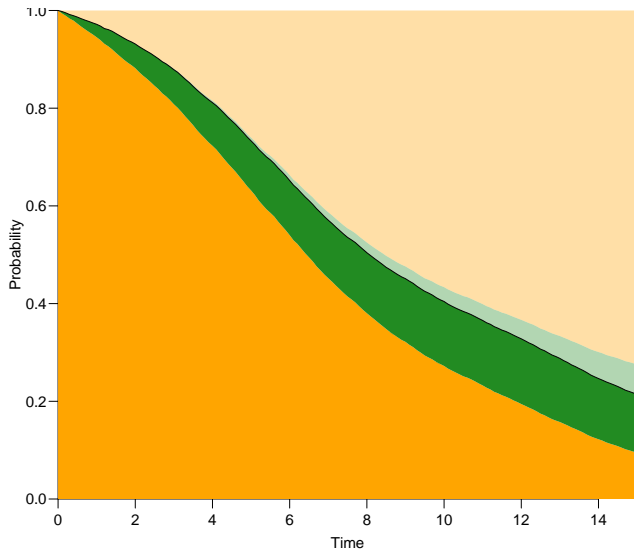
	State				
when	ESRD(Rem)	Rem	NRA	ESRD	
0	0	0.0000	1.0000	1	
0.1	0	0.0039	0.9979	1	
0.2	0	0.0060	0.9951	1	

```
> tail( nw2, 3 )
```

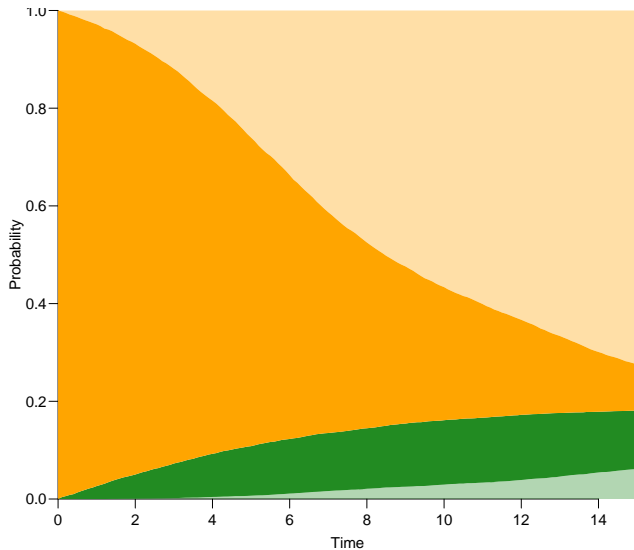
	State				
when	ESRD(Rem)	Rem	NRA	ESRD	
14.8	0.0602	0.1806	0.2802	1	
14.9	0.0608	0.1808	0.2779	1	
15	0.0612	0.1810	0.2763	1	

```
> par( mar=c(3,3,0.1,0.1), mgp=c(3,1,0)/1.6, las=1 )  
> plot( nw2, col=clr[c(4,1,2,3)] )
```

# Simulated probabilities



# Simulated probabilities



Prediction in multistate models:  
simLexis and renal failure (simRenal)

# How many persons should you simulate?

- ▶ All probabilities have the same denominator — the initial number of persons in the simulation,  $N$ , say.
- ▶ Thus, any probability will be of the form  $p = x/N$
- ▶ For small probabilities we have that:

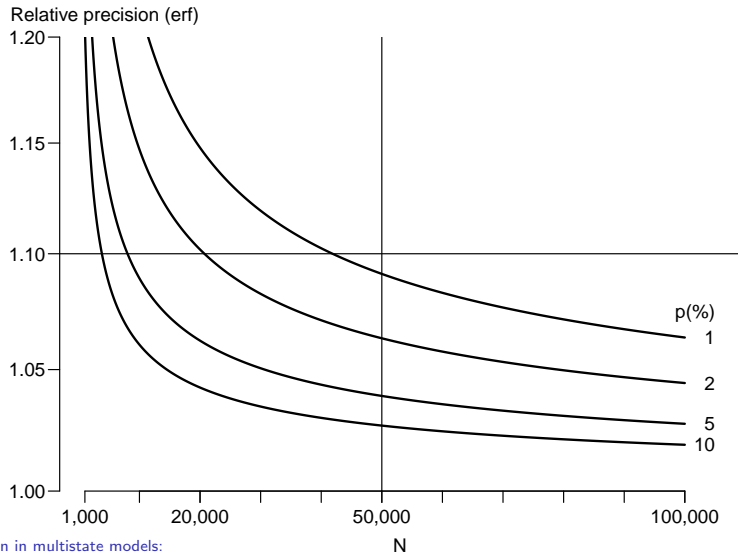
$$\text{s.e.}(\log(\hat{p})) = (1 - p) / \sqrt{Np(1 - p)}$$

- ▶ So c.i. of the form  $p \div^{\times} \text{erf}$  where:

$$\text{erf} = \exp(1.96 \times (1 - p) / \sqrt{Np(1 - p)})$$



# Precision of simulated probabilities



# Multistate model overview

- ▶ Clarify what the relevant states are
- ▶ Allows proper estimation of transition rates
- ▶ — and relationships between them
- ▶ Separate model for each transition (arrow)
- ▶ The usual survival methodology to compute probabilities breaks down
- ▶ Simulation allows estimation of cumulative probabilities:
  - ▶ Estimate transition rates (as usual)
  - ▶ Simulate probabilities (**not** as usual)