

Applied Survival Analysis Using R

Chapter 7: Model Diagnostics

Qi Guo

Department of Mathematical Sciences
The University of Texas at Dallas

April, 15 2019

- 1 Assessing Goodness of Fit Using Residuals
- 2 Case Deletion Residuals
- 3 Checking the Proportion Hazards Assumption
- 4 Schoenfeld Residuals

The use of residuals

- The *residuals* are plotted versus some *quantity* (STAT 6337: Advanced Statistical Method I, the first two chapters), such as a covariate value, and the observed pattern is used to diagnose possible problems with the fitted model.
- The *residuals* have the additional property of not only indicating problems but also suggesting *remedies*, that means suggest an alternative model that fits the data better.
- Many of these residuals have been generalized to survival analysis. And survival data *evolves over time*, and requires special assumptions such as proportional hazard.

Martingale and Deviance Residuals

- An important tool for *assessing the goodness of fit* of a model is to *compare the censoring indicator* (0 for censored, 1 for death) for each subject to the *expected* value of that indicator under the *proportional hazards Cox model*.
- If there are *no time dependent covariates* (Chapter 8) and if the survival times are right-censored. *Martingale Residuals*

$$m_i = \delta_i - \hat{H}_0(T_i) \exp(z_i' \hat{\beta}) \quad (1)$$

- The residual is essentially the *difference* between the observed value (1 or 0) of the censoring indicator and its expected value under a particular Cox model.
- But the sum of squares of Martingale residuals cannot be used as a measure of goodness of fit, so “**deviance**” residual is an alternative way does have this property.

$$d_i = \text{sign}(m_i) \cdot \{-2 \cdot [m_i + \delta_i \log(\delta_i - m_i)]\}^{1/2} \quad (2)$$

Difference

1 Deviance Residuals:

- These residuals are *symmetrically* distributed with expected value 0 (if the fitted model is correct)
- The sum of squares of these residuals is the value of the likelihood ratio test.

2 Martingale Residuals:

- These residuals have the property of showing us the *functional form of a covariate*.
- Conclusion: For this reason, in practice, the *martingale residuals are more useful*.

Example

Example 7.1

Consider the “pharmacoSmoking” dataset, and a fit of the “null” Cox proportional hazards model. A null model is one with no fitted covariates. plot Martingale Residuals against continuous predictors to get a preliminary assessment of which of these predictors should be in the model, and what form they should take

- Read in the data and truncate the variable “priorAttempts” at 20.

```
1 > pharmacoSmoking <- read.csv("PharmacoSmoking.csv")
2 > priorAttemptsT <- priorAttempts
3 > priorAttemptsT[priorAttempts > 20] <- 20
```

- Fit the null model and obtain these residuals as follows:

```
1 > library(survival)
2 > result.0.coxph <- coxph(Surv(ttr, relapse) ~ 1)
3 > rr.0 <- residuals(result.0.coxph, type="martingale")
```

Example

- Plot *martingale residuals* versus age, prior attempts at quitting, and longest prior period without smoking.
- Plot these null model residuals versus each of these variables and also versus *log transformations* of these variables.

```

1 > par(mfrow=c(3,2))
2 > plot(rr.0 ~ age)
3 > smoothSEcurve(rr.0, age)
4 > title("Martingale residuals versus age")
5
6 > logAge <- log(age)
7 > plot(rr.0 ~ logAge)
8 > smoothSEcurve(rr.0, logAge)
9 > title("Martingale residuals versus log age")
10
11 > plot(rr.0 ~ priorAttemptsT)
12 > smoothSEcurve(rr.0, priorAttemptsT)
13 > title("Martingale residuals versus prior attempts")

```

Example

```

1 > logPriorAttemptsT <- log(priorAttemptsT + 1)
2 > plot(rr.0 ~ logPriorAttemptsT)
3 > smoothSEcurve(rr.0, logPriorAttemptsT)
4 > title("Martingale residuals versus log prior attempts")
5
6 > plot(rr.0 ~ longestNoSmoke)
7 > smoothSEcurve(rr.0, longestNoSmoke)
8 > title("Martingale residuals versus longest period without smoking")
9
10 > logLongestNoSmoke <- log(longestNoSmoke+1)
11 > plot(rr.0 ~ logLongestNoSmoke)
12 > smoothSEcurve(rr.0, logLongestNoSmoke)
13 > title("Martingale residuals versus log of longest period without smoking")

```

- In this figure, the three plots on the *left* are for *untransformed* variables, and the three on the *right* are for *log transformations* of these variables.

Example

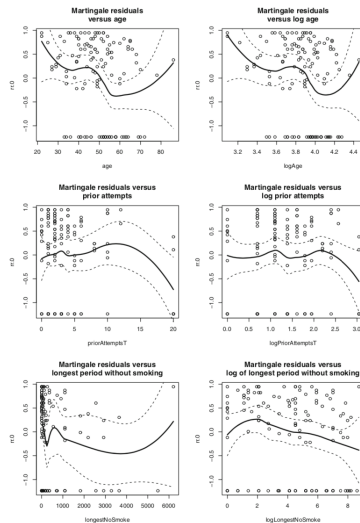


Fig. 7.1 Martingale residuals from a null model fit to the pharmacoSmoking data, plotted versus three continuous predictors and one log-transformed predictor

Case Deletion Residuals

- Some subjects may have an *especially large influence* on the parameter estimates and may cause problems, so we have to identify them.
- Case deletion residuals* (also called “jackknife residuals”) serve this purpose.

Case Deletion Residuals

For each subject, a case deletion residual is the *difference* in the value of the coefficient using all of the data and its value when that *subject is deleted* from the data set.

```
1 > result.coxph <- coxph(Surv(ttr, relapse) ~ grp + employment
2 + age)
3 > coef.all <- result.coxph$coef[4]
4 > coef.all
5         age
6 -0.03528934
```

Delete

- For each subject in turn (“n.obs” subjects in all), we delete the i th subject from the survival time “tt”, censoring indicator “relapse”, and covariates “grp”, employment”, and “age”
- Fit a Cox model to this reduced data set. The results for the i th subject go into “result.coxph.i”
- Extract the age coefficient(4th) into “coef.i” and compute the jackknife residual as the difference of “coef.i” and “coef.all”:

```

1 > n.obs <- length(ttr)
2 > jkbeta.vec <- rep(NA, n.obs)
3 > for (i in 1:n.obs) {
4   tt.i <- ttr[-i]
5   delta.i <- relapse[-i]
6   grp.i <- grp[-i]
7   employment.i <- employment[-i]
8   age.i <- age[-i]
9   result.coxph.i <- coxph(Surv(tt.i, delta.i) ~ grp.i +
10  employment.i + age.i)
11  coef.i <- result.coxph.i$coef[4]
12  jkbeta.vec[i] <- (coef.all - coef.i)}

```

Plot

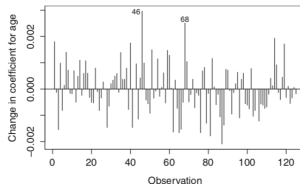
- Plot these residuals versus the patient id's, which we place in the vector "index.obs", "type='h'" causes the residuals to be plotted as spikes. "abline(h=0)" plots a horizontal line through 0.

```
1 > index.obs <- 1:n.obs
2 > plot(jkbeta.vec ~ index.obs, type="h",xlab="Observation",
3 ylab="Change in coefficient for age", cex.axis=1.3, cex.lab=1.3)
4 > abline(h=0)
```

- The "identify" function allows us to identify the index numbers of select patients by manually selecting them with a mouse

```
1 > identify(jkbeta.vec ~ index.obs)
```

Conclusion



- Conclusion: No single patient changes the estimate of the “age” coefficient by more than 0.003, which is less than 10% of the value of that coefficient. and patients 46 and 68 have the most influence over the parameter estimate for age.
- A more convenient way to obtain case deletion residuals is using the `“residuals”` function with `“type = ‘dfbeta’”`.

debet a residuals

```
1 > resid.dfbeta <- residuals(result.coxph, type="dfbeta")
2 > n.obs <- length(ttr)
3 > index.obs <- 1:n.obs
4 > plot(resid.dfbeta[,4] ~ index.obs, type="h", xlab="Observation",
5 ylab="Change in coefficient")
6 > abline(h=0)
7 > identify(resid.dfbeta[,4] ~ index.obs)
```

- The resulting `dfbeta` residuals plot (not shown) is nearly *identical*, it has the advantage that it is slightly easier to use it to produce multiple plots for all of the coefficients.

Log Cumulative Hazard Plots

- log-log transformation:
 - Under the assumption, we have

$$S_1(t) = [S_0(t)]^{\exp(\beta)} \quad (3)$$

where $\exp(\beta)$ is the proportional hazards constant.

- Take logs both sides

$$\log[S_1(t)] = \exp(\beta) \cdot \log[S_0(t)] \quad (4)$$

- The survival functions are less than 1, so log will cause negative.

$$\log\{-\log[S_1(t)]\} = \beta + \log\{-\log[S_0(t)]\} \quad (5)$$

where the function $g(\mu) = \log\{-\log(\mu)\}$ is called a *complementary log-log transformation*.

- Plot $g[S_1(t)]$ and $g[S_0(t)]$ versus t or $\log(t)$ will yield *two parallel curves* separated by β if the proportional hazards assumption is correct.

Example

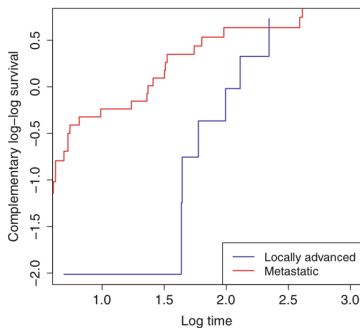
- Illustrate this with the pancreatic cancer data from Chapter 3.

```

1 # Plot the LA(Locally advanced)
2 > result.surv.LA <- survfit(Surv(pfs.month) ~ stage,
3 subset=stage == "LA")
4 > time.LA <- result.surv.LA$time
5 > surv.LA <- result.surv.LA$surv
6 > cloglog.LA <- log(-log(surv.LA))
7 > logtime.LA <- log(time.LA)
8
9 # Plot the M(Metastatic)
10 > result.surv.M <- survfit(Surv(pfs.month) ~ stage,
11 subset=stage == "M")
12 > time.M <- result.surv.M$time
13 > surv.M <- result.surv.M$surv
14 > cloglog.M <- log(-log(surv.M))
15 > logtime.M <- log(time.M)
16 > plot(cloglog.LA ~ logtime.LA, type="s", col="blue", lwd=2)
17 > lines(cloglog.M ~ logtime.M, col="red", lwd=2, type="s")
18 > legend("bottomright", legend=c("Locally advanced",
19 "Metastatic"), col=c("blue", "red"), lwd=2)

```


Example



Complementary log-log plot for the two pancreatic cancer groups

- Conclusion: The curves are clearly *not parallel*. However, one problem with this approach is that we don't have a clear way to assess *statistical significance*. This is a critical issue here due to the *small sample size*, particularly in the locally advanced group.

Recall

- *The Schoenfeld residuals* are the individual terms of *the score function*, and each term is the observed value of the covariate for patient i minus the expected value $E(Z_i) = \bar{z}(t_i)$, which is *a weighted sum*, with weights given by $p_k(\beta)$, of the covariate values for subjects at risk at that time.
- Recall:
 - The partial log-likelihood function

$$\ell(\beta) = \sum_{i \in D} \left\{ \log(\psi_i) - \log \left(\sum_{k \in R_i} \psi_k \right) \right\} = \sum_{i \in D} \left\{ z_i \beta - \log \left(\sum_{k \in R_i} e^{z_k \beta} \right) \right\} \quad (6)$$

- The score function:

$$\ell'(\beta) = \sum_{i \in D} \left\{ z_i - \sum_{k \in R_i} z_k \cdot p(\beta, z_k) \right\} \text{ where } p(\beta, z_k) = \frac{e^{z_k \beta}}{\sum_{j \in R_k} e^{z_j \beta}} \quad (7)$$

Example

- For an estimate $\hat{\beta}$ the residual for the i th failure time is:

$$\hat{r}_i = z_i - \sum_{k \in R_i} z_k \cdot p(\hat{\beta}, z_k) = z_i - \bar{z}(t_i) \quad (8)$$

- Example:

```
1 > tt <- c(6, 7, 10, 15, 19, 25)
2 > delta <- c(1, 0, 1, 1, 0, 1)
3 > trt <- c(0, 0, 1, 0, 1, 1)
4 > result.coxph <- coxph(Surv(tt, delta) ~ trt) > result.coxph$coef
5 [1] trt -1.326
```

- We see that $\hat{\beta} = 1.326$. To compute the Schoenfeld residuals, we first compute the weights as follows:

t_i	n_{0i}	n_{1i}	$p(\beta, z_k = 0)$	$p(\beta, z_k = 1)$
6	3	3	$\frac{1}{3+3e^{-1.326}}$	$\frac{e^{-1.326}}{3+3e^{-1.326}}$
10	1	3	$\frac{1}{1+3e^{-1.326}}$	$\frac{e^{-1.326}}{1+3e^{-1.326}}$
15	1	2	$\frac{1}{1+2e^{-1.326}}$	$\frac{e^{-1.326}}{1+2e^{-1.326}}$
25	0	1	$\frac{1}{e^{-1.326}}$	$\frac{e^{-1.326}}{e^{-1.326}} = 1$

Example

- Compute the expected values, and then the residuals:

t_i	$E(Z_i) = \sum_{k \in R_i} z_k \cdot p_k(\hat{\beta})$	z_i	$\hat{r}_i = z_i - E(Z_i)$
6	$3 \times 0 \times \frac{1}{3+3e^{-1.326}} + 3 \times 1 \times \frac{e^{-1.326}}{3+3e^{-1.326}} = 0.2098$	0	-0.2098
10	$1 \times 0 \times \frac{1}{1+3e^{-1.326}} + 3 \times 1 \times \frac{e^{-1.326}}{1+3e^{-1.326}} = 0.4434$	1	0.5566
15	$1 \times 0 \times \frac{1}{1+2e^{-1.326}} + 2 \times 1 \times \frac{e^{-1.326}}{1+2e^{-1.326}} = 0.3468$	0	-0.3468
25	1	1	0

- In R:

```
1 > residuals(result.coxph, type="schoenfeld")
2 [1]      6      10      15      25
3 -0.2098004 0.5566351 -0.3468347 0.0000000
```

The scaled residual

- Gramsch and Therneau proposed scaling each residual by an estimate of its variance. This *scaled residual* conveniently approximated as follows:

$$r_i^* = r_i \cdot d \cdot \text{var}(\hat{\beta}) \quad (9)$$

where d is the total number of deaths, and $\text{var}(\hat{\beta})$ is the variance of the parameter estimate.

```

1 > resid.unscaled <- residuals(result.coxph, type= ``schoenfeld``)
2 > resid.scaled <- resid.unscaled*result.coxph$var*sum(delta)
3 > resid.unscaled
4 [1]      6      10      15      25
5    -0.2098004  0.5566351 -0.3468347  0.0000000
6 > resid.scaled
7 [1] -1.313064  3.483776 -2.170712  0.000000

```

The scaled residuals

- An approximate estimate of $\beta(t)$ may be obtained by adding the estimate $\hat{\beta}$ from the Cox proportional hazards model to the standardized residuals.

```
1 > resid.scaled + result.coxph$coef
2 [1] -2.639193 2.157647 -3.496841 -1.326129
3 # or using ``cox.zph`` function
4 > resid.sch <- cox.zph(result.coxph)
5 > resid.sch$y
6      trt
7 6  -2.639193
8 10  2.157647
9 15 -3.496841
10 25 -1.326129
```

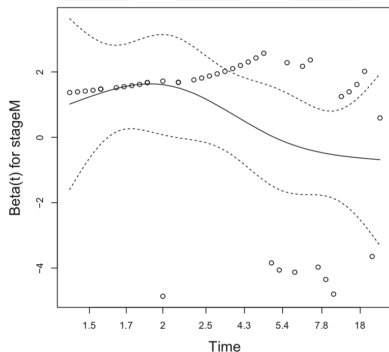
Example

- Using this residuals to the pancreatic data, compute the *scaled Schoenfeld residuals* and plot

```

1 > result.coxph <- coxph(Surv(pfs.month) ~ stage)
2 #The ``transform`` option specifies that the time axis is scaled to 0
3 > result.sch.resid <- cox.zph(result.coxph, transform="km")
4 > plot(result.sch.resid)

```



Example

- The shape of the *smoothed(loess) curve* is an estimate of the difference parameter as a function of time.
- The hypothesis test for a constant β

```
1 > result.sch.resid
2      rho    chisq      p
3 stageM -0.328   3.86   0.0496
```

- Alternatively, variations of this test may be obtained by plotting $\beta(t)$ versus time or versus other transformations of time, and the “cox.zph” function offers:
 - “rank” option: the time axis is ordered by the ranks of the times.
 - “identity” option: the time variable is untransformed.

```
1 > cox.zph(result.coxph, transform="rank")
2      rho    chisq      p
3 stageM  -0.33    3.89   0.0486
4 > cox.zph(result.coxph, transform="identity")
5      rho    chisq      p
6 stageM  -0.197    1.39   0.239
```