Sumatriptan versus caffeine for migraine

A decision tree example

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Introduction

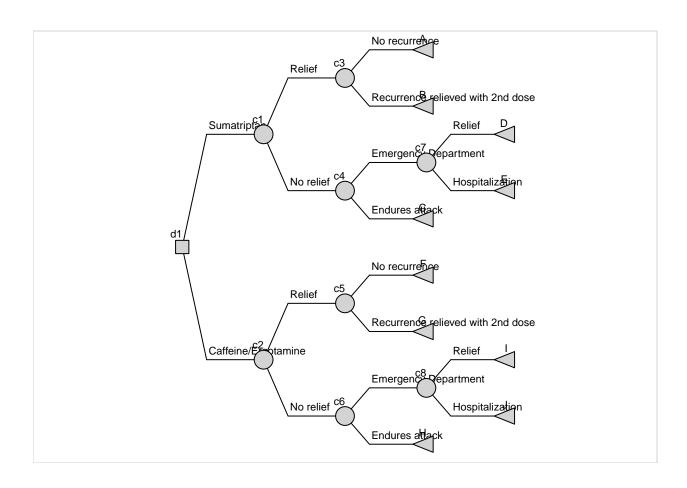
This vignette is an example of modelling a decision tree using the rdecision package. It is based on the example given by Briggs (2006, Box 2.3) which itself is based on a decision tree which compared oral Sumatriptan versus oral caffeine/Ergotamine for migraine (Evans et al. 1997).

Creating the model

The following code constructs the decision tree. In the formulation used by rdecision, a decision tree is a form of *arborescence*, a directed graph of nodes and edges, with a single root and a unique path from the root to each leaf node. Decision trees comprise three types of node: decision, chance and leaf nodes and two types of edge: actions (whose sources are decision nodes) and reactions (whose sources are chance nodes).

```
# Time horizon
th <- as.difftime(48, units="hours")
# model variables for cost
c.sumatriptan <- 16.10
c.caffeine <- 1.32
c.ED <- 63.16
c.admission <- 1093
# Sumatriptan branch
ta <- LeafNode$new("A", utility=1.0, interval=th)
tb <- LeafNode$new("B", utility=0.9, interval=th)
c3 <- ChanceNode$new("c3")</pre>
e1 <- Reaction$new(c3, ta, p=0.594, label="No recurrence")
e2 <- Reaction$new(c3, tb, p=0.406, cost=c.sumatriptan,
                   label="Recurrence relieved with 2nd dose")
td <- LeafNode$new("D", utility=0.1, interval=th)
te <- LeafNode$new("E", utility=-0.3, interval=th)
c7 <- ChanceNode$new("c7")
e3 <- Reaction$new(c7, td, p=0.998, label="Relief")
e4 <- Reaction$new(c7, te, p=0.002, cost=c.admission, label="Hospitalization")
tc <- LeafNode$new("C", utility=-0.3, interval=th)</pre>
c4 <- ChanceNode$new("c4")
e5 <- Reaction$new(c4, tc, p=0.920, label="Endures attack")
```

```
e6 <- Reaction$new(c4, c7, p=0.080, cost=c.ED, label="Emergency Department")
c1 <- ChanceNode$new("c1")</pre>
e7 <- Reaction$new(c1, c3, p=0.558, label="Relief")
e8 <- Reaction$new(c1, c4, p=0.442, label="No relief")
# Caffeine/Ergotamine branch
tf <- LeafNode$new("F", utility=1.0, interval=th)
tg <- LeafNode$new("G", utility=0.9, interval=th)</pre>
c5 <- ChanceNode$new("c5")
e9 <- Reaction$new(c5, tf, p=0.703, label="No recurrence")
e10 <- Reaction$new(c5, tg, p=0.297, cost=c.caffeine,
                    label="Recurrence relieved with 2nd dose")
ti <- LeafNode$new("I", utility=0.1, interval=th)
tj <- LeafNode$new("J", utility=-0.3, interval=th)</pre>
c8 <- ChanceNode$new("c8")
e11 <- Reaction$new(c8, ti, p=0.998, label="Relief")
e12 <- Reaction$new(c8, tj, p=0.002, cost=c.admission, label="Hospitalization")
th <- LeafNode$new("H", utility=-0.3, interval=th)
c6 <- ChanceNode$new("c6")</pre>
e13 <- Reaction$new(c6, th, p=0.920, label="Endures attack")
e14 <- Reaction$new(c6, c8, p=0.080, cost=c.ED, label="Emergency Department")
c2 <- ChanceNode$new("c2")</pre>
e15 <- Reaction$new(c2, c5, p=0.379, label="Relief")
e16 <- Reaction$new(c2, c6, p=0.621, label="No relief")
# decision node
d1 <- DecisionNode$new("d1")</pre>
e17 <- Action$new(d1, c1, cost=c.sumatriptan, label="Sumatriptan")
e18 <- Action$new(d1, c2, cost=c.caffeine, label="Caffeine/Ergotamine")
# create lists of nodes and edges
V <- list(</pre>
 d1, c1, c2, c3, c4, c5, c6, c7, c8,
 ta, tb, tc, td, te, tf, tg, th, ti, tj
E <- list(
  e1, e2, e3, e4, e5, e6, e7, e8, e9, e10, e11, e12, e13, e14, e15, e16, e17, e18
)
DT <- DecisionTree$new(V,E)
```



Running the model

The method evaluate of decision tree objects computes the probability, cost and utility of each *strategy* for the model. A strategy is a unanimous prescription of the actions at each decision node. In this example there is a single decision node with two actions, and the strategies are simply the two forms of treatment to be compared. More complex decision trees are also possible.

The paths traversable for a particular strategy can be evaluated individually using the method evaluate_strategy. In rdecision a strategy is defined as a set of action edges with one action edge per decision node. It is necessary to call the method evaluate_strategy only if information about each pathway is required; normally it is sufficient to call evaluate which will automatically identify all possible strategies in a decision tree and evaluate them.

Model results

The evaluation of each pathway, for each strategy, yields the following table:

d1	Probability	Path.Cost	Path.Utility	Leaf	Cost	Utility
Sumatriptan	0.3315	16.10	1.0	A	5.34	0.3315
Sumatriptan	0.2265	32.20	0.9	В	7.29	0.2039
Sumatriptan	0.4066	16.10	-0.3	\mathbf{C}	6.55	-0.1220
Sumatriptan	0.0353	79.26	0.1	D	2.80	0.0035
Sumatriptan	0.0001	1172.26	-0.3	\mathbf{E}	0.08	0.0000

d1	Probability	Path.Cost	Path.Utility	Leaf	Cost	Utility
Caffeine/Ergotamine	0.2664	1.32	1.0	F	0.35	0.2664
Caffeine/Ergotamine	0.1126	2.64	0.9	G	0.30	0.1013
Caffeine/Ergotamine	0.5713	1.32	-0.3	Η	0.75	-0.1714
Caffeine/Ergotamine	0.0496	64.48	0.1	I	3.20	0.0050
Caffeine/Ergotamine	0.0001	1157.48	-0.3	J	0.12	0.0000

There are, as expected, ten pathways (5 per strategy). The expected cost and expected utility for each choice can be calculated from the table above, or by invoking the evaluate method of a decision tree object. This gives the following result, consistent with that reported by Evans et al (1997).

d1	Cost	Utility
Sumatriptan	22.06	0.41686
Caffeine/Ergotamine	4.71	0.20128

References

Briggs, Andrew, Karl Claxton, and Mark Sculpher. 2006. Decision Modelling for Health Economic Evaluation. Oxford, UK: Oxford University Press.

Evans, Kenneth W., John A. Boan, John L. Evans, and Ashfaq Shuaib. 1997. "Economic Evaluation of Oral Sumatriptan Compared with Oral Caffeine/Ergotamine for Migraine." *Pharmacoeconomics* 12: 565–77.