

Chris Jackson (Population Health): current interests

Current work

Survival and multistate modelling methods

Applications in multiple areas

Chronic disease prevention

Methods in **microsimulation models**

Also Value of Information, uncertainty quantification, design...

Survival (time-to-event) and multi-state models

Motivated by two contexts

- ▶ times to severe events (hospital admission, ICU, death...) in respiratory infections
- ▶ health economic decision models combining trial, disease registry and population data

and two challenges

- (a) extrapolation over time
- (b) scalability to bigger problems

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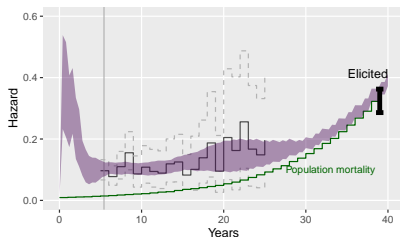
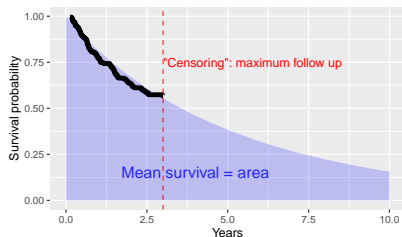
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Extrapolation - long-term estimation



Estimating long-term, expected survival based on

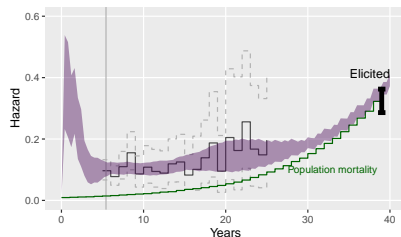
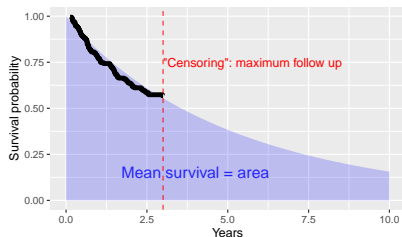
- ▶ individual shorter term survival data (e.g. from a clinical trial)
- ▶ aggregated longer term data from a broader population (e.g. registry, national data).
- ▶ expert judgements

Paper finished on a flexible (spline) Bayesian survival model framework and software

<https://arxiv.org/abs/2306.03957>

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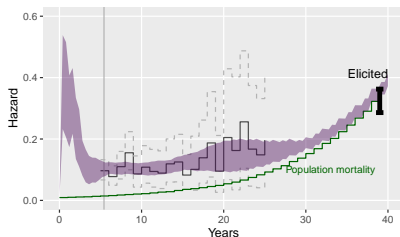
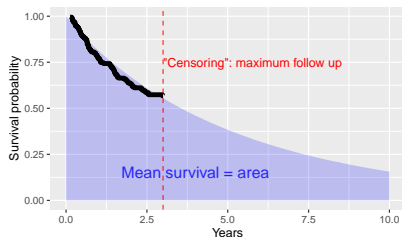
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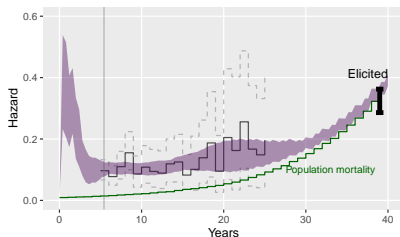
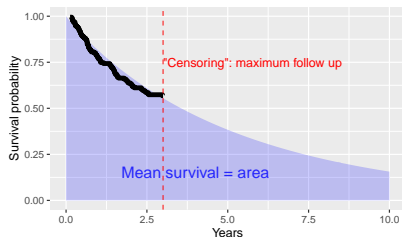
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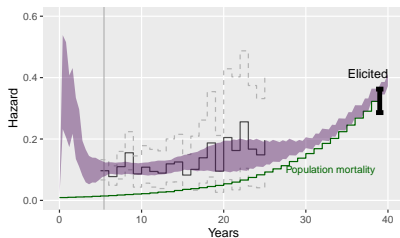
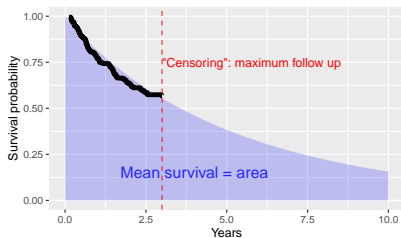
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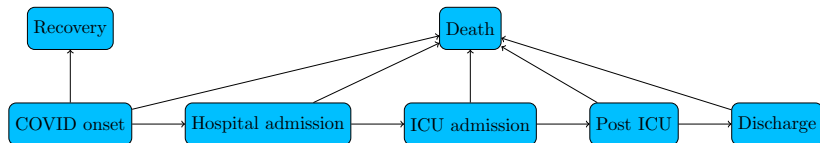


More work to do (led by Astra Zeneca, with Fatemeh Torabi) on simulation studies to build confidence in it

This model/package could form infrastructure for flexible/versatile time-to-event modelling more generally

- ▶ hierarchical models
- ▶ multistate models
- ▶ high-dimensional data (lots of covariates)

Scalability in multistate models



Each state transition is a time-to-event model: could have many covariates, and data are censored

Efficient model fitting

- ▶ Even 100+ parameters is challenging for identifiability
- ▶ Routinely-collected hospital data also have $n > 10000$

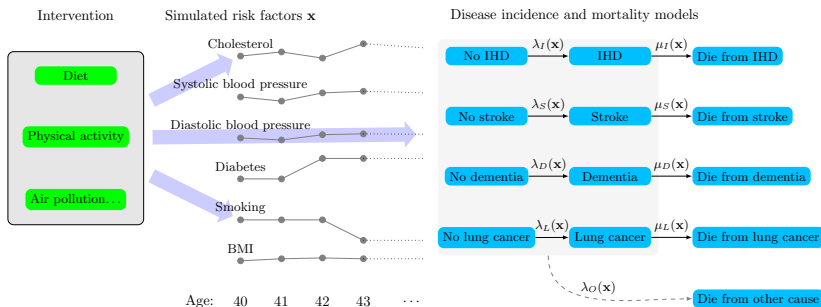
Efficient prediction from models

- ▶ Requires individual-level simulation, but should be fast for routine use (e.g. monitoring hospital burden)

Microsimulation models for chronic disease prevention

Complex mechanistic models informed by many sources of data

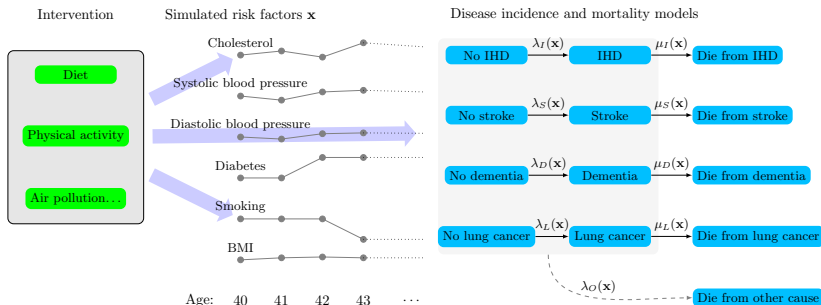
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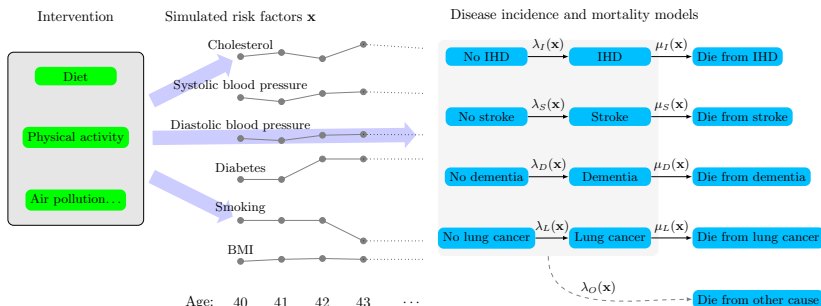
Above model motivated by [mid-life health checks](#)

Oliver Church (PhD project): Generating trajectories of multiple risk factors

Microsimulation models for chronic disease prevention

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Simulate from model to evaluate effect of an intervention



Models for health impacts of transport changes

- focus on geographical detail rather than multiple risk factors
- applications in Manchester and Melbourne (led by MRC Epi)

Mortality data to inform microsimulation models

Population mortality data is generally well recorded, however

- ▶ Limited individual-level predictors (age, gender, maybe area-level deprivation)
- ▶ Effect of having a disease not directly known: cause-specific mortality is recorded, but disease may also raise risk from other causes

Ongoing work: Bayesian synthesis of mortality data published at different levels of aggregation

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Other interests: applied Bayesian modelling and design

Value of Information analysis

- ▶ given a Bayesian model, determine which uncertainties have the most impact on results/decisions
 - ▶ prioritise/design data collection to reduce uncertainty
 - ▶ edited textbook on this topic about to be submitted
- Connects with projects proposed in QQR on
- ▶ Informative prior distributions in complex Bayesian models
 - ▶ Quantifying uncertainty in the first place
 - ▶ Design of observational data collection to inform epidemic modelling

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