

# Introduction to Causal Inference: Basics and Advances

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Link: <https://github.com/hang-wu/CI>

# Objective and Takeaways

- What is causal inference?
- How to identify causal effect?

# Agenda

## Part 1

- Introduction of Causal Inference

3:00 – 3:30

## Part 2

- Basic of Causal Effect Estimation Algorithm

3:30 – 4:15

## Break

## Part 3

- Recent Advances
- Challenges and Opportunities

4:35 – 5:15

I'll attend the NSF student award from 4:20 – 4:30 CNB-MAC

# Correlation vs. causality

US spending on science, space, and technology  
correlates with  
Suicides by hanging, strangulation and suffocation

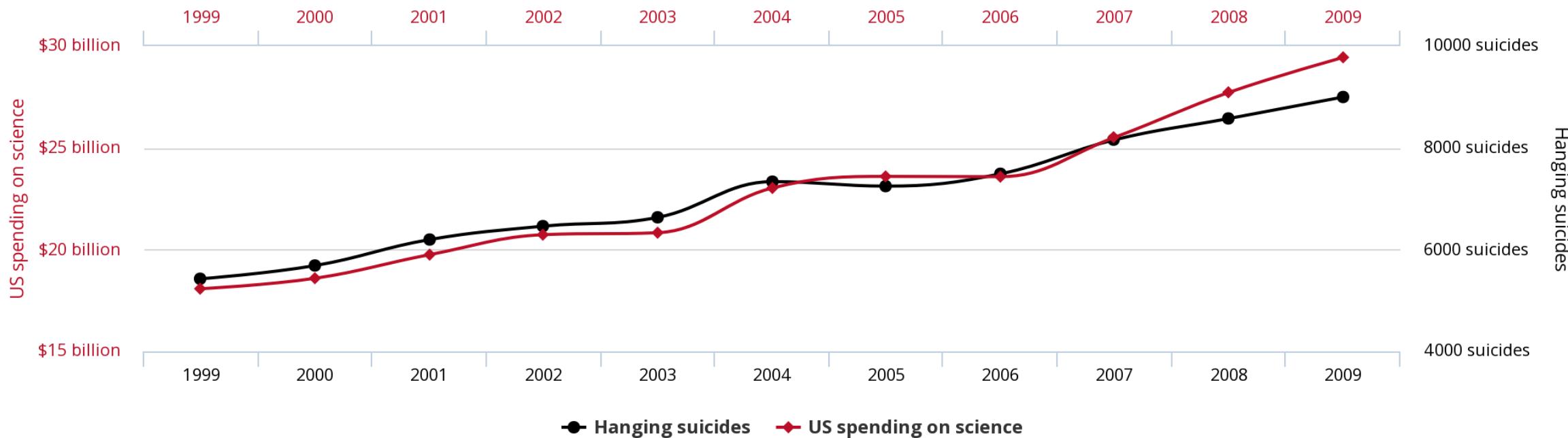
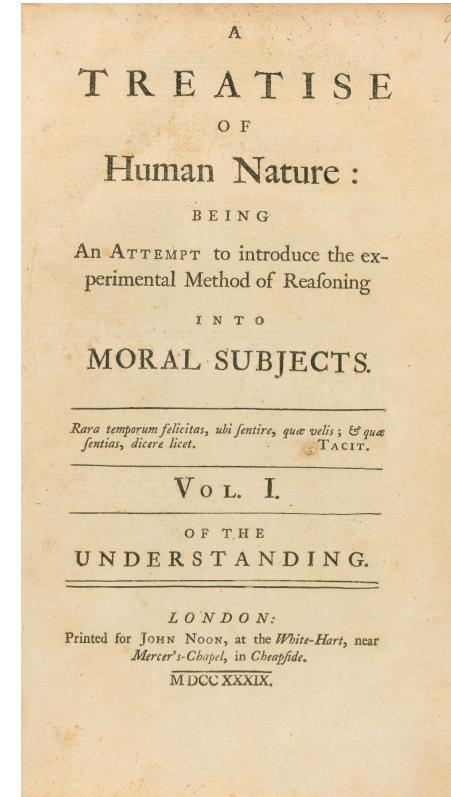
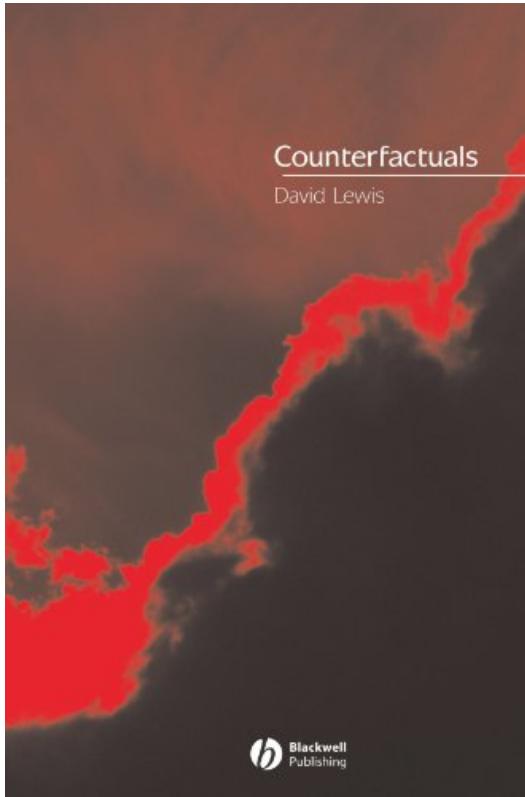
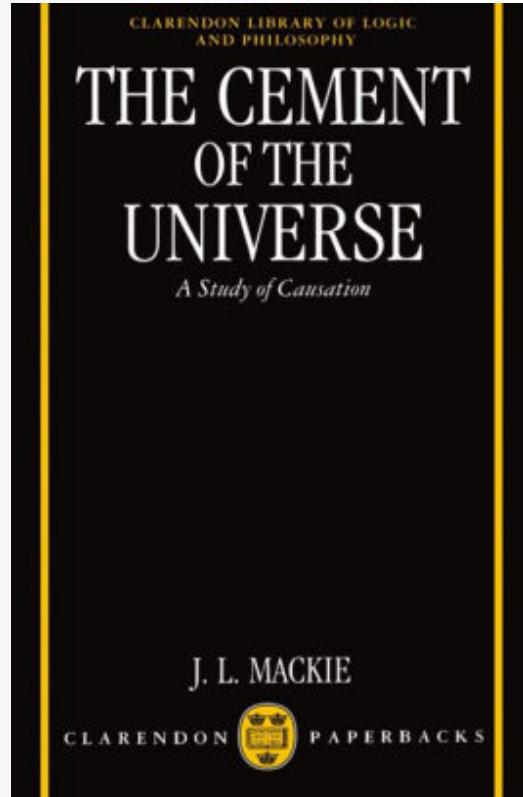


Figure: <https://www.tylervigen.com/spurious-correlations>

# What is causality?

# The study on causality



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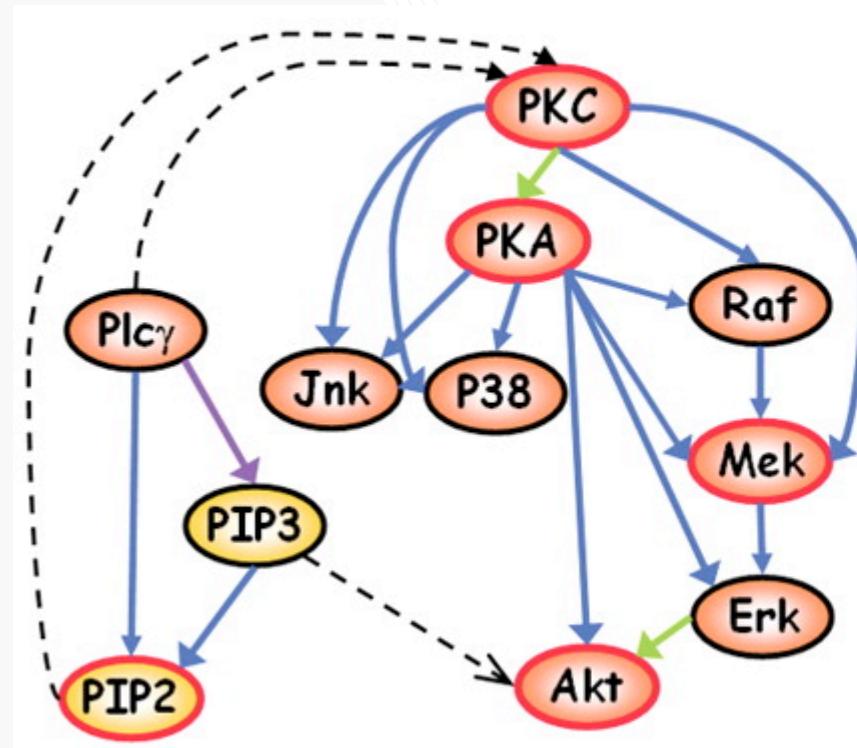
A philosophical debate since the start of human knowledge....

# Our Definitions

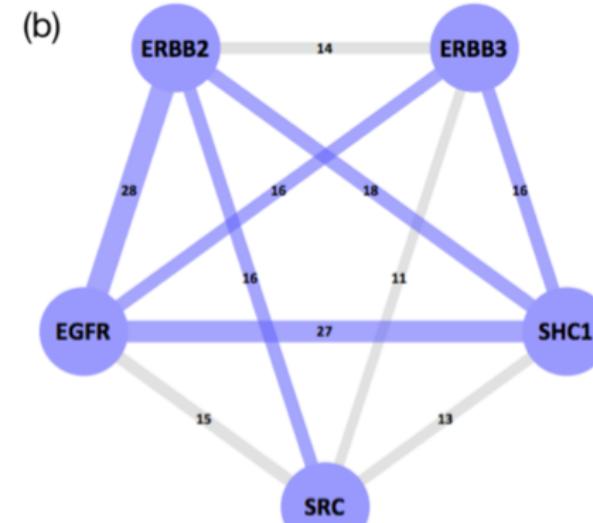
- X causes Y iff
  - changing X leads to a change in Y,
  - while keeping everything else constant.
- The magnitude of change in Y when changing X by 1 unit is the causal effect of X on Y.

# Causality in Bio/medical Research

- Protein-Signaling Networks



- Pan-cancer Pathways



1. Sachs, K., Perez, O., Pe'er, D., Lauffenburger, D. A., and Nolan, G. P. (2005). Causal protein-signaling networks derived from multiparameter single-cell data. *Science* 308, 523–529. doi: 10.1126/science.1105809
2. Ha, M. J., Banerjee, S., Akbani, R., Liang, H., Mills, G. B., Do, K. A., & Baladandayuthapani, V. (2018). Personalized Integrated Network Modeling of the Cancer Proteome Atlas. *Scientific reports*, 8(1), 14924.

# Causality in Bio/medical Research

- Randomized Controlled Trials/ Epidemiology
- Dynamic Treatment Regimes

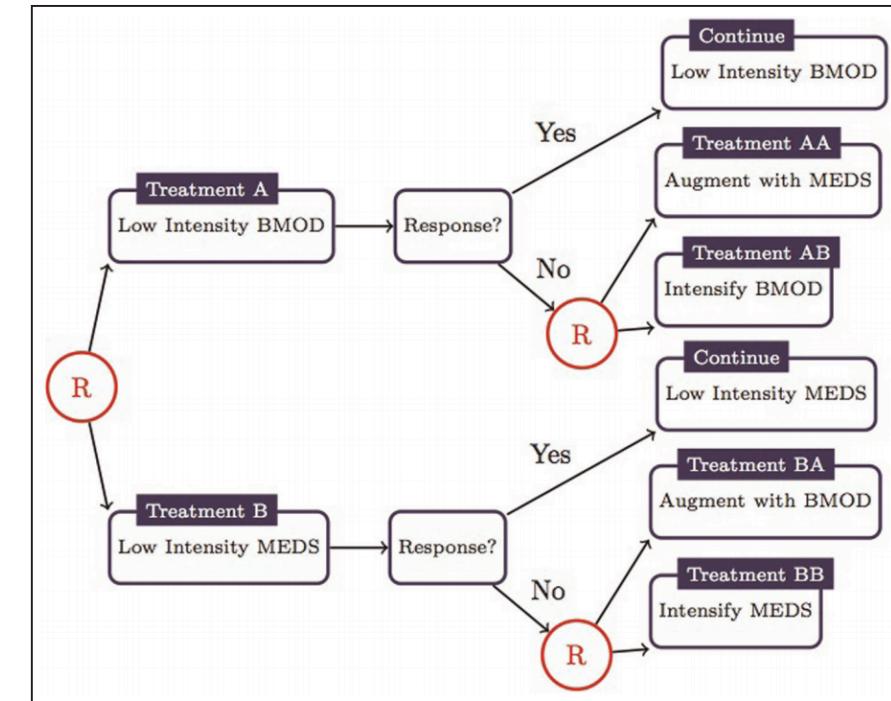
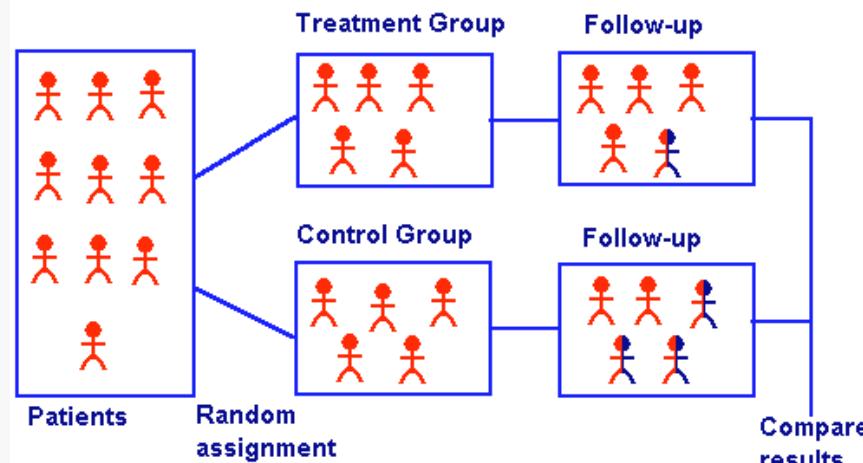
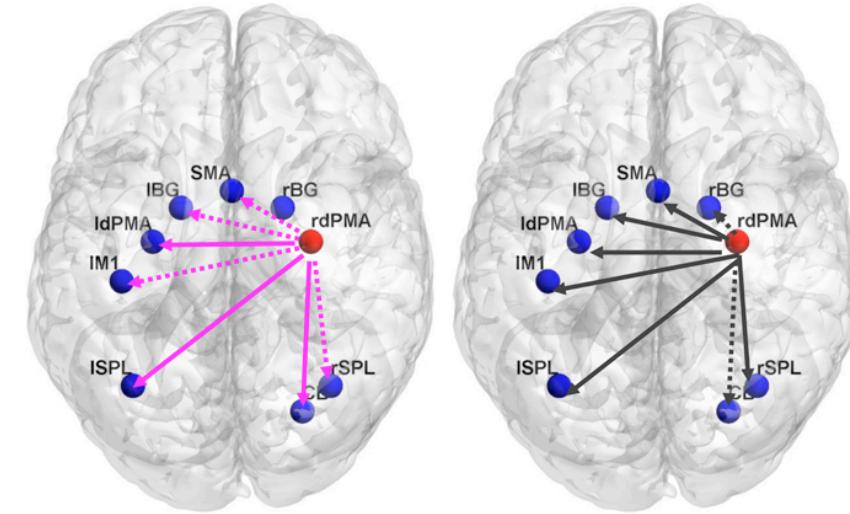
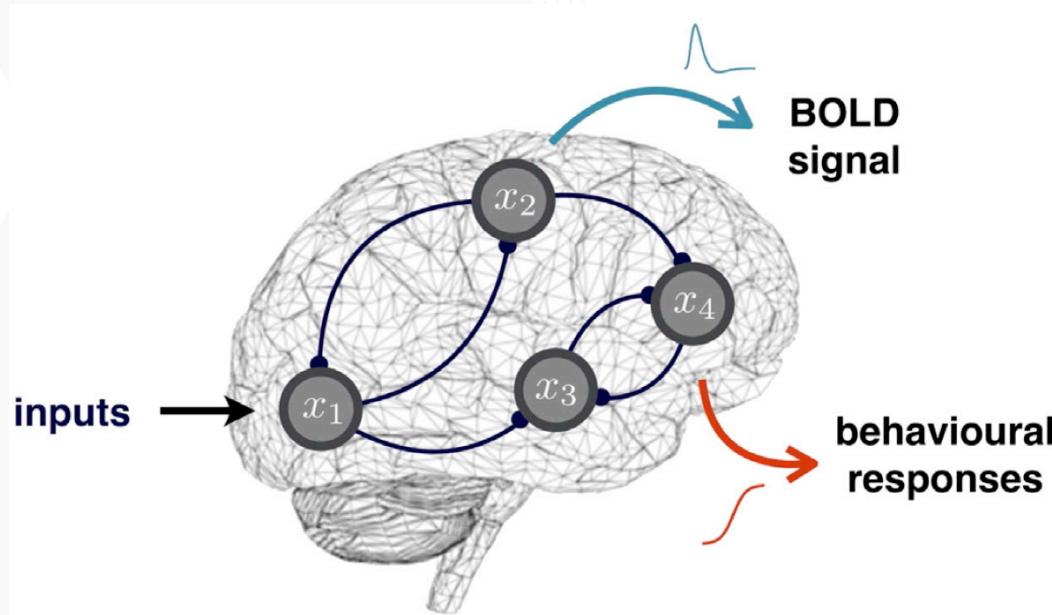


Figure: <https://www.statisticshowto.datasciencecentral.com/experimental-design/randomized-clinical-trial-rcts/>  
Zhao, Ying-Qi, and Eric B. Laber. "Estimation of optimal dynamic treatment regimes." *Clinical Trials* 11.4 (2014): 400-407.

# Dynamics of Causality

- Dynamic Causal Modeling<sup>1</sup>
- Granger Causality<sup>2</sup>



1. <https://mbb-team.github.io/VBA-toolbox/wiki/behavioural-DCM/>

2. *Causal interaction following the alteration of target region activation during motor imagery training using real-time fMRI*. Scientific Figure on ResearchGate. Available from: [https://www.researchgate.net/figure/The-difference-of-Granger-causality-index-between-TrainD-and-TrainA-in-the-experiment\\_fig3\\_259499871](https://www.researchgate.net/figure/The-difference-of-Granger-causality-index-between-TrainD-and-TrainA-in-the-experiment_fig3_259499871) [accessed 3 Sep, 2019]

# A historic view of causal inference

# Scurvy and randomization (1747)



- James Lind (1716-1794): How to treat scurvy?
- Scurvy results from a lack of vitamin C
- 12 scorbutic sailor treated with different acids, e.g. vinegar, cider, lemon
- Only the condition of the sailor treated by lemon improved



# Fisher Experiment (1923) Potential Outcome by Rubin (1925)

AJAX	K OF K	NITHSDALE	GREAT SCOTT	DUKE OF YORK
GREAT SCOTT	DUKE OF YORK	ARRAN COMRADE	IRON DUKE	EPICURE
IRON DUKE	EPICURE	AJAX	K OF K	NITHSDALE
K OF K	NITHSDALE	GREAT SCOTT	DUKE OF YORK	ARRAN COMRADE
	UP TO DATE	KERR'S PINK	UP TO DATE	BRITISH QUEEN
	BRITISH QUEEN	TINWALD PERFECTION	EPICURE	KERR'S PINK
	KERR'S PINK	UP TO DATE	IRON DUKE	AJAX
	TINWALD PERFECTION	ARRAN COMRADE	BRITISH QUEEN	TINWALD PERFECTION

Diagram 1. Plan of experiment. Farmyard manure series.

*A plan for a controlled agricultural experiment, from: R. A. Fisher and W. A. Mackay, "The Manural Response of Different Potato Varieties," Journal of Agricultural Science, 1932, 31, 311-320.*

# The Design of Experiments

By

Sir Ronald A. Fisher, Sc.D., F.R.S.

Arthur Balfour Professor of Genetics, University of Cambridge ; Honorary Member, American Statistical Association and American Academy of Arts and Sciences ; Foreign Member American Philosophical Society ; Foreign Associate of the National Academy of Sciences of the United States of America ; formerly Galton Professor, University of London ; Foreign Member of the Royal Swedish Academy of Sciences and the Royal Danish Academy of Sciences and Letters

Oliver and Boyd

Edinburgh: Tweeddale Court  
London: 98 Great Russell Street, W.C.

**Modern  
Randomized  
Controlled  
Trial  
(1948)**

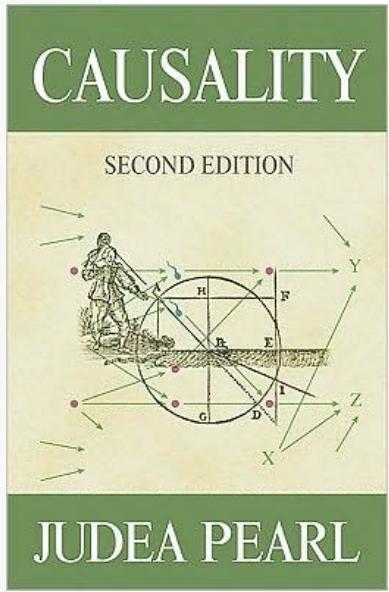
**TABLE II.—Assessment of Radiological Appearance at Six Months as Compared with Appearance on Admission**

Radiological Assessment	Streptomycin Group		Control Group	
Considerable improvement ..	28	51%	4	8%
Moderate or slight improvement ..	10	18%	13	25%
No material change .. ..	2	4%	3	6%
Moderate or slight deterioration ..	5	9%	12	23%
Considerable deterioration ..	6	11%	6	11%
Deaths .. .. ..	4	7%	14	27%
<b>Total</b> .. ..	<b>55</b>	<b>100%</b>	<b>52</b>	<b>100%</b>

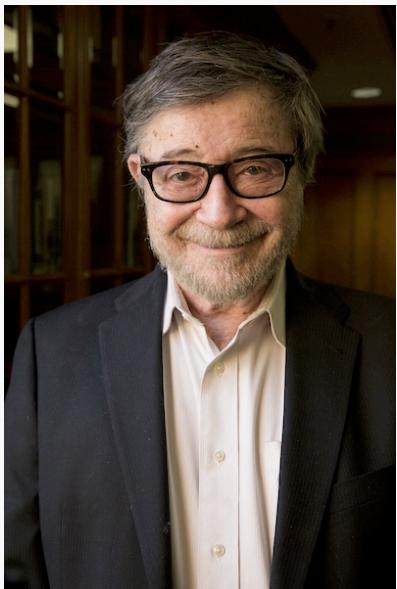
- The first published RCT
  - "Streptomycin treatment of pulmonary tuberculosis"

# Neyman–Rubin Causal Model (1974)

- Fundamental problem facing causal inference (Rubin, 1975)
- It is a missing data problem
- For an individual, only **one** out of the two outcome can be observed (assuming binary treatment).

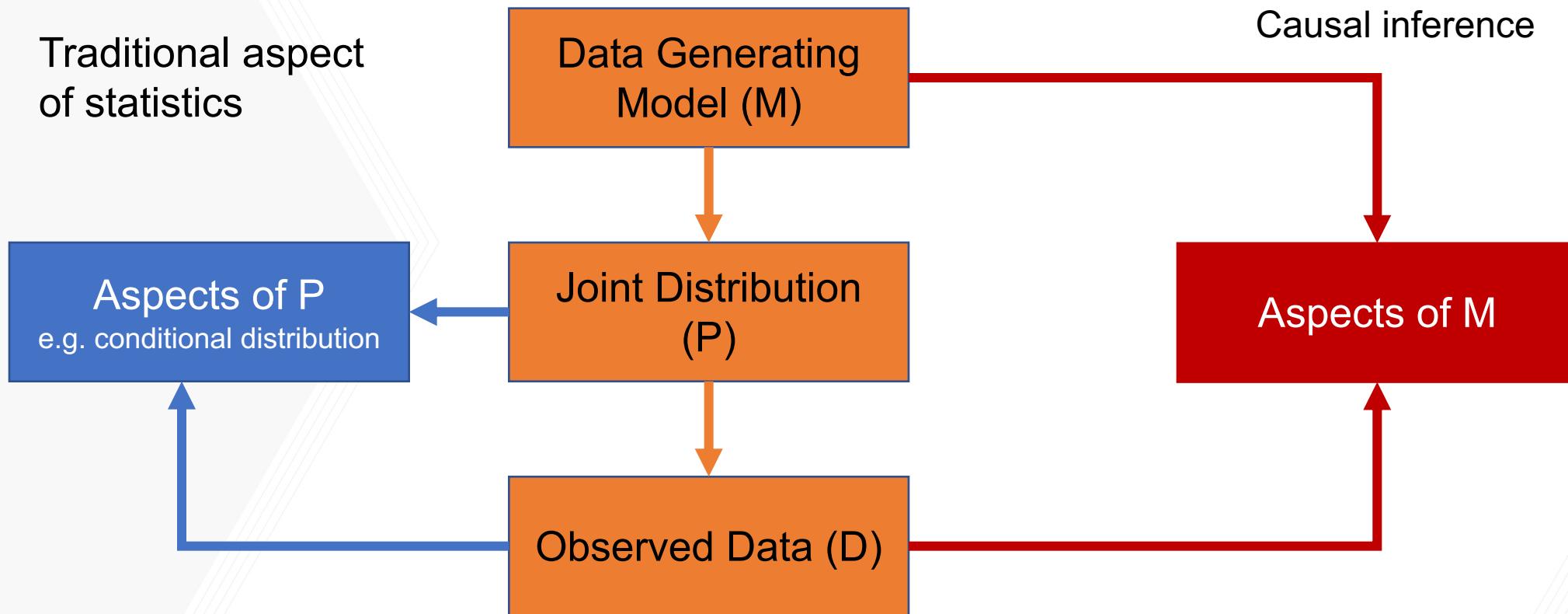


# Structural Causal Models (1995)



- ACM Turing Award 2011: “For fundamental contributions to artificial intelligence through the development of a calculus for probabilistic and causal reasoning.”

# Diagram View

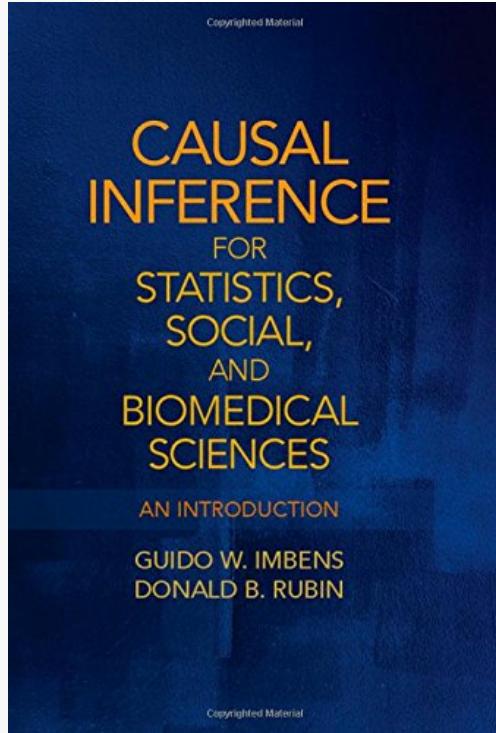


# Two basic questions of CI

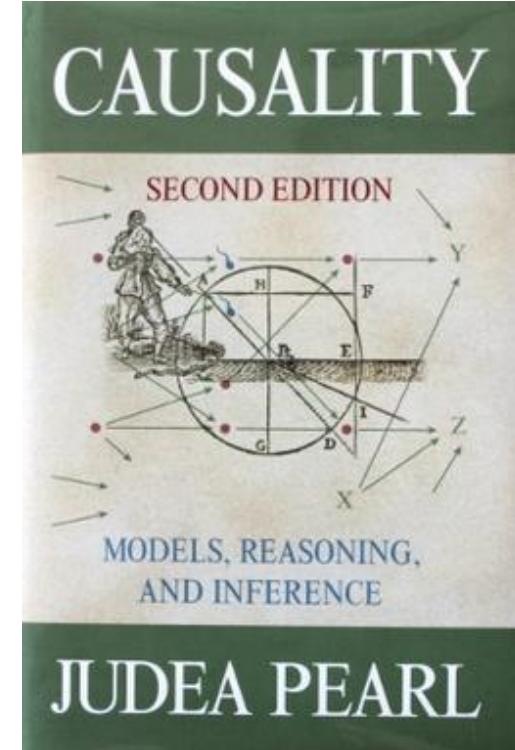
- Q1. Model Discovery
  - Does X cause Y?
  - Does X, Y have a common cause?
- Q2. Variable Inference
  - What is the causal effect of X on Y?
  - What if I take action T?
  - Had I taken action T=1 instead of T=0, what would the outcome Y had been?

# Basic Causal Inference Frameworks

# A taxonomy of CI frameworks



Potential Outcomes



Structural Causal Models

# Potential Outcome



Patient



Drug A



Drug B

Which one to take?

# In a factual world



Patient

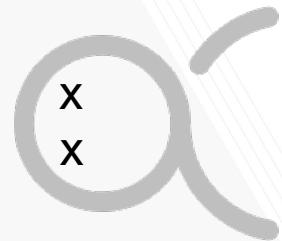
Takes



Drug A

Cured

# In a counter-factual world



Patient

Takes



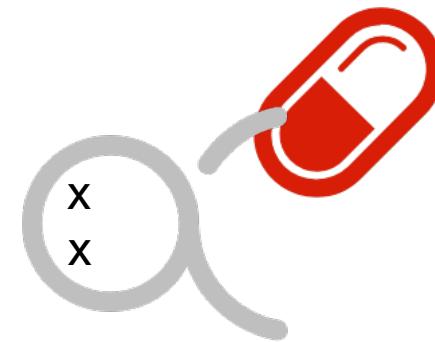
Drug B

Died

# Causal Effect Under Potential Outcome



Outcome | Treatment=A



Outcome | Treatment=B

Patient	Drug	$Y_{T=A}$	$Y_{T=B}$
P1	A	0.1	
P2	B		0.6
P3	B	0.3	
P4	A		0.1
P5	B	0.5	
P6	A		0.5

- Causal Effect
  - $E[Y_{T=A} - Y_{T=B}]$

Patient	Drug	$Y_{T=A}$	$Y_{T=B}$
P1	A	0.1	?
P2	B	?	0.6
P3	B	0.3	?
P4	A	?	0.1
P5	B	0.5	?
P6	A	?	0.5

- Causal Effect
  - $E[Y_{T=A} - Y_{T=B}]$

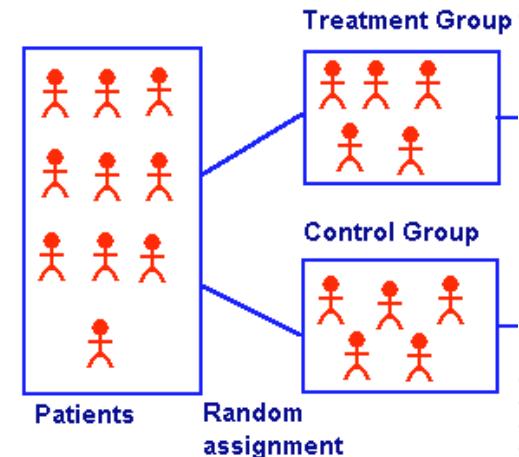
# Causal inference is the problem of estimating the missing data

Patient	Drug	$Y_{T=A}$	$Y_{T=B}$
P1	A	0.1	?
P2	B	?	0.6
P3	B	0.3	?
P4	A	?	0.1
P5	B	0.5	?
P6	A	?	0.5

- Causal Effect
  - $E[Y_{T=A} - Y_{T=B}]$
- Fundamental challenge:
  - We can only observe one of the two potential outcomes
  - A missing data problem

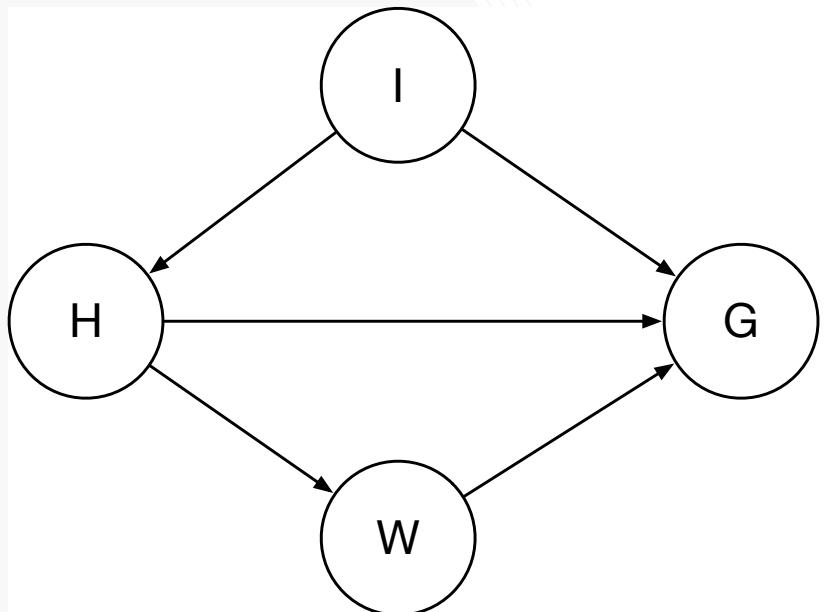
# What can we do?

- Randomized Controlled Trials (RCTs) are the golden standard
- Cons:
  - Unethical
  - External validity
  - Infeasible or costly
- => need to learn from data where we don't have actual control (i.e. observation data)



# Structural Causal Models

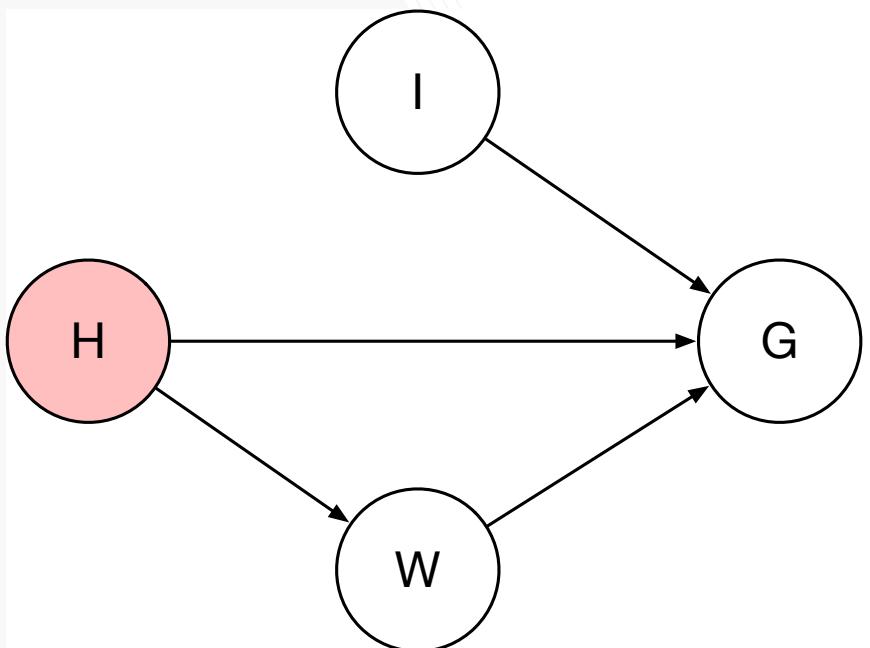
- A **graph** with edges for “causes” relationships



- A set of **equations** for quantitative relationships
  - Interest:  $I = N_I \sim (0, 1)$
  - Hour of study:  $H = 2I + 1 + N_H$
  - Working method:  $W = H^2 - 3 - N_W$
  - Exam Grade:  $G = I + H + W + N_G$
- Here  $N$  are noise variables

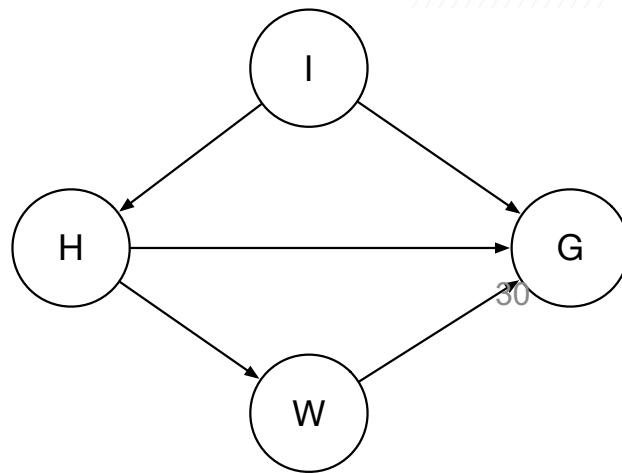
# Intervention: $\text{do}(H=2)$

- Intervention on the graph



- Intervention on the equations

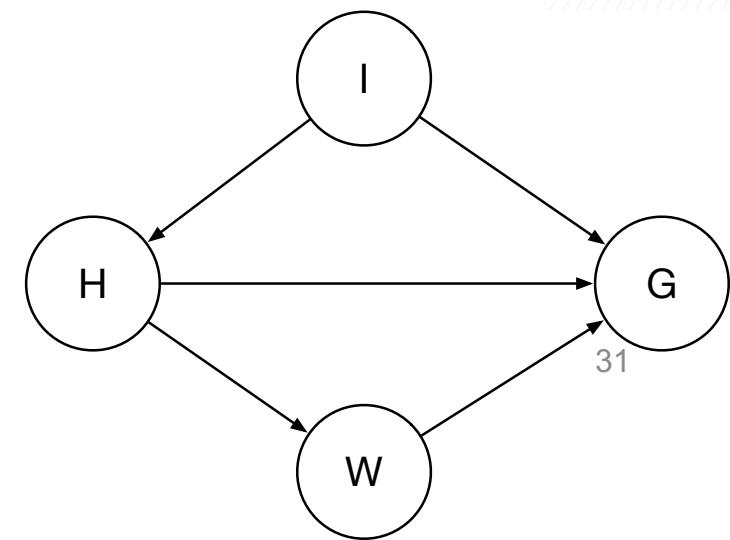
- Interest:  $I = N_I \sim (0, 1)$
- Hour of study:  $H = 2$
- Working method:  $W = H^2 - 3 - N_W = 1 - N_W$
- Exam Grade:  $G = I + H + W + N_G = I + 3 - N_W + N_G$



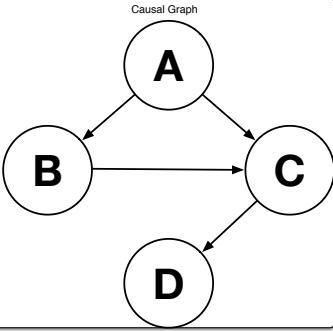
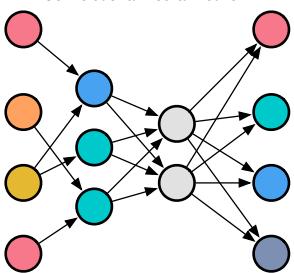
# Counterfactual

- Factual: now we observe in the world
  - $I=0.5$
  - $H=4$
  - $W=12$
  - $G=17$
- => We can deduct all the noise variables
  - $N_W = 1$
  - $N_G = 0.5$

- Counterfactual: what would have happened, had I studied for 2 hours?
  - We know after  $\text{do}(H=2)$
  - $G = I + H + W + N_G = I + 3 - N_W + N_G = 3$



# Taxonomy of Causal Inference Methods

	Description	Pros	Cons
SCM	 <p>use/assume/learn a causal model (e.g. SCM), and perform inference based on it</p>	<ul style="list-style-type: none"><li>- More sample efficient</li><li>- Incorporate domain knowledge</li></ul>	<ul style="list-style-type: none"><li>- Hard to construct the model graph</li><li>- Computationally expensive</li><li>- Often assume all variables observed</li></ul>
Potential Outcome	 <p>directly estimate causal quantities of interest using data</p>	<ul style="list-style-type: none"><li>- Easy to model</li></ul>	<ul style="list-style-type: none"><li>- Needs a lot of data</li><li>- Less of insight on the actual data generation process</li></ul>

# Both frameworks have merits

**Use structural causal model and do-calculus for**

- modeling the problem
- making assumptions explicit
- identifying the causal effect

**Use potential outcomes-based methods for estimating the causal effect**

# Next 2 units

	Causal language 1: structural causal model	Causal language 2: potential outcomes
Model discovery (discover the causal relationship between variables)		
Effect identification (predict what effect an intervention can have)		This is the key focus of this tutorial

# Agenda

Link: <https://github.com/hang-wu/CI>

## Break

### Part 1

- Introduction of Causal Inference

3:00 – 3:30

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