# The Extended Generalized Pareto Distribution 3 (EGP3) in texmex

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## Contents

1	Introduction		2
	1.1 Acknowledgements		2
	1.2 Software		2
2	Using the EGP3 distribution for extreme value modelling		2
	2.1 River Nidd example		2
	2.2 Pharmaceutical example		4
	2.3 Discussion		
3	The EGP3 distribution: some technical details		13
	3.1 Distribution function, probability density function and rando	m	
	number generation		13
	3.2 Return levels		13
	3.2.1 Derivatives		14
	3.3 Upper endpoint		14
4	Appendix		15
	4.1 Information on the R session		15

#### 1 Introduction

Version 2 of the the texmex [4] package for R [3] introduced the ability to add new families of extreme value distributions to the package and itself added the Generalized Extreme Value (GEV) distribution, previous releases having supported modelling only with the Generalized Pareto Distribution (GPD). We here describe the implementation of a new extreme value family, the Extended Generalized Pareto Distribution 3 (EGP3) described by Papastathopoulos and Tawn [2].

The EGP3 family introduces a new parameter,  $\kappa > 0$ . For the purposes of numerical stability and avoiding negative values, when modelling data we work with  $\lambda = \log \kappa$ .

Papastathopoulos and Tawn [2] work more with their EGP1 and 2 models than with EGP3, but state that there are few differences in results between the 3 versions. The EGP3 model has the advantage of closed form derivatives for approximating the standard errors of return levels, which is one reason why it is preferred here. Section 3 contains some technical details.

#### 1.1 Acknowledgements

This work was partly funded by AstraZeneca. I'm also grateful to Yiannis Papastathopoulos and Paul Metcalfe for various comments and corrections. Thanks also to Emmanuel Flachaire for pointing out a bug in an earlier version of egp3RangeFit.

#### 1.2 Software

R version 3.4.4 (2018-03-15) [3] will be used for all analyses. A summary of the R session appears in the Appendix, in the interests of reproducibility.

## 2 Using the EGP3 distribution for extreme value modelling

The additional parameter,  $\kappa$  in the EGP models is allowed to vary over the positive real line, and in each case a value of  $\kappa=1$  results in a distribution identical to the GPD. This property suggests a new diagnostic plot to aid threshold selection: plot the estimated value of  $\kappa$  with a confidence interval over a range of thresholds and select the lowest threshold which contains the value  $\hat{\kappa}=1$ . GPD modelling can then be performed on values above this threshold. This diagnostic plot provides a useful addition to the standard methods of examining the values of  $\hat{\sigma}_*$  and  $\hat{\xi}$  over a range of thresholds, and examining the mean residual life plot as described by Coles [1].

#### 2.1 River Nidd example

Following Papastathopoulos and Tawn, we work with the River Nidd data, producing the standard threshold selection plots and the new plot based on EGP3.

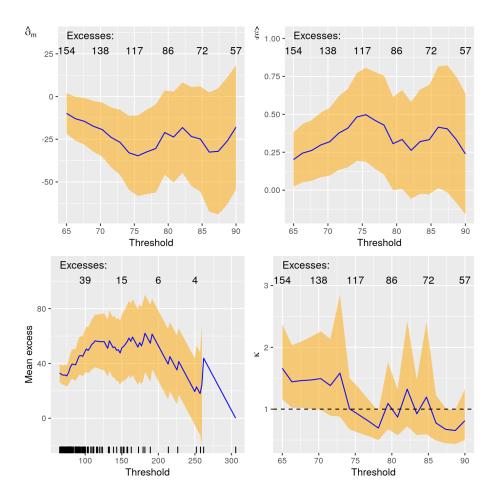


Figure 1: Threshold selection plots for the River Nidd data. The bottom right panel displays the  $\hat{\kappa}$  with an approximate 95% confidence interval. The lowest value of  $\hat{\kappa}$  for which the confidence interval contains 1 is approximately 75, suggesting this as a threshold above which GPD modelling can be performed.

```
library(texmex)
library(gridExtra)
g1 <- ggplot(gpdRangeFit(nidd, cov="numeric", umax=90, umin=65, nint=20))
g2 <- ggplot(mrl(nidd))
g3 <- ggplot(egp3RangeFit(nidd, umax=90, umin=65, nint=20),)
grid.arrange(g1[[1]],g1[[2]],g2,g3,ncol=2)</pre>
```

Figure 1 displays the results. The lowest threshold for which  $\hat{\kappa}$  is similar to 1 is at about 75, suggesting that GPD models can be used above this level.

#### 2.2 Pharmaceutical example

The introduction of  $\kappa$  into the distribution suggests that lower thresholds might be usable for extreme value modelling. We now follow Southworth and Heffernan [5] in analyzing some clinical trial safety data. Southworth and Heffernan model all the values of various safety related laboratory variables above the  $70^{th}$  percentile using GPD models allowing  $\hat{\xi}$  to vary linearly with dose. In each case, they find a linear relationship with dose, except for bilirubin. Following Papastathopoulos and Tawn, we revisit the issue of threshold selection, hoping to find a lower threshold above which EGP3 models can be fit, thus including more of the available data in the model, increasing the chance of identifying a dose effect if one exists.

The plots of  $\hat{\kappa}$  over the range of thresholds in Figure 2 suggests that GPD models ought to fit above a threshold of about 0, the  $57^{th}$  percentile, or even a little lower for some doses.

We now pool the residual bilirubin data from all doses and present the standard threshold selection plots as well as the EGP3 plot. The results appear in Figure 3 and also suggest a threshold of 0 to be appropriate, gaining us an additional 79 observations compared to the  $70^{th}$  percentile used by Southworth and Heffernan.

```
p1 <- ggplot(gpdRangeFit(liver$r, nint=20))
p2 <- ggplot(mrl(liver$r))
p3 <- ggplot(egp3RangeFit(liver$r, nint=20))
grid.arrange(p1[[1]],p1[[2]],p2,p3,ncol=2)</pre>
```

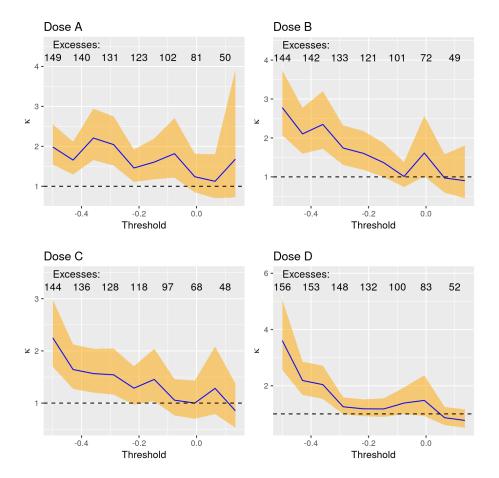


Figure 2: The EGP3 threshold selection plot for each dose group in the liver data.

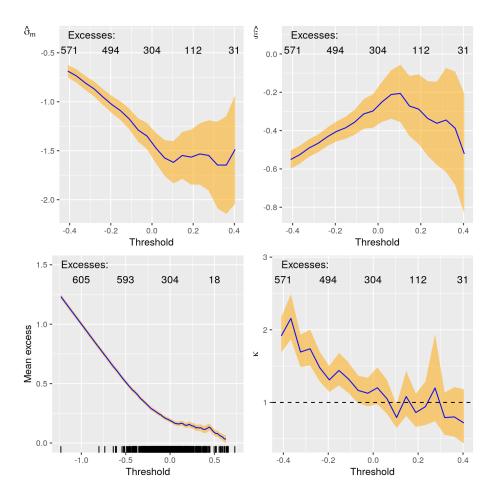


Figure 3: Threshold selection plots for the liver data. The bottom right panel displays our new plot based on the EGP3 distribution.

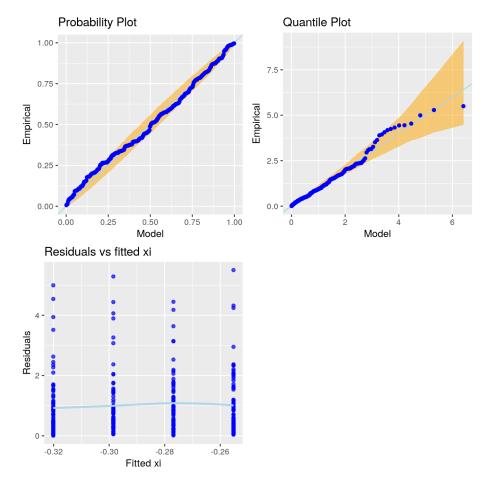


Figure 4: Diagnostic plots for the GPD model with threshold at 1.3.

We now fit the GPD model and produce diagnostic plots (Figure 4) and a summary of the model.

```
gmod <- evm(r, data=liver, th=0, xi=~as.numeric(dose))
ggplot(gmod,span=1)</pre>
```

```
##
##
     Log lik.
               Penalized log lik.
                                          AIC
                                                     DIC
                         208.5003 -411.0005
##
     208.5003
##
##
## Coefficients:
##
                          Value
                                    SE
                                              t
## phi: (Intercept)
                           -1.3992
                                      0.0753
                                              -18.5931
                                               -4.4836
## xi: (Intercept)
                           -0.3418
                                      0.0762
## xi: as.numeric(dose)
                           0.0216
                                      0.0230
                                                0.9386
##
## 1000 simulated data sets compared against observed data QQ-plot.
## Quantile of the observed MSE: 0.476
## 34 observations (11.184%) outside the 95% simulated envelope.
```

The GPD model fit to all values above 0 seems to fit reasonably well, with the diagnostic plots revealing no great cause for concern. A few points on the QQ-plot fall outside the simulated envelope, but because these points are correlated, it makes no sense to choose thresholds such as 5% or 10% as hard cut-offs, so the model fit is not seriously called into question. The summary table reveals there to be still no evidence of a dose effect, at least according to the approximate test implied by the t-value.

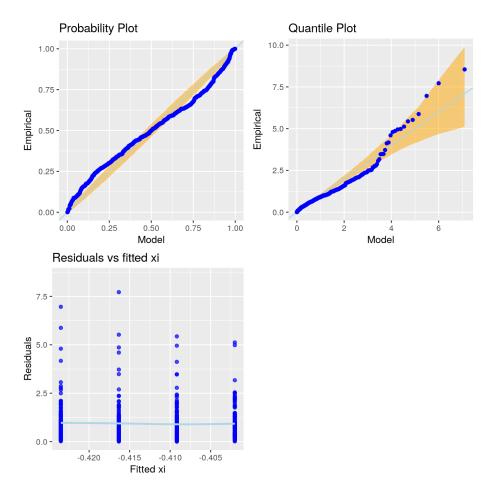


Figure 5: Diagnostic plots from fitting the EGP3 distribution to all of the residual bilirubin data.

We next attempt to model all the data using the EGP3 distribution.

```
summary(emod)

## Call: evm(y = r, data = liver, family = egp3, th = min(liver$r - 1e-04),

## xi = ~as.numeric(dose))

##

## Family: EGP3

##

## Model fit by maximum likelihood.

##

## Convergence: TRUE
```

```
##
##
     Log lik. Penalized log lik.
                                        AIC
                                                  DIC
     -92.35099
                        -92.35099 192.702 190.5722
##
##
##
## Coefficients:
##
                         Value
                                    SE
                                               t
                         2.05e+00
                                     7.65e-02
## lambda: (Intercept)
                                                2.68e+01
## phi: (Intercept)
                                     3.57e-02 -6.27e+00
                         -2.24e-01
## xi: (Intercept)
                         -4.31e-01
                                     1.61e-02 -2.67e+01
## xi: as.numeric(dose)
                         7.16e-03
                                     2.00e-09
                                                3.58e+06
## 1000 simulated data sets compared against observed data QQ-plot.
## Quantile of the observed MSE: 0.997
## 407 observations (67.162%) outside the 95% simulated envelope.
```

In Figure 5 there is some noticeable structure in the diagnostic plots. The simulation test reveals there to be about 65% of the observations outside of the simulated envelope, so that the model is a terrible fit to the data.

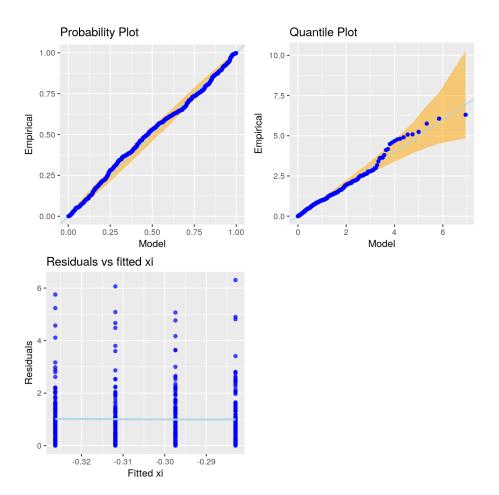


Figure 6: Diagnostic plots for the EGP3 model when using a threshold of -0.25

We now try a somewhat higher threshold of -0.25.

```
summary(emod)

## Call: evm(y = r, data = liver, family = egp3, th = -0.25, xi = ~as.numeric(dose))

##
## Family: EGP3

##
## Model fit by maximum likelihood.

##
## Convergence: TRUE
## Threshold: -0.25

## Rate of excess: 0.855
```

```
##
               Penalized log lik.
##
                                                     DIC
    Log lik.
                                          AIC
##
     155.4143
                         155.4143 -302.8286
                                               -303.0182
##
##
## Coefficients:
##
                          Value
                                    SE
                                              t
## lambda: (Intercept)
                           0.4306
                                      0.0715
                                                6.0259
## phi: (Intercept)
                           -1.1222
                                      0.0730
                                              -15.3761
                                      0.0500
## xi: (Intercept)
                           -0.3407
                                               -6.8132
## xi: as.numeric(dose)
                            0.0144
                                      0.0123
                                                 1.1770
## 1000 simulated data sets compared against observed data QQ-plot.
## Quantile of the observed MSE: 0.644
## 2 observations (0.386%) outside the 95% simulated envelope.
```

We see from the output that the model appears to fit the data, and still there is no evidence of a dose effect.

#### 2.3 Discussion

In the pharmaceutical example, we were able to claw back some additional data into the model by using the EGP3 distribution, at the expense of an additional parameter. However, when all of the data were used, the fit was awful. It appears that the EGP3 distribution's most useful function might be to provide an extra threshold selection plot, or even a test to decide on a lower threshold. For modelling extreme values it will, at least in some examples, allow inclusion of a larger proportion of observations, but some care will need to be taken in selection of the threshold, and no obvious threshold selection methods for EPG3 are currently available.

## 3 The EGP3 distribution: some technical details

The EGP3 family introduces a new parameter,  $\kappa$ , to the familiar parameters  $\sigma$  and  $\xi$  in the GPD family. The threshold u remains. The EPG3 distribution function is then obtained by raising the GPD distribution function to  $\kappa > 0$ .

## 3.1 Distribution function, probability density function and random number generation

The cumulative distribution function for the EGP3 family is

$$F(x) = \begin{cases} \left[ 1 - \left[ 1 + \xi \frac{x - u}{\sigma} \right]^{-1/\xi} \right]^{\kappa} & \xi \neq 0 \\ \left[ 1 - \exp\left( -\frac{(x - u)}{\sigma} \right) \right]^{\kappa} & \xi = 0 \end{cases}$$
 (1)

which yields probability density function

$$f(x) = \begin{cases} \frac{\kappa}{\sigma} \left\{ 1 - (1 + \xi(x - u)/\sigma)^{-1/\xi} \right\}^{\kappa - 1} (1 + \xi(x - u)/\sigma)^{-1/\xi - 1} & \xi \neq 0 \\ \frac{\kappa}{\sigma} e^{-(x - u)/\sigma} \left( 1 - e^{-(x - u)/\sigma} \right)^{\kappa - 1} & \xi = 0. \end{cases}$$

Equations (1) and (2) are implemented in texmex in the functions pegp3 and degp3.

Inversion of (1) yields

$$z = \begin{cases} u + \frac{\sigma}{\xi} \left[ \left( 1 - x^{1/\kappa} \right)^{-\xi} - 1 \right] \xi \neq 0 \\ u - \sigma \log \left( 1 - x^{1/\kappa} \right) & \xi = 0 \end{cases}$$
 (3)

enabling random number generation as implemented in regp3.

#### 3.2 Return levels

Following Coles ([1] Section 4.3.3) computation of return levels proceeds as follows. We note that

$$P(X > x | X > u) = 1 - F(X)_{X > u}$$

so that

$$P(X > x) = \theta_u \{1 - F(X)\}\$$

where  $\theta_u = P(X > u)$  for threshold u. Therefore, the level  $x_M$  that is exceeded on average once every M observations is the solution to

$$\frac{1}{M} = \theta_u \{ 1 - F(X) \}. \tag{4}$$

For the EGP3 distribution, we solve (4) to yield

$$x_{M} = \begin{cases} u + \frac{\sigma}{\xi} \left[ \left\{ 1 - \left( 1 - \frac{1}{M\theta_{u}} \right)^{1/\kappa} \right\}^{-\xi} - 1 \right] \xi \neq 0 \\ u - \sigma \log \left[ 1 - \left( 1 - \frac{1}{M\theta_{u}} \right)^{1/\kappa} \right] \qquad \xi = 0 \end{cases}$$
 (5)

correcting Papastathopoulos and Tawn.

#### 3.2.1 Derivatives

In order to compute approximate standard errors for return levels, we need derivatives of (5) with respect to each of  $\kappa$ ,  $\sigma$  and  $\xi$ . These are found to be

$$\frac{dx_M}{d\kappa} = -\frac{\left(1 - \frac{1}{M\theta_u}\right)^{1/\kappa} \sigma \left(1 - \left(1 - \frac{1}{M\theta_u}\right)^{1/\kappa}\right)^{-\xi - 1} \log \left(1 - \frac{1}{M\theta_u}\right)}{\kappa^2}$$

$$\frac{dx_M}{d\sigma} = \frac{\left(1 - \left(1 - \frac{1}{M\theta_u}\right)^{1/\kappa}\right)^{-\xi} - 1}{\xi}$$

$$\frac{dx_M}{d\xi} = -\frac{\sigma \left(1 - \left(1 - \frac{1}{M\theta_u}\right)^{1/\kappa}\right)^{-\xi} \log \left(1 - \left(1 - \frac{1}{M\theta_u}\right)^{1/\kappa}\right)}{\xi} - \frac{\sigma \left(\left(1 - \left(1 - \frac{1}{M\theta_u}\right)^{1/\kappa}\right)^{-\xi} - 1\right)}{\xi^2}$$

#### 3.3 Upper endpoint

When  $\xi < 0$ , the GPD has upper endpoint  $u - \frac{\sigma}{\xi}$ . This value is obtained by setting the distribution function to 1 and solving. Working with (1), setting it to 1 and solving reveals the EGP3 distribution to have the same upper endpoint as the GPD.

### 4 Appendix

#### 4.1 Information on the R session

Information on the R session, in the interests of reproducibility.

```
## R version 3.4.4 (2018-03-15)
## Platform: x86_64-pc-linux-gnu (64-bit)
## Running under: Ubuntu 18.04 LTS
##
## Matrix products: default
## BLAS: /usr/lib/x86_64-linux-gnu/blas/libblas.so.3.7.1
## LAPACK: /usr/lib/x86_64-linux-gnu/lapack/liblapack.so.3.7.1
##
## locale:
  [1] LC_CTYPE=en_GB.UTF-8
                                 LC_NUMERIC=C
   [3] LC_TIME=en_GB.UTF-8
                                 LC_COLLATE=en_GB.UTF-8
   [5] LC_MONETARY=en_GB.UTF-8
                                 LC_MESSAGES=en_GB.UTF-8
   [7] LC_PAPER=en_GB.UTF-8
                                 LC_NAME=C
   [9] LC_ADDRESS=C
                                 LC_TELEPHONE=C
## [11] LC_MEASUREMENT=en_GB.UTF-8 LC_IDENTIFICATION=C
##
## attached base packages:
## [1] stats
                graphics grDevices utils
                                             datasets methods
                                                                 hase
##
## other attached packages:
## [1] MASS_7.3-49
                  texmex_2.4.2 ggplot2_2.2.1 mvtnorm_1.0-7 gridExtra_2.3
## [6] knitr_1.20
##
## loaded via a namespace (and not attached):
   [1] Rcpp_0.12.16 grid_3.4.4 plyr_1.8.4
                                                         gtable_0.2.0
                       evaluate_0.10.1 scales_0.5.0
   [5] magrittr_1.5
##
                                                         pillar_1.2.2
                      rlang_0.2.0 stringi_1.1.7
   [9] highr_0.6
                                                         lazyeval_0.2.1
##
## [13] labeling_0.3 tools_3.4.4
                                        stringr_1.3.0
                                                         munsell_0.4.3
## [17] parallel_3.4.4 compiler_3.4.4 colorspace_1.3-2 tibble_1.4.2
```

#### References

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- [3] R Development Core Team. R: A Language and Environment for Statistical Computing. R Foundation for Statistical Computing, Vienna, Austria, 2011. ISBN 3-900051-07-0.

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- [5] H. Southworth and J. E. Heffernan. Multivariate extreme value modelling of laboratory safety data from clinical studies. *Pharmaceutical Statistics*, to appear.