Epidemiologic Data Analysis using R Part 9 Time dependent covariates

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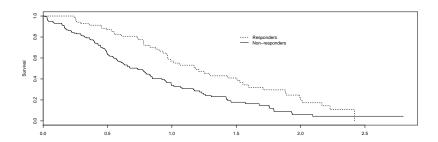
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Time-Dependent covariates in TTE

- ▶ A key underlying condition (a martingale) is that present actions depend only on the past.
- ► The decision of whether one is in the risk set or not and covariates can depend in any way on prior covariates and risk set patterns
- but cannot look into the future.

Analysis by treatment response - NO! (T. Thernau)

- ► An example based on the advanced lung cancer data set, where assignment of the responder was made by looking
- ▶ The problem arises because any early deaths, those that occur before response can be assessed, will all be assigned to the non-responder group, even deaths that have nothing to do with the condition under study.
- Assume that subjects came in monthly for 12 cycles of treatment, and randomly declare a response for 5% of the subjects at each visit.



Classification of time dependent covariates

- Values change continuosly (change in small during a small time interval) blod pressure, cholesterol **Diffusion process**
- Values change a lot during a small time interval (start and stop smoking 0->1, number of visits before a given time point 0,1,2,...) Counting process
- ▶ The longer the follow-up time the more likely are changes
- lognitudinal data: registry based follow-up, repeated measures, e-equipments (smart tech.)

Heart transplant data

Mortality of patients on the waiting list for the Stanford heart transplant program.

- start, stop: Entry and exit time
- ► Event: and status for this interval of time (0=Alive, 1=Death)
- ▶ age: age-48 years
- year: year of acceptance (in years after 1 Nov 1967)
- surgery: prior bypass surgery 1=yes
- transplant: received transplant 1=yes
- ▶ id: patient id

id	transplant	surgery	year	age	event	stop	start
1	0	0	0.12	-17.2	1	50	0
2	0	0	0.25	3.8	1	6	0
3	0	0	0.27	6.3	0	1	0

Heart transplant data

Cox model with constant treatment (transplant) effect

```
ci.lin(coxph(Surv(start, stop, event) ~
    age + year + surgery + transplant,
data=heart), Exp=TRUE)[,c(5:7)]
```

```
exp(Est.) 2.5% 97.5% age 1.0275390 1.0002875 1.0555330 year 0.8638585 0.7524197 0.9918021 surgery 0.5287657 0.2574423 1.0860419 transplant1 0.9898016 0.5351550 1.8306980
```

Transplant has no effect on mortality RR=0.99 !!!!!

How the risk is modified by time

- Change in the covariate value changes the risk instantly
- ▶ time lag of t > 0 months,
- risk increases gradually until reaches some higher level or
- risk increases at first but decreases later. In this case the risk depends on the time when the covariate value changed.
- With diffuse processes change times can be defined in many ways! covariate value exceeds a certain level or covariate value increases by a certain amount during a (short) time interval.

HT data - the effect of transplantation

- ▶ Divide the follow-up time into e.g. at most four parts based on
- ▶ transplantation + 0 days
- ▶ transplantation + 30 days
- ▶ transplantation + 60 days.

Model a RR parameter for each interval.

Natural reference category can be interval before transplantation (set RR=1).

Time dependent effect of transplant -Lexis object

```
heart.Lx <-
Lexis(entry=list(age.time=age,
                 fu.time=0.
tx.time=decimal date(tx.date)-decimal date(accept.dt)),
duration=futime/365,
exit.status=as.character(fustat),
data=subset(jasa, is.na(tx.date) | fu.date != tx.date))
NOTE: entry.status has been set to "0" for all.
Warning in Lexis(entry = list(age.time = age, fu.time = 0,
```

Time dependent effect of transplant -Lexis object

```
67 19.55099 0 0.1530055 0.7780822 0 1
```

age.time fu.time tx.time lex.dur lex.Cst lex.Xst

lex.id birth.dt accept.dt tx.date fu.date fusto 66 1952-09-03 1972-03-23 1972-05-18 1973-01-01

age futime wait.time transplant mismatch hla.a2 ms 67 19.55099 284 56 1 3 0

mscore reject cut.2 cut.1 cut.0 67 1.02 0 0.5530055 0.3530055 0.1530055

Time dependent effect of transplant

Package Epi contains function mcutLexis, which splits the follow-up interval w.r.t. variables cut.0, cut.1 and cut.2: accept.dt acceptance == 0 tx.time transplant date (cut.0) tx.time +0.2 (cut.1) tx.time+0.4 (cut.2)

```
age.time fu.time tx.time lex.dur lex.Cst lex.Xst 156 19.55099 0.0000000 0.1530055 0.1530055 0 a 157 19.70400 0.1530055 0.3060109 0.2000000 a a-b 158 19.90400 0.3530055 0.5060109 0.2000000 a-b a-b-c 159 20.10400 0.5530055 0.7060109 0.2250767 a-b-c 1
```

	${\tt mscore}$	reject	cut.2	cut.1	cut.0
156	1.02	0	0.5530055	0.3530055	0.1530055
157	1.02	0	0.5530055	0.3530055	0.1530055
158	1.02	0	0.5530055	0.3530055	0.1530055
159	1.02	0	0.5530055	0.3530055	0.1530055

Time dependent effect of transplant

Reference group is the time between acceptance and transplant operation, with RR=1

- ▶ a [transplant+0.2]
- ► a-b [transplant+0.2,transplant+0.4]
- ▶ a-b-c [transplant+0.4,]

```
exp(Est.) 2.5% 97.5% factor(lex.Cst)a 1.371 0.7355 2.56 factor(lex.Cst)a-b 0.252 0.0501 1.26 factor(lex.Cst)a-b-c 0.528 0.1817 1.53
```

What should I consider when interpreting results

Main assumption has been that changes in the covariate value does not depend on outcome process. E.g. an intermediator:

- ▶ Treatment for HIV begins when CD4 has decreased below 350.
- ▶ Risk to contract AIDS (CD4<200) is higher for patients who have started treatment than patients who have not (CD4>350).
- ► A simple analysis where timedependent variable is defined by the time when CD4 reaches 350 may result in conclusion that the HIV treatment increases the risk of AIDS!
- In reality the risk would be higher without the treatment.
- More elaborate methods and adjustments are needed () consult a statistician).

How to proceed?

- Timedependent covariates can provide valuable information on treatment or risk factor effects.
- But: application of timedependent covariates in predicting e.g. survival can be challenging.
- Association of a timedependent covariate and the outcome can be instant, lagged or cumulative) selection of appropriate functional form?
- What causes the change of the covariate value?
- ▶ If the changetime of the covariate is completely random, the methods presented here are appropriate (e.g. RCT, heart transplantation example).