

UNOBSERVED HETEROGENEITY

Jesús-Adrián Álvarez

alvarez@sdu.dk

Interdisciplinary Centre on Population Dynamics
University of Southern Denmark

- We are all going to die...

- We are all going to die... at different ages.

- We are all going to die... at different ages.
- We differ from each other in many **different aspects**: sex, education, socio-economic status, country of birth, physiology, lifestyle behaviours, etc.

- We are all going to die... at different ages.
- We differ from each other in many **different aspects**: sex, education, socio-economic status, country of birth, physiology, lifestyle behaviours, etc.
- There is always something that **we cannot observe**.

- We are all going to die... at different ages.
- We differ from each other in many **different aspects**: sex, education, socio-economic status, country of birth, physiology, lifestyle behaviours, etc.
- There is always something that **we cannot observe**.

Frailty is a concept that comprises all those unobserved features that increase or decrease individual's mortality risk. (Manton et al., 1981)

- We are all going to die... at different ages.
- We differ from each other in many **different aspects**: sex, education, socio-economic status, country of birth, physiology, lifestyle behaviours, etc.
- There is always something that **we cannot observe**.

Frailty is a concept that comprises all those unobserved features that increase or decrease individual's mortality risk. (Manton et al., 1981)

This results in different survival trajectories.

- We are all going to die... at different ages.
- We differ from each other in many **different aspects**: sex, education, socio-economic status, country of birth, physiology, lifestyle behaviours, etc.
- There is always something that **we cannot observe**.

Frailty is a concept that comprises all those unobserved features that increase or decrease individual's mortality risk. (Manton et al., 1981)

This results in different survival trajectories.

At a population level this creates **heterogeneity**.

How can we model this?

Two random variables:

Two random variables:

X : Age at death,

Two random variables:

X : Age at death,

Z : Frailty,

Two random variables:

X : Age at death,

Z : Frailty,

$\mu(x|z)$: individual hazard,

Two random variables:

X : Age at death,

Z : Frailty,

$\mu(x|z)$: individual hazard,

$$\mu(x|z) = z\mu(x)$$

Two random variables:

X : Age at death,

Z : Frailty,

$\mu(x|z)$: individual hazard,

$$\mu(x|z) = z\mu(x)$$

$\mu(x) \equiv \mu(x|z = 1)$, baseline hazard of the standard individual with $z = 1$

INDIVIDUAL HAZARDS

Two random variables:

X : Age at death,

Z : Frailty,

$\mu(x|z)$: individual hazard,

$$\mu(x|z) = z\mu(x)$$

$\mu(x) \equiv \mu(x|z = 1)$, baseline hazard of the standard individual with $z = 1$

How individual hazards compare to the standard individual

INDIVIDUAL HAZARDS

Two random variables:

X : Age at death,

Z : Frailty,

$\mu(x|z)$: individual hazard,

$$\mu(x|z) = z\mu(x)$$

$\mu(x) \equiv \mu(x|z = 1)$, baseline hazard of the standard individual with $z = 1$

How individual hazards compare to the standard individual

For example, let us assume that $\mu(x) = 0.3$ and that I have $z = 2$, then my risk of dying is $\mu(x|z) = 0.6$

INDIVIDUAL HAZARDS

Two random variables:

X : Age at death,

Z : Frailty,

$\mu(x|z)$: individual hazard,

$$\mu(x|z) = z\mu(x)$$

$\mu(x) \equiv \mu(x|z = 1)$, baseline hazard of the standard individual with $z = 1$

How individual hazards compare to the standard individual

For example, let us assume that $\mu(x) = 0.3$ and that I have $z = 2$, then my risk of dying is $\mu(x|z) = 0.6$

Survival function

$$s(x|z) = e^{-\int_0^x \mu(t|z)dt},$$

$$\mu(x|z) = -\frac{d \ln s(x|z)}{dx}.$$

Population hazard: Weighted average of the all the individual hazards $\mu(x|z)$, weighted by the probability density function $\pi(z)$:

POPULATION HAZARD

Population hazard: Weighted average of the all the individual hazards $\mu(x|z)$, weighted by the probability density function $\pi(z)$:

$$\bar{\mu}(x) = \int_0^{\infty} \mu(x|z)\pi(z)dz,$$

where $\pi(z)$ is the p.d.f. of Z at any age x .

POPULATION HAZARD

Population hazard: Weighted average of the all the individual hazards $\mu(x|z)$, weighted by the probability density function $\pi(z)$:

$$\bar{\mu}(x) = \int_0^{\infty} \mu(x|z)\pi(z)dz,$$

where $\pi(z)$ is the p.d.f. of Z at any age x .

Given that $\mu(x|z) = z\mu(x)$

$$\bar{\mu}(x) = \bar{z}(x)\mu(x)$$

where $\bar{z}(x) = \int_0^{\infty} z\pi(z)dz$ at any age x .

POPULATION HAZARD

Population hazard: Weighted average of the all the individual hazards $\mu(x|z)$, weighted by the probability density function $\pi(z)$:

$$\bar{\mu}(x) = \int_0^{\infty} \mu(x|z)\pi(z)dz,$$

where $\pi(z)$ is the p.d.f. of Z at any age x .

Given that $\mu(x|z) = z\mu(x)$

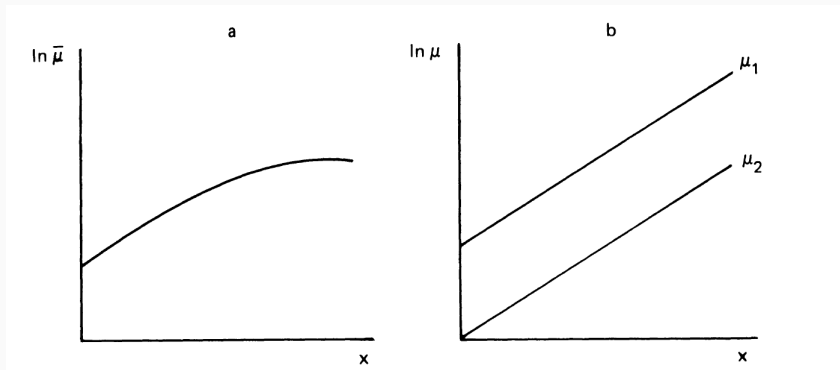
$$\bar{\mu}(x) = \bar{z}(x)\mu(x)$$

where $\bar{z}(x) = \int_0^{\infty} z\pi(z)dz$ at any age x .

The population hazard at any age x is a function of the baseline $\mu(x)$ and the average frailty $\bar{z}(x)$ among survivors to this age.

i n d i v i d u a l s
≠
P O P U L A T I O N

INDIVIDUALS VS POPULATION HAZARDS



Vaupel and Yashin (1985)

REMARKS ON $\bar{\mu}(x) = \bar{Z}(x)\mu(x)$

- Because frailer individuals die out first, $\bar{Z}(x)$ decreases with age x and, as a result, the **individual hazard** increases faster than the **population hazard**,

REMARKS ON $\bar{\mu}(x) = \bar{z}(x)\mu(x)$

- Because frailer individuals die out first, $\bar{z}(x)$ decreases with age x and, as a result, the **individual hazard** increases faster than the **population hazard**,
- The population hazard **converges** to the hazard of the most robust individuals as age x goes to the maximum age (**mortality deceleration and levelling-off**).

REMARKS ON $\bar{\mu}(x) = \bar{z}(x)\mu(x)$

- Because frailer individuals die out first, $\bar{z}(x)$ decreases with age x and, as a result, the **individual hazard** increases faster than the **population hazard**,
- The population hazard **converges** to the hazard of the most robust individuals as age x goes to the maximum age (**mortality deceleration and levelling-off**).
- It is a model for **cohort mortality**,

REMARKS ON $\bar{\mu}(x) = \bar{z}(x)\mu(x)$

- Because frailer individuals die out first, $\bar{z}(x)$ decreases with age x and, as a result, the **individual hazard** increases faster than the **population hazard**,
- The population hazard **converges** to the hazard of the most robust individuals as age x goes to the maximum age (**mortality deceleration and levelling-off**).
- It is a model for **cohort mortality**,
- Individual hazards are **proportional** to the baseline hazard,

REMARKS ON $\bar{\mu}(x) = \bar{z}(x)\mu(x)$

- Because frailer individuals die out first, $\bar{z}(x)$ decreases with age x and, as a result, the **individual hazard** increases faster than the **population hazard**,
- The population hazard **converges** to the hazard of the most robust individuals as age x goes to the maximum age (**mortality deceleration and levelling-off**).
- It is a model for **cohort mortality**,
- Individual hazards are **proportional** to the baseline hazard,
- Individual frailty **does not change with age**. It remains the same *for all ages*. It is often called **fixed-frailty model**.

Continuous frailty

X : continuous r.v.

$Z > 0$: continuous r.v. with density $\pi(z)$.

X : continuous r.v.

$Z > 0$: continuous r.v. with density $\pi(z)$.

Hazard and survival functions for populations

- $\bar{\mu}(x) = \int_0^\infty \mu(x|z)\pi(z)dz = \bar{z}(x)\mu(x)$
- $\bar{s}(x) = \int_0^\infty s(x|z)\pi(z)dz$

X : continuous r.v.

$Z > 0$: continuous r.v. with density $\pi(z)$.

Hazard and survival functions for populations

- $\bar{\mu}(x) = \int_0^\infty \mu(x|z)\pi(z)dz = \bar{z}(x)\mu(x)$
- $\bar{s}(x) = \int_0^\infty s(x|z)\pi(z)dz$

Can we get a closed form for $\bar{s}(x)$?

A note on the Laplace transform

A NOTE ABOUT THE LAPLACE TRANSFORM

A function of functions

A NOTE ABOUT THE LAPLACE TRANSFORM

A function of functions

It helps us to transform a function $f(t)$ to another function $f(s)$.

A NOTE ABOUT THE LAPLACE TRANSFORM

A function of functions

It helps us to transform a function $f(t)$ to another function $f(s)$.

The Laplace transform of a function $f(t)$, $t \geq 0$ is

$$\mathcal{L}_f(s) = \int_0^{\infty} e^{-st} f(t) dz$$

A NOTE ABOUT THE LAPLACE TRANSFORM

A function of functions

It helps us to transform a function $f(t)$ to another function $f(s)$.

The Laplace transform of a function $f(t)$, $t \geq 0$ is

$$\mathcal{L}_f(s) = \int_0^\infty e^{-st} f(t) dz$$

In probability:

$$\mathcal{L}_f(s) = \mathbb{E}(e^{-sX})$$

A NOTE ABOUT THE LAPLACE TRANSFORM

A function of functions

It helps us to transform a function $f(t)$ to another function $f(s)$.

The Laplace transform of a function $f(t)$, $t \geq 0$ is

$$\mathcal{L}_f(s) = \int_0^\infty e^{-st} f(t) dz$$

In probability:

$$\mathcal{L}_f(s) = \mathbb{E}(e^{-sX})$$

and

$$\mathbb{E}(x) = -\mathcal{L}'_f(0)$$

$$\mathbb{V}(x) = \mathcal{L}''_f(0) - [\mathcal{L}'_f(0)]^2$$

The survival function for the total population is the Laplace transform of the frailty distribution at $x = 0$, calculated for the cumulative baseline hazard $H(x)$

The survival function for the total population is the Laplace transform of the frailty distribution at $x = 0$, calculated for the cumulative baseline hazard $H(x)$

$$\bar{s}(x) = \int_0^{\infty} s(x|z)\pi(z)dz =$$

The survival function for the total population is the Laplace transform of the frailty distribution at $x = 0$, calculated for the cumulative baseline hazard $H(x)$

$$\bar{s}(x) = \int_0^\infty s(x|z)\pi(z)dz = \int_0^\infty e^{-H(x)z}\pi(z)dz = \mathbb{E}(e^{-H(x)z}) = \mathcal{L}_Z(H(x)).$$

LAPLACE TRANSFORM IN FRAILTY MODELS

The survival function for the total population is the Laplace transform of the frailty distribution at $x = 0$, calculated for the cumulative baseline hazard $H(x)$

$$\bar{s}(x) = \int_0^\infty s(x|z)\pi(z)dz = \int_0^\infty e^{-H(x)z}\pi(z)dz = \mathbb{E}(e^{-H(x)z}) = \mathcal{L}_Z(H(x)).$$

An extremely useful tool in modelling unobserved heterogeneity:

$$\bar{s}(x) = \mathcal{L}_Z(H(x))$$

What are the distributions of X and Z ?

$X \sim$ Gompertz or Gompertz-Makeham,

$X \sim$ Gompertz or Gompertz-Makeham,

What about Z?

$X \sim$ Gompertz or Gompertz-Makeham,

What about Z?

Frailty distributions with closed-form Laplace transforms are the most convenient to work with

$X \sim$ Gompertz or Gompertz-Makeham,

What about Z?

Frailty distributions with closed-form Laplace transforms are the most convenient to work with

$Z \sim$ Gamma, Inverse Gaussian, Log-Normal, etc.

$X \sim$ Gompertz or Gompertz-Makeham,

What about Z?

Frailty distributions with closed-form Laplace transforms are the most convenient to work with

$Z \sim$ Gamma, Inverse Gaussian, Log-Normal, etc.

The gamma distribution has a flexible shape and converges to a normal distribution,

$X \sim$ Gompertz or Gompertz-Makeham,

What about Z?

Frailty distributions with closed-form Laplace transforms are the most convenient to work with

$Z \sim$ Gamma, Inverse Gaussian, Log-Normal, etc.

The gamma distribution has a flexible shape and converges to a normal distribution,

It has a simple Laplace transform.

Gamma frailty model

$$Z \sim \Gamma(k, \lambda) \text{ such that } k, \lambda > 0$$

$Z \sim \Gamma(k, \lambda)$ such that $k, \lambda > 0$

Density function of Z

$$\pi(0, z) = \frac{\lambda^k}{\Gamma(k)} z^{k-1} e^{-\lambda z}$$

$Z \sim \Gamma(k, \lambda)$ such that $k, \lambda > 0$

Density function of Z

$$\pi(0, z) = \frac{\lambda^k}{\Gamma(k)} z^{k-1} e^{-\lambda z}$$

Laplace transform of Z and survival function of the population

$$\mathcal{L}_Z(H(x)) = \bar{s}(x) = \left(\frac{1}{1 + \frac{1}{k} H(x)} \right)^k$$

Average frailty of the population

If $\bar{Z}(0) = 1$ and $k = \lambda = 1/\gamma$, where γ can be interpreted as the squared root of the coefficient of variation of Z at any age.

$$\bar{Z}(x) = \frac{1}{1 + \gamma H(x)} = [\bar{s}(x)]^\gamma$$

Mortality hazard for populations

Mortality hazard for populations

$$\bar{\mu}(x) = \mu(x)\bar{Z}(x)$$

Mortality hazard for populations

$$\bar{\mu}(x) = \mu(x)\bar{Z}(x)$$

Using the Laplace transform:

Mortality hazard for populations

$$\bar{\mu}(x) = \mu(x)\bar{Z}(x)$$

Using the Laplace transform:

$$\bar{\mu}(x) = \frac{\mu(x)}{1 + \gamma H(x)}$$

Mortality hazard for populations

$$\bar{\mu}(x) = \mu(x)\bar{Z}(x)$$

Using the Laplace transform:

$$\bar{\mu}(x) = \frac{\mu(x)}{1 + \gamma H(x)}$$

$$\bar{\mu}(x) = \mu(x)\bar{S}(x)^\gamma$$

Mortality hazard for populations

$$\bar{\mu}(x) = \mu(x)\bar{Z}(x)$$

Using the Laplace transform:

$$\bar{\mu}(x) = \frac{\mu(x)}{1 + \gamma H(x)}$$

$$\bar{\mu}(x) = \mu(x)\bar{S}(x)^\gamma$$

Thus γ tell us the amount of frailty in a population.

Gamma-Gompertz

$$X \sim \text{Gompertz}(a, b)$$

Individual hazard

$$\mu(x) = ae^{bx}$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

$$X \sim \text{Gompertz}(a, b)$$

Individual hazard

$$\mu(x) = ae^{bx}$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

Population hazard

$$\bar{\mu}(x) = \frac{ae^{bx}}{1 + (\frac{a\gamma}{b})(e^{bx} - 1)}.$$

$$X \sim \text{Gompertz}(a, b)$$

Individual hazard

$$\mu(x) = ae^{bx}$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

Population hazard

$$\bar{\mu}(x) = \frac{ae^{bx}}{1 + (\frac{a\gamma}{b})(e^{bx} - 1)}.$$

a : initial level of mortality,

b : individual rate of ageing,

γ : amount of frailty in the population.

$$X \sim \text{Gompertz}(a, b)$$

Individual hazard

$$\mu(x) = ae^{bx}$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

Population hazard

$$\bar{\mu}(x) = \frac{ae^{bx}}{1 + (\frac{a\gamma}{b})(e^{bx} - 1)}.$$

a : initial level of mortality,

b : individual rate of ageing,

γ : amount of frailty in the population.

Life expectancy: see Castellares, Patricio and Lemonte (2020)

Gamma-Gompertz via the Mode

$$X \sim \text{Gompertz}(b, M)$$

Individual hazard

$$\mu(x) = be^{b(x-M)}$$

$$H(x) = e^{-bM}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

$$X \sim \text{Gompertz}(b, M)$$

Individual hazard

$$\mu(x) = be^{b(x-M)}$$

$$H(x) = e^{-bM}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

Population hazard

$$\bar{\mu}(x) = \frac{be^{b(x-M)}}{1 + \gamma e^{-bM}(e^{bx} - 1)}. \quad (1)$$

$$X \sim \text{Gompertz}(b, M)$$

Individual hazard

$$\mu(x) = be^{b(x-M)}$$

$$H(x) = e^{-bM}(e^{bx} - 1)$$

$$\text{If } Z \sim \text{Gamma}(\gamma)$$

Population hazard

$$\bar{\mu}(x) = \frac{be^{b(x-M)}}{1 + \gamma e^{-bM}(e^{bx} - 1)}. \quad (1)$$

b : individual rate of ageing,

M : modal age at death,

γ : amount of frailty in the population.

Gamma-Gompertz-Makeham

$X \sim \text{Gompertz} - \text{Makeham}(a, b, c)$

Individual hazard

$$\mu(x) = ae^{bx} + c$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

If $Z \sim \text{Gamma}(\gamma)$

$X \sim \text{Gompertz} - \text{Makeham}(a, b, c)$

Individual hazard

$$\mu(x) = ae^{bx} + c$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

If $Z \sim \text{Gamma}(\gamma)$

Population hazard

$$\bar{\mu}(x) = \frac{ae^{bx} + c}{1 + (\frac{a\gamma}{b})(e^{bx} - 1)}.$$

$X \sim \text{Gompertz} - \text{Makeham}(a, b, c)$

Individual hazard

$$\mu(x) = ae^{bx} + c$$

$$H(x) = \frac{a}{b}(e^{bx} - 1)$$

If $Z \sim \text{Gamma}(\gamma)$

Population hazard

$$\bar{\mu}(x) = \frac{ae^{bx} + c}{1 + (\frac{a\gamma}{b})(e^{bx} - 1)}.$$

a : initial level of mortality,

b : individual rate of ageing, c : external mortality,

γ : amount of frailty in the population.

Fitting Gamma-Gompertz

Maximize likelihood

$$L(\theta, \beta, \gamma) = \left(\prod_{i=1}^n \frac{\mu(x_i; \theta) e^{y_i \beta}}{1 + \gamma H(x_i; \theta) e^{y_i \beta}} \right)^{\delta_i} (1 + \gamma H(x_i; \theta) e^{y_i \beta})^{-\gamma}$$

FITTING GAMMA-GOMPERTZ - INDIVIDUAL DATA

Maximize likelihood

$$L(\theta, \beta, \gamma) = \left(\prod_{i=1}^n \frac{\mu(x_i; \theta) e^{y_i \beta}}{1 + \gamma H(x_i; \theta) e^{y_i \beta}} \right)^{\delta_i} (1 + \gamma H(x_i; \theta) e^{y_i \beta})^{-\gamma}$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`

Maximize likelihood

$$L(\theta, \beta, \gamma) = \left(\prod_{i=1}^n \frac{\mu(x_i; \theta) e^{y_i \beta}}{1 + \gamma H(x_i; \theta) e^{y_i \beta}} \right)^{\delta_i} (1 + \gamma H(x_i; \theta) e^{y_i \beta})^{-\gamma}$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`
- R-Package: `parfm`

Maximize likelihood

$$L(\theta, \beta, \gamma) = \left(\prod_{i=1}^n \frac{\mu(x_i; \theta) e^{y_i \beta}}{1 + \gamma H(x_i; \theta) e^{y_i \beta}} \right)^{\delta_i} (1 + \gamma H(x_i; \theta) e^{y_i \beta})^{-\gamma}$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`
- R-Package: `parfm`
 - include covariates

Maximize likelihood

$$L(\theta, \beta, \gamma) = \left(\prod_{i=1}^n \frac{\mu(x_i; \theta) e^{y_i \beta}}{1 + \gamma H(x_i; \theta) e^{y_i \beta}} \right)^{\delta_i} (1 + \gamma H(x_i; \theta) e^{y_i \beta})^{-\gamma}$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`
- R-Package: `parfm`
 - include covariates
 - other frailty distributions: log-Normal, Beta, etc.

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

E_x : Exposures

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

E_x : Exposures

Maximize Poisson log-likelihood

$$\ln L(\theta, \gamma) = \sum_x (D(x) \ln \bar{\mu}(x; \theta, \gamma) - E(x) \bar{\mu}(x; \theta, \gamma))$$

where $\theta = a, b, M$.

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

E_x : Exposures

Maximize Poisson log-likelihood

$$\ln L(\theta, \gamma) = \sum_x (D(x) \ln \bar{\mu}(x; \theta, \gamma) - E(x) \bar{\mu}(x; \theta, \gamma))$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

E_x : Exposures

Maximize Poisson log-likelihood

$$\ln L(\theta, \gamma) = \sum_x (D(x) \ln \bar{\mu}(x; \theta, \gamma) - E(x) \bar{\mu}(x; \theta, \gamma))$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`
- R-Package: `MortalityLaws`

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

E_x : Exposures

Maximize Poisson log-likelihood

$$\ln L(\theta, \gamma) = \sum_x (D(x) \ln \bar{\mu}(x; \theta, \gamma) - E(x) \bar{\mu}(x; \theta, \gamma))$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`
- R-Package: `MortalityLaws`
 - based on GLM models

FITTING GAMMA-GOMPERTZ - AGGREGATED DATA

When having aggregated data (i.e. death counts and exposures from the HMD)

$D_x \sim \text{Poisson}$: Death counts

E_x : Exposures

Maximize Poisson log-likelihood

$$\ln L(\theta, \gamma) = \sum_x (D(x) \ln \bar{\mu}(x; \theta, \gamma) - E(x) \bar{\mu}(x; \theta, \gamma))$$

where $\theta = a, b, M$.

In R:

- manually, using `optim()`
- R-Package: `MortalityLaws`
 - based on GLM models
 - other distributions: Kannisto, Gompertz, Weibull, etc.

My GitHub: `github.com/jssalvrz`

Directory: `EDSD/UnobsHeter`

- `GGFun.R`: Functions to fit the Gamma-Gompertz model (with and without the Mode) using aggregate data.
- `Dat.RData`: Data from the Human Mortality Database.
- `UnobserHeterFit.R`: Run the analysis.

When and why to use frailty model?

WHEN AND WHY TO USE FRAILTY MODELS?

- Parameters provide insights about individual hazards,

WHEN AND WHY TO USE FRAILTY MODELS?

- Parameters provide insights about individual hazards,
 - meaningful demographic interpretation: a, b, c, M, γ

WHEN AND WHY TO USE FRAILTY MODELS?

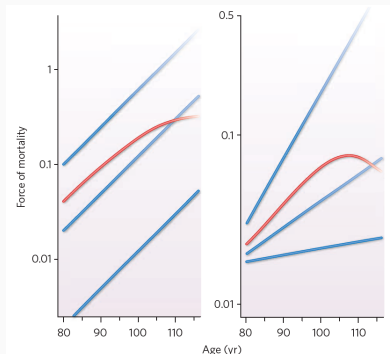
- Parameters provide insights about individual hazards,
 - meaningful demographic interpretation: a, b, c, M, γ
 - mortality plateau, $\lim_{x \rightarrow \infty} \bar{\mu}(x) = \frac{b}{\gamma}$

WHEN AND WHY TO USE FRAILTY MODELS?

- Parameters provide insights about individual hazards,
 - meaningful demographic interpretation: a, b, c, M, γ
 - mortality plateau, $\lim_{x \rightarrow \infty} \bar{\mu}(x) = \frac{b}{\gamma}$
 - b-hypothesis: all individuals have the same individual rate of ageing (Vaupel, 2010).

WHEN AND WHY TO USE FRAILTY MODELS?

- Parameters provide insights about individual hazards,
 - meaningful demographic interpretation: a, b, c, M, γ
 - mortality plateau, $\lim_{x \rightarrow \infty} \bar{\mu}(x) = \frac{b}{\gamma}$
 - b-hypothesis: all individuals have the same individual rate of ageing (Vaupel, 2010).



Vaupel (2010)

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan,2018).

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan,2018).

Extension of survival analysis

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),
- observed covariates (fixed effects).

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),
- observed covariates (fixed effects).
 - **Be extremely careful when adding covariates!!** (Wrigley-Field, 2020)

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),
- observed covariates (fixed effects).
 - **Be extremely careful when adding covariates!!** (Wrigley-Field, 2020)

Other applications in genetics, biostatistics, biodemography, evolutionary demography

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),
- observed covariates (fixed effects).
 - **Be extremely careful when adding covariates!!** (Wrigley-Field, 2020)

Other applications in genetics, biostatistics, biodemography, evolutionary demography

- shared frailty: effect of genetics in twins (Begun and Yashin, 2017; Wienke, 2001) and long-lived families,

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),
- observed covariates (fixed effects).
 - **Be extremely careful when adding covariates!!** (Wrigley-Field, 2020)

Other applications in genetics, biostatistics, biodemography, evolutionary demography

- shared frailty: effect of genetics in twins (Begun and Yashin, 2017; Wienke, 2001) and long-lived families,
- other species: birds (Rebke, 2010), *Hydra* (Schaible, 2015), etc.

WHEN AND WHY TO USE FRAILTY MODELS?

- Model "old age" mortality,
 - mortality deceleration, logistic curve (Perks, 1932; Beard 1952; Horiuchi and Wilmoth, 1998),
 - Gamma-Gompertz, better fit at high advanced ages (Feehan, 2018).

Extension of survival analysis

- proportional hazards (Wienke, 2010),
- observed covariates (fixed effects).
 - **Be extremely careful when adding covariates!!** (Wrigley-Field, 2020)

Other applications in genetics, biostatistics, biodemography, evolutionary demography

- shared frailty: effect of genetics in twins (Begun and Yashin, 2017; Wienke, 2001) and long-lived families,
- other species: birds (Rebke, 2010), *Hydra* (Schaible, 2015), etc.
- stochastic vitality: changes in frailty over age (Manton and Yashin, 1997)

- Main idea: capture **unobserved heterogeneity** with a random variable called **frailty**

- Main idea: capture **unobserved heterogeneity** with a random variable called **frailty**
- Individuals have different frailties: frailer individuals tend to exit earlier (systematic selection of robust individuals, which biases what is observed).

- Main idea: capture **unobserved heterogeneity** with a random variable called **frailty**
- Individuals have different frailties: frailer individuals tend to exit earlier (systematic selection of robust individuals, which biases what is observed).
- Individual hazard is overestimated (i.e. survival function is underestimated) if model does not take into account frailty.

- Main idea: capture **unobserved heterogeneity** with a random variable called **frailty**
- Individuals have different frailties: frailer individuals tend to exit earlier (systematic selection of robust individuals, which biases what is observed).
- Individual hazard is overestimated (i.e. survival function is underestimated) if model does not take into account frailty.
- Resulting (observed) model is called **mixture model** as study population is a **mixture of individuals** with different frailties.

- Main idea: capture **unobserved heterogeneity** with a random variable called **frailty**
- Individuals have different frailties: frailer individuals tend to exit earlier (systematic selection of robust individuals, which biases what is observed).
- Individual hazard is overestimated (i.e. survival function is underestimated) if model does not take into account frailty.
- Resulting (observed) model is called **mixture model** as study population is a **mixture of individuals** with different frailties.
- Variance of frailty determines the degree of unobserved heterogeneity.

Assumptions and unknowns

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),
- How to model something that is unobserved by definition?

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),
- How to model something that is unobserved by definition?
- Frailty is fixed over the the whole ages, does it change?

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),
- How to model something that is unobserved by definition?
- Frailty is fixed over the the whole ages, does it change?
- Dealing with data:

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),
- How to model something that is unobserved by definition?
- Frailty is fixed over the the whole ages, does it change?
- Dealing with data:
 - Only good data quality,

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),
- How to model something that is unobserved by definition?
- Frailty is fixed over the the whole ages, does it change?
- Dealing with data:
 - Only good data quality,
 - At what age to start the fit? Age 70, 75, 83, 84.235, $M + 1.2$?

Assumptions and unknowns

- Proportional hazard setting, it is multiplicative to Z ,
- Many options for choosing the frailty distribution (Gamma, Log-Normal, etc.),
- How to model something that is unobserved by definition?
- Frailty is fixed over the the whole ages, does it change?
- Dealing with data:
 - Only good data quality,
 - At what age to start the fit? Age 70, 75, 83, 84.235, $M + 1.2$?
 - Model "old-age" mortality, where does "old-age" start?

FURTHER READING

- Vaupel, Manton and Stallard. *The Impact of Heterogeneity in Individual Frailty on the Dynamics of Mortality*. Demography, 1979.
- Vaupel and Yashin. *Heterogeneity's ruses: Some surprising effects of selection on population dynamics*. American Statistician, 1985.
- Vaupel and Missov. *Unobserved population heterogeneity: A review of formal relationships*. Demographic Research, 2014.
- Steinsaltz and Wachter. *Understanding mortality rate deceleration and heterogeneity*. Mathematical Population Studies, 2006.
- Horiuchi and Wilmoth. *Deceleration in the age pattern of mortality at older ages*. Demography, 1998.
- Wienke. *Frailty models in survival analysis*, 2016.
- Castellares, Patricio, and Lemonte. *On gamma-Gompertz life expectancy*. Statistics and Probability Letters, 2020.

Questions?