

# Causal effect estimation in the presence of misclassified binary mediators

**Kimberly A. H. Webb** and Martin T. Wells

Women in Statistics and Data Science

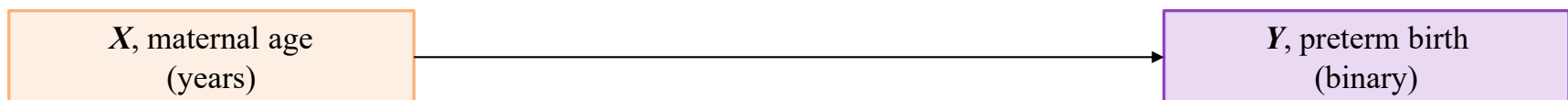
October 18, 2024

# Mediation analysis

- **Mediation analysis** quantifies the effect of an **exposure (X)** on an **outcome (Y)**, mediated by some **intermediate (M)**.

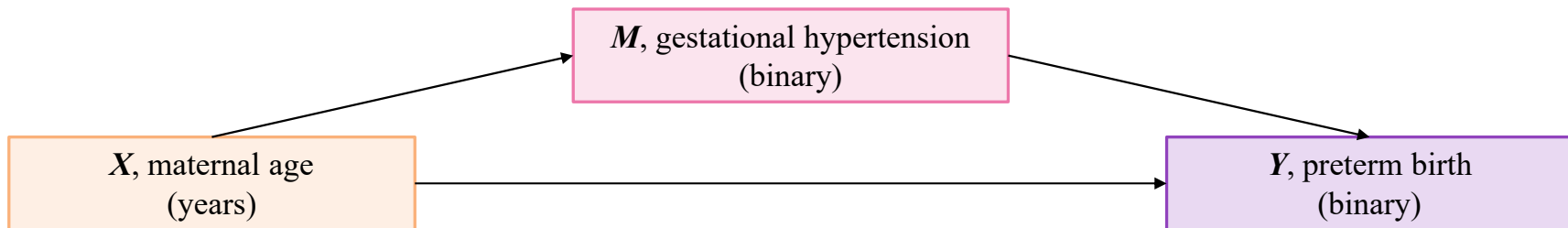
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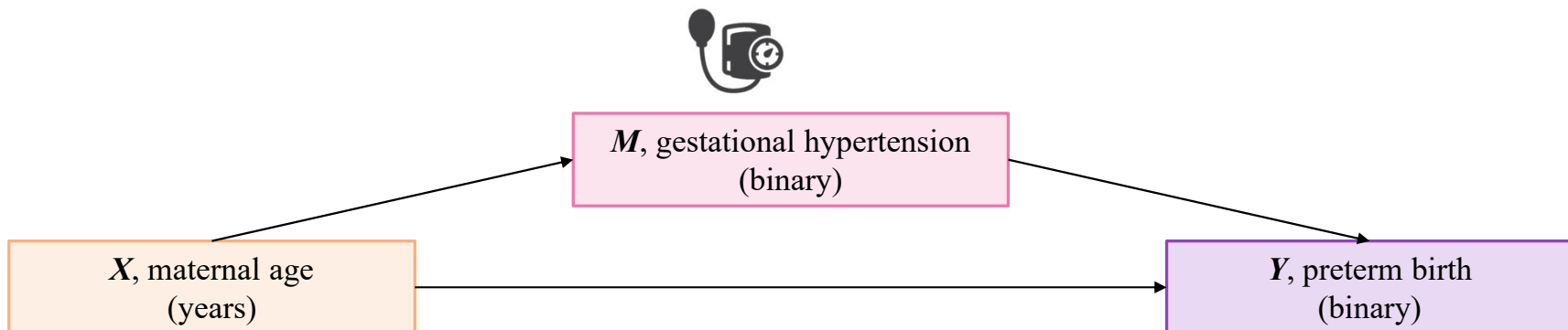
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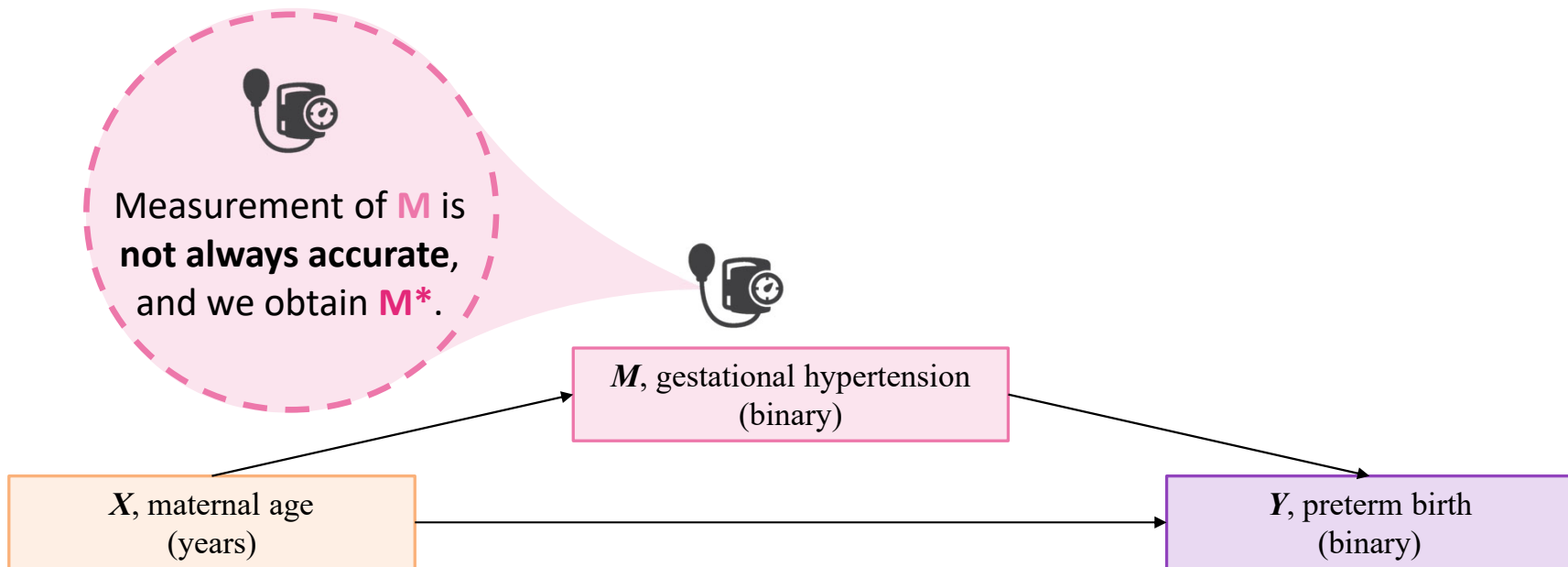
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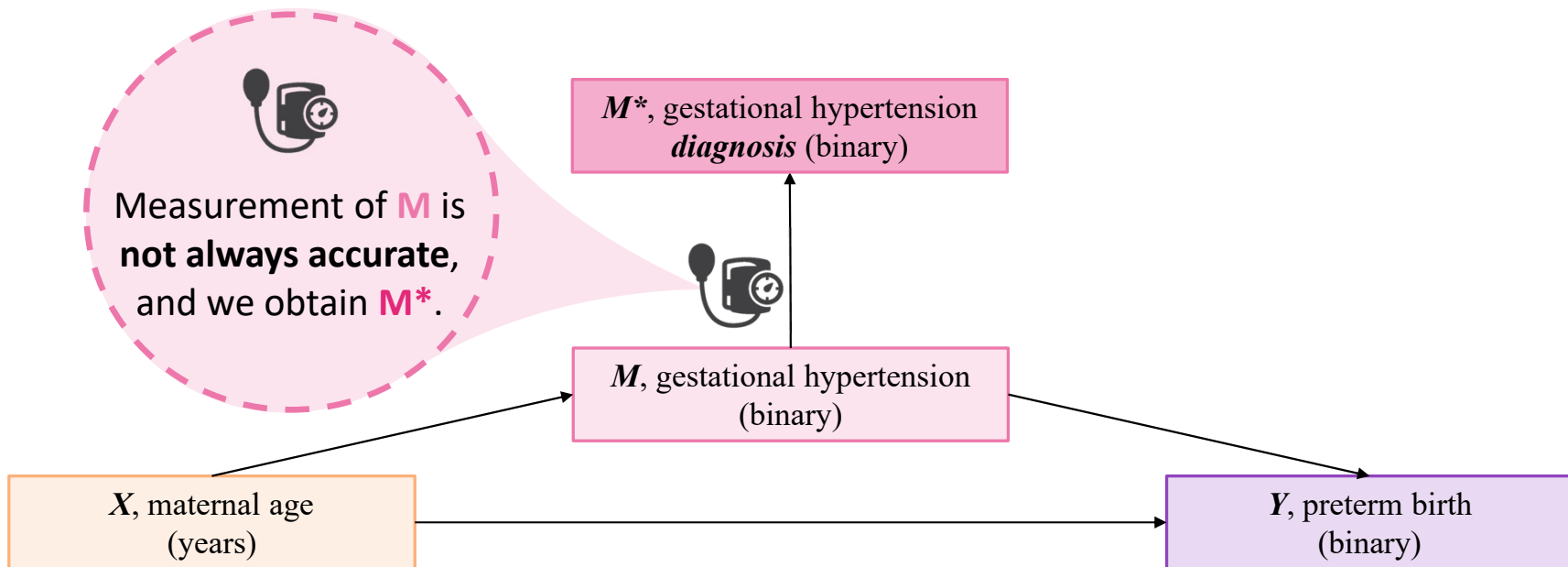
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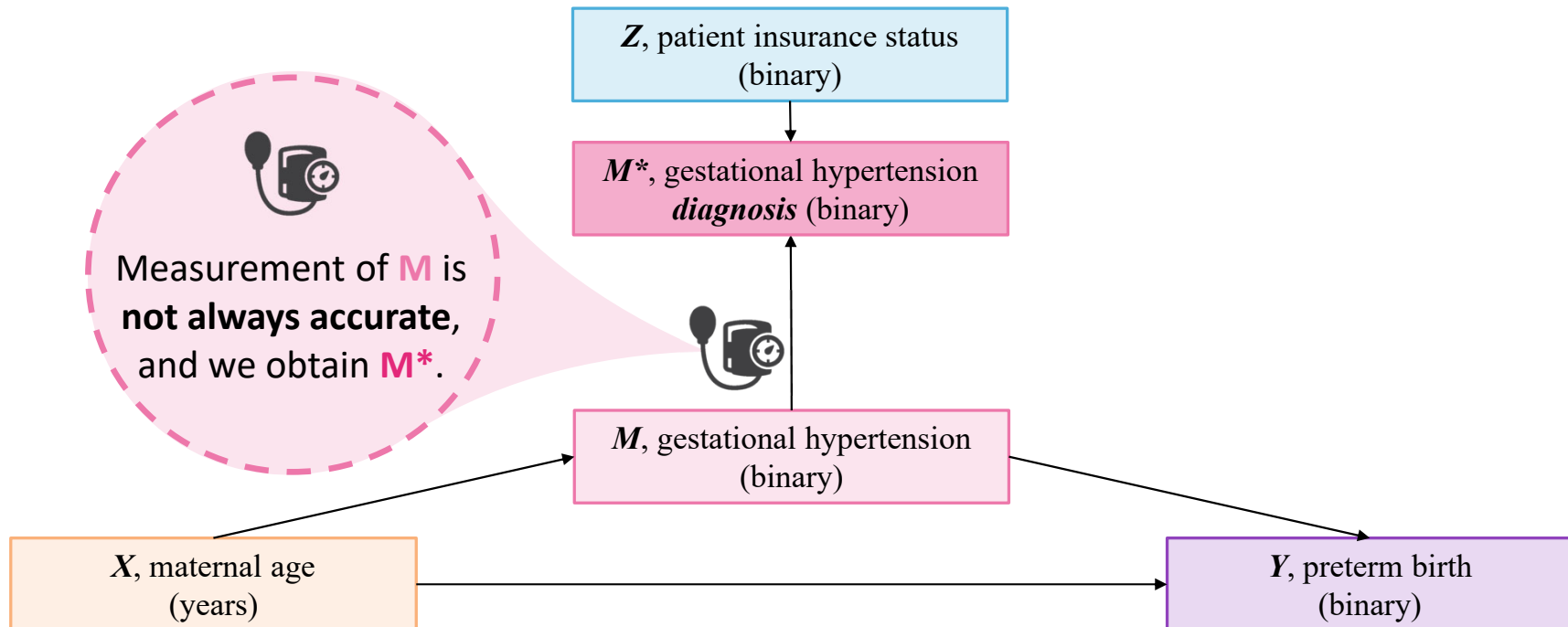
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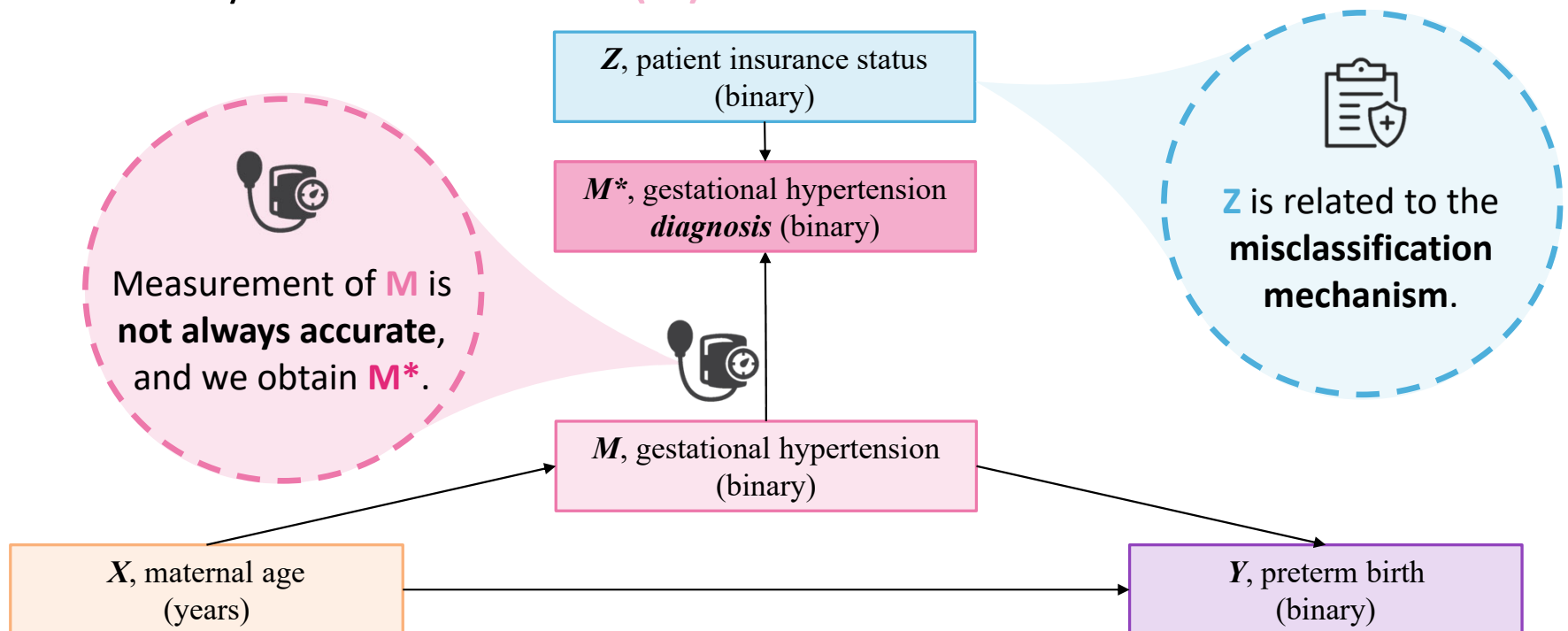
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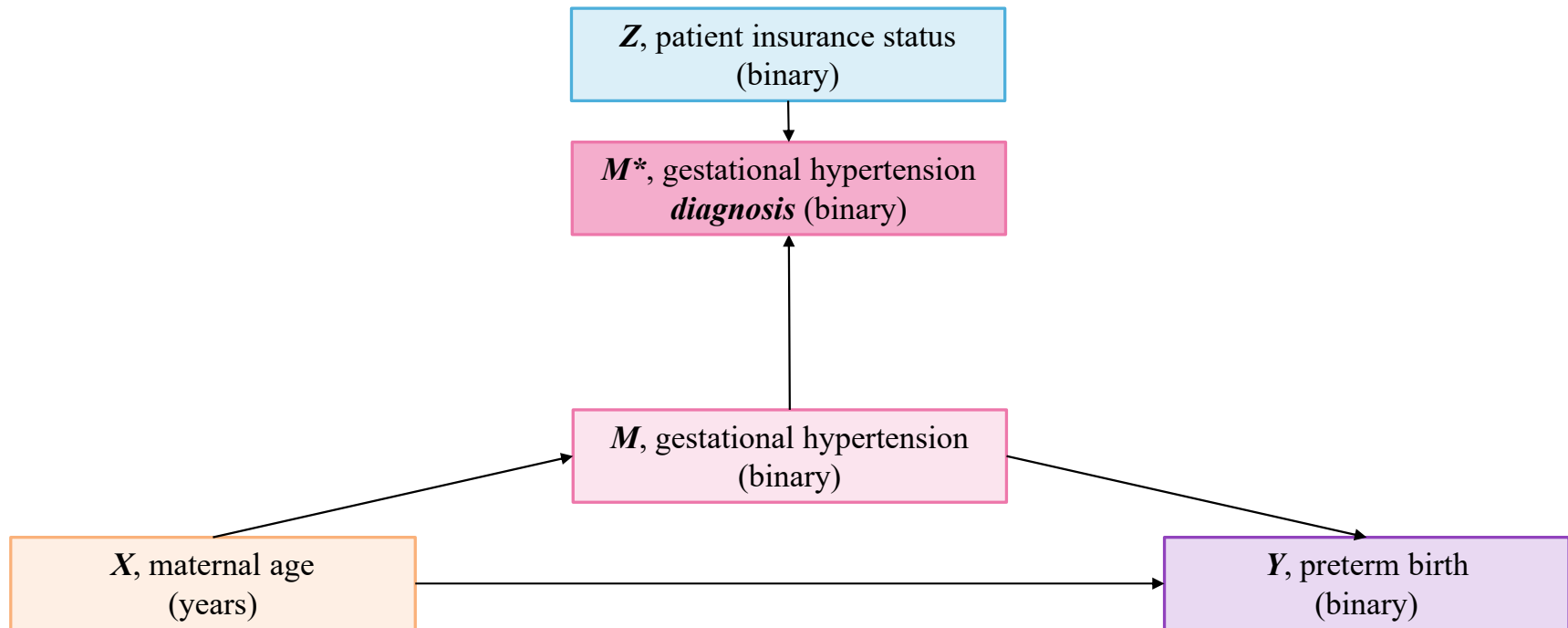


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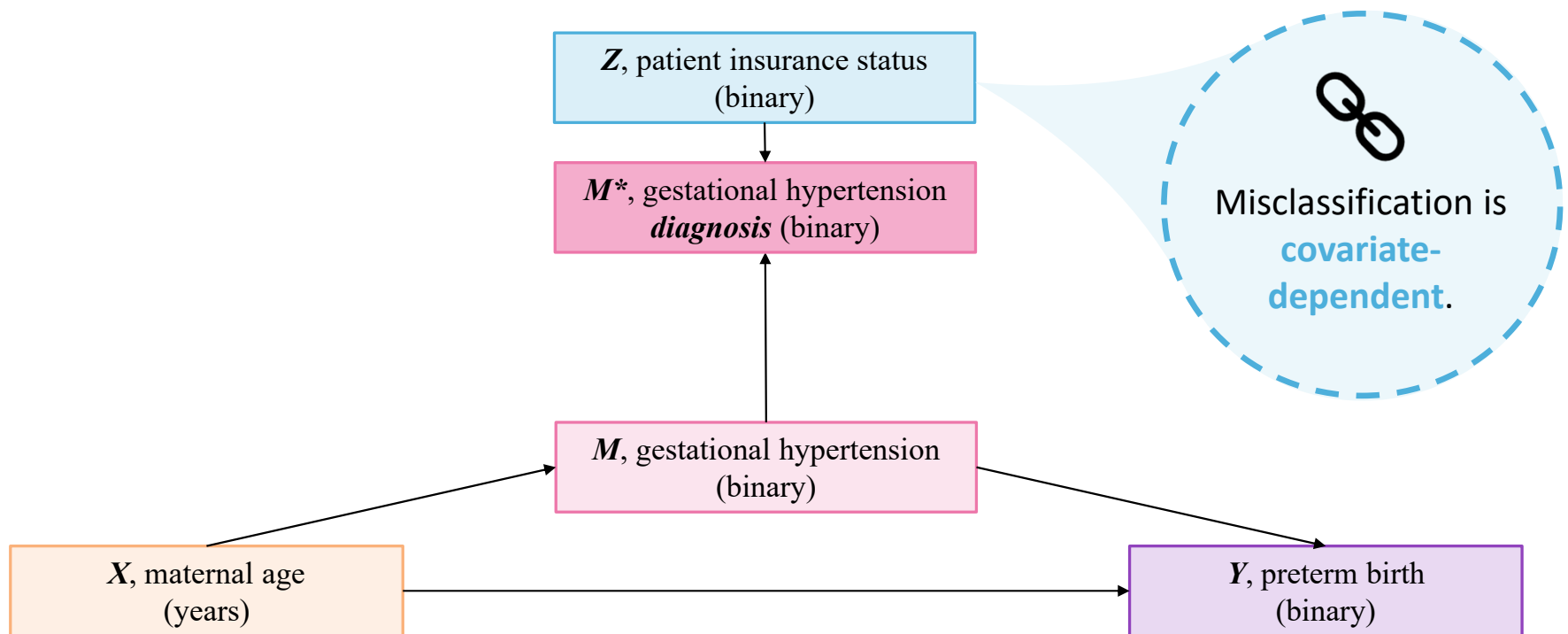
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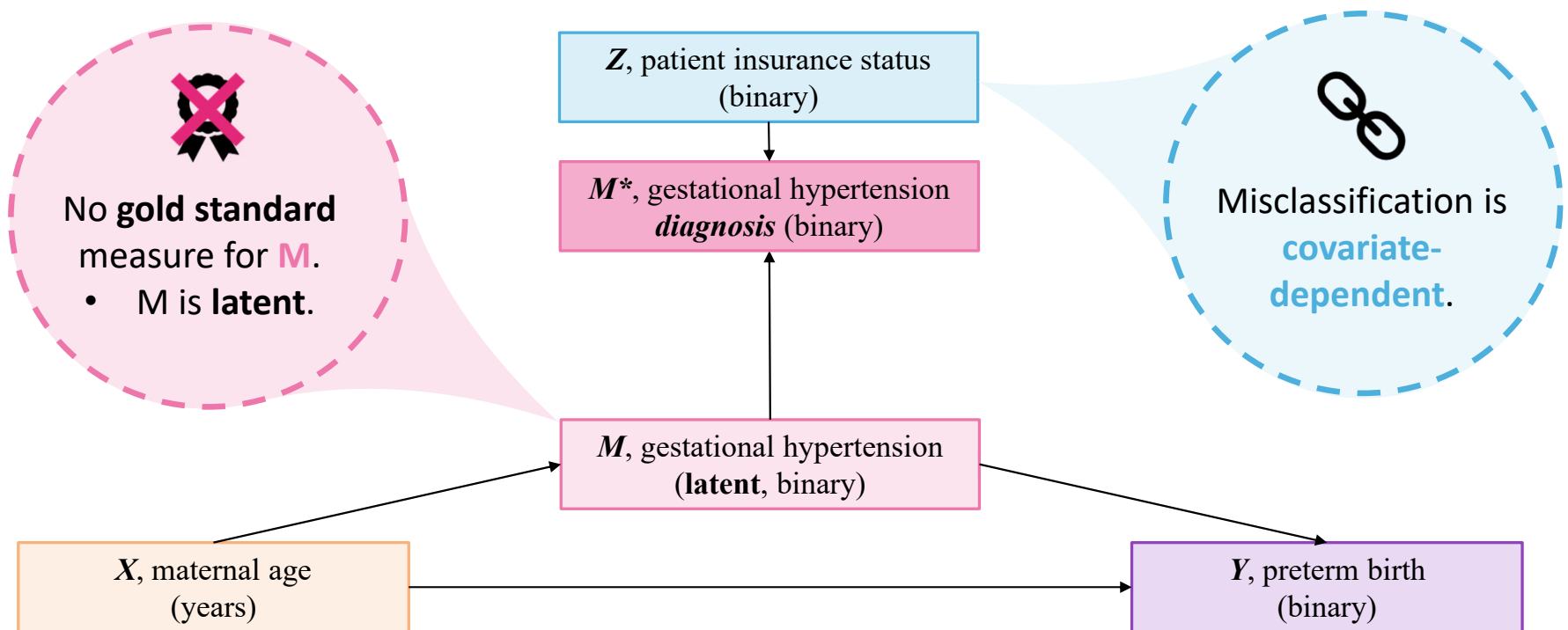
# Challenges



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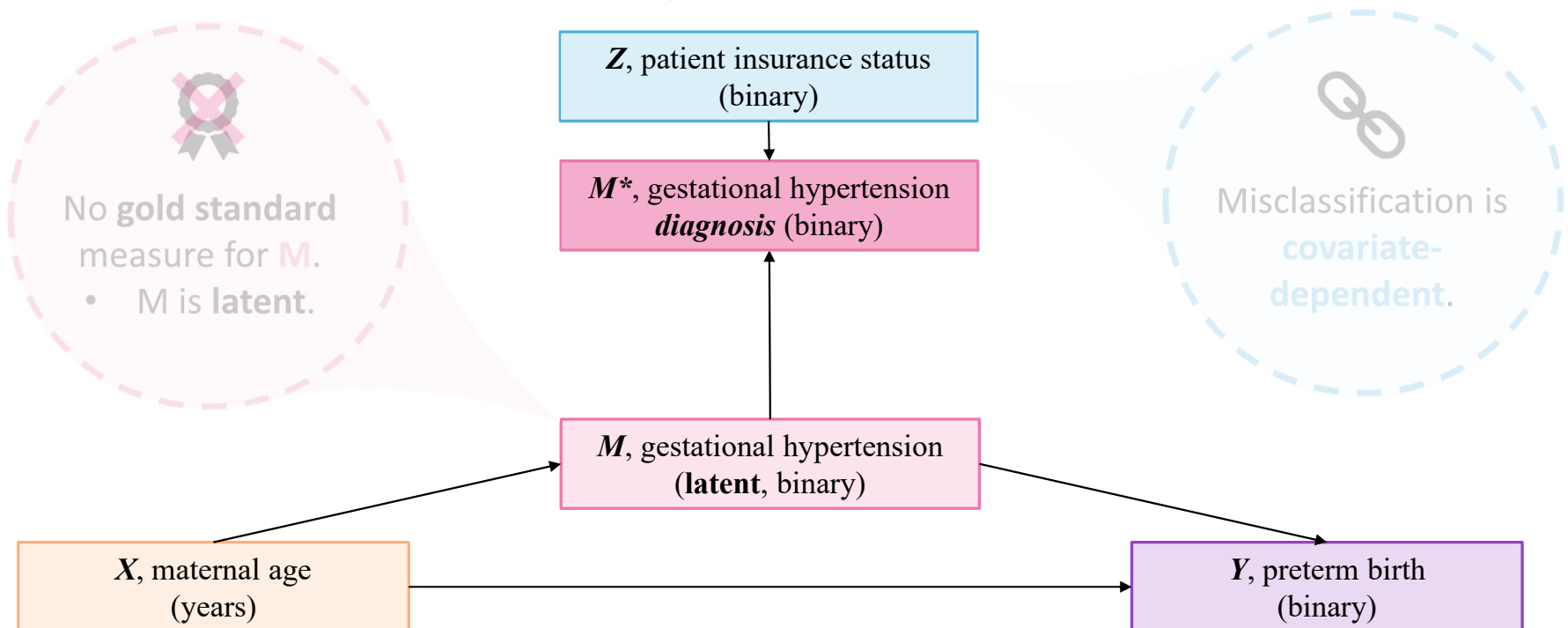
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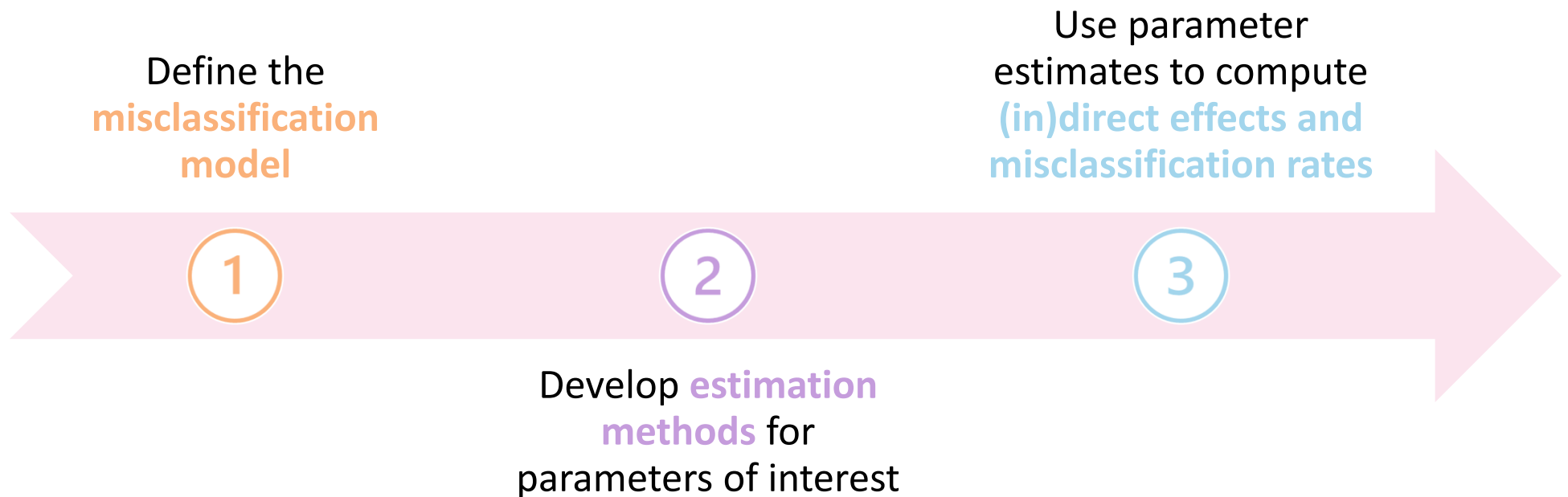
# Challenges

Ignoring misclassification in  $M^*$

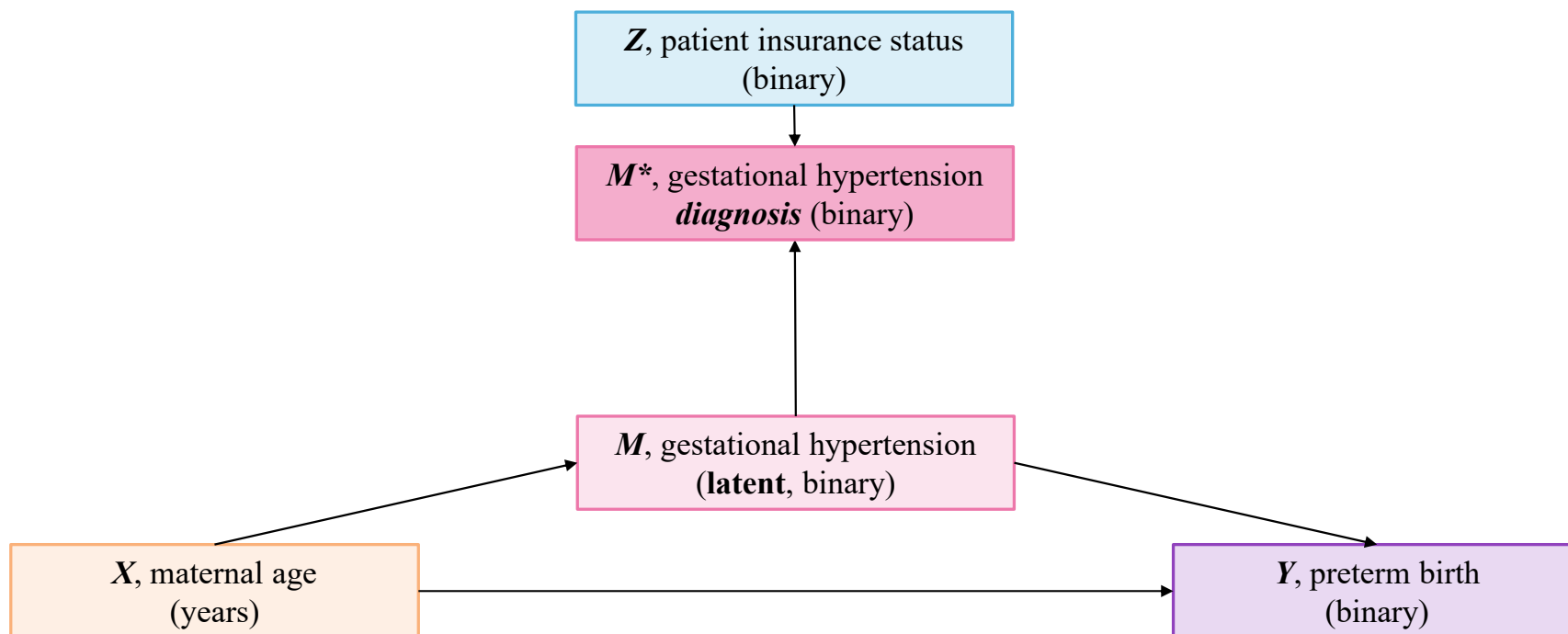
Bias in parameter and effect estimates



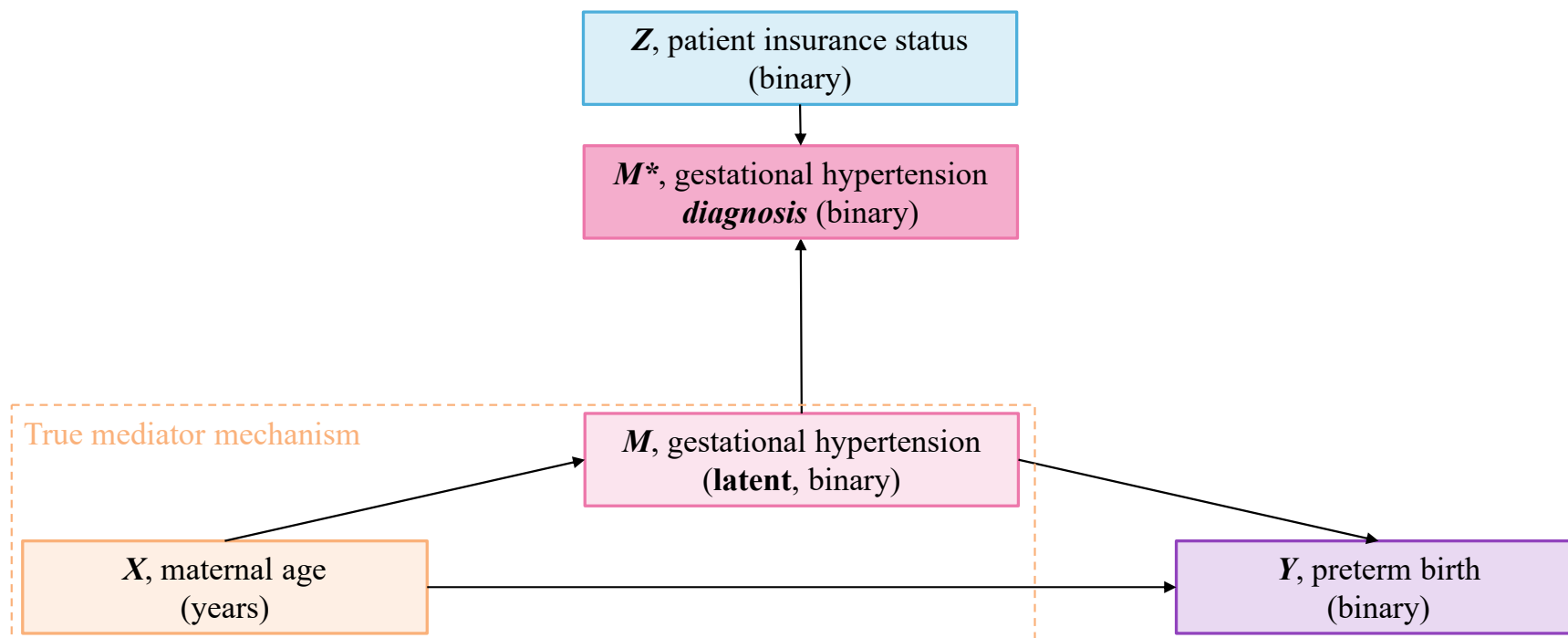
# Analysis Plan



# Misclassification model

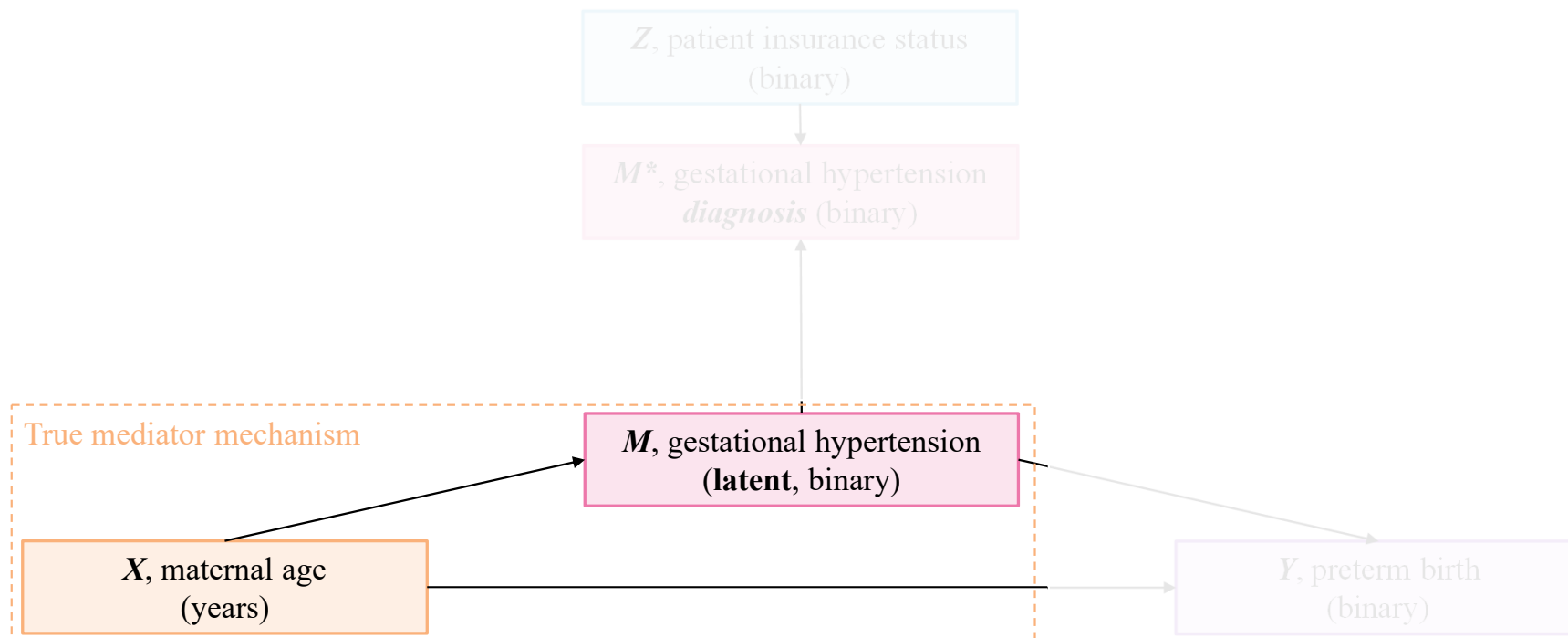


# Misclassification model



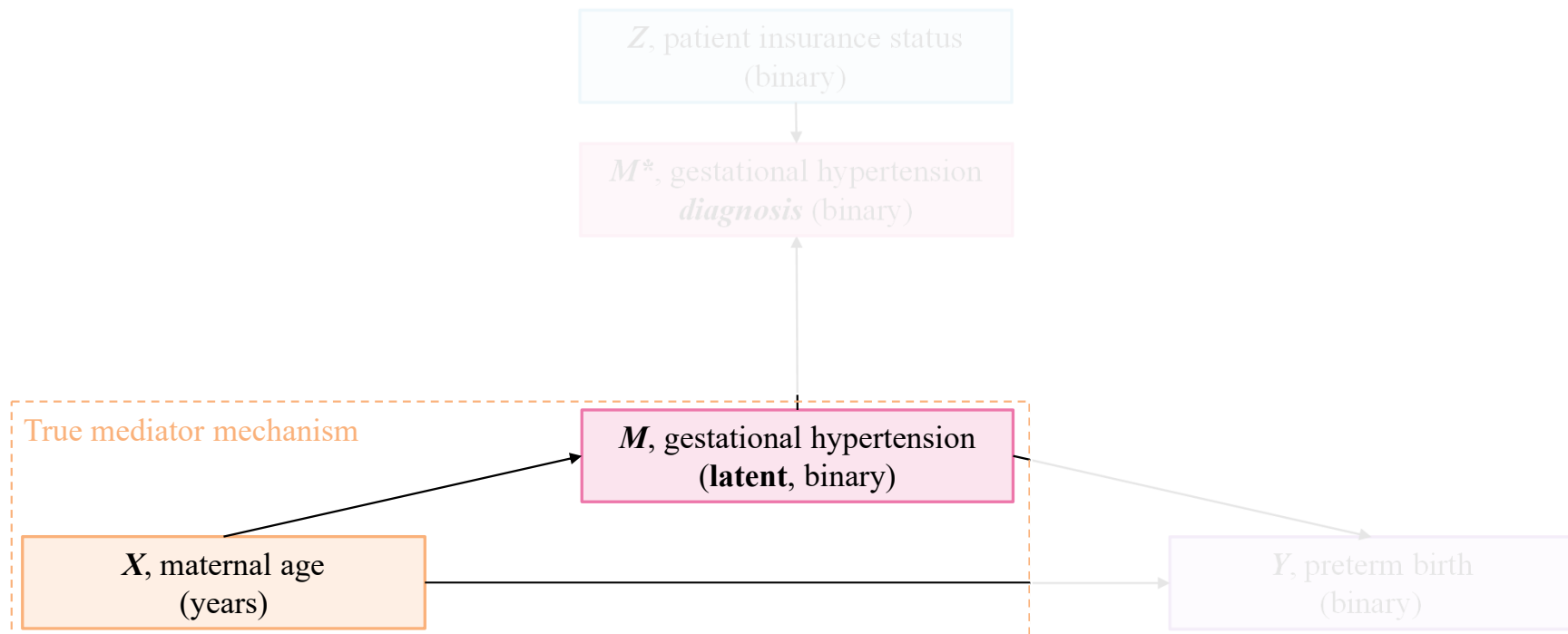


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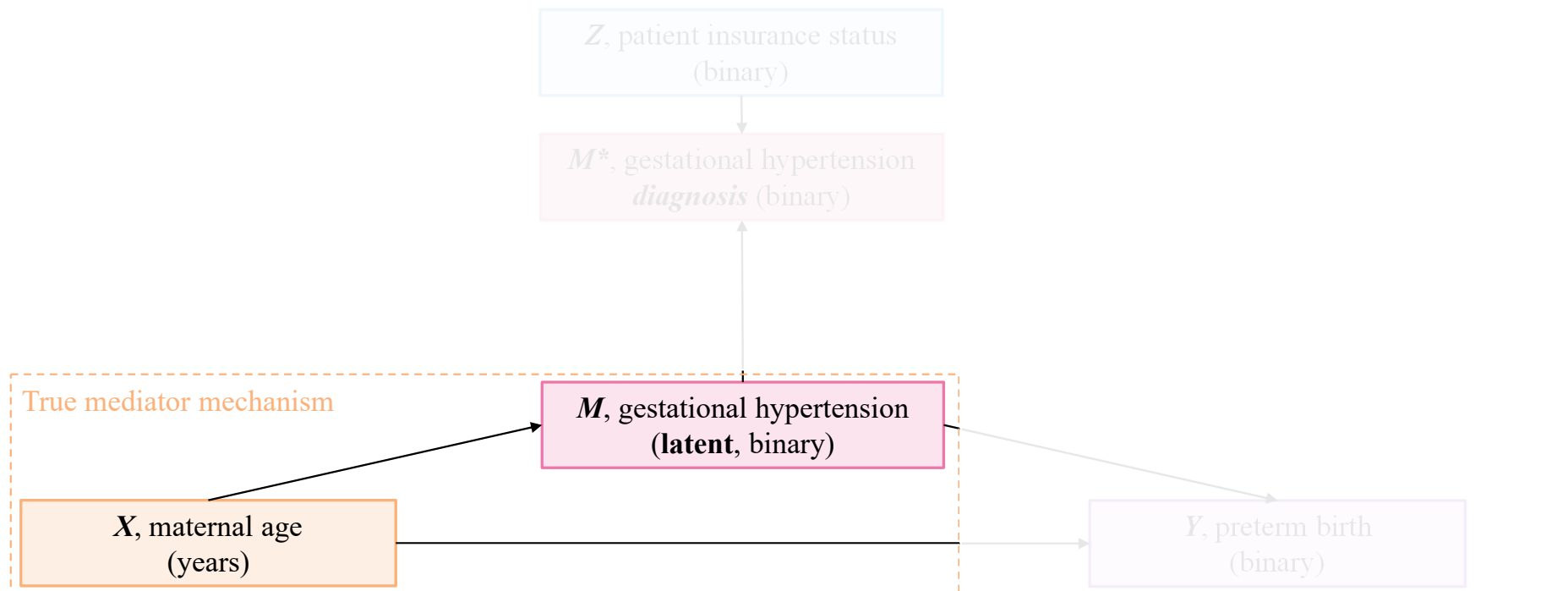


**True mediator mechanism:**  $\text{logit}\{P(M = 1|X, C; \beta)\} = \beta_0 + \beta_X X + \beta_C C$

1

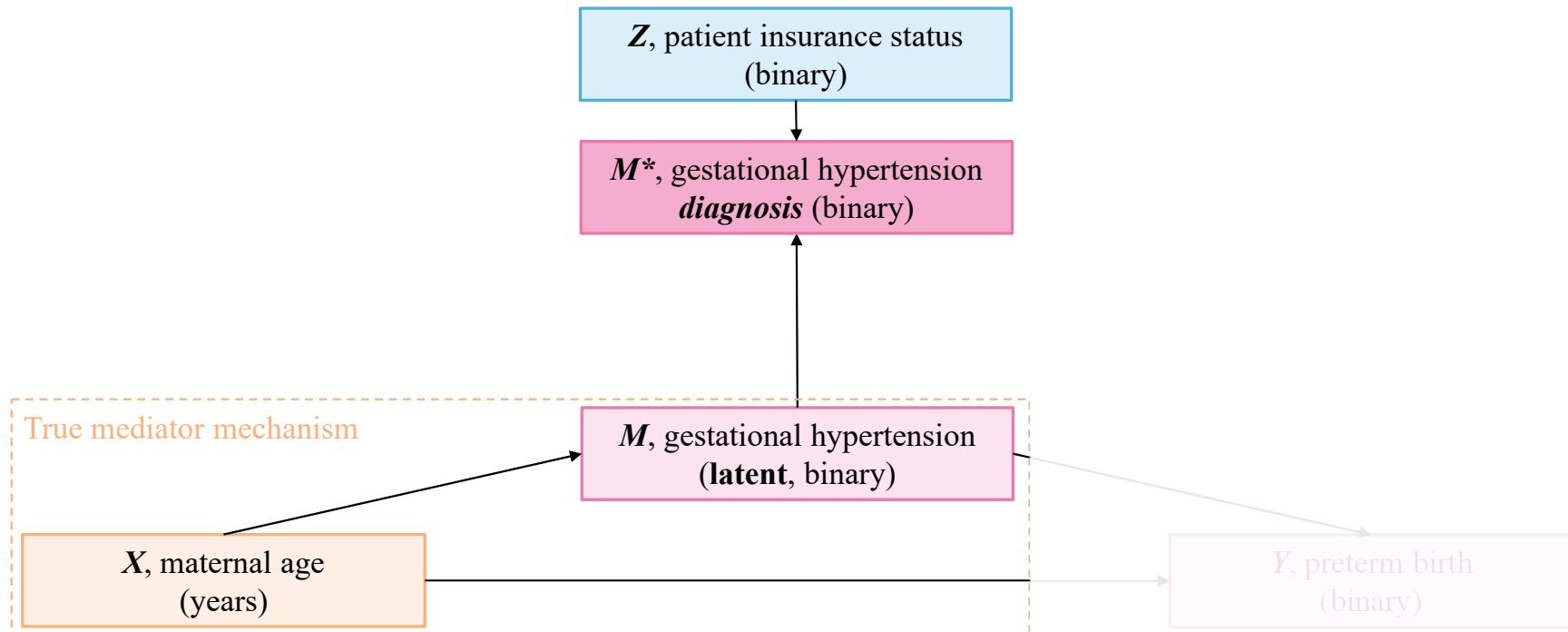


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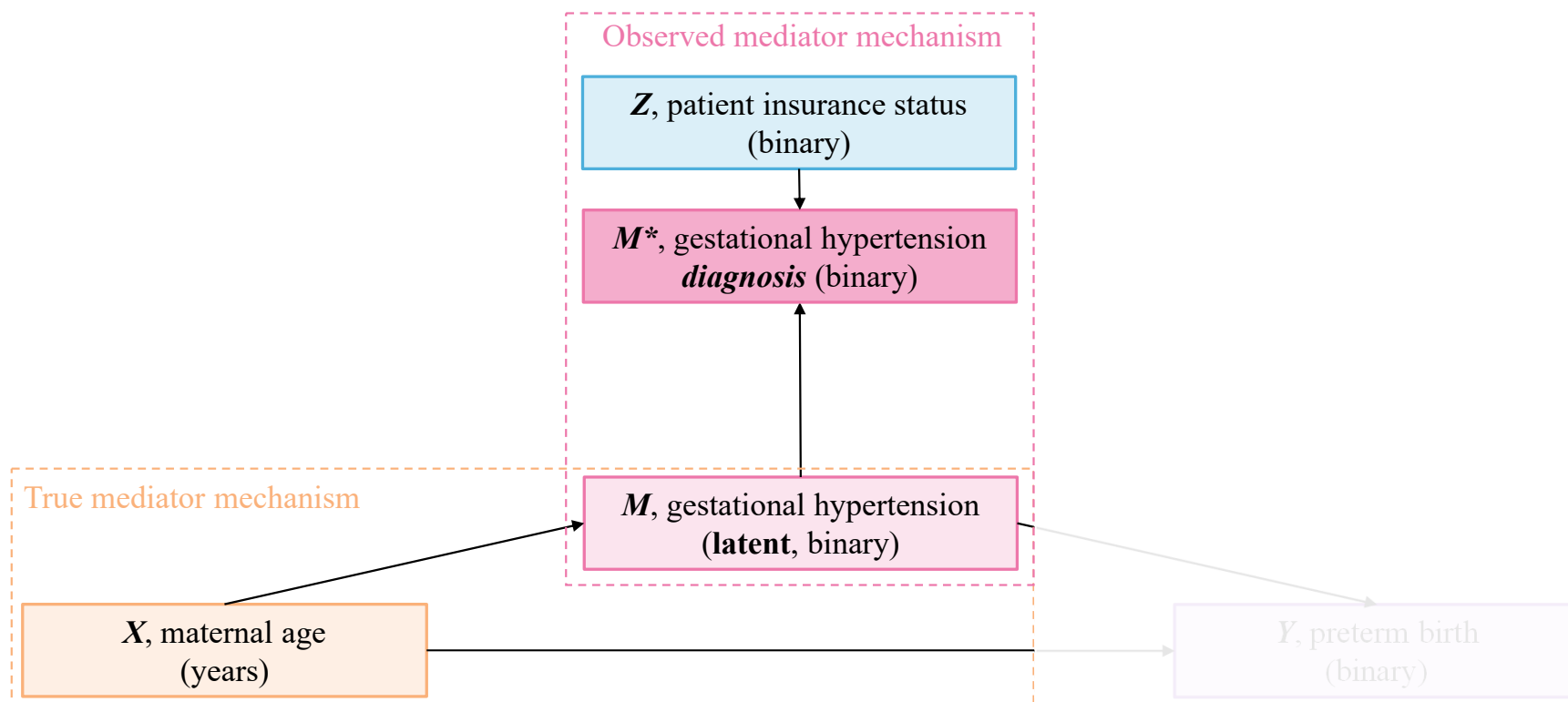
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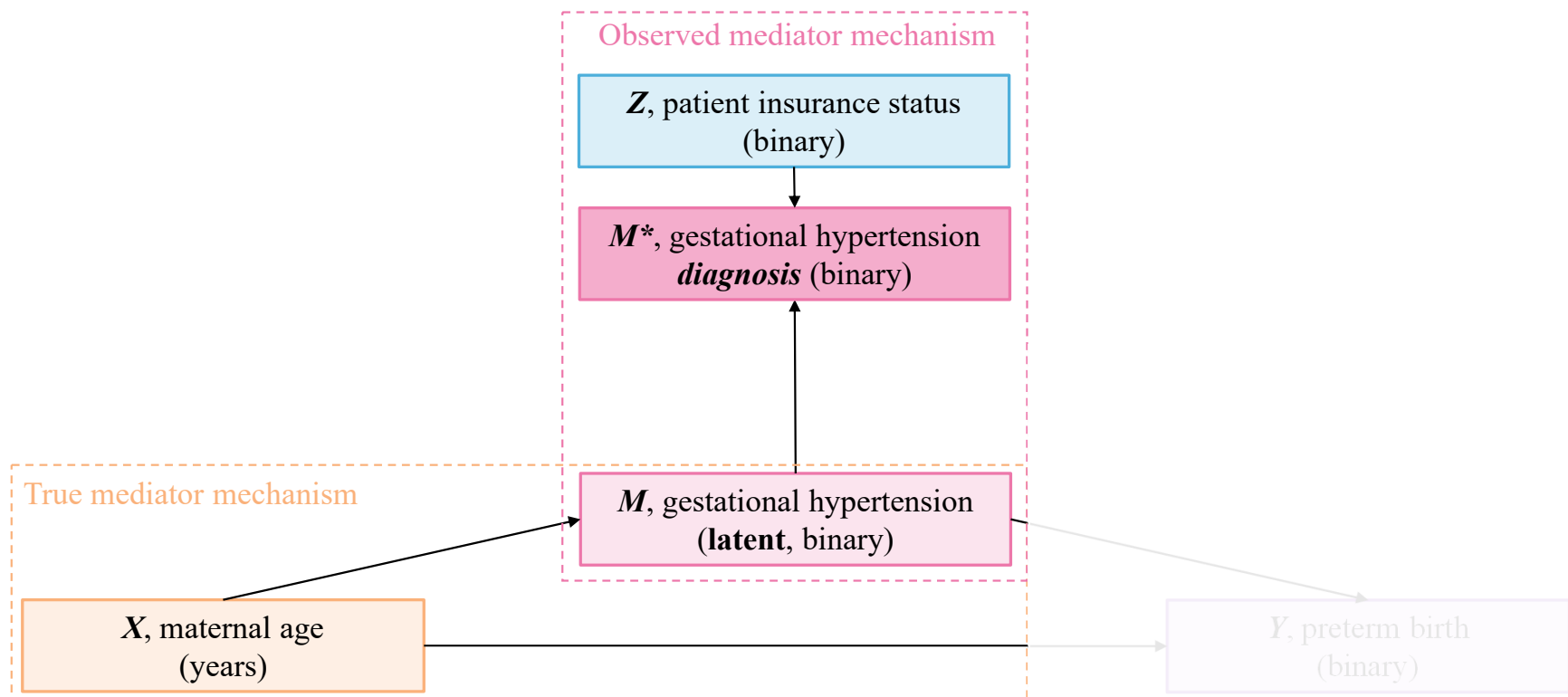
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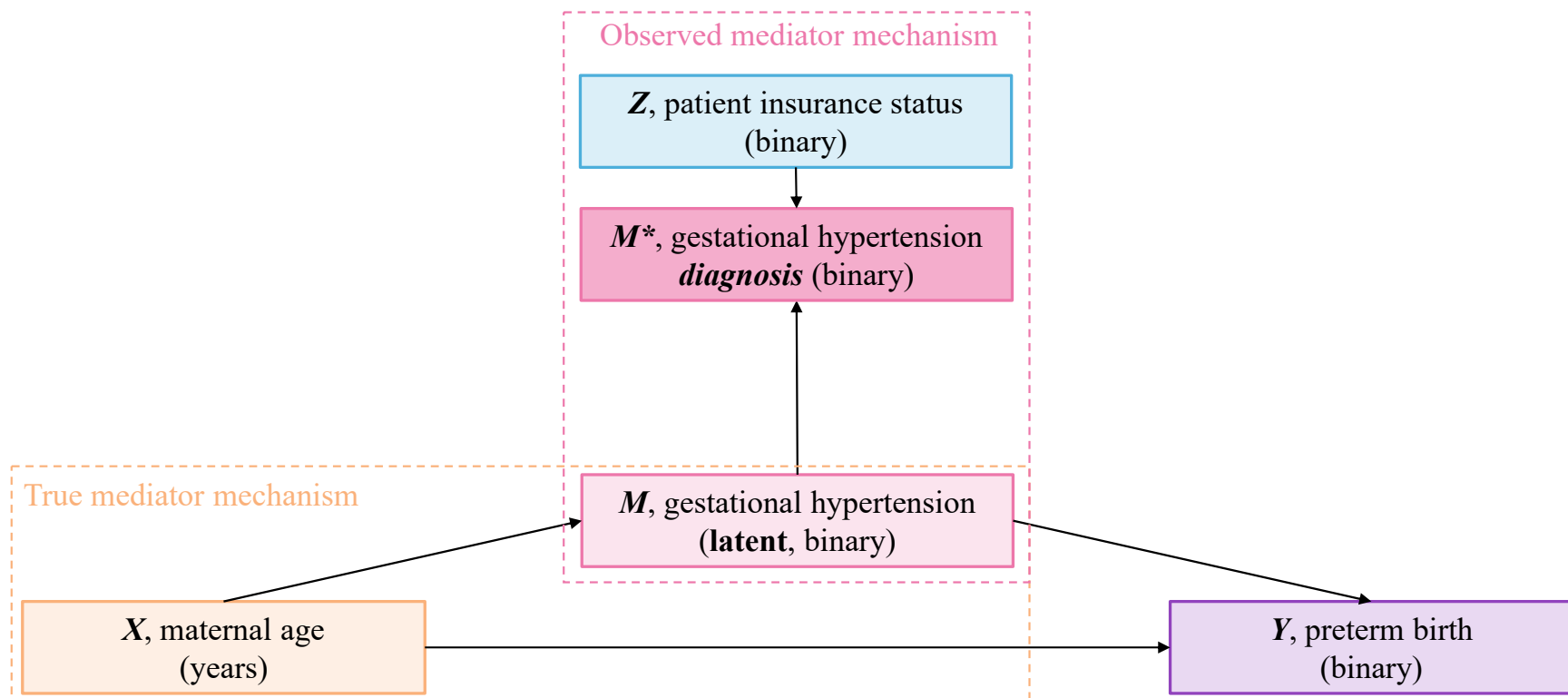
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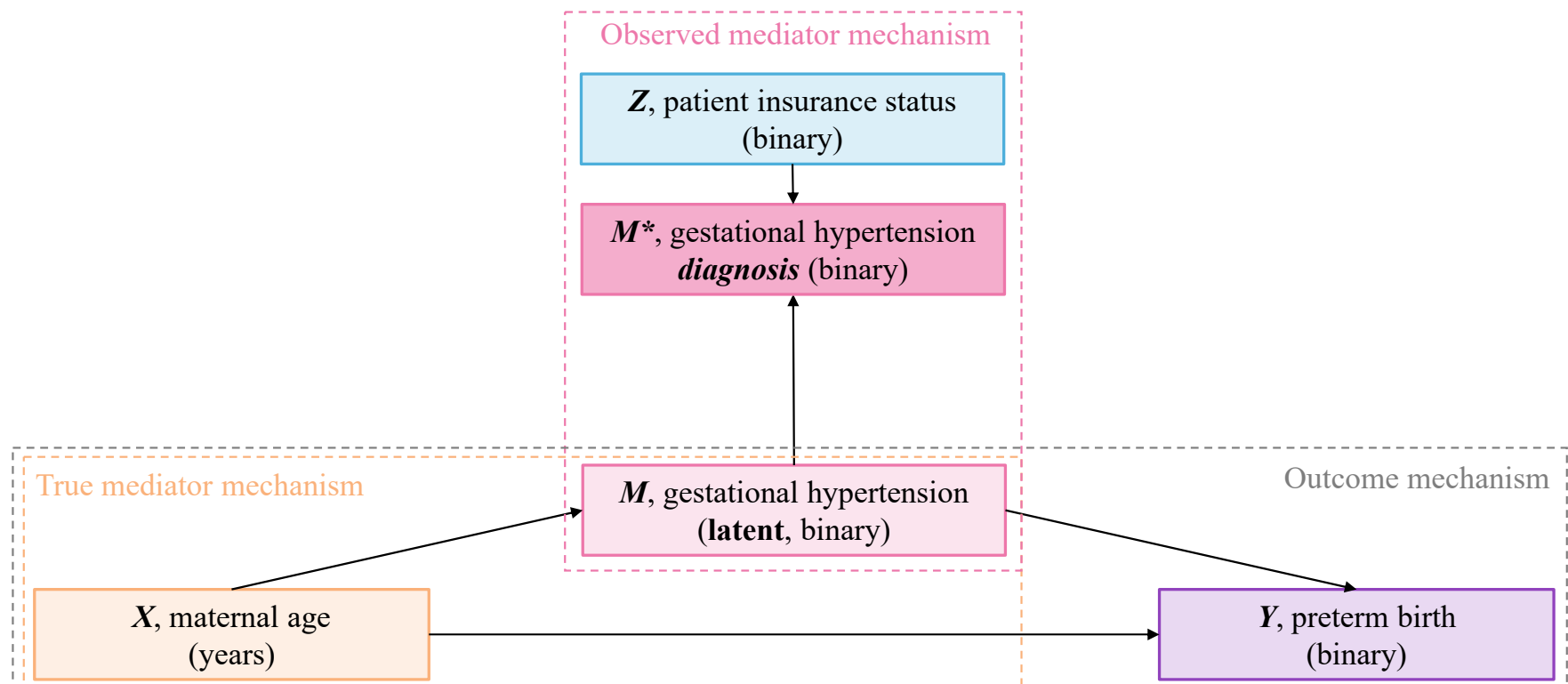
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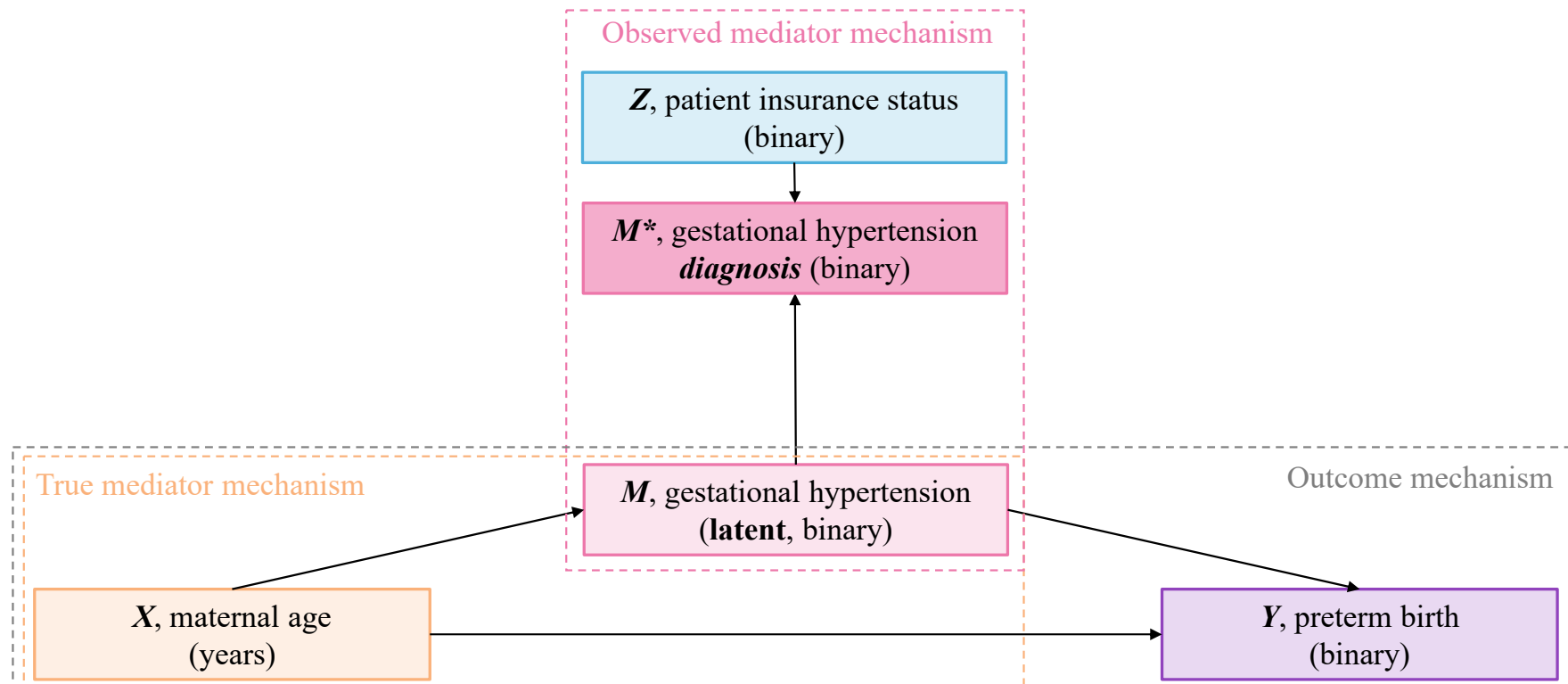


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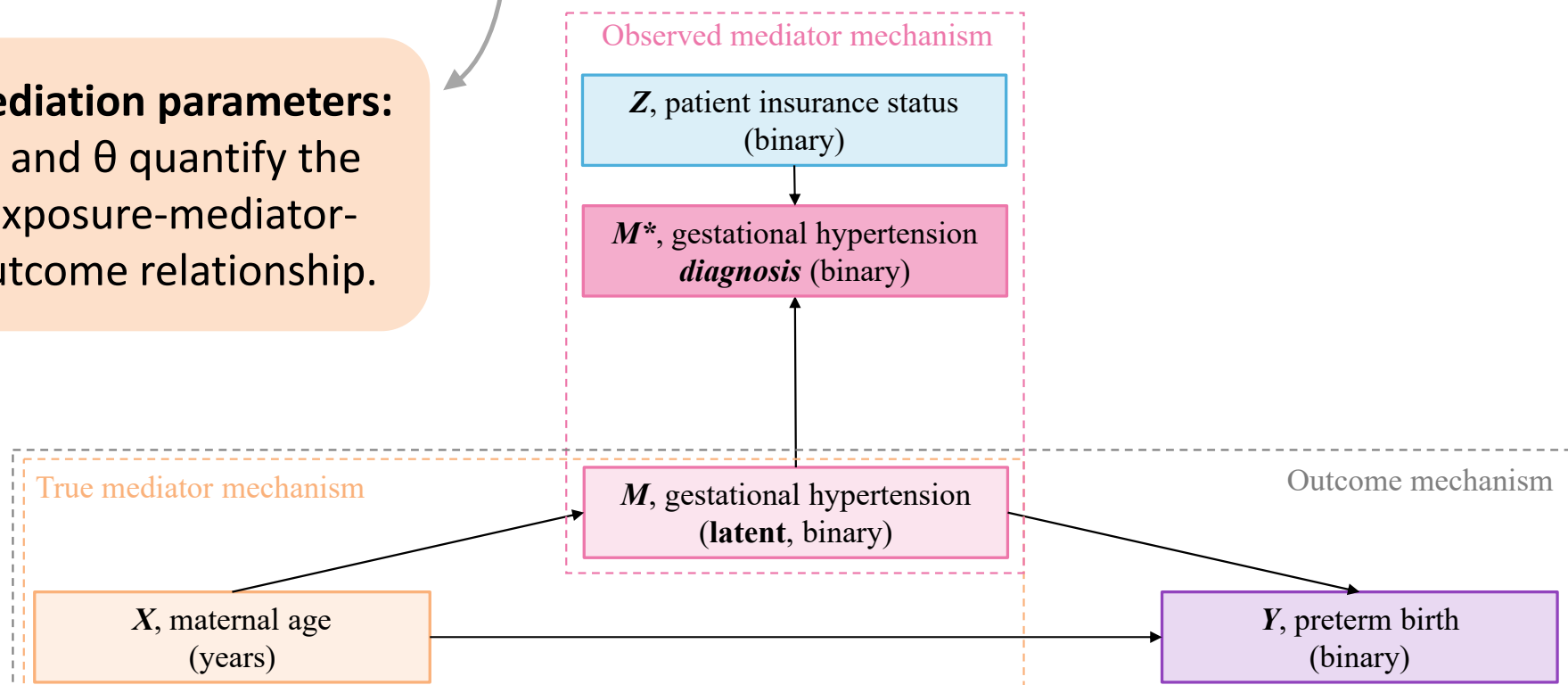
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 exposure-mediator-  
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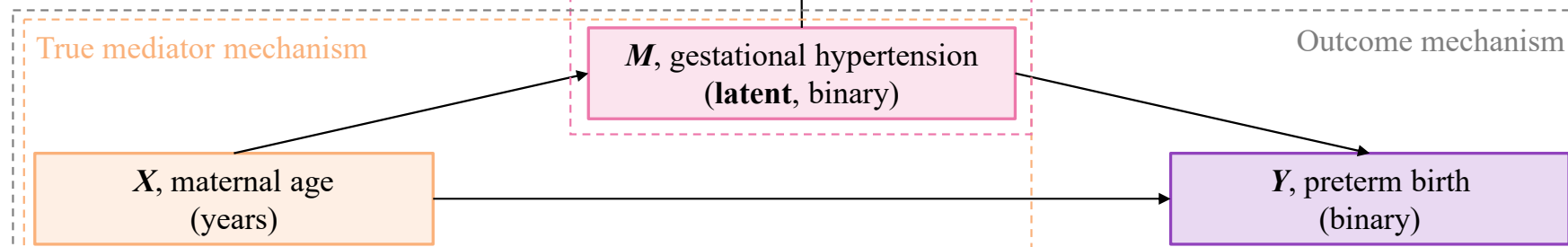
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**Mediation parameters:**  
 $\beta$  and  $\theta$  quantify the exposure-mediator-outcome relationship.

**Misclassification parameters:**  $\gamma$   
quantifies the effect of  $Z$  on misclassification rates



# Estimation

**True mediator mechanism:**  $\text{logit}\{P(M = 1|X, C; \beta)\} = \beta_0 + \beta_X X + \beta_C C$

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#1: OLS Correction

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**Key point:** We can use **COMBO** to estimate subject-level sensitivity and specificity, and then plug these values into existing misclassification correction procedures.

- Existing procedures relied on *known* sensitivity and specificity.

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**Complete data log-likelihood:**

$$\begin{aligned} & \ell_{\text{complete}}(\beta, \gamma, \theta; X, C, Z, Y) \\ &= \sum_{i=1}^N \left[ \ell_{Y|X, M, C}(\theta; X_i, M_i, C_i, Y_i) + \sum_{j=1}^2 m_{ij} \log\{\pi_{ij}\} + \sum_{j=1}^2 \sum_{\ell=1}^2 m_{ij} m_{i\ell}^* \log\{\pi_{i\ell j}^*\} \right] \end{aligned}$$

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Outcome

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$\uparrow$   $\text{I}(M_i = j)$   $\uparrow$   $P(M_i = j)$



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Expectation Step

Maximization Step

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Expectation Step

Maximization Step

$$w_{ij} = P(M_i = j|M_i^*, X_i, C_i, Z_i, Y_i)$$

$$= \sum_{\ell=1}^2 \frac{m_{i\ell}^* \pi_{i\ell}^* \pi_{ij} E[Y_i|X_i, M_i = j, C_i, \theta^{(t)}]}{\sum_{k=1}^2 \pi_{i\ell k}^* \pi_{ik} E[Y_i|X_i, M_i = k, C_i, \theta^{(t)}]}$$

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$$Q = \sum_{i=1}^N \left[ \sum_{j=1}^2 \ell_{Y|X,M,C}(\theta; X_i, M_i = w_{ij}, C_i, Y_i) \right. \\ \left. + \sum_{j=1}^2 w_{ij} \log\{\pi_{ij}\} + \sum_{j=1}^2 \sum_{\ell=1}^2 w_{ij} m_{i\ell}^* \log\{\pi_{i\ell j}^*\} \right]$$

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**Expectation Step**

Apply label switching correction  
from Webb and Wells (2023)

**Maximization Step**

$$w_{ij} = P(M_i = j|M_i^*, X_i, C_i, Z_i, Y_i)$$

$$= \sum_{\ell=1}^2 \frac{m_{i\ell}^* \pi_{i\ell}^* \pi_{ij} E[Y_i|X_i, M_i = j, C_i, \theta^{(t)}]}{\sum_{k=1}^2 \pi_{i\ell k}^* \pi_{ik} E[Y_i|X_i, M_i = k, C_i, \theta^{(t)}]}$$

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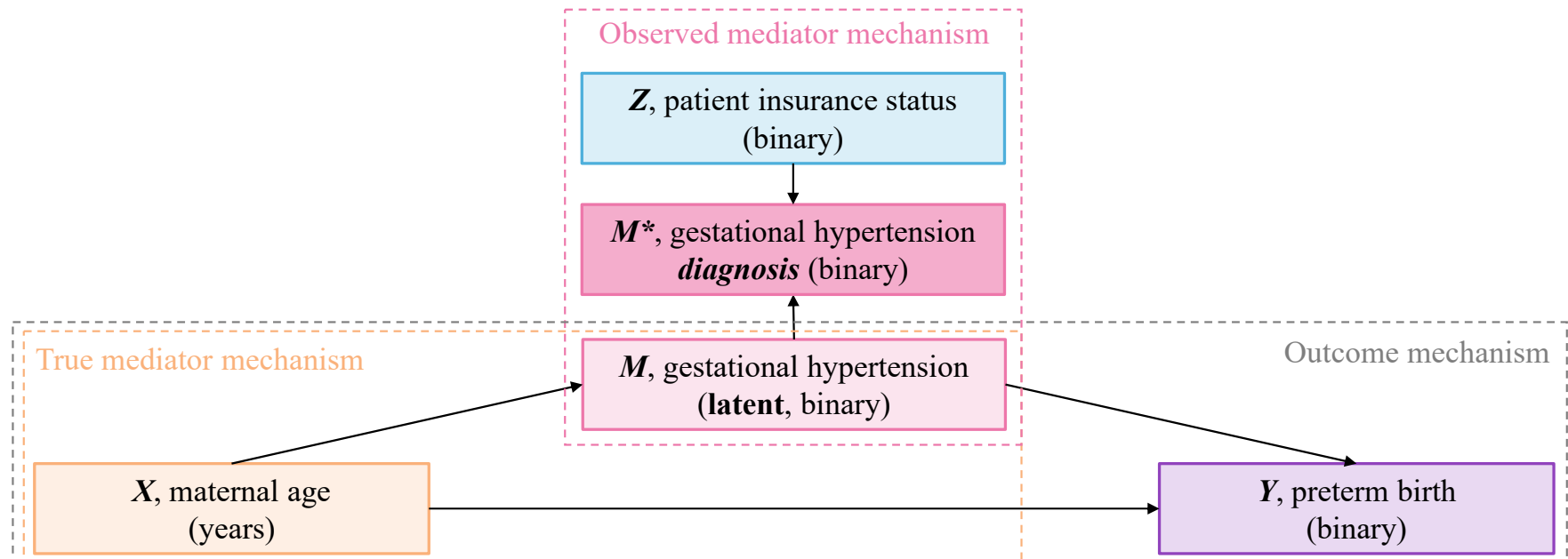
- Use the resulting bias-corrected parameter estimates to compute **(in)direct effects** for a change from  $\tilde{x}$  to  $x$ :

$$OR^{NDE} \cong \frac{\exp(\theta_X x) \{1 + \exp(\theta_M + \theta_{XM} x + \beta_0 + \beta_X \tilde{x} + \beta_C c)\}}{\exp(\theta_X \tilde{x}) \{1 + \exp(\theta_M + \theta_{XM} \tilde{x} + \beta_0 + \beta_X \tilde{x} + \beta_C c)\}}$$

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# Preterm birth study

? Does **gestational hypertension** mediate the association between **maternal age** and **preterm birth**, after accounting for potential **misdiagnosis of gestational hypertension** based on **patient insurance status**?

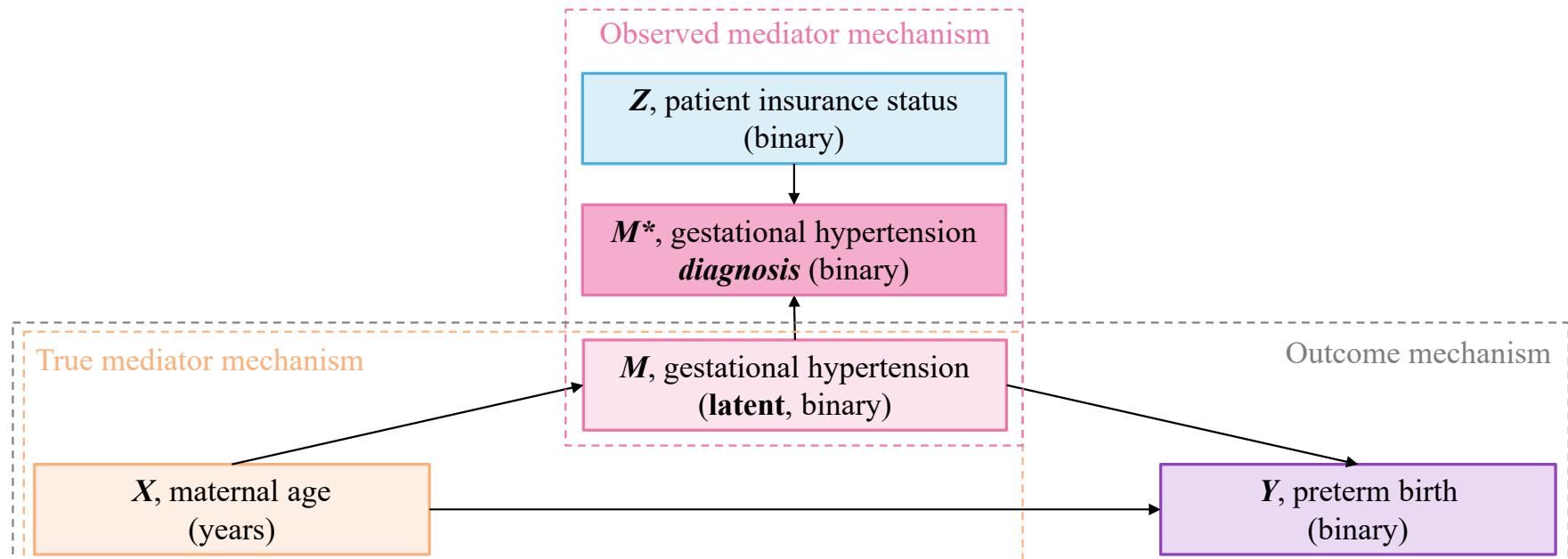


# Preterm birth study



**Data:** National Vital Statistics System

- Provides demographic and health data for all births in a year in the US.
- Random subsample from calendar year 2021, **N = 20,000**.



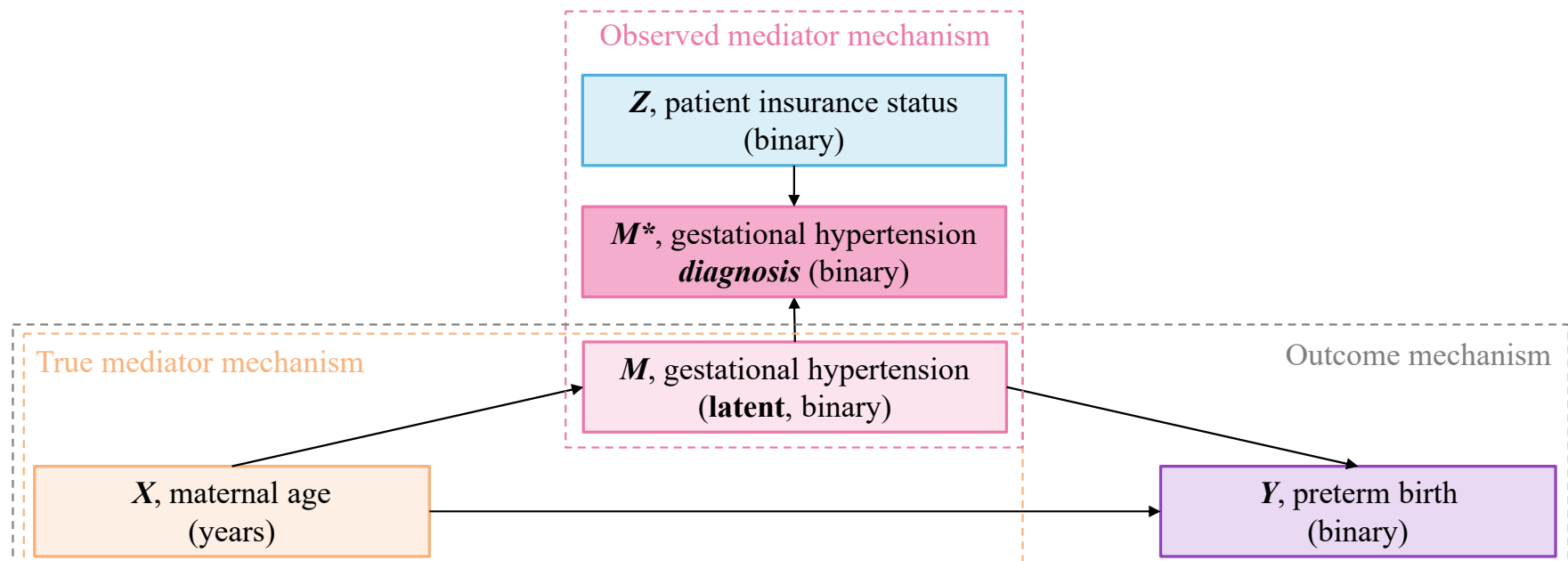


# Preterm birth study

**True mediator mechanism:**  $M \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI}$

**Observed mediator mechanism:**  $M^* \mid M \sim \text{Race} + Z$

**Outcome mechanism:**  $Y \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI} + M + M * X$



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	EM Algorithm		Naïve Analysis	
	Est.	SE	Est.	SE
$\beta_X$				
$\gamma_{Z, G=1}$				
$\gamma_{Z, G=2}$				
$\theta_X$				
$\theta_M$				
$\theta_{XM}$				

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**Outcome mechanism:**  $Y \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI} + M + M * X$

Association between **age & gestational hypertension** is unchanged after accounting for misdiagnosis.

	EM Algorithm		Naïve Analysis	
	Est.	SE	Est.	SE
$\beta_X$	0.10	0.04	0.08	0.03
$Y_{Z, G=1}$				
$Y_{Z, G=2}$				
$\theta_X$				
$\theta_M$				
$\theta_{XM}$				

# Preterm birth study

**True mediator mechanism:**  $M \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI}$

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Association between  
**age & gestational  
hypertension** is  
unchanged after  
accounting for  
misdiagnosis.

Association between  
**gestational  
hypertension &  
preterm birth**  
strengthens.

	EM Algorithm		Naïve Analysis	
	Est.	SE	Est.	SE
$\beta_X$	0.10	0.04	0.08	0.03
$\gamma_{Z, G=1}$				
$\gamma_{Z, G=2}$				
$\theta_X$	0.02	0.05	0.10	0.03
$\theta_M$	1.19	0.17	0.88	0.06
$\theta_{XM}$	0.19	0.09	0.06	0.06

# Preterm birth study

**True mediator mechanism:**  $M \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI}$

**Observed mediator mechanism:**  $M^* \mid M \sim \text{Race} + Z$

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$\theta_M$	1.19	0.17	0.88	0.06
$\theta_{XM}$	0.19	0.09	0.06	0.06

Use  $\beta$  and  $\theta$   
parameter estimates  
to compute (in)direct  
effects.

# Preterm birth study

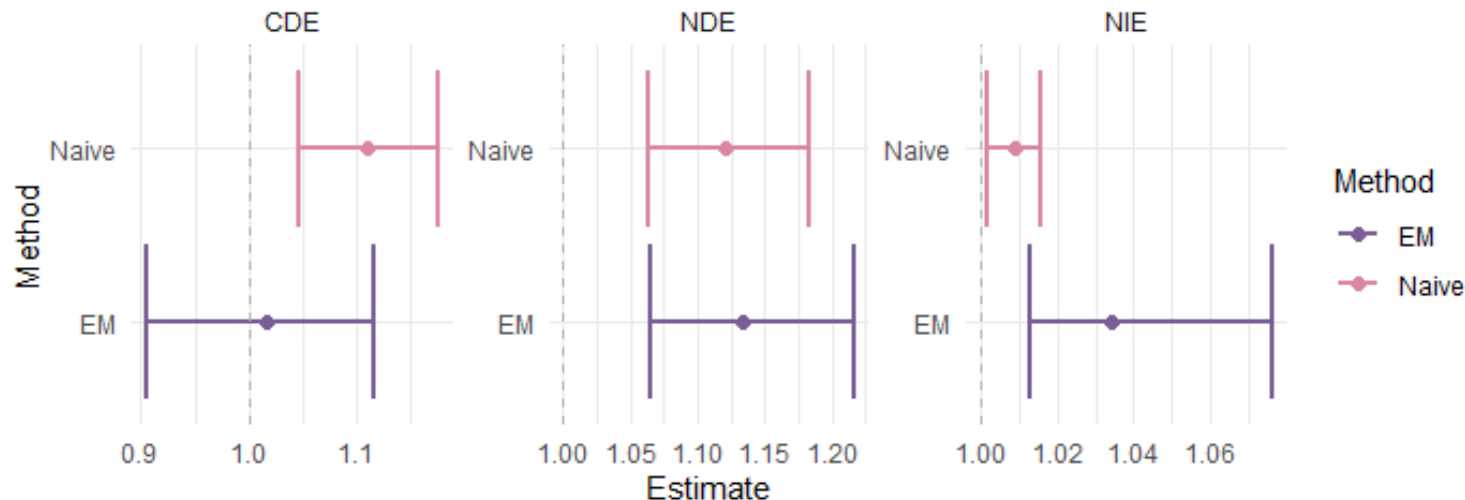
**True mediator mechanism:**  $M \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI}$

**Observed mediator mechanism:**  $M^* \mid M \sim \text{Race} + Z$

**Outcome mechanism:**  $Y \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI} + M + M * X$

**Effect estimates for impact of change in maternal age on preterm birth**

Estimates obtained from the EM algorithm approach and from a naive analysis.



Use  $\beta$  and  $\theta$  parameter estimates to compute **(in)direct effects**.

# Preterm birth study

**True mediator mechanism:**  $M \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI}$

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**gestational  
hypertension &  
preterm birth**  
strengthens.

	EM Algorithm		Naïve Analysis	
	Est.	SE	Est.	SE
$\beta_X$	0.10	0.04	0.08	0.03
$\gamma_{Z, G=1}$	-1.01	0.40	-	-
$\gamma_{Z, G=2}$	2.09	8.81	-	-
$\theta_X$	0.02	0.05	0.10	0.03
$\theta_M$	1.19	0.17	0.88	0.06
$\theta_{XM}$	0.19	0.09	0.06	0.06

Use  $\gamma$  estimates to  
compute **sensitivity  
and specificity**.

# Preterm birth study

**True mediator mechanism:**  $M \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI}$

**Observed mediator mechanism:**  $M^* \mid M \sim \text{Race} + Z$

**Outcome mechanism:**  $Y \sim X + \text{Race} + \text{Education} + \text{Parity} + \text{Smoking} + \text{BMI} + M + M * X$

	Estimated Specificity $P(\text{no } M^* \mid \text{no } M)$	Estimated Sensitivity $P(M^* \mid M)$
Insured	99.9%	43.1%
Self-Pay	99.4%	21.7%



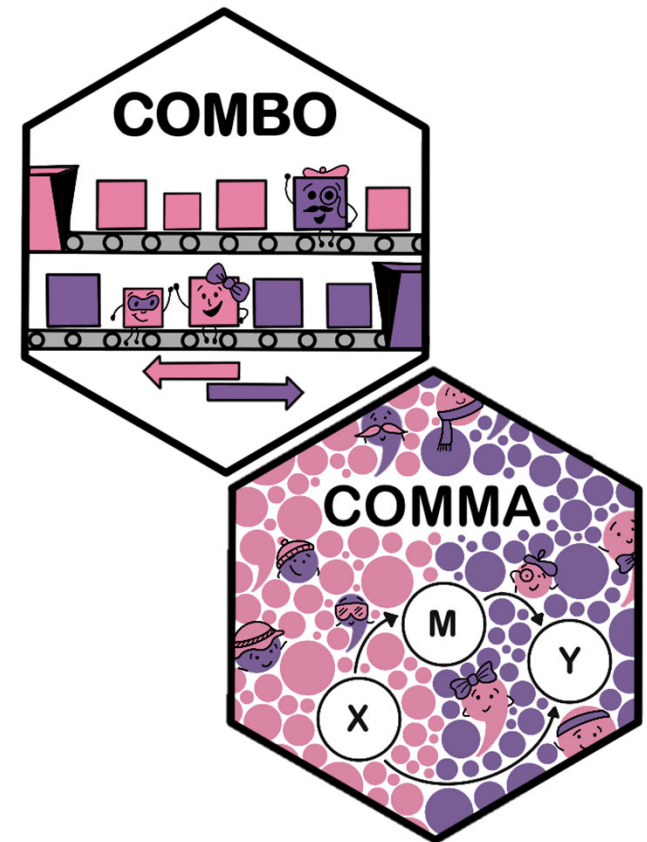


## Key takeaways

- Developed new methods for handling misclassified binary mediator variables.
- Computed (in)direct effects using bias-corrected parameter estimates.
- Quantified gestational hypertension misdiagnosis rates based on insurance status.

# Software

- Estimation methods for **misclassified outcomes** are available in the *COMBO* R Package on CRAN.
  - **C**orrecting **M**isclassified **B**inary **O**utcomes
- Estimation methods for **misclassified mediators** are available in the *COMMA* R Package on CRAN.
  - **C**orrecting **M**isclassified **M**ediation **A**alysis



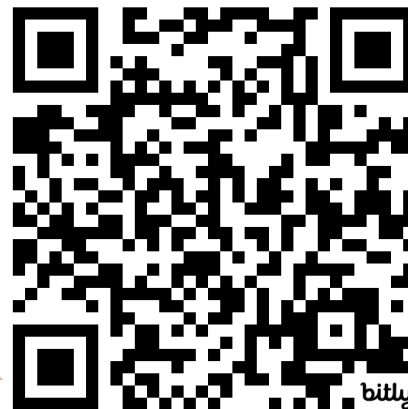
Thank you!

**Kimberly A. H. Webb**

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[kimhwebb.com](http://kimhwebb.com) —————> My “webb-site” 😊

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