

Missing Data Example with MICE in R

Consequences of missing data

Researchers usually address missing data by including in the analysis only complete cases—those individuals who have no missing data in any of the variables required for that analysis. However, results of such analyses can be biased. Furthermore, the cumulative effect of missing data in several variables often leads to exclusion of a substantial proportion of the original sample, which in turn causes a substantial loss of precision and power.

The risk of bias due to missing data depends on the reasons why data are missing. Reasons for missing data are commonly classified as: missing completely at random (MCAR), missing at random (MAR), and missing not at random (MNAR). This nomenclature is widely used, even though the phrases convey little about their technical meaning and practical implications, which can be subtle. When it is plausible that data are missing at random, but not completely at random, analyses based on complete cases may be biased. Such biases can be overcome using methods such as multiple imputation that allow individuals with incomplete data to be included in analyses. Unfortunately, it is not possible to distinguish between missing at random and missing not at random using observed data. Therefore, biases caused by data that are missing not at random can be addressed only by sensitivity analyses examining the effect of different assumptions about the missing data mechanism.

Statistical methods to handle missing data

A variety of ad hoc approaches are commonly used to deal with missing data. These include replacing missing values with values imputed from the observed data (for example, the mean of the observed values), using a missing category indicator, and replacing missing values with the baseline or the last measured value (Baseline observation carried forward & Last observation carried forward). None of these approaches is statistically valid in general, and they can lead to serious bias. Single imputation of missing values usually causes standard errors to be too small, since it fails to account for the fact that we are uncertain about the missing values.

What is multiple imputation?

Multiple imputation is a general approach to the problem of missing data that is available in several commonly used statistical packages. It aims to allow for the uncertainty about the missing data by creating several different plausible imputed data sets and appropriately combining results obtained from each of them.

The first stage is to create multiple copies of the dataset, with the missing values replaced by imputed values. These are sampled from their predictive distribution based on the observed data—thus multiple imputation is based on a bayesian approach. The imputation procedure must fully account for all uncertainty in predicting the missing values by injecting appropriate variability into the multiple imputed values; we can never know the true values of the missing data.

The second stage is to use standard statistical methods to fit the model of interest to each of the imputed datasets. Estimated associations in each of the imputed datasets will differ because of the variation introduced in the imputation of the missing values, and they are only useful when averaged together to give overall estimated associations. Standard errors are calculated using Rubin's rules, which take account of the variability in results between the imputed datasets, reflecting the uncertainty associated with the missing values. Valid inferences are obtained because we are averaging over the distribution of the missing data given the observed data.

Consider, for example, a study investigating the association of systolic blood pressure with the risk of subsequent coronary heart disease, in which data on systolic blood pressure are missing for some people. The probability that systolic blood pressure is missing is likely to decrease with age (doctors are more likely to measure it in older people), increase with body mass index, and history of smoking (doctors are more likely to measure it in people with heart disease risk factors or comorbidities). If we assume that data are missing at random and that we have systolic blood pressure data on a representative sample of individuals within strata of age, smoking, body mass index, and coronary heart disease, then we can use multiple imputation to estimate the overall association between systolic blood pressure and coronary heart disease.

Multiple imputation has potential to improve the validity of medical research. However, the multiple imputation procedure requires the user to model the distribution of each variable with missing values, in terms of the observed data. The validity of results from multiple imputation depends on such modelling being done carefully and appropriately. Multiple imputation should not be regarded as a routine technique to be applied at the push of a button—whenever possible specialist statistical help should be obtained.

Although there are several packages (`mi` developed by Gelman, Hill and others; `hot.deck` by Gill and Cramner, `Amelia` by Honaker, King, Blackwell) in R that can be used for multiple imputation, we will be using the `mice` package, developed by Stef van Buuren.

The basic steps in R are as follows:

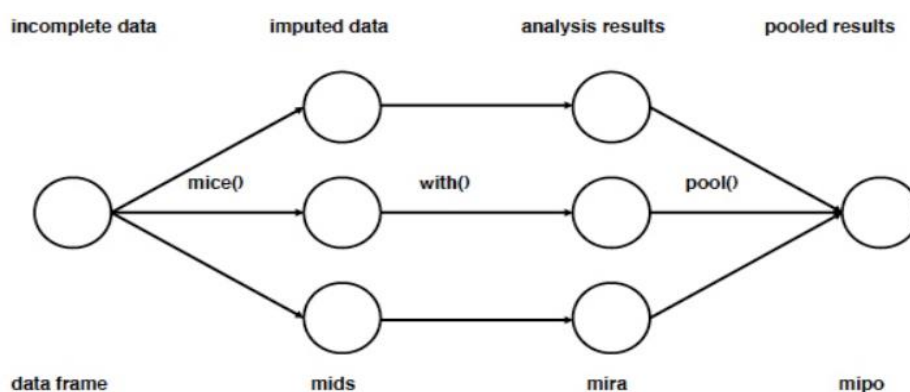
`mice()` Impute the data. That is, make m copies of the original dataset and fill in the missing values.

`with()` Analyze each of the completed datasets.

`pool()` Combine the parameter estimates using Rubin's rules.

The figure below depicts the three main steps to multiple imputation:

Figure 1: Main steps used in multiple imputation



1. Complete Cases analysis

The birthwt dataset has 189 rows and 9 columns. The data were collected at Baystate Medical Center, Springfield, Mass during 1986.

The variables are:

- bwt birth weight in grams.
- age mother's age in years.
- lwt mother's weight in pounds at last menstrual period.
- race mother's race (1 = white, 2 = black, 3 = other).
- smoke smoking status during pregnancy.
- ptl number of previous premature labours.
- ht history of hypertension.
- ui presence of uterine irritability.
- ftv number of physician visits during the first trimester.

Using **md.pattern()** we can examine the pattern of missingness in the data. Each combination of missing variables is given a row in the output, with 1 in the row indicating observed and 0 indicating missing. Here we see that while most of the 189 subjects have complete observations [99, top row], many observations have a single missing variable (only one 0 in the row), and some observations have multiple variables missing (several 0s in the row). Other functions to visualize patterns in missing data are also available from the VIM package.

`md.pattern(birthwt, plot = FALSE)`

	age	smoke	race	bwt	ptl	ht	ui	ftv	lwt
99	1	1	1	1	1	1	1	1	0
7	1	1	1	1	1	1	1	1	0
9	1	1	1	1	1	1	1	0	1
9	1	1	1	1	1	1	0	1	1
9	1	1	1	1	1	0	1	1	1
6	1	1	1	1	0	1	1	1	1
7	1	1	1	1	0	0	0	0	0
6	1	1	1	0	1	1	1	1	1
8	1	1	1	0	0	0	0	0	0
7	1	1	0	1	1	1	1	1	1
4	1	0	1	1	1	1	1	1	1
7	1	0	0	0	1	1	1	1	0
11	0	1	1	1	1	1	1	1	1
11	11	11	14	21	21	24	24	24	29

First, we consider a regression model using only the complete cases: predictors for birthweight using linear regression.

```
m1.cc <- lm(bwt ~ age + smoke, data = birthwt)
```

```
summary(m1.cc)
```

```
Call:
lm(formula = bwt ~ age + smoke, data = birthwt)

Residuals:
    Min       1Q   Median       3Q      Max
-2040.26  -446.91   41.33   552.57  1966.19

Coefficients:
            Estimate Std. Error t value Pr(>|t|)
(Intercept)  2926.681    282.861   10.347  <2e-16 ***
age           2.158      11.900    0.181  0.8563
smokeyes     -237.861    122.588   -1.940  0.0542 .
---
Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

Residual standard error: 738 on 150 degrees of freedom
(36 observations deleted due to missingness)
Multiple R-squared:  0.02476,    Adjusted R-squared:  0.01176
F-statistic: 1.904 on 2 and 150 DF,  p-value: 0.1525
```

36 observations deleted. As a result, the analysis was conducted using 189-36=153 observations.

The **coefficients (b)** can be interpreted as:

The related p-values are 0.856 and 0.054 for mother's age and mother's smoking status respectively, meaning that the results are non-significant.

2. Multiple Imputation

Now, we use MI to guess what the missing variables "could have been", and then use our imputed datasets to estimate the regression coefficients again.

2.a. Impute the missing observations using mice().

Before running mice(), check that your dataset contains only variables you will use in your analysis, or variables you think are related to missingness. The model above considered 3 variables (bwt, age, smoke), and we think that race and ftv may be related to missingness, so we keep only those 5 variables. Then, we use the mice() command to impute the missing variables multiple times, using all other variables (including the outcome) as predictors in the imputation procedure.

```
small <- birthwt[, c("bwt", "age", "smoke", "race", "ftv")]
imp <- mice(small, m = 5, print = FALSE, seed = 12345)
imp
```

```
Number of multiple imputations: 5
Imputation methods:
      bwt      age      smoke      race      ftv
      "pmm"      "pmm"      "logreg"      "polyreg"      "pmm"
PredictorMatrix:
      bwt age smoke race ftv
bwt    0  1    1    1    1
age    1  0    1    1    1
smoke  1  1    0    1    1
race   1  1    1    0    1
ftv    1  1    1    1    0
```

Here is an explanation of the parameters used:

1. m – Refers to 5 imputed data sets
2. maxit – Refers to no. of iterations taken to impute missing values
3. method – Refers to method used in imputation. We used predictive mean matching.

**It is recommended
20 imputations for 10% to
30% missing information, and
40 imputations for
50% missing information.**

In this example, we see that mice() used pmm (predictive mean matching) to impute all continuous variables except smoke which used logistic regression and race which used polyreg, a form of multinomial logistic regression. (Variables with no missing values will have no method (" ") because no imputation method is needed).

By default, mice() uses the following default methods: predictive mean matching (pmm) for numeric data, logistic regression for factors with 2 levels, and multinomial logistic regression for factors with 3 levels. Note that binary variables that are still coded numerically (0/1, 1/2, etc) will have the default method "pmm", unless you recode it as a factor.

Reading across the rows of the predictor matrix, we can also see that mice() used each of the other variables to impute both variables.

PredictorMatrix:					
	bwt	age	smoke	race	ftv
bwt	0	1	1	1	1
age	1	0	1	1	1
smoke	1	1	0	1	1
race	1	1	1	0	1
ftv	1	1	1	1	0

Check imputed values

`impimpbwt`

`impimpage`

`impimpsmoke`

`impimprace`

`impimpftv`

For instance, the imputed values for missing data of bwt variable are:

	1	2	3	4	5
12	1474	2353	4593	2948	2906
18	2240	2977	3884	2594	3232
45	1588	3175	1330	3080	3643
50	2495	3203	2495	1135	2296
52	2750	3572	3062	1330	3941
65	709	1135	2495	3321	2381
73	1135	3572	1790	2495	2381
81	2863	3983	2835	2495	2906
82	2414	1021	3941	2353	3912
89	3402	4167	3827	2353	4990
93	1588	3175	2240	2466	2906
105	2751	2187	2301	2920	2906
107	2438	2920	3941	2353	3080
111	2438	3790	3225	2082	3544
118	2126	4593	1588	4153	709
127	3402	2977	3062	4153	3912
153	2325	3651	3629	2381	2225
156	2495	3321	709	709	2835
158	2835	3374	3203	2920	4238
164	2778	2495	2877	3274	2225
176	2495	1970	2523	1588	3544

Since there are 5 imputed data sets, you can select any using complete() function.

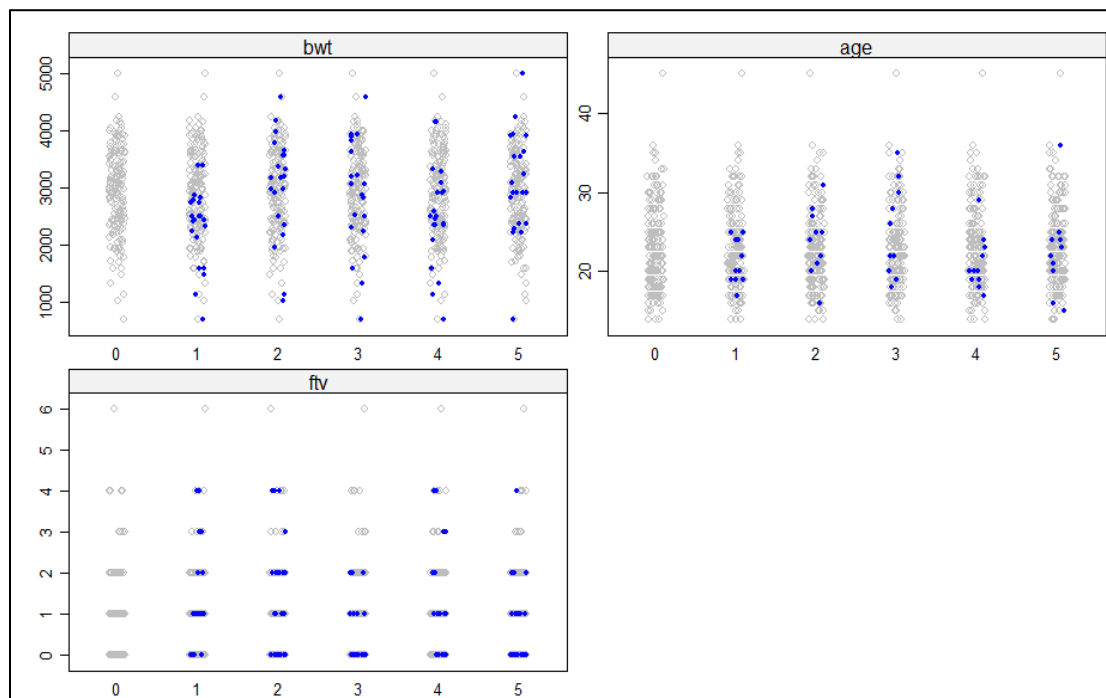
`completeData1 <- complete(imp,1)`

`View(completeData1)`

	bwt	age	smoke	race	ftv
1	2523	19	no	black	0
2	2551	33	no	other	3
3	2557	20	yes	white	1
4	2594	21	yes	white	2
5	2600	18	yes	white	0
6	2622	21	no	other	0
7	2637	22	no	white	1
8	2637	17	no	other	1
9	2663	29	yes	white	1
10	2665	26	yes	white	0
11	2722	19	no	other	0
12	1474	19	yes	white	1
13	2751	22	no	other	0
14	2750	30	no	other	1
15	2769	18	yes	white	0
16	2769	18	yes	white	0
17	2778	15	no	black	0
18	2240	25	yes	white	4
19	2807	20	no	other	0
20	2821	28	yes	white	0
21	2835	32	no	other	2
22	2835	31	no	white	1
23	2836	24	no	white	1
24	2863	28	no	other	0
25	2877	25	no	other	2
26	2877	28	no	white	0
27	2906	17	yes	white	0
28	2920	29	no	white	2
29	2920	20	yes	black	0
30	2920	17	no	black	1

After imputation, we can use the `stripplot.mids()` function to compare the imputed values with observed values for continuous variables. We can see that the imputed values are similar to the observed values, indicating that imputation is probably appropriate for this analysis.

`stripplot(imp, col=c("grey", "blue"), pch = c(1, 20))`



2.b. Run regression model on imputed data using with().

To run a regression model with imputed data, we have to use `with()`. Note that we use the same model formulation as above, but we leave out the data option. Note that we use the same imputed data to run several models, so there is no need to impute new data for every model of interest. In general we will not look at the results of `with()` directly, but instead `pool()` them first. We can however take a look at the analyses and get the results of each of the m fitted regression models.

```
m1.mi <- with(imp, lm(bwt ~ age + smoke))
```

```
t(sapply(m1.mi$analyses, coef))
```

	(Intercept)	age	smokeyes
[1,]	2943.427	1.440961	-317.2060
[2,]	2949.654	2.137754	-171.5479
[3,]	2709.511	13.458163	-278.8373
[4,]	2928.840	2.819329	-286.2017
[5,]	2811.786	9.799024	-250.4925

2.c. Combine the results using pool().

```
summary(pool(m1.mi), conf.int = TRUE)
```

	term	estimate	std.error	statistic	df	p.value	2.5 %	97.5 %
1	(Intercept)	2868.643454	282.14733	10.1671828	74.06046	1.110223e-15	2306.46026	3430.826652
2	age	5.931046	12.17995	0.4869515	48.03555	6.285074e-01	-18.55792	30.420015
3	smokeyes	-260.857075	126.74990	-2.0580457	49.83000	4.483523e-02	-515.46325	-6.250896

The **coefficients (b)** can be interpreted as:

- The p-value of mother's age is 0.629, meaning that the result is non-significant.
- The mean birth weight of an infant whose mother smokes is significantly lower (on average) about 260 gr relative to an infant whose mother does not smoke ($p=0.045$) adjusted (or controlling) for mother's age.

Extended example-Logistic regression model

Now let's suppose that we want to categorize the numeric variable `bwt` to infants with born weighting less than 2500 grams (<2500 gr) and infants with born weighting more than 2500

grams (≥ 2500 gr). Outcome variable (bwt_cat) will take value 2 if an infant was not born with a low birth weight and the value 1 if an infant was born with a low birth weight.

```
birthwt$bwt_cat <- cut(birthwt$bwt,
                        breaks=c(-Inf, 2500, Inf),
                        levels=c(1,2),
                        labels=c("2500 gr or less","more than 2500 gr"))
```

Impute the missing observations using mice().

```
small_2 <- birthwt[, c("bwt_cat", "age", "smoke", "race", "ftv")]
```

```
imp_2 <- mice(small_2, m = 5, print = FALSE, seed = 12345)
```

```
imp_2
```

```
Number of multiple imputations: 5
Imputation methods:
  bwt_cat      age      smoke      race      ftv
"logreg"    "pmm" "logreg"    "pmm"    "pmm"
PredictorMatrix:
      bwt_cat age smoke race ftv
bwt_cat    0  1   1   1   1
age         1  0   1   1   1
smoke       1  1   0   1   1
race        1  1   1   0   1
ftv         1  1   1   1   0
```

Combine the results using pool().

```
m2.mi <- with(imp_2, glm(bwt_cat ~ age + smoke,family = binomial()))
```

```
summary(pool(m2.mi), exponentiate = TRUE, conf.int = TRUE)
```

	term	estimate	std.error	statistic	df	p.value	2.5 %	97.5 %
1	(Intercept)	1.6514067	0.81797770	0.6132532	88.34653	0.54128454	0.3250285	8.390477
2	age	1.0238662	0.03401331	0.6934311	90.23815	0.48982013	0.9569683	1.095441
3	smokeyes	0.5173487	0.38735718	-1.7013707	29.62969	0.09934642	0.2344432	1.141640

The **coefficients (b)** can be interpreted as:

- The p-value of mother's age is 0.490, meaning that the result is non-significant.
- Smoking during pregnancy can decrease the odds of normal birth weight by $(1 - 0.52) = 48\%$ adjusted (or controlling) for mother's age.

3. Cox proportional hazards regression

The Stanford 2 dataset from the R package survival includes five variables. The data were collected from patients on the waiting list for the Stanford heart transplant program.

The variables are:

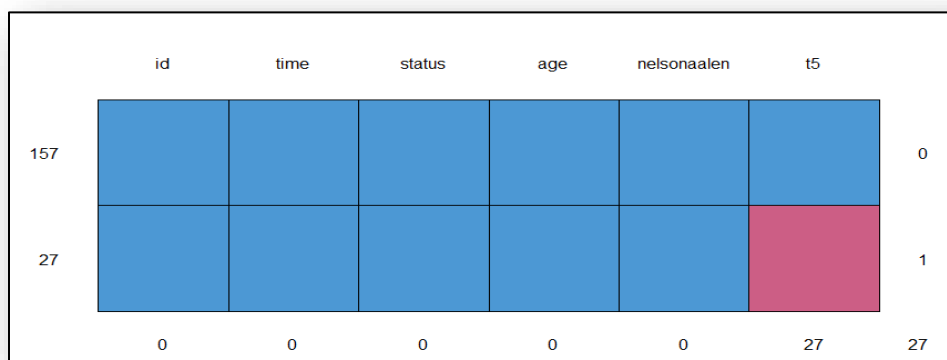
- ID ID number.
- time survival or censoring time.
- status censoring status.
- age patients' age in years.
- t5 T5 mismatch score.

`summary(stanford2)`

id		time		status		age		t5	
Min.	: 1.00	Min.	: 0.50	Min.	:0.0000	Min.	:12.00	Min.	:0.000
1st Qu.	: 46.75	1st Qu.	: 64.75	1st Qu.	:0.0000	1st Qu.	:35.00	1st Qu.	:0.690
Median	: 92.50	Median	: 351.00	Median	:1.0000	Median	:44.00	Median	:1.040
Mean	: 92.50	Mean	: 696.94	Mean	:0.6141	Mean	:41.09	Mean	:1.117
3rd Qu.	:138.25	3rd Qu.	:1160.75	3rd Qu.	:1.0000	3rd Qu.	:49.00	3rd Qu.	:1.460
Max.	:184.00	Max.	:3695.00	Max.	:1.0000	Max.	:64.00	Max.	:3.050
								NA's	:27

`md.pattern(stanford2, plot = TRUE)`

	id	time	status	age	nelsonaalen	t5
157	1	1	1	1		1 1 0
27	1	1	1	1		1 0 1
	0	0	0	0		0 27 27



There are 157 observations with no missing values and 27 observations with missing values in the variable of t5.

It is recommended to include two variables related to the survival endpoint in the imputation models, the Nelson-Aalen estimate of the cumulative hazard (nelsonaalen()) and the event indicator, in the imputation process.

```
stanford2$nelsonaalen <- nelsonaalen(stanford2, time, status)

imp.surv <- mice(stanford2[,c("time", "status", "age", "t5", "nelsonaalen")], m = 20, print = FALSE)
m2.mi <- with(imp.surv, coxph(Surv(time, status) ~ t5 + age))

summary(pool(m2.mi), conf.int = TRUE, exponentiate = TRUE)
```

Since we used the exponentiate = TRUE option, the column labelled estimate shows the hazard ratios

	term	estimate	std.error	statistic	df	p.value	2.5 %	97.5 %
1	t5	1.157301	0.18222557	0.8016997	95.45791	0.424717893	0.8060166	1.661684
2	age	1.029272	0.01065714	2.7072657	109.02508	0.007877288	1.0077596	1.051243

The **coefficients (b)** can be interpreted as:

- The p-value of t5 is 0.425, meaning that the result is non-significant.
- The risk of death is increased by about $(1.03-1=0.03)$ 3% as the patient's age increases by one year adjusted (or controlling) for t5