Survival Analysis: Comparison of Aspirin and Heparin in IST-3 Dataset DATA 621: Advanced Statistics Modelling Final Project

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# Overview of Stroke



Third-leading cause of death in Canada



Two Main Types:

Ischemic (blockage)

**Hemorrhagic** (rupture)



Anti-platelets:

**Aspirin** 



Anticoagulants:

Heparin

### Research Question & Hypothesis

- Is there a significant difference in survival rates between individuals who were randomized to take either Aspirin or a Heparin dosage?
  - How does *age and sex* impact the survival rates between patients who take Aspirin only or Heparin only?
  - What other variables significantly contribute to the survival rate between each treatment group?
- Aspirin patients are expected to show an improvement in survival rates in comparison to the control. Heparin is not expected to show any improvements in survivability.

# Methods

## International Strokes Trial (IST-3) Dataset

- n = 19,435 patients with symptoms of stroke
  - 984 patients in pilot phase
- Outcomes of patients recorded at the 6-month period
- Patient eligibility into the randomized clinical trial was based on physician criterion:
  - Should Aspirin or Heparin be administered?

### Variable Definition

#### Main Variables of Interest

- Groups:
  - Control
  - Aspirin (300mg)
  - Low Heparin (5000 IU)
  - High Heparin (12,5000 IU)
- **TD** = Time of Death or Censoring (days)
  - If death occurs beyond 180 days, they are censored
- DIED = Status of death
   (0 = did not die, 1 = died)

#### **Predictive Variables (patient characteristics)**

- AGE (years)
- **SEX** (Male, Female)
- **RATRIAL** = Atrial fibrillation (Yes or No)
  - 984 rows were removed since RATRIAL was not recorded in pilot study
- RSBP = Systolic Blood Pressure (mmHg)
- **RVISINF** = Visible Infarcts (Yes or No)

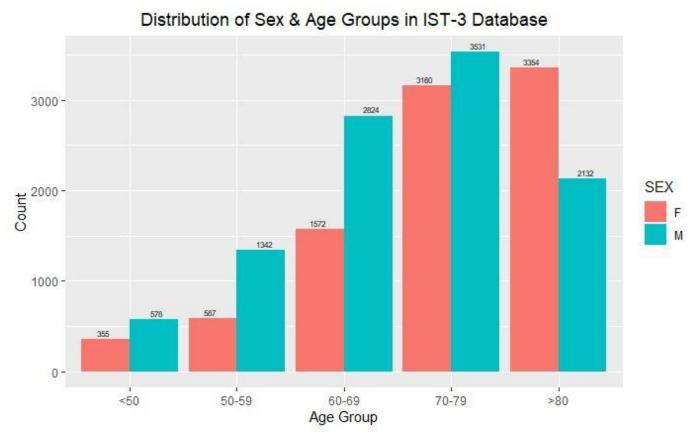
# Survival Analysis Procedures

- Data Exploration
- Kaplan Meier Plot
- Log Rank Test
- Cox Proportional Hazards Modelling:
  - Interaction Terms & Model Reduction
  - Likelihood Ratio Test
- Assumptions:
  - Proportional Hazard (Schoenfeld Plot of Residuals)
  - Linearity in Covariates (Martingale Plot of Residuals)
- Stratified Cox Modelling
- Hazard Ratios & Interpretations

# Results

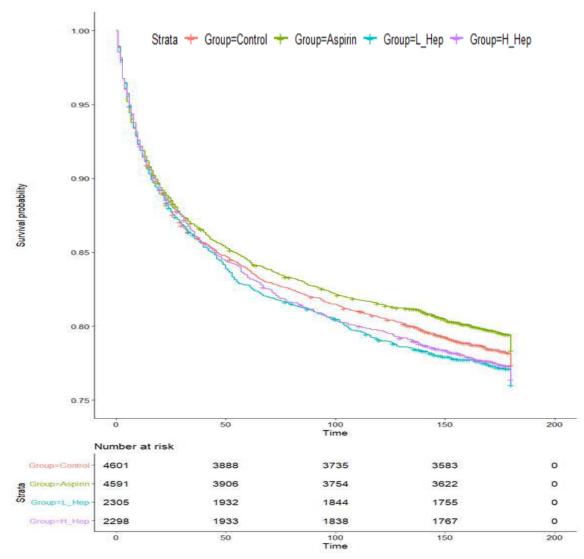
### Data Exploration

- Across 19,435 patients, sample is largely representative of the older population between ages 70 (n = 12177,63%)
- Randomization into four treatment groups:
  - Control (n = 4860, 25%)
  - Aspirin (n = 4858, 25%)
  - Low Heparin (n = 2429, 12%)
  - High Heparin (n = 2426, 12%)



**Figure 1:** Distribution of age and sex in patients suffering from re-occurring stroke from IST-3 dataset

## Kaplan Meier Curves



Survival curves for each treatment are plotted over the course of 180 days, along with a risk table below

#### **Kaplan Meier Curve:**

- Large initial overlap in survival curves indicate that the proportionality assumption may not be met
- Survival curve for Aspirin seems to be slightly better than control group, particularly near 180 days

#### **Log-Rank Test**

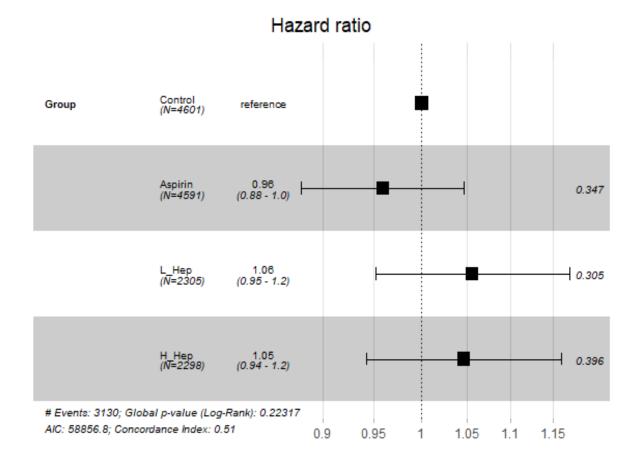
Log-rank test output compares the survival rates for all four treatment groups. Results show that there is not a significant difference between two or more groups.

# Cox Proportional Hazards Base Model

## Model Equation:

$$log(h_i) = log(h_0) (\beta_1 X_{Group})$$

Variables	coef	exp(coef)	se(coef)	Z	Pr(> z )
Group (Aspirin)	-0.04164	0.95922	0.04428	-0.94	0.347
Group (Low Heparin)	0.05416	1.05565	0.05281	1.026	0.305
Group (High Heparin)	0.04497	1.046	0.05297	0.849	0.396



# Cox Proportional Hazards Full Model

### Model Equation:

$$log(h_i) = log(h_0)$$
  
 $\beta_1 X_{Group} + \beta_2 X_{Age} +$   
 $\beta_3 X_{Sex} = M + \beta_4 X_{RSBP} +$   
 $\beta_5 X_{RATRIAL} = Y +$   
 $\beta_6 X_{RVISFINF} = Y +$   
 $\beta_7 X_{Group \times Age} +$   
 $\beta_8 X_{Group \times Sex} +$   
 $\beta_9 X_{Group \times RSBP} +$   
 $\beta_{10} X_{Group \times RATRIAL} = Y +$   
 $\beta_{11} X_{Group \times RVISINF} = Y$ 

Variables	coef	exp(coef)	se(coef)	Z	Pr(> z )	Significance
GroupAspirin	1.061712	2.8913179	0.478145	2.22	0.0264	*
GroupL_Hep	-0.61647	0.5398462	0.58227	-1.059	0.2897	
GroupH_Hep	0.754326	2.1261785	0.582032	1.296	0.195	
AGE	0.057812	1.0595162	0.003595	16.081	2.00E-16	***
SEXM	0.027474	1.0278546	0.064033	0.429	0.6679	
RSBP	-0.0027	0.9973014	0.001142	-2.366	0.018	*
RATRIALY	0.56179	1.7538091	0.0695	8.083	6.31E-16	***
RVISINFY	0.36817	1.4450883	0.063391	5.808	6.33E-09	***
GroupAspirin:AGE	-0.0102	0.9898499	0.00504	-2.024	0.043	*
GroupL_Hep:AGE	0.00422	1.0042286	0.006087	0.693	0.4882	
GroupH_Hep:AGE	-0.00639	0.9936286	0.006116	-1.045	0.2959	
GroupAspirin:SEXM	-0.08124	0.92197	0.091791	-0.885	0.3761	
GroupL_Hep:SEXM	0.060437	1.0623004	0.108162	0.559	0.5763	
GroupH_Hep:SEXM	-0.00883	0.991209	0.109489	-0.081	0.9357	
GroupAspirin:RSBP	-0.0019	0.9980989	0.001646	-1.156	0.2476	
GroupL_Hep:RSBP	0.002167	1.0021693	0.001961	1.105	0.2692	
GroupH_Hep:RSBP	-0.00094	0.9990631	0.001997	-0.469	0.6388	
GroupAspirin:RATRIALY	0.045002	1.0460303	0.098795	0.456	0.6487	
GroupL_Hep:RATRIALY	-0.15578	0.8557442	0.11996	-1.299	0.1941	
GroupH_Hep:RATRIALY	0.010476	1.0105312	0.119522	0.088	0.9302	
GroupAspirin:RVISINFY	-0.02445	0.9758504	0.090899	-0.269	0.788	
GroupL_Hep:RVISINFY	-0.00805	0.9919832	0.1079	-0.075	0.9405	
GroupH_Hep:RVISINFY	-0.14373	0.8661232	0.110076	-1.306	0.1917	

# Cox Proportional Hazards Reduced Model (1)

### Model Equation:

$$log(h_i) = log(h_0) (\beta_1 X_{Group} + \beta_2 X_{Age} + \beta_3 X_{Sex = M} + \beta_4 X_{RSBP} + \beta_5 X_{RATRIAL = Y} + \beta_6 X_{RVISFINF=Y} + \beta_7 X_{Group \times Age})$$

Variables	coef	exp(coef)	se(coef)	Z	Pr(> z ) Significance
GroupAspirin	0.608978	1.8385521	0.370209	1.645	0.1 .
GroupL_Hep	-0.1427	0.8670139	0.458286	-0.311	0.7555
GroupH_Hep	0.498204	1.6457621	0.450767	1.105	0.2691
AGE	0.057614	1.0593063	0.003457	16.666	2.00E-16 ***
SEXM	0.010551	1.0106066	0.036888	0.286	0.7749
RSBP	-0.00311	0.9968945	0.000667	-4.662	3.13E-06 ***
RATRIALY	0.553481	1.7392964	0.040093	13.805	2.00E-16 ***
RVISINFY	0.33507	1.398038	0.036741	9.12	2.00E-16 ***
GroupAspirin:AGE	-0.00866	0.9913809	0.004747	-1.823	0.0682 .
GroupL_Hep:AGE	0.002388	1.0023912	0.005845	0.409	0.6828
GroupH_Hep:AGE	-0.00571	0.9943063	0.005804	-0.984	0.3252

Model	Log Likelihood	Chisq	Df	P(> Chi )
Full Model	-28739			
Reduced Model (1)	-28744	11.27	12	0.506

Likelihood Ratio Test

# Cox Proportional Hazards Reduced Model (2)

### Model Equation:

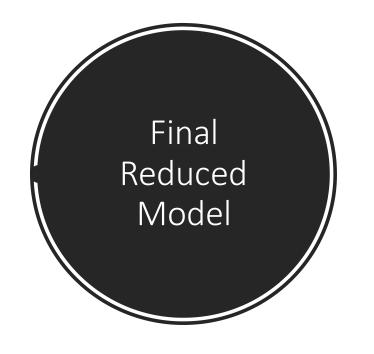
$$log(h_i) = log(h_0) (\beta_1 X_{Group} + \beta_2 X_{Age} + \beta_3 X_{RSBP} + \beta_4 X_{RATRIAL} = \gamma + \beta_5 X_{RVISFINF=Y)})$$

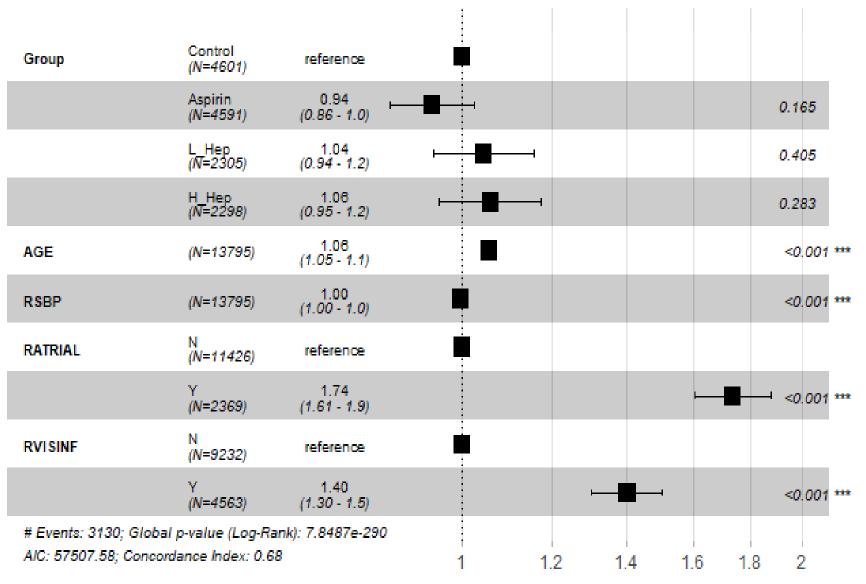
Variables	coef	exp(coef)	se(coef)	Z	Pr(> z ) Significance
GroupAspirin	-0.06145	0.9403968	0.044288	-1.388	0.165
GroupL_Hep	0.044005	1.044988	0.052816	0.833	0.405
GroupH_Hep	0.056924	1.058575	0.052976	1.075	0.283
AGE	0.054077	1.0555655	0.001996	27.093	2.00E-16 ***
RSBP	-0.00314	0.9968629	0.000666	-4.72	2.36E-06 ***
RATRIALY	0.552014	1.7367474	0.040064	13.778	2.00E-16 ***
RVISINFY	0.336335	1.3998074	0.036717	9.16	2.00E-16 ***

Model	Log Likelihood	Chisq	Df	P(> Chi )
Reduced Model (1)	-28744			
Reduced Model (2)	-28747	5.3222	4	0.2558

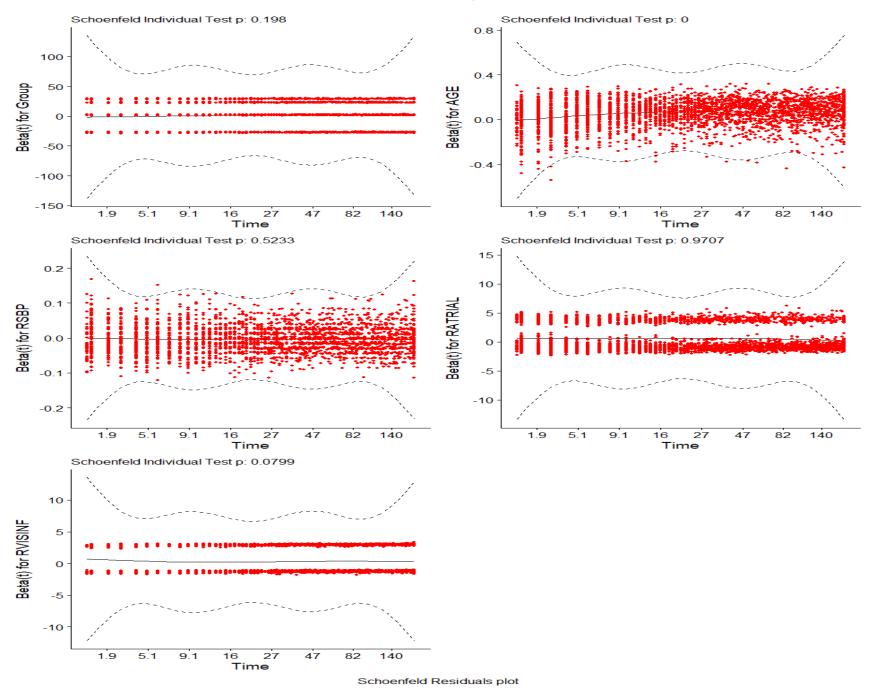
Likelihood Ratio Test

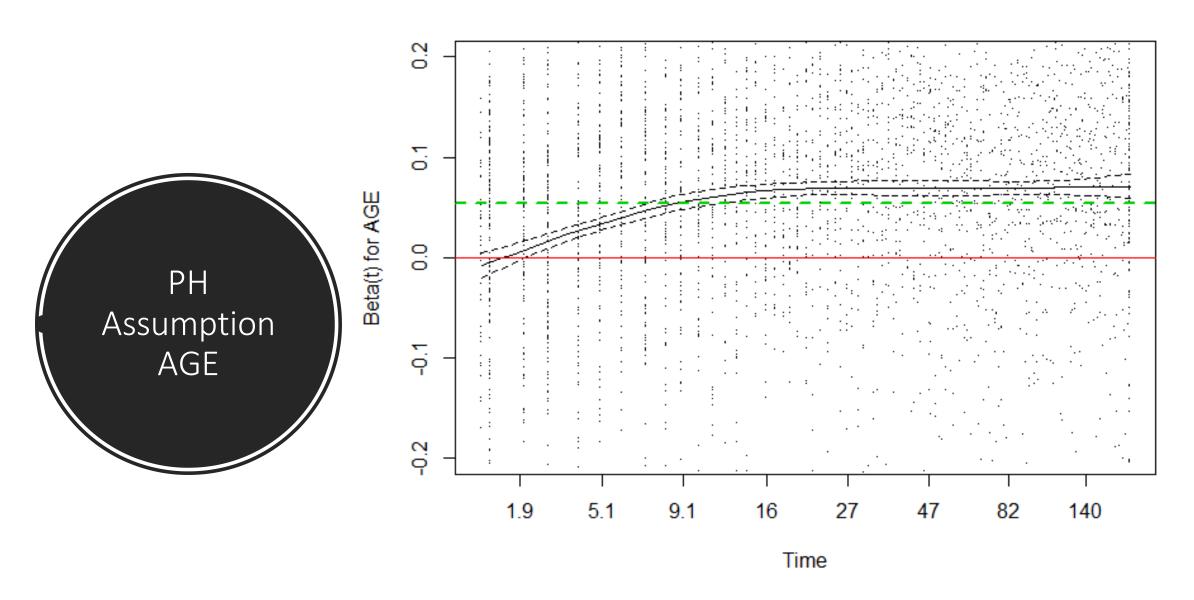
### Hazard ratio



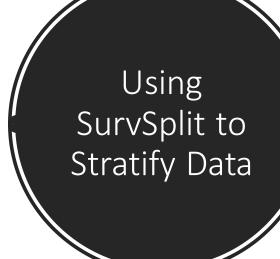








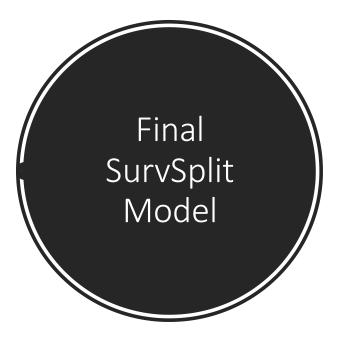
There is a noticeable change in slope before 16 days for the effect of age so stratifying age might help meeting the assumption



Group	SEX	AGE	RSBP	RATRIAL	RVISINF	TD	DIED
<fctr></fctr>	<fctr></fctr>	<int></int>	<int></int>	<fctr></fctr>	<fctr></fctr>	<dbl></dbl>	<dbl></dbl>
Control	F	73	120	N	N	8	1
Control	М	74	160	N	Υ	180	0
Control	М	80	200	Υ	Υ	180	0
Control	М	61	180	N	Υ	180	0
Control	М	70	135	N	N	180	0
Control	М	62	170	N	N	180	0
Control	F	87	170	N	N	17	1
Control	М	73	175	N	N	180	0
Control	М	71	150	N	N	180	0
Control	М	63	180	Υ	N	180	0

Group	SEX	AGE	RSBP	RATRIAL	RVISINF	id	tstart	TD	DIED	tgroup
<fctr></fctr>	<fctr></fctr>	<int></int>	<int></int>	<fctr></fctr>	<fctr></fctr>	<int></int>	<dbl></dbl>	<dbl></dbl>	<dbl></dbl>	<dbl></dbl>
Control	F	73	120	N	N	1	0	4	0	1
Control	F	73	120	N	N	1	4	8	1	2
Control	M	74	160	N	Y	2	0	4	0	1
Control	М	74	160	N	Υ	2	4	16	0	2
Control	М	74	160	N	Y	2	16	180	0	3
Control	М	80	200	Υ	Y	3	0	4	0	1
Control	М	80	200	Υ	Y	3	4	16	0	2
Control	М	80	200	Y	Υ	3	16	180	0	3
Control	М	61	180	N	Y	4	0	4	0	1
Control	М	61	180	N	Y	4	4	16	0	2

coxph.fit\_FINAL <- coxph(Surv(tstart, TD, DIED) ~ Group+RSBP+RATRIAL+RVISINF + AGE:strata(tgroup), data=data\_tf, t
ies ="breslow")
summary(coxph.fit\_FINAL)</pre>



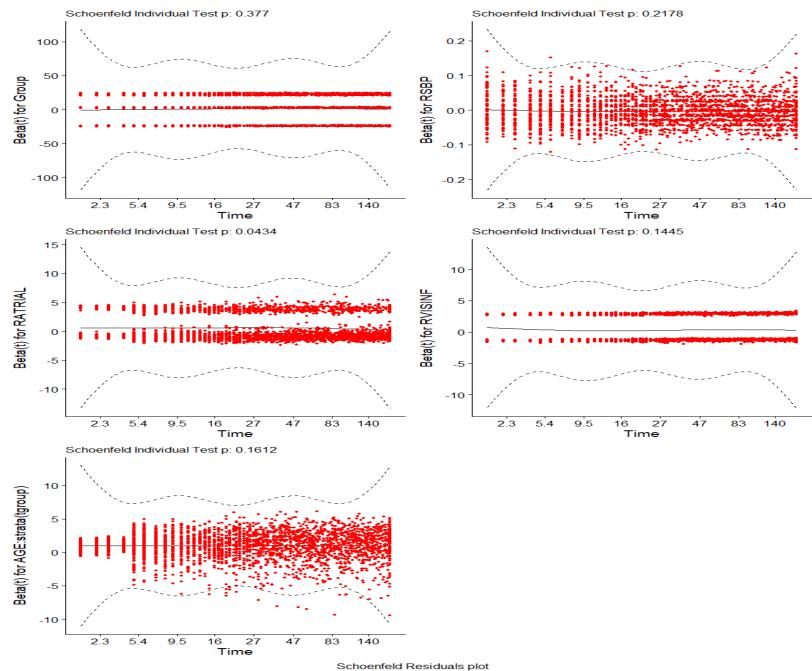
### Model Equation:

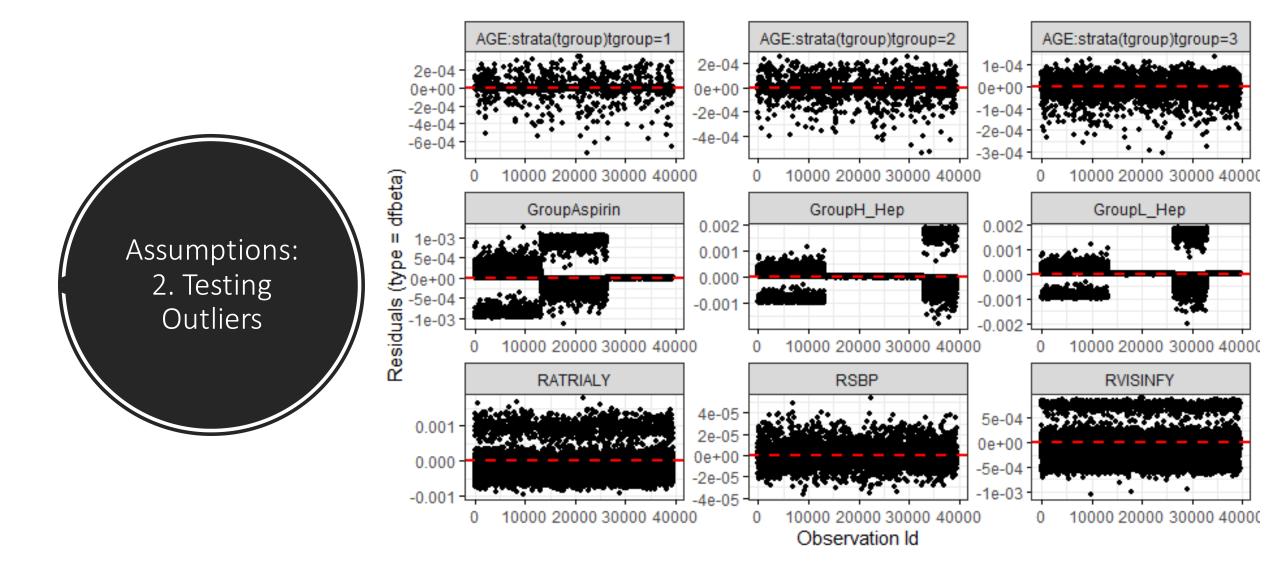
$$log(h_i) = \beta_1 X_{Control} + \beta_2 X_{RSBP} + \beta_3 X_{RATRIAL = Y} + \beta_4 X_{RVISINF = Y} + \beta_5 X_{AGE:tgroup=1} + \beta_6 X_{AGE:tgroup=2} + \beta_7 X_{AGE:tgroup=3}$$

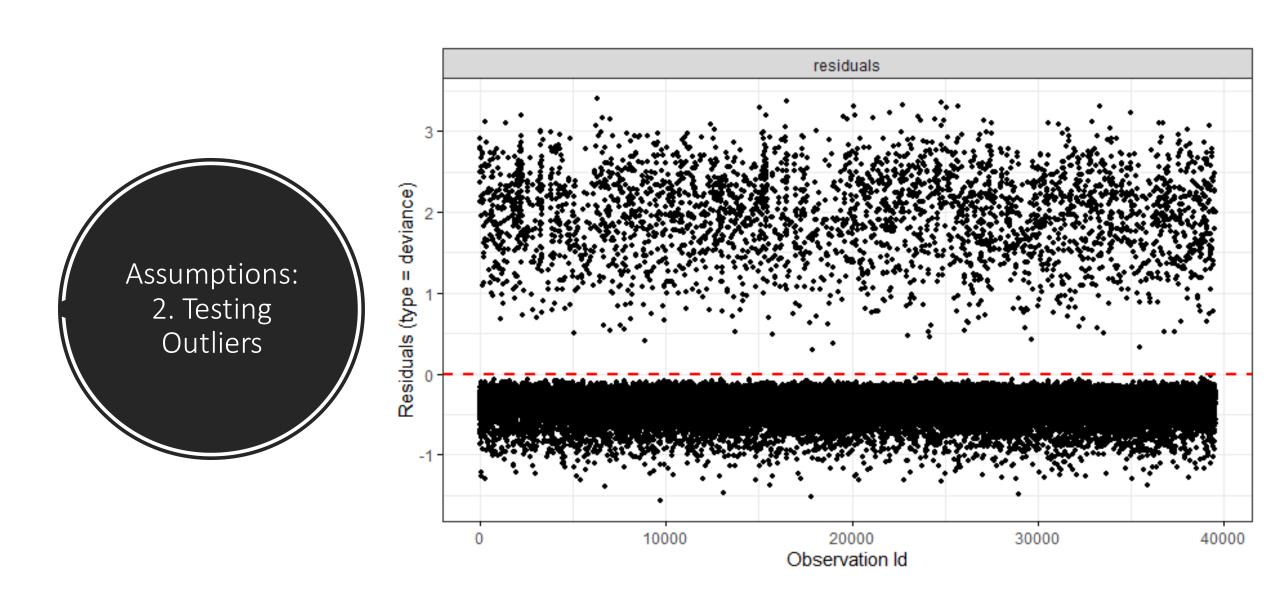
### Aspirin group is borderline significant at 95% of CI

Variables	coef	exp(coef)	se(coef)	Z	Pr(> z )
GroupAspirin	-0.073757	0.928898	0.044645	-1.652	0.09852
GroupL_Hep	0.05114	1.052471	0.052977	0.965	0.33438
GroupH_Hep	0.058118	1.05984	0.053268	1.091	0.27525
RSBP	-0.002975	0.99703	0.000669	-4.446	8.74E-06
RATRIALY	0.550428	1.733996	0.040332	13.647	2.00E-16
RVISINFY	0.339934	1.404854	0.036961	9.197	2.00E-16
AGE:strata(tgroup)tgroup=1	0.013189	1.013276	0.00406	3.249	0.00116
AGE:strata(tgroup)tgroup=2	0.055798	1.057384	0.00387	14.419	2.00E-16
AGE:strata(tgroup)tgroup=3	0.069314	1.071773	0.002766	25.062	2.00E-16

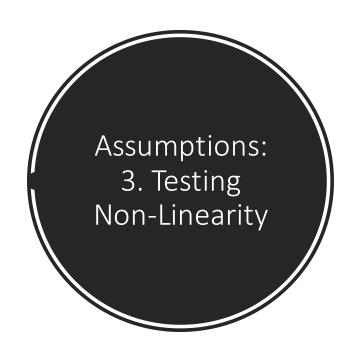


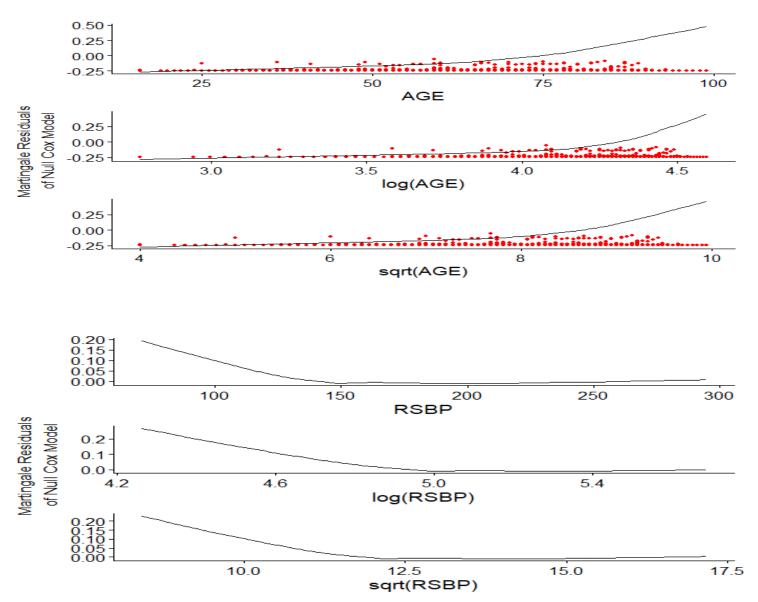




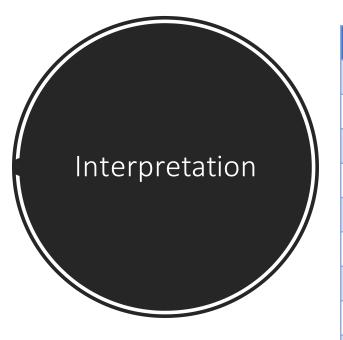


#### Martingale Plot of Residuals





Hazard for Aspirin is slightly lower than the low heparin and high heparin groups.



Variables	exp(coef)	exp(-coef)	lower .95	upper .95
GroupAspirin	0.9289	1.0765	0.8511	1.0138
GroupL_Hep	1.0525	0.9501	0.9487	1.1676
GroupH_Hep	1.0598	0.9435	0.9548	1.1765
RSBP	0.997	1.003	0.9957	0.9983
RATRIALY	1.734	0.5767	1.6022	1.8766
RVISINFY	1.4049	0.7118	1.3067	1.5104
AGE:strata(tgroup)tgroup=1	1.0133	0.9869	1.0052	1.0214
AGE:strata(tgroup)tgroup=2	1.0574	0.9457	1.0494	1.0654
AGE:strata(tgroup)tgroup=3	1.0718	0.933	1.066	1.0776



Variables	coef	exp(coef)	se(coef)	Z	Pr(> z )	Significance
GroupAspirin	-7.32E-02	9.29E-01	4.47E-02	-1.64	0.10094	
GroupL_Hep	5.42E-02	1.06E+00	5.30E-02	1.023	0.30642	
GroupH_Hep	6.12E-02	1.06E+00	5.33E-02	1.148	0.25081	
RSBP	-2.37E-02	9.77E-01	5.01E-03	-4.725	2.30E-06	***
I(RSBP^2)	6.29E-05	1.00E+00	1.50E-05	4.184	2.87E-05	***
RATRIALY	5.53E-01	1.74E+00	4.03E-02	13.698	2.00E-16	***
RVISINFY	3.40E-01	1.41E+00	3.70E-02	9.209	2.00E-16	***
AGE:strata(tgroup)tgroup=1	1.33E-02	1.01E+00	4.05E-03	3.284	0.00102	**
AGE:strata(tgroup)tgroup=2	5.57E-02	1.06E+00	3.86E-03	14.426	2.00E-16	***
AGE:strata(tgroup)tgroup=3	6.91E-02	1.07E+00	2.76E-03	25.046	2.00E-16	***

Variables	exp(coef)	exp(-coef)	lower .95	upper .95
GroupAspirin	0.9294	1.076	0.8515	1.0144
GroupL_Hep	1.0557	0.9473	0.9516	1.1712
GroupH_Hep	1.0631	0.9407	0.9577	1.1801
RSBP	0.9766	1.024	0.9671	0.9862
I(RSBP^2)	1.0001	0.9999	1	1.0001
RATRIALY	1.7378	0.5755	1.6057	1.8807
RVISINFY	1.4055	0.7115	1.3073	1.5111
AGE:strata(tgroup)tgroup=1	1.0134	0.9868	1.0054	1.0214
AGE:strata(tgroup)tgroup=2	1.0572	0.9459	1.0493	1.0653
AGE:strata(tgroup)tgroup=3	1.0715	0.9333	1.0657	1.0773

# Discussion

## Study Limitations

- Large overlap in survival curve and issues with proportionality assumption
  - Alternative modelling approach involved stratifying age and cutting time intervals
- Higher order was not directly accounted for in our SurvSplit model
  - Schoenfeld residuals can not be plotted
  - RSBP showed significant higher order terms
- Systolic blood pressure was not binned
  - Not certain if effect size is the same across each interval
  - Extreme ends of blood pressure (<140 and >200) reduced risk of death

# What Insight | Was Gained?

- The main contributors to survival rates in patients with stroke were
  - Age
  - Systolic Blood Pressure
  - Atrial Fibrillation
  - Visible Infarcts
- Sex was not a significant predictor of one's survival rate
- There was not a significant difference between any treatment groups. However, aspirin was borderline significant.

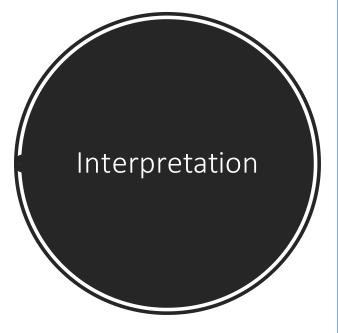
#### Takeaway:

- Future modelling should avoid relying on proportionality (additive cox model)
- Physicians may want to reconsider providing heparin to patients suffering from re-occurring stroke in the future

### References

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- 2. International Stroke Trial Collaborative Group. "The International Stroke Trial (IST): a randomized trial of aspirin, subcutaneous heparin, both, or neither among 19435 patients with acute ischaemic stroke," Lancet, vol. 349, pp. 1569-1581, 1997.
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### Appendix: Full Interpretation of the Hazard Ratios



Variables	Interpretation
GroupAspirin	The hazard ratio for patients in the Aspirin group to control group is $0.9289$ (CI $95\% = 0.8511 - 1.0138$ ).
GroupL_Hep	The hazard ratio for patients in the low heparin group to control group is $1.0525$ (CI95% = $0.9487 - 1.1676$ ).
GroupH_Hep	The HR for patients in the high heparin group to control group is $1.0598$ (CI95% = $0.9548 - 1.1765$ ).
	The HR for systolic blood pressure (RSBP) is $0.997$ (Cl95% = $0.9957 - 0.9983$ ). As blood pressure increases by
RSBP	1 mm Hg then the odds of dying decreases by 0.3% (1-0.997 = 0.003 = 0.3%).
	The HR for RATRIAL is $1.734$ (CI95% = $1.6022 - 1.8766$ ). It indicates that the relative risk of death for patients
RATRIALY	with atrial fibrillation is 1.734 times higher than patients without it.
	The HR for RVISINF is $1.4049$ (CI95% = $1.3067 - 1.5104$ ). So, the relative risk is $1.4049$ times more for those
RVISINFY	who do have a visible infarct in comparison to those who don't
	THE HR for age in the first time group $(0-4 \text{ days})$ is 1.0133 (CI95% = 1.0052 $-$ 1.0214). As age increases by 1
AGE:strata(tgroup)tgroup=1	year the odds of dying increases by 1.33% (1-1.0133 = 0.0133 = 1.33%).
	The HR for age in the second time group $(4 - 16 \text{ days})$ is $1.0574$ (CI95% = $1.0494 - 1.0654$ ). As age increases
AGE:strata(tgroup)tgroup=2	by 1 year the odds of dying increases by 5.74% (1-1.0574 = 0.0574 = 5.74%).
	The HR for age in the third time group $(16 - 180 \text{ days})$ is $1.0718$ (CI95% = $1.066 - 1.0776$ ). As age increases
AGE:strata(tgroup)tgroup=3	by 1 year the odds of dying increases by 7.18% (1-1.0718 = 0.0718 = 7.18%).