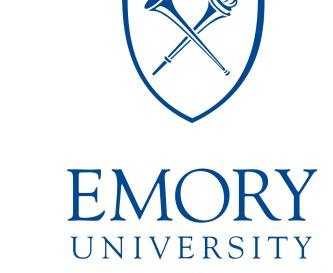


Robust Nonparametric Inference for Stochastic Interventions Under Multi-Stage Sampling Nima S. Hejazi, Mark J. van der Laan, and David C. Benkeser

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OVERVIEW & MOTIVATIONS

- 1. We consider the problem of efficiently estimating the effect of a stochastic shift interventions for problem settings in which multi-stage sampling complicates the observed data structure.
- 2. We present a novel approach: an augmented targeted maximum likelihood estimator of a parameter defined as the outcome under a stochastic intervention with
 - consistency and efficiency guarantees even under multi-stage sampling, and
 - a form of multiple double robustness inherited from its constituent parts.
- 3. The proposed nonparametric estimation procedure provably attains fast convergence rates even when incorporating machine learning estimators.
- 4. A recent software implementation the "txshift" R package [2] has been developed for applying this methodology in complete generality, including for causal inference and variable importance analyses.

DATA: HIV VACCINE TRIALS

- We illustrate the utility of our approach by applying the new method and software in an investigation of the effects of immune response biomarkers on HIV vaccine efficacy.
- Question of interest: How does risk of HIV infection differ under posited shifts of the distribution of an immune response in the vaccine arm of an efficacy trial?
- We simulate a data structure based on the HVTN 505 HIV-1 efficacy trial, as in [3]:
 - About 2500 participants, with all observed cases matched to controls.
 - Background (W): sex, age, BMI, etc.
 - Intervention (*A*): immunobiomarkers (i.e., T-Cell profiles from ICS assays on preserved HIV-1-stimulated PBMCs).
 - Outcome (Y): HIV-1 infection status.
- Takeaway: Variable importance measure for ranking multiple immune responses by their utility as immunogenicity study endpoints in future HIV-1 vaccine trials.

METHODOLOGY I: THE EFFECT OF A STOCHASTIC INTERVENTION

- Consider $O = (W, A, Y) \sim P_0 \in \mathcal{M}$, with no assumptions placed on the statistical model \mathcal{M} .
- Rather than a deterministic intervention, consider a shift of the treatment (i.e., instead of A=a, consider a shift of the intervention so that $A=a+\delta$ for an aribtrary δ).
- As a comparison with the general linear model, the shift δ may be thought of as a part of the nonparametric analog to the slope of a regression line i.e., $\beta_{\text{slope}}^{\text{NP}} = \frac{\mathbb{E}[Y|A+\delta]-\mathbb{E}[Y|A]}{\delta^2}$.
- To protect against positivity violations, make the shifting mechanism a function of the observed data: $d(a, w) = a + \delta$, if $a + \delta < u(w)$ and d(a, w) = a otherwise.

We consider a simple causal target parameter, introduced in [4]:

$$\Psi(P) = \mathbb{E}_{P} \overline{Q}(d(A, W), W), \tag{1}$$

for which the efficient influence function (EIF), given in [1], is

$$D(P)(o) = H(a, w)y - \overline{Q}(a, w) + \overline{Q}(d(a, w), w) - \Psi(P),$$
(2)

where the auxiliary term, H(a, w), takes the form $H(a, w) = \mathbb{I}(a < u(w)) \frac{g_0(a - \delta|w)}{g_0(a|w)} + \mathbb{I}(a \ge u(w) - \delta)$

METHODOLOGY II: CORRECTIONS FOR MULTI-STAGE SAMPLING

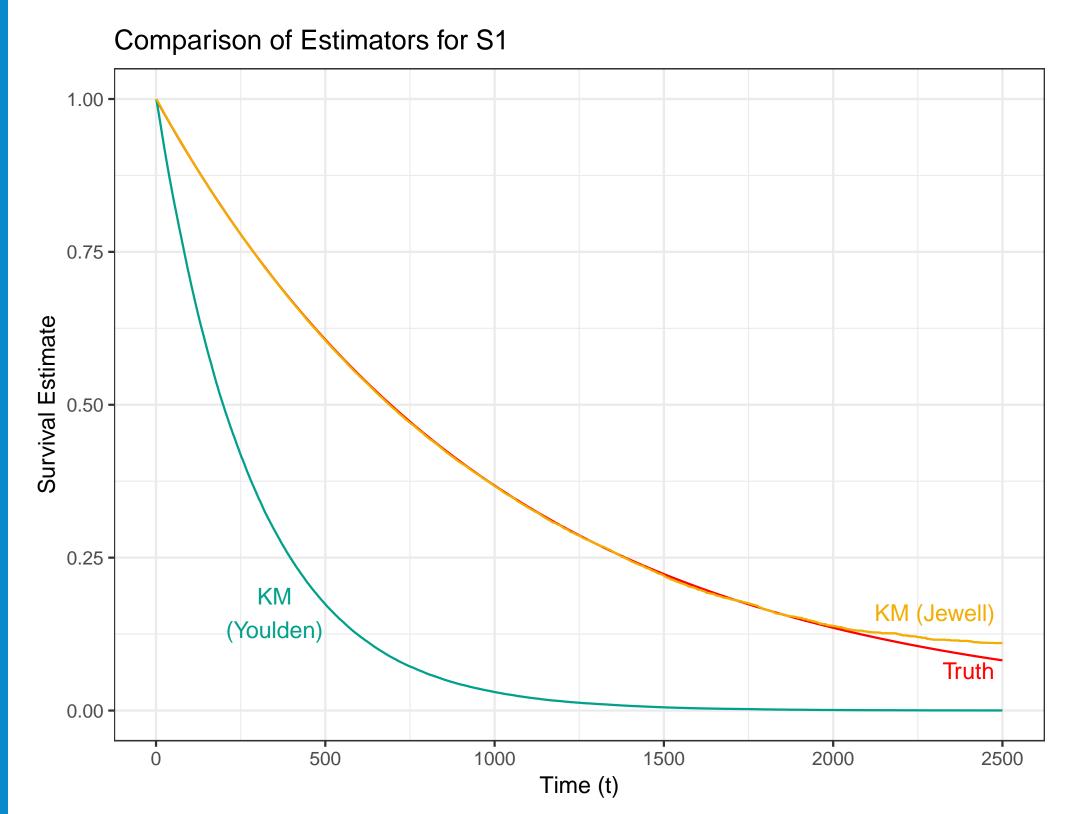
• The second approach is non-parametric and uses Kaplan-Meier's estimator defined as

$$\widehat{S}(t) = \prod_{i:t(i) < t} \left(1 - \frac{d_i}{n_i} \right), \quad t \ge 0,$$

where d_i and n_i are the respective numbers of death and individual at risks at the ordered time $t^{(i)}$, $i = 1, \ldots, n$.

- Youlden et al. [?] only uses patients for whom no occurrence of a second melanoma is observed, in the estimation of S_1 and ignores the other patients, which causes a bias.
- Jewell corrects their estimator by including all the patients in the study.
- The ones that were excluded by Youlden et al. [?] still contain information about λ_1 : those are censored observations at time U.









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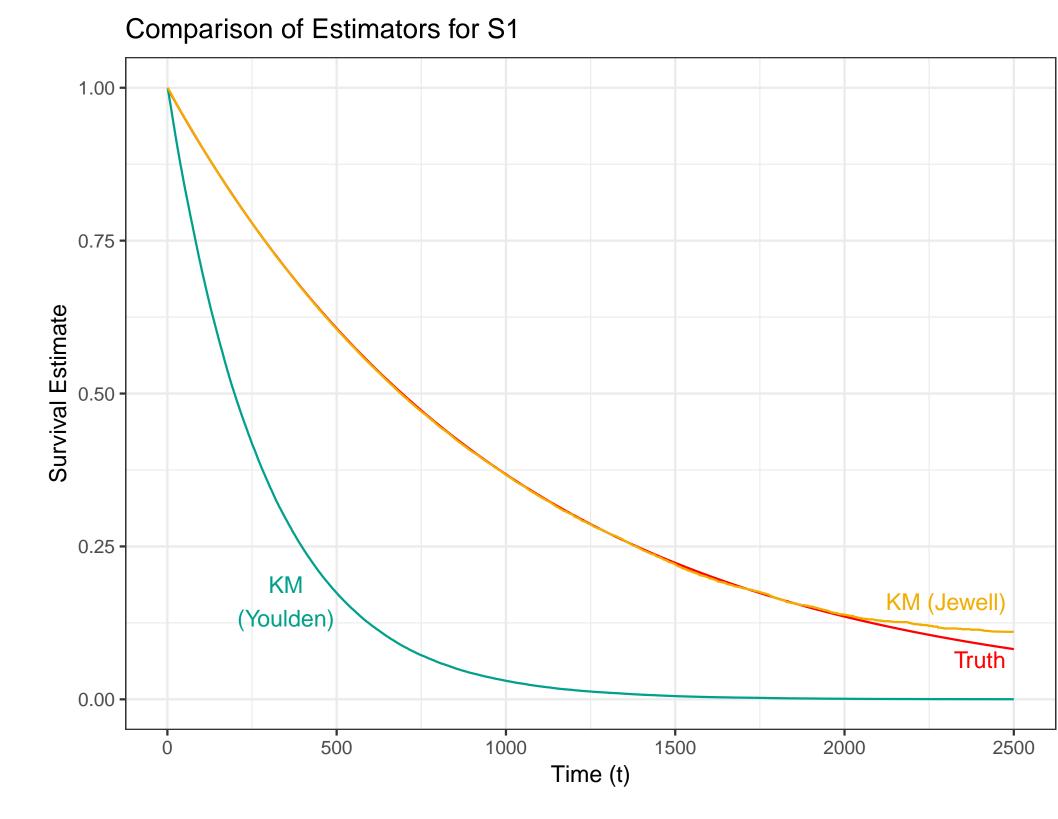


Figure 2: This figure demonstrates...

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