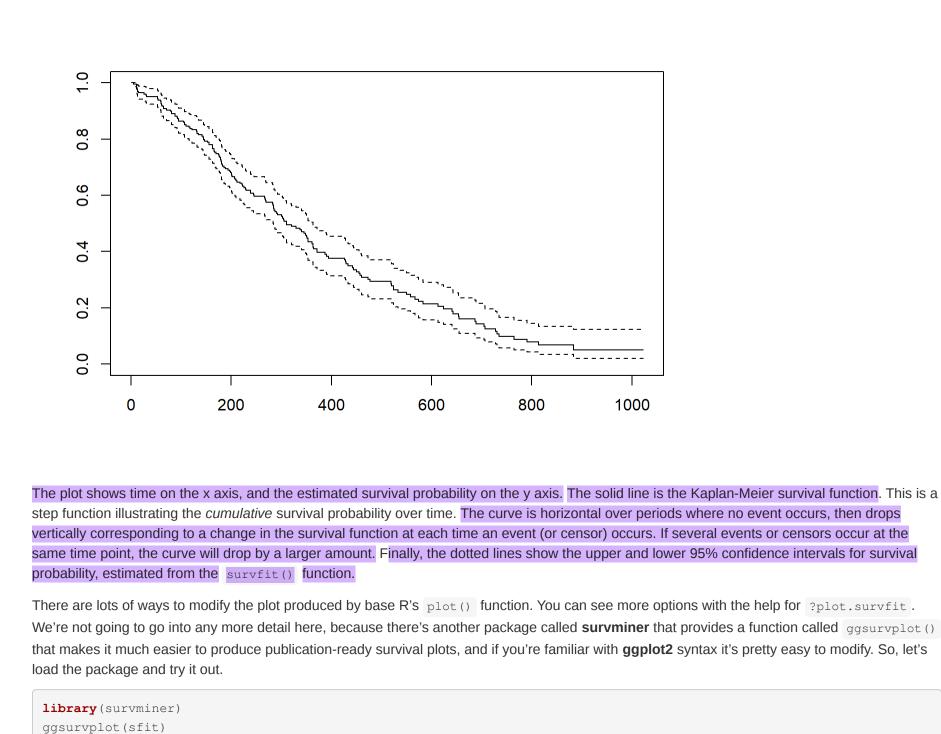
LIFE707 Topic 8: Survival analysis **Liam Dougherty** Survival analysis helps us understand how the chance of something happening (like a patient passing away) changes over time. 2024-09-10 It does this by creating a survival function, which shows the likelihood that the event hasn't happened yet (for example, the patient is still alive) at any given time. Time-to-event data In this exercise we will look at a special type of data called time-to-event data. Here, each data point represents the time from the start of the study period until some event of interest was observed, usually from a longitudinal study where samples or subjects are observed regularly over time. This type of data is common in clinical studies, where patients are assessed regularly (e.g. once a week) until some event is observed (e.g. death, onset of disease, relapse). There are two common features that make this type of data unusual: 1. The rate at which the event occurs if often not constant. For example: the risk of death after heart surgery is highest immediately post-op, decreases as the patient recovers, then rises slowly again as the patient ages. So important features of the response may not be captured in a single metric like a mean or median. 2. The event might not be observed in all samples or subjects during the observation period. This is very common in clinical studies, where the study period might end without all patients dying. This could also happen due to the sample/subject dropping out of the study for reasons other than death, or some other loss to follow-up. These data are said to be **censored**, because the time they are lost is likely an underestimate of their true survival. Instead, we can analyse this type of data using survival analysis. Survival analysis specifically estimates how the risk (or hazard) of some event happening changes over time. It does this by producing a survival function, which estimates the probability that the event of interest does not occur (e.g. a patient is still alive) at each time point. Survival analysis in R The core survival analysis functions are in the survival package. The survival package is one of the few "core" packages that comes bundled with your basic R installation, so you probably didn't need to install.packages() it. But, you'll need to load it like any other library when you want to use it. We'll also want to load the survminer package, which provides much nicer Kaplan-Meier plots out-of-the-box than what you get out of base graphics. Make sure these packages are installed before you load them. library(survival) library(survminer) ## Warning: package 'survminer' was built under R version 4.4.1 ## Warning: package 'ggpubr' was built under R version 4.4.1 The core functions in the survival package are not very intuitive. Basically, before you can make a survival curve, you need to create a "survival object" using <code>surv()</code> . You then use the <code>survfit()</code> function to create a survival curve which you can plot, or another function to perform statistical tests using the Surv() object. We're going to be using the built-in lung cancer dataset that ships with the survival package. You can get some more information about the dataset by running ?lung, then clicking on the lung{survival} link in RStudio. The help tells us there are 10 variables in this data: ?lung 1. inst: Institution code 2. time: Survival time in days 3. status: censoring status 1=censored, 2=dead 4. age: Age in years 5. sex: Male=1 Female=2 6. ph.ecog: ECOG performance score as rated by the physician. 0=asymptomatic, 1= symptomatic but completely ambulatory, 2= in bed <50% of the day, 3= in bed > 50% of the day but not bedbound, 4 = bedbound 7. ph.karno: Karnofsky performance score (bad=0-good=100) rated by physician 8. pat.karno: Karnofsky performance score as rated by patient 9. meal.cal: Calories consumed at meals 10. wt.loss: Weight loss in last six months (pounds) You can access the data just by running lung, as if you had read in a dataset and called it lung. You can operate on it just like any other data We are interested in three columns: time, status, and sex. The status column contains the censoring status of each observation, and is required to create a survival object, and to do any survival analyses. Importantly, the Surv () function will accept either: TRUE/FALSE (where TRUE is event and FALSE is censored), 1/0 (where 1 is event and 0 is censored), or 2/1 (where 2 is event and 1 is censored). In this case we have the last option, which is the least common. Typically you will see 1=event, 0=censored. Censoring happens when the study ends, or a patient leaves before the event occurs. The survival function First we create a survival object using the surv function do not factor the status column s <- Surv(lung\$time, lung\$status)</pre> Here, the first argument in the brackets specifies which column has the time-to-event data, and the second specifies which column has the censoring status information. Surv will automatically check whether you're using 0/1 or 1/2 to represent censored vs "dead", respectively. If we display the new object: [1] 306 455 1010+ 210 883 1022+ 310 361 218 166 170 654 [13] 728 71 567 144 613 707 61 88 301 81 624 371 [25] 394 520 574 118 390 12 473 26 533 107 53 965+ 93 731 460 153 433 145 583 95 303 [37] 814 519 [49] 643 765 735 189 53 246 689 65 5 132 687 345 444 223 175 60 163 65 208 821+ 428 230 840+ 305 11 132 226 426 705 363 11 176 791 95 196+ 167 [73] [85] 806+ 284 641 147 740+ 163 655 239 88 245 588+ 30 [97] 179 310 477 166 559+ 450 364 107 177 156 529+ 11 [109] 429 351 15 181 283 201 524 13 212 524 288 363 [121] 442 199 550 54 558 207 92 60 551+ 543+ 293 202 [133] 353 511+ 267 511+ 371 387 457 337 201 404+ 222 ## [145] 458+ 356+ 353 163 31 340 229 444+ 315+ 182 156 329 [157] 364+ 291 179 376+ 384+ 268 292+ 142 413+ 266+ 194 320 [169] 181 285 301+ 348 197 382+ 303+ 296+ 180 186 145 ## [181] 300+ 284+ 350 272+ 292+ 332+ 285 259+ 110 286 270 81 [193] 131 225+ 269 225+ 243+ 279+ 276+ 135 79 59 240+ 202+ ## [205] 235+ 105 224+ 239 237+ 173+ 252+ 221+ 185+ 92+ 13 222+ When you use ~ 1 in the formula, it means that all ## [217] 192+ 183 211+ 175+ 197+ 203+ 116 188+ 191+ 105+ 174+ 177+ individuals in the dataset are treated as part of single grp. If your dataset has a We can see that the object is special type of vector that tells you both how long the subject was tracked for, and whether or not the event occurred treatment variable or the sample was censored (shown by the +). with two levels (Control and Treated) Now, let's fit a survival curve with the survfit () function. Here we'll create a simple curve that doesn't consider any different groupings, so we'll the formula would not have 1. specify just an intercept (e.g. ~1) in the formula that <code>survfit</code> expects. To make the <code>surv()</code> object we can always run the <code>surv()</code> function separately (like we just did). But from here out we'll nest the surv() call within the survfit() call to save one line of code. And we'll use the data= argument to specify which data we're using. sfit <- survfit (Surv (time, status)~1, data=lung) This line of code creates a survival object using the Kaplan-Meier method and generates the overall survival curve for the dataset. sfit ## Call: survfit(formula = Surv(time, status) ~ 1, data = lung) n events median 0.95LCL 0.95UCL ## [1**,**] 228 165 310 Calling the new object gives a very brief summary- e.g. number of subjects, number of events, and the median time until the event occurs across the whole sample. Table Header: It's more useful to run summary on the object. This will show a life table: time: The time when something (an event like death or censoring) happened. summary(sfit) n.risk: The number of people still "at risk" (alive or uncensored) right before ## Call: survfit(formula = Surv(time, status) ~ 1, data = lung) n.event: The number of events (e.g., deaths) that happened at that # #specific time. # #time n.risk n.event survival std.err lower 95% CI upper 95% CI ## 5 228 1 0.9956 0.00438 0.9871 1.000 survival: The probability that a person survives past that time. ## 11 227 3 0.9825 0.00869 0.9656 1.000 std.err: The standard error, which tells how much uncertainty there 1 0.9781 0.00970 ## 12 224 0.9592 0.997 is in the survival estimate. ## 13 223 2 0.9693 0.01142 0.9472 0.992 ## 15 221 1 0.9649 0.01219 0.9413 0.989 ## 220 1 0.9605 0.01290 0.9356 0.986 ## 30 219 0.983 1 0.9561 0.01356 0.9299 ## 31 218 1 0.9518 0.01419 0.9243 0.980 Kaplan-Meier Formula: ## 2 0.9430 0.01536 53 217 0.9134 0.974 The survival probability at a given time is calculated as: 1 0.9386 0.01590 ## 54 215 0.9079 0.970 ## 59 214 1 0.9342 0.01642 0.9026 0.967 $S(t) = S(previous) \times (1 - (n.event / n.risk))$ # #213 0.8920 60 2 0.9254 0.01740 0.960 Where: ## 61 211 1 0.9211 0.01786 0.8867 0.957 62 1 0.9167 0.01830 0.8815 0.953 S(t): Survival probability at the current time 0.8711 ## 65 209 2 0.9079 0.01915 0.946 S(previous): Survival probability at the previous time point. ## 71 207 1 0.9035 0.01955 0.8660 0.943 n.event: The number of events (e.g., deaths) at the current time. 79 206 1 0.8991 0.01995 0.8609 0.939 n.risk: The number of people "at risk" (alive and uncensored) 2 0.8904 0.02069 just before the event. # #81 205 0.8507 0.932 ## 88 203 2 0.8816 0.02140 0.8406 0.925 92 201 1 0.8772 0.02174 0.8356 0.921 1 0.8728 0.02207 # #0.8306 93 199 0.917 ## 95 198 2 0.8640 0.02271 0.8206 0.910 ## 105 196 0.906 1 0.8596 0.02302 0.8156 It is worth trying to understand this table. Each time a subject is lost to the event or to censoring, a new row is added. The time column specifies the time the event or censor happened, and the n.event column shows how many subjects were lost at that time (e.g. multiple subjects might be lost on the same day). The n.risk column shows the number of subjects still at risk (i.e. that haven't been lost yet). This goes down at each step according to how many events were observed at this time. Finally, the survival column shows the estimated likelihood of survival to this time point. Note that at each time point the risk (or hazard) of the event happening is therefore 1/survival. One question we may want to ask is: what is the survival probability at a specific time point? You can estimate this roughly by reading the value in the survival column for the row closest to the time you want. Or you can specify a specific time directly using the times argument. For example, to estimate survival after 1 year: summary(survfit(Surv(time, status) ~ 1, data = lung), times = 365) ## Call: survfit(formula = Surv(time, status) ~ 1, data = lung) ## ## time n.risk n.event survival std.err lower 95% CI upper 95% CI 65 121 0.409 0.0358 0.345 0.486 This tells us that the probability of survival at time 365 is 40.9% (and gives 95% confidence intervals). Alternatively, you can specify times that you want the life table to display. For example, we can specify a sequence of numbers using the seq function. Here, you specify the minimum, maximum, and the size of the increments. First, we should check what the range of times is in the dataset: range(lung\$time) ## [1] 5 1022 Then we use the seg function to display the survival probability in regular intervals. In general this is a much nicer way to view the life table anyway. Lower 95% CI: The lower bound of the confidence interval, summary(sfit, times=seq(0, 1100, 100))meaning the minimum survival probability expected at that time point. Upper 95% CI: The upper bound of the confidence interval, ## Call: survfit(formula = Surv(time, status) ~ 1, data = lung) meaning the maximum survival probability expected at that time point. ## Example: ## time n.risk n.event survival std.err lower 95% CI upper 95% CI At time = 5, the survival probability is 0.9956, ## 0 0 1.0000 0.0000 1.0000 1.000 with a 95% confidence interval of [0.9871, 1.000]. 0.910 ## 100 196 31 0.8640 0.0227 0.8206 This means there is a 95% chance that the true survival ## 200 41 0.6803 0.0311 0.6219 0.744 probability lies between 0.9871 and 1.000. ## 300 0.603 29 0.5306 0.0346 0.4669 400 57 25 0.3768 0.0358 0.3128 0.454 ## 500 41 12 0.2933 0.0351 0.2320 0.371 600 10 0.2136 0.0335 0.290 0.1571 ## 700 16 8 0.1424 0.0303 0.0938 0.216 ## 800 0.0783 0.0246 0.0423 0.145 ## 900 3 0.0503 0.0228 0.0207 0.123 0 0.0503 0.0228 1000 0.0207 0.123 Kaplan-Meier Plots Now that we've fit a survival curve to the data it's pretty easy to visualize it with a Kaplan-Meier plot. Create the survival object if you don't have it yet, and instead of using summary(), use plot(). sfit <- survfit(Surv(time, status)~1, data=lung)</pre> plot(sfit)



1.00

0.75

0.00

0

ggsurvplot(sfit,

250

risk.table = TRUE, # Add risk table

ylab = "Proportion surviving",

ggtheme = theme classic())

showing the number of survivors at different time increments:

xlab = "Time (days)",

legend="none",

sex=1 138 112 270 212 ## sex=2 90 53 426 348

summary(sfit_sex, times=seq(0, 1000, 100))

550

females. For example, survival at time 500 is about half as likely for males (0.22) as for females (0.41).

Now, calling the surv object gives a summary for males and a summary for females. Remember: sex 1= male, sex2= female.

We can also produce a life table separately for males and females. From these tables we can see that males tend to have worse survival than

500

Time

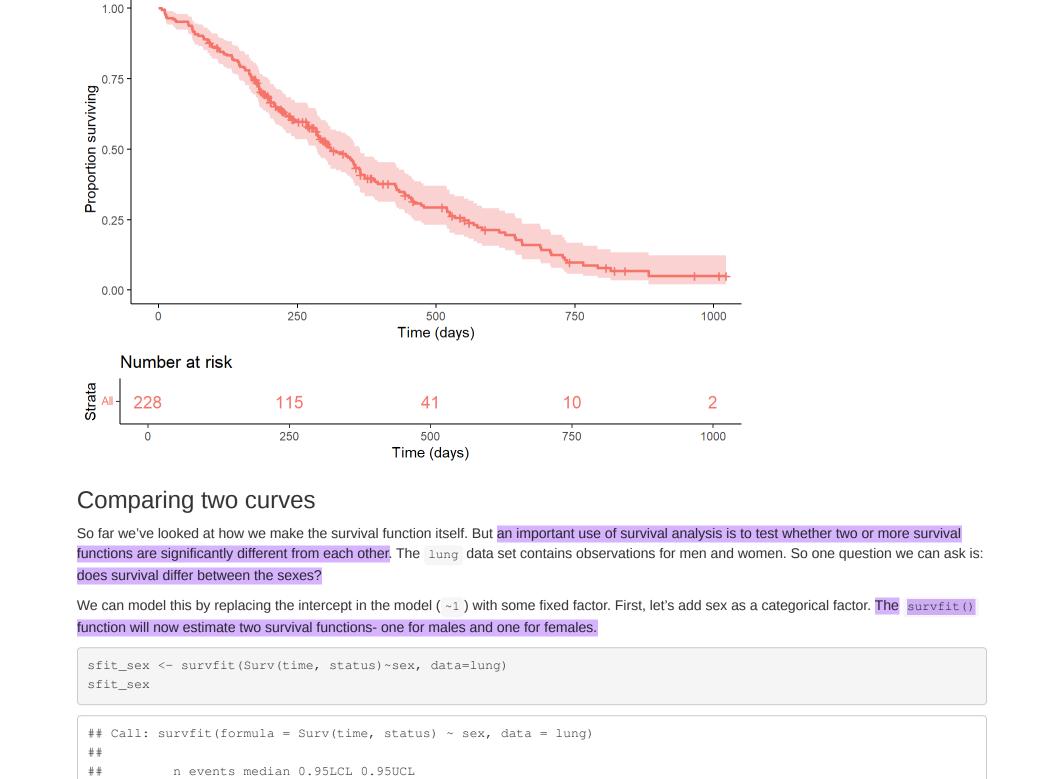
risk.table.col = "strata", # Change risk table color by groups

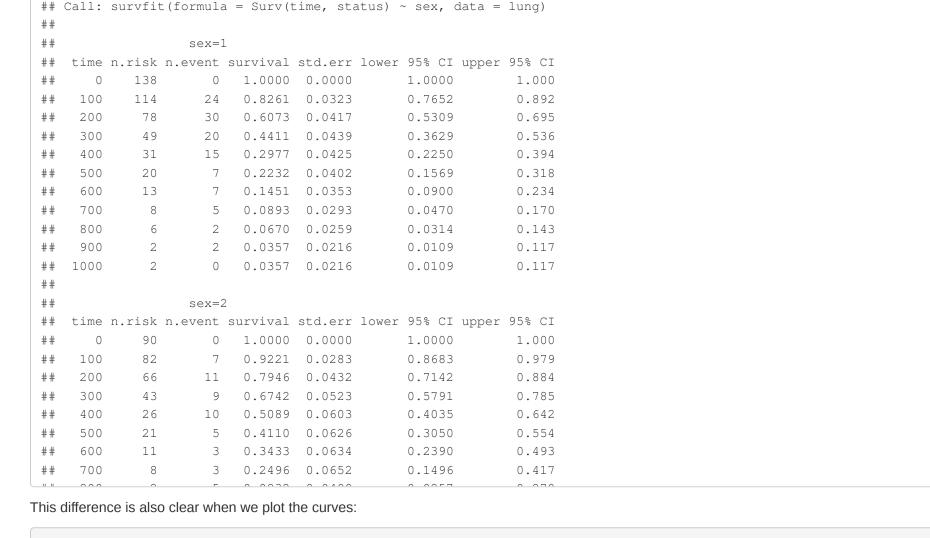
750

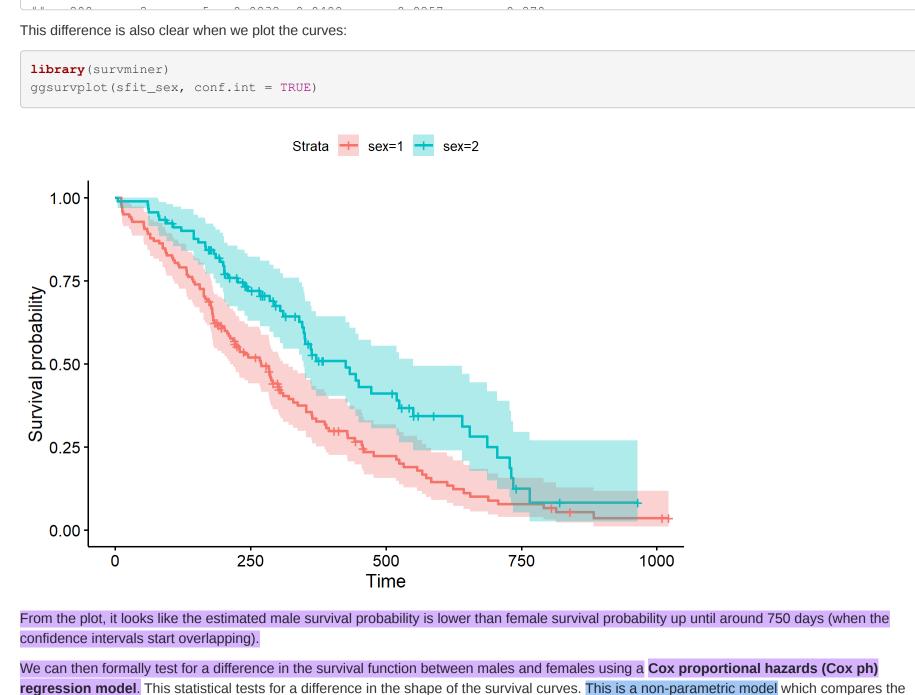
This plot is substantially more informative by default, because it automatically colour codes different groups, adds axis labels, and creates an automatic legend. It also colours in the 95% confidence interval, which looks nicer. You can easily extend the plot to add a table at the bottom

1000

Survival probability







n= 228, number of events= 165 (p < 0.001). ## The hazard ratio of 0.588 indicates that females had a 41.2% coef exp(coef) se(coef) lower risk of death compared to males over the study duration. 0.5880 0.1672 -3.176 0.00149 ** This suggests that survival probability was significantly higher for From the first row, females than males. Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1 variable is a significant The findings are consistent with visual inspection of the survival curves predictor of survival ## exp(coef) exp(-coef) lower .95 upper .95 ## 0.588 1.701 sex Concordance= 0.579 (se = 0.021) From the second row, ## Likelihood ratio test= 10.63 on 1 df, p=0.001we see that females = 10.09 on 1 df, p=0.001have a 41.2% lower ## Score (logrank) test = 10.33 on 1 df, p=0.001hazard (HR = 0.588) than males, with a 95%

The P value of 0.00149 tells us that survival differs significantly between males and females. How can we tell which sex has lower survival? Well,

we can see clearly in the above figures that male survival is lower than female survival. But we can also tell from the model output if we know where to look. The second reported coefficient (exp(coef) in the output= 0.588) is the hazard ratio- the difference in the risk of dying between males and females. And because we haven't specified, R by default sets the first treatment it finds in the data set as the 'reference' treatment. So because males= 1 in this data set, they are taken as the reference level. A value less than one therefore means females have a lower risk of dying than males (and so a higher chance of survival). In absolute terms, 0.588 times as many females died as males across the whole study duration.

The model examines the relationship between sex (a predictor variable)

The Cox proportional hazards analysis revealed

a statistically significant difference in survival between males and females

Colon Data:

Sex:

1 = male0 = female

Status:

1=event

0=censored

and survival time (the response variable) in the lung dataset.

entire survival curve, and so can account for complex changes in the shapes of the curves.

We can see the z score and P value for this comparison using the summary function.

sfit_sex2 <- coxph(Surv(time, status)~sex, data = lung)</pre>

coxph(formula = Surv(time, status) ~ sex, data = lung)

summary(sfit_sex2)

with for the survival analysis.

For this exercise, please complete the following questions:

we know the sex

confidence interval of

(0.4237, 0.816).

(p = 0.00149).

We won't cover this, but you should know that Cox PH regression can also assess the effect of continuous variables, and can model the effect of multiple variables at once. Exercise For this exercise, you will need to use the 'colon' data found in the survival package. This dataset has survival and recurrence information on 929 people from a clinical trial on colon cancer chemotherapy. There are two rows per person, indicated by the event type (etype) variable – etype==1 indicates that row corresponds to recurrence; etype==2 indicates death. You will have to think about which of these 'etypes' you need to work

Lung Data:

1. Look at the help for <code>?colon</code> again. How are sex and status coded? How is this different from the lung data? 2. Create a survival curve separately for males versus females. Run a summary () on this object, showing time points 0, 500, 1000, 1500, and 2000. Do males or females appear to fair better over this time period? 3. Plot a Kaplan-Meier curve for both sexes. Using an appropriate statistical test, determine whether there is a significant difference in survival

Status: 2 = event, 1 = censored; Sex: 1 = male, 2 = female

between males and females.