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#### Estimation of causal effects

#### Arvid Sjölander

Department of Medical Epidemiology and Biostatistics Karolinska Institutet

A short course on concepts and methods in Causal Inference



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# Subject-specific causal effects

Subject	$Y_1$	$Y_0$
August	1	0
Selma	0	0
Fjodor	1	1

- A has a causal effect on Y, for a given subject, if the potential outcomes  $Y_1$  and  $Y_0$  differ for this subject
  - for August, the exposure has an effect:  $Y_1 \neq Y_0$
  - for Selma and Fjodor, the exposure has not effect;  $Y_1 = Y_0$

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### Ideal data

 Let Y<sub>a</sub> be the outcome that we would observe, for a given subject, if the subject potentially received exposure level a

- $Y_1$  is the outcome under exposure
- Y<sub>0</sub> is the outcome under non-exposure
- Y<sub>1</sub> and Y<sub>0</sub> are referred to as potential outcomes
- Ideally and very unrealistically we could observe both potential outcomes for any given subject

Subject	$Y_1$	$Y_0$
August	1	0
Selma	0	0
Fjodor	1	1



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#### Observed data

- August is exposed (A = 1). Thus, for August
  - Y<sub>1</sub> is observed and equal to the factual outcome Y
  - Y<sub>0</sub> is unobserved, or **counterfactual**
- Selma and Fjodor are unexposed (A = 0). Thus, for Selma and Fjodor
  - Y<sub>0</sub> is observed and equal to the factual outcome Y
  - Y<sub>1</sub> is unobserved, or **counterfactual**

Subject	Α	Y	$Y_1$	$Y_0$
August	1	1	1	?
Selma	0	0	?	0
Fjodor	0	1	?	1

# A fundamental problem of causation

- It is very difficult to say whether the exposure causes the outcome for a specific subject
  - because we cannot observe the same subject under two exposure levels simultaneously
- Fortunately, it is much easier to justify causal claims on population levels
  - e.g. 'if everybody would quit smoking, then the incidence of liver cancer would decrease by 15%'

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# How to estimate population causal effects

Everybody exposed



Everybody unexposed



$$Pr(Y_1 = 1) \text{ vs } Pr(Y_0 = 1)$$

- Direct computation of population causal effects requires comparing
  - the whole population under exposure, with
  - the whole population under no exposure
- But just like for any given subject, we cannot in general observe the whole population under two exposure levels
- How can we estimate population causal effects?

# Population causal effects

- Pr(Y<sub>a</sub> = 1) is the proportion of subjects that would develop the outcome, if everybody would receive exposure level a
  - the probability of the outcome if everybody would receive a
- A has a population causal effect on Y if

$$Pr(Y_1 = 1) \neq Pr(Y_0 = 1)$$

A has no population causal effect on Y if

$$Pr(Y_1 = 1) = Pr(Y_0 = 1)$$



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#### **Outline**

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# Solution

$$Pr(Y_1 = 1) = 6/10 = 0.6$$

$$Pr(Y_0 = 1) = 4/10 = 0.4$$

causal risk ratio = 
$$\frac{0.6}{0.4}$$
 = 1.5

• Ideal data:

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· Compute the causal risk ratio



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# Example, cont'd

• Data obtained from a randomized trial:

ID	Α	Y	$Y_1$	$Y_0$
1	1	0	0	?
2	1	1	1	?
3	0	0	?	0
4	1	1	1	?
5	0	0	?	0
6	1	1	1	?
7	0	1	?	1
8	0	1	?	1
9	1	0	0	?
10	0	0	?	0

• Compute the risk ratio

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## Solution

ID	Α	Y	$Y_1$	$Y_0$
1	1	0	0	?
2	1	1	1	?
3	0	0	?	0
4	1	1	1	?
5	0	0	?	0
6	1	1	1	?
7	0	1	?	1
8	0	1	?	1
9	1	0	0	?
10	0	0	?	0

$$Pr(Y = 1|A = 1) = 3/5 = 0.6$$
  
=  $Pr(Y_1 = 1)$ 

$$Pr(Y = 1|A = 0) = 2/5 = 0.4$$
  
=  $Pr(Y_0 = 1)$ 

risk ratio = 
$$\frac{0.6}{0.4} = 1.5$$
  
= causal risk ratio



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## The RCT revisited

ID	Α	Υ	<i>Y</i> <sub>1</sub>	$Y_0$
1	1	0	0	0 (?)
2	1	1	1	0 (?)
3	0	0	0 (?)	0
4	1	1	1	1 (?)
5	0	0	0 (?)	0
6	1	1	1	1 (?)
7	0	1	1 (?)	1
8	0	1	1 (?)	1
9	1	0	0	0 (?)
10	0	0	1 (?)	0

- Compute all the following:
  - Pr(Y = 1|A = 1)
  - $Pr(Y_1 = 1 | A = 1)$
  - $Pr(Y_1 = 1 | A = 0)$
  - $Pr(Y_1 = 1)$

#### 

## Conclusion

- In this randomized trial, association = causation
- This is not a coincidence, it is true in all (ideal) randomized trials
- Let's look closer into why this happens



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# Solution

ID	Α	Y	$Y_1$	$Y_0$
1	1	0	0	0 (?)
2	1	1	1	0 (?)
3	0	0	0 (?)	0
4	1	1	1	1 (?)
5	0	0	0 (?)	0
6	1	1	1	1 (?)
7	0	1	1 (?)	1
8	0	1	1 (?)	1
9	1	0	0	0 (?)
10	0	0	1 (?)	0

$$Pr(Y = 1|A = 1) = 3/5$$
  
 $Pr(Y_1 = 1|A = 1) = 3/5$ 

 These are always equal, since Y = Y<sub>1</sub> for those who are factually exposed

## Solution, cont'd

ID	Α	Y	<i>Y</i> <sub>1</sub>	$Y_0$
1	1	0	0	0 (?)
2	1	1	1	0 (?)
3	0	0	0 (?)	0
4	1	1	1	1 (?)
5	0	0	0 (?)	0
6	1	1	1	1 (?)
7	0	1	1 (?)	1
8	0	1	1 (?)	1
9	1	0	0	0 (?)
10	0	0	1 (?)	0

$$Pr(Y_1 = 1 | A = 1) = 3/5$$
  
 $Pr(Y_1 = 1 | A = 0) = 3/5$   
 $Pr(Y_1 = 1) = 6/10 = 3/5$ 

- That these are equal means that Y<sub>1</sub> has the same distribution in
  - those who are factually exposed; observable
  - those who are factually unexposed; unobservable
  - the whole population; unobservable
- Rather remarkable!
- We can use  $Pr(Y_1 = 1|A = 1) = Pr(Y = 1|A = 1)$  as a surrogate for  $Pr(Y_1 = 1)$

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### The RCT revisited

ID	Α	Y	$Y_1$	$Y_0$
1	1	0	0	0 (?)
2	1	1	1	0 (?)
3	0	0	0 (?)	0
4	1	1	1	1 (?)
5	0	0	0 (?)	0
6	1	1	1	1 (?)
7	0	1	1 (?)	1
8	0	1	1 (?)	1
9	1	0	0	0 (?)
10	0	0	1 (?)	0

- Compute all the following:
  - Pr(Y = 1|A = 0)
  - $Pr(Y_0 = 1 | A = 0)$
  - $Pr(Y_0 = 1 | A = 1)$
  - $Pr(Y_0 = 1)$

## In a picture

Everybody exposed; 60% have  $Y_1 = 1$ 



Factually exposed; 60% have  $Y_1 = 1$ 



$$\underbrace{\Pr(Y_1 = 1 | A = 1)}_{=\Pr(Y = 1 | A = 1)} = \Pr(Y_1 = 1)$$

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## Solution

ID	Α	Υ	$Y_1$	$Y_0$
1	1	0	0	0 (?)
2	1	1	1	0 (?)
3	0	0	0 (?)	0
4	1	1	1	1 (?)
5	0	0	0 (?)	0
6	1	1	1	1 (?)
7	0	1	1 (?)	1
8	0	1	1 (?)	1
9	1	0	0	0 (?)
10	0	0	1 (?)	0

$$Pr(Y = 1|A = 0) = 2/5$$
  
 $Pr(Y_0 = 1|A = 1) = 2/5$ 

 These are always equal, since Y = Y<sub>0</sub> for those who are factually unexposed

## Solution, cont'd

ID	Α	Y	<i>Y</i> <sub>1</sub>	$Y_0$
1	1	0	0	0 (?)
2	1	1	1	0 (?)
3	0	0	0 (?)	0
4	1	1	1	1 (?)
5	0	0	0 (?)	0
6	1	1	1	1 (?)
7	0	1	1 (?)	1
8	0	1	1 (?)	1
9	1	0	0	0 (?)
10	0	0	1 (?)	0

$$Pr(Y_0 = 1 | A = 0) = 2/5$$
  
 $Pr(Y_0 = 1 | A = 0) = 2/5$   
 $Pr(Y_0 = 1) = 4/10 = 2/5$ 

- That these are equal means that Y<sub>0</sub> has the same distribution in
  - those who are factually unexposed; observable
  - those who are factually exposed; unobservable
  - the whole population; unobservable
- Rather remarkable!
- We can use  $Pr(Y_0 = 1 | A = 0) = Pr(Y = 1 | A = 0)$  as a surrogate for  $Pr(Y_0 = 1)$

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## Conclusion

• In the randomized trial, we had that

$$\underbrace{\Pr(Y_1 = 1 | A = 1)}_{=\Pr(Y=1 | A = 1)} = \Pr(Y_1 = 1)$$

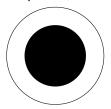
$$\underbrace{\Pr(Y_0 = 1 | A = 0)}_{=\Pr(Y = 1 | A = 0)} = \Pr(Y_0 = 1)$$

so that the risk ratio was equal to the causal risk ratio

- Association = causation!
- This is always true in randomized trials (motivation to follow)

## In a picture

Everybody unexposed; 40% have  $Y_0 = 1$ 



Factually unexposed; 40% have  $Y_0 = 1$ 



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# Exchangeability

If

$$\underbrace{\Pr(Y_1 = 1 | A = 1)}_{=\Pr(Y=1 | A = 1)} = \Pr(Y_1 = 1)$$

and

$$\underbrace{\Pr(Y_0 = 1 | A = 0)}_{=\Pr(Y=1 | A = 0)} = \Pr(Y_0 = 1)$$

then  $Y_0$  and  $Y_1$  are independent of A:

$$(Y_0, Y_1) \coprod A$$

- We say that the exposed and unexposed are exchangeable
- Under exchangeability, association = causation

ID	Α	Y
1	1	0
2	1	1
3	0	0
4	1	1
5	0	0
6	1	1
7	0	1
8	0	1
9	1	0
10	0	0

Assume exchangeability, and compute the causal risk ratio.
 Where in the calculation do you use the assumption of exchangeability?



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# Why randomization works

- Under randomization, all pre-exposure variables are equally distributed across levels of A
  - all pre-exposure variables are independent of A
- The potential outcomes (Y<sub>0</sub>, Y<sub>1</sub>) are pre-exposure variables
- They describe how the subject 'reacts' to A = 0 and A = 1
- This reaction depends on numerous factors which are determined before the factual exposure level is received
  - genes,lifestyle, age, etc
- Thus, under randomization  $(Y_0, Y_1)$  are independent of A

$$(Y_0, Y_1) \coprod A$$

• This is amazing! Why then not always randomize?

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## Solution

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$$\begin{aligned} &\frac{\Pr(Y_1 = 1)}{\Pr(Y_0 = 1)} = \{(Y_0, Y_1) \coprod A\} \\ &= \frac{\Pr(Y_1 = 1 | A = 1)}{\Pr(Y_0 = 1 | A = 0)} \\ &= \frac{\Pr(Y = 1 | A = 1)}{\Pr(Y = 1 | A = 0)} \\ &= \frac{3/5}{2/5} = 1.5 \end{aligned}$$

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## Example

- Does heart transplant (A) increase 5-year survival (Y)?
- Select a large population of potential recipients of a transplant
- Get funding and ethical approval
- Randomly allocate each subject to either transplant (A = 1) or medical treatment (A = 0)
- 5 years later, calculate the causal risk ratio
- Is this feasible?

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- Some people may drop out of the study (D = 1) before end of follow up
  - can compute Pr(Y = 1|A, D = 0), but not Pr(Y = 1|A)
- Problematic because among those who remain in the study, exposed and unexposed may not be exchangeable:

$$(Y_0,Y_1)$$
 If  $A \mid D=0$ 

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# Non-compliance

- Some subjects who are assigned to the new treatment may take the old treatment, and vice versa
- Traditional analyses:
  - Intention To Treat (ITT)
  - As Treated (AT)
- Both these analyses are likely to be biased
  - alternative 'causal inference methods' exist (beyond the scope of this course)

# **Unblinding**

- When the study subjects are aware of what treatment they receive, they may change their behavior accordingly
  - e.g. transplant receivers may change their diet to keep their new heart healthy
- The causal effect of A on Y combines the effect of the exposure and the behavior change
- Even if treated and untreated behave similarly, pure knowledge of treatment received may affect the outcome
  - placebo effect



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#### Conclusion

- Real randomized trials often suffer from several important problems
- · Observational studies are needed
  - in fact, most human knowledge comes from observations, e.g. evolution theory, smoking causes lung cancer etc
- And so are methods for causal inference from observational studies

## Outline

Observational studies

Randomized trials



Observational studies

# Example, cont'd

• Data obtained from an observational study:

ID	Α	Υ	$Y_1$	$Y_0$
1	0	0	?	0
2	1	1	1	?
3	0	0	?	0
4	1	1	1	?
5	1	0	0	?
6	1	1	1	?
7	0	1	?	1
8	1	1	1	?
9	0	0	?	0
10	0	0	?	0

· Compute the risk ratio

## Example

#### Ideal data:

$$Pr(Y_1 = 1) = 6/10 = 0.6$$

$$Pr(Y_0 = 1) = 4/10 = 0.4$$

causal risk ratio = 
$$\frac{0.6}{0.4}$$
 = 1.5



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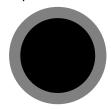
 $> Pr(Y_1 = 1)$ 

 $< Pr(Y_0 = 1)$ 

#### Observational studies

## Solution

Everybody exposed; 60% have  $Y_1 = 1$ 



Factually exposed; 80% have  $Y_1 = 1$ 



$$\underbrace{\Pr(Y_1 = 1 | A = 1)}_{=\Pr(Y=1 | A = 1)} \neq \Pr(Y_1 = 1)$$

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#### Conclusion

In the observational study, we had that

$$\underbrace{\Pr(Y_1 = 1 | A = 1)}_{=\Pr(Y=1 | A = 1)} \neq \Pr(Y_1 = 1)$$

$$\underbrace{\Pr(Y_0 = 1 | A = 0)}_{=\Pr(Y = 1 | A = 0)} \neq \Pr(Y_0 = 1)$$

In other words, we had non-exchangeability

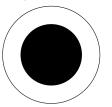
$$(Y_0, Y_1) \not\perp A$$

- As a consequence, the risk ratio was not equal to the causal risk ratio
- Association ≠ causation!
- This is typical for observational studies

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# In a picture, cont'd

Everybody unexposed; 40% have  $Y_0 = 1$ 



Factually unexposed; 20% have  $Y_0 = 1$ 



$$\underbrace{\Pr(Y_0 = 1 | A = 0)}_{=\Pr(Y = 1 | A = 0)} \neq \Pr(Y_0 = 1)$$

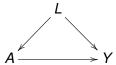
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## Three important questions

- What is the cause of non-exchangeability in observational studies?
- Can we identify non-exchangeability in a population/sample?
- How can we estimate causal effects in the presence of non-exchangeability?

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# What is the cause of non-exchangeability in observational studies?



- Suppose that there is a covariate, L, which affects both A and Y
  - e.g. L = `age'; old people have higher BMI (A) than young people, and are more likely to develop cancer (Y)
- A and Y will then be associated, even if A has no causal effect on Y
- The association between A and Y suffers from confounding by L
  - · more on confounding later
- Confounding causes non-exchangeability



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# How can we estimate causal effects in the presence of non-exchangeability?

- There are several ways to 'adjust' the analysis for potential confounders
  - stratification
  - matching
  - standardization
  - propensity scores
  - regression modeling
  - inverse probability weighting
  - etc

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# Can we identify non-exchangeability in a population/sample?

By definition we have non-exchangeability if (Y<sub>0</sub>, Y<sub>1</sub>) and A
are associated

That is, if

$$Pr(Y_1 = 1 | A = 1) \neq Pr(Y_1 = 1)$$

or

$$Pr(Y_0 = 1 | A = 0) \neq Pr(Y_0 = 1)$$

- But  $Y_1$  is not observed for the unexposed (A = 0), and  $Y_0$  is not observed for the exposed (A = 1)
- Thus, the observed data can never tell us whether we have exchangeability or not
  - or whether we have unmeasured confounding
- To judge whether exchangeability is plausible, we must rely on subject matter knowledge



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## Conditional exchangeability

- Adjusting for a potential confounder L produces a causal effect if L is sufficient for confounding control
  - more later
- Technically, if we have conditional exchangeability, given *L*:

$$(Y_0, Y_1) \coprod A \mid L$$

- Conditional exchangeability cannot be tested, and must be judged by subject matter knowledge
- Exchangeability can be achieved by adjustments, but can also be 'destroyed'
  - more later





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## Example

	L=1		L = 0	
	<i>Y</i> = 1	Y = 0	<i>Y</i> = 1	Y = 0
A = 1	1	3	6	3
A = 0	2	3	2	1

 Assume conditional exchangeability, given L, and use stratification to compute the conditional causal risk ratio, given L, for L = 1 and L = 0



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## Conditional effects vs marginal effects

- Stratification gives causal effects within subsets of the population - conditional causal effects
  - e.g. stratification by 'sex' gives the causal effect for men and women separately
- We may want to calculate the causal effect for the whole study population - a marginal causal effect
  - easier to interpret one marginal effect than several conditional effects
  - randomized trials give marginal effects, and we may want to make results from observational studies comparable
  - we may want to consider future interventions to the whole population, rather than to subsets

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### Solution

Conditional causal risk ratio, given L = 1:

$$\begin{split} &\frac{\Pr(Y_1=1|L=1)}{\Pr(Y_0=1|L=1)} = \{(Y_0,Y_1) \coprod A|L\} \\ &= \frac{\Pr(Y_1=1|A=1,L=1)}{\Pr(Y_0=1|A=0,L=1)} = \frac{\Pr(Y=1|A=1,L=1)}{\Pr(Y=1|A=0,L=1)} \\ &= \frac{1/4}{2/5} = 0.63 \end{split}$$

Conditional causal risk ratio, given L = 0:

$$\frac{\Pr(Y_1 = 1 | L = 0)}{\Pr(Y_0 = 1 | L = 0)} = \dots = \frac{6/9}{2/3} = 1$$



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#### The standardization formula

• Under conditional exchangeability, given L,  $Pr(Y_a = 1)$  can be calculated through **standardization**:

$$Pr(Y_a = 1) = \sum_{L} Pr(Y = 1 | A = a, L) Pr(L)$$

• Binary L:

$$Pr(Y_a = 1) = Pr(Y = 1 | A = a, L = 1)Pr(L = 1) + Pr(Y = 1 | A = a, L = 0)Pr(L = 0)$$





## **Proof**

Law of total probability:

$$Pr(Y_a = 1) = \sum_{L} Pr(Y_a = 1|L)Pr(L)$$

• Conditional exchangeability, given L:

$$\sum_{L} \Pr(Y_a = 1|L) \Pr(L) = \sum_{L} \Pr(Y_a = 1|A = a, L) \Pr(L)$$

Definition of potential outcomes:

$$\sum_{L} \Pr(Y_{a} = 1 | A = a, L) \Pr(L) = \sum_{L} \Pr(Y = 1 | A = a, L) \Pr(L)$$



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#### Solution

$$\begin{split} &\frac{\Pr(Y_1=1)}{\Pr(Y_0=1)} = \{(Y_0,Y_1) \text{ II } A | L\} \\ &= \frac{\sum_{L} \Pr(Y=1|A=1,L) \Pr(L)}{\sum_{L} \Pr(Y=1|A=0,L) \Pr(L=1)} \\ &= \frac{1/4}{2/5} \times \frac{9/21}{2/1} + \frac{6/9}{6/9} \times \frac{12/21}{12/21} \\ &= \frac{2/5}{\Pr(Y=1|A=0,L=1)} \times \frac{9/21}{\Pr(Y=1|A=0,L=0)} \times \frac{12/21}{\Pr(Y=1|A=0,L=1)} \\ &= 0.86 \end{split}$$

Observational studies

## Example

 Assume conditional exchangeability, given L, and compute the marginal causal risk ratio



Observational studies

## Summary

Under exchangeability, association is equal to causation

$$(Y_0, Y_1) \coprod A$$

- Exchangeability follows by randomization
- We typically don't have exchangeability in observational studies
- Causal effects can be estimated in observational studies if we make sufficient confounder adjustments
  - but whether the adjustments are sufficient or not is untestable
- Stratification produces conditional (subpopulation) effects
- Standardization produces marginal (population) effects

