

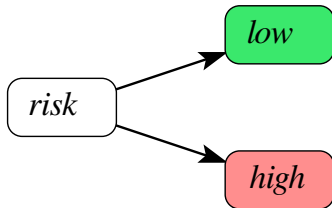
My risk model is super accurate so it will be useful for treatment decision making, right? Wrong!

Wouter van Amsterdam¹ Rajesh Ranganath²

¹University Medical Center Utrecht ²New York University

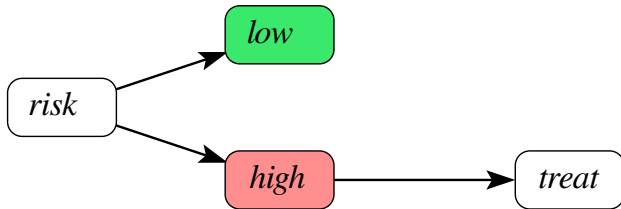
from risk model to treatment decision

risk estimate + decision rule = treatment decision



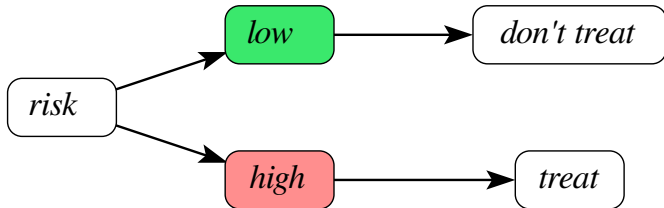
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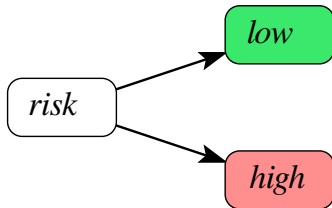
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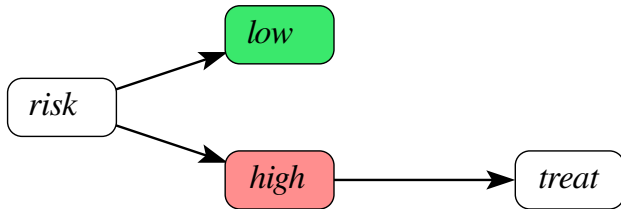
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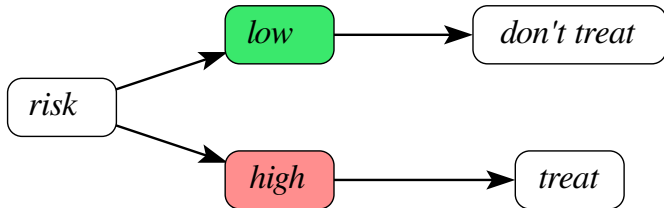
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Value(Treatment)

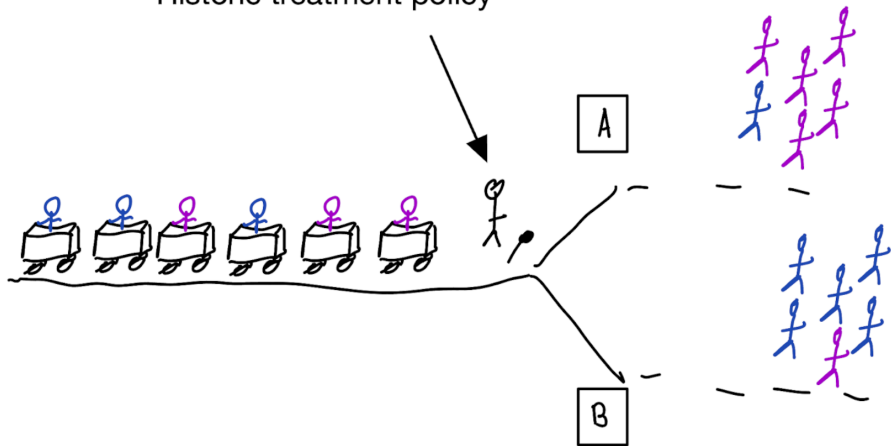
$$\text{Value(Treatment)} = \frac{\text{Outcomes}}{\quad}$$

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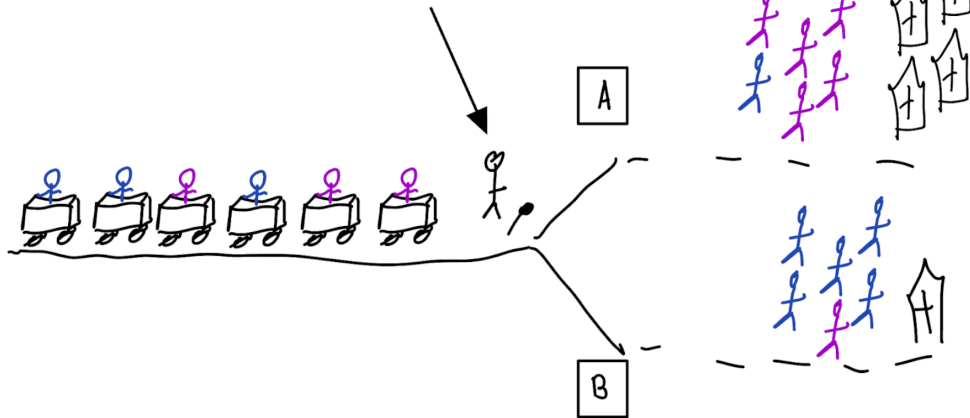
$$\text{Value}(\text{risk model}) \stackrel{?}{=} \text{Accuracy}$$



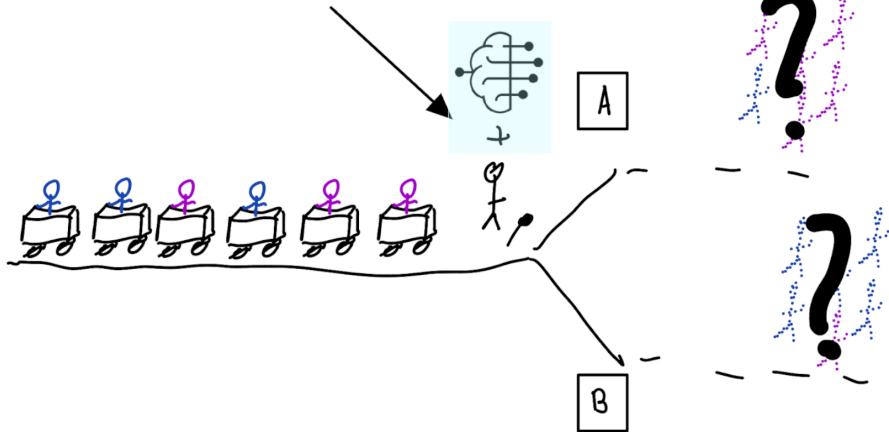
Historic treatment policy



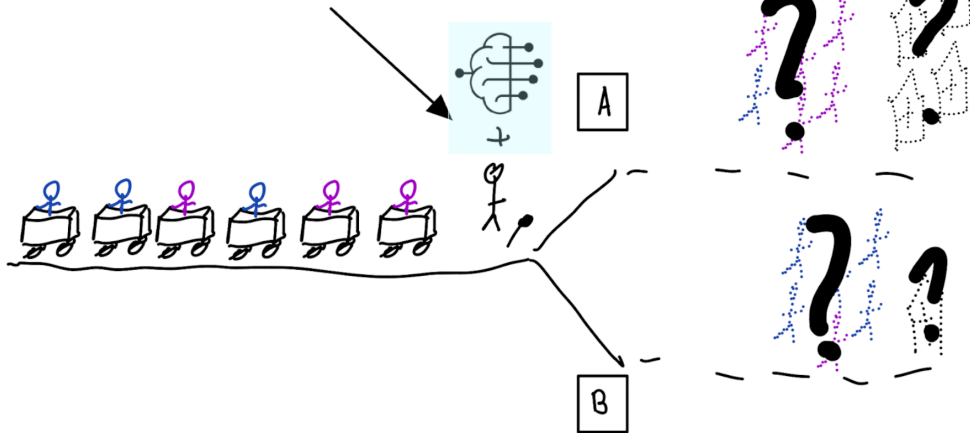
Historic treatment policy



New treatment policy

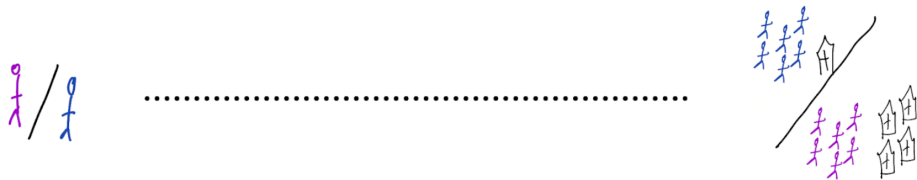


New treatment policy

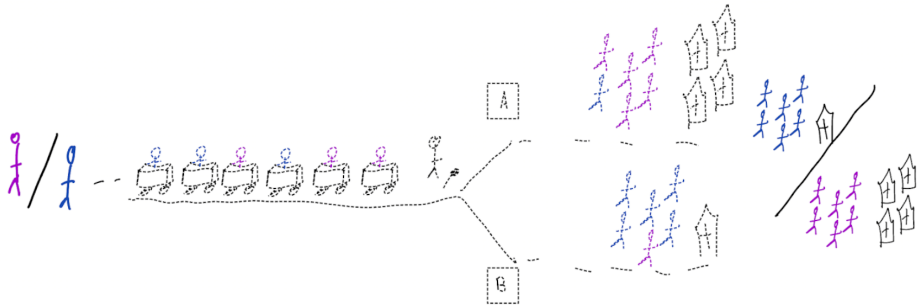


$$\text{Value(risk model)} = \frac{\text{Outcomes}}{\text{Treatment harm}}$$

Treatment-naive risk models

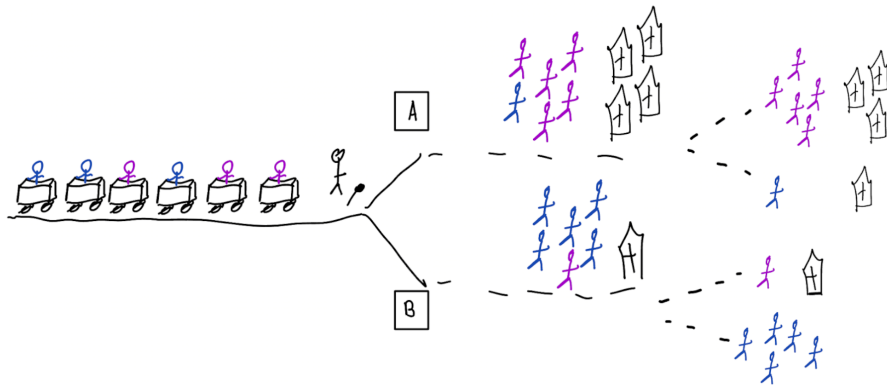


Treatment-naive risk models

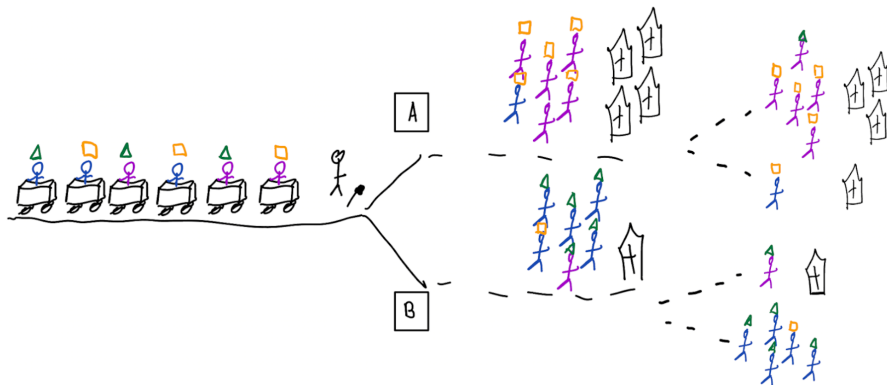


can be accurate but still cause harm when used for treatment decisions

Other risk models: condition on given treatment and traits



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unobserved confounding (hat type) leads to wrong treatment decisions

Recommended validation practices do not protect against harm
because they do not evaluate the policy change

Guideline > [Ann Intern Med.](#) 2015 Jan 6;162(1):55-63. doi: 10.7326/M14-0697.

Transparent Reporting of a multivariable prediction model for Individual Prognosis or Diagnosis (TRIPOD): the TRIPOD statement

[Gary S Collins](#), [Johannes B Reitsma](#), [Douglas G Altman](#), [Karel G M Moons](#)

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> [CA Cancer J Clin.](#) 2016 Sep;66(5):370-4. doi: 10.3322/caac.21339. Epub 2016 Jan 19.

American Joint Committee on Cancer acceptance criteria for inclusion of risk models for individualized prognosis in the practice of precision medicine

Michael W Kattan ¹, Kenneth R Hess ², Mahul B Amin ³, Ying Lu ⁴, Karl G M Moons ⁵, Jeffrey E Gershenwald ⁶, Phyllis A Gimotty ⁷, Justin H Guinney ⁸, Susan Halabi ⁹, Alexander J Lazar ¹⁰, Alyson L Mahar ¹¹, Tushar Patel ¹², Daniel J Sargent ¹³, Martin R Weiser ¹⁴, Carolyn Compton ¹⁵, members of the AJCC Precision Medicine Core

Affiliations + expand

PMID: 26784705 PMCID: [PMC4955656](#) DOI: [10.3322/caac.21339](#)

what to do?

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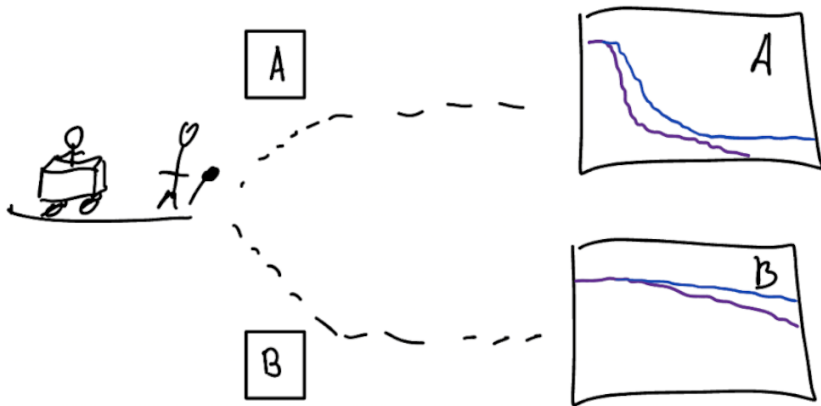
1. Evaluate policy change (cluster randomized controlled trial)

what to do?

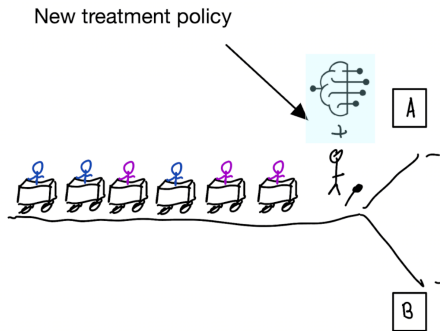
1. Evaluate policy change (cluster randomized controlled trial)
2. Build models that are likely to have value for decision making

Prediction-under-intervention models

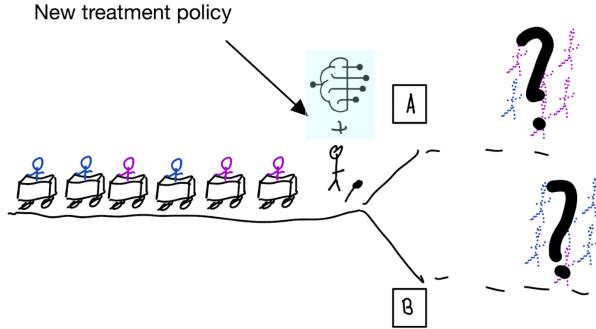
Predict outcome *under hypothetical intervention* of giving certain treatment



When developing risk models, always discuss:

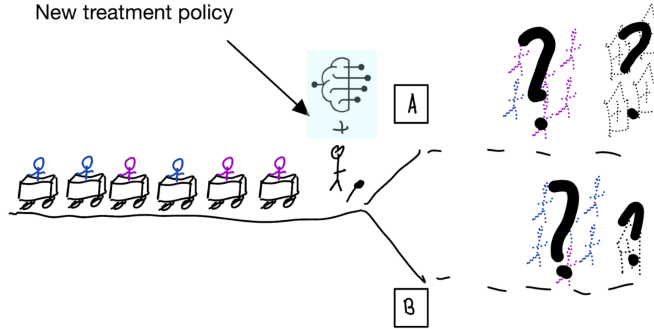


When developing risk models, always discuss:



1. what is effect on treatment policy?

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1. what is effect on treatment policy?
2. what is effect on patient outcomes?

Takeaway

Don't assume predicting well leads to good decisions, think about the policy change

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Further reading:

<https://arxiv.org/abs/2209.07397>

Decision making in cancer: Causal questions require causal answers

Wouter A.C. van Amsterdam, Pim A. de Jong, Joost J.C. Verhoeff, Tim Leiner, Rajesh Ranganath



 WvanAmsterdam