

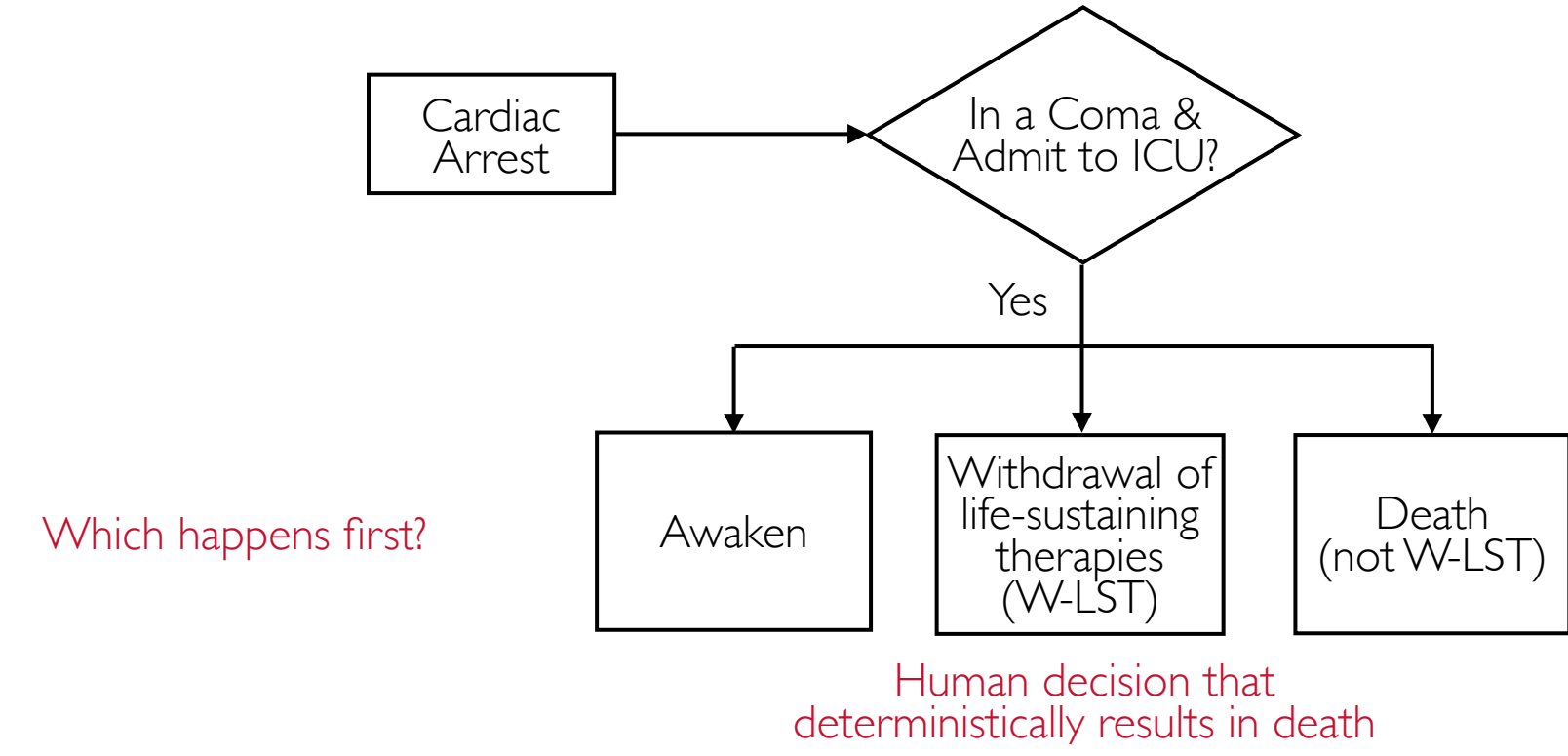
Neurological Prognostication of Post-Cardiac-Arrest Coma Patients Using EEG Data: A Dynamic Survival Analysis Framework with Competing Risks

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Neurological Prognostication



Importance of *neurological prognostication* (forecast neurological outcome) for cardiac arrest patients in a *coma*

- Withdrawal of life-sustaining therapies (W-LST) → inevitable death
- Some patients who died from W-LST may have recovered if kept on life-sustaining therapies

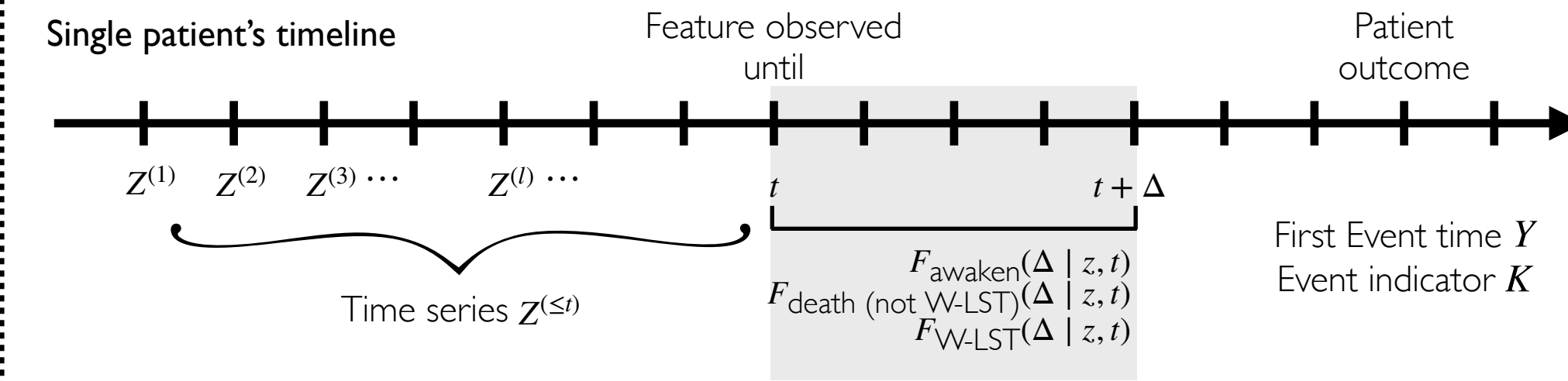
Prior literature:

- Existing methods are not truly dynamic - patients' time series must be the same; make predictions at a single time after cardiac arrest
- Issues with the common classification setup - need to exclude patients who died from W-LST

Main Contributions

- Propose a framework for neurological prognostication of post-cardiac-arrest coma patients:
 - works with any existing *dynamic competing risks* (DCR) model
 - is dynamic and makes predictions for a patient over time as more time-series data becomes available
 - model three competing risks simultaneously as to what happens first to a patient
- Derive a classifier from DCR model to aid decision-making
- Develop a patient-specific heat map visualization for the classifier

Dynamic Competing Risks (DCR) Model



Training data, patient i

- Feature vector with corresponding time stamp: $Z_i := (X_i^{(1)}, X_i^{(2)}, \dots, X_i^{(L_i)}), (T_i^{(1)}, T_i^{(2)}, \dots, T_i^{(L_i)})$ when data collection ended, patient was still in a coma so true eventual earliest outcome is unknown
- Event indicator (which event happens first): $K_i \in \{\text{awaken, death (not W-LST), W-LST, censoring}\}$
- Time of earliest occurring event: $Y_i \in \mathbb{R}$

Prediction target - cumulative incidence function (CIF)

The probability of event j happening within time duration $\Delta \geq 0$ starting from time $t \in \mathbb{R}$, given a time series observed up until time t

$$F_j(\Delta | z, t) := \mathbb{P}(Y \leq t + \Delta, K = j | Z^{(\leq t)} = z^{(\leq t)}, Y > t) \quad \text{for } \Delta \geq 0$$

Examples of DCR models

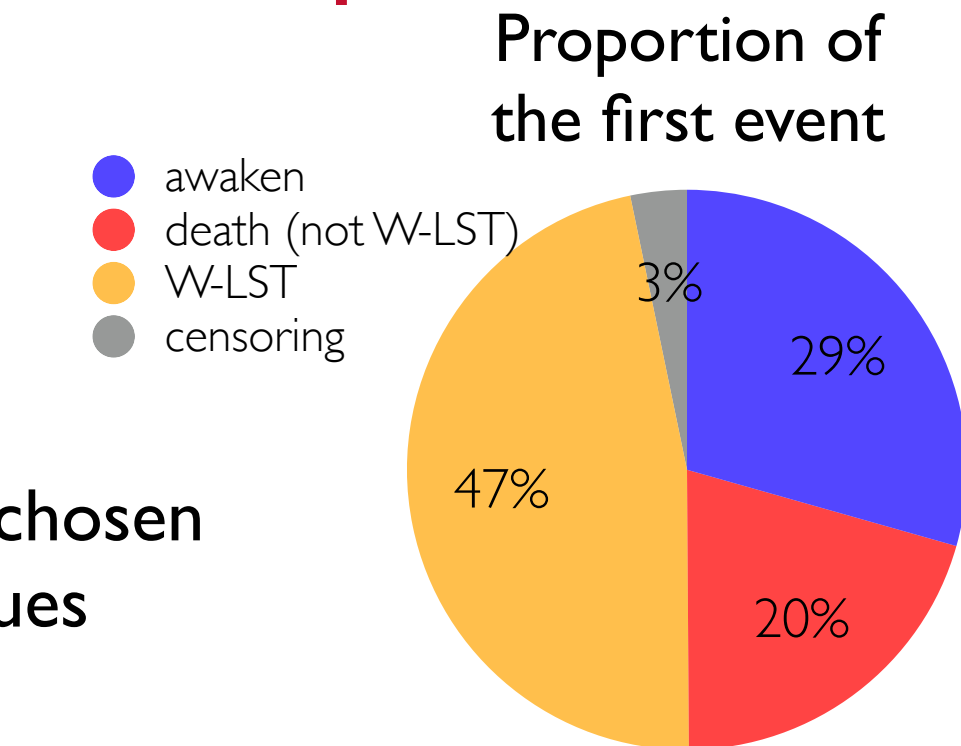
- Fine and Gray (1996), using only last time step's data
- Dynamic-DeepHit (Lee et al., 2019)
- DDRSA (Venkata and Bhattacharyya, 2022), with modification
- SurvLatent ODE (Moon et al., 2022)

Generalizable Insights for Neurological Prognostication of Post-Cardiac-Arrest Coma Patients:

- The classical Fine and Gray (1999) model is highly competitive
- We recommend using a competing risks setup with the three competing events we model

Real-World Clinical Data Experiment

A real-world dataset of 922 post-cardiac-arrest coma patients, with EEG data recorded over time



$t = 6, 12$ and $\Delta = 24, 48, 72$ chosen for evaluation; can be other values without model re-training

Table 1: Test set c-indices (average \pm standard deviation across five experimental repeats) for three DCR models. The entries with bold values represent the highest average c-index for each (event, t, Δ) combination.

Model	Prediction time	Event	Evaluation time horizon		
			$\Delta = 24$ hrs	$\Delta = 48$ hrs	$\Delta = 72$ hrs
Fine and Gray	$t = 6$	awaken	0.853 \pm 0.017	0.874 \pm 0.012	0.875 \pm 0.012
		death (not W-LST)	0.633 \pm 0.171	0.673 \pm 0.081	0.684 \pm 0.061
		W-LST	0.691 \pm 0.063	0.634 \pm 0.050	0.652 \pm 0.039
	$t = 12$	awaken	0.831 \pm 0.032	0.851 \pm 0.023	0.854 \pm 0.023
		death (not W-LST)	0.751 \pm 0.110	0.709 \pm 0.040	0.713 \pm 0.044
		W-LST	0.709 \pm 0.082	0.675 \pm 0.035	0.681 \pm 0.024
Dynamic-DeepHit	$t = 6$	awaken	0.851 \pm 0.018	0.867 \pm 0.012	0.864 \pm 0.017
		death (not W-LST)	0.702 \pm 0.080	0.684 \pm 0.096	0.697 \pm 0.071
		W-LST	0.742 \pm 0.103	0.612 \pm 0.062	0.621 \pm 0.031
	$t = 12$	awaken	0.847 \pm 0.038	0.859 \pm 0.020	0.858 \pm 0.024
		death (not W-LST)	0.701 \pm 0.078	0.699 \pm 0.042	0.722 \pm 0.044
		W-LST	0.739 \pm 0.076	0.640 \pm 0.028	0.666 \pm 0.017
DDRSA	$t = 6$	awaken	0.821 \pm 0.032	0.845 \pm 0.028	0.836 \pm 0.030
		death (not W-LST)	0.599 \pm 0.072	0.615 \pm 0.059	0.633 \pm 0.075
		W-LST	0.677 \pm 0.151	0.626 \pm 0.121	0.637 \pm 0.100
	$t = 12$	awaken	0.825 \pm 0.021	0.818 \pm 0.025	0.798 \pm 0.027
		death (not W-LST)	0.681 \pm 0.095	0.651 \pm 0.086	0.651 \pm 0.074
		W-LST	0.663 \pm 0.126	0.652 \pm 0.092	0.670 \pm 0.068

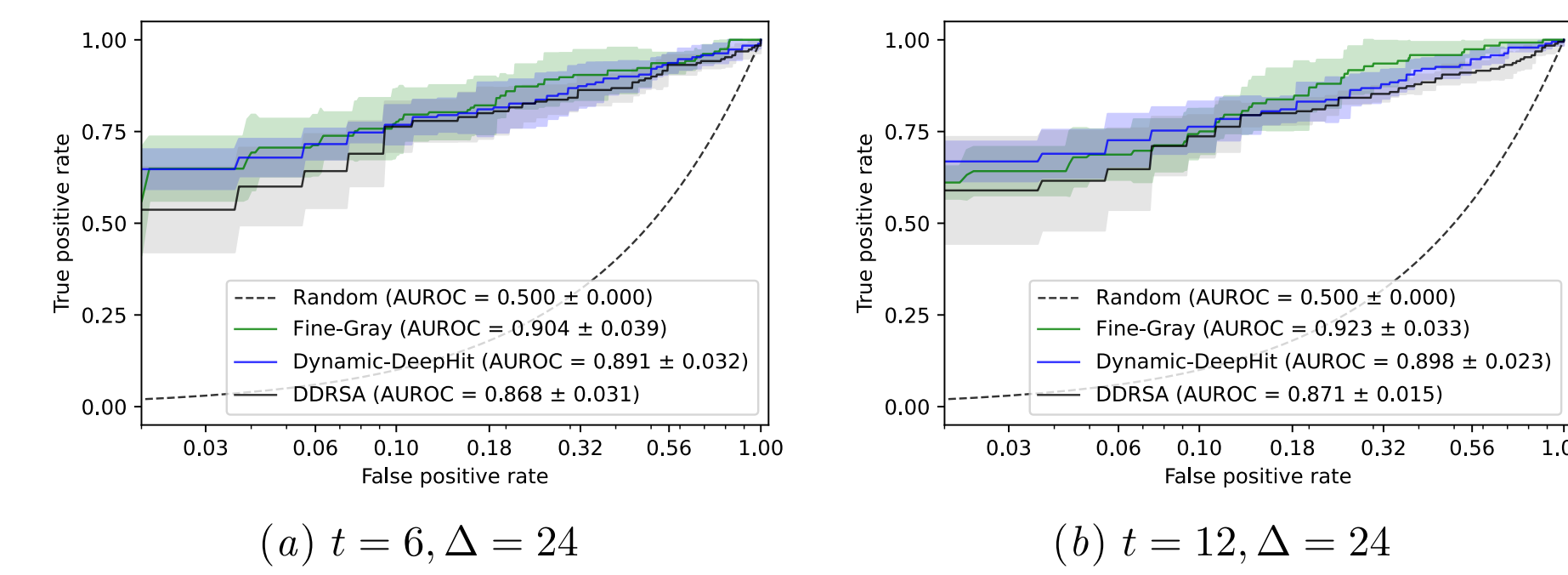


Figure 3: Test set ROC curve (average curve \pm standard deviation intervals across five experimental repeats). The x-axis is on a log scale to emphasize the low FPR regime.

Ablation Study with Fewer Events

- With two competing risks:
 - awaken
 - death (not W-LST)
- With single event:
 - awaken

Three competing events setup provided more information without sacrificing accuracy

Table 3: Test set c-indices (average \pm standard deviation across five experimental repeats) for the Fine and Gray model and Dynamic-DeepHit with two competing events. The entries with bold values represent the highest average c-index for each (event, t, Δ) combination.

Model	Prediction time	Event	Evaluation time horizon		
			$\Delta = 24$ hrs	$\Delta = 48$ hrs	$\Delta = 72$ hrs
Fine and Gray	$t = 6$	awaken	0.835 \pm 0.030	0.870 \pm 0.012	0.867 \pm 0.008
		death (not W-LST)	0.723 \pm 0.040	0.697 \pm 0.075	0.707 \pm 0.061
	$t = 12$	awaken	0.822 \pm 0.020	0.855 \pm 0.014	0.851 \pm 0.014
		death (not W-LST)	0.664 \pm 0.272	0.678 \pm 0.146	0.706 \pm 0.101
Dynamic-DeepHit	$t = 6$	awaken	0.852 \pm 0.019	0.858 \pm 0.011	0.855 \pm 0.007
		death (not W-LST)	0.638 \pm 0.074	0.622 \pm 0.073	0.642 \pm 0.050
	$t = 12$	awaken	0.842 \pm 0.017	0.860 \pm 0.007	0.857 \pm 0.007
		death (not W-LST)	0.599 \pm 0.092	0.639 \pm 0.095	0.649 \pm 0.078

Table 4: Test set c-indices (average \pm standard deviation across five experimental repeats) for the Fine and Gray model and Dynamic-DeepHit with a single event. The entries with bold values represent the highest average c-index for each (event, t, Δ) combination.

Model	Prediction time	Event	Evaluation time horizon		
			$\Delta = 24$ hrs	$\Delta = 48$ hrs	$\Delta = 72$ hrs
Fine and Gray	$t = 6$	awaken	0.864 \pm 0.021	0.883 \pm 0.013	0.877 \pm 0.010
		awaken	0.843 \pm 0.023	0.866 \pm 0.018	0.861 \pm 0.015
	$t = 12$	awaken	0.850 \pm 0.031	0.861 \pm 0.019	0.855 \pm 0.021
		awaken	0.845 \pm 0.021	0.855 \pm 0.014	0.855 \pm 0.018

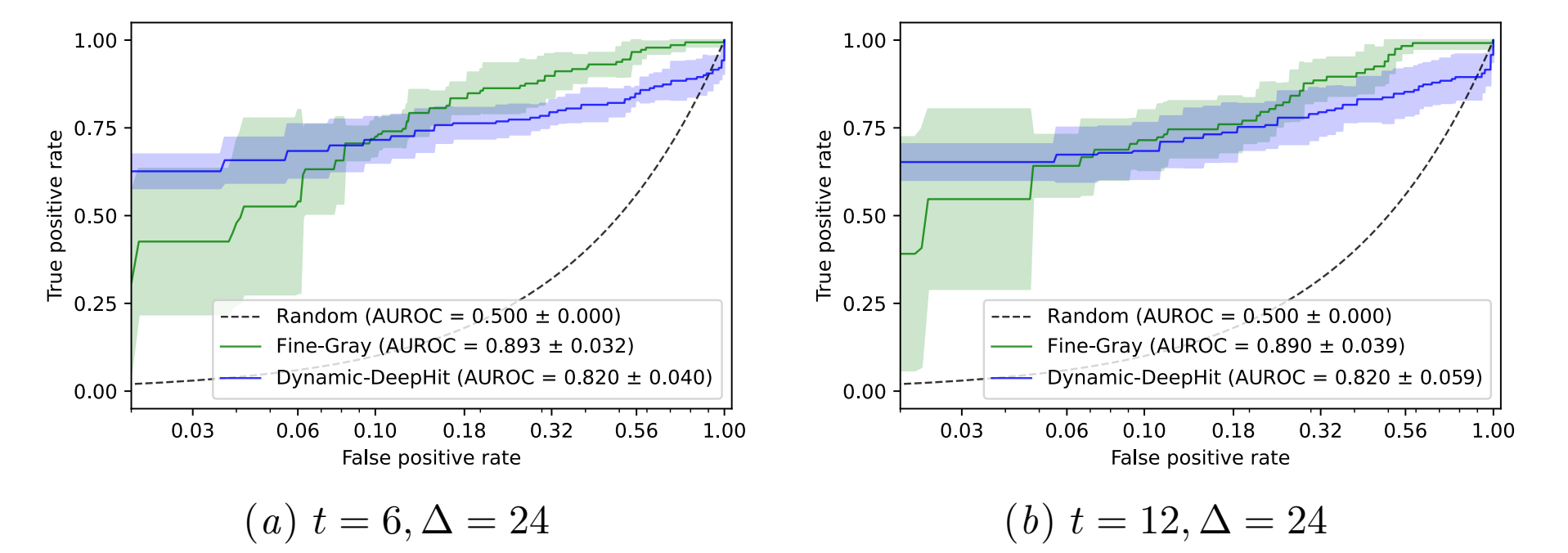


Figure 4: Test set ROC curve in the case of modeling two competing events (average curve \pm standard deviation intervals across five experimental repeats). The x-axis is on a log scale to emphasize the low FPR regime.

Framework with DCR Model

A Derived Classifier from DCR Model

Key idea: condition on the event W-LST not happening for test patient

Reason: the classifier is meant to help with deciding on whether to withdraw the test patient from life-sustaining therapies so we assume that it has not happened

$$P_{\text{death (not W-LST)}}(\Delta | z, t) := \frac{F_{\text{death (not W-LST)}}(\Delta | z, t)}{F_{\text{awaken}}(\infty | z, t) + F_{\text{death (not W-LST)}}(\infty | z, t)}$$

$$P_{\text{awaken}}(\Delta | z, t) := \frac{F_{\text{awaken}}(\Delta | z, t)}{F_{\text{awaken}}(\infty | z, t) + F_{\text{death (not W-LST)}}(\infty | z, t)}$$

probability of death (not W-LST) within time Δ

probability of awakening within time Δ

probability of eventually awakening or eventually dying (not of W-LST)

If $\frac{P_{\text{death (not W-LST)}}(\Delta | z, t)}{P_{\text{awaken}}(\Delta | z, t)} > 1$: predict positive (bad)

Otherwise: predict negative (good)

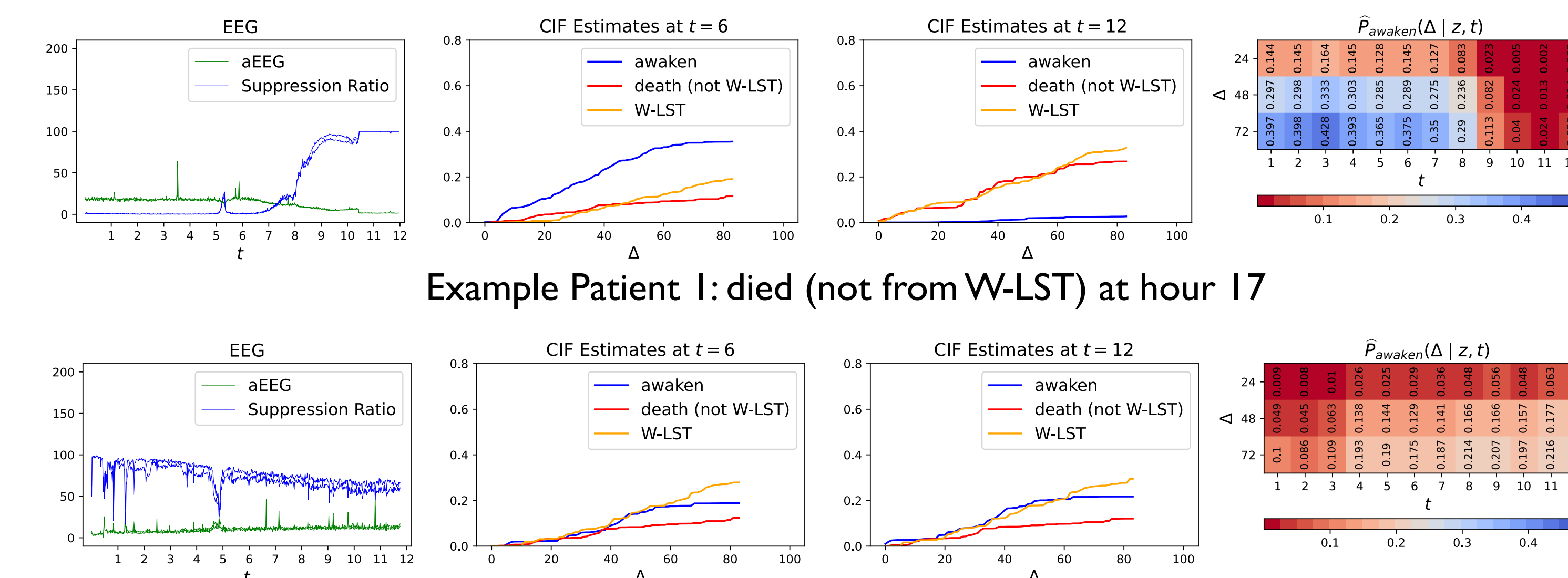
Three competing events, only one happens first:

- awakening
- death (not W-LST)
- W-LST

Goal

- Better formulate the neurological prognostication problem
- Help clinicians interpret the information contained in the CIFs

Patient-Specific Visualization



Future Work

- New DCR model that considers events happening recurrently, not only first hitting time
- Better evaluation of the derived binary classifier with censoring data
- A decision support system that is deployment-ready

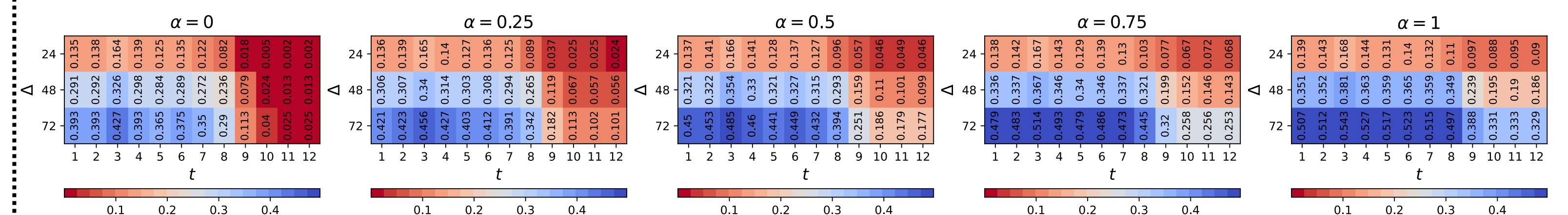
Alternative approach to deriving a binary classifier (worth investigating further)

Instead of conditioning on W-LST not happening, reason about counterfactual outcome of whether patient would have awakened or would have died (not of W-LST) if W-LST were not an option

- e.g., assume that among patients who died from W-LST, a fraction $\alpha \in [0, 1]$ of them would have awakened instead if W-LST were not an option

$$\tilde{P}_{\text{awaken}}(\Delta | z, t) = F_{\text{awaken}}(\Delta | z, t) + F_{\text{W-LST}}(\Delta | z, t) \times \alpha$$

Note: α is unknown so we make heat maps of $\tilde{P}_{\text{awaken}}$ for different values of α



Example Patient 1