

Modelling multiple timescales using flexible parametric survival models

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- Defining the timescale(s) of interest is essential in any time-to-event analysis
- Different timescales could be important for different outcomes
 - For example, time since diagnosis when considering survival after a diagnosis of breast cancer
 - Or, attained age for the incidence of breast cancer
- There are occasions when several timescales are simultaneously of interest
 - Incidence of breast cancer: attained age & time since childbirth

One option:

- Select the most important timescale as the primary timescale
- Split the data on the second timescale and include several indicator variables in the model for this second timescale

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- Select the most important timescale as the primary timescale
- Split the data on the second timescale and include several indicator variables in the model for this second timescale
 - Splitting data and fitting models to split data can be computationally intensive
 - The effect of the second timescale is not continuous

Another option:

- Select the most important timescale as the primary timescale
- Ignore the second timescale, or use some fixed time effect of the second timescale (e.g., age at diagnosis for attained age)

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- Select the most important timescale as the primary timescale
- Ignore the second timescale, or use some fixed time effect of the second timescale (e.g., age at diagnosis for attained age)
 - Won't accurately account for the effect of the second timescale

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- Time increases in the same way independent of the scale
- Thus, one timescale is a function of the other
 - Where is the origin of the timescale?

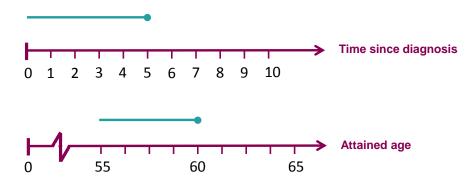
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 - Where is the origin of the timescale?
- ► For example, consider time since diagnosis of a disease t_{diag} and attained age t_{age}

$$t_{age} = age_{diag} + t_{diag}$$

Motivation

• If
$$t_{diag} = 5 \& age_{diag} = 55$$
, $t_{age} = 60$



- Previously developed strcs to model the log hazard using flexible parametric survival models (FPSMs)
- FPSMs usually model the log cumulative hazard
- Initially strcs was developed to deal with problems when modelling multiple time-dependent effects
- ► We realised they could be used to model multiple timescales

- Flexible parametric survival models (FPSMs) use restricted cubic splines (RCS) to model some form of the hazard function
- RCS are piecewise cubic polynomials joined together at points called knots
 - Continuous 1st, and 2nd derivatives at the knots, linear before first and after last knot
- RCS are able to capture complex hazard functions which standard parametric models may struggle to capture

Non-proportional FPSM on the log hazard scale looks like:

$$\ln(h(t; \mathbf{x})) = \underbrace{s(\ln(t); \gamma_0)}_{\text{spline function}} + \underbrace{\mathbf{x}\beta}_{k \beta} + \underbrace{\sum_{k=1}^{D} s(\ln(t); \gamma_k) \mathbf{x}_k}_{\text{time-dependent effects}}$$

Log-likelihood

$$\ln L_i = d_i \ln\{h(t_i)\} - H(t_i)$$

- d_i = event indicator
- $h(t_i) = hazard function$
- $H(t_i)$ = cumulative hazard function

$$H(t_i) = \int_0^t h(u_i) du$$

Log-likelihood

$$\ln L_i = d_i \ln\{h(t_i)\} - H(t_i)$$

FPSMs on the log hazard scale: numerical integration required to get cumulative hazard function

$$H(t_i) = \int_0^t h(u_i) du$$

- stmt is a Stata command which fits multiple timescales using FPSMs on the log hazard scale
- Is specifically designed to model multiple timescales and is an extension of strcs
- stmt uses Mata to numerically integrate the hazard function using Gaussian quadrature
- ► The first timescale is specified using the stset command
- Still being developed

Timescale-specific sub-options

- df(#) degrees of freedom for effect of timescale
- start(varname) starting value of second & third timescales
- tvc(varlist) variables with time-dependent effects
- logtoff create restricted cubic spline for untransformed time (default is log time scale)
- Plus other options & timescale-specific sub-options found in the stpm2 and strcs commands

- Swedish prostate cancer patients (60 961 observations)
- Interested in risk of hip fracture after bilateral orchiectomy
- Timescales of interest:
 - Time since diagnosis of prostate cancer
 - Attained age
- Variable of interest is orch, indicator for orchiectomy

- . stset dateexit, fail(frac = 1) enter(datecancer)
- > origin(datecancer) scale(365.25)

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- > origin(datecancer) scale(365.25)

$$\ln(\mathbf{h}(\mathbf{t})) = \underbrace{s_{t1}(\ln(\mathbf{t}); \gamma_{t1})}_{\text{time since diagnosis}} + \underbrace{s_{t2}(\mathbf{t} + \text{age}_{diag}; \gamma_{t2})}_{\text{attained age}} + orch$$

Log likelihood = -7464.385					of obs =	60,961
	Haz. Ratio	Std. Err.	z	P> z	[95% Conf.	Interval]
xb						
orch	1.579357	.083613	8.63	0.000	1.423694	1.75204
rcs						
t1_s1	.0129676	.025773	0.50	0.615	0375467	.0634818
t1_s2	0206878	.0251947	-0.82	0.412	0700686	.028693
t1_s3	.0235215	.0259144	0.91	0.364	0272698	.0743129
t2_s1	.6799227	.0332591	20.44	0.000	.6147361	.7451092
t2_s2	1234378	.0342275	-3.61	0.000	1905225	0563532
t2_s3	.0913521	.0296776	3.08	0.002	.0331852	.1495191
t2_s4	.0038328	.0248068	0.15	0.877	0447878	.0524533
t2_s5	.0180132	.0214929	0.84	0.402	0241121	.0601384
_cons	-5.17632	.0348153	-148.68	0.000	-5.244557	-5.108084

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- . stmt orch, time1(df(3)) ///
- > time2(start(agediag) df(5) logtoff tvc(orch) dftvc(3))

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- > time2(start(agediag) df(5) logtoff tvc(orch) dftvc(3))

Log likelihood = -7454.3291					of obs =	60,961
	Haz. Ratio	Std. Err.	z	P> z	[95% Conf	. Interval]
xb						
	1.770931					
+						
t1_s1	.0142601	.0258053	0.55	0.581	0363173	.0648376
t1_s2	0196129	.0251721	-0.78	0.436	0689494	.0297235
t1_s3	.0268569	.0258941	1.04	0.300	0238946	.0776085
t2_s1	.7620801	.0410964	18.54	0.000	.6815326	.8426276
t2_s2	1308936	.0415365	-3.15	0.002	2123036	0494835
t2_s3	.1362839	.0345208	3.95	0.000	.0686243	.2039435
t2_s4	.0188686	.0258904	0.73	0.466	0318756	.0696129
t2_s5	.0165599	.0216135	0.77	0.444	0258018	.0589216
t2_s_orch1	2428242	.0686272	-3.54	0.000	3773311	1083172
t2_s_orch2	0150246	.0680762	-0.22	0.825	1484516	.1184023
t2_s_orch3	1123459	.0509553	-2.20	0.027	2122165	0124754
_cons	-5.213729	.0370125	-140.86	0.000	-5.286272	-5.141186

- We are in the process of writing a predict command to be used after stmt
- Interested in predicting
 - Hazard for different values of the timescales
 - Survival
 - Hazard ratio over time
 - Hazard differences
 - Others?

Predictions: current syntax

predict newvar, { hazard | xb } [startt1(#) startt2(#)
 startt3(#) followup(#) n(#) at(varname # ...) zeros]

Options

- startt1(#) Prediction entry time for timescale 1
- startt2(#) Prediction entry time for timescale 2 (etc. for timescale 3)
- followup(#) Follow-up time for prediction
- n(#) How many intervals are needed for predictions up to the follow-up
- at(varname #) Predict at values of other variables in the model
- Others are to be included

- . stmt orch, time1(df(3)) ///
- > time2(start(agediag) df(5) logtoff tvc(orch) dftvc(3))

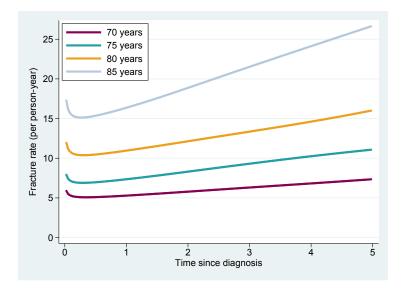
- . stmt orch, time1(df(3)) ///
- > time2(start(agediag) df(5) logtoff tvc(orch) dftvc(3))
- . predict haz, hazard startt1(0) startt2(70) followup(3) ///
- > n(10) at(orch 1)

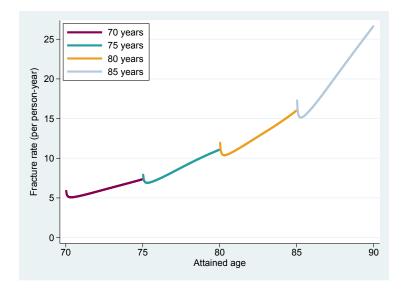
	+		+
	t1_haz	t2_haz	haz
1.	I 0	70	.
2.	.3	70.3	.00508109
3.	.6	70.6	.00512982
4.	.9	70.9	.0052459
5.	1.2	71.2	.00538255
6.	1.5	71.5	.00552947
7.	1.8	71.8	.00568337
8.	2.1	72.1	.00584082
9.	2.4	72.4	.0059984
10.	2.7	72.7	.00615495
11.	3	73	.00631038
	+		+

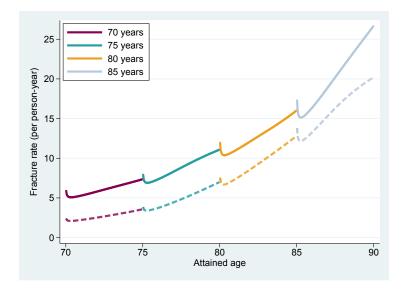
Hannah Bower

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```
forvalues age = 70(5)85 {
    predict haz_'age', hazard startt1(0) startt2('age') ///
    followup(5) n(200) at(orch 1)
}
```







- Interactions between the timescales
- Allow timescales for some individuals and not others
- More timescales?
- Predictions
- Suggestions?

Disadvantages

- Numerical integration can be slow if you have large datasets
 - N = 686, model fits in ≈ 6 secs
 - N = 60961, model fits n ≈ 40 secs
 - N = 423298, model fits in ≈ 9 mins
 - A Poisson model with split data to model the second timescale will take a while to fit

Advantages

- Easy way for users to model multiple timescales & get predictions
- Models multiple timescales in a continuous way

[1] H. Bower, M. J. Crowther, and . P.C. Lambert.

strcs: A command for fitting flexible parametric survival models on the log-hazard scale.

The Stata Journal, 16:989–1012, 2016.

[2] P. Royston and M. K. B. Parmar.

Flexible parametric proportional-hazards and proportional-odds models for censored survival data, with application to prognostic modelling and estimation of treatment effects.

Statistics in Medicine, 21(15):2175–2197, Aug 2002.