

Survival analysis beyond the Cox-model

Hans C. van Houwelingen

Department of Medical Statistics

Leiden University Medical Center

The Netherlands

jcvanhouwelingen@lumc.nl

<http://www.medstat.medfac.leidenuniv.nl/MS/HH/>

Content of the tutorial:

1. The Cox model and Accelerated Failure Time models
2. Non-proportional hazard models and model comparison
3. Time-dependent covariates: linking longitudinal data to survival
4. Clustered survival data: the score-function approach

Session 1. The Cox model and Accelerated Failure Time models

- informal introduction, examples
- formal description
- validation of Cox models

Informal introduction

Cox' proportional hazards model is the standard for survival analysis in medical research.

It produces:

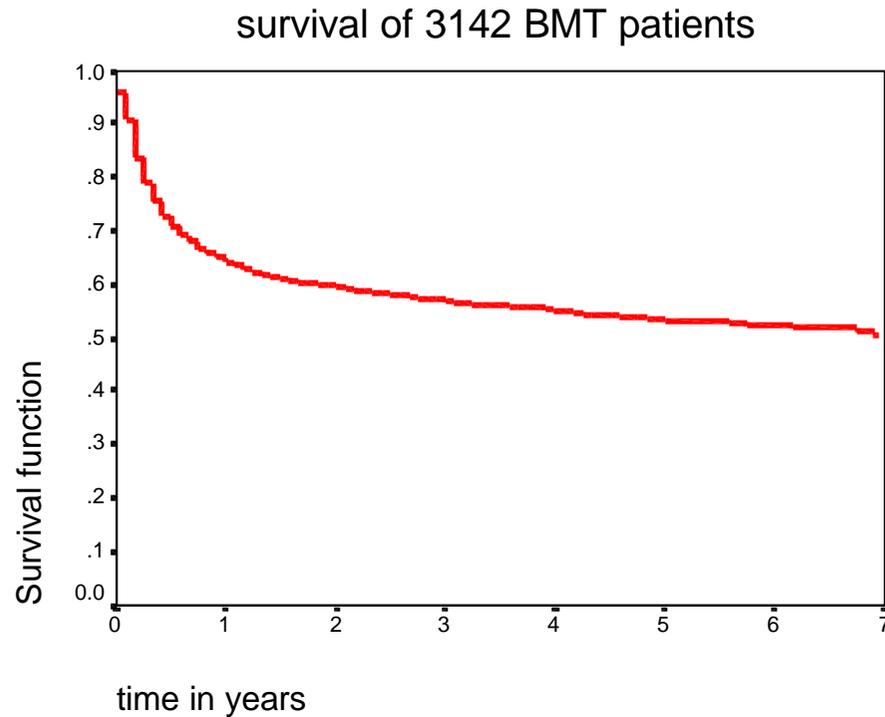
- < relative risks (actually hazard ratios)
- < baseline hazard/survival
- < estimated survival functions

Problems that arise:

- < do we understand relative risks ?
- < do we understand differences between estimated survival curves ?

First example. Survival after Bone Marrow Transplantation

(Gratwohl et al, 1998)



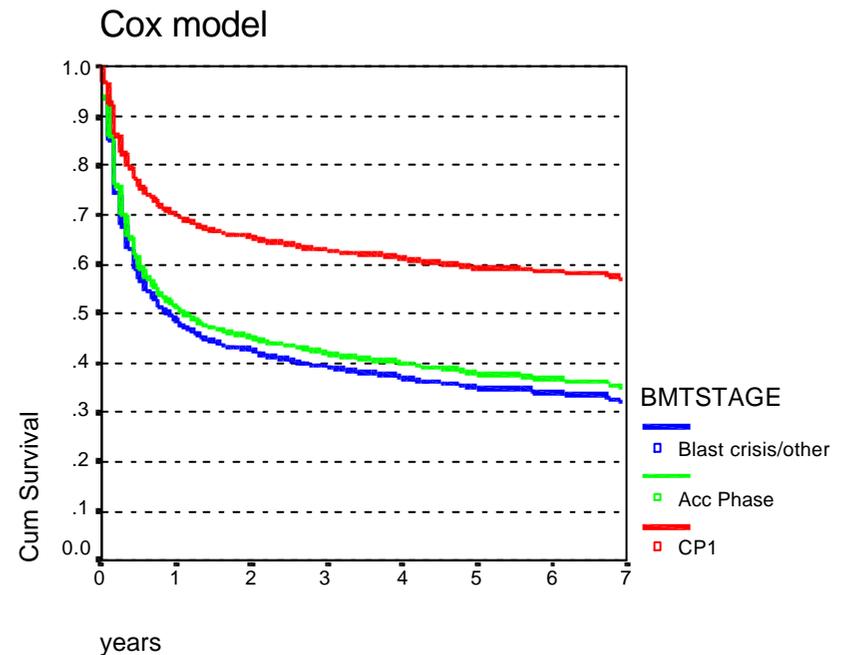
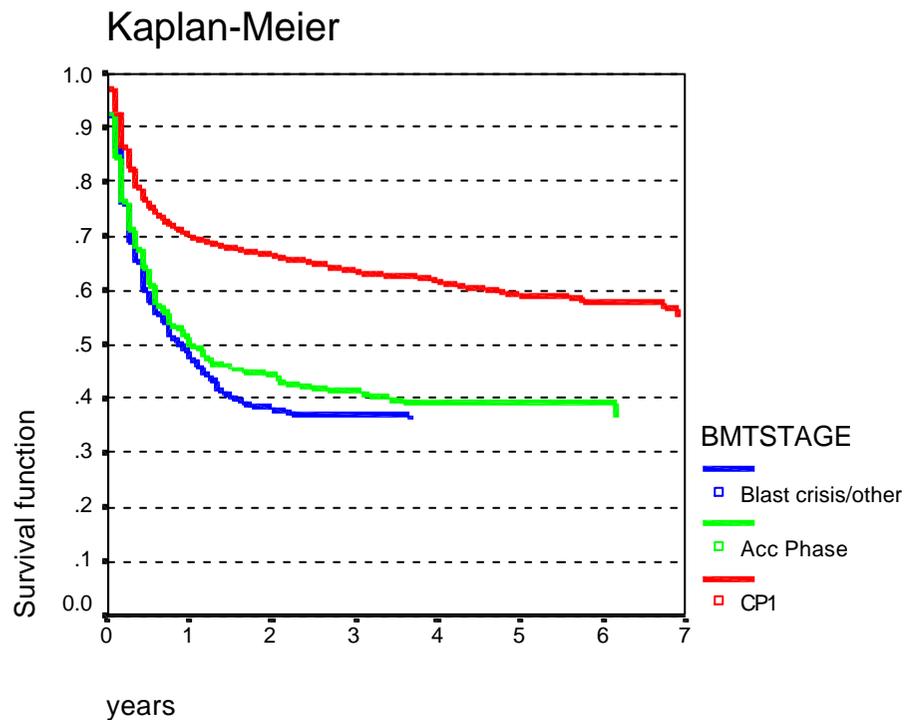
Data from EBMT data base. Cox regression on next sheets

| factor | category | frequency | regr. coef. | st. error | rel. risk | 95%-CI |
|-------------|--------------------|-----------|-------------|-----------|-----------|---------|
| type | HLA id sib | 2411 | 0 | | | |
| | unrelated | 731 | 0.52 | 0.07 | 1.7 | 1.5-1.9 |
| BMTstage | CP1 | 2301 | 0 | | | |
| | Acc Phase | 417 | 0.49 | 0.08 | 1.6 | 1.4-1.9 |
| | Blast crisis/other | 424 | 0.73 | 0.08 | 2.1 | 1.8-2.4 |
| AGEIND | <20 | 255 | 0 | | | |
| | 20-40 | 1831 | 0.41 | 0.12 | 1.5 | 1.2-1.9 |
| | >40 | 1056 | 0.7 | 0.13 | 2 | 1.6-2.6 |
| Patient sex | male | 1873 | 0 | | | |
| | female | 1269 | 0.06 | 0.07 | 1.1 | .9-1.2 |
| SEXCOM | other | 2364 | 0 | | | |
| | rmdf | 778 | 0.18 | 0.07 | 1.2 | 1.0-1.4 |
| DIAGTR0 | #12 months | 1547 | 0 | | | |
| | >12 months | 1595 | 0.28 | 0.06 | 1.3 | 1.2-1.5 |

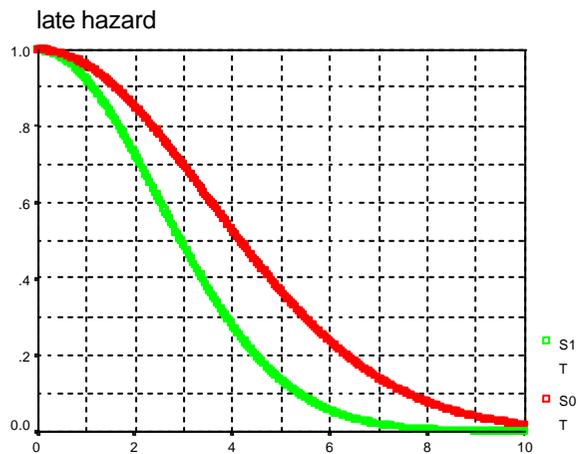
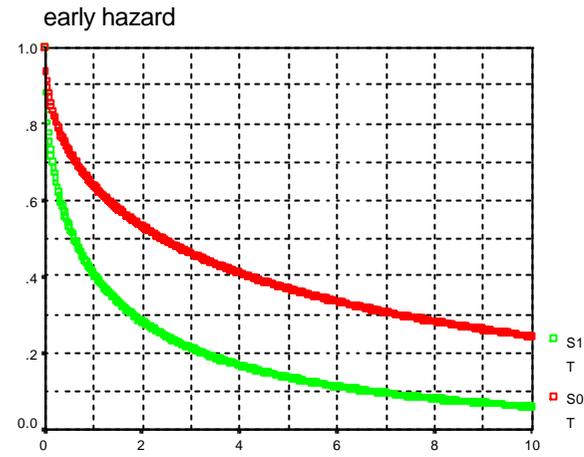
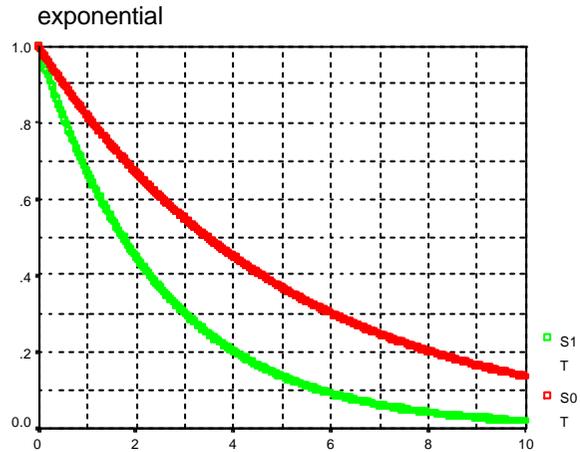
What does this table tell us?

The most outspoken effect is BMTSTAGE with RR=2.

Is that big? What does it mean?



Different graphs all corresponding to $RR=2$



Notice invariance under time transformation

Log rank tests are driven by the hazard ratio (RR).

RR drives the order of death: $Pr(A \text{ dies before } B) \propto \frac{RR}{RR+1}$

If you write a study protocol, you have to guess RR.

Beware: RR=ratio of medians, only under exponential model

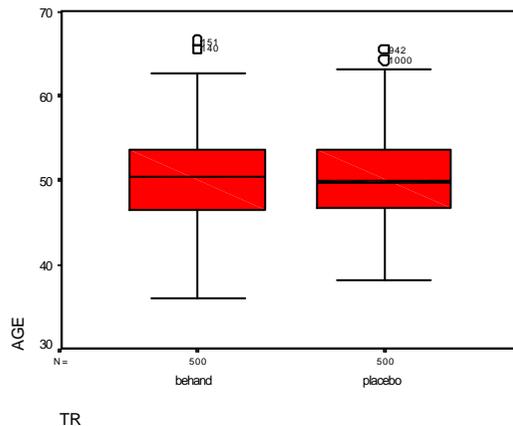
If you think you know what RR means, did you know that

If you remove an independent prognostic factor, the RR shrinks

(Keiding et al, 1997)

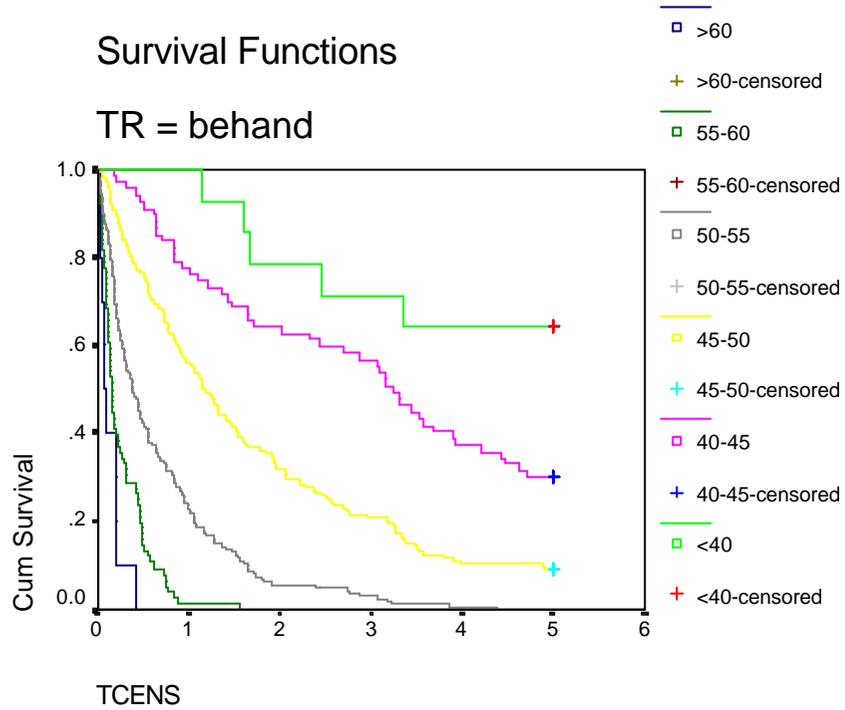
Simulation example showing shrinking RR

- Horrible disease
- poor survival
- strong dependency on age of onset
- new treatment (behand, TR=0) tested against placebo (TR=1)



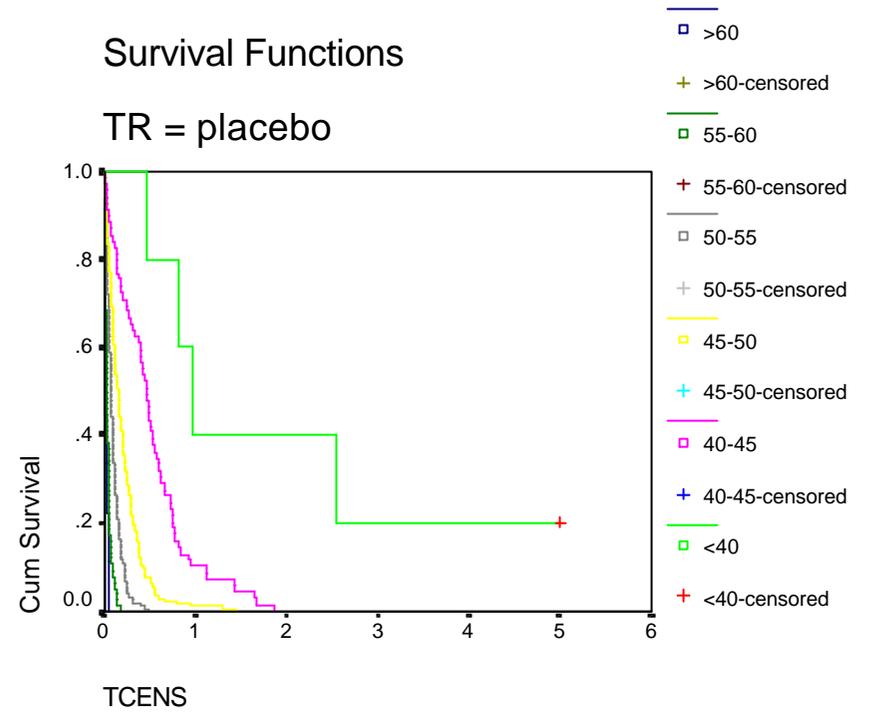
Survival Functions

TR = behand



Survival Functions

TR = placebo



Result Cox regression in SPSS

```
----- Variables in the Equation -----  
Variable B      S.E.      Wald  df      Sig      R      Exp(B)  
TR      1.4083  .0739  362.6882  1      .0000   .1765   4.0889
```

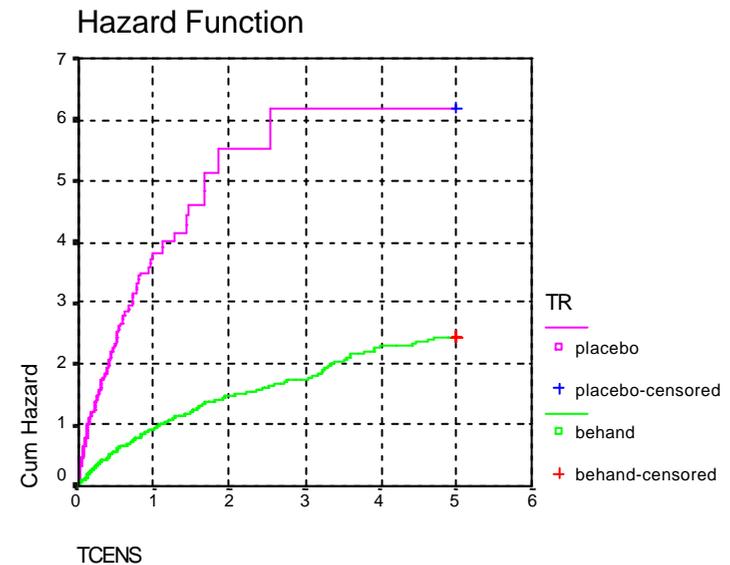
```
----- Variables in the Equation -----  
Variable B      S.E.      Wald  df      Sig      R      Exp(B)  
TR      2.1233  .0864  604.5014  1      .0000   .2319   8.3587  
AGE     .1976   .0081  600.0702  1      .0000   .2310   1.2184
```

Relative risk changes if we add AGE.

Moreover:

Model with AGE en TR satisfies Proportional Hazards

Model with TR alone violates PH



Consequences for planning studies and interim analysis.

(vanH, PSI, Chester, UK, 2001)

Consider only TR, forget about Age

| maximal follow-up (years) | RR |
|------------------------------|------|
| 0.1 | 6.10 |
| 0.5 | 4.31 |
| 1.0 | 4.28 |
| 5.0 | 4.09 |

Lessons to be learned:

- Relative risk is purely contextual
- Proportional hazard is a fairy tale

Remedy:

- Understanding what you are doing
- Accelerated Failure Time model **????**

Back to the Bone Marrow example

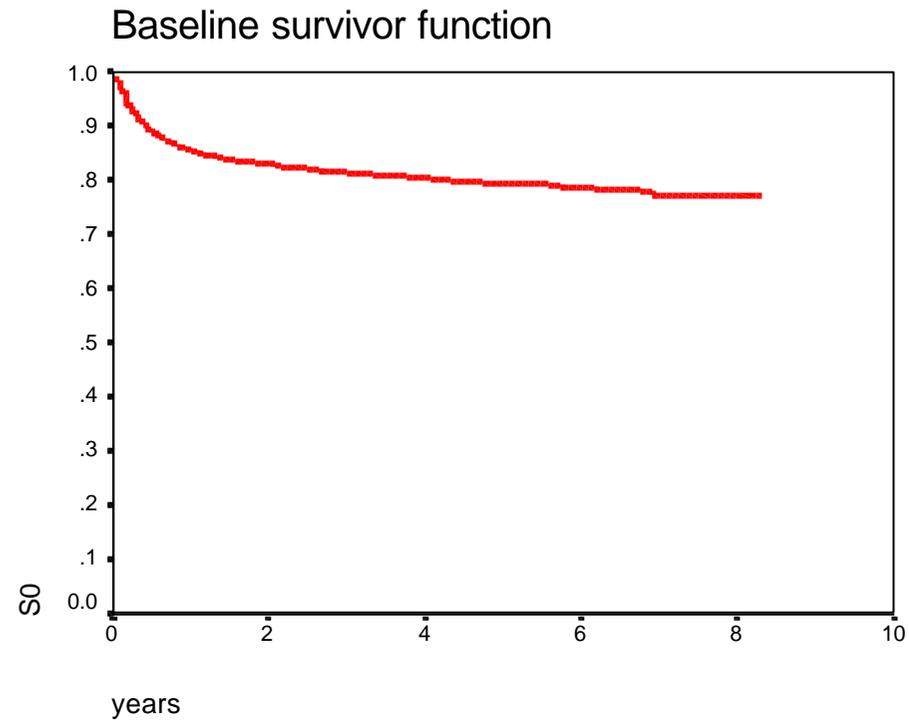
What does Cox model mean?

How can you obtain survival rates from the model?

- Compute $S_0(t)$ = baseline survivor function (for **baseline** patient)
- Compute PI= “linear predictor” (per patient)
- Compute RR=exp(PI)

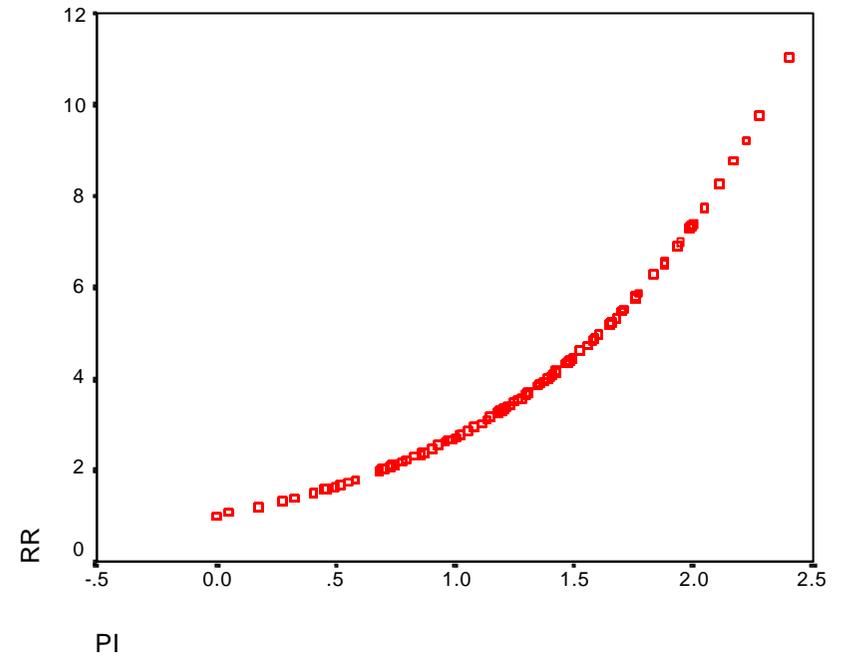
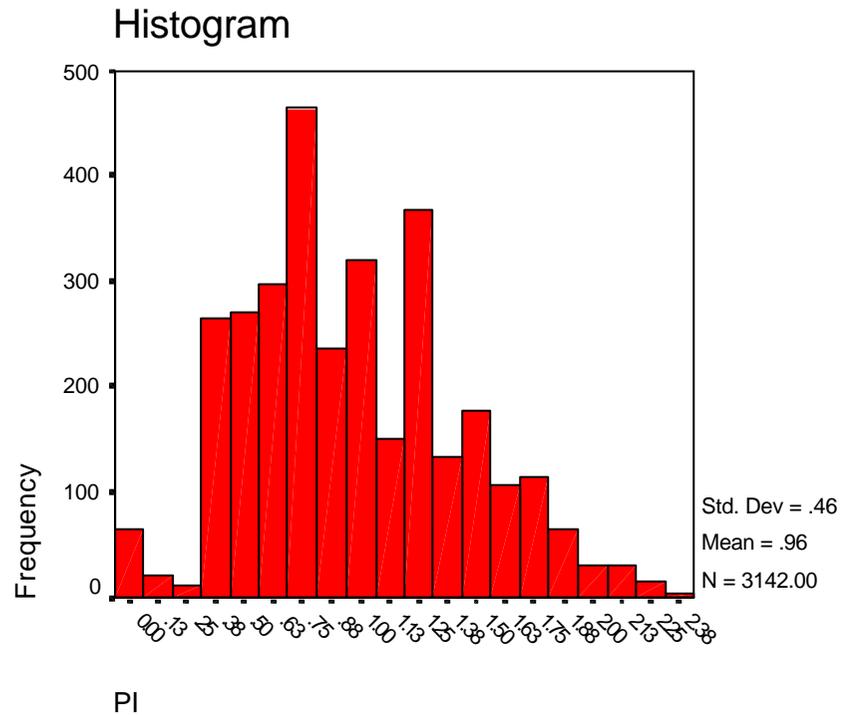
Survival per patient $S(t) = S_0(t)^{RR}$

Baseline patient=patient with best prognosis (my choice)

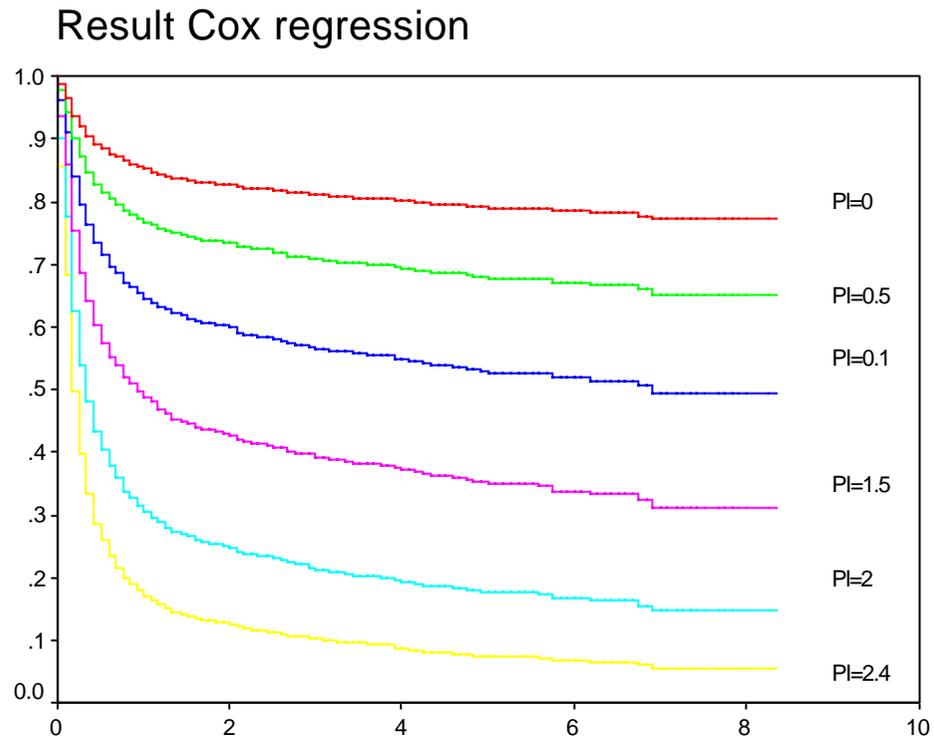


Prognostic index =

Relative risks



Survival curves for different PI-values



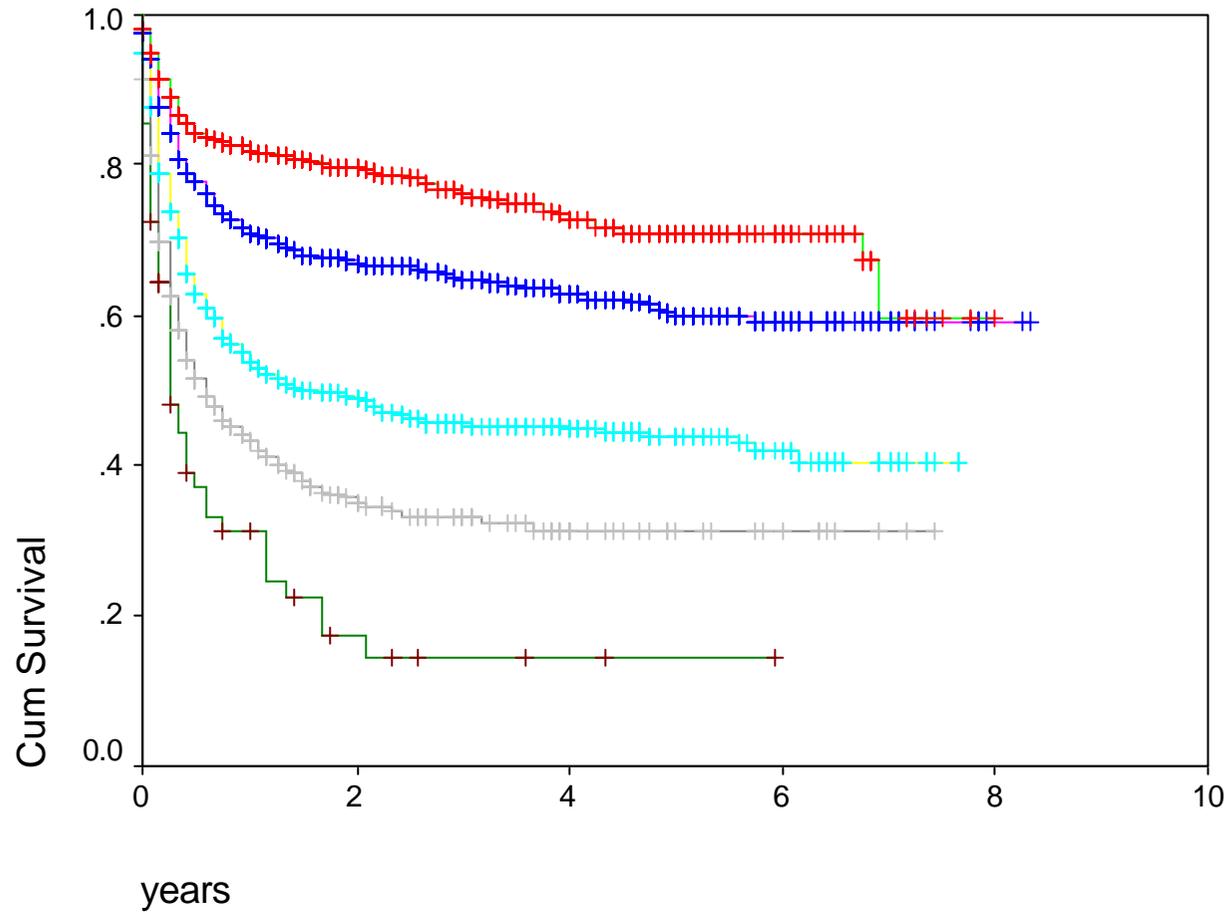
Is not there anything simple ?

Categorize PI

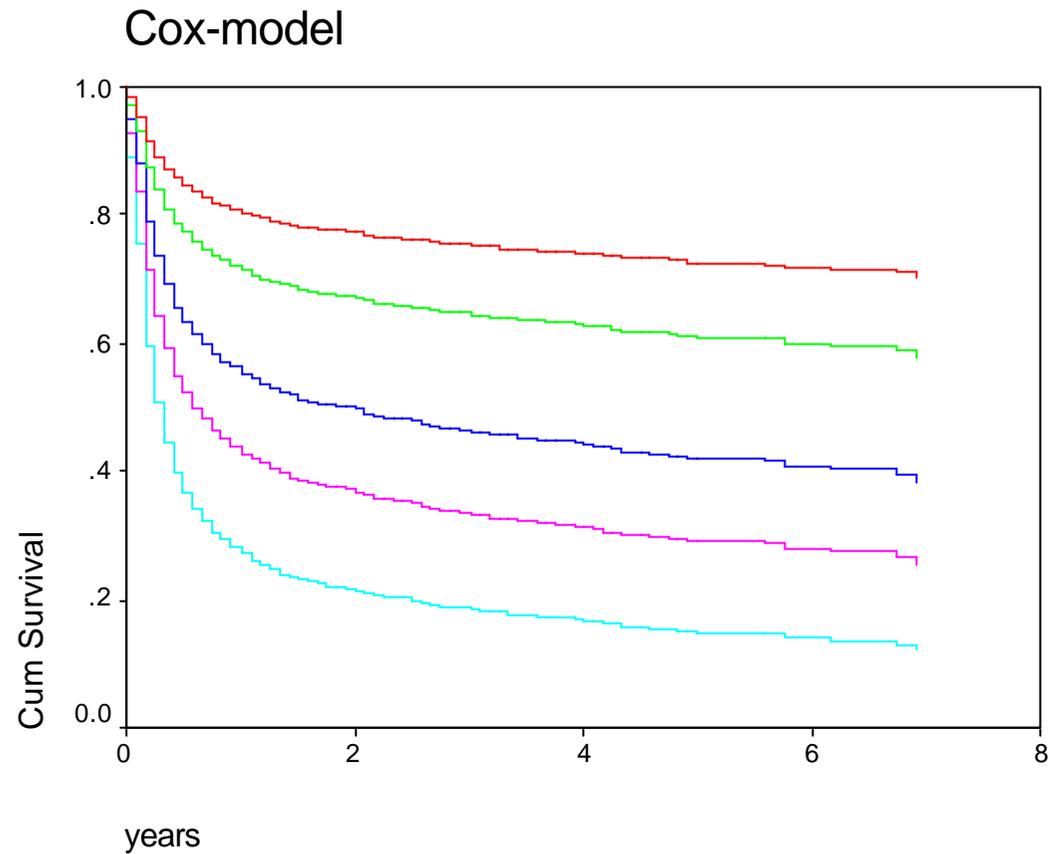
PICAT

| PI | Frequency | Percent |
|-----------|-----------|---------|
| 0.0-0.5 | 626 | 19.9 |
| 0.5-1.0 | 1172 | 37.3 |
| 1.0-1.5 | 908 | 28.9 |
| 1.5-2.0 | 374 | 11.9 |
| 2.0-..... | 62 | 2.0 |

Kaplan-Meiers



Cox model on categorized PI



No simple explicit formula available

Accelerated Failure Time model

“Patient A lives 1.677 times longer than patient B”

Well known AFT model that also has PH is the Weibull model.

Fitted by EGRET

| Parameter Estimates | | | | 95% C.I. | |
|---------------------|---------|----------|------------|----------|----------|
| Term | Coeff. | st.error | rate ratio | lower | upper |
| %GM | 4.4677 | 0.2975 | 87.1522 | 48.6425 | 156.1496 |
| TYPE='1' | -1.2368 | 0.1474 | 0.2903 | 0.2175 | 0.3875 |
| BMTSTAGE = '1' | -1.1382 | 0.1668 | 0.3204 | 0.2310 | 0.4443 |
| BMTSTAGE = '2' | -1.6720 | 0.1643 | 0.1879 | 0.1361 | 0.2593 |
| AGEIND = '1' | -0.8892 | 0.2670 | 0.4110 | 0.2435 | 0.6936 |
| AGEIND = '2' | -1.5857 | 0.2760 | 0.2048 | 0.1192 | 0.3518 |
| PATSEX = '2' | -0.0982 | 0.1459 | 0.9065 | 0.6810 | 1.2067 |
| SEXCOM = '1' | -0.4210 | 0.1585 | 0.6564 | 0.4811 | 0.8955 |
| DIAGTR0 = '1' | -0.5779 | 0.1383 | 0.5611 | 0.4278 | 0.7358 |
| %SCL S | 2.1447 | 0.0538 | | | |

Survival probabilities straight forward to compute

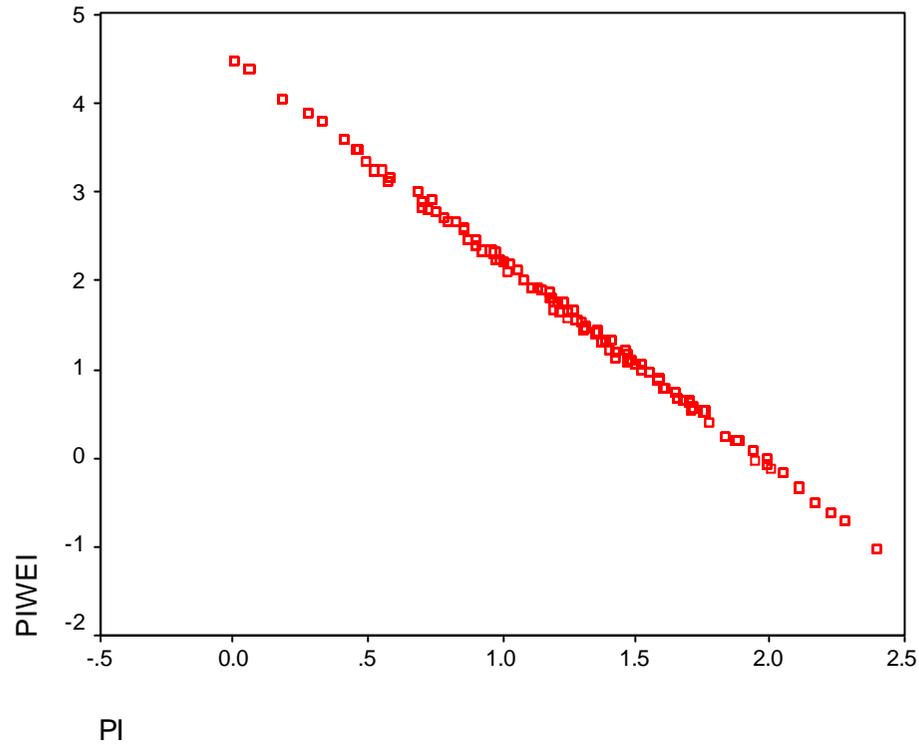
$PIWEI = 4.4677$ &.....

$$S(t|PIWEI) = Pr(T > t) = e^{-e^{\frac{\ln(t) + PIWEI}{s}}}$$

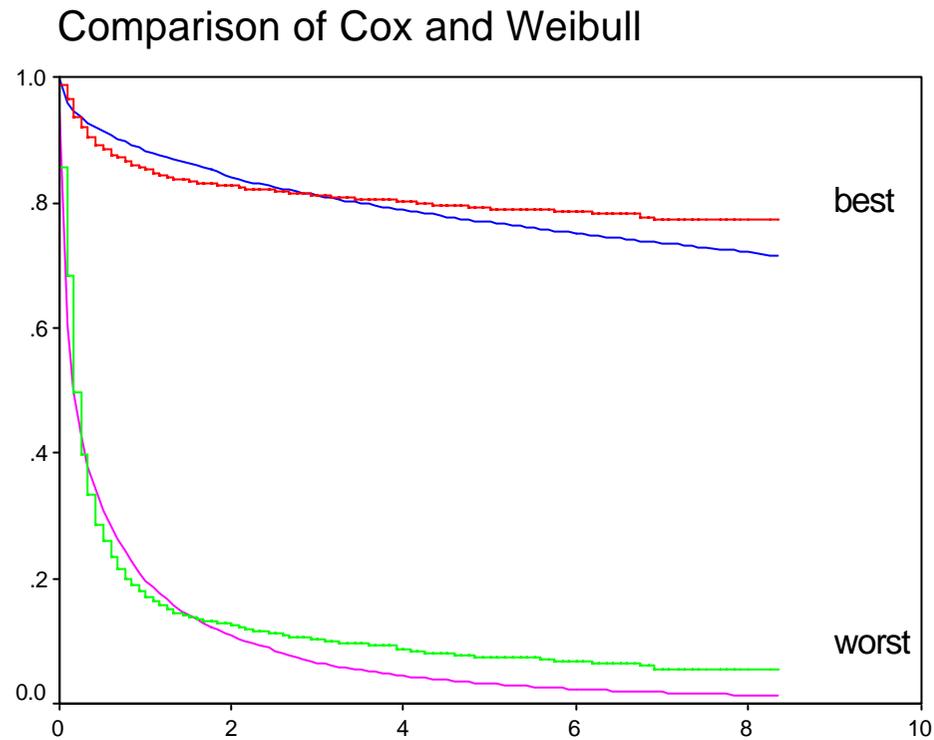
e^{PIWEI} models the time-points where $S(t) = e^{-1} = 0.37$

s determines the shape of the curve

Comparing Weibull-PI with Cox-PI



Comparing survival curves

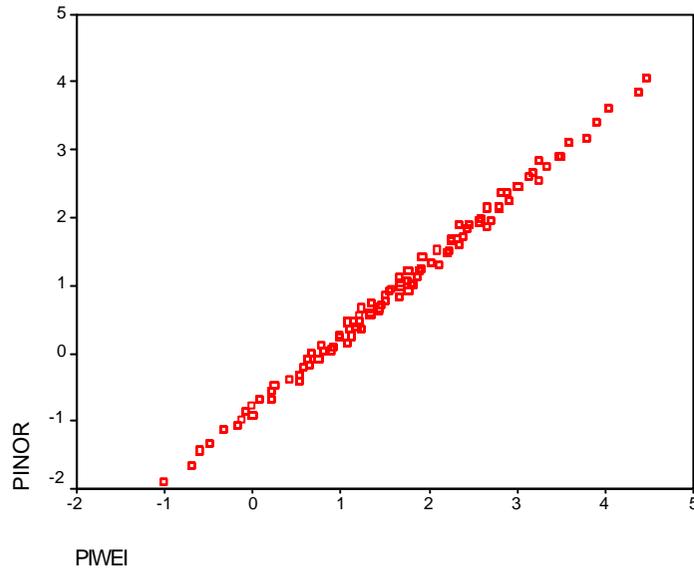


It looks like the shape is not quite Weibull.

Another try: lognormal. Analysis done in S-plus

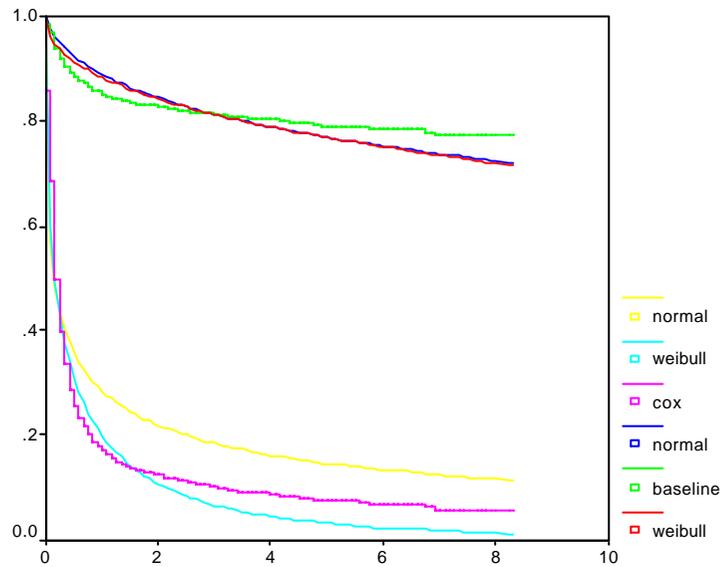
| Parameter Estimates | | |
|---------------------|--------|----------|
| Term | Coeff. | st.error |
| %GM | 4.073 | 0.316 |
| TYPE='1' | -1.24 | 0.177 |
| BMTSTAGE = '1' | -1.315 | 0.204 |
| BMTSTAGE = '2' | -1.895 | 0.201 |
| AGEIND = '1' | -0.943 | 0.288 |
| AGEIND = '2' | -1.703 | 0.301 |
| PATSEX = '2' | -0.219 | 0.166 |
| SEXCOM = '1' | -0.47 | 0.186 |
| DIAGTR0 = '1' | -0.678 | 0.156 |
| %SCL s | 3.35 | 0.0538 |

PINOR=4.073 -, very similar to PIWEI

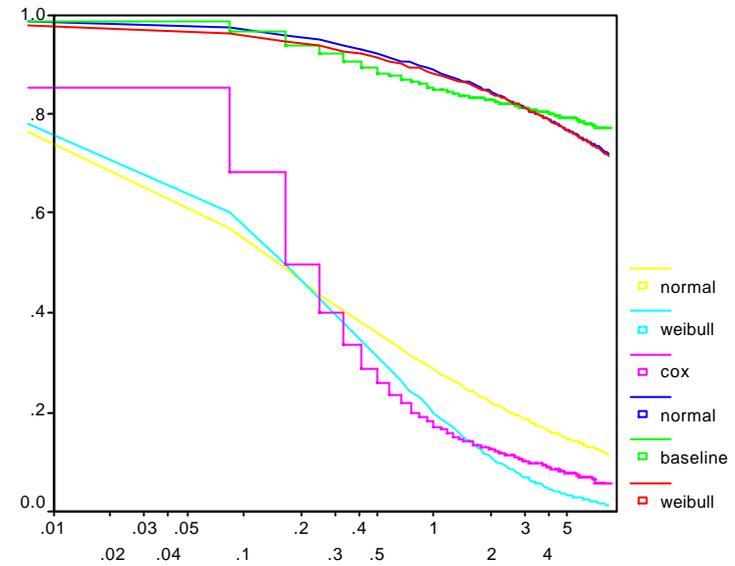


$$S(t|PINOR) = Pr(T > t) = 1 - F\left(\frac{\ln(t) + PINOR}{S}\right)$$

Results, similar to Weibull, but not quite satisfactory



best and worst patient



in logarithmic time

Weibull model analysis for simulation example

Age and TR in model

| | Coeff. | St. error | Rate ratio |
|------|---------|-----------|------------|
| %GM | 9.897 | 0.3321 | 19864 |
| Age | -0.1965 | 0.006492 | 0.8216 |
| TR | -2.112 | 0.06444 | 0.121 |
| %SCL | 0.9934 | 0.02528 | |

TR alone

| | Coeff. | St. error | Rate ratio |
|------|--------|-----------|------------|
| %GM | 0.2191 | 6615 | 1.245 |
| TR | -2.092 | 0.09072 | 0.1235 |
| %SCL | 1.398 | 0.03498 | |

Formal description

X: covariates

T: survival time

survivor function

$$S(t|X) = P(T > t | X)$$

density

$$f(t|X) = \frac{d(1 - S(t|X))}{dt}$$

hazard (force of mortality)

$$h(t|X) = \frac{P(T < t + dt | T \geq t, X)}{dt} = -\frac{d \ln(S(t|X))}{dt}$$

cumulative hazard

$$H(t|X) = \int_0^t h(s|X) ds = -\ln(S(t|X))$$

links:

$$S(t|X) = \exp(-H(t|X))$$

$$f(t|X) = S(t|X)h(t|X)$$

Right censoring

- censoring time C , due to
 - S end of follow-up
 - S competing risk
 - S lost-to-follow-up
- actually observed (and in data base)
 - $T^* = \min(T, C)$ (ignore *)
 - $d = [T \neq C]$ (indicator of event)
- likelihood of one individual's observation
$$L = f(T|X)^d S(T|X)^{1-d} S(T|X)h(t|X)^d$$

AFT-model

$$\ln(T) = X\beta + e$$

$X\beta$: overall mean + covariates

e : random variable on $(-\infty, \infty)$ with cum. distr. fct. F

Popular models

Weibull: $F(e) = 1 - \exp(-\exp(e))$

Normal: $F(e) = \Phi(e)$

Interpretation

What does $X\beta$ estimates?

$$P(T > e^{X\beta}) = 1 - F(0)$$

How do you predict T ?

$$P(e^{X\beta c_1} < T < e^{X\beta c_2}) = F(c_2) - F(c_1)$$

How do you compare two patients?

$$\text{Relative life-length} = \frac{T_2}{T_1} = \frac{e^{X_2\beta}}{e^{X_1\beta}}$$

What is the hazard ?

for Weibull: $\ln(h(t|X)) = \left(\frac{1}{s} + 1\right) \ln(t) + \frac{X\beta}{s}$ (β_{PH} & β_{AFT}/s)

for the rest: complicated

What is the explained variation (ignoring censoring) ?

$$R^2 = \frac{\text{var}(X\beta)}{\text{var}(X\beta) + \text{var}(e)} \quad (\text{always between 10\% and 20\%})$$

What is the best visualisation?

Impute censored observation and make scatter plot

(Royston, 2001)

(can also be used as alternative for estimation of parameters)

What happens if independent covariate is omitted?

- other β 's do not change
- s increases
- shape of e can change
- (PH-regression coefficients shrink to zero)

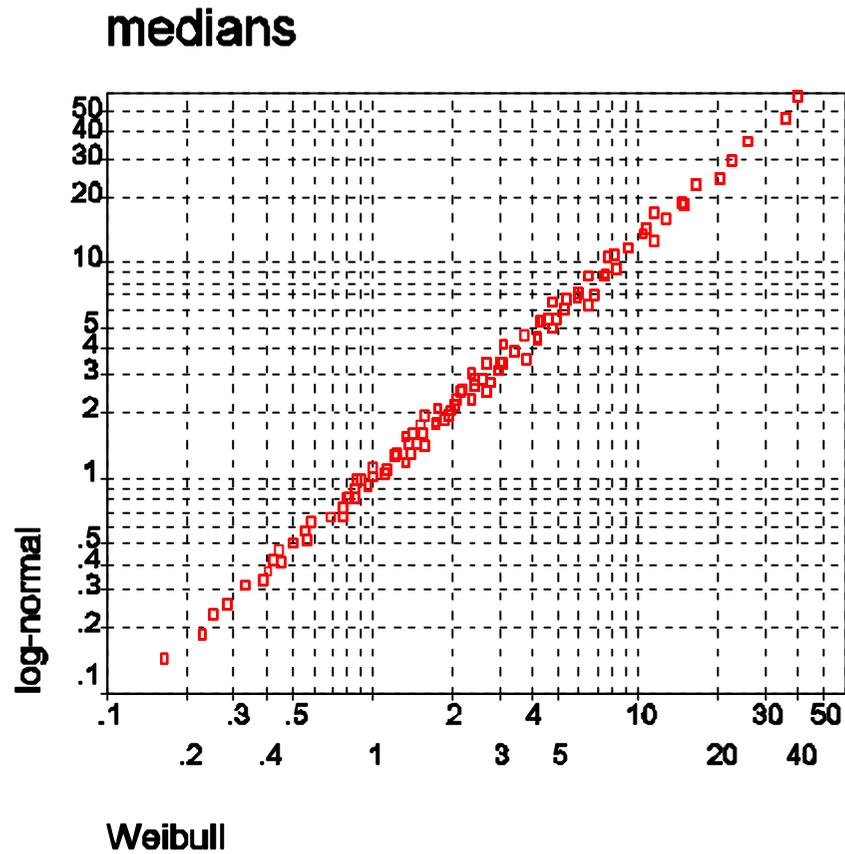
There is a clear link with frailty models without repetition

(Hougaard's book)

Back to the EBMT example

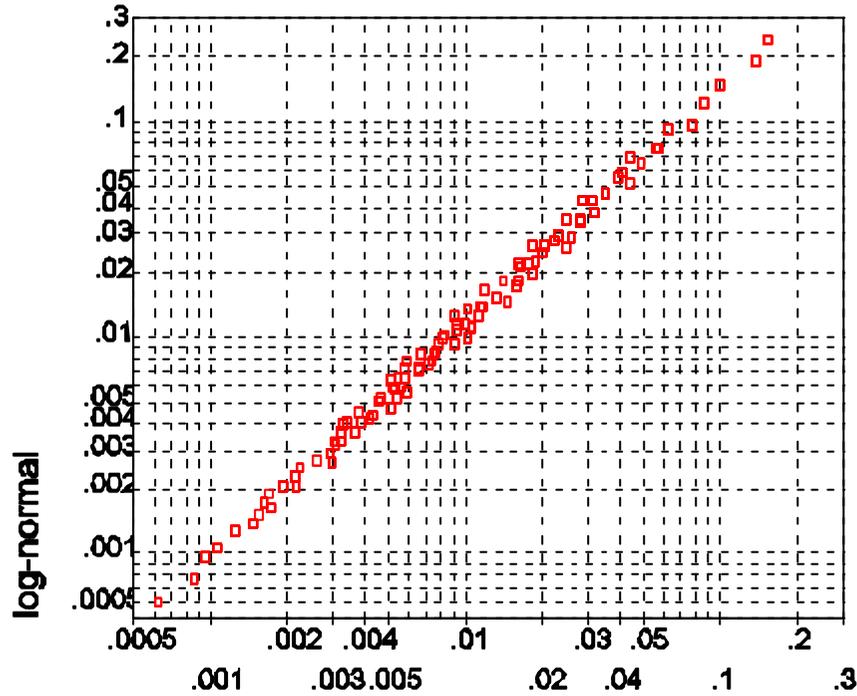
| model | $sd(X\beta)$ | s | $sd(e)$ | R^2 |
|---------|--------------|------|---------|-------|
| Weibull | 1.06 | 2.14 | 1.28 | 0.13 |
| normal | 1.16 | 3.35 | 1 | 0.11 |

Comparison of models on 5%, 50%, 95%-points



O.K.!

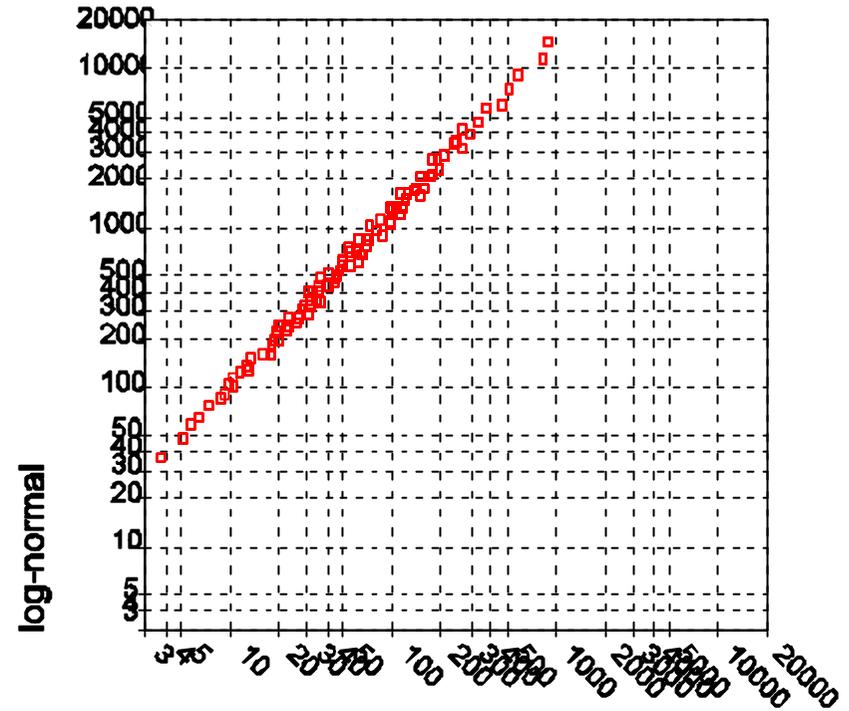
lower 5%-points



Weibull

observed

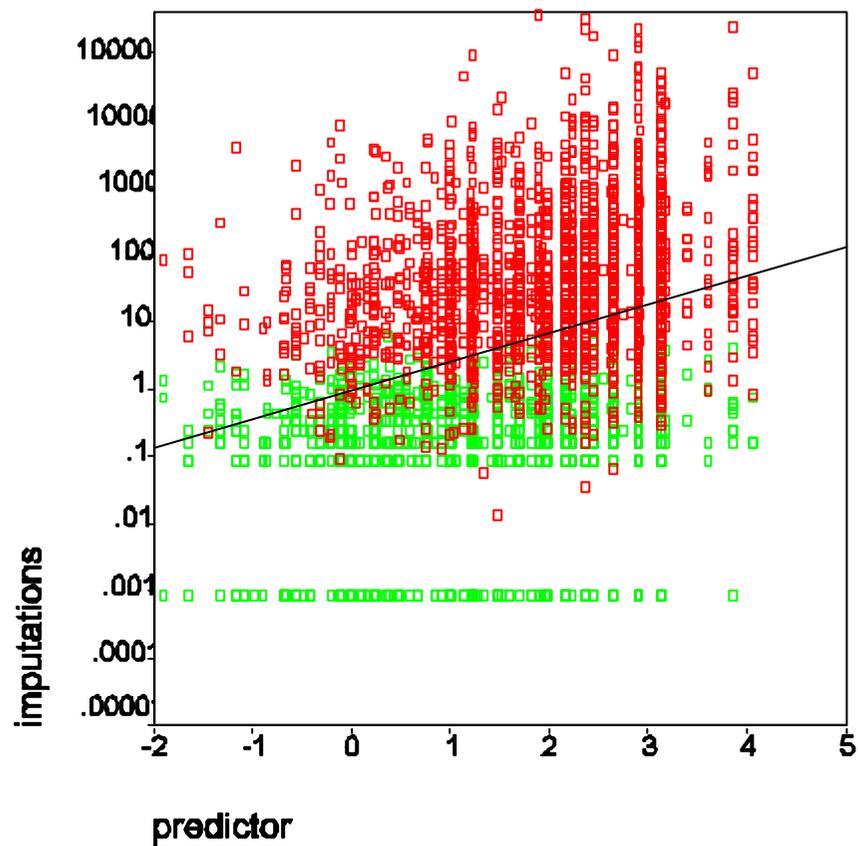
upper 5%-points



Weibull

extrapolated

Scatterplot based on log-normal imputations



acute death

Cox-model

$$h(t|X) = h_0(t) \exp(X\beta) \quad (\text{no constant})$$

Let $H_0(t) = \int_0^t h_0(s) ds$, then

$$S(t|X) = S_0(t)^{RR(x)} \quad \text{with}$$

$$S_0(t) = \exp(-H_0(t))$$

$$RR(X) = \exp(X\beta)$$

Link with AFT-model

Define $T_{tran} \mid H_0(T)$

Then

$T_{tran} \sim EXP(\exp(X\beta))$ the exponential distr. with

$$E[T_{tran}] = 1/\exp(X\beta)$$

That is

$$\ln(T_{tran}) = X\beta + e \text{ with } e \sim \log(\text{exponential})$$

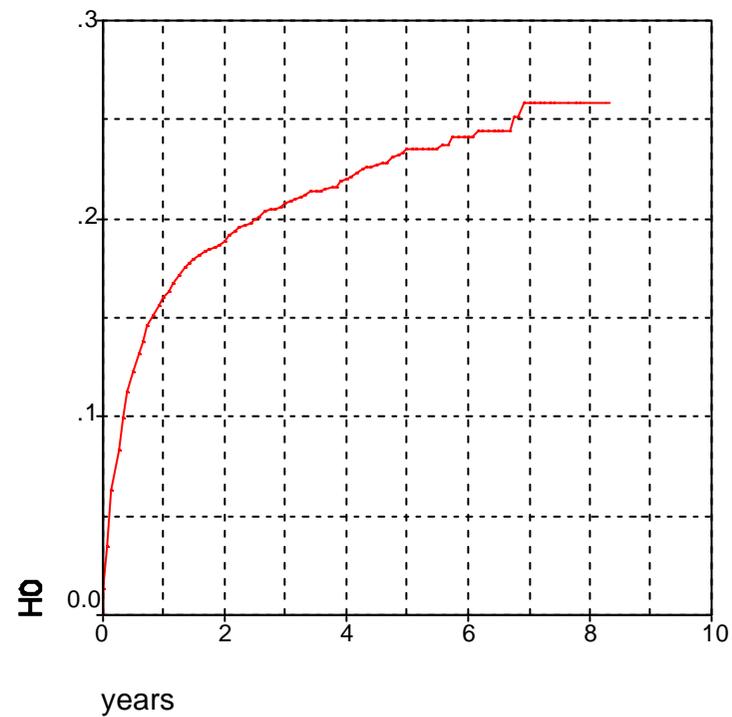
and

$$R^2 = \text{var}(X\beta) / (\text{var}(X\beta) + 1.64)$$

Back to the example

$$\text{var}(X\beta_{Cox})' .21 \text{ and } R^2' .21/ (.21\%1.64)' .11$$

Time transform



This transformation is the starting point for
validation of a Cox -model (See VanHouwelingen, SIM, 2000)

Given model defines

time transform T_{tran} and prognostic index PI

Weibull validation model

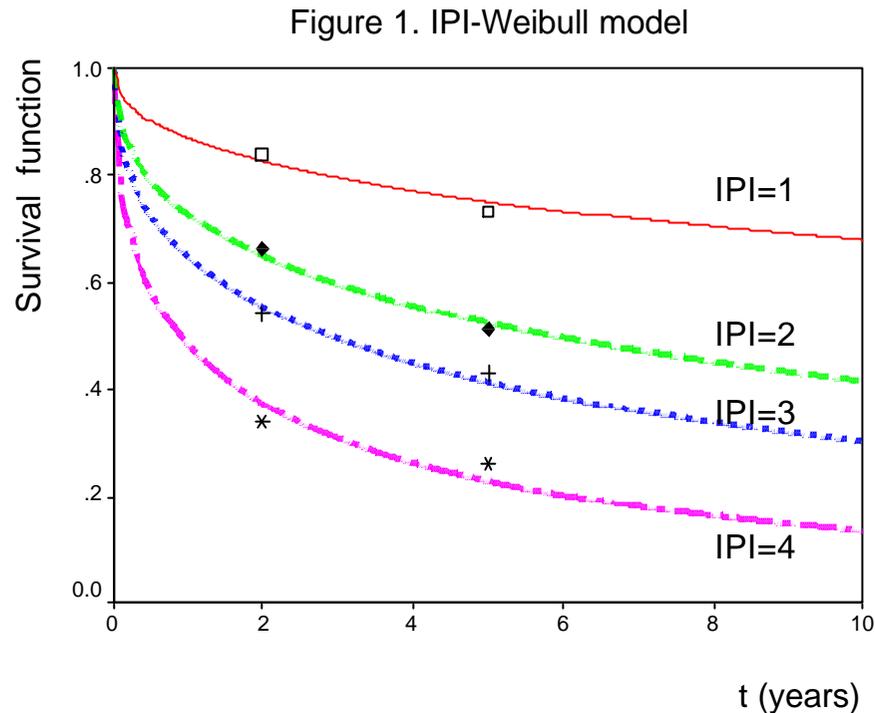
$$\ln(T_{tran}) = a + \beta PI^\gamma e \quad \text{with } e \sim \ln(\text{exponential})$$

Ideal $a=0$, $\beta=-1$ and $\gamma=1$

IPI-calibration example

- < IPI-group, NEJM, 1993 published model for survival of Non_Hodgkin Lymphoma patients
- < Hermans et al. 1996 compared it with Dutch data

IPI-paper gives no explicit model. Model made from table.



$\ln(-\ln(S(t|IPI))) = 0.319 + 0.439 \ln(t) + PI(IPI)$ with

$PI = 1.638, 0.824, 0.514$ and 0 for $IPI=1, 2, 3$ and 4

Dutch data

Figure 2. Kaplan Meier curves in Dutch data

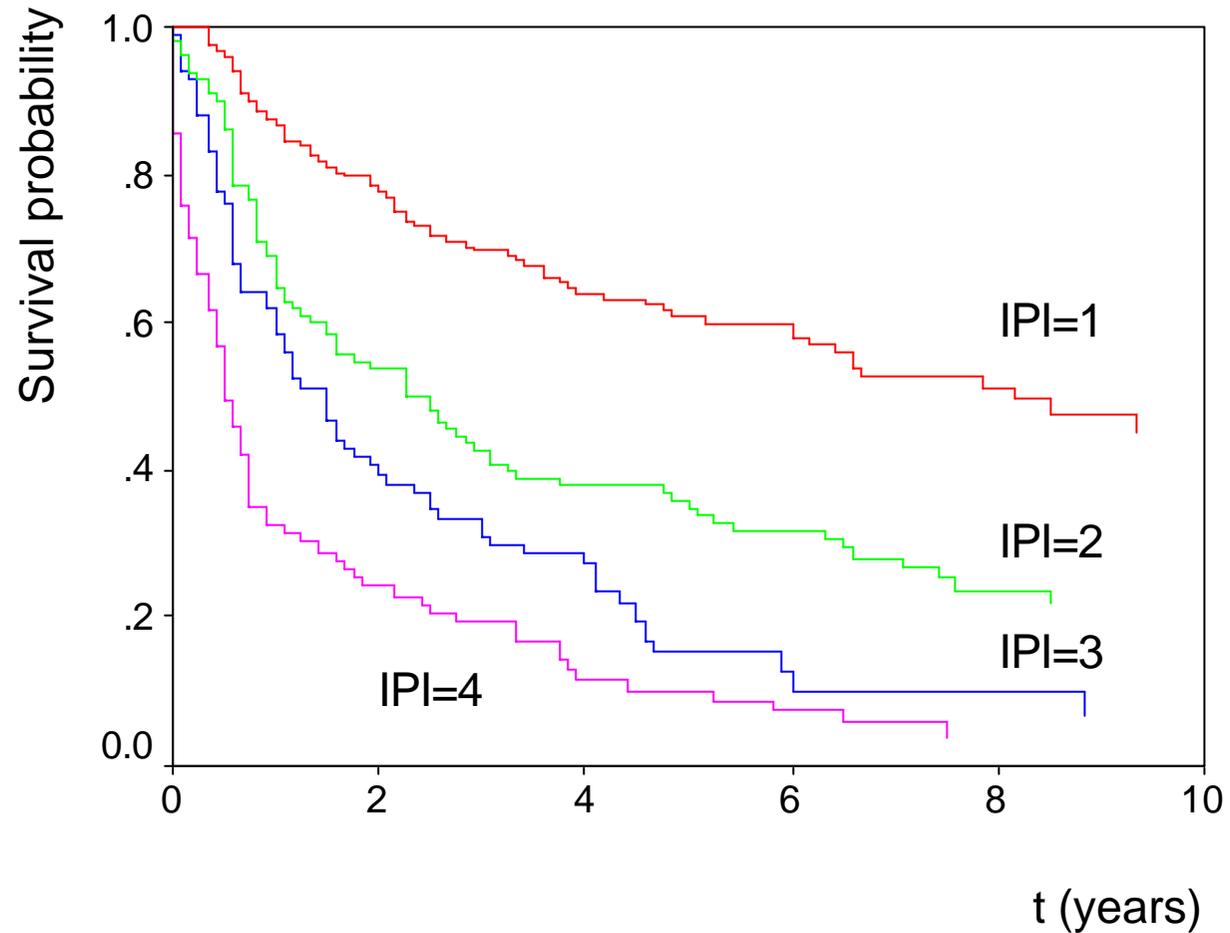


Table 2. Cox-regression on IPI

| category | $\hat{\beta}$ | s.e. |
|----------|---------------|-------|
| [IPI=1] | ! 1.673 | 0.169 |
| [IPI=2] | ! 0.920 | 0.160 |
| [IPI=3] | ! 0.477 | 0.163 |
| [IPI=4] | 0 | |

Regression coefficients are similar, but base-line hazards differ

Figure 4. Baseline Cumulative Hazards

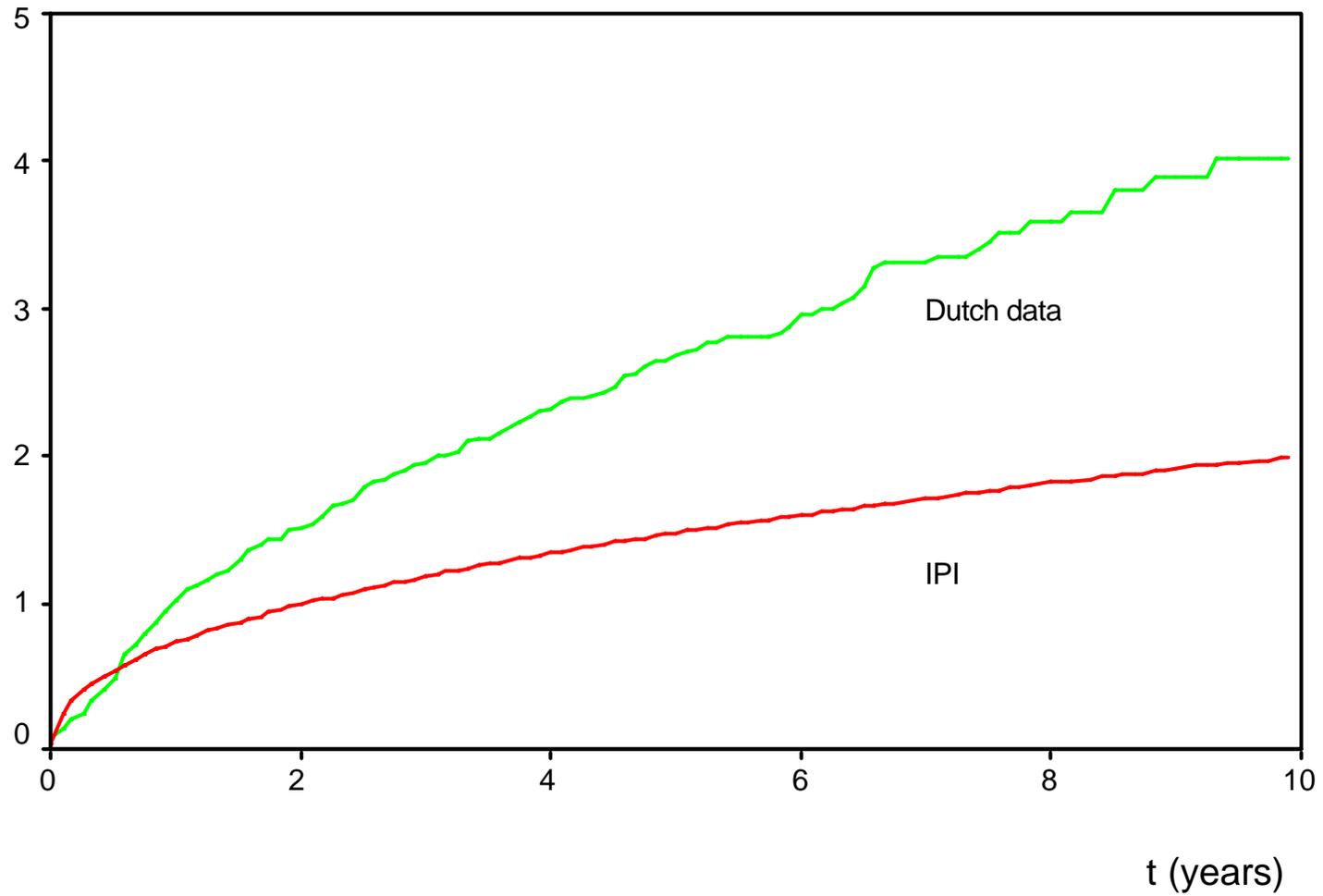


Table 3. Weibull calibration

| parameter | estimate | s. e. |
|-----------|----------|-------|
| a | ! 0.239 | 0.061 |
| β | ! 0.677 | 0.068 |
| ? | 0.649 | 0.032 |

Observe that $\beta/?. \&1$

General message of first session

- Use classical regression intuition to understand survival models
- Relative risk may be misleading
- Always compute and survivor curves
- **Survival is very hard to predict**