

# The problem of missing values – under- or overestimated? Some theses

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### It depends!



### (1)

If only very few data are missing, it can be argued that a detailed analysis is not necessary.

What means "very few", is problem-dependent. It can be valuable to look at single cases with missing values, in order to detect problems.

- If the data are observed in short time distances from each other, the problems are usually smaller than if the measurements are sparse.
- Not only the missingness itself is the problem but also imbalanced missingness between observation groups (e.g. treatments).
- All this does not mean that no prespecification is to be made. The prespecification can however be that no special investigations will be made.



### (2)

Deviations from the MAR assumption are common but their relevance is difficult to assess.

- It is worth-while to define influence measures, and to develop graphical diagnostic displays.

See e.g. Verbeke G et al.: Sensitivity Analysis for Nonrandom Dropout: A Local Influence Approach. Biometrics 2001; 57 (1): 7-14.
The effect and/or its SE could be shown in dependence from indicators for differential missingness like the IMOR (see presentation of I White)



#### (3)

Methodology is most advanced for quantitative (normallydistributed) data. Except for the GLMM, not much is known for ordinal, binary and (interval-)censored data.

- It is worth-while to continue the investigation of dependent censoring, competing risks, ...



### (4)

Post-hoc comparisons of baseline values / covariates between completed and discontinued subjects are not meaningful.

- It is necessary to investigate the prognosis for completion, dependent on early values.

The pattern-mixture model does not contradict to this thesis. It predicts the outcome of the experiment (e.g. the treatment difference), taking into account differential missingness.



### (5)

More methodology for analysis of intermittent missing data is needed, in addition to methods for drop-out data.



#### (6)

Analysis of, and extrapolation from, the data should use any available external (medical, ...) knowledge.

- This is implicitly Bayesian.

The external contribution is in practice often qualitative, e.g. exclusion of certain effects or influence factors.

Subject-matter knowledge is necessary if, in a special context, different dataanalytic methods lead to divergent results.