

CURRENT STATISTICAL METHODS FOR MORTALITY

(FAILURE TIME) DATA

TEACHING SESSION

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The following pages contain copies of the overhead transparencies used in Dr. Kalbfleisch's presentations. An audio tape of the presentation can be obtained at nominal cost from the conference organizers, Harry H. Panjer and Frank G. Reynolds, University of Waterloo.

CURRENT STATISTICAL METHODS FOR MORTALITY (FAILURE TIME) DATA.

DATA: r.v. $T \geq 0$ T = time to an event.

Explanatory Variables.

$\underline{z} = (z_1, \dots, z_s)$ measured covariates.

e.g. age, weight, Blood pressure, ...

PURPOSE:

1. ESTIMATE FORM OF DIST'N OF T given \underline{z}
2. EXPLORE RELATIONSHIP BETWEEN T AND \underline{z} .

REFERENCES:

KALBFLEISCH & PRENTICE (1980) *The Statistical Analysis of Failure Time Data*, Wiley

LAWLESS (1981) *Statistical Models & Methods for Lifetime Data*, Wiley

Cox, D.R. (1972) *Regression Models & Life Tables*
(with discussion) *JRSS B*, 187-220

EXAMPLE 1: Pike (1966) Biometrics

TIME IN DAYS TO VAGINAL CANCER

MORTALITY FOR RATS GIVEN A

CARCINOGEN.

2 PRETREATMENT REGIMENS. ($\alpha=0.1$)

DATA:

$\alpha=0$	143	164	188	188	190	192	206	209
	213	216	220	227	230	234	246	265
	304	216	244					

$\alpha=1$	142	156	163	198	205	232	232	233
	233	233	233	239	240	261	280	280
	296	296	323	204	344			

CENSORED TIMES FOR 4 ANIMALS.

TIME TO DEATH IS KNOWN TO EXCEED

THE CENSORING TIME.

RIGHT CENSORING - VERY COMMON

METHODS MUST ACCOMMODATE THIS.

EXAMPLE 2: CLINICAL TRIAL DATA.

Veteran's Administration Lung Cancer Study.

- patients with inoperable lung cancer.

T = time from diagnosis to death.

Standard versus test therapy

\underline{z} { time from diagnosis to admission
age
prior therapy 0=no 1=yes
cell type
performance status.

"fair" treatment comparison.

assess relationship between T and \underline{z} .

EXAMPLE 3: ACCELERATED LIFE TESTS.

150°C	10 x 8064 +
170°C	1764, 2772, 3444, 3542, 3780 4860, 5196, 3 x 5448 +
190°C	408, 408, 1344, 1344, 1440 5 x 1680 +
220°C	408, 408, 504, 504, 504, 5 x 528 +

Heavily censored.

Assessment of relationship between temperature and time to failure

Extrapolation ~ 130°C is standard operating temperature.

Possibility of time varying covariates.

$z(t)$ = temperature at time t

relate failure rate to current and previous values of $z(t)$.

EXAMPLE 4: COMPETING RISKS

FAILURE MAY BE ANY ONE OF SEVERAL DIFFERENT TYPES.

T = time to failure
J = type of failure

e.g. Hoel (1972). Mice given 300 rads of radiation + followed for cancer incidence

Group 0 control

Group 1 germ free.

Three failure types.

- i) incidence (diagnosis) of thymic lymphoma
- ii) " " " reticulum cell sarcoma
- iii) death

How do we construct convenient models?

How does treatment (or other z 's) affect failure rate ~~of~~ of one type?

EXAMPLE 5: MULTIPLE FAILURE TIMES.

e.g. attacks of asthma.



may be interested in relating rate of attacks to (e.g.) pollution levels. or to recent history of attacks.

e.g. automobile insurance.

relate accident rate to (e.g.) age, sex, previous accident history, etc.

Want methods which extend to situations like these.

Censoring

Time varying covariates.

Multiple Failure Types.

Multiple Failure Times.

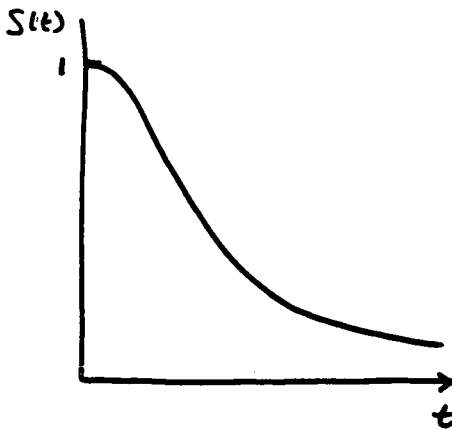
FAILURE TIME DISTRIBUTIONS.

random variable $T =$ time to failure, $T \geq 0$

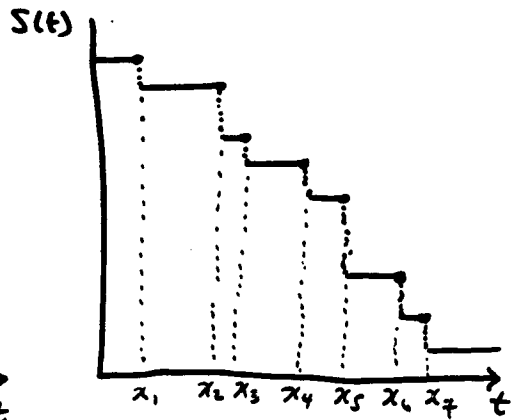
Survivor Function (Reliability Function)

Def'n $S(t) = \text{pr} \{T \geq t\}$

$S(0) = 1$, $S(\infty) = 0$, non increasing



T continuous



T discrete.

T (ABSOLUTELY) CONTINUOUS.

PROBABILITY DENSITY FUNCTION (p.d.f.)

$$\begin{aligned} f(t) &= -\frac{d}{dt} S(t) \\ &= \lim_{\Delta t \rightarrow 0^+} \text{pr}\{T \in [t, t+\Delta t)\} / \Delta t \end{aligned}$$

HAZARD FUNCTION (instantaneous failure rate, force of mortality)

$$\lambda(t) = \lim_{\Delta t \rightarrow 0^+} \text{pr}\{T \in [t, t+\Delta t) | T \geq t\} / \Delta t$$

INTERRELATIONS:

$$\begin{aligned} \lambda(t) &= f(t) / S(t) \\ &= -\frac{d}{dt} \log(S(t)) \end{aligned}$$

$$\therefore \boxed{S(t) = \exp\left\{-\int_0^t \lambda(u) du\right\}}$$

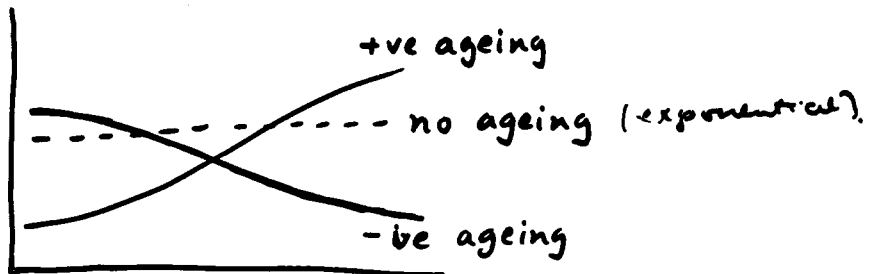
since $S(0) = 1$

Thus $\lambda(t)$ characterizes the distribution of T .

$$\boxed{f(t) = \lambda(t) S(t)}$$

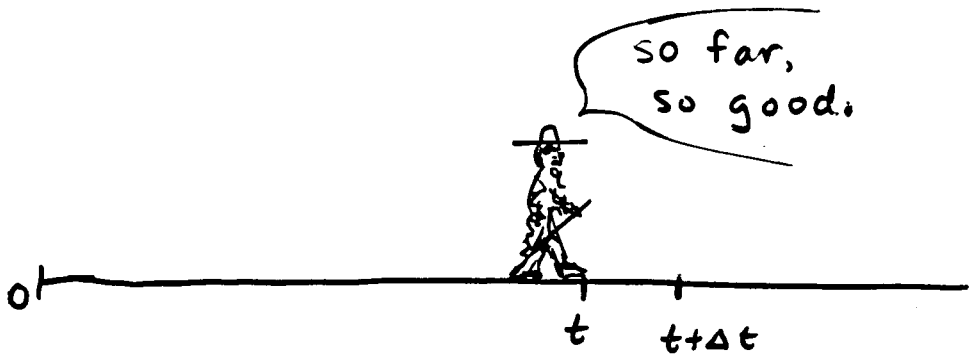
WHY HAZARD MODELLING.

① EASE OF INTERPRETATION



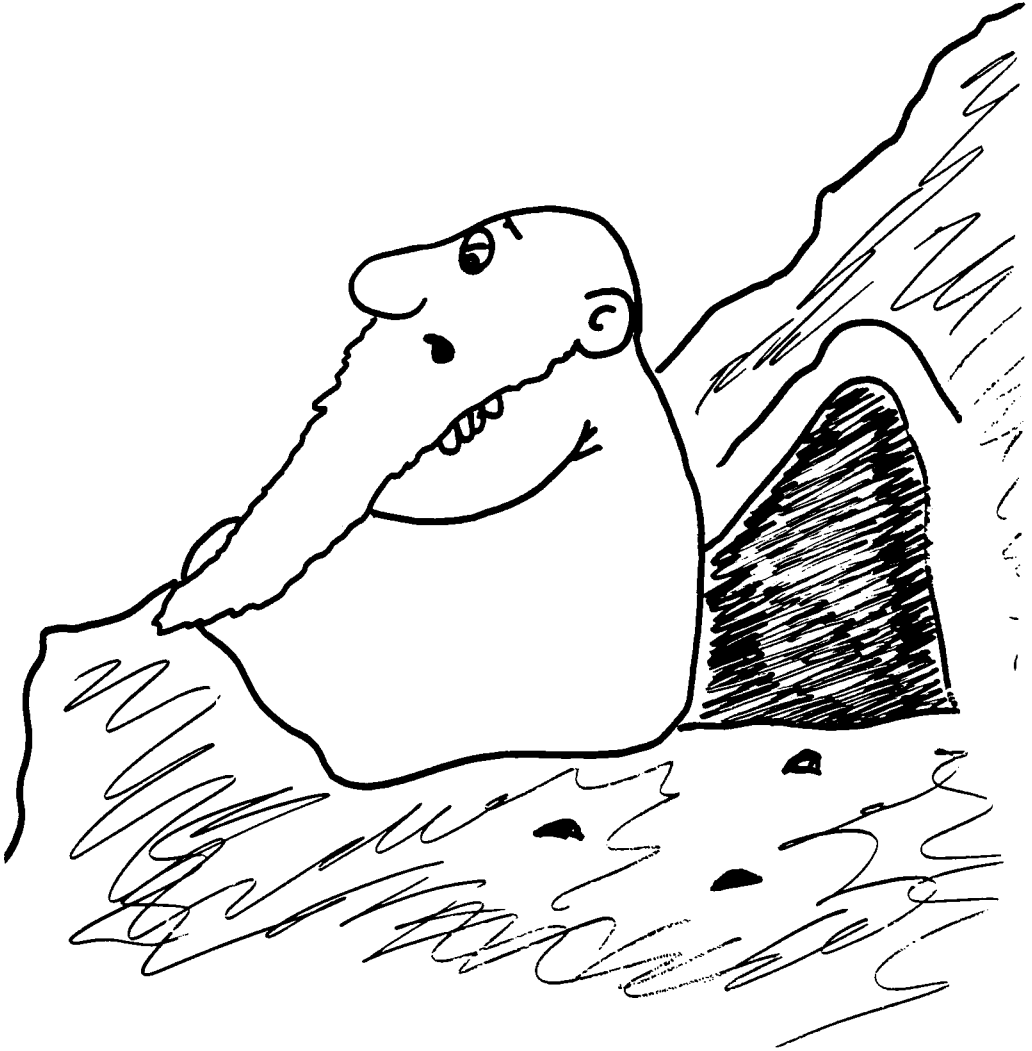
② INVITES SEQUENTIAL INTERPRETATION

Time dep't covariates.
Likelihood construction
Partial likelihood.



Interpretation of right censoring.

LIFE IS A SEQUENCE
OF BERNOULLI TRIALS



T DISCRETE

$S(t)$ step fcn

discontinuities at $x_1 < x_2 < x_3 < \dots$

PROBABILITY FUNCTION:

$$f(x_j) = \text{pr} \{T = x_j\} \quad j = 1, 2, \dots$$

HAZARD FUNCTION:

$$\lambda_j = \text{pr} \{T = x_j | T \geq x_j\} = f(x_j) / S(x_j) \quad j = 1, 2, \dots$$

INTERRELATIONS: ($\lambda_0 = 0$)

$$S(x_j) = (1 - \lambda_0)(1 - \lambda_1) \dots (1 - \lambda_{j-1})$$

$$= \prod_{j | x_j < t} (1 - \lambda_j) \quad *$$

$$f(x_j) = \lambda_j S(x_j) \quad j = 1, 2, \dots$$

* THE LIFE TABLE IS BASED ON THIS RELATIONSHIP.

SURVIVOR FUNCTION ESTIMATION

<u>LIFE TABLE :</u>	at risk	deaths	losses (withdrawals.)
$[b_0, b_1)$	N_1	D_1	c_1
$[b_1, b_2)$	N_2	D_2	c_2
$[b_2, b_3)$	N_3	D_3	c_3
\vdots	\vdots	\vdots	\vdots
$[b_{k-1}, b_k)$	N_k	D_k	c_k

$$\lambda_j = \text{pr} \{ T \in [b_{j-1}, b_j) \mid T \geq b_{j-1} \}$$

Estimate

$$\hat{\lambda}_j = \frac{D_j}{N_j - c_j/2} = \frac{D_j}{N_j'}, \quad j=1, \dots, k$$

The corresponding estimate of the survivor function is

$$\begin{aligned} \hat{S}(b_j) &= \prod_{l=1}^j (1 - \hat{\lambda}_l) \\ &= \prod_{l=1}^j \left(1 - \frac{D_l}{N_l'} \right) \end{aligned}$$

NOTE: Grouped data — if actual times of failures & censorings are known, there are better estimates.

THE KAPLAN MEIER (PRODUCT LIMIT) ESTIMATE

Censored sample from $S(t) = \text{pr}\{T \geq t\}$.

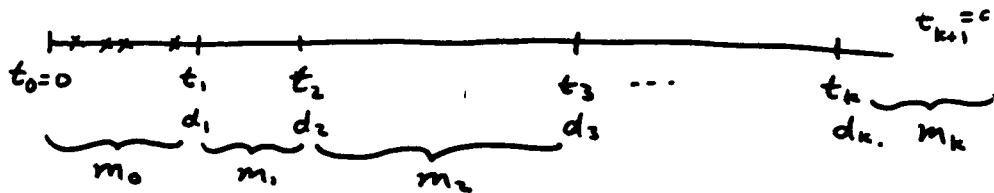
Failure times are $t_1 < t_2 < \dots < t_k$

d_i individuals fail at t_i

Censored times

m_j individuals are censored in

$[t_{j-1}, t_j)$ at t_j, \dots, t_{j+m_j}



$$\text{Let } n_j = d_j + m_j + \dots + d_k + m_k \\ = \# \text{ at risk at } t_j - 0$$

Estimate discrete hazard components

$\hat{\lambda}_1, \dots, \hat{\lambda}_k$ at t_1, \dots, t_k

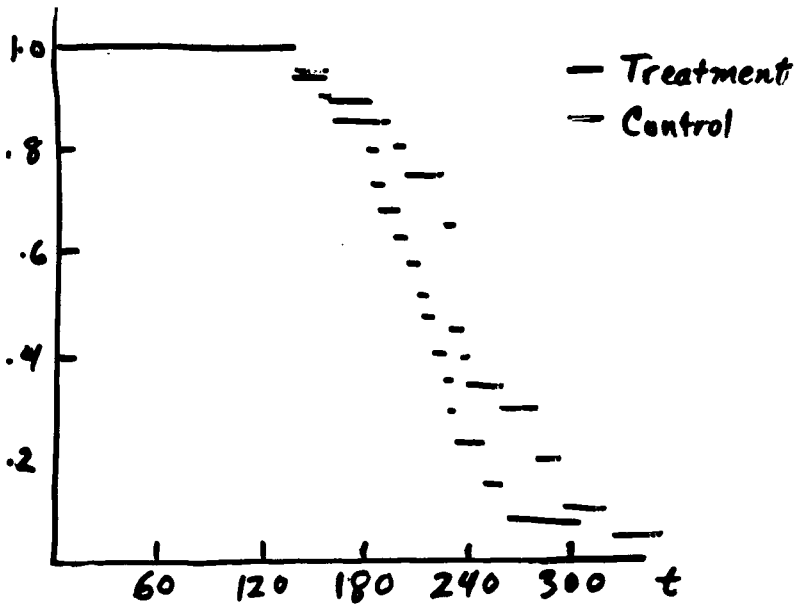
$$\hat{\lambda}_j = d_j / n_j = \frac{\# \text{ failing}}{\# \text{ at risk}}$$

Kaplan-Meier Estimate is

$$\hat{F}(t) = \prod_{j|t_j < t} \left(1 - \frac{d_j}{n_j}\right)$$

EXAMPLE: CARCINO GENESIS.

t_j	d_j	n_j	$(1-\hat{\lambda}_j)$	$\hat{F}(t_j+0)$
142	1	21	20/21	.952
156	1	20	19/20	.905 $(= .952 \times \frac{19}{20})$
163	1	19	18/19	.857
198	1	18	17/18	.810
205	1	16	15/16	.759
232	2	15	13/15	.658
233	4	13	9/13	.455
239	:	:	:	:
240	:	:	:	:
261				



COMPARISON OF TWO POPULATIONS:

Censored samples available from two populations with survivor functions $S_1(t)$ and $S_2(t)$.

We wish to test the hypothesis $S_1(t) = S_2(t)$, $0 < t < \infty$.

LOG RANK TEST (MANTEL HAENSEL TEST)

- MANTEL (1966) JNCI
- PETO & PETO (1972) JRSSA

Data organization:

- pool samples and let

$$t_1 < t_2 < \dots < t_k$$

be the distinct failure times.

	t_1	t_2	\dots	t_k
# failing at t_j	d_1	d_2		d_k
# at risk at $t_j - 0$	n_1	n_2		n_k

View sequentially and test $\lambda_1(t) = \lambda_2(t)$
(equality of failure rates)

Let d_{ij} (n_{ij}) be the # of failures at t_j (# at risk at $t_j - 0$) in Sample $i, i=1, 2$

At t_j , set up a 2×2 Contingency Table

Sample	Failures	Survivors	At Risk
1	d_{1j}	$n_{1j} - d_{1j}$	n_{1j}
2	d_{2j}	$n_{2j} - d_{2j}$	n_{2j}
	d_j	$n_j - d_j$	n_j

Under the null hypothesis ($\lambda_1(t) = \lambda_2(t)$), and given $C_j = (d_j, n_{1j}, n_{2j})$, the probability fcn. of d_{ij} is

$$p(d_{ij} | C_j) = \binom{n_{1j}}{d_{1j}} \binom{n_{2j}}{d_{2j}} / \binom{n_j}{d_j}$$

The corresponding (conditional) mean & variance are

$$e_{ij} = E(d_{ij} | C_j) = n_{ij} d_j / n_j$$

$$V_{ij} = \text{var}(d_{ij} | C_j) = n_{1j} n_{2j} d_j (n_j - d_j) n_j^{-2} (n_j - 1)^{-1}$$

$$\text{Let } v_j = d_j - e_{1j}$$

The log rank statistic is

$$v = \sum_{j=1}^k v_{ij} = O_i - E_i$$

which can be shown to ~~have~~ be approximately normal with mean 0 and variance estimated by

$$V = \sum_{j=1}^k V_{ij}$$

Comparison of v/\sqrt{V} with $N(0,1)$ tables provides the test.

Notes:

i) O_i = obs'd # of deaths in sample 1
 E_i = (sum of conditionally) expected # of deaths in sample 1.

ii) The test exploits the sequential nature of the failure time mechanism.

iii) The test is applicable both to grouped data and to "continuous" data.

EXAMPLE:

Discrete (grouped) failure time data.
Censoring at end of intervals.

Time to recurrence after initial 90 day treatment period.

	0-3mos.	3-6mos.	6-9mos.	9-12mos.	>12
Rad	$d_{11} = 10$ $n_{11} = 65$	$d_{12} = 8$ $n_{12} = 54$	$d_{13} = 12$ $n_{13} = 40$	$d_{14} = 8$ $n_{14} = 22$	12
MTx + Rad	$d_{21} = 5$ $n_{21} = 70$	$d_{22} = 8$ $n_{22} = 62$	$d_{23} = 8$ $n_{23} = 44$	$d_{24} = 4$ $n_{24} = 28$	20

View sequentially - each interval is a separate trial

e.g. 2nd interval

sample	fail	surv.	at risk
1	8	46	54
2	8	54	62
	16	100	116

$$V_{12} = d_{12} - e_{12} = 8 - 7.45 = .55$$

$$V_{12} = 3.46$$

$$\text{Find } \frac{V}{\sqrt{V}} = 2.37 \quad \text{S.L.} \approx .02$$

Some indication that MTx + Rad is the preferable therapy.

Example: Un grouped data. Carcinogenesis.

Grp 1: 143, 164, 188, 188, 190, 192, ...

Grp 2: 142, 156, 163, 198, 205, 232, 232, ...

Some procedure

e.g. at $t_j = 188$

$$n_{1j} = 17 \quad d_{1j} = 2$$

$$n_{2j} = 18 \quad d_{2j} = 0$$

sample	fail	surv	risk
1	2	15	17
2	0	18	18
	2		35

Calculate v_{ij}, V_{ij}

Carry out computations for each failure time

142, 143, 156, 163, 164, 188, 190, 192, ...

In this case

$$\frac{v}{\sqrt{V}} = 1.77$$

$$S.L. \approx .08$$

$v = D_i - E_i > 0 \Rightarrow$ sample 1 has somewhat poorer experience. Differences are not significant.

REGRESSION MODELS:

- relate time to failure to covariates \underline{z}
 $\underline{z} = (z_1, \dots, z_n)$
- allow quantification of "risk" associated with various subgroups indicated by levels of \underline{z} .

Consider simplest case first.

$z = 0, 1$ sample indicator. $A = 1$

Let

$$\lambda(t; z) = \lim_{\Delta t \rightarrow 0^+} \text{pr}\{T \in [t, t + \Delta t) \mid T \geq t, z\} / \Delta t$$

be the hazard function for $z = 0, 1$.

The Proportional hazards model

specifies $\lambda(t; z) = \lambda_0(t) e^{z\beta}$

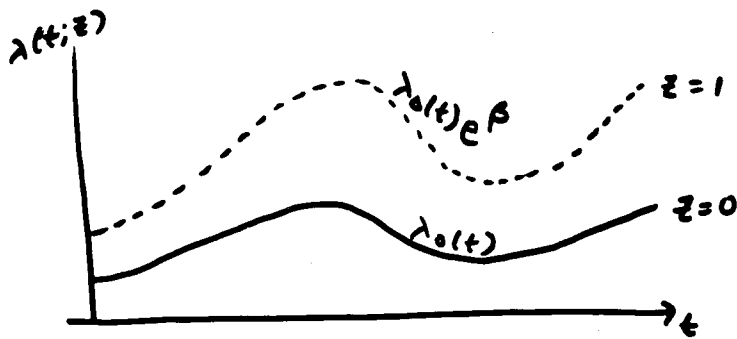
for some unknown parameter β and arbitrary unspecified hazard $\lambda_0(t)$.

Thus

$$\lambda(t; 0) = \lambda_0(t) \quad (z=0)$$

$$\lambda(t; 1) = \lambda_0(t) e^{\beta} \quad (z=1)$$

$e^{\beta} =$ "relative risk".



Effect of the covariate is to act multiplicatively on the hazard.

$$\frac{\lambda(t; 1)}{\lambda(t; 0)} = e^{\beta} = \text{relative risk} \quad (\text{indep't of time}).$$

GENERAL

$\underline{z} = (z_1, \dots, z_n)$ vector of n covariates.

$$\begin{aligned} \lambda(t; \underline{z}) &= \lambda_0(t) e^{\underline{z} \cdot \underline{\beta}} \\ &= \lambda_0(t) e^{z_1 \beta_1 + \dots + z_n \beta_n} \end{aligned}$$

where $\underline{\beta} = \begin{pmatrix} \beta_1 \\ \vdots \\ \beta_n \end{pmatrix}$ and $\lambda_0(\cdot)$ is arbitrary.

Note $\frac{\lambda(t; \underline{z}^*)}{\lambda(t; \underline{0})} = e^{\underline{z}^* \cdot \underline{\beta}}$ is the "relative risk"

associated with $\underline{z} = \underline{z}^*$ compared to $\underline{z} = \underline{0}$.

PROBLEMS:

1. TESTS FOR MODEL ADEQUACY.
2. ESTIMATION OF β_2 AND HENCE OF RELATIVE RISKS.
3. ESTIMATION OF $\lambda_0(\cdot)$

We shall deal mostly with 2.

Note again the model

$$\lambda(t; \underline{z}) = \lambda_0(t) e^{\underline{z} \beta_2}$$

This is a regression model for the failure rate at time t

Postulates no direct relationship between T : time to failure and \underline{z} .

LIFE IS A SEQUENCE OF BERNOULLI TRIALS.

ESTIMATION OF β .Model:

$$\lambda(t; \underline{z}) = \lambda_0(t) e^{\underline{z}\beta}$$

Data:

$$(t_i, \delta_i, \underline{z}_i) \quad i=1, \dots, n$$

t_i = time to failure or censoring

$\delta_i = 1$ failure

0 censored.

$\underline{z}_i = (z_{i1}, \dots, z_{iK})$ covariates for i th individual.

Problem: Estimate β .

Three approaches:

1. Marginal Likelihood

2. Partial Likelihood *

3. Pseudo Maximum Likelihood.

All are in essential agreement.

Note: Standard asymptotic results for maximum likelihood estimation do not apply with arbitrary $\lambda_0(\cdot)$ in the model.

Before continuing, it is convenient to rewrite the data — organize them in a sequential way.

Let the observed failure times be

$$t_{(1)}, t_{(2)}, \dots, t_{(k)}$$

where $0 < t_{(1)} < t_{(2)} < \dots < t_{(k)}$.

In addition, let $R(t)$ be the set of items at risk (i.e. not censored and at risk of failure) at $t=0$.

$\underline{z}_{(i)}$ is the covariate vector of the item that fails at $t_{(i)}$.

Method involves comparing the $\underline{z}_{(i)}$ of the item that fails at $t_{(i)}$, with $\underline{z}_r, r \in R(t_{(i)})$ which are the \underline{z} values of the items at risk at $t_{(i)}$.

PARTIAL LIKELIHOOD (NO TIES)

Consider 2 sample problem first

$\lambda_0(t)$ hazard for sample 0

$\lambda_1(t)$ hazard for sample 1

Proportional hazards

$$\lambda_1(t) = \lambda_0(t) e^{\beta}$$

Data: $t_{(1)} < t_{(2)} < \dots < t_{(k)}$ failure times

At $t_{(i)} = 0$, n_i are at risk, of which one fails.

If failure at $t_{(i)}$ is S1 failure, can form a 2x2 table

	fail	surv.	at risk
S1	1	$n_{1i} - 1$	n_{1i}
S0	0	n_{0i}	n_{0i}
	1		n_i

$\text{pr}\{i\} \text{ fails} \mid R(t_{(i)}), \text{ failure at } t_{(i)}\}$

$$= \frac{\lambda_1(t_{(i)}) dt_{(i)}}{n_{0i} \lambda_0(t_{(i)}) dt_{(i)} + n_{1i} \lambda_1(t_{(i)}) dt_{(i)}} + \theta(dt_{(i)})$$

$$= \frac{e^{\beta}}{n_{0i} + n_{1i} e^{\beta}}$$

$R(t_{(i)}) \sim$ risk set \sim labels of items at risk at $t_{(i)} = 0$

Similarly, if (i) is in sample 0

$$\text{pr}\{i\} \text{ fails} \mid R(t_{(i)}), \text{ failure at } t_{(i)}\} = \frac{1}{n_{0i} + n_{1i} e^{\beta}}$$

$$\text{If } z_{(i)} = \begin{cases} 1 & \text{sample 1} \\ 0 & \text{sample 0} \end{cases}$$

and $z_e = 1$ or 0 similarly for items in $R(t_{(i)})$,
the term arising at $t_{(i)}$ is

$$\frac{e^{z_{(i)} \beta}}{\sum_{R \in R(t_{(i)})} e^{z_e \beta}}$$

Combine "indep't" exp'ts to obtain the

Partial Likelihood of β

$$L(\beta) = \prod_{i=1}^k \frac{e^{z_{(i)} \beta}}{\sum_{R \in R(t_{(i)})} e^{z_e \beta}}$$

Note: $L(\beta)$ is not a likelihood in usual sense. It has been shown, however, that the usual asymptotic properties of likelihoods apply to $L(\beta)$ under mild restrictions on covariates z and censoring.

General case: (no ties)

$t_{(1)}, \dots, t_{(k)}$ failure times.

$\underline{z}_{(1)}, \dots, \underline{z}_{(k)}$ corresp. covariate vectors

\underline{z}_l covariate vector of l 'th individual

$R(t)$ as before

Model: $\lambda(t; \underline{z}) = \lambda_0(t) e^{\underline{z} \underline{\beta}}$

At $t_{(1)}$,

pr {item (i) fails | $R(t_{(1)})$, one item fails at $t_{(1)}$ }

$$\begin{aligned} &= \frac{\lambda(t_{(1)}; \underline{z}_{(1)})}{\sum_{l \in R(t_{(1)})} \lambda(t_{(1)}; \underline{z}_l)} \\ &= \frac{\exp(\underline{z}_{(1)} \underline{\beta})}{\sum_{l \in R(t_{(1)})} \exp(\underline{z}_l \underline{\beta})} \end{aligned}$$

Product over indep't expts gives.

$$L(\underline{\beta}) = \prod_{i=1}^k \frac{e^{\underline{z}_{(i)} \underline{\beta}}}{\sum_{l \in R(t_{(i)})} e^{\underline{z}_l \underline{\beta}}}$$

Cox likelihood for case of no ties.

THE CASE OF TIES:

COX SUGGESTS A DISCRETE MODEL FOR THE HAZARD.

$$\lambda_i = P\{T = t_{(i)} | \Xi = 0, T \geq t_{(i)}\}$$

$$\lambda_i(\Xi) = P\{T = t_{(i)} | \Xi, T \geq t_{(i)}\}$$

$$= \frac{\lambda_i e^{\Xi \beta}}{1 + \lambda_i e^{\Xi \beta} - \lambda_i} = \frac{e^{\alpha_i + \Xi \beta}}{1 + e^{\alpha_i + \Xi \beta}}$$

$$\text{where } \alpha_i = \log \frac{\lambda_i}{1 - \lambda_i} \quad \text{"BINARY LOGIT MODEL"}$$

Note:

$$\log \frac{\lambda_i(\Xi)}{1 - \lambda_i(\Xi)} = \log \frac{\lambda_i}{1 - \lambda_i} + \Xi \beta$$

covariates act additively on log odds.

ASIDE: Let

$$\lambda_0(t) = \sum \lambda_i \delta(t - t_{(i)})$$

$$\lambda(t; \Xi) = \sum \lambda_i(\Xi) \delta(t - t_{(i)})$$

$$\frac{\lambda(t; \Xi) dt}{1 - \lambda(t; \Xi) dt} = \frac{\lambda_0(t) dt}{1 - \lambda_0(t) dt} e^{\Xi \beta}$$

specifies both discrete + continuous models.

DATA: $t_{(1)}, t_{(2)}, \dots, t_{(k)}$ distinct failure times
 d_1, d_2, \dots, d_k multiplicities.

\mathcal{D}_i = set of items failing at $t_{(i)}$.

Consider again the conditional terms.

$P\{\text{Items in } \mathcal{D}_i \text{ fail} \mid R(t_{(i)}), d_i \text{ failures at } t_{(i)}\}$

$$\begin{aligned}
 &= \frac{\prod_{l \in \mathcal{D}_i} \lambda_l e^{-\lambda_l \beta} \prod_{l \in R(t_{(i)})} (1 + \lambda_l e^{t_{(i)} \beta} - \lambda_l) \prod_{l \in R - \mathcal{D}_i} (1 - \lambda_l)}{\sum_{p \in R_{d_i}(t_{(i)})} \prod_{l \in p} \lambda_l e^{-\lambda_l \beta} \prod_{l \in R(t_{(i)})} (1 + \lambda_l e^{t_{(i)} \beta} - \lambda_l) \prod_{l \in R - \mathcal{D}_i} (1 - \lambda_l)} \\
 &= \frac{e^{-\lambda_{(i)} \beta}}{\sum_{p \in R_{d_i}(t_{(i)})} e^{-\lambda_p \beta}}
 \end{aligned}$$

where $\lambda_{(i)} = \sum_{l \in \mathcal{D}_i} \lambda_l$

$\lambda_p = \sum_{l \in p} \lambda_l$

and $R_{d_i}(t_{(i)})$ is the set of all subsets of d_i items chosen from the risk set without replacement.

THE PARTIAL LIKELIHOOD IS THEN

$$\prod_{i=1}^k \frac{e^{A_i \beta}}{\sum_{p \in R_d(i)} e^{A_p \beta}}$$

APPROXIMATION:

CHANGE "WITHOUT REPLACEMENT" TO "WITH REPLACEMENT"

$$\prod_{i=1}^k \left\{ \sum_{p \in R_d(i)} e^{A_p \beta} \right\}^{d_i} = L(\beta)$$

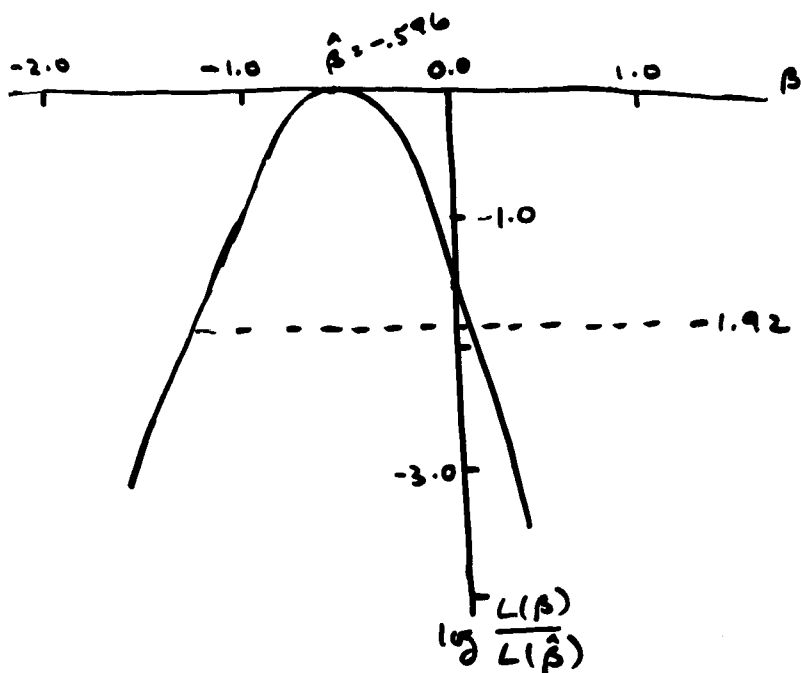
"THE COX LIKELIHOOD".

EXAMPLE: CARCINOGENESIS

i	$t_{(i)}$	d_i	z_i failures	censored	cont'n to likelihood.
1	142	1	1		$e^\beta / (19 + 21e^\beta)$
2	143	1	0		$1 / (19 + 20e^\beta)$
⋮	⋮	⋮	⋮		⋮
6	188	2	0, 0		$1 / (17 + 18e^\beta)^2$
⋮	⋮	⋮	⋮		⋮
9	198	1	1	1(204)	$e^\beta / (13 + 18e^\beta)$
10	205	1	1		$e^\beta / (13 + 16e^\beta)$
⋮	⋮	⋮	⋮		⋮
14	233	4	1, 1, 1, 1		$e^{4\beta} / (5 + 13e^\beta)^4$
⋮	⋮	⋮	⋮		⋮
28	304	1	0		$1 / (1 + 2e^\beta)$
29	323	1	1	1(344)	$e^\beta / 2e^\beta$

Notes: 1. $z=0$ sample 1
 1 sample 2

2. Unnecessary to use tied failure time approx.
 since all tied values occur at common
 z values.



Log partial likelihood fn of β for Carcinogenesis data.

Asymptotic Results:

The Partial Likelihood is not a likelihood in usual sense.

It has been shown, however, that usual asymptotic properties hold.

ie. if $\hat{\beta}_2$ is the maximum partial likelihood estimate, then under relatively mild regularity conditions:

i) $\hat{\beta}_2$ is unique solution to

$$\frac{\partial}{\partial \beta_2} \log L(\beta) = 0$$

ii) $\hat{\beta}_2$ is asymptotically normally distributed with mean β_2 and covariance matrix estimated by

$$I^{-1}(\hat{\beta})$$

$$\text{where } I(\beta) = \left(- \frac{\partial^2 \log L(\beta)}{\partial \beta_i \partial \beta_j} \right)_{0 \leq i, j \leq r}$$

Silatis (1980, Aof. Stat.)

Andersen & Gill (1982, Ann. of Stat.)

EXAMPLE: CARCINOGENESIS DATA

$$\hat{\beta} = -.596$$

$$I(\hat{\beta}) = - \frac{\partial^2}{\partial \beta^2} \log L(\beta) \Big|_{\beta = \hat{\beta}} = 8.237$$

1. Wald / m.e.e. results.

s.e. of $\hat{\beta}$ is estimated by $\frac{1}{\sqrt{I(\hat{\beta})}} = .35$

95% C.I. for β

$$\hat{\beta} \pm 1.96(.35) = (-1.28, .09)$$

$$H_0: \beta = 0$$

$$\hat{b} \sqrt{I(\hat{\beta})} = \frac{-.596}{.35} = -1.71 = -\sqrt{2.92}$$

$$\text{Note: relative risk } \rho = e^{\beta} \quad \hat{\rho} = e^{\hat{\beta}} = .551$$

$$95\% \text{ C.I. is } (e^{-1.28}, e^{.09}) = (.28, 1.09)$$

2. Likelihood Ratio

$$H_0: \beta = 0 \quad -2 \log \left\{ \frac{L(0)}{L(\hat{\beta})} \right\} = 2.86 \quad \text{compare } \chi^2_{(1)}$$

$$95\% \text{ C.I.} = \left\{ \beta : -2 \log \frac{L(\beta)}{L(\hat{\beta})} \leq 3.84 \right\} = (-1.27, .11)$$

3. Rao / Score Tests.

$$H_0: \beta = 0 \quad U(0) = 4.763, \quad I(0) = 7.560$$

(out put from first step in Newton Raphsen)

$$U(0)^2 I(0)^{-1} = 3.00$$

N.B. $U(0) = O - E$ is the log rank statistic

THE SCORE TEST AND THE LOGRANK TEST

$$\begin{aligned} \underline{U}(\underline{\theta}) &= \partial_y L(\underline{\theta}) / \partial \underline{\theta} \big|_{\beta=0} \\ &= \sum_{i=1}^k \left\{ s_{(i)}' - d_i \pi_i^{-1} \sum_{R(t_{(i)})} \underline{z}_e' \right\} \end{aligned}$$

where $\pi_i = \#$ of elts in $R(t_{(i)})$

$s_{(i)}'$ = obs'd sum of \underline{z} 's for failures at $t_{(i)}$.

$d_i \pi_i^{-1} \sum_{R(t_{(i)})} \underline{z}_e'$ = conditionally expected sum of \underline{z} 's

Special case: $s+1$ sample problem

$$\underline{z}_i = (z_{i1}, \dots, z_{si}) \quad z_{ij} = \begin{cases} 1 & \text{ith subj m jth} \\ & \text{sample} \\ 0 & \text{else} \end{cases}$$

$$\begin{aligned} \underline{U}(\underline{\theta}) &= \underline{O} - \underline{E} & \underline{O} &= s_{(1)}' + \dots + s_{(k)}' = \text{obs'd \# failures} \\ \underline{E} &= \sum_{i=1}^k d_i \pi_i^{-1} \sum_{R(t_{(i)})} \underline{z}_e & &= \text{sum of cmd. exp.} \end{aligned}$$

Variance estimation:

From Cox likelihood use $I(\underline{\theta})$
involves approx for ties.

Earlier estimate V involves no approx.

$\&$ arises directly from partial likelihood
with discrete logistic model.

Can be shown that

$$\underline{U}(\underline{\theta})' I(\underline{\theta})^{-1} \underline{U}(\underline{\theta}) \approx \underline{U}(\underline{\theta})' V^{-1} \underline{U}(\underline{\theta})$$

EXAMPLE: LUNG CANCER TRIAL

Z_1 = Karnofsky score 0, 10, ..., 100

Z_2 = age

Z_3 } cell type Squamous vs. large
 Z_4 } small vs. large
 Z_5 } adeno. vs. large.

Z_6 treatment. 1 = test
 0 = standard.

$$\lambda(t; \underline{z}) = \lambda_0(t) e^{\underline{z}\hat{\beta}}$$

Variable	$\hat{\beta}$	χ^2 (Likelihood ratio)
Z_1	-0.033	35.08
Z_2	-0.0086	.85
Z_3	-0.4087	18.15 Compare $\chi^2_{(3)}$
Z_4	.4597	
Z_5	.7879	
Z_6	-.298	2.07

Estimation of relative risk

$Z_1 = 100$ vs $Z_1 = 50$

estimate $\hat{r} = e^{(50)(-0.033)} \approx .22$

could specify subgroups with ~~approximate~~ uniform risk, within which the risk is nearly constant.

ESTIMATION OF $\lambda_0(\cdot)$

$$\text{Model: } \lambda(t; \underline{z}) = \lambda_0(t) e^{\underline{z} \beta}$$

β can be estimated using the Partial Likelihood

Require now an estimate of $\lambda_0(\cdot)$.

General approach

Take $\beta = \hat{\beta}$ and generalize life table
or Kaplan Meier Estimates to
allow for weighted failure rates.

Resulting estimate is of

$$S_0(t) = \text{pr}\{T \geq t; \underline{z} = 0\} = e^{-\int_0^t \lambda_0(u) du}$$

† can obtain from this estimates of

$$\begin{aligned} S(t; \underline{z}) &= \text{pr}\{T \geq t; \underline{z}\} = e^{-\int_0^t \lambda_0(u) du} e^{\underline{z} \beta} \\ &= \{S_0(t)\}^{\exp(\underline{z} \beta)} \end{aligned}$$

EXAMPLE: Generalization of the life table.

Let $[b_0=0, b_1), [b_1, b_2), \dots, [b_{k-1}, b_k)$ be a partition of the interval $[0, b_k)$.

Note that

$$\begin{aligned} \text{pr}\{T \in [b_{i-1}, b_i) \mid T \geq b_{i-1}, Z\} &= \exp\left\{-\int_{b_{i-1}}^{b_i} \lambda_0(u) du\right\} e^{Z\beta} \\ &= q_i e^{Z\beta}, \quad i=1, 2, \dots, k. \end{aligned}$$

where $q_i = \exp\left\{-\int_{b_{i-1}}^{b_i} \lambda_0(u) du\right\}$.

The baseline survivor fn at b_i is

$$S(b_i) = \prod_{j=1}^i (1 - q_j) \quad \hat{S}(b_i) = \prod_{j=1}^i (1 - \hat{q}_j)$$

Divide $R(b_{i-1})$ into 3 components

D_i = set of individuals failing in $[b_{i-1}, b_i)$

C_i = set of individuals surviving b_i

Z_i = set of individuals censored in $[b_{i-1}, b_i)$

<u>Interval</u>	<u>failures</u>	<u>survivors</u>	<u>withdrawals</u>
$[b_{i-1}, b_i)$	$Z_i, l \in D_i$	$Z_i, l \in C_i$	$Z_i, l \in Z_i$

Form a likelihood to estimate q_i :

$$L = \prod_{l \in D_i} q_i^{\exp(Z_l \beta)} \prod_{l \in C_i} (1 - q_i^{\exp(Z_l \beta)}) \prod_{l \in Z_i} (1 - q_i^{\exp(Z_l \beta)})^{\frac{1}{2}}$$

estimate q_i using maximum likelihood.

EXTENSIONS:

- ① TIME VARYING COVARIATES.
- ② COMPETING RISKS (MULTIPLE FAILURE TYPES)
- ③ MULTIPLE FAILURE TIMES.

TIME VARYING COVARIATES:

All of the earlier material extends to the case in which the covariates vary with time.

$\underline{z}(t)$ covariate value at time t

$$\underline{z}(t) = \{ \underline{z}(a) : 0 < a < t \}$$

$$\lambda(t; \underline{z}(t)) = \lim_{\Delta t \rightarrow 0^+} \text{pr} \{ T \in [t, t + \Delta t) \mid \underline{z}(t), T \geq t \} / \Delta t$$
$$= \lambda_0(t) e^{\underline{z}(t) \beta}$$

where dependence is on the current value $\underline{z}(t)$ only

PARTIAL LIKELIHOOD EXTENDS IMMEDIATELY.

$$\text{pr} \{ (i) \text{ fails} \mid R(t_{(i)}), \text{ a failure at } t_{(i)} \}$$

$$= \frac{e^{\underline{z}_{(i)}(t_{(i)}) \beta}}{\sum_{j \in R(t_{(i)})} e^{\underline{z}_j(t_{(i)}) \beta}}$$

COMPETING RISKS (MULTIPLE FAILURE TYPES)

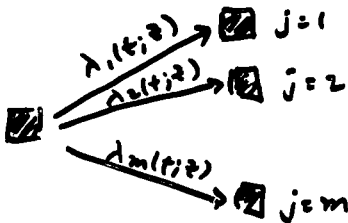
T = time to failure

J = type of failure

$J = 1, 2, \dots, m$

relate to covariates $\underline{z} = (z_1, \dots, z_n)$

How should this be modelled?



Def'n:

$$\lambda_j(t; \underline{z}) = \lim_{\Delta t \rightarrow 0} pr\{T \in [t, t+\Delta t), J=j | T \geq t, \underline{z}\} / \Delta t$$

$j=1, \dots, m$

"CAUSE SPECIFIC" or "CRUDE" hazard.

Note that the total hazard is

$$\lambda(t; \underline{z}) = \sum_{j=1}^m \lambda_j(t; \underline{z})$$

LIFE IS A SEQUENCE OF MULTINOMIAL TRIALS

EXAMPLE: Mice given 300 rads of radiation "therapy"

randomized $\left\{ \begin{array}{l} \text{control} \\ \text{germ free} \end{array} \right.$

Three types of failure

$j=1$ incidence of thymic lymphoma

$j=2$ " " reticulum cell sarcoma

$j=3$ death by other causes.

Time ~ measured in days.

Data: $\left\{ \begin{array}{l} t_i = \text{time to failure or censoring} \\ \delta_i = 1 \text{ (failure)} \quad 0 \text{ (censored)} \\ z_i \\ j_i = \text{type of failure.} \end{array} \right.$

PROBLEMS

1. How do covariates relate to rates failure by various types?
2. Are the failure types interrelated?
"independent" risks
3. What is the effect of removing one or several causes of failure?

3 is often called THE problem of competing risks.

PROBLEMS (CONT'D)

1. ESTIMATION OF RELATIONSHIPS BETWEEN COVARIATES & FAILURE RATES.

- e.g. effect of germ free environment on death rate by reticulum cell sarcoma.
- e.g. University Group Diabetes Program.

2. Interrelationships between different failure types

"If on one individual is of unusually high risk of failure of one type, is she correspondingly at high (low) risk of failure of another type?"

- Bone Marrow Transplantation in trt of Acute Leukemia

Acute graft versus host disease

Recurrent Leukemia.

- Dependent Censoring.

3. Estimation of failure rates for remaining types if some types are removed.

- Torzulli ~ smallpox

≡ Weibullbaum (1978)

- elimination of A.G.V.H.D. ~ what effect on recurrent leukemia.

NOTATION

Total hazard: $\lambda(t; \underline{z}) = \sum_{j=1}^m \lambda_j(t; \underline{z})$

Survivor function:

$$F(t; \underline{z}) = \text{pr}\{T \geq t | \underline{z}\} = \exp\left\{-\int_0^t \lambda(u; \underline{z}) du\right\}$$

Subdensity function for j th cause type:

$$\begin{aligned} f_j(t; \underline{z}) &= \lim \text{pr}\{T \in [t, t+\Delta t), J=j | \underline{z}\} / \Delta t \\ &= \lambda_j(t; \underline{z}) F(t; \underline{z}) \end{aligned}$$

Cumulative Incidence for j th type:

$$\begin{aligned} I_j(t; \underline{z}) &= \text{pr}\{T \leq t, J=j | \underline{z}\} \\ &= \int_0^t f_j(u; \underline{z}) du \end{aligned}$$

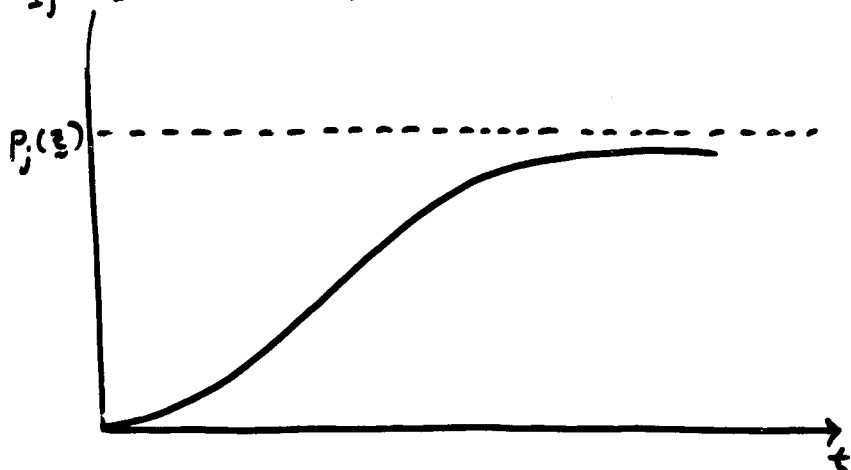
Pseudo Survivor Function for j th type

$$F_j(t; \underline{z}) = \exp\left\{-\int_0^t \lambda_j(u; \underline{z}) du\right\}.$$

NOTE: $F_j(t; \underline{z})$ has no probabilistic interpretation in general

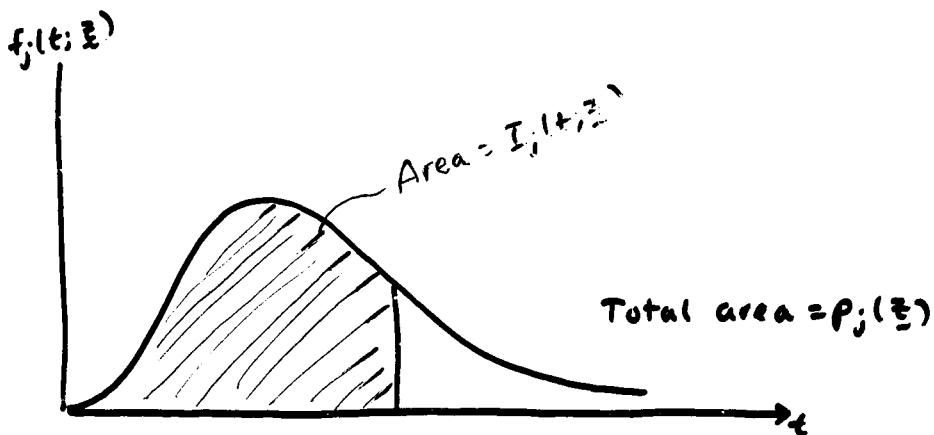
EVEN IF THESE CAN BE WRITTEN ENTIRELY IN TERMS OF THE CAUSE SPECIFIC HAZARD $\lambda_j(t; \underline{z})$

$$I_j(t; \underline{z}) = \text{pr}\{T \leq t, J=j | \underline{z}\}$$



Cumulative incidence for j th cause.

$$P_j(\underline{z}) = \lim_{t \rightarrow \infty} I_j(t; \underline{z}) = \text{pr}\{J=j | \underline{z}\}.$$



Sub density (or incidence) function for j th type.

Lagakos & Mosteller (1980) model using $P_j(\underline{z})$ and

$$\lambda_j^a(t; \underline{z}) = \lim \text{pr}\{T \in [t, t+\Delta t) | \underline{z}, J=j, T \geq t\} / \Delta t.$$

REGRESSION MODELS:

PARAMETRIC:

$$\text{e.g. } \lambda_j(t; \underline{\beta}) = \lambda_j \rho_j (\lambda_j t)^{\rho_j - 1} e^{-\underline{\beta}_j}$$

- Substitute in likelihood - find $\hat{\lambda}_j, \hat{\rho}_j, \hat{\beta}_j$
- use asymptotic theory for estimation & testing.

SEMI PARAMETRIC: proportional hazards

$$\lambda_j(t; \underline{\beta}) = \lambda_{0j}(t) e^{-\underline{\beta}_j} \quad j=1, \dots, m \quad *$$

Data: suppose k_j failures of type j
at ordered times t_{j1}, \dots, t_{jk_j} (no ties)

Partial Likelihood

pr(item j_i has type j failure at $t_{ji} | R(t_{ji})$ & one type j failure at t_{ji})

$$= \frac{\lambda_j(t_{ji}; \underline{\beta}_{ji})}{\sum_{l \in R(t_{ji})} \lambda_l(t_{ji}; \underline{\beta}_l)}$$

Substitute * & product over failure times

$$L(\beta_1, \dots, \beta_m) = \prod_{j=1}^m \prod_{i=1}^{k_j} \frac{\exp(\underline{\beta}_{ji} \beta_j)}{\sum \exp(\underline{\beta}_l \beta_l)}$$

PRODUCT OF m FACTORS. J TH FACTOR IS SAME AS BEFORE WITH ALL BUT TYPE J FAILURES TAKEN AS CENSORED.

EXAMPLE: DAYS UNTIL OCCURRENCE OF CANCER FOR
IRRADIATED MALE MICE-

$$z = \begin{cases} 0 & \text{control} \\ 1 & \text{germ free.} \end{cases}$$

$$\lambda_j(t; z) = \lambda_{0j}(t) e^{z \beta_j} \quad j=1, 2, 3.$$

$j=1$ Thymic Lymphoma

$$\hat{\beta}_1 = .295 \quad I(\hat{\beta}_1)^{-1} = .0821$$

$$SL \hat{=} .30$$

$j=2$ Reticulum cell sarcoma

$$\hat{\beta}_2 = -2.018 \quad \text{var}(\hat{\beta}_2) = .1199$$

$$SL \ll .001$$

$j=3$ Other Causes

$$\hat{\beta}_3 = -1.188 \quad \text{var}(\hat{\beta}_3) = .0889$$

$$SL \ll .001$$

No evidence of an effect of germ free environment
on Thymic Lymphoma rates.

- marked decrease due to germ free environment
for $j=2, 3$ relative risks $e^{-\hat{\beta}_2} = 7.52$

$$e^{-\hat{\beta}_3} = 3.28$$

2. INTERRELATIONS BETWEEN FAILURE RATES.

Classical Approach.

Multiple Decrement Function:

$\tilde{T}_1, \tilde{T}_2, \dots, \tilde{T}_m$ conceptual (latent) failure times.

Observe $T = \min(\tilde{T}_1, \dots, \tilde{T}_m)$

$$J = \{j \mid \tilde{T}_j \leq \tilde{T}_k, k=1, \dots, m\}$$

The multiple decrement function is

$$Q(t_1, \dots, t_m; \underline{x}) = \text{pr}\{\tilde{T}_1 \geq t_1, \dots, \tilde{T}_m \geq t_m; \underline{x}\}$$

Marginal Survivor Function of \tilde{T}_j :

$$\begin{aligned} Q_j(t_j; \underline{x}) &= Q(0, \dots, 0, t_j, 0, \dots, 0) \\ &= \text{pr}\{\tilde{T}_j \geq t_j; \underline{x}\} \end{aligned}$$

The corresponding hazard is called the net hazard

$$h_j(t_j) = - \frac{d}{dt} \log Q_j(t_j) = \lim_{\Delta t \rightarrow 0} \text{pr}\{\tilde{T}_j \in [t, t+\Delta t) \mid \tilde{T}_j \geq t\}$$

One formulation: The risks are independent

$$\text{iff } Q(t_1, \dots, t_m; \underline{x}) = \prod_{j=1}^m Q_j(t_j; \underline{x})$$

BUT, THERE IS A PROBLEM!

The data $(t_i, \delta_i, j_i, \xi_i)$ are sufficient to identify only the cause specific hazards

$$\begin{aligned}\lambda_j(t; \xi) &= \lim_{\Delta t \rightarrow 0} \text{pr}\{T \in [t, t+\Delta t), J=j | \xi, T > t\} / \Delta t \\ &= -\frac{\partial}{\partial t_j} \log Q(t_1, \dots, t_m; \xi) \Big|_{t_1 = \dots = t_m = t}\end{aligned}$$

$Q(t_1, \dots, t_m)$ and $Q_j(t_j), j=1, \dots, m$ are not identifiable - further assumptions needed.

THE HYPOTHESIS

$H_0: Q(t_1, \dots, t_m) = \prod Q_j(t_j)$ is wholly untestable without further assumption.

3 CAUSE REMOVAL

NON STATISTICAL QUESTIONS

WHAT IS THE MECHANISM OF REMOVAL?

Classical Approach

multiple decrement $Q(t_1, \dots, t_m)$

After removal of all but j th cause

$$\begin{aligned} Q_j(t_j) &= Q(0, \dots, 0, t_j, 0, \dots, 0) \\ &= \text{pr} \{ \tilde{T}_j \geq t_j \} \end{aligned}$$

Assumptions of independence or of parametric models that cannot be tested

① Removal \Leftrightarrow Marginalization?

No prior validity Makeham (1874)

② Usually answers to questions of cause removal require specialized models that account for the mechanics of the failure types and the method of removal.

MULTIPLE FAILURE TIMES

The statistical methods outlined above conveniently generalize to problems involving multiple failure times.

E.g. Asthma attacks and pollution levels.

origin ($t=0$)



$x \equiv$ attack

n individuals are followed & the times of attack are recorded.

Want to relate rate of attacks to (e.g.) pollution levels. Let $z(t)$ be a measure of pollution at time t

$\lambda(t; z(t))$ - rate at which events occur at time t given current level $z(t)$

$$\lambda(t; z(t)) = \lambda_0(t) e^{z(t)\beta}$$

More generally, models can allow for dependence of rate on frequency of previous attacks, or time since last attack, etc.