## Joint Modelling of Longitudinal and Survival Data

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#### Summary

### Background

- Longitudinal and survival data
- Outline

### The basic framework

- Joint Models
- JM in medicine
- Software



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#### **HIV/AIDS Example**

- Data
- Modelling
- Results

- Multiple biomarkers, *e.g.* blood pressure or CD4 counts, are often collected repeatedly over time (longitudinal data)
- time to an event of interest, *e.g.* death from any cause (survival data)
- Examples
  - PSA repeated measures and time to a recurrence of prostate cancer
  - CD4 repeated measures and time to AIDS

#### Separate Analysis

- does treatment affect survival?
- are the average longitudinal evolutions different between males and females?

#### Joint Analysis

- what is the effect of the longitudinal evolution of CD4 cell count in the hazard rate for death?
- how the association between markers evolves over time (evolution of the association)
- how marker-specific evolutions are related to each other (association of the evolutions)

#### **Questions of interest**

#### Separate Analysis

- does treatment affect survival?
- are the average longitudinal evolutions different between males and females?

#### Joint Analysis

- what is the effect of the longitudinal evolution of CD4 cell count in the hazard rate for death?
- how the association between markers evolves over time (evolution of the association)
- how marker-specific evolutions are related to each other (association of the evolutions)

- Longitudinal studies are often affected by (informative) drop-out, e.g. due to death: MCAR, MAR, MNAR
- Biomarkers are often measured with error
- Survival analysis assumes that covariates are measured without error: Internal vs External covariates

Longitudinal and survival data Outline

#### Simultaneous modelling of correlated longitudinal and survival data



# If the two processes are associated $\Rightarrow$ define a model for their joint probability distribution: $f(y_1, y_2)$

#### **Objectives of a joint analysis**

- explore the association between the two processes
- describe the longitudinal process stopped by the event
- predict the risk of event adjusted for the longitudinal process

Longitudinal and survival data Outline

- Arose primarily in the field of AIDS, relating CD4 trajectories to progression to AIDS in HIV<sup>+</sup> patients (Faucett and Thomas, 1996)
- Further developed in cancer, particularly modelling PSA levels and their association with prostate cancer recurrence (Proust-Lima and Taylor, 2009)

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#### Joint Models to Analyse Longitudinal and Survival Data

#### Longitudinal model

- mixed effects model
- splines, etc.
- multiple markers of progression and/or different nature
- Gaussian, binary, Poisson
- continuous but non Gaussian

#### Survival model

- Relative risk model (Proportional hazard model)
- Accelerated failure time model
- Competing risks; recurrent events; multiple events

#### Linking structure

- depends on the purposes
- without consensus
- still evolving ...

Main families of joint models

- Latent classes (Proust-Lima et al., 2012)
- Shared parameters (Wulfsohn and Tsiatis, 1997; Henderson et al., 2000; Gould et al., 2014)
- random-effects models
- Pattern-mixture models
- Selection models

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#### **General idea**

#### How to specify the joint distribution, $f(y_1, y_2)$ ?

- o directly
- factorize

$$f(y_1, y_2) = f(y_1|y_2)f(y_2) = f(y_2|y_1)f(y_1)$$

#### use latent variables

$$f(y_1, y_2) = \int f(y_1, y_2 | \mathbf{b}) f(\mathbf{b}) d\mathbf{b} = \int f(y_1 | \mathbf{b}) f(y_2 | \mathbf{b}) f(\mathbf{b}) d\mathbf{b}$$
$$f(y_1, y_2) = \int f(y_1, y_2 | \mathbf{b}) f(\mathbf{b}_1, \mathbf{b}_2) d\mathbf{b} = \int f(y_1 | \mathbf{b}_1) f(y_2 | \mathbf{b}_2) f(\mathbf{b}_1, \mathbf{b}_2) d\mathbf{b}_1 d\mathbf{b}_2$$

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#### Longitudinal submodel

Assumes observations of a normally distributed longitudinal marker for each time,

$$y_i(t)|\boldsymbol{\theta} \sim \mathcal{N}\left(m_i(t), \sigma_e^2\right)$$

• the mean level trajectory (linear mixed-effects model)

$$m_i(t) = \mathbf{x}_i^{\top}(t)\boldsymbol{\beta}_1 + \mathbf{z}_i^{\top}(t)\boldsymbol{b}_i$$

random-effects

$$\boldsymbol{b}_i \sim \mathcal{N}\left(0, \Sigma_b\right)$$

• more flexibility through polynomials or splines in x<sub>i</sub> and z<sub>i</sub>.

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#### Survival submodel

Estimates  $T_i^*$ , but using only  $T_i = \min(T_i^*, C_i)$  and  $\delta_i$ . Assumes the following hazard model,

$$h_i(t) = h_0(t) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \boldsymbol{\gamma} \times \boldsymbol{m}_i(t)\}$$

- where h<sub>0</sub>(t) is the baseline hazard function (Weibull, piecewise exponential, splines...)
- v<sub>i</sub> is a vector of time-independent baseline covariates with an associated vector of log hazard ratios, β<sub>2</sub>
- $\gamma \times m_i(t)$  represents the linking structure.

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#### How can we link longitudinal and survival data?

- Use the observed baseline biomarker values
  - We're ignoring all the repeated measures and measurement error
- Use the repeated measures as a time-varying covariate
  - We're still ignoring the measurement error
- Model the longitudinal outcome, and use predictions as a time-varying covariate
  - Uncertainty in the longitudinal outcome is not carried through
- Model both processes simultaneously in a joint model, defining a joint probability distribution
  - Reduce bias and maximize efficiency

What are the main characteristics of the longitudinal trajectory associated with the Survival?

Current value parameterisation

$$h_i(t) = h_0(t) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \boldsymbol{\gamma} \times \boldsymbol{m}_i(t)\}$$

Time-dependent slope

$$h_i(t) = h_0(t) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \gamma_1 \times m_i(t) + \gamma_2 \times m_i'(t)\}$$



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#### Linking structure II – shared parameters

# A time-independent association Longitudinal submodel

$$m_i(t) = (\beta_0 + \mathbf{b_{0i}}) + (\beta_1 + \mathbf{b_{1i}})t$$

Survival submodel

$$h_i(t) = h_0(t) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \gamma(\boldsymbol{b}_{0i} + \boldsymbol{b}_{1i})\}$$
$$h_i(t) = h_0(t) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \gamma_1 \boldsymbol{b}_{0i} + \gamma_2 \boldsymbol{b}_{1i}\}$$

random-effects:  $b_i = (b_{0i}, b_{1i})$  with density  $f(b_i)$ ; usually a Gaussian

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#### Linking structure III - random-effects

#### **Random-effects parameterisation**

$$m_i(t) = (\beta_0 + \mathbf{b}_{0i}) + (\beta_1 + \mathbf{b}_{1i})t$$
$$h_i(t) = h_0(t) \exp\{\mathbf{v}_i^\top \beta_2 + \gamma(\mathbf{b}_{2i})\}$$

random-effects:  $\boldsymbol{b}_i = (b_{0i}, b_{1i}, b_{2i})$  with density  $f(\boldsymbol{b}_i)$ ; usually a Gaussian

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#### Joint likelihood

$$L(\boldsymbol{\theta}, \mathbf{b} \mid \mathcal{D}) = \prod_{i=1}^{N} \left( \prod_{j=1}^{n_i} p(y_i(t_{ij}) | \boldsymbol{\theta}, \boldsymbol{b}_i) \right) p(T_i, \delta_i | \boldsymbol{\theta}, \boldsymbol{b}_i)$$

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**Joint likelihood** 

$$L(\boldsymbol{\theta}, \mathbf{b} \mid \mathcal{D}) = \prod_{i=1}^{N} \left( \prod_{j=1}^{n_i} p(\boldsymbol{y}_i(t_{ij}) | \boldsymbol{\theta}, \boldsymbol{b}_i) \right) p(T_i, \delta_i | \boldsymbol{\theta}, \boldsymbol{b}_i)$$

where

$$p(y_i(t_{ij}) \mid \boldsymbol{\theta}, \boldsymbol{b}_i) = \frac{1}{\sqrt{2\pi\sigma_e^2}} \exp\left\{-\frac{[y_i(t_{ij}) - m_i(t_{ij})]^2}{2\sigma_e^2}\right\}$$

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Joint likelihood

$$L(\boldsymbol{\theta}, \mathbf{b} \mid \mathcal{D}) = \prod_{i=1}^{N} \left( \prod_{j=1}^{n_i} p(y_i(t_{ij}) | \boldsymbol{\theta}, \boldsymbol{b}_i) \right) \frac{p(T_i, \delta_i | \boldsymbol{\theta}, \boldsymbol{b}_i)}{p(T_i, \delta_i | \boldsymbol{\theta}, \boldsymbol{b}_i)}$$

where

$$p(T_i, \delta_i \mid \boldsymbol{\theta}, \boldsymbol{b}_i) = [h_0(T_i) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \gamma \times m_i(T_i)\}]^{\delta_i} \times \\ \exp\left\{-\int_0^{T_i} h_0(u) \exp\{\mathbf{v}_i^\top \boldsymbol{\beta}_2 + \gamma \times m_i(u)\} du\right\}$$

#### Probably the most "marketable" feature of Joint Models

- A growing interest in a tailored made medical decision
  - Personalized Medicine
  - Shared Decision Making
- This is of high relevance in various diseases
  - cancer research, cardiovascular diseases, HIV research ...
- Bayesian approach

Physicians are interested in accurate prognostic tools that will inform them about the future prospect of a patient to adjust medical care Example: HIV/AIDS patients receiving HAART therapy

- Interest in predicting survival probabilities for a new patient *i* that has provided a set of CD4 measurements up to a specific time point *t*
- What do we know for the patient?
  - a series of CD4 and/or viral load
  - is event-free up to the last measurement
- General Questions:
  - Can we utilize CD4 or viral load measurements to predict survival?
  - When to plan the next visit for a patient?
- Survival probabilities and the visiting plan can be dynamically updated as additional information is recorded - *Dynamic Predictions* (Rizopoulos 2011)

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#### **Predictions (Bayesian)**

Suppose a new individual data,  $\tilde{\mathcal{D}} = \{\tilde{\mathbf{y}}, \tilde{T} = t, \tilde{\delta} = 0\}$ 

• Future longitudinal values at time *s* > *t* 

$$p(\tilde{y}(s) \mid \mathcal{D}, \tilde{\mathcal{D}}) = \iint p(\tilde{y}(s) \mid \tilde{\mathcal{D}}, \tilde{\boldsymbol{b}}, \boldsymbol{\theta}) \, p(\tilde{\boldsymbol{b}} \mid \tilde{\mathcal{D}}, \boldsymbol{\theta}) \, p(\boldsymbol{\theta} \mid \mathcal{D}) d\boldsymbol{\theta} \, d\tilde{\boldsymbol{b}}$$

• Future survival probabilities at time *s* > *t* 

$$p(\tilde{T}^* > s \mid \mathcal{D}, \tilde{T}^* > t, \tilde{\mathbf{y}}) = \iint \frac{\tilde{S}(s \mid \tilde{\mathbf{y}}, \tilde{\boldsymbol{b}})}{\tilde{S}(t \mid \tilde{\mathbf{y}}, \tilde{\boldsymbol{b}})} p(\tilde{\boldsymbol{b}} \mid \tilde{\mathcal{D}}, \boldsymbol{\theta}) p(\boldsymbol{\theta} \mid \mathcal{D}) d\boldsymbol{\theta} d\tilde{\boldsymbol{b}}$$

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- R JM, joineR, frailtypack, INLA
- WinBUGS, Stan, JMBayes
- STATA stjm command

**Computationally intensive** 

```
jointModel(lmeObject, survObject, timeVar,
parameterization = c("value", "slope", "both"),
method = c("weibull-PH-aGH", "weibull-PH-GH", "weibull-AFT-aGH",
"weibull-AFT-GH", "piecewise-PH-aGH", "piecewise-PH-GH",
"Cox-PH-aGH", "Cox-PH-GH", "spline-PH-aGH", "spline-PH-GH",
"ch-Laplace"),
interFact = NULL, derivForm = NULL, lag = 0, scaleWB = NULL,
CompRisk = FALSE, init = NULL, control = list(), ...)
```

```
jointModelBayes(lmeObject, survObject, timeVar,
param = c("td-value", "td-extra", "td-both", "shared-betasRE", "shared-RE"),
extraForm = NULL, baseHaz = c("P-splines", "regression-splines"),
transFun = NULL, densLong = NULL, lag = 0, df.RE = NULL,
estimateWeightFun = FALSE, weightFun = NULL, init = NULL,
priors = NULL, scales = NULL, control = list(), ...)
```

Data Modelling Results

- network of 88 laboratories located in every state in Brazil during 2002–2006;
- **Sample**: n = 4654 individuals;
- Outcomes: CD4+T lymphocyte counts and survival time;
- Covariates: age (<50=0, ≥50=1); gender (Female=0, Male=1); prevoi (previous opportunistic infection at study entry=1, no previous infection=0); region (the 27 states of Brazil); time;
- **Patients**: 320 deaths. 88% between 15 and 49 years old; 60% males. 61% no previous infection. Initial CD4 median: 245 cells/mm<sup>3</sup> (men 226 cells/mm<sup>3</sup>; women 263 cells/mm<sup>3</sup>).

Data Modelling Results

#### **Exploratory trajectory plots**



Data Modelling Results

#### **CD4 transformation**



#### Adjusted joint model

Longitudinal specification

$$\begin{split} \sqrt{\text{CD4}} \mid b_{ik}, \beta_1, \sigma_e^2 \sim & \mathcal{N}(m_{ikj}, \sigma^2) \\ m_{ikj} = \beta_{11} + \beta_{12} t_{ikj} + \beta_{13} t_{ikj}^2 + \beta_{14} t_{ikj}^3 + \\ & b_{1ik} + b_{2ik} t_{ikj} + b_{3ik} t_{ikj}^2 + b_{4ik} t_{ikj}^3 + \\ & \beta_{15} \text{gender}_{ik} + \beta_{16} \text{age}_{ik} + \beta_{17} \text{PrevOl}_{ik} \end{split}$$

Survival specification

$$\begin{split} T_{ik} \mid & \mathbf{b}_{ik}, \beta_2, Q_k \sim \mathcal{W}(1, \lambda_{ik}(t)) \equiv \mathcal{E}(\lambda_{ik}(t)) \\ \lambda_{ik}(t) = & \exp\{\beta_{21} + \beta_{22} \mathsf{gender}_{ik} + \beta_{23} \mathsf{age}_{ik} + \beta_{24} \mathsf{PrevOI}_{ik} + \sum_{s=1}^{4} \gamma_s b_{sik} + Q_k\} \\ Q_k \mid & \sigma_Q^2 \sim ICAR(\sigma_Q^2), \quad k = 1, \dots, 27 \end{split}$$

Data Modelling Results

#### Separate vs Joint



- two patients:
  - male, 31 years old, without previous opportunistic infection and censored time 1645 days
  - male, 29 years old, with previous opportunistic infection and censored time 1508 days
- Posterior median survival time: joint model improves the survival estimates

Data Modelling Results

#### **Predictions**



Data Modelling Results

#### **Spatial relative risk**



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#### Obrigado!