

The Analysis of Tumorigenicity Data using a Normal Frailty Effect

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Outline

- Interval censoring
- Issues on the current status data
- Three-state model with normal frailty
- Likelihood
- EM estimation
- Simulation results
- Discussion

Interval censoring

- Four types of interval-censored data
 - Case I interval-censored data, called by current status data
 - Case II interval-censored data, in short interval-censored data
 - Doubly interval-censored data (*cf* Double censoring)
 - Panel count data (*cf* Recurrent event data)
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- Reference: *Sun(2006, The Statistical Analysis of Interval-censored Failure Time Data)*

Current status data

- $T_i, i = 1, \dots, n$: Survival time
- Data: $\{(C_i, I(T_i \leq C_i), \mathbf{Z}_i); i = 1, \dots, n\}$
 - C_i : Examination (Observation) time such as death time or sacrifice time
 - Only left-censored, $T_i \in (0, C_i)$, or right-censored, $T_i \in (C_i, \infty)$
 - Assume T_i and C_i are independent given covariate \mathbf{Z}_i
- Eg., Tumorigenicity experiments

- When the examination time would be predetermined, the independent assumption is appropriate
- BUT, in tumorigenicity study, the censoring happens either at death or at sacrifice
- When examination is made with naturally dead animal, this death may be related with tumor onset and the independence assumption is not valid any more

Background

- With non-lethal tumor, death would be independent with tumor onset
- For lethal tumor, two cases can be considered:
 - With a rapidly lethal tumor, the death time follows the onset of tumor and log-rank test using death times is used to compare treatments on tumor onset time
 - With an intermediate lethal tumor, the correlation between the tumor onset time and death time is not known
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- Reference: *Lagakos and Louis (1988, Applied Statistics)*

Three-state model

- Three states: Health, tumor, and death
- The lethality was measured by the ratio of two death hazards, i.e., death with tumor and death without tumor, and was composed of baseline lethality and treatment lethality.
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- Reference: *Lindsey and Ryan (1993, Applied Statistics; 1994, Environmental Health Perspective Supplements) and French and Ibrahim (2002, Biometrics)*

Schematic diagram

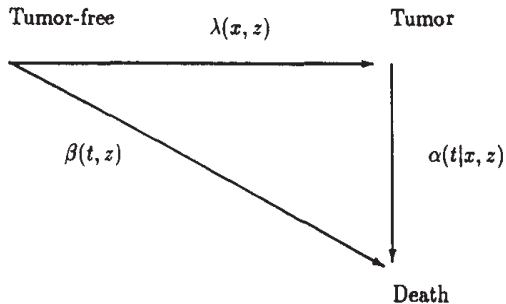


Figure: Three-state illness model

- Estimate the effect of treatment on the tumor onset time and the death time considering the possible correlation between tumor onset and death
- Introduce a normal frailty to incorporate the dependency

- X : Tumor onset time
 - NOT directly observed, instead, only know whether or not tumor onset occurred before an examination time (T)
 - $\Delta = 1$ if $X < T$ and $\Delta = 0$ otherwise
- For the examination time, there are two possible cases: natural death time (T_1) and sacrifice time (T_2)
 - $T = \min(T_1, T_2)$: Observable examination time
 - $D = I(T_1 < T_2)$
 - Assume that T_2 is independent of X and T_1
- Observable data: $\{(t_i, \delta_i, d_i, \mathbf{z}_i); i = 1, \dots, n\}$

Three models

- Hazard rate of tumor onset:

$$\alpha_i(x|\mathbf{z}_i, r_i) = \alpha_0(x)\exp(\beta'\mathbf{z}_i + r_i), r_i \sim N(0, \sigma^2) \quad (1)$$

- Hazard rate of death without tumor onset:

$$\tilde{\lambda}_i(t|\mathbf{z}_i) = \lambda_0(t)\exp(\psi'\mathbf{z}_i) \quad (2)$$

- Hazard rate of death with tumor onset:

$$\lambda_i(t|\mathbf{z}_i, r_i) = \lambda_0(t)\exp\{(\psi + \gamma)'\mathbf{z}_i + \tau r_i\} \quad (3)$$

- τ : A role to connect tumor onset and death due to frailty
 - If $\tau > 0$, an animal with higher frailty on tumor onset will result in earlier death
- Unlike Lindsey and Ryan (1993, 1994) and French and Ibrahim (2002), our model assumes that the lethality due to tumor onset is animal-specific rather than same for all animals

Preliminary results

Table: Estimated mean, bias, empirical standard error (SE), mean of the 1,000 estimated standard errors (SEM), and 95% coverage rate (CR) for the parameters β , ψ , γ , and η ($\exp(\eta)$: lethality parameter) in LR model (Lindsey and Ryan, 1993) with sacrifice times of 12, 18, and 33

Parameter	True	Mean	Bias	SE	SEM	CR
β	3.2463	3.4574	0.0650	0.6666	0.5364	92.3
ψ	-0.1493	-0.1467	0.0173	0.5483	0.5215	95.7
γ	-3.4780	-2.5003	0.2811	1.3463	0.7943	65.6
η	4.7831	3.7605	0.2138	1.2167	0.5641	49.6

- The coverage rates of γ and η among the regression parameters in LR model are fairly lower than a nominal level due to ignoring the dependency

Four possible factors: With no tumor cases

- For sacrifice with no tumor (SNT), $(\delta_i, d_i) = (0, 0)$,

$$L_{i1} = \exp\left\{-\int_0^{t_i} \{\alpha_i(u|\mathbf{z}_i, r_i) + \tilde{\lambda}_i(u|\mathbf{z}_i)\} du\right\};$$

- For death with no tumor (DNT), $(\delta_i, d_i) = (0, 1)$,

$$L_{i2} = \tilde{\lambda}_i(t_i|\mathbf{z}_i) \exp\left\{-\int_0^{t_i} \{\alpha_i(u|\mathbf{z}_i, r_i) + \tilde{\lambda}_i(u|\mathbf{z}_i)\} du\right\};$$

Four possible factors: With tumor cases

- For sacrifice with tumor (SWT), $(\delta_i, d_i) = (1, 0)$,

$$L_{i3} = \int_0^{t_i} f_X(u|\mathbf{z}_i, r_i) \tilde{S}_T(u|\mathbf{z}_i) \frac{S_T(t_i|\mathbf{z}_i, r_i)}{S_T(u|\mathbf{z}_i, r_i)} du;$$

- S_X , \tilde{S}_T and S_T : Survival functions corresponding to the three models respectively
- $f_X(x|\mathbf{z}_i, r_i) = \alpha_i(x|\mathbf{z}_i, r_i) S_X(x|\mathbf{z}_i, r_i)$
- For death with tumor (DWT), $(\delta_i, d_i) = (1, 1)$,

$$L_{i4} = \lambda_i(t_i|\mathbf{z}_i, r_i) \int_0^{t_i} f_X(u|\mathbf{z}_i, r_i) \tilde{S}_T(u|\mathbf{z}_i) \frac{S_T(t_i|\mathbf{z}_i, r_i)}{S_T(u|\mathbf{z}_i, r_i)} du$$

Complete data

- Complete data: $\{(x_i, t_i, \delta_i, d_i, \mathbf{z}_i); i = 1, \dots, n\}$
 - x_i : Tumor onset time
- Based on the complete data, L_{i3} and L_{i4} can be represented as, respectively,

$$\begin{aligned}\tilde{L}_{i3} = & \alpha_i(x_i | \mathbf{z}_i, r_i) \exp\left\{-\int_0^{x_i} \{\alpha_i(u | \mathbf{z}_i, r_i) + \tilde{\lambda}_i(u | \mathbf{z}_i)\} du \right. \\ & \left. - \int_{x_i}^{t_i} \lambda_i(u | \mathbf{z}_i, r_i) du\right\};\end{aligned}$$

$$\begin{aligned}\tilde{L}_{i4} = & \lambda_i(t_i | \mathbf{z}_i, r_i) \alpha_i(x_i | \mathbf{z}_i, r_i) \exp\left\{-\int_0^{x_i} \{\alpha_i(u | \mathbf{z}_i, r_i) + \tilde{\lambda}_i(u | \mathbf{z}_i)\} du \right. \\ & \left. - \int_{x_i}^{t_i} \lambda_i(u | \mathbf{z}_i, r_i) du\right\}\end{aligned}$$

- Complete-data-based likelihood:

$$L_c = \prod_{i=1}^n L_{i1}^{(1-\delta_i)(1-d_i)} L_{i2}^{(1-\delta_i)d_i} \tilde{L}_{i3}^{\delta_i(1-d_i)} \tilde{L}_{i4}^{\delta_i d_i} \phi(r_i | \sigma^2)$$

- $\phi(r|\sigma^2) = (2\pi\sigma^2)^{-1/2} \exp\{-(2\sigma^2)^{-1}r^2\}$

Piecewise exponential model

- Following Lindsey and Ryan (1993, 1994) and French and Ibrahim (2002), suppose that there are J time points, s_1, \dots, s_J , and that

$$\alpha_0(t) = \alpha_{0j}, \quad t \in I_j = (s_{j-1}, s_j], j = 1, \dots, J;$$

$$\lambda_0(t) = \lambda_{0j}, \quad t \in I_j$$

Likelihood

- Complete-data-based log-likelihood: Letting $\boldsymbol{\theta} = (\boldsymbol{\alpha}', \boldsymbol{\lambda}', \boldsymbol{\beta}, \boldsymbol{\psi}, \boldsymbol{\gamma}, \tau, \sigma^2)'$, $\boldsymbol{\theta}_1 = (\boldsymbol{\alpha}', \boldsymbol{\beta})'$, $\boldsymbol{\theta}_2 = (\boldsymbol{\lambda}', \boldsymbol{\psi}, \boldsymbol{\gamma}, \tau)'$, and $\theta_3 = \sigma^2$,

$$l_c = \log(L_c) = l_{\theta_1} + l_{\theta_2} + l_{\theta_3}$$

- $l_{\theta_1} = \sum_{j=1}^J \{N_j^T \log \alpha_j - \alpha_j \sum_{i=1}^n \exp(\boldsymbol{\beta}' \mathbf{z}_i + r_i) T_{ij}^{NT}\} + \sum_{i=1}^n \mathbf{z}_i'(\delta_i \boldsymbol{\beta});$
-
- $l_{\theta_2} = \sum_{j=1}^J \{(a_j + b_j) \log \lambda_j - \lambda_j \sum_{i=1}^n \{\exp(\boldsymbol{\psi}' \mathbf{z}_i) T_{ij}^{NT} + \exp((\boldsymbol{\psi} + \boldsymbol{\gamma})' \mathbf{z}_i + \tau r_i) T_{ij}^T\}\} + \sum_{i=1}^n \{\mathbf{z}_i'(d_i \boldsymbol{\psi} + \delta_i d_i \boldsymbol{\gamma}) + (\delta_i + \tau d_i \delta_i) r_i\};$
-
- $l_{\theta_3} = \sum_{i=1}^n \log \phi(r_i | \sigma^2)$

Two kinds of missing terms: Unobservable tumor onset time

- $a_j = \sum_{i=1}^n (1 - \delta_i) d_{ij} d_i$: Number of death without tumor in I_j
 - $d_{ij} = I(t_i \in I_j)$
- $b_j = \sum_{i=1}^n \delta_i d_{ij} d_i$: Number of death with tumor in I_j
- a_j and b_j : Known, BUT
- N_j^T : Number of subjects with tumor in interval I_j
- T_{ij}^{NT} and T_{ij}^T : Time the i th subject spends with no tumor and with tumor in interval I_j
- N_j^T , T_{ij}^T , and T_{ij}^{NT} : NOT known
- According to Lindsey and Ryan (1993, 1994), calculate $E(N_j^T | \mathcal{O}, \theta)$, $E(T_{ij}^{NT} | \mathcal{O}, \theta)$ and $E(T_{ij}^T | \mathcal{O}, \theta)$

Two kinds of missing terms: Frailty

- Conditional on observed data, $\mathcal{O} = \{O_i = (t_i, \delta_i, d_i, \mathbf{z}_i), i = 1, \dots, n\}$,

$$f_{R_i|\mathcal{O}}(r|\boldsymbol{\theta}) = \frac{L_i(r; \boldsymbol{\theta})}{\int_{-\infty}^{\infty} L_i(u; \boldsymbol{\theta}) du}$$

- $L_i(r; \boldsymbol{\theta}) = L_{i1}^{(1-\delta_i)(1-d_i)} L_{i2}^{(1-\delta_i)d_i} L_{i3}^{\delta_i(1-d_i)} \tilde{L}_{i4}^{\delta_i d_i} \phi(r|\sigma^2)$
- Employ the Gauss-Hermite method for calculating the functionals of frailty such as $E(R_i|\mathcal{O}, \boldsymbol{\theta})$, $E(R_i^2|\mathcal{O}, \boldsymbol{\theta})$, $E\{\exp(R_i)|\mathcal{O}, \boldsymbol{\theta}\}$, $E\{\exp(\tau R_i)|\mathcal{O}, \boldsymbol{\theta}\}$ etc

EM Procedure

- Start with $\theta_j^{(0)}, j = 1, 2, 3$
- For $k = 0, 1, \dots$, update $\theta_j^{(k)}$ through

$$\theta_j^{(k+1)} = \theta_j^{(k)} - \left\{ \frac{\partial^2 Q_j(\theta_j | \theta_j^{(k)})}{\partial \theta_j \partial \theta_j'} \right\}_{\theta_j = \theta_j^{(k)}}^{-1} \left\{ \frac{\partial Q_j(\theta_j | \theta_j^{(k)})}{\partial \theta_j} \right\}_{\theta_j = \theta_j^{(k)}}, j = 1, 2, 3$$

- $Q_j(\theta_j | \theta_j^{(k)}) = E_{\theta_j^{(k)}}(l_{\theta_j} | \mathcal{O}), j = 1, 2, 3$
- Iterate E-M steps until $\|\theta^{(k+1)} - \theta^{(k)}\|_{\infty} < \epsilon$
 - $\theta^{(r)} = (\theta_1^{(r)'}, \theta_2^{(r)'}, \theta_3)'$
 - $\|\cdot\|_{\infty}$: Maximum norm

Variance estimation

- Define negative Hessian matrix as a block diagonal matrix, Q , with elements,

$$-\frac{\partial^2 Q_j(\boldsymbol{\theta}_j | \boldsymbol{\theta}_j^{(s)})}{\partial \boldsymbol{\theta}_j \partial \boldsymbol{\theta}_j'} \Big|_{\boldsymbol{\theta}_j = \boldsymbol{\theta}_j^{(s)}}, j = 1, 2, 3$$

- SE of the respective estimate is given by the square root of corresponding diagonal element of inverse of Q
- Another estimator: Louis' method, BUT analytically cumbersome as pointed out by Lindsey and Ryan (1993)

Simulation setup: Design parameters

- Binary covariate
 - Low-dose animals: $z_i = \mathbf{0}, i = 1, \dots, 130$;
 - High-dose animals: $z_i = \mathbf{1}, i = 131, \dots, 225$
- Frailty: $r_i \sim N(0, 0.3666^2), i = 1, \dots, 225$
- Baseline hazard rates
 - $\alpha_{01} = 0.0006$ and $\lambda_{01} = 0.0017$ on $I_1 = (0, 13]$;
 - $\alpha_{02} = 0.0018$ and $\lambda_{02} = 0.0069$ on $I_2 = (13, 19]$;
 - $\alpha_{03} = 0.0243$ and $\lambda_{03} = 0.0721$ on $I_3 = (19, 25]$;
 - $\alpha_{04} = 0.0001$ and $\lambda_{04} = 0.2734$ on $I_4 = (25, 33]$
- Set $\beta = 3.4185$, $\psi = 0.1689$, $\gamma = 0.6946$, and $\tau = 3.8467$
- Sacrifice times
 - $T_{2i} = \mathbf{13}, i = 1, \dots, 16$; $\mathbf{19}, i = 17, \dots, 105$; $\mathbf{33}, i = 106, \dots, 130$;
 - $T_{2i} = \mathbf{13}, i = 131, \dots, 145$; $\mathbf{19}, i = 146, \dots, 207$; $\mathbf{33}, i = 208, \dots, 225$

Simulation setup: Tumor onset and death times

- Step 1: Generate X_{oi} , from model (1) with $\alpha_0(t) = \alpha_{0j}$ on $I_j, j = 1, \dots, 4$
- Step 2: Generate \tilde{T}_{1i} , from model (2) with $\lambda_0(t) = \lambda_{0j}$ on $I_j, j = 1, \dots, 4$
- Step 3: If $\tilde{T}_{1i} < X_{oi}$,
 - Go to Step 4;
 - Otherwise, go to Step 5
- Step 4: If $\tilde{T}_{1i} \leq T_{2i}$,
 - $T_i = \tilde{T}_{1i}, \delta_i = 0, d_i = 1$ (**DNT**);
 - Otherwise, $T_i = T_{2i}, \delta_i = 0, d_i = 0$ (**SNT**)
- Step 5: Conditional on X_{oi} , generate T_{1i} from piecewise exponential distribution with $\lambda_0(t) = \lambda_{0j}$ on $I_j, j = 1, \dots, 4$
 - If $T_{1i} \leq T_{2i}$, $T_i = T_{1i}, \delta_i = 1, d_i = 1$ (**DWT**);
 - Otherwise, $T_i = T_{2i}, \delta_i = 1, d_i = 0$ (**SWT**) or $T_i = T_{2i}, \delta_i = 0, d_i = 0$ (**SNT**) depending on whether or not $X_{oi} \leq T_{2i}$

Comparison

- Apply the simulated data to both Lindsey and Ryan model (Lindsey and Ryan, 1993) and the proposed model
- Summary statistics
 - Estimated mean
 - Bias
 - Empirical standard error (SE)
 - Mean of the 1,000 estimated standard errors (SEM)
 - 95% coverage rate (CR) of the regression parameters, β , ψ , and γ , commonly included in both the Lindsey and Ryan's model (LR) and the proposed model (Proposed).

Simulation results

Table: Estimated mean, bias, empirical standard error (SE), mean of the 1,000 estimated standard errors (SEM), and 95% coverage rate (CR) for the common parameters, β , ψ , and γ , in LR and proposed models

Parameter	True	Mean	Bias	SE	SEM	CR
<u>LR model</u>						
β	3.4185	3.4746	0.0561	0.6781	0.5369	89.8
ψ	0.1689	-0.2360	-0.4049	0.6206	0.5036	85.2
γ	0.6946	0.0179	-0.6767	1.4579	0.8445	67.5
<u>Proposed model</u>						
β	3.4185	3.5991	0.1806	0.5866	0.5329	95.7
ψ	0.1689	0.0937	-0.0751	0.5781	0.5207	94.3
γ	0.6946	0.7850	0.0904	0.6909	0.5424	90.2

Discussion

- Propose a three-state model with normal frailty to incorporate the dependency of tumor onset and death for the current status data
- Based on a simulation study, our model was better than LR model in terms of summary statistics and the coverage rate
- According to the results not reported in Table 2, the coverage rate of the lethality parameter in LR model was 53.1% assuming the true value of 1 and that of τ were 81.4%. This low coverage rate of τ may be caused by lack of distinct information of DNT or DWT animals
- In E-step, the Gauss-Hermite algorithm was used to approximate the functionals of the random frailty, but MCMC sampling technique can be applied

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