Recent developments in the fitting and assessment of flexible parametric survival models

#### Paul C Lambert<sup>1,2</sup>

 $^1$ Medical Epidemiology and Biostatistics, Karolinska Institutet, Stockholm, Sweden  $^2$ Biostatistics Research Group, Department of Population Health Sciences, University of Leicester, UK

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Slides: pclambert.net/pdf/Stata2024\_Germany\_Paul\_Lambert.pdf

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This will be a broad talk across a range of areas. I will cover

- What are flexible paramatric survival models?
- Extended functions (non-linearity)
- Predictions and Contrasts
- Standardization
- Assessing the fit of models
- Competing risks
- Log hazard models

#### Censored survival data



Figure 1: Calendar time (left) and time from entry in years (right)

#### What is a parametric survival model

- In a parametric survival model the survival function is expressed as a mathematical function of follow-up time and a set of parameters.
- There is a mathematical relationship between the hazard, survival and density functions, so there are also mathematical function for all these entities.
- There are also parameters for the effects of covariates.
- All these parameters are estimated when you fit a model.

Note that a Cox model is a *semi-parametric* model as a parametric function is not estimated for the hazard/survival/density functions. It only directly estimates the (relative) effect of covariates.

### Flexible parametric models: basic idea

• Consider a Weibull survival curve.

$$S(t) = \exp\left(-\lambda t^{\gamma}
ight)$$

• If we transform to the log cumulative hazard scale.

$$\ln [H(t)] = \ln[-\ln(S(t))]$$
$$\ln [H(t)] = \ln(\lambda) + \gamma \ln(t)$$

- This is a linear function of ln(t)
- Rather than assuming linearity with ln(t) flexible parametric models use natural splines for ln(t).

• We thus model on the log cumulative hazard scale.

 $\ln[H(t|\mathbf{x}_i)] = \ln[H_0(t)] + \mathbf{x}_i \boldsymbol{\beta}$ 

• This is a proportional hazards model.

• We thus model on the log cumulative hazard scale.

 $\ln[H(t|\mathbf{x}_i)] = \ln[H_0(t)] + \mathbf{x}_i \boldsymbol{\beta}$ 

- This is a proportional hazards model.
- Natural cubic splines,  $s(\ln(t)|\gamma, \mathbf{k}_0)$ , with knots,  $\mathbf{k}_0$ , are used to model the log baseline cumulative hazard.

$$\ln[H(t|\mathbf{x}_i)] = \eta_i(t) = s(\ln(t)|\boldsymbol{\gamma}, \mathbf{k}_0) + \mathbf{x}_i\boldsymbol{\beta}$$

7th June 2024

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$$\ln[H(t|\mathbf{x}_i)] = \eta_i(t) = s(\ln(t)|\boldsymbol{\gamma}, \mathbf{k}_0) + \mathbf{x}_i\boldsymbol{\beta}$$

• For example, with 4 knots we can write

$$\ln [H(t|\mathbf{x}_i)] = \eta_i(t) = \underbrace{\gamma_0 + \gamma_1 z_{1i} + \gamma_2 z_{2i} + \gamma_3 z_{3i}}_{\text{log baseline}} + \underbrace{\mathbf{x}_i \boldsymbol{\beta}}_{\text{log hazard}}$$

$$\lim_{\boldsymbol{cumulative hazard}} \operatorname{log hazard}_{\text{ratios}}$$

• We thus model on the log cumulative hazard scale.

 $\ln[H(t|\mathbf{x}_i)] = \ln[H_0(t)] + \mathbf{x}_i\beta$ 

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#### Patrick Royston wrote the initial stpm command around 2000 [1]

The Stata Journal (2001) 1, Number 1, pp. 1–28

# Flexible parametric alternatives to the Cox model, and more

Patrick Royston UK Medical Research Council patrick.royston@ctu.mrc.ac.uk I developed stpm2 with lots of input from Patrick Royston around 2008. stpm2 allowed more flexibility for modelling time-dependent effects, relative survival models and more prediction options [2, 3]

The Stata Journal (2009) 9, Number 2, pp. 265–290

#### Further development of flexible parametric models for survival analysis

Paul C. Lambert Centre for Biostatistics and Genetic Epidemiology Department of Health Sciences University of Leicester, UK paul.lambert@le.ac.uk Patrick Royston Clinical Trials Unit Medical Research Council London, UK patrick.royston@ctu.mrc.ac.uk



I (with lots and lots of suggestions from Mark Rutherford) wrote stpm3 in 2022. It incorporated

- Factor variables (properly)
- Extended functions (non-linearity)
- Improved predict command
- Prediction to frames
- Better synergy with the standsurv postestimation command for obtaining marginal survival curves
- More in Mata (sometimes Python) for speed improvements

#### Breast Cancer: Fitting a simple model

// Cox Model (deprivation group - 5 levels)
. stcox i.dep

// Flexible parametric survival model
. stpm3 i.dep, scale(lncumhazard) df(5)

. stpm3 i.dep, scale(lncumhazard) df(5) eform nolog (output omitted)

	exp(b)	Std. err.	z	P> z	[95% conf.	interval]
xb						
dep						
2	1.048989	.0354091	1.42	0.157	.9818344	1.120737
3	1.105245	.0383089	2.89	0.004	1.032655	1.182939
4	1.213022	.0437548	5.35	0.000	1.130226	1.301884
mostdep	1.309804	.0513441	6.88	0.000	1.21294	1.414403
time						
_ns1	-20.5192	.7302075	-28.10	0.000	-21.95038	-19.08802
_ns2	3.829793	.3917803	9.78	0.000	3.061918	4.597668
_ns3	-1.074997	.0182917	-58.77	0.000	-1.110849	-1.039146
_ns4	601024	.0128829	-46.65	0.000	6262739	575774
_ns5	3340791	.0109536	-30.50	0.000	3555478	3126103
_cons	-1.14467	.023338	-49.05	0.000	-1.190412	-1.098928

Note: Estimates are transformed only in the first equation.

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### Comparison of log hazard ratios

	Variable	stcox	stpm3
#1			
	dep		
	2	0.0478	0.0478
	3	0.1001	0.1001
	4	0.1931	0.1931
	mostdep	0.2699	0.2699
tim	e		
	_ns1		-20.5192
	_ns2		3.8298
	_ns3		-1.0750
	_ns4		-0.6010
	_ns5		-0.3341
	_cons		-1.1447

. estimates table stcox stpm3, eq(1:1) b(%7.4f)

• Estimation of the baseline (using splines) make postestimation predictions (and uncertainty) much, much easier.

#### Hazard and Survival functions



#### Hazard and Survival functions



- If we want to include a spline function for a covariate we usually do something like
  - . gensplines agediag, type(ns) df(3) gen(agens) . stpm3 i.dep agens1 agens2 agens3, scale(lncumhazard) df(4) nolog Number of obs = 6,242Wald chi2(4) = 919.44= 0.0000

Log likelihood = -8008.3369

	Coefficient	Std. err.	z	P> z	[95% conf.	interval]
xb						
dep						
mostdep	.2530977	.038471	6.58	0.000	.177696	.3284994
agens1	-6.731391	.7054777	-9.54	0.000	-8.114101	-5.34868
agens2	6183224	.3543468	-1.74	0.081	-1.312829	.0761844
agens3	-2.902752	.2202527	-13.18	0.000	-3.33444	-2.471065
time						
_ns1	-15.49693	.4692123	-33.03	0.000	-16.41657	-14.57729
_ns2	3.966272	.2513638	15.78	0.000	3.473608	4.458936
_ns3	-1.092355	.0299249	-36.50	0.000	-1.151006	-1.033703
_ns4	5337899	.0237586	-22.47	0.000	580356	4872238
_cons	1.439092	.1061348	13.56	0.000	1.231072	1.647112

Prob > chi2

• Extended functions are included in the model command.

. stpm3 i.dep @ns	-8008.3369	<pre>3)), scale(</pre>	lncumhaza	ard) df(4 Nu Wa Pi	1) nolog mber of obs = ald chi2(4) = cob > chi2 =	= 6,242 = 919.44 = 0.0000
	Coefficient	Std. err.	z	P> z	[95% conf	interval]
xb mostdep _ns_f1_agediag1 _ns_f1_agediag2 _ns_f1_agediag3	.2530977 -6.731391 6183224 -2.902752	.038471 .7054777 .3543468 .2202527	6.58 -9.54 -1.74 -13.18	0.000 0.000 0.081 0.000	.177696 -8.114101 -1.312829 -3.33444	.3284994 -5.34868 .0761844 -2.471065
time ns1 ns2 ns3 ns4 cons	-15.49693 3.966272 -1.092355 5337899 1.439092	.4692123 .2513638 .0299249 .0237586 .1061348	-33.03 15.78 -36.50 -22.47 13.56	0.000 0.000 0.000 0.000 0.000	-16.41657 3.473608 -1.151006 580356 1.231072	-14.57729 4.458936 -1.033703 4872238 1.647112

Extended functions

(1) @ns(agediag, df(3))

@bs() B-splines

- @fp() fractional polynomials
- @ns() natural cubic splines

@poly() polynomials

@rcs() restricted cubic splines

#### @fn() general function

• Multiple extended functions.

- Multiple extended functions.
- Interactions with extended functions
  - . stpm3 i.dep##@ns(agediag, df(3)), ///
     scale(lncumhazard) df(4)

- Multiple extended functions.

Interactions with extended functions

- . stpm3 i.dep##@ns(agediag, df(3)), ///
   scale(lncumhazard) df(4)
- Interactions between extended functions

• Multiple extended functions.

Interactions with extended functions

. stpm3 i.dep##@ns(agediag, df(3)), /// scale(lncumhazard) df(4)

Interactions between extended functions

• Using extended functions makes many predictions much simpler.

## Relaxing the proportional hazards assumption

- We often make the proportional hazards assumption in survival models.
- Sometimes reasonable, but needs to be assessed.
- Under proportional hazards the effect of a covariate is assumed the same at all time points.
- Non-proportional hazards means there is an interaction between a covariate and follow-up time.
- stpm3 forms these interactions for you using the tvc() and dftvc() options.

#### Model output

```
. stpm3 i.dep @ns(agediag, df(3)), scale(lncumhazard) df(5) ///
```

```
> tvc(i.dep) dftvc(3) vsquish nolog
```

(output omitted)

	Coefficient	Std. err.	z	P> z	[95% conf.	interval]
xb						
dep						
mostdep	.2326102	.0396115	5.87	0.000	.1549731	.3102473
_ns_f1_agediag1	1.59671	.6642716	2.40	0.016	.2947616	2.898659
_ns_f1_agediag2	4834445	.4039909	-1.20	0.231	-1.275252	.3083631
_ns_f1_agediag3	1530129	.1288731	-1.19	0.235	4055995	.0995737
time						
_ns1	-20.8306	1.51351	-13.76	0.000	-23.79702	-17.86417
_ns2	3.82159	.7859048	4.86	0.000	2.281245	5.361935
_ns3	-1.159027	.0349635	-33.15	0.000	-1.227555	-1.0905
_ns4	6253963	.0245694	-25.45	0.000	6735514	5772411
_ns5	3741499	.020979	-17.83	0.000	415268	3330317
dep#cns_tvc1						
mostdep	1.900655	2.089832	0.91	0.363	-2.195339	5.99665
dep#cns_tvc2						
mostdep	1922529	1.108999	-0.17	0.862	-2.365851	1.981346
dep#cns_tvc3						
mostdep	.1395927	.0482234	2.89	0.004	.0450767	.2341087
_cons	-1.155454	.0628256	-18.39	0.000	-1.27859	-1.032318

Extended functions

(1) @ns(agediag, df(3))

#### Hazard Ratio: Most vs Least Deprived



#### Hazard Ratio: Most vs Least Deprived



## Different types of predictions

- We want to predict different types of functions.
  - hazard functions, survival functions etc.
- There are 3 main types of predictions we may be interested in.
  - Predict at observed values of covariates.
  - Predict at user-specified values of covariates.
  - Take average of predictions (marginal estimates).

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  - Take average of predictions (marginal estimates).
- We may also be interested in contrasts in the above, e.g. when comparing unexposed vs exposed.
- Different choices for time.
  - Predict at observed event/censoring times (\_t).
  - Predict at single time point for all subjects (e.g. 5 years).
  - Predict at user-specified time values (e.g. 100 values between 0 and 10).

## Commands for conditional and marginal predictions

- After fitting an stpm3 model
  - For conditional predictions, use predict
  - For marginal predictions, use standsurv
- By conditional I mean given values of all covariates specified in the model.

## Standard predictions

- Similar to what would be expected in streg
- Predicts at observed covariate values and at \_t

#### Model

- . stset survtime, failure(dead=1) exit(time 5)
- . stpm3 i.dep @ns(agediag, df(3)), scale(lncumhazard) df(4)

#### Predictions

. predict	xb, xb ci	<pre>// linear predictor</pre>
. predict	S, survival ci	<pre>// survival function</pre>
. predict	h, hazard ci	<pre>// hazard function</pre>

#### By default this type of prediction will be saved in the current frame

```
. predict S60_d1 S70_d1 S80_d1, /// new variables
> survival ci /// predict survival and CI
> at1(agediag 60 dep 1) /// 1st prediction
> at2(agediag 70 dep 1) /// 2nd prediction
> at3(agediag 80 dep 1) /// 3rd prediction
> timevar(0 10, step(0.1)) /// times to predict at
> frame(surv, replace) // save in frame
Predictions are stored in frame - surv
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```
#### predict with multiple at() options

```
. predict S60_d1 S70_d1 S80_d1, /// new variables
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> at3(agediag 80 dep 1) /// 3rd prediction
> timevar(0 10, step(0.1)) /// times to predict at
> frame(surv, replace) // save in frame
Predictions are stored in frame - surv
```

- . frame surv: format %5.4f S\*
- . frame surv: list tt S60\_d1 S70\_d1 S80\_d1 if inlist(tt,1,5,10), noobs

tt	S60_d1	S70_d1	S80_d1
1	0.8985	0.8623	0.7684
5	0.6785	0.5846	0.3850
10	0.5188	0.4032	0.1989

## Merge predictions with existing frame

```
. predict S60_d5 S70_d5 S80_d5, /// new variables
> survival ci /// predict survival and CI
> at1(agediag 60 dep 5) /// 1st prediction
> at2(agediag 70 dep 5) /// 2nd prediction
> at3(agediag 80 dep 5) /// 3rd prediction
> frame(surv, merge) // merge to frame surv
Predictions are stored in frame - surv
```

### Merge predictions with existing frame

. predict	S60 d5 S70 d5 S80 d5.	111	new variables
>	survival ci	111	predict survival and CI
>	at1(agediag 60 dep 5)	111	1st prediction
>	at2(agediag 70 dep 5)	111	2nd prediction
>	at3(agediag 80 dep 5)	111	3rd prediction
>	frame(surv, merge)	11	merge to frame surv
Prediction	ns are stored in frame -	surv	-

```
. frame surv: format %5.4f S*
```

```
. frame surv: list tt S60_d1 S70_d1 S80_d1 S60_d5 S70_d5 S80_d5 /// > if inlist(tt,1,5,10), noobs
```

tt	S60_d1	S70_d1	S80_d1	S60_d5	S70_d5	S80_d5
1	0.8985	0.8623	0.7684	0.8712	0.8262	0.7123
5	0.6785	0.5846	0.3850	0.6068	0.5008	0.2925
10	0.5188	0.4032	0.1989	0.4295	0.3104	0.1250

## Plot predictions



#### Plot predictions





# The predict command with complex models

#### • Consider the following two models

#### Main effects and proportional hazards

stpm3 i.dep agediag, scale(lncumhazard) df(4)

# The predict command with complex models

• Consider the following two models

#### Main effects and proportional hazards

stpm3 i.dep agediag, scale(lncumhazard) df(4)

#### Non-linearity, interactions and non-proportional hazards

stpm3 i.dep##@ns(agediag, df(3)), scale(lncumhazard) df(4) ///
tvc(i.dep @ns(agediag, df(2))) dftvc(3)

# The predict command with complex models

• Consider the following two models

#### Main effects and proportional hazards

stpm3 i.dep agediag, scale(lncumhazard) df(4)

#### Non-linearity, interactions and non-proportional hazards

stpm3 i.dep##@ns(agediag, df(3)), scale(lncumhazard) df(4) ///
tvc(i.dep @ns(agediag, df(2))) dftvc(3)

#### • The predict command remains the same

```
predict S60_d1 S70_d1 S80_d1, /// new variables
    survival ci /// predict survival and CI
    at1(agediag 60 dep 1) /// 1st prediction
    at2(agediag 70 dep 1) /// 2nd prediction
    at3(agediag 80 dep 1) /// 3rd prediction
    timevar(0 10, step(0.1)) /// times to predict at
    frame(surv, replace) // save in frame
```

- We want to obtain contrasts between different covariate patterns.
- Just add contrast() and contrastvar() options.



Use **atreference()** to set reference at() option.

#### Plot contrasts



# Marginal predictions (standardization).

- For marginal predictions we are interested in the average (survival) in a (study) population.
- For example, we could estimate the average (marginal) survival in our population.

$$\widehat{S}_m(t) = rac{1}{N} \sum_{i=1}^N \widehat{S}(t | \mathbf{x_i}, \widehat{oldsymbol{eta}})$$

- This is averaged over all study subjects.
- If calculated for all individuals in the study, this should be similar to the corresponding Kaplan-Meier estimate.
- **standsurv** will take averages of predicted survival curves.
- Like margins, but for survival models.

# Counterfactual marginal survival probabilities

- Let X = 1 correspond to exposed and X = 0 to unexposed.
- Let  $S^{\times}(t)$  denote the marginal survival probability had all individuals in the population, possibly contrary to fact, been assigned X = x.
- We can also form contrasts between different levels of exposure

$$S^{1}(t) - S^{0}(t)$$

- Difference in survival probabilities *"had all patients been exposed"* and *"had all patients been unexposed"*.
- Different to simply comparing the observed probabilities of exposed and unexposed.

# Assumptions for identifiability

- These hypothetical quantities are estimated using observed data under various assumptions [4].
- Assuming that covariates Z are sufficient to control for confounding control,

$$S^{x}(t) = E[S(t|X=x, \boldsymbol{Z})]$$

with the expectation taken over the marginal distribution of Z.

• The difference between exposed and unexposed is,

$$E[S(t|\boldsymbol{X}=1,\boldsymbol{Z})] - E[S(t|\boldsymbol{X}=0,\boldsymbol{Z})]$$

 Under further assumptions (consistency, positivity, well-defined interventions) the marginal survival probability under X = x can be estimated by the standardised survival probability using regression standardisation (G-formula) [5].

```
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```

# Standardised survival probabilities

The average (causal) difference in marginal survival probabilities can be estimated as

$$\frac{1}{N}\sum_{i=1}^{N}\widehat{S}\left(t|\boldsymbol{X}=\boldsymbol{1},\boldsymbol{Z}=z_{i}\right)-\frac{1}{N}\sum_{i=1}^{N}\widehat{S}\left(t|\boldsymbol{X}=\boldsymbol{0},\boldsymbol{Z}=z_{i}\right)$$

- Fit a statistical model that contains exposure, X, and potential confounders, Z.
- Predict outcome for all individuals assuming they are all exposed (X = 1).
- Solution Take mean to give marginal estimate of outcome under X = 1.
- Repeat for unexposed (X = 0).
- Take the difference in means to form contrasts.

Distribution of confounders, Z, is the same for both groups.

## Example: Rotterdam Breast Cancer Data

• Exposure is hormonal treatment (hormon)

• Difference between average of

- 2982 survival curves where everyone treated (hormon=1) and
- 2982 survival curves where everyone untreated (hormon=0)

# Counterfactual marginal survival probabilities



- If our model is a good fit to the data then obtaining the average survival of the model predictions in a subgroup should be similar to the corresponding non-parametric Kaplan-Meier curve.
- Subgroups can be based on a prognostic index or a covariates in, or not in, the model.
- The stpm3km commands makes this easy.
- stpm3km calls standsurv with the over option.

## Breast Cancer: Assessing the fit of models

#### Linear age and proportional hazards

. stpm3 agediag i.dep, scale(lncumhazard) df(4)

. stpm3km i.agegrp, name(linear, replace)



## Breast Cancer: Assessing the fit of models

#### Natural splines for age and proportional hazards

. stpm3 @ns(agediag,df(3)) i.dep, scale(lncumhazard) df(4)

. stpm3km i.agegrp, name(ns, replace)



## Breast Cancer: Assessing the fit of models

#### Natural splines for age and non-proportional hazards

. stpm3 @ns(agediag,df(3)) i.dep, scale(lncumhazard) df(4) ///
tvc(@ns(agediag,df(3))) dftvc(3)

. stpm3km i.agegrp, name(ns, replace)



- A prognostic model is a regression model intended to enable prediction of future outcomes given values of several covariates measures at or before the time origin.
- Used to make health care decisions, e.g. treatment, timings of follow-up etc.
- We are interested in both callibration and discrimination of the model.
- A common way to assess calibration is a calibration plot.

Calibration the agreement between observed and predicted probabilities.

Discrimination the ability of the prognostic model to distinguish between patients at different levels of risk

- A visual tool to assess agreement between predicted and observed probabilities.
- With survival data (due to censoring) often define groups based on predicted probabilities and compare marginal predictions with non-parametric estimates.
- More recently use pseudo observations to enable visualization over the complete range of predictions[6].
- Useful to add other summaries of model performance to plot.
- **stpm3calplot** does some of this work for you.
- It will be added in a future release.

. stpm3 age @f > scale@	fn(exp(-0.12 * (lnodds) df(4)	nodes),stu neq(1) nol	ub(enodes) .og	)) i.size	e i.hormon i.g	grade pr_1, /	'//
					Number of ob Wald chi2(7)	s = 2,982 = 604.36	
Log likelihood	1 = -2607.772				Prob > chi2	= 0.0000	
	Coefficient	Std. err.	Z	P> z	[95% conf	. interval]	
xb							
age	.0148001	.0029896	4.95	0.000	.0089405	.0206596	
_fn_enodes	-2.664496	.1550357	-17.19	0.000	-2.96836	-2.360631	
size							
>20-50mmm	.4698654	.0854911	5.50	0.000	.3023059	.6374249	
>50 mm	.8191977	.1311011	6.25	0.000	.5622443	1.076151	
hormon							
ves	4521206	.1220432	-3.70	0.000	6913209	2129203	
3.grade	.3962003	.0933199	4.25	0.000	.2132966	.579104	
pr_1	138221	.0176075	-7.85	0.000	172731	103711	
(1) @fn(exp(-	-0.12 * nodes)	, stub(enod	les))				

#### stpm3km with failure option

. stpm3km, failure



#### stpm3km with lots of groups

. stpm3km, groups(15) legend(off)



#### stpm3calplot at 5 years

. stpm3calplot, time(5)



#### stpm3calplot with Observed Cls

. stpm3calplot, time(5) ciobs



#### stpm3calplot with Expected Cls

. stpm3calplot, time(5) cipred



#### stpm3calplot with pseudo observations smoother

. stpm3calplot, time(5) ciobs pseudo



#### stpm3calplot with pseudo observations smoother (splines)

. stpm3calplot, time(5) pseudo smoother(ns) smootherci



#### stpm3calplot at 5 years with performance statistics

. stpm3calplot, time(5) ciobs pseudo smoother(glm) smootherci /// stats(brier auc calint calslope)



- We are at risk of more than one event.
- For example, people diagnosed with cancer are at risk of dying from their cancer, but also at risk of dying from other causes.
- A competing event is an event that prevent the occurrence of the event of interest may be present.
  - Dying from a cardiovascular event means that the (potential) time-to-death for cancer never observed.
- Flexible parametric survival models also useful for competing risks models (and more general multistate models).

Predictions are based on estimates from > 1 model.



#### Use a separate model for each hazard function, $h_k(t)$

Cause-specific Cumulative Incidence Function (CIF)

$$F_k(t) = \int_0^t S(u) h_k(u) du$$

Probability of dying due to cause k

Partitioning all-cause probability of death

$$F(t) = \sum_{k=1}^{K} F_k(t)$$

• CIFs estimated using numerical integration - using ODEs.

. table cause, statistic(frequency) statistic(percent)

	Frequency	Percent
cause		
Censored	1,710	57.34
Cancer	996	33.40
Other causes	276	9.26
Total	2,982	100.00
#### Death due to breast cancer

- . stset os, failure(cause=1) exit(time 120) scale(12)
  . stpm3 @ns(age, df(5)) i.size i.grade pr\_1, ///
- scale(lnodds) df(3)
- . estimates store cancer

#### Death due to other causes

- . stset os, failure(cause=2) exit(time 120) scale(12)
- . stpm3 @ns(age,df(3)), scale(lncumhazard) df(3)
- . estimates store other

Store model estimates so can pass to predict command.

```
. // Conditional predictions
                                                                         111
. predict cif50 cif60 cif70, cif crmodels(cancer other) ci
                                                                           111
                              timevar(0 10, step(0.1))
>
>
                              at1(age 50 size 1 grade 2 nodes 3 pr_1 0) ///
                              at2(age 60 size 1 grade 2 nodes 3 pr_1 0) ///
>
>
                              at3(age 70 size 1 grade 2 nodes 3 pr_1 0) ///
>
                              frame(cifs, replace)
Predictions are stored in frame - cifs
. // Marginal predictions
. standsurv CIF_size1 CIF_size3, cif crmodels(cancer other) ci
                                                                         111
                                                                         111
                              timevar(tt)
>
                                                                         111
>
                              at1(size 1)
                                                                         111
                              at2(size 3)
>
                              contrast(difference) contrastvar(cifdiff) ///
>
                              frame(cifstand, replace)
```

## Competing Risks: Predictions



## Competing Risks: Predictions



- Causal Inference and competing risks using standsurv [7].
- Competing risks and prognostic models [8].
- Parametric version of Fine and Gray model [9, 10].

## Log hazard models

• Most models I have presented on log cumulative hazard scale

 $\ln(H(t)) = s(\ln(t)|\boldsymbol{\gamma}) + \mathbf{x}\boldsymbol{\beta}$ 

• Sometimes useful to change to log hazard scale.

$$\ln(h(t)) = s(\ln(t)|\gamma) + \mathbf{x}\beta$$

- log hazard models useful for
  - Multiple time scales.
  - Multiple time-dependent effects (sometimes).
  - Standardized incidence/mortality rate ratios.
  - Extraploation (sometimes).

• Likelihood contribution of *i*<sup>th</sup> individual is,

$$I_i = d_i \ln(h(t_i)) + \int_{t_{0i}}^{t_i} h(u) du$$

- The integral needs to be calculated *numerically*.
  - For all individuals and for each call to likelihood/gradient/Hessian functions.
  - Computationally intensive in large datasets.
  - Usually use Gauss-Legendre quadrature, but some precision issues as can have singularity in hazard function at t = 0.

#### Solutions to precision issue

• (**3-part integration:**) Use analytic integral before and after last knots[11].



• tanh-sinh quadrature when hazard has singularity[12].

Paul C Lambert

#### Faster models with large data sets

- For large datasets can send heavy computations to Python.
- Just add python option.
- The mlad program is used to maximize the likelihood.
- Calls mlad
  - Maximum Likelihood using Automatic Differentiation.
  - Calls Python Jax module.
  - Scores and Hessian automatically created
  - Just-In-Time (JIT) compilation
  - Efficient use of multiple processors.

. stpm3 i.dep, scale(lnhazard) df(5)
. stpm3 i.dep, scale(lnhazard) df(5) python

See mlad talk at Stata Conference

https://www.stata.com/meeting/us21/slides/US21\_Lambert.pdf

	Sample Size			
	500,000		1,000,000	
3 part integration				
strcs	2930		4807	
stpm3	493	(83.1%)	981	(79.6%)
<pre>stpm3 (python option)</pre>	46	(98.4%)	83	(98.3%)
All numerical integration				
stmerlin	1950		3996	
stpm3	464	(76.2%)	917	(77.0%)
<pre>stpm3 (python option)</pre>	34	(98.3%)	69	(98.3%)

- Will get very similar estimates (and standard errors) to a Cox proportional hazards model.
- Including the baseline in the model makes (complex) predictions much easier.
- Many alternative ways to present data than hazard ratios.
- Lots of extensions
  - Relative survival[13, 14]
  - Extrapolation [15, 16]
  - Multistate models [17]
  - Loss in life expectancy [18, 19]
  - Multiple timescales [20]

# Want to find out more?

#### 2024 Northern European Stata Conference Oslo, Norway, Tuesday 10 September 2024



Pre-conference course Monday 9 September 2024 Modelling survival data using flexible parametric models in Stata using stpm3: concepts and modelling choices.

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