

Introduction to SaddlePoint Mosaics

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Aimed at survival data where latent or disease heterogeneity and informative censoring arising from competing risks might be present

Multi-risk latent class modelling

Each class obeys the proportional hazards assumption (for each risk)
 All risks modelled simultaneously for more efficient extraction of information from cohort data

Each model is defined by the following quantities:

- Number of latent classes (L)
 - Personalised hazard rate complexity (M)
 - Complexity of base hazard rates (K)
- } Model configuration
-
- Latent class weightings
 - Frailty parameters
 - Association parameters
 - Base hazard rate parameters
- } Model parameters

Risk-specific marginal hazard rates and survival functions, “decontaminated” of the effects of informative censoring

Bayesian regression and model selection

Avoid over-fitting and unnecessary model complexity

Cohort stratification

Retrospective class assignment

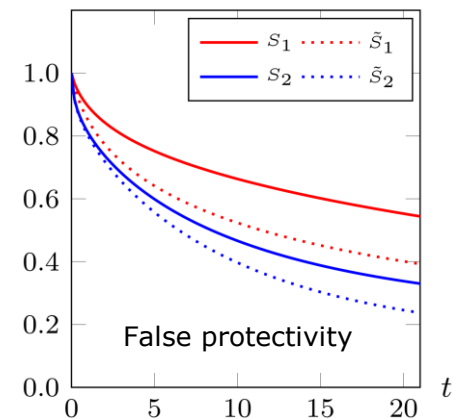
Provides additional insight into a cohort

A latent class model for competing risks

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Survival data analysis becomes complex when the proportional hazards assumption is violated at population level or when crude hazard rates are no longer estimators of marginal ones. We develop a Bayesian survival analysis method to deal with these situations, on the basis of assuming that the complexities are induced by latent cohort or disease heterogeneity that is not captured by covariates and that proportional hazards hold at the level of individuals. This leads to a description from which risk-specific marginal hazard rates and survival functions are fully accessible, ‘decontaminated’ of the effects of informative censoring, and which includes Cox, random effects and latent class models as special cases. Simulated data confirm that our approach can map a cohort’s sub-structure and remove heterogeneity-induced informative censoring effects. Application to data from the Uppsala Longitudinal Study of Adult Men cohort leads to plausible alternative explanations for previous counter-intuitive inferences on prostate cancer. The importance of managing cardiovascular disease as a comorbidity in women diagnosed with breast cancer is suggested on application to data from the Swedish Apolipoprotein Mortality Risk Study. Copyright © 2017 John Wiley & Sons, Ltd.

Keywords: survival analysis; heterogeneity; informative censoring; competing risks



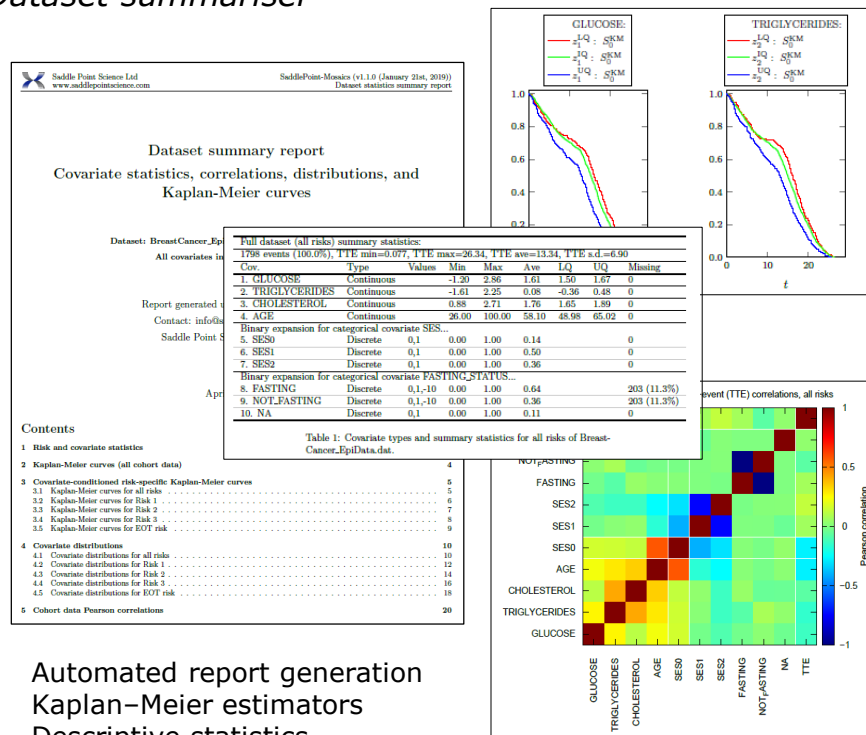
Multi-risk latent class analysis / Dataset management

User-friendly dataset management

	A	B	C	D	E	F	G	H	I
1	PATIENT_ID	GLUCOSE	TRIGLYCERIDES	CHOLESTEROL	AGE	SES	FASTING_STATUS	TTE	ENDPOINT
2	63760	1.335001067	-0.510825624	1.902107526	76	SES1	FASTING	0.07666	1
3	660704	1.722766598	-0.223143551	1.85629799	86	SES0	NOT_FASTING	0.106676	1
4	25725	1.757857918	1.029619417	2.104134154	56	SES1	FASTING	0.120465	1
5	736276	1.667706821	-0.356674944	1.871802177	67	SES0	FASTING	0.123203	2
6	254518	1.85629799	0.405465108	1.974801026	82	SES0	FASTING	0.142368	2
7	722248	1.568615918	-0.356674944	1.902107526	73	SES0	FASTING	0.156057	2
8	734692	2.079441542	0.875468737	1.686398954	60	SES1	FASTING	0.16086	1
9	658440	1.504077397	-0.510825624	1.504077397	55	SES1	META-COVARIATE-1: GLUCOSE		
10	690901	1.722766598	1.410986974	2.151762203	71	SES1	META-COVARIATE-1: TRIGLYCERIDES		
11	375396	1.667706821	0.262364264	1.945910149	80	SES1	META-COVARIATE-1: AGE		
							META-COVARIATE-2: SES0; group_SES.5		
							META-COVARIATE-3: SES1; group_SES.5		
							META-COVARIATE-4: SES2; group_SES.5		
							META-COVARIATE-5: FASTING; group_FASTING_STATUS.8		
							META-COVARIATE-6: NOT_FASTING; group_FASTING_STATUS.8		
							META-COVARIATE-10: NA; group_FASTING_STATUS.8		

Automated categorical covariate expansion
with user selection of baseline
Missing data regression variable generation
Automated metadata generation

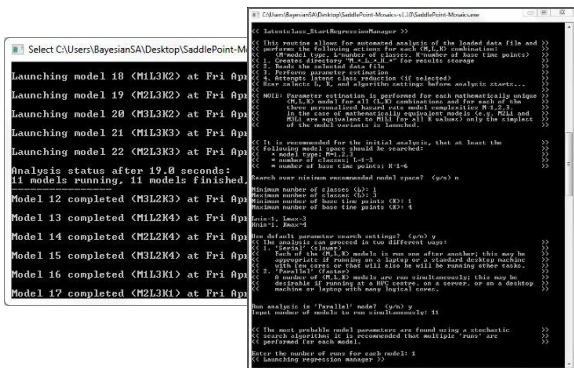
Dataset summariser



- Automated report generation
- Kaplan–Meier estimators
- Descriptive statistics
- Covariate Pearson correlations

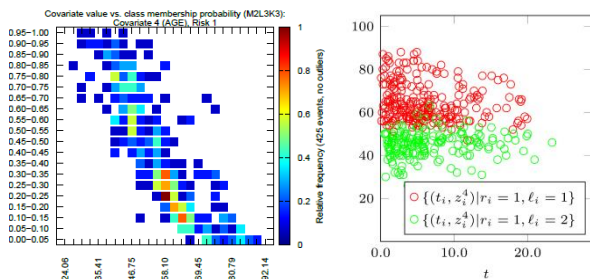
Multi-risk latent class analysis / Regression management

Automated regression management



Automated regression and model 'likelihood' score determination for all candidate models
Baseline hazard rate(s), covariate association, and frailty estimation for each model
Bayesian priors on all parameters

Retrospective class allocation



- Allocate patients to most probable latent class
- Data-driven cohort stratification
- Covariate and class membership correlations
- Aids search for new informative biomarkers

Bayesian model selection

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##### In(7) model scores #####
Model type: GICR_HOMO_DATES_ASSOC_REALITY
      (C-1)      (C-2)      (C-3)      (C-4)      (C-5)      (C-6)      (C-7)      (C-8)      (C-9)      (C-10)
(L-1)  -3607.57847(8) -3611.61297(8) -3617.0029(4) -3623.9443(8) -3636.65520(18) -3636.1488(4) -3638.301825 -3640.758525 -3643.450277 -3646.06...
(L-2)  -3606.57473(8) -3609.0385(8) -3615.8644(9) -3623.91252 -3638.120385 -3631.423482(8) -3636.627616 -3640.19457(8) -3640.08749(8) -3641.11...
(L-3)  -3607.477292 -3609.415235 -3614.900178 -3623.91252 -3638.619362 -3636.444064 -3636.627616 -3640.315185 -3640.818272 -3641.64...

Model type: GICR_HOMO_DATES_ASSOC_REALITY
      (C-1)      (C-2)      (C-3)      (C-4)      (C-5)      (C-6)      (C-7)      (C-8)      (C-9)      (C-10)
(L-1)  -3607.80128(18) -3614.122283 -3618.588786 -3624.738602 -3631.243882 -3640.925190(8) -3603.43147(18) -3601.304229(8) -3603.79471(18) -3607.97...
(L-2)  -3609.303038 -3614.257431 -3615.735902 -3621.905262 -3631.222816 -3609.23075 -3607.859489 -3608.89023 -3609.341421 -3609.85...
(L-3)  -3607.80128(18) -3614.122283 -3618.588786 -3624.738602 -3631.243882 -3640.925190(8) -3603.43147(18) -3601.304229(8) -3603.79471(18) -3607.97...

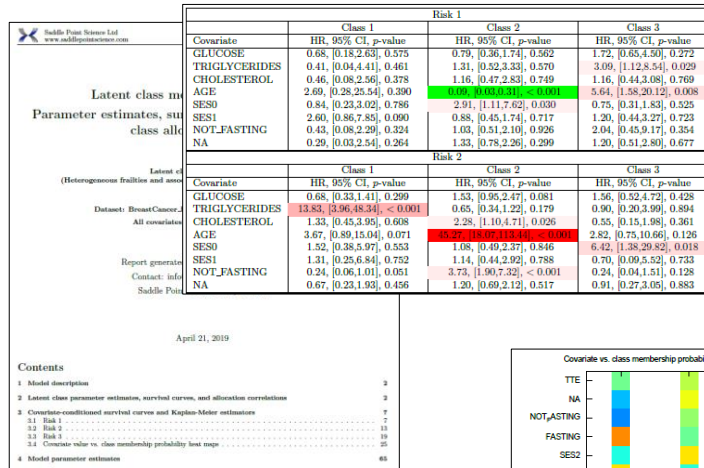
Model type: GICR_HOMO_DATES_ASSOC_REALITY
      (C-1)      (C-2)      (C-3)      (C-4)      (C-5)      (C-6)      (C-7)      (C-8)      (C-9)      (C-10)
(L-1)  * -3617.47625(8) -3612.079433(8) -3618.29085(8) -3628.828862(8) -3615.888861(8) -3654.009158 Error (S) -3640.084176 Error (S)
(L-2)  * -3620.611267 -3623.815272 Error (S) Error (S) Error (S) Error (S) Error (S) Error (S) Error (S) Error (S)
(L-3)  * -3620.611267 -3623.815272 Error (S) Error (S) Error (S) Error (S) Error (S) Error (S) Error (S) Error (S)

Optimal 5 models:
1) Model=ML208, InZ=-3600.3366, Prob[ML208]/Prob[ML208]=1.000, results: M_1_1_3_K0Un0, rev=1
2) Model=ML208, InZ=-3600.6817, Prob[ML208]/Prob[ML208]=0.811, results: M_1_1_3_K0Un0, rev=1
3) Model=ML210, InZ=-3601.1184, Prob[ML210]/Prob[ML210]=0.485, results: M_2_1_3_40Un0, rev=1
4) Model=ML208, InZ=-3601.3842, Prob[ML208]/Prob[ML208]=0.483, results: M_1_1_3_K0Un0, rev=1
5) Model=ML207, InZ=-3601.4163, Prob[ML207]/Prob[ML207]=0.483, results: M_1_1_3_K0Un0, rev=1

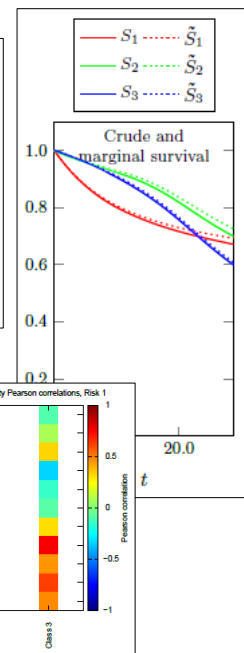
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Automated Bayesian model likelihood determination
and model ranking
Aikake and Bayesian Information Criterion scores also available

Model summary reports



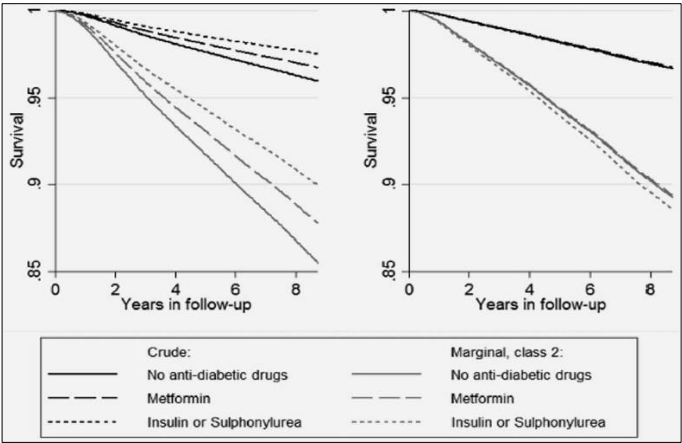
Automated report generation
Hazard ratios, baseline hazard rates
Crude and marginal survival curves
Covariate Pearson correlations



Some application examples

Prostate cancer:
Heterogeneity and competing risks effects found

Haggstrom et al., "Heterogeneity in risk of prostate cancer: A Swedish population-based cohort study of competing risks and Type 2 diabetes mellitus", IJC, 2018



Colorectal cancer:
Re-analysis of COIN trial (NEJM, 2011)

PR Barber et al., under review, 2019

Covariate	Risk 1		Class 2	
	HR	95% CI, p-value	HR	95% CI, p-value
Female	1.01	[0.87,1.17], 0.936	0.91	[0.79,1.04], 0.169
Age	0.89	[0.75,1.06], 0.189	0.82	[0.70,0.96], 0.013
T1 duration	1.34	[1.13,1.60], < 0.001	1.01	[0.78,1.30], 0.936
BMI	1.08	[0.93,1.25], 0.303	1.19	[1.03,1.38], 0.018
NA (BMI)	1.12	[0.86,1.45], 0.395	0.97	[0.78,1.20], 0.761
Sys BP	1.09	[0.90,1.32], 0.399	1.04	[0.88,1.23], 0.662
NA (Sys BP)	0.89	[0.29,2.78], 0.845	0.95	[0.22,4.03], 0.944
Dia BP	1.07	[0.89,1.28], 0.467	1.09	[0.92,1.28], 0.320
NA (Dia BP)	0.98	[0.32,3.07], 0.977	1.00	[0.23,4.23], 0.997
HbA1c	1.15	[1.00,1.33], 0.056	1.43	[1.25,1.65], < 0.001
NA (HbA1c)	1.00	[0.86,1.15], 0.972	1.13	[0.98,1.30], 0.090
Cholesterol	0.92	[0.55,1.55], 0.750	1.40	[1.06,1.85], 0.018
NA (Cholesterol)	1.01	[0.65,1.56], 0.972	1.17	[0.76,1.80], 0.466
LDL	1.12	[0.73,1.74], 0.604	0.75	[0.59,0.94], 0.014
NA (LDL)	1.00	[0.66,1.51], 0.990	1.00	[0.75,1.35], 0.988

Diabetic retinopathy:
Heterogeneity in disease severity found for patients with Type 1 diabetes mellitus

Larsen et al., under review, 2019

