

BIOSTAT III: Survival Analysis for Epidemiologists in R: Take-home examination

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Contents

Instructions

- **The examination is individual-based: you are not allowed to cooperate with anyone**, although you are encouraged to consult the available literature. The examiner will use Urkund in order to assess potential plagiarism.
- The examination will be made available by noon on Wednesday 16 November 2022 and **the examination is due by 17:00 on Wednesday 23 November 2022**.
- The examination will be graded and results returned to you by Wednesday 1 December 2022.
- The examination is in two parts. To pass the examination, you need to score at least 8/13 for Part 1 focused on rates and general regression modelling and 12/21 for Part 2 on survival analysis.
- Do not write answers by hand: please use Word, L^AT_EX, Markdown or a similar format for your examination report and submit the report **as a PDF file**.
- Motivate all answers in your examination report. Define any notation that you use for equations. The examination report should be written in English.
- Email the examination report containing the answers **as a PDF file** to gunilla.nilsson.roos@ki.se. **Write your name in the email, but do NOT write your name or otherwise reveal your identity in the document containing the answers.**

Part 1

Thun et al (1997; https://cancercontrol.cancer.gov/sites/default/files/2020-08/m08_4.pdf) report on results from two large US population-based cohorts: CPS-I from 1959–1965 and CPS-II from 1982–1988. The authors report the number of lung cancers (y) and person-year exposed (pt) broken down by:

- Cohort study, represented using the variable `cpsii`, which is 1 for CPS-II and 0 for CPS-I
- Sex, which is encoded using the variable `male`, which is 1 for males and 0 for females
- Attained age, which is encoded in the variable `age` for the lower bound of the five-year age groups 50–54, 55–59, . . . , 75–79 years

- Smoking status, this is encoded in the variable `smoker`, which is 1 for current smokers and 0 for never smokers (that is, former smokers are not presented).

These data are represented as data-frame named `df`.

```
str(df)

'data.frame': 48 obs. of 7 variables:
 $ y      : int  6 13 16 14 13 8 20 23 38 34 ...
 $ pt     : num 105263 95588 76190 60606 43771 ...
 $ age    : int  50 55 60 65 70 75 50 55 60 65 ...
 $ male   : int  1 1 1 1 1 1 0 0 0 0 ...
 $ cpsii  : int  0 0 0 0 0 0 0 0 0 0 ...
 $ smoker : int  0 0 0 0 0 0 0 0 0 0 ...
 $ female : int  0 0 0 0 0 0 1 1 1 1 ...
```

Q1

- (a) We fit a Poisson regression model for lung cancer mortality rates in CPS-II, with a main effect for attained age as a factor and a two-way interaction between being male, and being a current smoker (compared with being a never smoker). Write a formula for this regression model. As a reminder, please define your notation. (2 pts)

```
fit <- glm(y~factor(age)+male*smoker+offset(log(pt)),
  data=df, subset=(cpsii==1),family=poisson)
summary(fit)
```

Call:

```
glm(formula = y ~ factor(age) + male * smoker + offset(log(pt)),
  family = poisson, data = df, subset = (cpsii == 1))
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-2.79012	-0.81503	-0.02832	0.77967	1.94115

Coefficients:

	Estimate	Std. Error	z value	Pr(> z)
(Intercept)	-10.07191	0.08988	-112.064	< 2e-16 ***
factor(age)55	0.55717	0.07797	7.146	8.91e-13 ***
factor(age)60	1.05863	0.07397	14.311	< 2e-16 ***
factor(age)65	1.52816	0.07327	20.858	< 2e-16 ***
factor(age)70	1.88285	0.07547	24.947	< 2e-16 ***
factor(age)75	2.09603	0.08483	24.709	< 2e-16 ***
male	0.13933	0.12085	1.153	0.249
smoker	2.63805	0.07283	36.223	< 2e-16 ***
male:smoker	0.62558	0.12754	4.905	9.34e-07 ***

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for poisson family taken to be 1)

Null deviance: 5817.22 on 23 degrees of freedom

Residual deviance: 29.82 on 15 degrees of freedom
AIC: 192.76

Number of Fisher Scoring iterations: 4

- (b) Our research question relates to how the rate ratios for current versus never smokers varies by cohort study and by sex. From the regression model, show how to calculate (either algebraically or numerically) the lung cancer mortality rate ratio for (i) females in CPS-II and (ii) males in CPS-II. (4 pts)
- (c) From the output above, calculate the smoking rate ratio and 95% confidence interval for females in CPS-II. (2 pts)
- (d) Based on this model fit, show R computer code to calculate the smoking rate ratio and 95% confidence intervals for males in CPS-II . (2 pts)
- (e) For the following output, we used the same model but for the CPS-I cohort study. Describe a method to assess whether the smoking rate ratio for females in CPS-II is significantly higher than that for females in CPS-I. (*Hint: not necessarily based on the available output.*) (3 pts)

```
fit <- glm(y~factor(age)+male*smoker+offset(log(pt)),
  data=df, subset=(cpsii==0),family=poisson)
summary(fit)
```

Call:

```
glm(formula = y ~ factor(age) + male * smoker + offset(log(pt)),
  family = poisson, data = df, subset = (cpsii == 0))
```

Deviance Residuals:

Min	1Q	Median	3Q	Max
-1.57337	-0.57215	-0.03735	0.49529	2.16772

Coefficients:

	Estimate	Std. Error	z value	Pr(> z)
(Intercept)	-10.16013	0.10287	-98.771	< 2e-16 ***
factor(age)55	0.44491	0.08957	4.967	6.79e-07 ***
factor(age)60	1.05330	0.08719	12.081	< 2e-16 ***
factor(age)65	1.37029	0.09216	14.869	< 2e-16 ***
factor(age)70	1.52781	0.10707	14.269	< 2e-16 ***
factor(age)75	1.87375	0.12759	14.685	< 2e-16 ***
male	0.51504	0.14226	3.620	0.000294 ***
smoker	1.25371	0.12173	10.299	< 2e-16 ***
male:smoker	1.29623	0.17263	7.509	5.98e-14 ***

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for poisson family taken to be 1)

Null deviance: 2297.187 on 23 degrees of freedom
Residual deviance: 18.125 on 15 degrees of freedom
AIC: 160.15

Number of Fisher Scoring iterations: 4

Part 2

Q2

- (a) Given the following data, calculate the Kaplan-Meier and actuarial estimators for all cause survival at time 2 years. For the actuarial estimator, assume one-year time bands. Please show your working. (*Hint: you can either do this by hand or use software.*) (2 pts)

<u>Last time observed (months)</u>	<u>Status at last observation</u>
2	Alive
4	Death
5	Alive
9	Death
11	Death
15	Alive
15	Death
15	Alive
19	Alive
23	Death
23	Death
25	Alive
26	Death

Q3

We now use data on chemotherapy for stage B/C colon cancer represented in the `survival::colon` dataset. The help page for the dataset is shown below:

```
library(survival)
help("colon", help_type="text", package="survival")
```

```
colon                package:survival                R Documentation
```

```
Chemotherapy for Stage B/C colon cancer
```

Description:

```
These are data from one of the first successful trials of adjuvant
chemotherapy for colon cancer. Levamisole is a low-toxicity
compound previously used to treat worm infestations in animals;
5-FU is a moderately toxic (as these things go) chemotherapy
agent. There are two records per person, one for recurrence and
one for death
```

Usage:

```
colon
  data(cancer, package="survival")
```

Format:

```

id:          id
study:       1 for all patients
rx:          Treatment - Obs(ervation), Lev(amisole), Lev(amisole)+5-FU
sex:         1=male
age:         in years
obstruct:    obstruction of colon by tumour
perfor:      perforation of colon
adhere:      adherence to nearby organs
nodes:       number of lymph nodes with detectable cancer
time:        days until event or censoring
status:      censoring status
differ:      differentiation of tumour (1=well, 2=moderate, 3=poor)
extent:      Extent of local spread (1=submucosa, 2=muscle, 3=serosa,
             4=contiguous structures)
surg:        time from surgery to registration (0=short, 1=long)
node4:       more than 4 positive lymph nodes
etype:       event type: 1=recurrence,2=death

```

Note:

The study is originally described in Laurie (1989). The main report is found in Moertel (1990). This data set is closest to that of the final report in Moertel (1991).

References:

JA Laurie, CG Moertel, TR Fleming, HS Wieand, JE Leigh, J Rubin, GW McCormack, JB Gerstner, JE Krook and J Malliard. Surgical adjuvant therapy of large-bowel carcinoma: An evaluation of levamisole and the combination of levamisole and fluorouracil: The North Central Cancer Treatment Group and the Mayo Clinic. *J Clinical Oncology*, 7:1447-1456, 1989.

CG Moertel, TR Fleming, JS MacDonald, DG Haller, JA Laurie, PJ Goodman, JS Ungerleider, WA Emerson, DC Tormey, JH Glick, MH Veeder and JA Maillard. Levamisole and fluorouracil for adjuvant therapy of resected colon carcinoma. *New England J of Medicine*, 332:352-358, 1990.

CG Moertel, TR Fleming, JS MacDonald, DG Haller, JA Laurie, CM Tangen, JS Ungerleider, WA Emerson, DC Tormey, JH Glick, MH Veeder and JA Maillard, Fluorouracil plus Levamisole as an effective adjuvant therapy after resection of stage II colon carcinoma: a final report. *Annals of Internal Med*, 122:321-326, 1991.

- (a) The Kaplan-Meier estimators for the survival functions by treatment arm are shown in Figure 1. Carefully describe and interpret the three survival curves. (2 pts)

```

sfit = survfit(Surv(time, status)~rx, data=survival::colon, subset=(etype==1))
plot(sfit, col=1:3, xlab="Recurrence-free survival time (days)", ylab="Survival")
legend("topright", paste("rx =", levels(survival::colon$rx)), col=1:3, lty=1, bty="n")

```

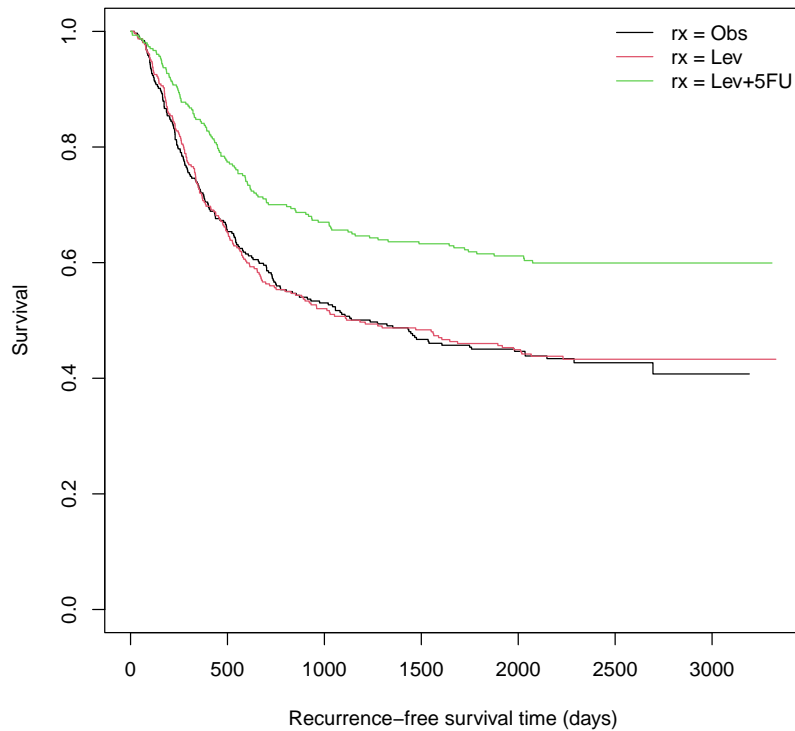


Figure 1: Kaplan-Meier survival curves by treatment arm

(b) Write out the regression equation for the Cox model specified in the following code. (2 pts)

```
colon2 = transform(subset(survival::colon, etype==1),
  Lev = ifelse(rx=="Lev",1,0),
  Lev_5FU = ifelse(rx=="Lev+5FU",1,0))
fit = coxph(Surv(time,status)~Lev+Lev_5FU+factor(extent), data=colon2)
summary(fit)
```

Call:

```
coxph(formula = Surv(time, status) ~ Lev + Lev_5FU + factor(extent),
  data = colon2)
```

n= 929, number of events= 468

	coef	exp(coef)	se(coef)	z	Pr(> z)
Lev	-0.02149	0.97874	0.10738	-0.200	0.84138
Lev_5FU	-0.51040	0.60025	0.11883	-4.295	1.75e-05 ***
factor(extent)2	0.26937	1.30915	0.47957	0.562	0.57432
factor(extent)3	0.95936	2.61003	0.45069	2.129	0.03328 *
factor(extent)4	1.49213	4.44654	0.48494	3.077	0.00209 **

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

	exp(coef)	exp(-coef)	lower .95	upper .95
Lev	0.9787	1.0217	0.7930	1.2080

Lev_5FU	0.6003	1.6660	0.4755	0.7577
factor(extent)2	1.3091	0.7639	0.5114	3.3512
factor(extent)3	2.6100	0.3831	1.0790	6.3135
factor(extent)4	4.4465	0.2249	1.7189	11.5028

Concordance= 0.589 (se = 0.013)

Likelihood ratio test= 56.48 on 5 df, p=6e-11

Wald test = 51.33 on 5 df, p=7e-10

Score (logrank) test = 53.5 on 5 df, p=3e-10

- (c) Based on the previous output, discuss whether there is any evidence that treatment arm is associated with recurrence-free survival. Provide confidence intervals and p-values to support your argument. (2 pts)
- (d) Based on the following Schoenfeld residuals tables, is there any evidence for non-proportionality in the modelled covariates? Interpret the tables and explain your reasoning. (2 pts)

```
cox.zph(fit)
```

	chisq	df	p
Lev	0.075	1	0.78
Lev_5FU	0.232	1	0.63
factor(extent)	1.161	3	0.76
GLOBAL	1.394	5	0.92

- (e) Based on the following plot of Schoenfeld residuals (Figure 2), how would you expect the hazard ratio for the Lev+5FU arm compared with the Observation arm to vary by time since randomisation? Explain your reasoning. (2 pts)

```
plot(cox.zph(fit)[2])
```

Q4

For the following research questions:

- Specify a target estimand (that is, the parameter that you want to estimate to address the research question)
- Describe a prospective study design, including target population, the event outcome of interest and any censoring
- Select and justify the choice of regression model to estimate the target estimand
- Carefully describe the time scale or time scales used for modelling and motivate your choice of time scale(s)
- Consider whether and how to adjust for potential confounding
- Consider whether and how to adjust for potential time-varying effects

The research questions are:

- (a) How does lung cancer mortality differ between never and former smokers? How does time since smoking cessation affect mortality? (3 pts)

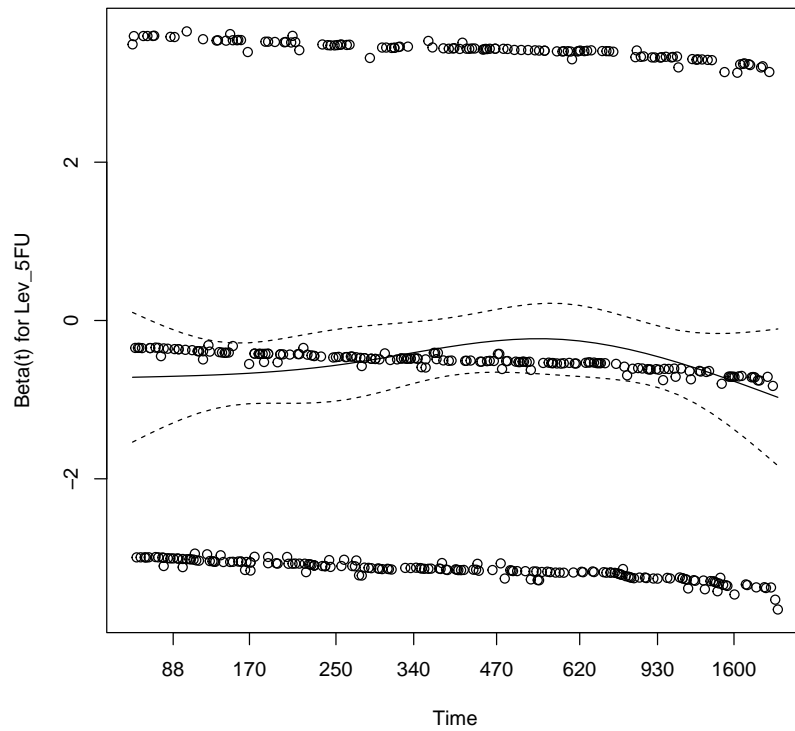


Figure 2: Schoenfeld residual plot for comparing the Lev+5FU arm with the Observation arm

- (b) Does human papillomavirus (HPV) vaccination reduce cervical cancer incidence? (3 pts)
- (c) For men diagnosed with prostate cancer, does initial treatment assignment to radical prostatectomy (removal of the prostate) improve all cause survival compared with initial treatment assignment to radiation therapy? (3 pts)

(Part 1: 13 pts; Part 2: 21 pts)