# Modeling PAH Survival

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#### 1.1 Variable selection for the model

We retained the three predictors from the NIH model, both on scientific plausibility grounds and to make direct comparisons to the NIH model possible. We then considered models that, in addition to these three variables, included other variables which demonstrated statistical significance in univariate analysis: functional class, age, responder status, tmt\_time. Variables were removed from the model one at a time, omitting at each stage the predictor showing least statistical significance, provided that the p-value exceeded 0.05.

The results for Weibull regression are shown below. Because  ${\tt tmt\_time}$  was present for only 180 of the pph patients, only those patients who had complete data on all of the considered predictors were able to be used in the first stepwise calculation (n=166). For that reason the stepwise calculations were repeated omitting  ${\tt tmt\_time}$  (which was not statistically significant), which brought the number of patients with full data on the predictors to 242. In each case, only the three NIH variables were retained, and all were statistically significant in the larger dataset.

```
[1.1]
     . stepwise, pr(.05): streg (cath_meanpa cath_rap cath_ci) (fc2-fc4) tmt_time age responder if pph==1
     > , d(weibull) nohr nolog
                            begin with full model
     p = 0.9801 >= 0.0500 removing responder
     p = 0.7375 >= 0.0500 removing tmt_time
     p = 0.4477 >= 0.0500 removing fc2 fc3 fc4
     p = 0.5284 >= 0.0500 removing age
     Weibull regression -- log relative-hazard form
     No. of subjects =
                                 166
                                                          Number of obs
                                                                                   166
     No. of failures =
                                  79
     Time at risk
                         935.0554443
                                                          LR chi2(3)
                                                                                13.97
                          -187.94323
                                                          Prob > chi2
                                                                               0.0029
     Log likelihood =
                                                                 [95% Conf. Interval]
               _t |
                          Coef.
                                  Std. Err.
                                                 z
                                                       P>|z|
      cath_meanpa |
                     -.0182095
                                  .0097154
                                              -1.87
                                                       0.061
                                                                -.0372514
                                                                              .0008324
         cath_rap |
                       .0518079
                                  .0212385
                                               2.44
                                                       0.015
                                                                 .0101813
                                                                              .0934345
          cath_ci |
                     -.3568947
                                  .2421836
                                              -1.47
                                                       0.141
                                                                -.8315658
                                                                              .1177764
                                                                -3.289658
                      -1.45386
                                  .9366488
                                              -1.55
                                                       0.121
                                                                              .3819375
            _cons |
```

0.67

0.504

-.1250805

.2543415

.0967931

/ln\_p |

.0646305

```
p | 1.066765 .1032555
                                       .8824258 1.289612
         1/p | .9374138 .0907352
                                        .775427
                                               1.13324
[1.2]
   . stepwise, pr(.05): streg (cath_meanpa cath_rap cath_ci) (fc2-fc4) age responder if pph==1, d(weibu
   > 11) nohr nolog
   note: 1 obs. dropped because of estimability
                 begin with full model
   p = 0.5776 >= 0.0500 removing age
   p = 0.5629 >= 0.0500 removing fc2 fc3 fc4
   p = 0.0944 >= 0.0500 removing responder
   Weibull regression -- log relative-hazard form
                    242
   No. of subjects =
                                   Number of obs =
                                                   242
                    124
   No. of failures =
   Time at risk = 1309.004795
                                   LR chi2(3)
                                                 30.62
   Log likelihood = -286.31185
                                   Prob > chi2
                                                 0.0000
   ______
               Coef. Std. Err. z P>|z|
                                       [95% Conf. Interval]
   -----
    /ln_p | .0284513 .0771618 0.37 0.712
                                       -.1227831
                                               .1796857
         p | 1.02886 .0793887
                                        .8844555 1.196841
        1/p | .9719496 .0749974
                                        .8355328 1.130639
```

# 1.2 Adequacy of the Weibull model

If the Weibull model fits well, then the cumulative hazard function  $(-\ln(S(t)))$  should be a linear function of time. The Cox proportional hazard model can be used to estimate the underlying hazard function, adjusted for covariates, nonparametrically, and this estimate can be used to assess linearity (and hence, adequacy of the Weibull model).

The diagnostic plot of Figure 1.1 is quite straight, at least up to ten years. About 80% of the patients' information is complete by ten years, so we can repeat the exercise, censoring values at ten years. The resulting diagnostic plot shows a very straight line (Figure 1.2), indicating excellent

agreement with the Weibull model. One could argue that the data set is mature through ten years, but has limited information about survival beyond the ten-year point, in which case the model could be based on the censored ten-year data. [Note that this does not discard the information from those who survive beyond ten years; their information up to the ten-year point is fully included.]

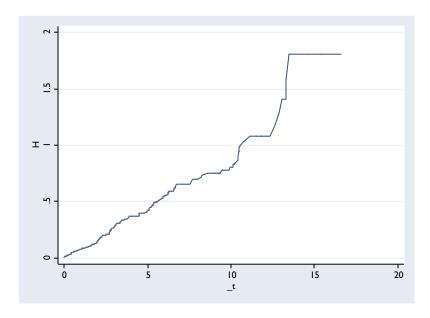


Figure 1.1: Cumulative hazard vs time, full dataset.

The Weibull model based on the full data set is not strikingly different from that based on censoring at ten years. The output for the two settings are contrasted below, starting with the full data set model.

```
[1.3] . streg cath_meanpa cath_rap cath_ci if pph==1, d(weibull) nohr nolog
```

```
failure _d: mortality
analysis time _t: stimeyears
```

Weibull regression -- log relative-hazard form

```
No. of subjects =
                            246
                                                     Number of obs
                                                                               246
No. of failures =
                            127
Time at risk
                    1331.674199
                                                     LR chi2(3)
                                                                             25.35
Log likelihood
                     -294.27028
                                                     Prob > chi2
                                                                            0.0000
          _t |
                     Coef.
                             Std. Err.
                                                  P>|z|
                                                             [95% Conf. Interval]
                                             z
```

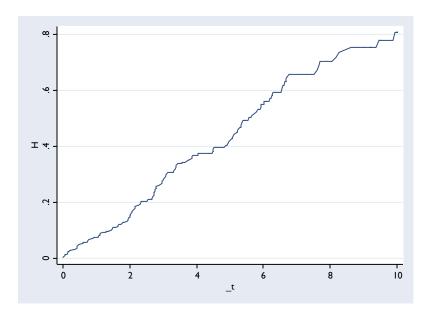


Figure 1.2: Cumulative hazard vs time, data points beyond 10 years are censored.

cath_meanpa   cath_rap   cath_ci   _cons	0131682 .0449203 3695832 -1.48393	.0072487 .014784 .1810877 .7033466	-1.82 3.04 -2.04 -2.11	0.069 0.002 0.041 0.035	0273754 .0159442 7245085 -2.862464	.001039 .0738964 0146579 1053964
/ln_p	.0212581	.0764031	0.28	0.781	1284891	.1710053
p   1/p	1.021486 .9789663	.0780446 .074796			.8794231 .8428171	1.186497 1.137109

The ten-year censored version is given here.

[1.4] . streg cath\_meanpa cath\_rap cath\_ci if pph==1, d(weibull) nohr nolog

failure \_d: die10
analysis time \_t: st10

Weibull regression -- log relative-hazard form

No. of subjects = 247 Number of obs = 247 No. of failures = 115

Time at risk	= 1274.50	5136				
				LR o	chi2(3) =	21.94
Log likelihood	= -291.13	3584		Prob	o > chi2 =	0.0001
_						
<del>-</del> :	Coef.				[95% Conf.	Interval]
cath_meanpa		.0077288	-1.84	0.065	0293836	.0009128
cath_rap	.0448934	.0154911	2.90	0.004	.0145314	.0752554
cath_ci	3360315	.1881666	-1.79	0.074	7048313	.0327683
	-1.422101		-1.94	0.052	-2.859273	.0150721
/ln_p	0448648	.0825665	-0.54	0.587	2066922	.1169626
p l		.0789441			.8132699	1.124077
1/p	1.045886	.0863552			.8896184	1.229604

# 1.3 Effects of covariates

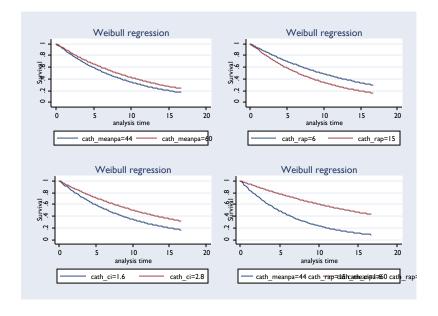


Figure 1.3: Effects of covariates on survival predictions from the Weibull model.

Figure 1.3 shows the results of varying each of the three covariates from the observed 25th percentile to the 75th percentile on predicted survival. The first three panels show the effects for

each of the covariates when the other two covariates are at their mean values. The final panel contrasts predicted survival for a patient whose mPAP and CI are at the 25th percentile and mRAP is at the 75th percentile to that of a patient at the 75th percentile of mPAP and CI and 25th percentile of mRAP.

## 1.4 A further simplification

In both cases above (full or ten-year-censored), the Weibull shape parameter (p) is very close to one, and in neither case is statistically significantly different from one. In that case, the Weibull model simplifies to an *exponential regression* model, which is substantially simpler to use. The results for the ten-year-censoring dataset are given below, and it is clear that the coefficients are almost identical to those from the Weibull model above.

 $^{[1.5]}$  . streg cath\_meanpa cath\_rap cath\_ci if pph==1, d(exponential) nohr nolog

failure \_d: die10 analysis time \_t: st10

Exponential regression -- log relative-hazard form

No. of subjects =	247	Number of obs	=	247
No. of failures =	115			
Time at risk =	1274.505136			
		LR chi2(3)	=	22.34
Log likelihood =	-291.28622	Prob > chi2	=	0.0001

_t		Std. Err.				Interval]
cath_meanpa	•	.0077052 .0154697 .1879646 .7201019	-1.86 2.92 -1.80 -2.08	0.063 0.004 0.072 0.037	0294142 .0148361 7061214 -2.909826	.0007897 .0754761 .0306865 0870785

This model would estimate survival at t years by

$$P(t) = e^{-A(x,y,z) \times t},$$

where  $A(x, y, z) = e^{(-1.498 - 0.0143x + 0.0452y - 0.338z)}$ , and where x, y, and z are mPAP, mRAP, and CI, respectively.

For the example in the paper (mPAP of 40 mm Hg, mRAP of 3 mm Hg, and CI of  $3.5 \,\mathrm{L/min/m^2}$ ), the exponential-regression estimates using the mature portion of the data set give 1-, 2-, 3-, 5-, and 10-year survival probabilities of 0.96, 0.92, 0.88, 0.80, and 0.64. [The exponential model using the full data set gives the same estimated probabilities to this number of decimal places, as does the more complex Weibull model.]

#### 1.5 The Cox model

For comparison purposes, the Cox proportional hazard estimates of the effects of the predictor variables are virtually identical to those from the Weibull or exponential models, as shown below.

[1.6] . stcox cath\_meanpa cath\_rap cath\_ci if pph==1, nohr nolog

failure \_d: die10 analysis time \_t: st10

Cox regression -- Breslow method for ties

\_t | Coef. Std. Err. Z P>|z| [95% Conf. Interval] cath\_meanpa | -.0143476 .0077374 0.064 -1.85 -.0295126 .0008174 .0154703 cath\_rap | .0427519 2.76 0.006 .0124307 .0730731 cath\_ci | -.3456571 . 1879657 -1.840.066 -.714063

## 1.6 Responders to calcium channel blockers

There are 11 responders among the pph patients, and only one of them died during the course of the study. As a result, there is little information about factors that would influence their survival. The Kaplan-Meier curves are shown in Figure 1.4 for responders and non-responders.

If we include the **responder** variable, which is not quite statistically significant, but which has a large coefficient in the model, we have the following estimates:

[1.7] . streg cath\_meanpa cath\_rap cath\_ci responder if pph==1, d(e) nohr nolog

failure \_d: mortality
analysis time \_t: stimeyears

Exponential regression -- log relative-hazard form

No. of subjects = 246 Number of obs = 246 No. of failures = 127 Time at risk = 1331.674199

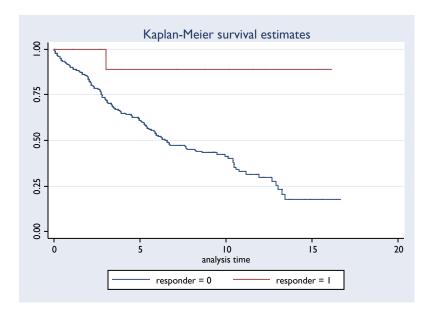


Figure 1.4: Overall survival estimates for pph patients, by responder status

Log likelihood = -291.56297				LR chi2(4) = Prob > chi2 =			30.77
_t	Coef.	Std. Err.	z	P> z		onf.	Interval]
cath_meanpa   cath_rap   cath_ci   responder   _cons	0148078 .0402462 3609136 -1.742558 -1.269532	.007217 .0149593 .1802445 1.010995 .6941126	-2.05 2.69 -2.00 -1.72 -1.83	0.040 0.007 0.045 0.085 0.067	02895 .01092 71418 -3.7240 -2.6299	64 64 72	0006627 .0695659 0076408 .2389552 .0909034

This gives predicted 1-, 2-, 3-, 5-, and 10-year survival as 0.95, 0.91, 0.86, 0.78, and 0.61 for a non-responder, compared to 0.99, 0.98, 0.97, 0.96, and 0.92 for a responder.

If we exclude the responders entirely, the exponential regression predictions are almost identical to those obtained from the model above (the only difference is an estimated 0.90 survival at 2 years instead of 0.91). The model above effectively assumes that the *relative* effects of mPAP, mRAP, and CI are the same for responders and non-responders, but that the latter have lower baseline survival rates.

The prediction equation for survival to at least t years is given by

$$P(t) = e^{-A(x,y,z) \cdot t}, \tag{1.1}$$

where

$$A(x, y, z) = e^{(-1.270 - 0.0148x + 0.0402y - 0.361z)}$$
(1.2)

for non-responders to calcium channel blockers and

$$A(x, y, z) = e^{(-3.012 - 0.0148x + 0.0402y - 0.361z)}$$
(1.3)

for responders, and where once again x, y, and z are mPAP, mRAP, and CI, respectively.

This model fits the data well, and the exponential distribution also approximates the data well, as noted above. The appropriateness of incorporating the responder variable in the model as a "hazard adjustment" is justified by testing the proportional-hazards assumption, both overall and for each of the individual predictors. [Note that the exponential regression model is a proportional-hazards model.] As shown in the display below, there is no evidence to reject the proportional-hazards assumption for any of the predictors. Specifically, the p-value for the responder adjustment in this model is 0.57, which is quite consistent with responder status operating to multiply the hazard by a constant amount.

- [1.8] . quietly stset stime, fail(mortality)

  - . estat phtest, detail

Test of proportional-hazards assumption

Time: Time

	rho	chi2	df	Prob>chi2
cath_meanpa   cath_rap   cath_ci   responder	0.05312 0.10700 -0.04486 -0.05003	0.23 1.57 0.26 0.32	1 1 1 1	0.6313 0.2103 0.6097 0.5733
global test		5.24	4	0.2633