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Gompertz regression parameterized as accelerated failure time model

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Introduction

- Why use parametric survival models?
 - Can handle right-, left- or interval-censored data
 - Cox regression can't handle left- or interval-censored data
 - Produce better estimation if you have a theoretical expectation of the baseline hazard
 - Can estimate expected life, not only hazard ratios (AFT-models)
 - Can include random effects – frailty models (not discussed here)

Introduction

- A model that is lacking an easy way to estimate in Stata
 - Gompertz regression parameterized as accelerated failure time model
 - Exist in R
 - eha-package, with command: `aftreg`

- Why use Stata?
 - Easy handling survival data
 - Data management
 - Setup
 - Good graphical possibility

Proportional hazard model

- Easy to compare with Cox regression
 - Hazard ratios
 - Plots
 - Cumulative hazard function
 - Survival function
 - Commonly used
- Hazard function general form
 - $h(t|x) = h_0(t)e^{xb}$

Accelerated failure time model

- Can be seen as a linear model (simplest form):
 - $\log(t) = a + bx + \varepsilon$
 - Useful in mediation
- Estimation on life scale
 - Estimation of expected baseline life
 - Area under the survival curve when all covariates are zero
 - Compare expected life between two groups
 - Logarithmic change in expected life compared to the baseline life expectancy
 - Expected life = Baseline life expectancy * $\exp(\text{effect})$

Accelerated failure time model

- Definition of accelerated failure time model
 - For a group (X_1, X_2, \dots, X_p) , the model is written mathematically as $S(t|x) = S_0\left(\frac{t}{\eta(x)}\right)$, where $S_0(t)$ is the baseline survival function and $\eta(x)$ is an acceleration factor that is a ratio of survival times corresponding to any fixed value of $S(t)$. The acceleration factor is given according to the formula $\eta(x) = e^{(a_1x_1 + \dots + a_px_p)}$. (Qi, J (2009))
- Hazard function
 - $h(t|x) = \left[\frac{1}{\eta(x)}\right] h_0\left[\frac{t}{\eta(x)}\right]$
- Log-linear form
 - $\log(t) = a + bx + \sigma\varepsilon$
 - Where t and ε following corresponding distributions

The Gompertz distribution

- When is it useful?
 - Adult and old age mortality for humans
 - Demographic models
 - Including models with treatment effects, such as cancer patients
 - Can be problem with very old individuals
- Normal paramertization
 - $h(t) = \lambda e^{\gamma t}$
 - $\lambda > 0, \gamma \geq 0, t > 0$

The Gompertz distribution

- Suggested new parametrization by Broström, G & Edvinsson, S (2013)
 - $\lambda \rightarrow \frac{\lambda}{\gamma}, \gamma \rightarrow \frac{1}{\gamma}$
 - $h(t) = \frac{\lambda}{\gamma} e^{t/\gamma}$
 - $\lambda > 0, \gamma > 0, t > 0$
- Proof of new parametrization
 - Hazard for AFT-model
 - $h(t|x) = \left[\frac{1}{\eta(x)} \right] h_0 \left[\frac{t}{\eta(x)} \right]$
 - Here, new gamma can be seen as an accelerated factor

The Gompertz distribution

- Linear model: $\log(t) = a + bx + \varepsilon$
 - Here, ε is following a log-Gompertz or inverse Weibull distribution
 - Compare to the Weibull model, where ε follows a Gumbel distribution

- Likelihood function

→ Survival function: $S(t) = \exp\{-\lambda(e^{t/\gamma} - 1)\}$

→ Density function: $F(t) = h(t)S(t)$

→ Hazard function: $h(t) = \frac{\lambda}{\gamma} e^{t/\gamma}$

→ $L(\alpha, \mu, \sigma) = \prod_{i=1}^n \{h_i(t_i)S_i(t_i)\}^{\delta_i} \{S_i(t_i)\}^{1-\delta_i}$

Structural equation models and mediation

- Simple way to estimate linear models within a pathway framework
- Estimate all equations and combine for the direct and indirect effects
- Supported by most statistical programs
 - In Stata the gsem-command combined with simulation is preferable

Mediation in survival models

- What do we need to do?
 1. Estimate a parametric survival model
 2. Estimate the exposure on the mediator
 - First two steps directly from the gsem output
 3. Estimate the indirect, direct and total effect
 4. Estimate confidence intervals and significance
 - Step three and four can be done with either simulation or delta method
 - These models are simple for continuous mediators, but can be tricky with binary or categorical mediators

Estimating confidence intervals

- Simulation
 - Bootstrapping
 - Seems to be the more popular simulation method
 - Calculate point estimates for the indirect and direct effects
 - Simulate these point estimates
 - Monte carlo simulation
 - More flexible to handle problematic correlations
 - Not as straight forward

- Delta method
 - Easiest method and probably most popular
 - Need a stronger assumption of normality

What I am working on

- A Stata command, `stafgomp`, to estimate the Gompertz regression parameterized as accelerated failure time model similar to what `streg` does
- A post-estimation command that would make it simple to estimate direct, indirect and total effect, with confidence intervals, for survival models

Example

- Scanian Economic Demographic Database (Bengtsson, T., Dribe, M. and Svensson, P. (2012))
- Longitudinal historical database
 - Data from 17th century and onwards
 - Here, data from individuals born between 1815-1860 are used
 - Comes from five rural parishes in western Scania
 - Consist of important life course events as birth and death, but also births of children, marriage or socioeconomic status are recorded

Data

- Variables used:
 - "Treatment variable":
 - Approximation of bad early life conditions
 - Infant mortality rate at the year of birth
 - High imr vs. low imr (binary)
 - Years of high disease load such as measles, smallpox and whooping cough (Quaranta, L. (2013))

 - Parental socioeconomic status
 - Socioeconomic status at birth (binary)
 - Confounder

 - Outcome
 - The individuals are followed until death or out-migration.

Pre-estimation

- Compare hazard estimations of Gompertz proportional hazard model and Cox regression
- Plot survival curve and compare with Kaplan-Maier
- If not acceptable test with different survival distribution until the parametric model is acceptable
 - Here, we choose Gompertz as it fits good and are supported theoretically for adult mortality

Gompertz proportional hazard

```
. streg imr_high ses, dist(gompertz)
```

Gompertz regression -- log relative-hazard form

```
No. of subjects =      3,756      Number of obs   =      3,756
No. of failures =        880
Time at risk    =    19824107
Log likelihood   =   -1773.9194      LR chi2(2)       =      26.53
                                          Prob > chi2      =      0.0000
```

_t	Haz. Ratio	Std. Err.	z	P> z	[95% Conf. Interval]	
imr_high	1.259023	.0951873	3.05	0.002	1.085624	1.460119
ses	1.362878	.1010669	4.17	0.000	1.178513	1.576084
_cons	9.57e-06	8.25e-07	-134.05	0.000	8.08e-06	.0000113
/gamma	.0002332	8.35e-06	27.92	0.000	.0002168	.0002496

Cox regression

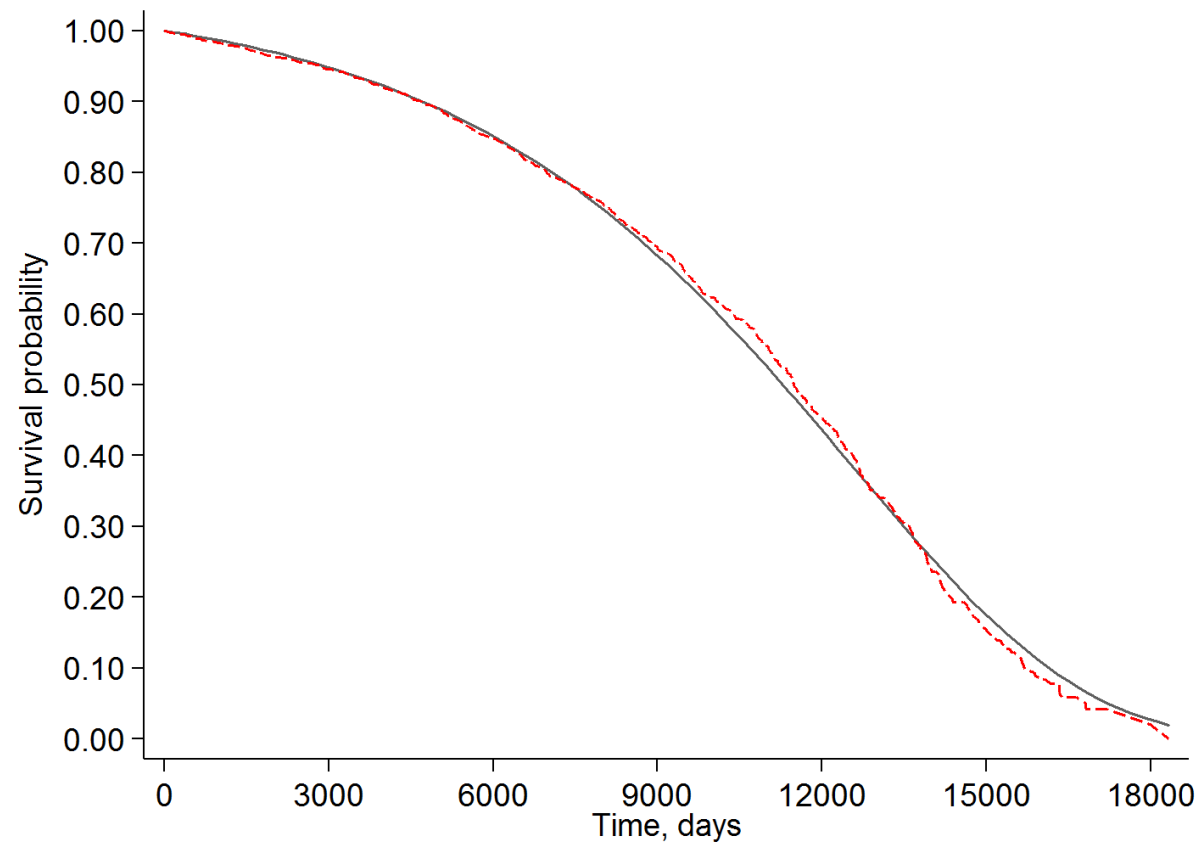
```
. stcox imr_high ses
```

Cox regression -- Breslow method for ties

```
No. of subjects =      3,756      Number of obs   =      3,756
No. of failures =        880
Time at risk    =    19824107
Log likelihood  =   -5889.8259      LR chi2(2)      =      28.17
                                          Prob > chi2    =      0.0000
```

	-----+-----					
_t	Haz. Ratio	Std. Err.	z	P> z	[95% Conf. Interval]	
imr_high	1.261686	.0955679	3.07	0.002	1.087617	1.463614
ses	1.381581	.102833	4.34	0.000	1.194043	1.598573

Gompertz vs. Kaplan-Maier



Gompertz AFT model

```
. staftgomp imr_high ses
```

```
Gompertz AFT regression                      No. of obs =      3756
Log likelihood = -9325.8767                  LR chi2(2) =      14.34
Baseline life expectancy = 11669.94        Prob > chi2 =     0.0008
```

	_t	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
-----+-----							
xb							
	imr_high	-.0496389	.0261027	-1.90	0.057	-.1007992	.0015214
	ses	-.0873728	.0273233	-3.20	0.001	-.1409255	-.0338202
-----+-----							
bp							
	lambda	8.434053	.0451675	186.73	0.000	8.345526	8.522579
	gamma	-2.931995	.102271	-28.67	0.000	-3.132442	-2.731547

Post-estimation

```
. lincom imr_high, eform
```

```
( 1)  [xb]imr_high = 0
```

_t	exp(b)	Std. Err.	z	P> z	[95% Conf. Interval]	
(1)	.951573	.0248386	-1.90	0.057	.9041146	1.001523

```
. nlcom exp([xb]imr_high)*11699
```

```
_nl_1:  exp([xb]imr_high)*11699
```

_t	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]	
_nl_1	11132.45	290.5866	38.31	0.000	10562.91	11701.99

Post-estimation

- Baseline life expectancy
 - $\frac{11699}{365}$ days = 32,1 years
- Estimating for individuals after 16000 days
 - $\frac{11699+16000}{365}$ days = 75,9 years of age
- Effect of high imr during birth
 - $\frac{11132+16000}{365}$ days = 74,3 years of age

Conclusion

- Conclusion
 - Even if you survive over the age of 40 you still have a mean shorter life expectancy of 1,6 years if you were born in a year with high imr
 - Latent effect
 - Support for the fetal origins hypothesis
 - Is the estimate reasonable?

- If needed
 - Mediation analysis and calculation of direct, indirect and total effect of treatment
 - Here, total effect = direct effect