

Outline of Workshop on longitudinal data

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Longitudinal Data

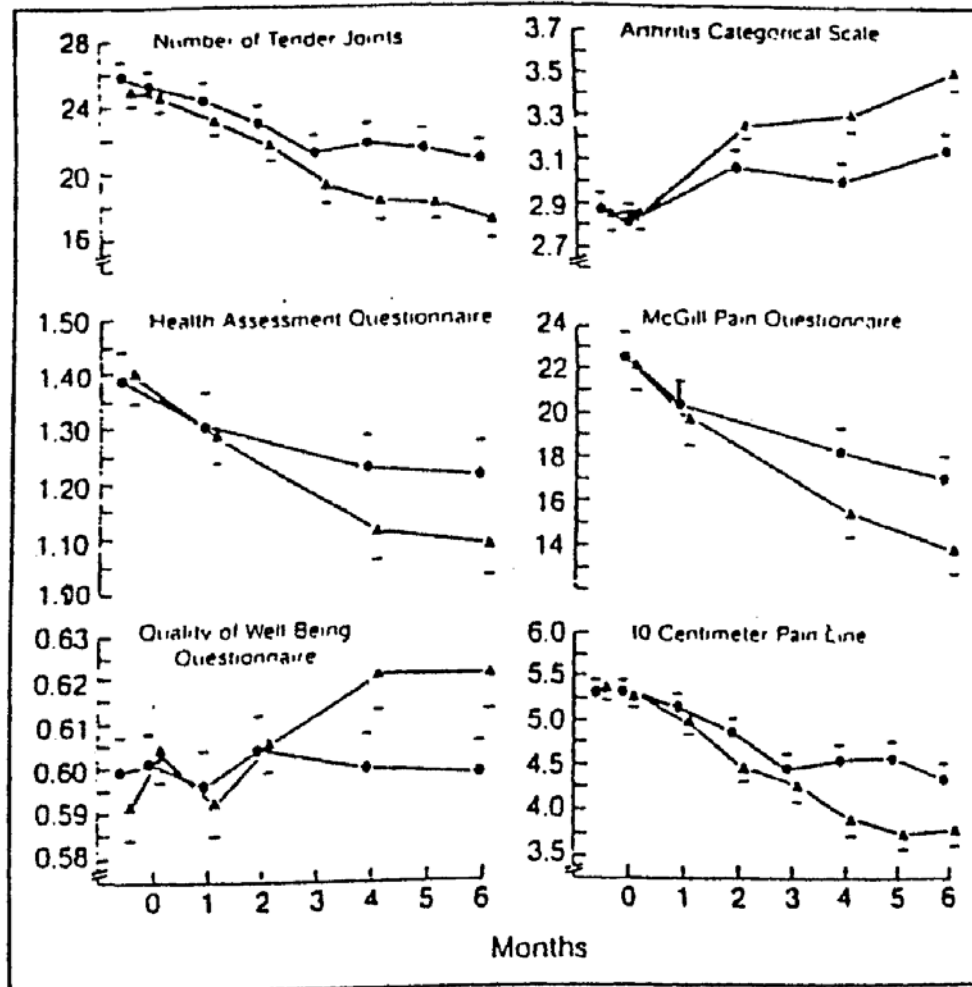
- Time-series data
- Event-history data

Time series

EXAMPLE

Auranon Therapy for Rheumatoid Arthritis (Bombardier et al, Am. J.Med, 1986).

- **Randomized, placebo-controlled study of auranon treatment of rheumatoid arthritis.**
- **Outcome variables: More than 20 measures of pain, function, global health, utility.**
- **Measurement schedule: Two baseline measurements and monthly measurements for six months.**
- **Sample size:**
 - **303 patients with classic/definite rheumatoid arthritis**
 - **154 patients on auranon**
 - **149 on placebo**



Features of time-series data

- Repeated measurements of study participants.
- Various types of measurements
- Correlation between measurements
- Known as
 - cohort studies
 - panel studies
 - longitudinal studies

Previous approach

Cohort averages at each time

BUT

- No accounting for individual change
- No accounting for the correlation between measurements over time

2 questions want to address from time-series data

- **How does each person's outcome change over time?**
- **What predicts differences among people in their changes of outcome over time?**

MULTI-LEVEL MODELS

- How does each person's outcome change over time?

LEVEL 1 OR RANDOM EFFECTS

- What predicts differences among people in their changes of outcome over time?

LEVEL 2 OR FIXED EFFECTS

MULTI-LEVEL MODELS

Able to investigate group differences in change of outcome over time

- **starting value**
- **rate of change**
- **final outcome**

while adjusting for

- **confounders (time varying and time invariant)**
- **subjects change in outcome over time**
- **correlation between outcome measurements**

EXAMPLE

The Diabetes Pilot Program – I Krass

Comparing effectiveness of a 6 month versus a 12 month service on glycaemic control

<u>Group 1</u>	<u>Group 2</u>
4 measures of BP and glucose over 6 months	6 measures of BP and glucose over 12 months

HBA1c – measure of control of diabetes at baseline 6, 12 and 18 months

EXAMPLE

The Diabetes Pilot Program – I Krass

- 1st Approach – compare BP, glucose and HBA1c by Group

BUT

- No account for individual change in BP, glucose and BHA1c over time – cohort effect
- No account for variability in BP, glucose and BHA1c between individuals
- No account for correlation of measurements

EXAMPLE

The Diabetes Pilot Program – I Krass

Multi-level approach

- **Level 1/ Random effects – individual's BP, Glucose, HBA1c over time**
- **Level 2/ Fixed effects – group membership and other potential confounders (yrs of diagnosis, physical activity, insulin type)**

Able to then say if 12 month service significantly better at glycaemic control than 6 month service

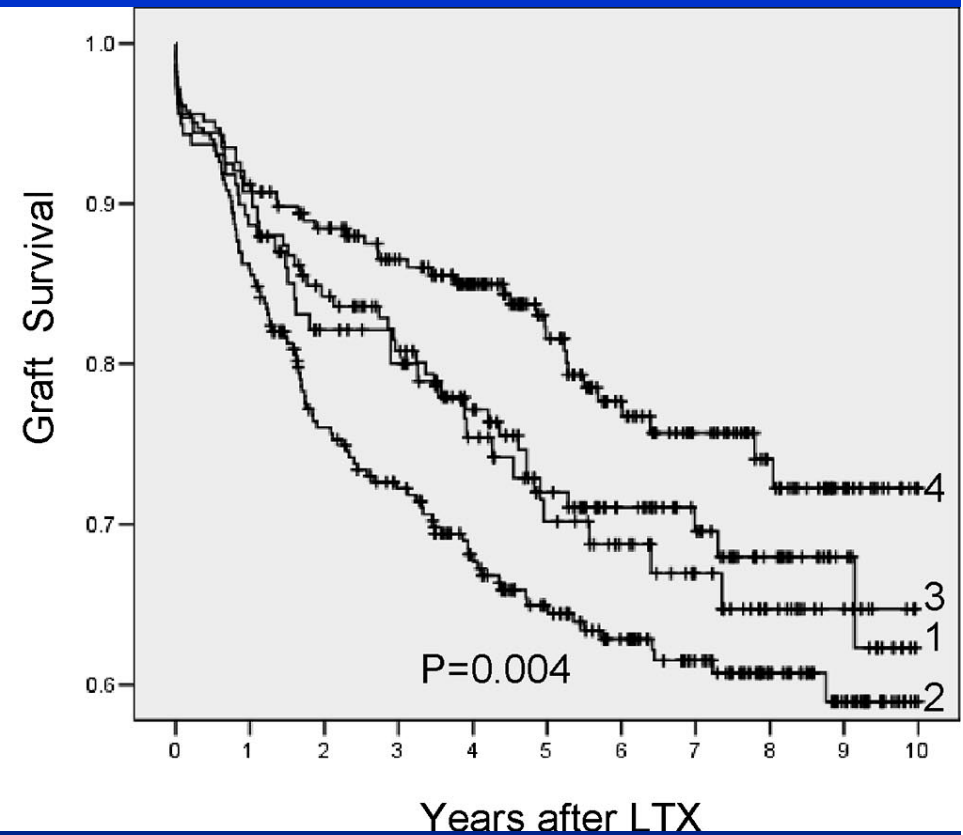
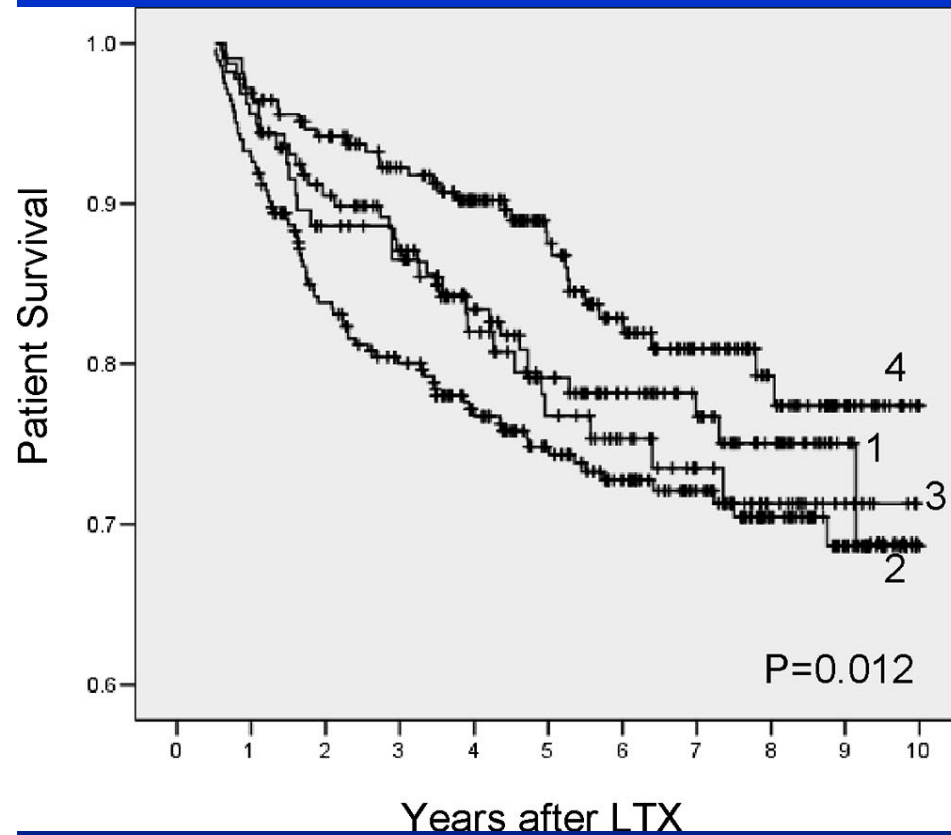
Survival or event-history

EXAMPLE

Patient and Graft Survival After Liver Transplantation: Transplantation, 82,12, 2006

- Chart review (1996- 2004) to evaluate the incidence and possible effect on patient and graft survival of new-onset diabetes mellitus (NODM) after liver transplantation (LTX).

- Patient and graft survival compared using Kaplan-Meier methodology of 4 groups
 - 1) preLTX diabetes mellitus (DM) (n=159)
 - 2) NODM sustained >6 months (n=284)
 - 3) temp NODM 1-<6 months (n=108)
 - 4) no DM either pre- or postLTX (n=227)



Patient survival

Graft survival

- 1) preLTX diabetes mellitus (DM)
- 2) NODM sustained >6 months
- 3) temp NODM 1-<6 months
- 4) no DM either pre- or postLTX

Features of survival data

- **Time to event**
 - **death**
 - **diagnosis/ treatment**
 - **remission/ outcome success**
- **Unlikely to be normally distributed**
- **'Censored' subjects**

Survival analysis

Concerned with studying time between entry to study and a subsequent event

“Whether and When”

Cox proportional hazards model

- Cox regression

- Enables the difference between event time of groups of subjects, while allowing for other factors
- The outcome is the 'hazard' the probability of experiencing the event, given that they have survived up to that time
- Represented as hazard ratios – the ratio of hazard functions that correspond to one unit difference in the predictor

EXAMPLE

Drug adherence – Lipid Lowering

What factors predict stopping lipid lowering drugs

- **Age**
- **Education**
- **Social Class**
- **Smoking**
- **Number of other medications**
- **Adverse events**
- **Depression**
- **Biomarkers and Genetics?**

Thank you