Computing relative survival &

Estimating net survival
What are the routinely use methods doing?
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Survival Measures according to the NCI

http://srab.cancer.gov/survival/measures.html

- The table suggests that there are two methods of estimation of the *net* and *crude* measure
- •The distinction is whether or not a cause of death has been assigned to each deceased patient and was known to the investigator.
- There is little discussion on what these *ad-hoc* calculations are estimating

Neasure
Net Crude

Page Cause of death
Cause specific Surrival
Crude probability of death using cause of death information

Relative survival
Crude probability of death using expected survival
expected survival
Survival
Survival
Survival
Survival
Survival

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The widely discussed questions

- Cause specific survival
 - What is an objective definition of the cause of death?
 - Will two different observers assign the same cause of death to a given deceased patient? If not, what about survival comparability between region, countries, etc...
- · Relative survival
 - How to define a similar group of patients free of the disease?
- How to calculate the expected survival?
- It is widely believed that the two methods are estimating the "net survival"

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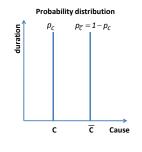
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Crude Risk, relative survival, net survival What do they mean?

- The first and third concepts are usually defined in the framework of the competing risk theory.
- The second concept has never been clearly defined. Loosely speaking its purpose is to compare the observed survival to the survival which would have been observed in the absence of disease, the "expected survival".
- While the "expected survival" of a person is relatively easy to define, it is less simple to compare observed and expected survival of a group of subjects having very different expectation of remaining lifetime

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The competing risk framework



- · A patient may die
 - From his/her disease
 - From any other cause
- A bi-variate random description:
 - (C,T):

lines

- C cause of death, T survival duration
- The probability is distributed on two vertical

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The death risks

• Risk of dying from one of two causes

$$R(t) = P(T \le t) = P(C = c, T \le t) + P(C = \overline{c}, T \le t)$$

 $= R_C(t) + R_{\overline{C}}(t)$

- *R(t)* is a genuine probability distribution, i.e.: a function increasing from *0 to 1*
- On the contrary $R_c(t)$ and $R_{\overline{c}}(t)$ are not: their respective maximum are p_c and 1- p_c
- R_c(t) and R_c̄(t) are called the crude risk of death of the given cause

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The crude survival

- It is defined by: $S_c(t) = P(C=c, T>t)$
- The relation $P(C=c, T \le t) + P(C=c, T > t) = P(C=c)$ shows: $R_c(t) + S_c(t) = p_c$
- And also:
- $S(t) = 1 R(t) = S_C(t) + S_{\overline{C}}(t)$
- In words: the *survival probability* is the sum of the *crude survival probability*
- Note that the survival distribution for the cause "c" is not S_c(t) but

$$P(T \le t \mid C = c) = S_c(t)/p_c$$

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The mortality rate for the cause "c"

 It is the probability that the subject dies from cause "c" on date t given that he is still under observation at this date:

$$\lambda_c(t)\Delta t = P(C = c, t < T < t + \Delta t \mid T > t)$$

$$\Rightarrow \lambda_c(t) = \frac{R_c(t)}{S(t)}$$

$$\Rightarrow R_c(t) = \int_0^t S(u) \lambda_c(u) du$$

 A very intuitive relation between crude risk of dying from cause "c" and the survival probability

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The net survival probability

• From the previous results:

$$\lambda_{\mathcal{C}}(t) + \lambda_{\overline{\mathcal{C}}}(t) = \frac{R_{\mathcal{C}}^{'}(t)}{S(t)} + \frac{R_{\overline{\mathcal{C}}}^{'}(t)}{S(t)} = \frac{R'(t)}{S(t)} = \lambda(t) \left(= -\frac{S'(t)}{S(t)} \right)$$

• Therefore *S(t)* may be written:

$$S(t) = \exp[-\int_0^t \lambda(u)du] = \exp[-\int_0^t \lambda_c(u)du] \times \exp[-\int_0^t \lambda_{\overline{c}}(u)du]$$
$$= \widetilde{S}_c(t) \times \widetilde{S}_{\overline{c}}(t)$$

i.e.: as the product of net survival probabilities, which are defined by cause specific mortality rates acting alone (i.e.: in the absence of the other)

Why net survival?

- The net survival is an imaginary survival function,
 - Meaning that it is not observable and will never happen, but
- it is what would be observed in the fictitious situation
 - the patients would only be subject to the mortality from the disease of interest and
 - the mortality rate of this disease would remain the same as it was in the context of competing risk, which is the only situation which can be observed
- Its importance stems from its independence from other causes of death and its ability to serve for comparison

The relative survival and the estimation of net survival

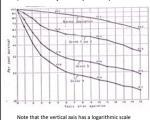
- If we supposed that the probability of surviving "other causes" of death is given by the life table, i.e.: $\widetilde{S}_{\overline{C}}(t) = S_{P}(t)$
- The relative survival, $S_R(t) = \frac{S(t)}{S_P(t)}$ seems to be equal to the net survival. (c.f.: slide #9)
- Therefore it was thought that estimating S(t) with the usual methods (Kaplan-Meier, actuarial...) would provide an estimate of the net survival...
- We shall see below that the relative survival is an estimator of the net survival in particular situations only.

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An historical publication

· Cancer of the stomach (2682 cases of the mayo clinics)



 Joseph BERKSON & Robert GAGE (JASA 1952)

The idea of the relative survival was to compare the "normal population" survival to the observed

For these authors, the main measure was the death rates associated with the observed and expected survival curves

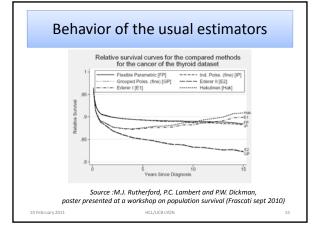
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Two main approaches

- The relative survival
 - $-S_{\rm R}(t)$ = $S_{\rm O}(t)/S_{\rm P}(t)$ seen initially as the percentage of the "normal" survival
 - ⇒ EDERER I or HAKULINEN
- · The additive model for the death rates
 - $\lambda_{Oi}(t) = \lambda_{Pi}(t) + \lambda_{C}(t)$
 - ⇒EDERER II, Cause-specific, Maximum likelihood
- If λ_c(t) is the same for all subjects in the group, the two approaches are equivalent and estimate the net survival.
 If it is not the case, they may be very different

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The population net survival

— When the death rate from the disease is specific to each patient (i indexes $\lambda_{\rm C}$):

$$\lambda_{Oi}(t) = \lambda_{Ci}(t) + \lambda_{\overline{C}i}(t)$$

- The net survival (non "observable") of the *i*th subject

$$S_{Ci}(t) = \exp(-\int_0^t \lambda_{Ci}(t)dt)$$

- The net survival of the population (N subjects)

$$S_C(t) = \frac{1}{N} \sum_{i=1}^{N} S_{Ci}(t)$$

- The net *sub-hazard* of the population (what we wish to know): $\sum_{i} S_{ci}(t) \lambda_{ci}(t)$

 $\lambda_{C_0}(t) = \frac{\sum_i S_{Ci}(t) \lambda_{Ci}(t)}{\sum_i S_{Ci}(t)}$

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The population value in the cause specific setting

- If a cause of death is assigned to each subject and we know it,
 - We observe the bi-variate distribution [T, CA], with the hazard

$$\lambda_{C_1}(t)dt = \Pr(T < t + dt, CA = C \mid T > t) = \frac{\sum_i S_{Oi}(t)\lambda_{Ci}(t)dt}{\sum_i S_{Oi}(t)}$$

– This differs from $\lambda_{C_0}(t)$ and is clearly the hazard associated to the cause-specific survival, it may be written:

$$\lambda_{C_1}(t) = \lambda_O(t) - \frac{\sum_i S_{Oi}(t) \lambda_{\overline{C}i}(t)}{\sum_i S_{Oi}(t)}$$

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The population value in the cause specific setting, when the cause of death is unknown

• The principle of the relative survival is to consider the death rate of other causes as known and given by the life table of the population in which the patients were diagnosed: $\lambda_{\overline{C}i}(t) = \lambda_{Pi}(t)$

$$\lambda_{C_2}(t) = \lambda_O(t) - \frac{\sum_i S_{Oi}(t) \lambda_{Pi}(t)}{\sum_i S_{Oi}(t)}$$

- $\lambda_{C_2}(t) = \lambda_O(t) \frac{\sum_i S_{Oi}(t) \lambda_{Pi}(t)}{\sum_i S_{Oi}(t)}$ The second term is the average of life table rates for those who are still alive at time t.
- This is clearly the *population value* estimated by the EDERER II method

The population value in the relative survival setting

- The population value of the relative survival is

$$S_R(t) = \frac{\sum_i S_{Oi}(t)}{\sum_i S_{Pi}(t)}$$

- Where the sum is over the N subjects of the patient population
- denoting $S_{Ri}(t) = S_{Oi}(t)/S_{Pi}(t)$ the "individual" relative survival the relative survival is written

$$S_R(t) = \frac{\sum_i S_{Pi}(t) \times S_{Ri}(t)}{\sum_i S_{Pi}(t)}$$

- · If the subjects have the same expected survival or if the subjects have the same relative survival
 - The relative survival is the average of the individual relative survival
 - Otherwise the relative survival is closer to that of the patients who have the best "population survival"
- Even if $S_R(t)$ is not necessarily a survival distribution the derivative of $-log(S_R(t))$ is still of interest to evaluate the dynamic of the relative survival, it is given by:

$$\lambda_R(t) = -\frac{S_R'(t)}{S_R(t)} = \lambda_O(t) - \frac{\sum_i S_{Pi}(t) \lambda_{Pi}(t)}{\sum_i S_{Pi}(t)}$$

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Population value

$$\lambda_{C_0}(t) = \frac{\sum_i S_{Ci}(t) \lambda_{Ci}(t)}{\sum_i S_{Ci}(t)}$$

$$\lambda_{C_1}(t) = \lambda_O(t) - \frac{\sum_i S_{Oi}(t) \lambda_{\overline{C}i}(t)}{\sum_i S_{Oi}(t)}$$

$$\lambda_{C_2}(t) = \lambda_O(t) - \frac{\sum_i S_{Oi}(t) \lambda_{Pi}(t)}{\sum_i S_{Oi}(t)}$$

$$\lambda_R(t) = \lambda_O(t) - \frac{\sum_i S_{Pi}(t) \lambda_{Pi}(t)}{\sum_i S_{Pi}(t)}$$

$$\lambda_R(t) = \lambda_O(t) - \frac{\sum_i S_{Pi}(t) \lambda_{Pi}(t)}{\sum_i S_{Pi}(t)}$$

Where are we?

Estimators • ???

"cause-specific"

EDERER II

EDERER I or HAKULINEN

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The construction of the estimators

- The population values of the death rates of interest are similarly defined. They differ by the quantity which is subtracted to the observable death rate
- Their estimators can be constructed in the same way using the counting process toolkit
 - For example for $\lambda_{\mathcal{C}_{\mathcal{I}}}$ we get the estimator:

$$\hat{\Lambda}_{C_1}(t) = \int_0^t \frac{dN(u)}{Y(u)} - \int_0^t \frac{\sum_{i=1}^n Y_i(u) d\Lambda_{Pi}}{Y(u)}$$

 That is the Nelson estimate minus the cumulative average population death rate of those still at risk at each death time, in other word the EDERER II estimate

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Do Relative and net survival agree?

- As estimator of net survival, all the above estimators are biased!
- This is fairly well understood in the cause specific setting, since the censoring mechanism (other causes of death) is "informative": the cause of interest and the other causes share usually the influence of the same covariates.
- The biases of EDERER II and of the cause specific estimate are identical if the relation $\lambda_{\overline{C}i}(t) = \lambda_{Pi}(t)$ is true.
- It is possible to correct these two estimates using multivariate models adjusting for "demographic" covariates

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An extreme example

- The following example is intentionally extreme and will not be met in practice.
- Its purpose is to separate clearly relative and net survival
- It is based on competing exponentials and a mixture of two groups with different rates and a positive association between cancer and population rates

- Group 1

 $\lambda_c = 0.01 \ \lambda_p = 0.05$

- Group 2

 $\lambda_c = 0.4$ $\lambda_p = 0.3$

- No censoring

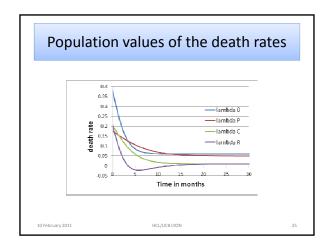
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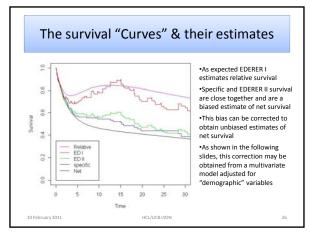
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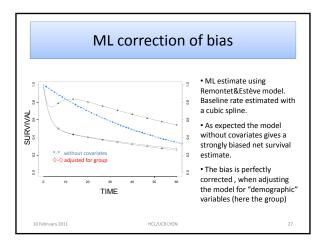
The example set-up

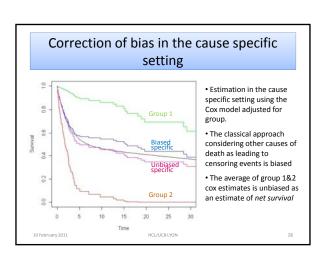
- Since S_o and S_P are known in each group it is possible to calculate the true population values (relative survival ,net survival, and the associated rates)
- We calculated EDERER I & II and specific survival estimates for one simulation of this model
- Since there is no censoring HAKULINEN and EDERER I estimates are identical
- At "long term" follow-up only are group 1 subjects surviving: relative and net death rates converge both to group1 net death rate 0.01

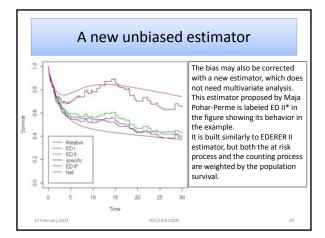
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The new estimator in detail (I)

- The original idea is due to Robins and Satten*: if the
 censoring process shares covariates with the survival process,
 but is conditionally independent of the survival process, the
 survival can be estimated with the usual approach, after a
 simple modification of the Counting and at Risk processes.
- The modification is a weighting of the two processes by the conditional probability of surviving the censoring process given the covariates (or at least something similar in case of time-dependant covariates):

*SATTEN et al. Statistics & probability letters 54 (2001) 397-403

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The new estimator in detail (II)

- In the general case the weight has to be estimated. In the case of *relative* survival the weight is known and the weighting is trivial.
- It provides an unbiased estimator for the cause specific estimator if the survival from other causes of deaths are given by the life table.
- And a new estimator for the net survival, when the cause of death is not available, by weighting the EDERER II estimate.

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The new estimator in detail (III)

- Define the two weighted processes
 - $-N_i^*(t) = N_i(t)/S_{Pi}(t)$ et $Y_i^*(t) = Y_i(t)/S_{Pi}(t)$
 - $-N^*(t)=\sum N_i^*(t) ; Y^*(t)=\sum Y_i^*(t)$
- Calculate the weighted estimate in introducing this weighted process in the formula of the EDERER II estimator.

$$\hat{\Lambda}(t) = \int_0^t \frac{dN^*(u)}{Y^*(u)} - \int_0^t \frac{\sum_{i=1}^n Y_i^*(u) \lambda_{Pi} dt}{Y^*(u)}$$

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The new estimator intuitively

- The composition of the "at risk" set {Y_i(t), i=1..N} is more and more "biased" as time elapses, since those subjects with low values of S_p(t) tend to disappear first from the *risk set* and had also a greater chance to die from their disease.
- To make it unbiased each Y_i(t) is increased in such a way
 that , the smaller the probability of remaining at risk at
 time t (S_{Pi}(t)), the larger the increase (*1/ S_{Pi}(t)).
- Obviously we do the same with the step of the counting process at time t

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Systematic evaluation of the estimators (Danieli *et al.*)

- A simulation study was conducted in Lyon to assess the performance of the estimators.
- We report below the result of two scenarii:
 - The net survival does not depend on the demographic variable (homogeneous)
 - The net survival depend only on age through a proportional hazard model with a RR of 1.05 per year of age.
- The age distribution is similar to the observed incidence distribution of most adult cancers
- The sample size is 500

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The estimates in the homogeneous situation

Net survival does not depend on age					
	Bias (Mean estimate-theoretical net survival)				survival)
time net Survival probability (%)	EDI	ED II	Mult. model	Pohar	specific survival
5 29.60	-0.18	-0.17	0.26	-0.13	-0.16
10 14.87	-0.05	-0.13	0.04	0.13	-0.13

With a coverage rate very close to 95% for all of them

⇒ All estimators estimate net survival

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The estimates in the age-dependent situation

Net survival depends on age						
	Bias (Mean estimate-theoretical net survival)				survival)	
time net Survival probability (%)	ED I	ED II	Mult. model	Pohar	specific survival	
5 32.44	3.31	1.21	0.23	-0.05	1.24	
10 20.39	7.04	2.00	0.06	0.19	2.01	

The coverage rate is very poor for ED I (19.8% at 10 years) and not very good for ED II and specific survival (88% at 10 years), while it is good for the two other estimators.

⇒ All estimators except the modeling and Pohar estimator showed a positive bias

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The "real life" situation

- The French cancer registries will publish soon an extension of their survival study, conducted in collaboration with the biostatistic group in LYON
- It was decided to use the Pohar estimator for this updating. A comparison was made with the previous approach.
- We show below the result for the thyroid cancer, which is one site for which the bias is large as shown earlier.

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Thyroid cancer, French registries

5 year survival						
age	Pohar	multivariate model				
group	estimate	age,sex,year	age only	no covariable		
All age	0.95	0.94	0.95	0.97		
15-45	0.99	1.00	1.00	0.99		
45-55	0.99	0.99	0.99	0.99		
55-65	0.96	0.96	0.96	0.96		
65-75	0.87	0.87	0.88	0.88		
75+	0.64	0.63	0.65	0.69		
standardized	91.10	90.90	91.50	92.00		

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Thyroid cancer, French registries

10 year survival					
age	Pohar	multivariate model			
group	estimate	age,sex,year	age only	no covariable	
All age	0.92	0.93	0.93	0.96	
15-45	0.99	0.99	0.99	0.99	
45-55	0.97	0.98	0.98	0.98	
55-65	0.94	0.95	0.95	0.96	
65-75	0.83	0.83	0.84	0.88	
75+	0.49	0.56	0.59	0.69	
standardized	87.50	89.00	89.90	91.80	

⇒Not only is the "all age" survival biased, but also the standardized survival

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Conclusion

- None of the classical estimators estimate the net survival,
- BUT if corrected for their biases, EDERER II and CAUSE-SPECIFIC could do it.
- EDERER I & HAKULINEN estimate relative survival
 - Contrary to net survival, relative survival is influenced by population mortality and is therefore less adequate than net survival for international comparisons.
- In addition net survival of the group being the average of individual net survival the "problem" of lack of consistency of standardized rates does not exist any more.

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