

# Survival analysis with Gaussian processes

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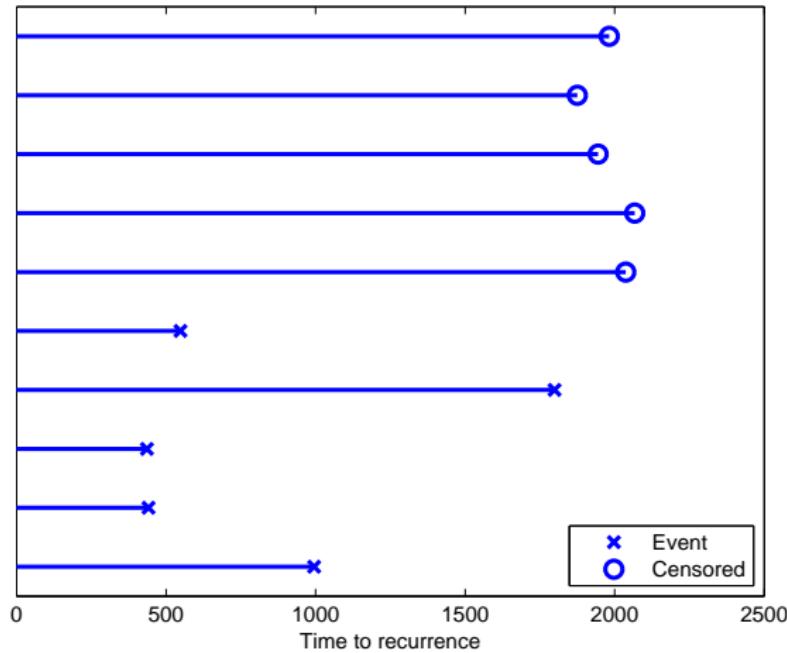
<http://research.cs.aalto.fi/pml/>

- Personalised medicine?
- Survival data
- Gaussian processes
- GIST cancer example 1
  - Cox proportional hazards (Cox-PH)
- GIST cancer example 2
  - Time dependent covariates
- Leukemia example
  - Accelerated failure time (AFT) model

- Gastrointestinal stromal tumor (GIST)
  - 400 patients followed after surgery with 1 or 3 year adjuvant imatinib (medicine taken orally) treatment
  - Old question: is 3 year treatment better than 1 year treatment?
  - New question: how long should a specific patient be treated?

# Survival data

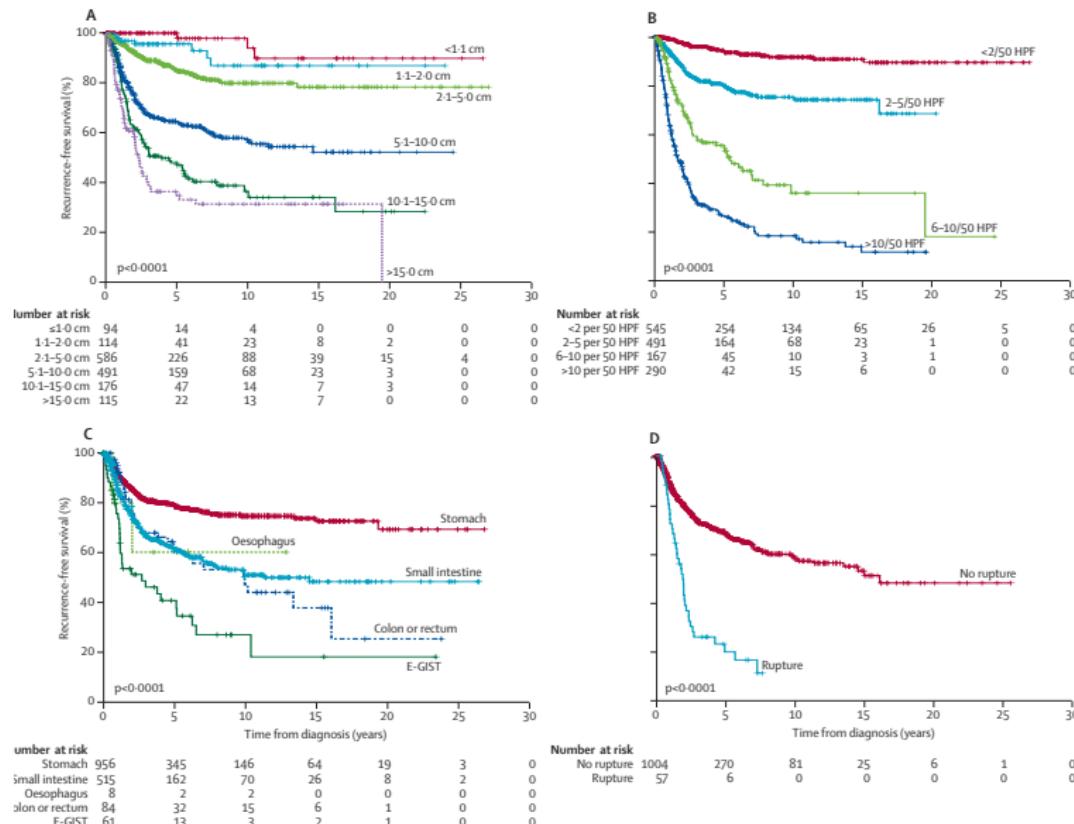
Survival data with time to event



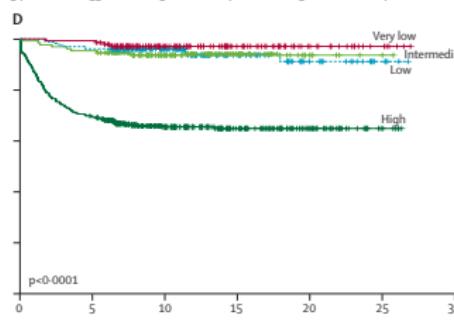
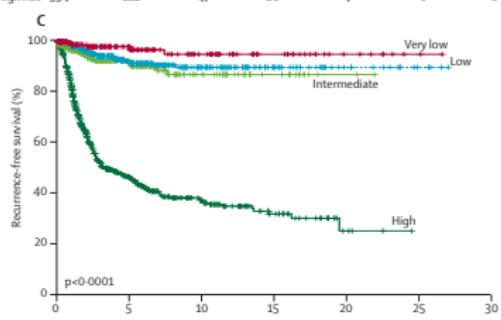
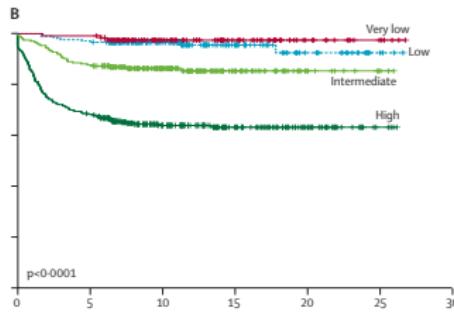
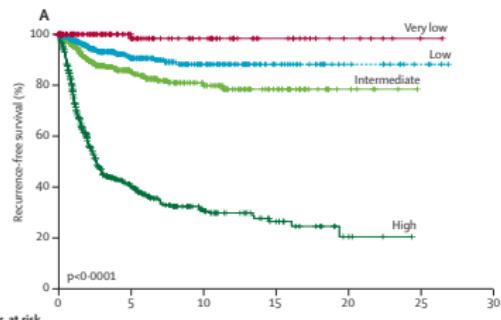
# GIST cancer example 1

- Gastrointestinal stromal tumor (GIST)
- 2560 patients followed after surgery (+ 920 validation set)
- Various predictors available

# GIST - Kaplan Meier plots



# GIST - Kaplan Meier plots



E

F

# Cox proportional hazards (PH) model

- Hazard (event rate at time  $t$  conditional on  $T > t$ )

$$h(t) = \frac{f(t)}{1 - F(t)}$$

- Proportional hazard model

$$h_i(t) = h_0(t) \exp(\mathbf{x}_i^T \boldsymbol{\beta}),$$

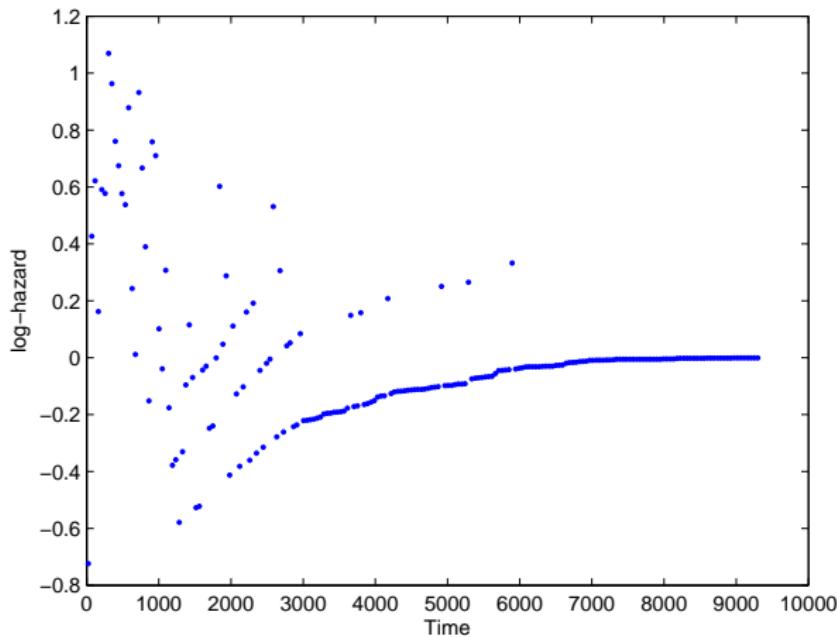
where  $h_0(t)$  is baseline hazard in time

- shape of  $h_i(t)$  is determined by  $h_0(t)$  and covariates  
effect only the level of the hazard

- In original Cox PH model, no model for the baseline hazard in time
  - although Cox wrote that such model would improve the hazard estimate

# GIST example 1

Baseline log hazard without smoothing



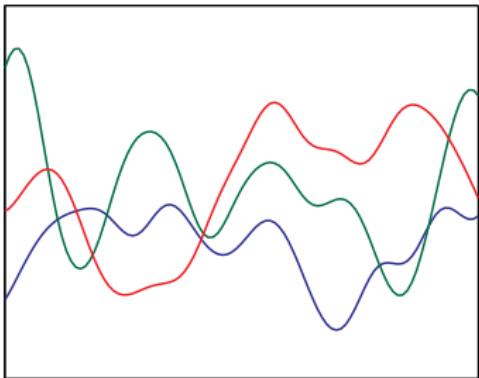
# Cox proportional hazards (PH) model

- Alternative to this?

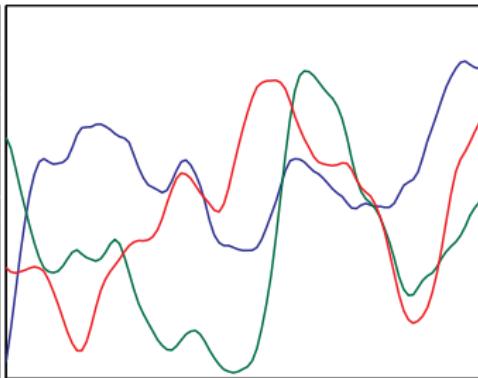
$$h_i(t) = h_0(t) \exp(\mathbf{x}_i^T \boldsymbol{\beta})$$

# Gaussian process as prior on function space

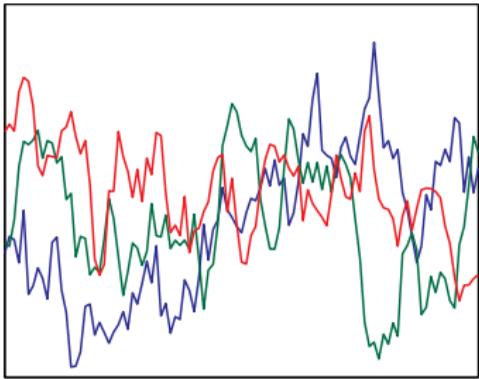
Squared exponential



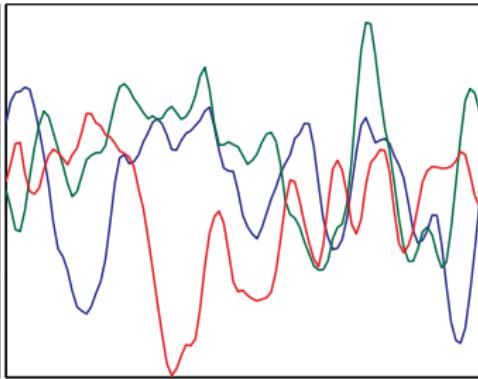
Matern(5/2)



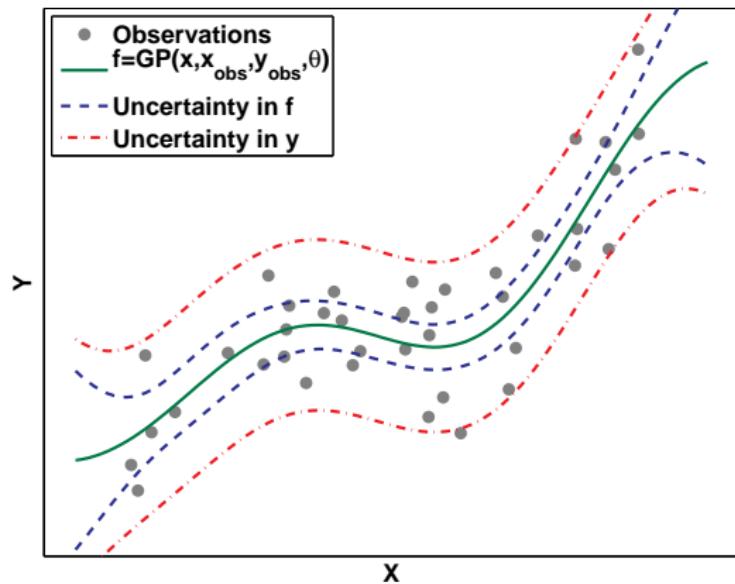
Exponential



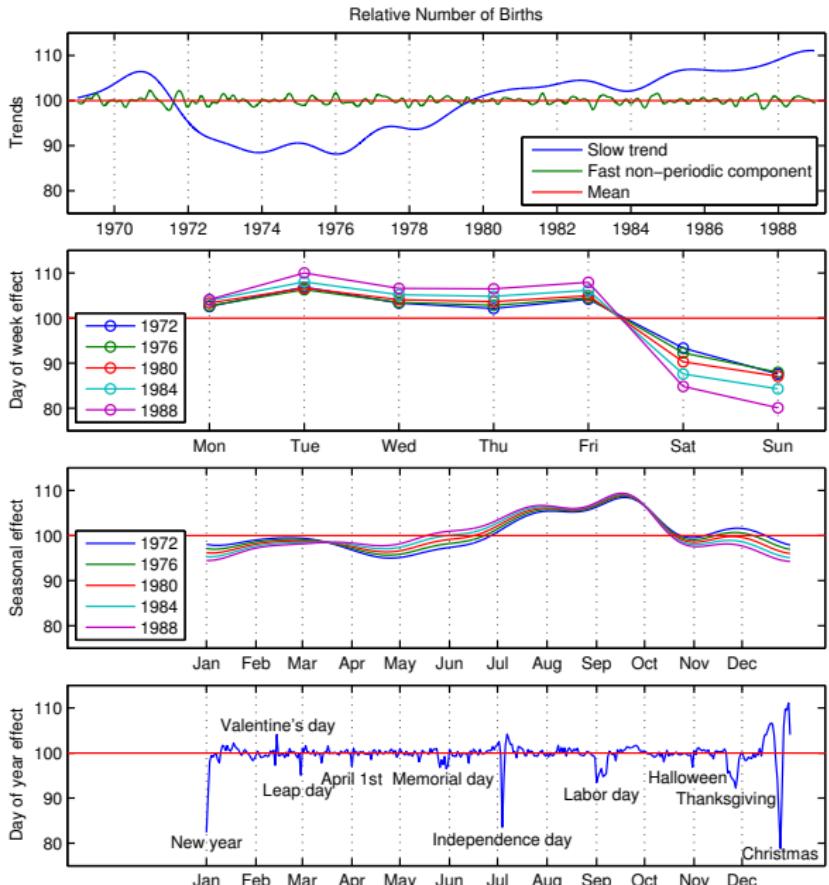
Two lengthscales



# Posterior Gaussian process given data



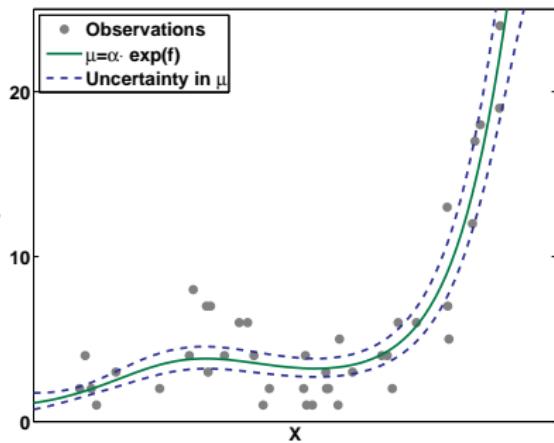
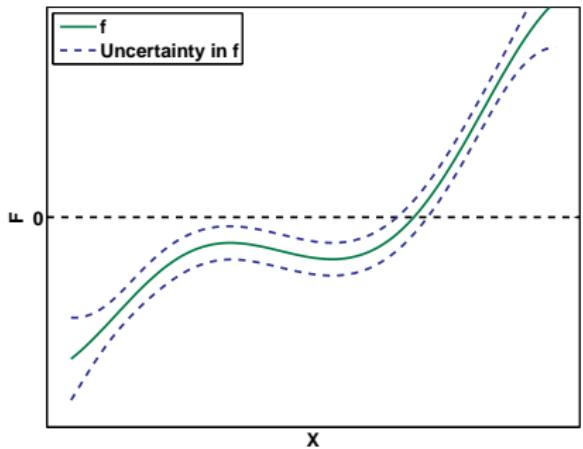
# Flexibility of Gaussian process



See details in Bayesian  
Data Analysis, 3rd ed

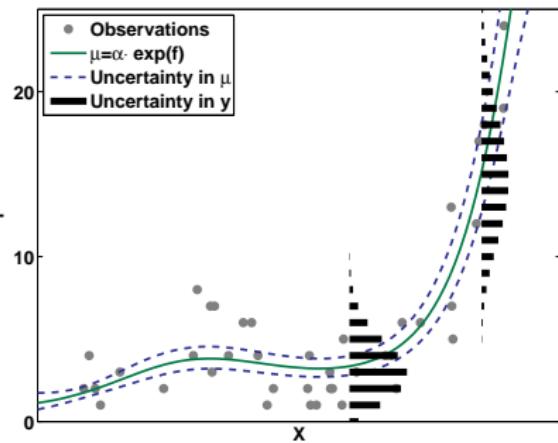
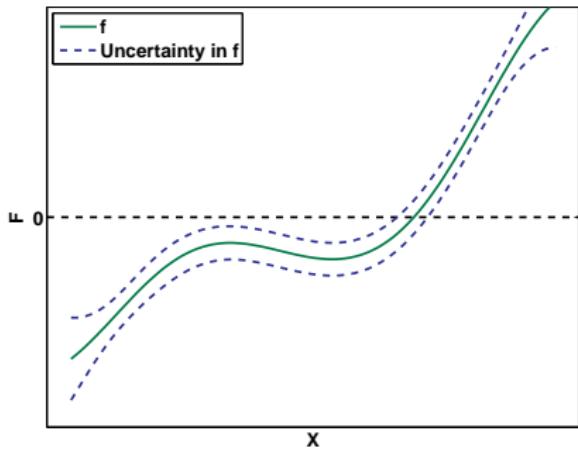
# Non-Gaussian observation models

- With a latent variable approach
- E.g. count observations  $y \sim \text{Poisson}(\alpha \exp(f))$



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- GP Cox proportional hazard model

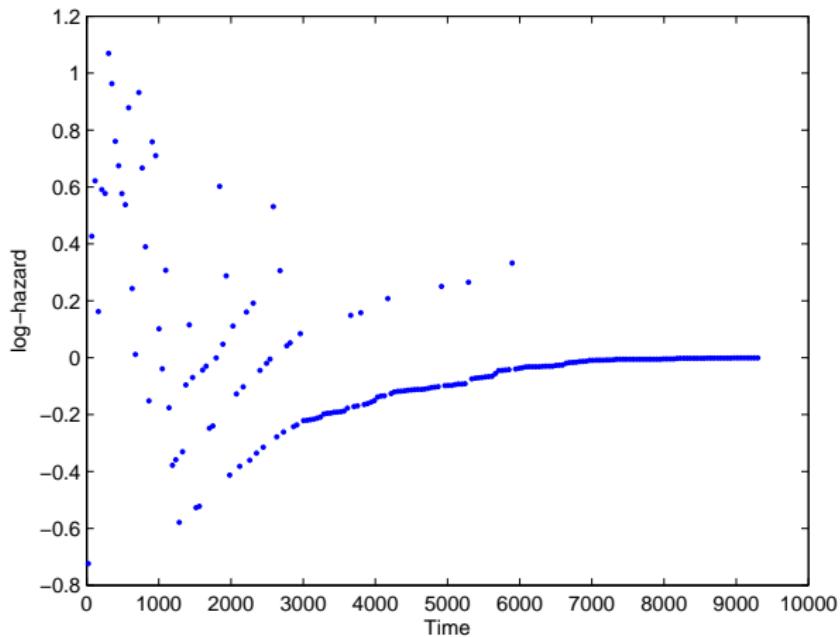
$$h_i(t) = \exp(\log(h_0(t)) + \eta_i(\mathbf{x}_i)),$$

where  $\log(h_0(t))$  and  $\eta(\mathbf{x})$  are modeled with GP

- Assuming a piecewise log-constant baseline hazard by partitioning the time axis into  $K$  intervals

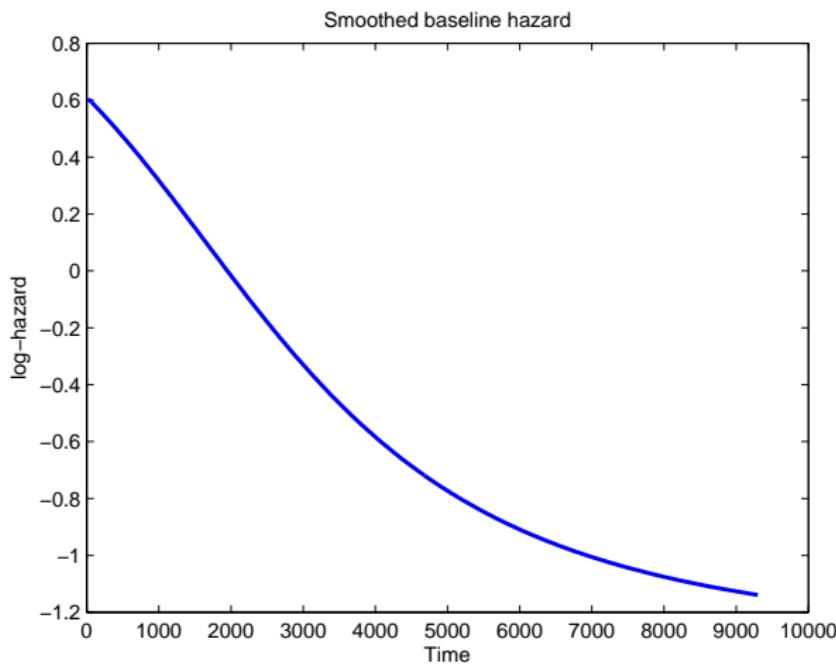
# GIST example 1

Baseline log hazard without smoothing



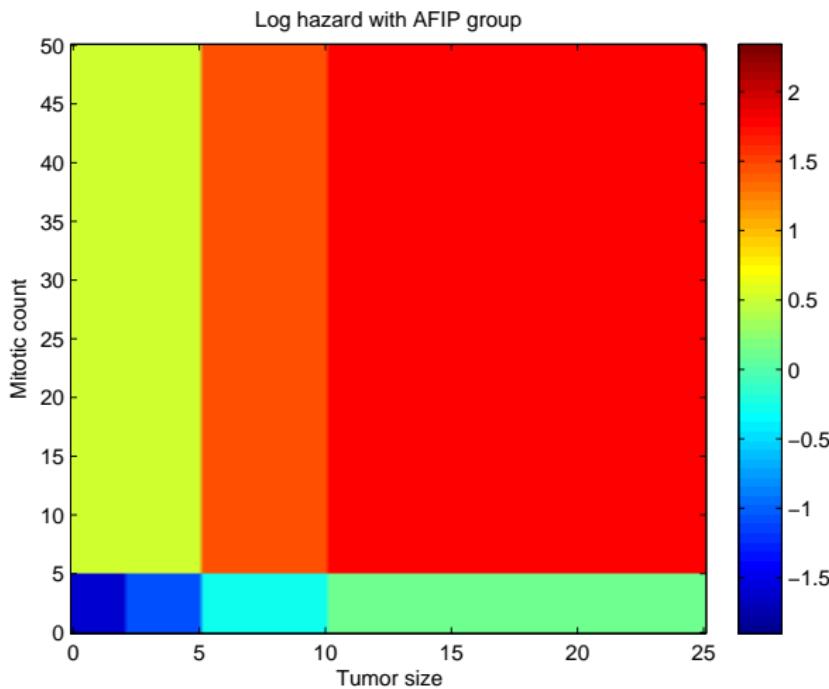
# GIST example 1

## Baseline log hazard with GP



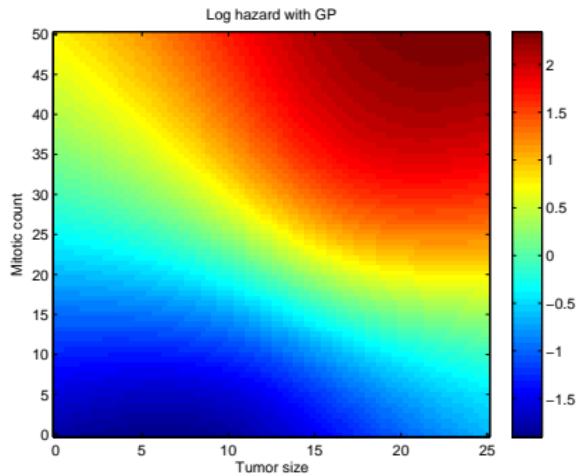
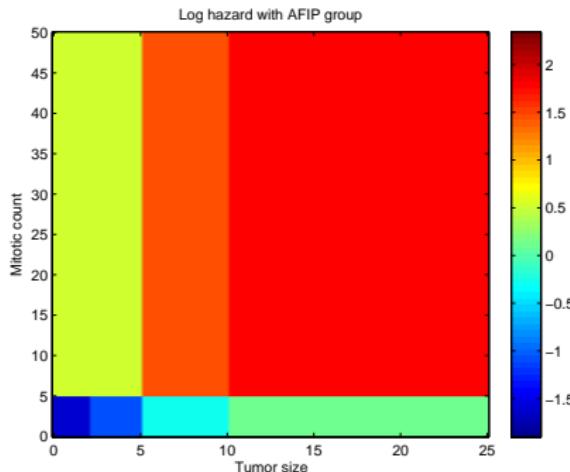
# GIST example 1

Previously used AFIP risk categorization



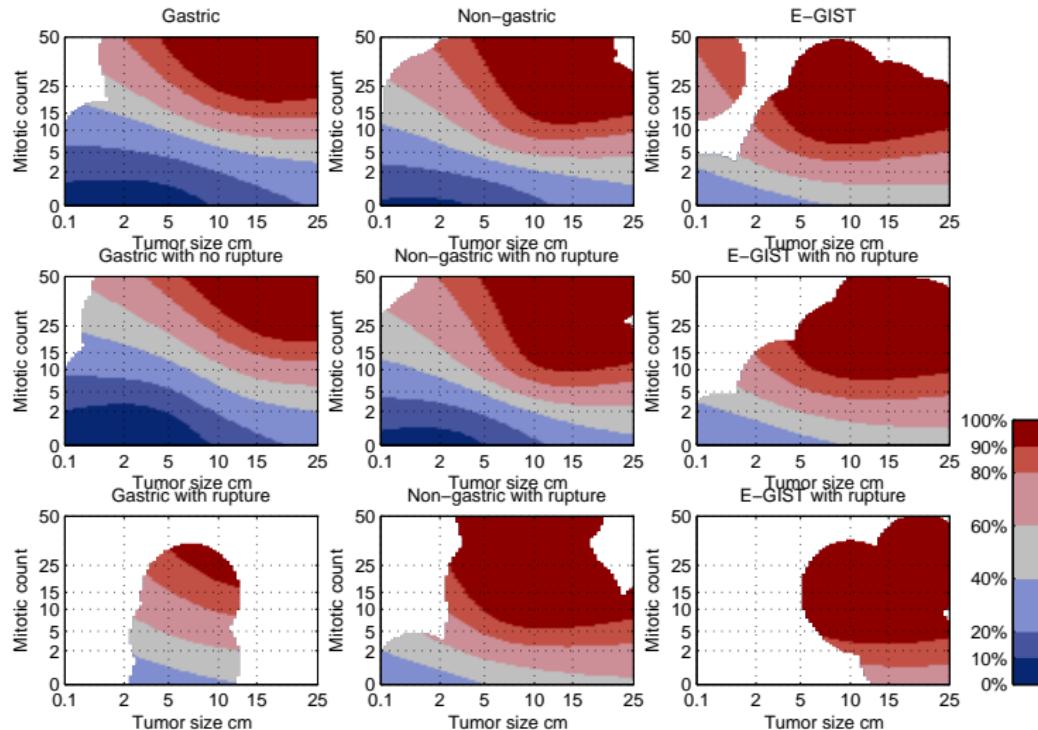
# GIST example 1

Previously used AFIP risk categorization, and prediction with GP

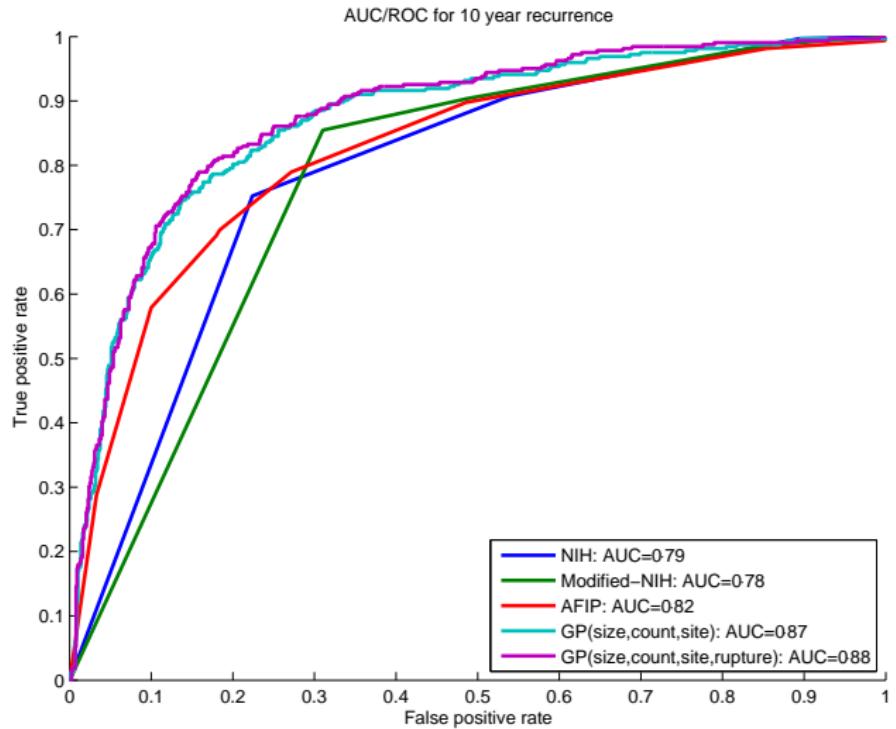


# GIST example 1

## Probability of recurrence with GP



# GIST example 1



- Joensuu, H., Vehtari, A., Riihimäki, J., Nishida, T., Steigen, S.E., Brabec, P., Plank, L., Nilsson, B., Cirilli, C., Braconi, C., Bordoni, A., Magnusson, M.K., Linke, Z., Sufliarsky, J., Massimo, F., Jonasson, J.G., Dei Tos, A.P. and Rutkowski, P. (2012). Risk of gastrointestinal stromal tumour recurrence after surgery: an analysis of pooled population-based cohorts. *The Lancet Oncology*, 13(3):265-274.

## GIST cancer example 2

- Gastrointestinal stromal tumor (GIST)
- 400 patients followed after surgery with 1 or 3 year adjuvant imatinib (medicine taken orally) treatment
- Covariates
  - the time from the date of randomisation
  - the time from the date of completion of adjuvant imatinib (considered to be 0 before completion of adjuvant therapy)
  - an indicator variable for adjuvant imatinib (considered to be 1 before completion of adjuvant imatinib, and 0 after its completion)
  - tumour mitotic count
  - tumour location (gastric vs. non-gastric)

## GIST cancer example 2

- Interval censored data
  - time from the last recurrent free CT scan to next varies
  - CT scanning times are clustered because the scanning intervals are approximately multiples of 3 months
- Impute unknown recurrence times via sampling

- GP non-proportional hazard model

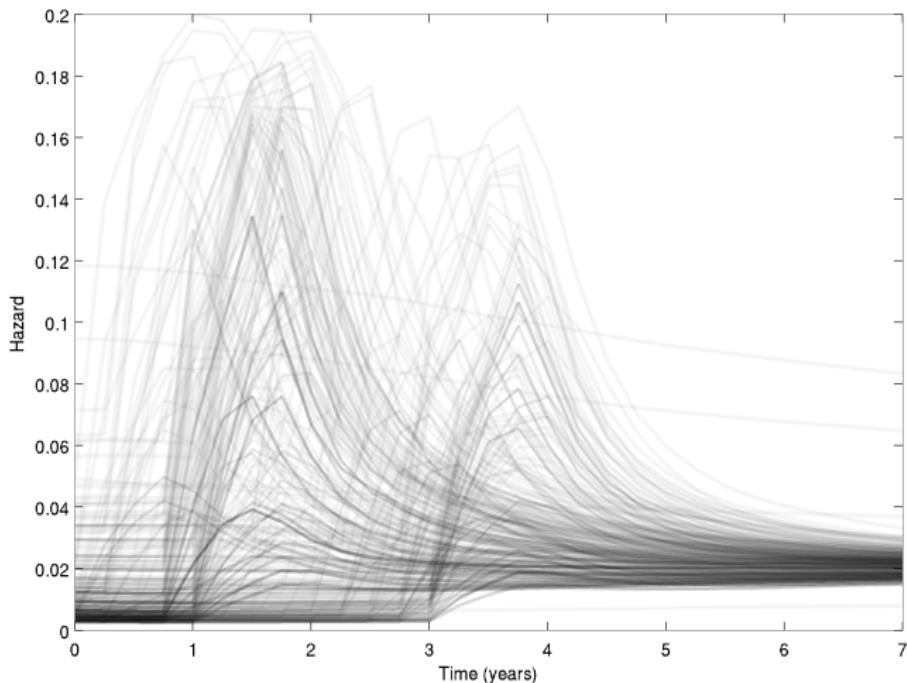
$$h_i(t) = \exp(\eta_i(t, \mathbf{x}_i)),$$

where  $\eta(t, \mathbf{x})$  is modeled with GP

- Assuming a piecewise log-constant baseline hazard
  - we can change to a simpler model...

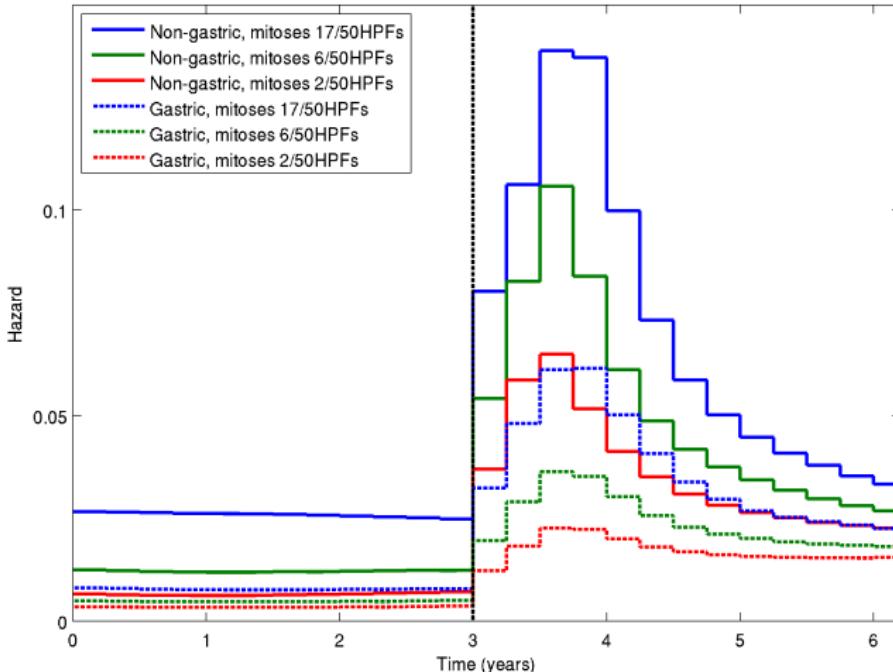
- Assuming discretised time
  - number of events and susceptible people on given time interval with common covariate values
  - observations can be modelled with Poisson/Binomial/Bernoulli model with Gaussian process on location parameter

# GIST cancer example 2



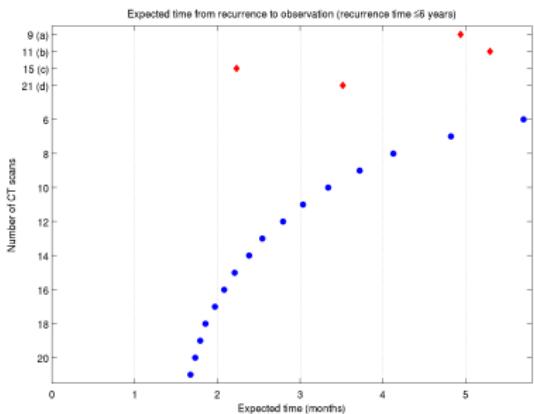
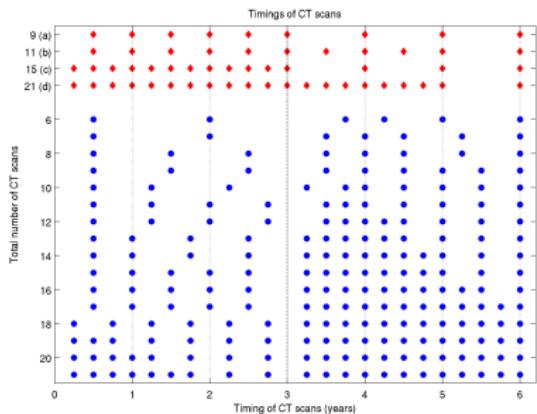
Individual patient hazard functions for GIST recurrence

# GIST cancer example 2



The hazard of GIST recurrence for six prototype patients

# GIST cancer example 2



Left: Timing of CT scans according to a common recommendation and optimised ones.

Right: The expected times to detect the recurrence.

## GIST cancer example 2

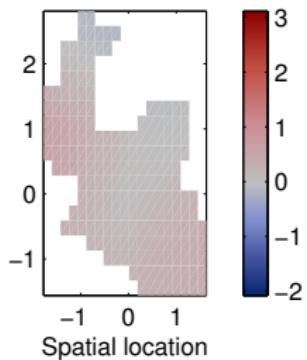
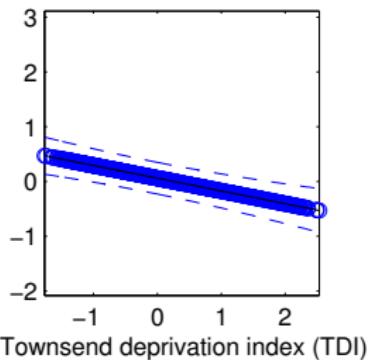
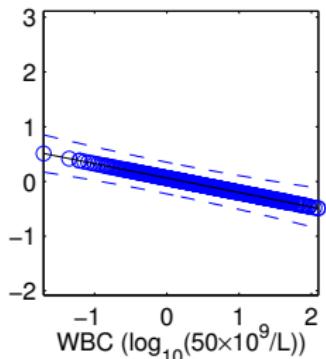
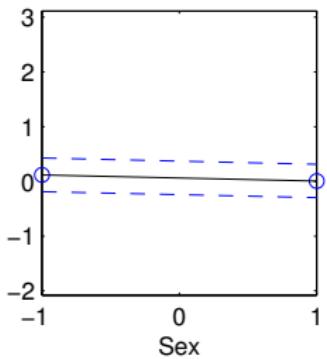
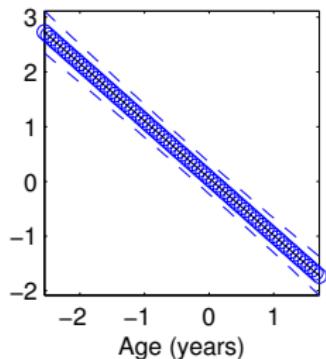
- The numbers of CT scans can be reduced approximately 30% during the first six years of follow-up since initiation of treatment compared with the current follow-up recommendations without jeopardizing early detection of recurrence
- The method may be applicable to the follow-up of other types of human cancer to facilitate early detection of recurrence or to reduce the radiation hazards associated with CT scans
- Joensuu, H., Reichardt, P., Eriksson, M., Hall, K.S., Vehtari, A. (2013). Gastrointestinal Stromal Tumor: A Method for Optimizing the Timing of CT Scans in the Follow-up of Cancer Patients. *Radiology*, In press.

- Logarithm of the survival time
  - parametric observation model
  - Weibull, log-Gaussian, log-logistic, ...
  - censored observations with cdfs

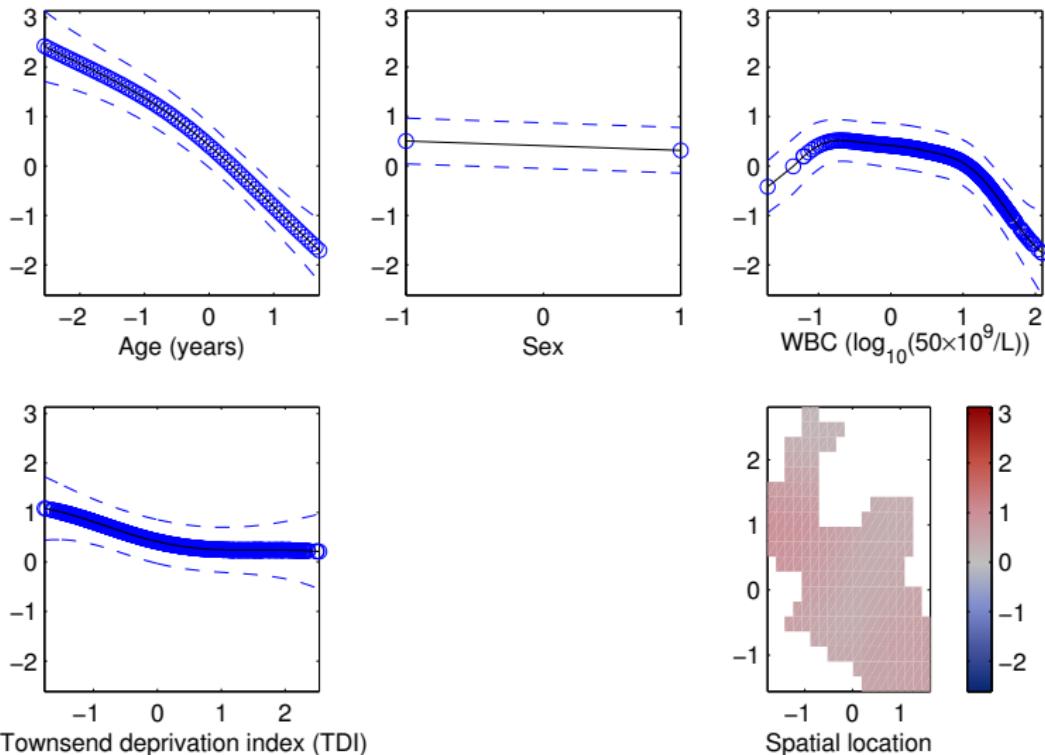
# Leukemia survival times

- 1043 cases of acute myeloid leukemia in adults
  - recorded between 1982 and 1998 in the North West Leukemia Register in the United Kingdom

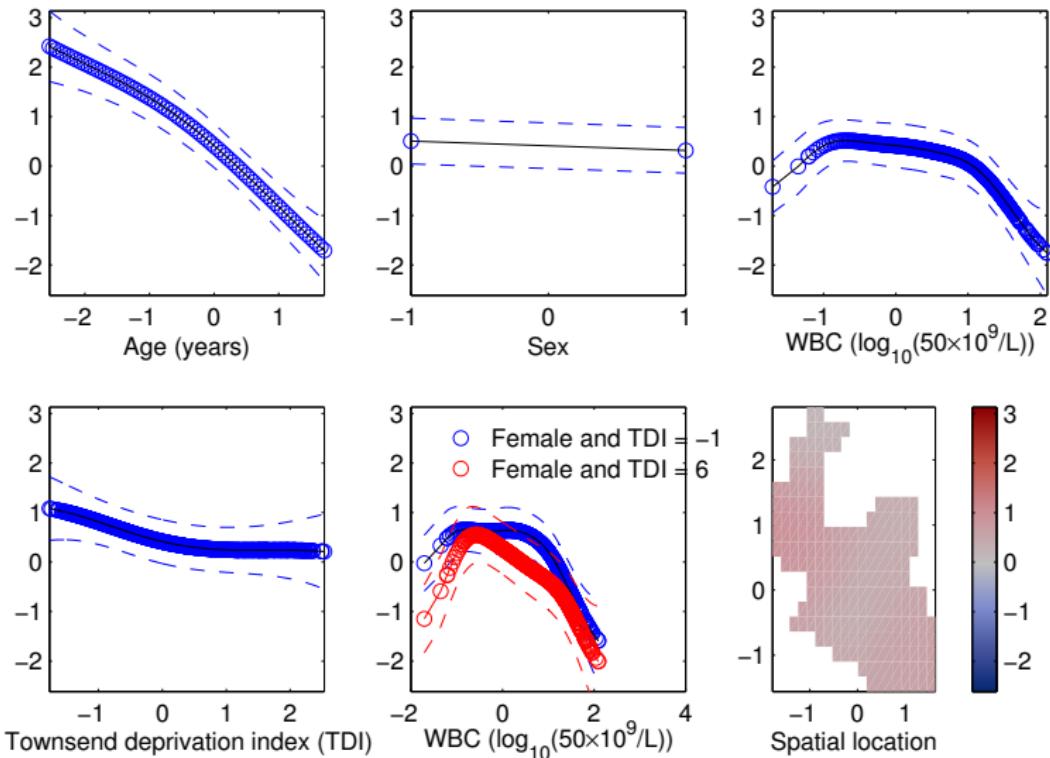
# Leukemia survival times



# Leukemia survival times



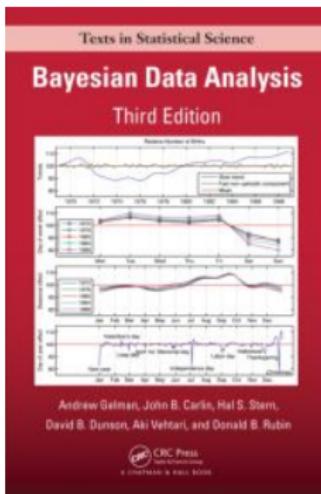
# Leukemia survival times



# Benefits of GP in AFT models

- Nonlinear effects and implicit interactions (also for more than 2 variables at time)

# Leukemia survival times



Andrew Gelman, John B. Carlin, Hal S. Stern, David B. Dunson, Aki Vehtari and Donald B. Rubin (2013). **Bayesian Data Analysis**, Third Edition. Chapman and Hall/CRC.

- Gaussian process latent variable model (GP-LVM)
  - work in progress
  - joint density model for the data
  - missing data imputation allowing non-Gaussian observation models and non-linear mappings between variables
  - uncertainty in the imputations can be propagated using distributional approximation (instead of sampling)

# Computational issues

- $n$ ?
  - in parametric observation models  $n$  is the number of patients
  - in non-parametric observation models the effective  $n$  is the number of unique patients times the time intervals with susceptible patients
- Computational complexity
  - simple approach  $O(n^3)$
  - approximations  $O(nm^2)$ , where  $m \ll n$ , may limit the flexibility of the models
  - non-Gaussianity adds extra computation (MCMC, Laplace, EP, VB)

Code for the examples in this presentation available in GPstuff toolbox for Matlab/Octave (with RccpOctave for R)

Jarno Vanhatalo, Jaakko Riihimäki, Jouni Hartikainen, Pasi Jylänki, Ville Tolvanen and Aki Vehtari (2013). GPstuff: Bayesian Modeling with Gaussian Processes. In Journal of Machine Learning Research, 14(Apr):1175-1179.

<http://research.cs.aalto.fi/pml/software/gpstuff/>

Some code available soon in GPy toolbox for Python (by SheffieldML)

<http://sheffieldml.github.io/GPy/>

Code for Stan in progress (Stan has interfaces in R, Python, Julia, Matlab, Stata)

<http://mc-stan.org/>



- GPs can be used to improve survival models
  - continuous and discrete valued non-linear functions
  - computation feasible already for many data sets
  - various software tools available
- ... but it's not always easy
  - maybe too slow if using simple generic approaches
  - depends on the software which methods have been implemented
- ... but we are working hard to make this easier!