

Point Estimation

- ❑ Definition: A “point estimate” is a one-number summary of data.
- ❑ If you had just one number to summarize the inference from your study.....
- ❑ Examples:
 - Dose finding trials: MTD (maximum tolerable dose)
 - Safety and Efficacy Trials: response rate, median survival
 - Comparative Trials: Odds ratio, hazard ratio

Types of Variables

- ❑ **The point estimate you choose depends on the “nature” of the outcome of interest**
- ❑ Continuous Variables
 - Examples: change in tumor volume or tumor diameter
 - Commonly used point estimates: mean, median
- ❑ Binary Variables
 - Examples: response, progression, > 50% reduction in tumor size
 - Commonly used point estimate: proportion, relative risk, **odds ratio**
- ❑ Time-to-Event (Survival) Variables
 - Examples: time to progression, time to death, time to relapse
 - Commonly used point estimates: median survival, k -year survival, **hazard ratio**
- ❑ Other types of variables: nominal categorical, ordinal categorical

Today

- Point Estimates commonly seen (and misunderstood) in clinical oncology
 - odds ratio
 - risk difference
 - hazard ratio/risk ratio

Point Estimates: Odds Ratios

- “Age, Sex, and Racial Differences in the Use of Standard Adjuvant Therapy for Colorectal Cancer”, Potosky, Harlan, Kaplan, Johnson, Lynch. JCO, vol. 20 (5), March 2002, p. 1192.
- Example: Is gender associated with use of standard adjuvant therapy (SAT) for patients with newly diagnosed stage III colon or stage II/III rectal cancer?
 - 53% of men received SAT*
 - 62% of women received SAT*
- How do we quantify the difference?

* adjusted for other variables

Odds and Odds Ratios

- Odds = $p/(1-p)$
- The odds of a man receiving SAT is $0.53/(1 - 0.53) = 1.13$.
- The odds of a woman receiving SAT is $0.62/(1 - 0.62) = 1.63$.
- Odds Ratio = $1.63/1.13 = 1.44$
- Interpretation: “A woman is 1.44 times more likely to receive SAT than a man.”

Odds Ratio

- Odds Ratio for comparing two proportions

$$\begin{aligned} OR &= \frac{p_1 / (1 - p_1)}{p_2 / (1 - p_2)} \\ &= \frac{p_1(1 - p_2)}{p_2(1 - p_1)} \end{aligned}$$

OR > 1: increased risk of group 1 compared to 2

OR = 1: no difference in risk of group 1 compared to 2

OR < 1: lower risk (“protective”) in risk of group 1
compared to 2

- In our example,
 - p_1 = proportion of women receiving SAT
 - p_2 = proportion of men receiving SAT

Odds Ratio from a 2x2 table

	SAT	No SAT	
Women	a = 298	b = 252	550
Men	c = 202	d = 248	450
	500	500	1000

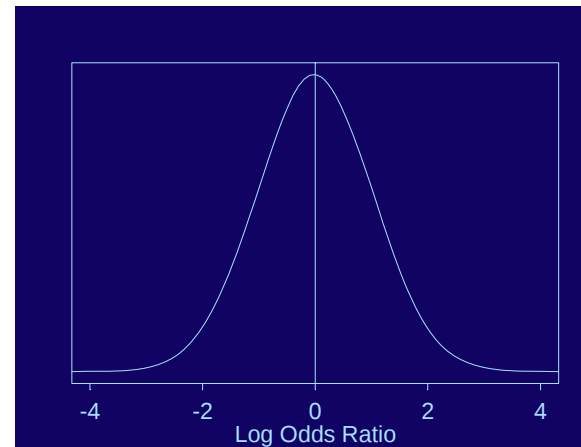
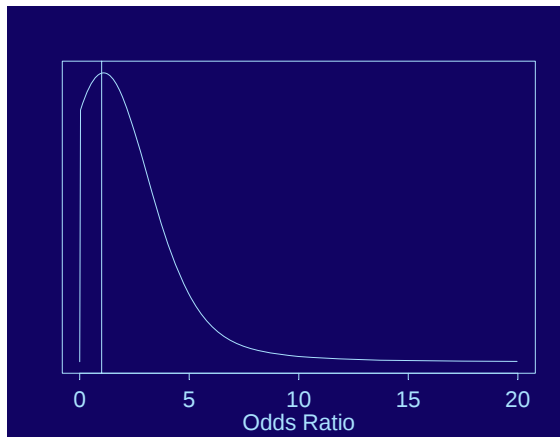
$$OR = \frac{p_1(1 - p_2)}{p_2(1 - p_1)} = \frac{ad}{bc}$$

More on the Odds Ratio

- Ranges from 0 to infinity
- Tends to be skewed (i.e. not symmetric)
 - “protective” odds ratios range from 0 to 1
 - “increased risk” odds ratios range from 1 to 
- Example:
 - “Women are at 1.44 times the risk/chance of men”
 - “Men are at 0.69 times the risk/chance of women”

More on the Odds Ratio

- Sometimes, we see the *log* odds ratio instead of the odds ratio.



- The log OR comparing women to men is $\log(1.44) = 0.36$
- The log OR comparing men to women is $\log(0.69) = -0.36$
 - $\log \text{OR} > 0$: increased risk
 - $\log \text{OR} = 0$: no difference in risk
 - $\log \text{OR} < 0$: decreased risk

Related Measures of Risk

- Relative Risk: $RR = p_1/p_2$
 - $RR = 0.62/0.53 = 1.17$.
 - Different way of describing a similar idea of risk.
 - Generally, interpretation “in words” is the similar:
“Women are at 1.17 times as likely as men to receive SAT”
 - **RR is appropriate in trials often.**
 - But, RR is not appropriate in many settings (e.g. case-control studies)
 - Need to be clear about RR versus OR:
 - $p_1 = 0.50, p_2 = 0.25$.
 - $RR = 0.5/0.25 = 2$
 - $OR = (0.5/0.5)/(0.25/0.75) = 3$
 - Same results, but OR and RR give quite different magnitude

Related Measures of Risk

- Risk Difference: $p_1 - p_2$
 - Instead of comparing risk via a ratio, we compare risks via a difference.
 - In many CT's, the goal is to increase response rate by a fixed percentage.
 - Example: the current success/response rate to a particular treatment is 0.20. The goal for new therapy is a response rate of 0.40.
 - If this goal is reached, then the “risk difference” will be 0.20.

Why do we so often see OR and not others?

(1) Logistic regression:

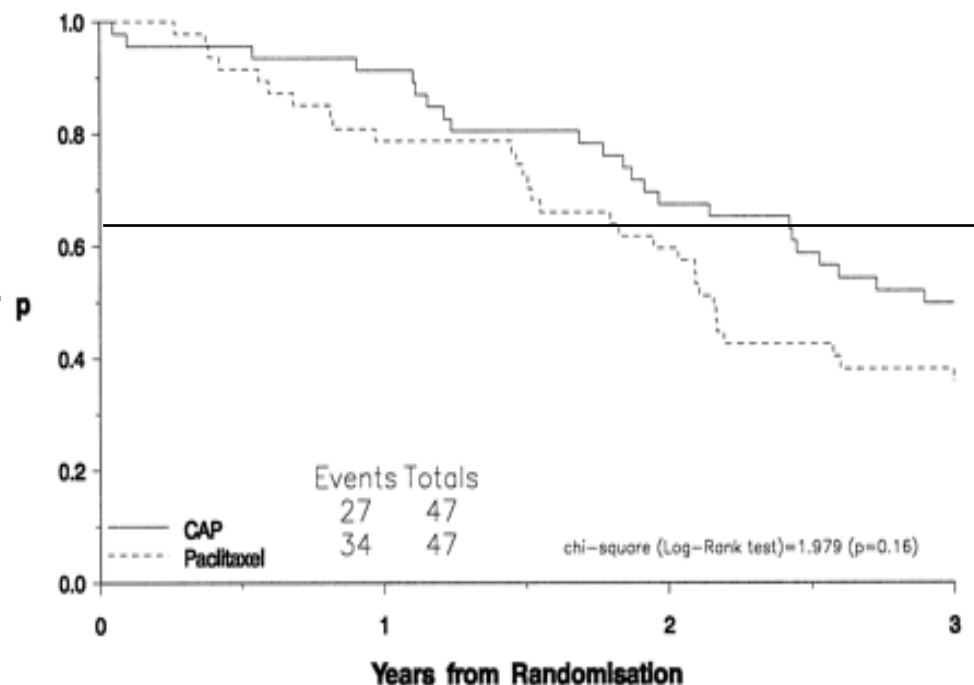
- Allows us to look at association between two variables, adjusted for other variables.
- “Output” is a log odds ratio.
- Example: In the gender ~ SAT example, the odds ratios were evaluated using logistic regression. In reality, the gender ~ SAT odds ratio is adjusted for age, race, year of dx, region, marital status,.....

(2) Can be more globally applied. Design of study does not restrict usage.

Point Estimates: Hazard Ratios

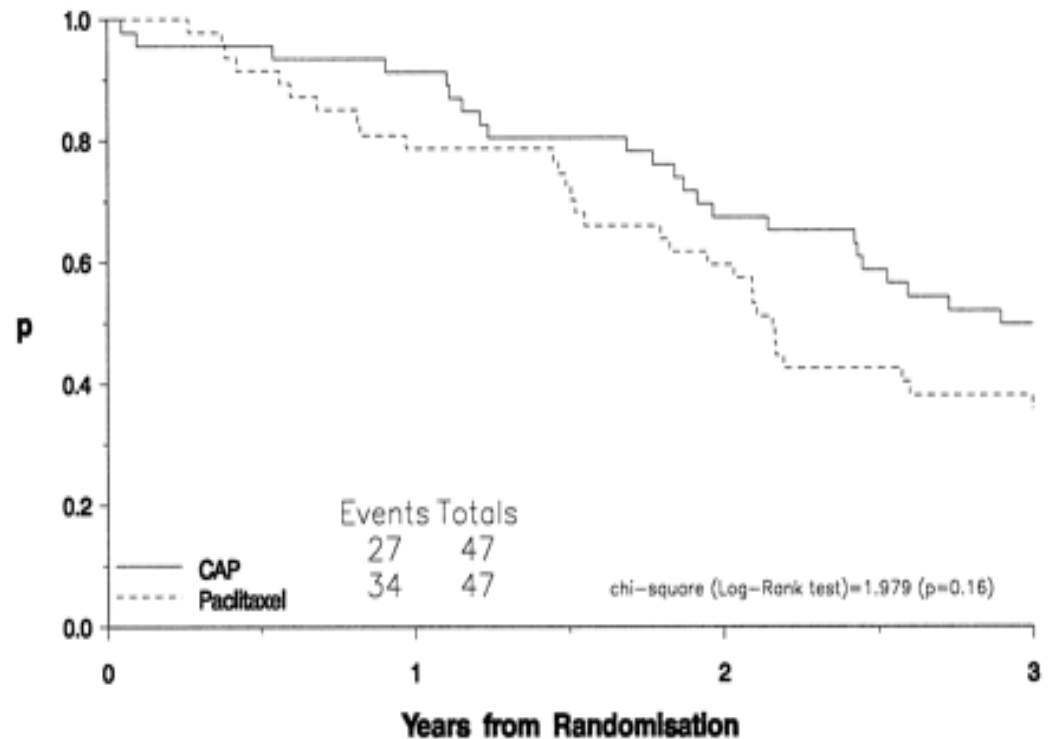
“Randomized Controlled Trial of Single-Agent Paclitaxel Versus Cyclophosphamide, Doxorubicin, and Cisplatin in Patients with Recurrent Ovarian Cancer Who Responded to First-line Platinum-Based Regimens”, Cantu, Parma, Rossi, Floriani, Bonazzi, Dell’Anna, Torri, Colombo. JCO, vol. 20 (5), March 2002, p. 1232.

- “What is the effect of CAP on overall survival as compared to paclitaxel?”
 - Median survival in CAP group was 34.7 months.
 - Median survival in paclitaxel group was 25.8 months.
- But, median survival doesn’t tell the whole story.....



Hazard Ratio

- Compares risk of event in two populations or samples
- Ratio of risk in group 1 to risk in group 2
- First things first.....
 - Kaplan-Meier Curves (product-limit estimate)
 - Makes a “picture” of survival



Hazard Ratios

- Assumption: “Proportional hazards”
- The risk does not depend on time.
- That is, “risk is constant over time”
- But that is still vague.....

- Example: Assume hazard ratio is 0.7.
 - Patients in temsirolimus group are at 0.7 times the risk of death as those in the interferon-alpha arm, at any given point in time.

- **Hazard function = probably of dying at time t given you survived to time t**

Survival ($S(t)$) vs. Hazard ($h(t)$)

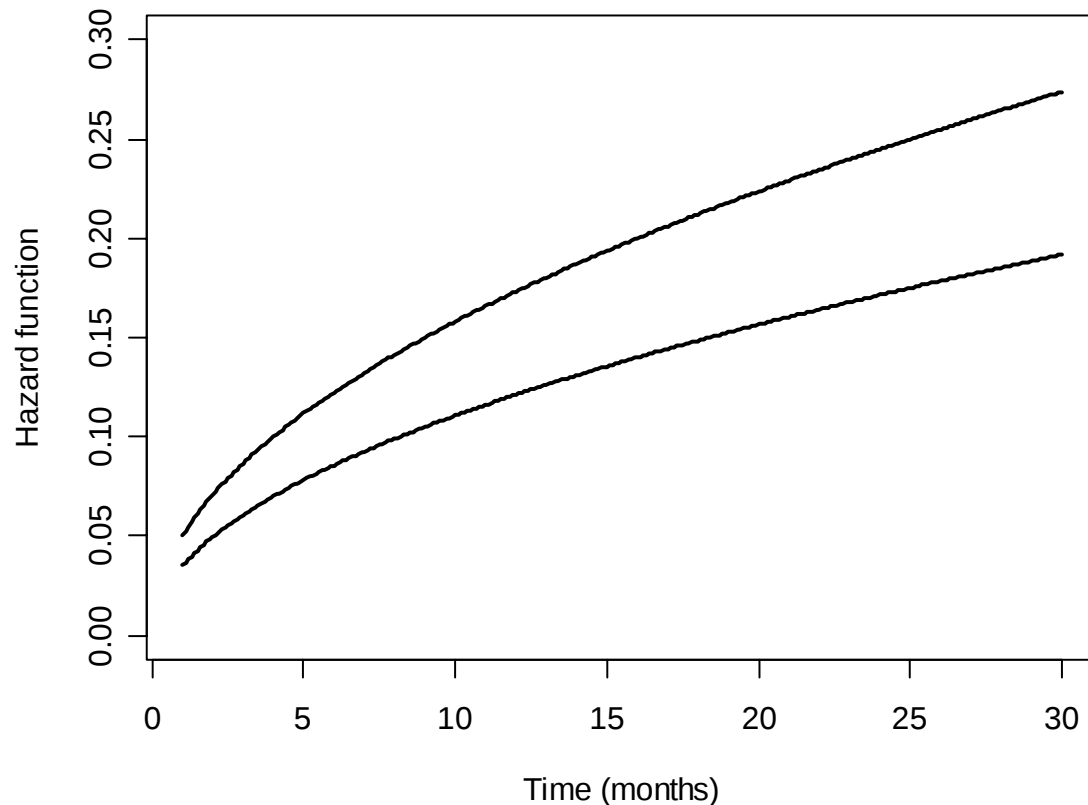
- ❑ Not the same thing.
- ❑ Hard to 'envision' the difference
- ❑ technically, it is the the negative of the slope of the log of the survival curve

$$h(t) = \frac{d}{dt} (-\log(S(t)))$$

- ❑ Yikes....don't worry though
- ❑ the statisticians deal with this stuff
- ❑ just remember:
 - the hazard ratio is not the ratio of the survival curves
 - it is a ratio of some function of the survival curves

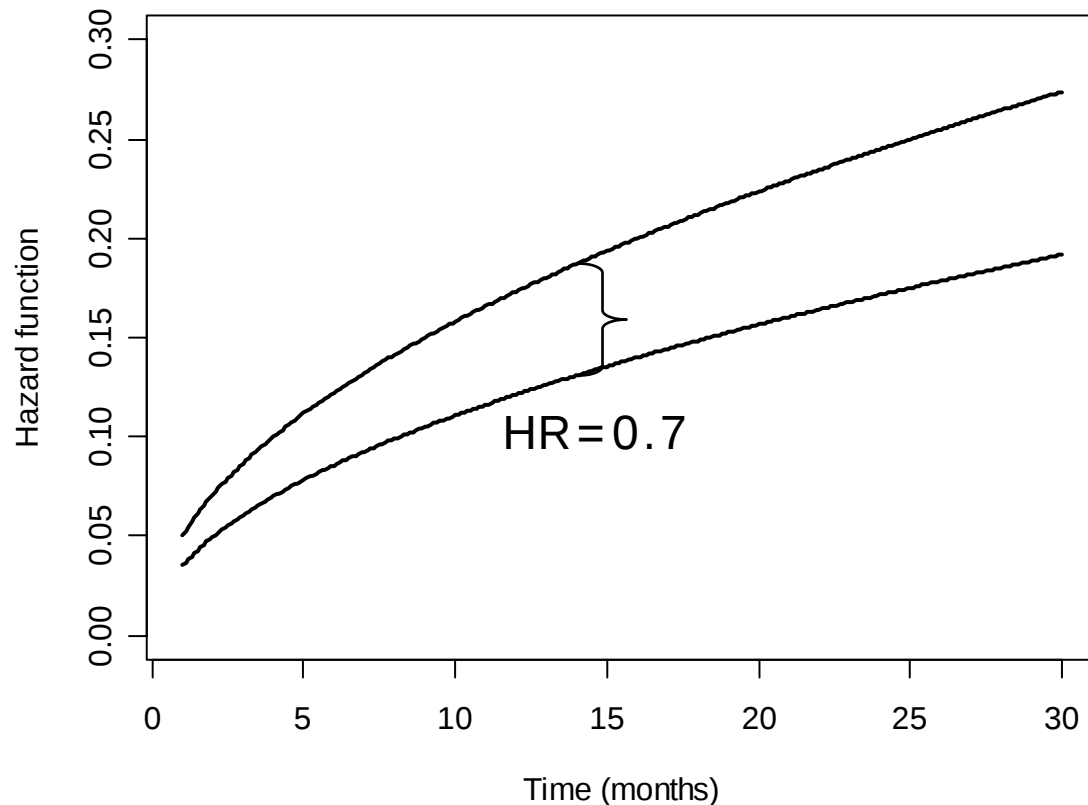
Hazard Ratios

- Hazard Ratio = $\frac{\text{hazard function for T}}{\text{hazard function for IA}}$
- Makes the assumption that this ratio is constant over time.



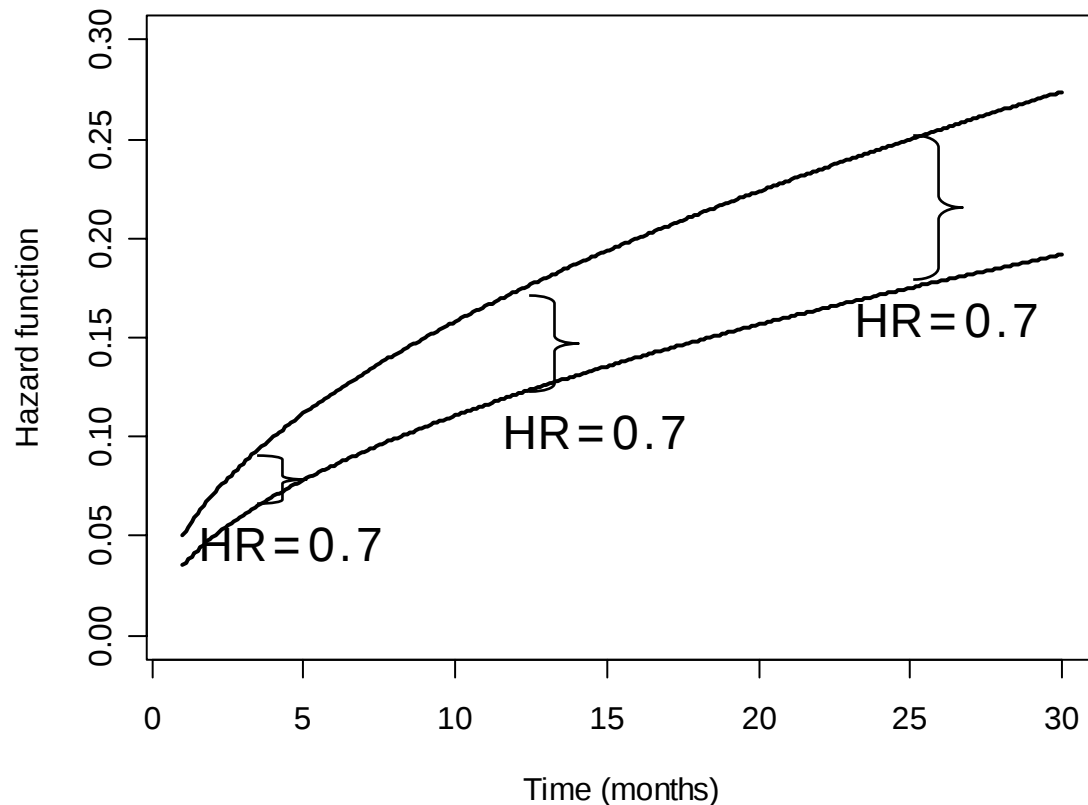
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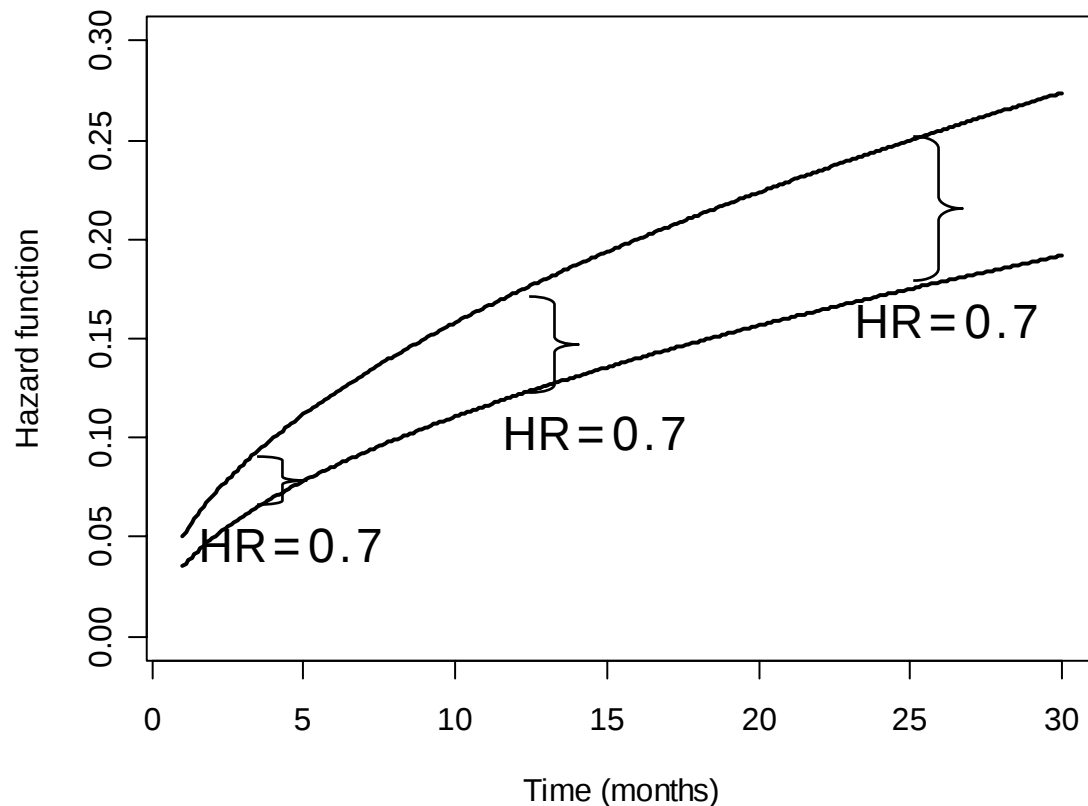
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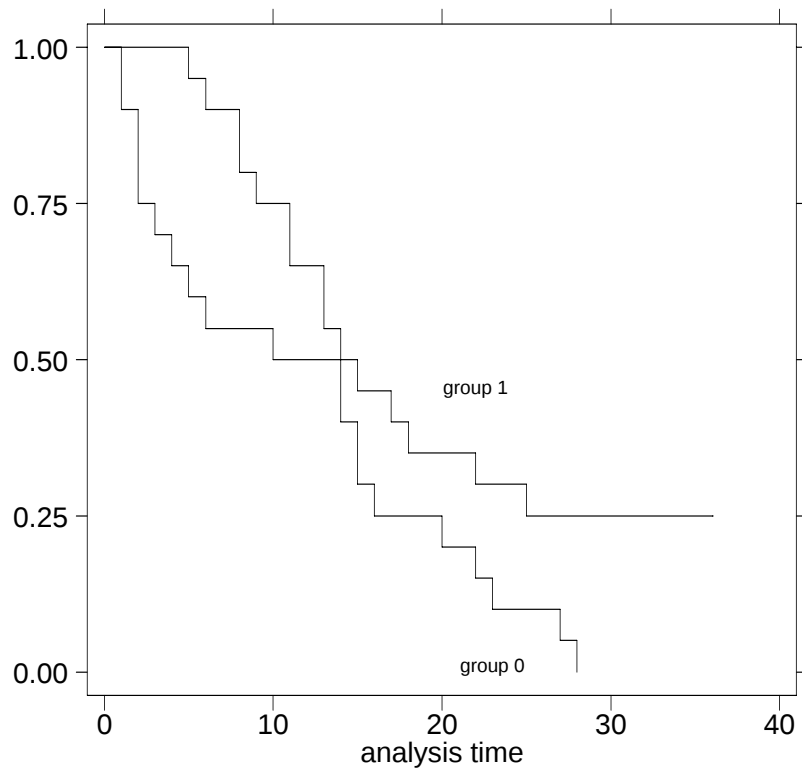
Interpretation Again

- For any fixed point in time, individuals in the T therapy group are at 0.7 times the risk of death as the IA group.

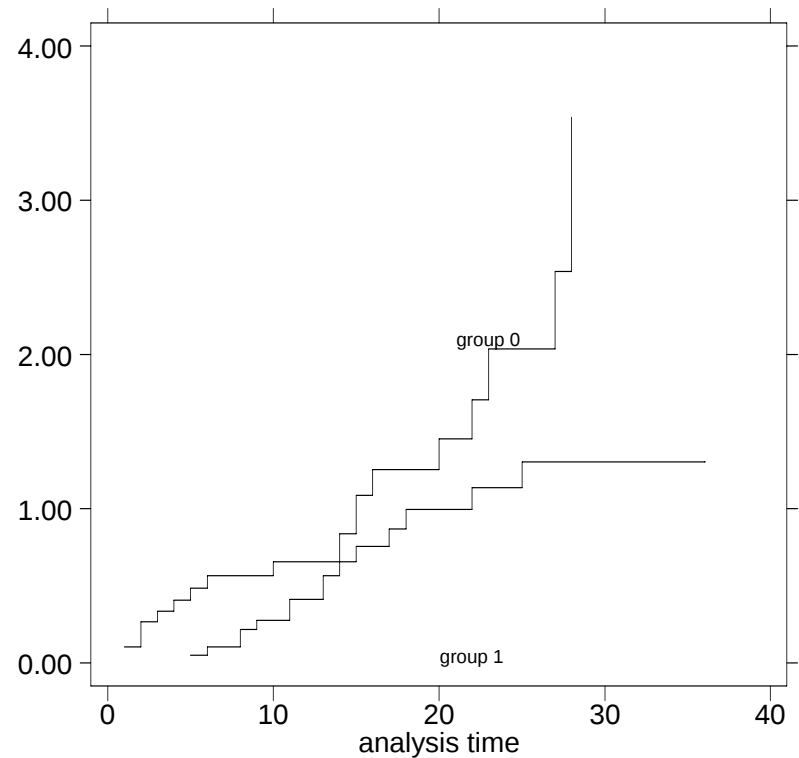


Hazard ratio is not always valid

Kaplan-Meier survival estimates, by group



Nelson-Aalen cumulative hazard estimates, by group



Hazard Ratio = .71