
Wandering the Bayesian countryside with ‘brms’

- Example of a nonlinear mixed-effect model in clinical oncology -

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Acknowledgments

- Stan dev. team (including also support team for Wiki and Discourse)
- Paul Bürkner, author/maintainer of ‘brms’
- Blogs from Andrew Gelman, Markus Gesmann (‘Mages’), Solomon Kurz, Matti Vuorre, Kristoffer Magnusson (‘Rpsychologist’), Henrik Singmann, Daniel Lüdtke (‘Strenge Jacke’), ... and many others
- Project Data Sphere
- R and Rstudio core teams



A complex, self-intersecting curve is shown, starting from a point on the left boundary and extending towards the right boundary. The curve is composed of several loops and segments, with some parts crossing each other. It starts at a point on the left boundary, moves right, then loops back and forth, eventually ending near the right boundary.

*Nonlinear models to describe
and/or understand disease progression*

NUMBER OF HUSBANDS

1

0

YEST-ERDAY

TODAY

AS YOU CAN SEE, BY LATE NEXT MONTH YOU'LL HAVE OVER FOUR DOZEN HUSBANDS. BETTER GET A BULK RATE ON WEDDING CAKE.

Motivating example

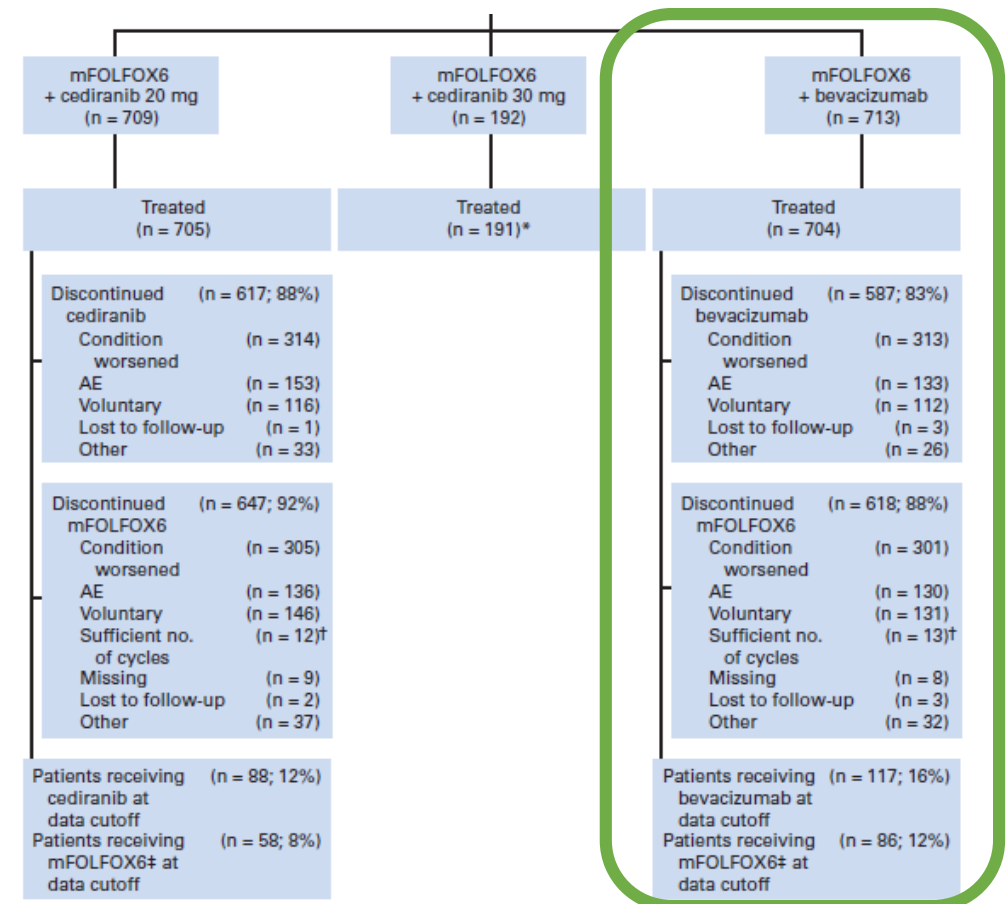
mCRC patients treated with bevacizumab+chemo



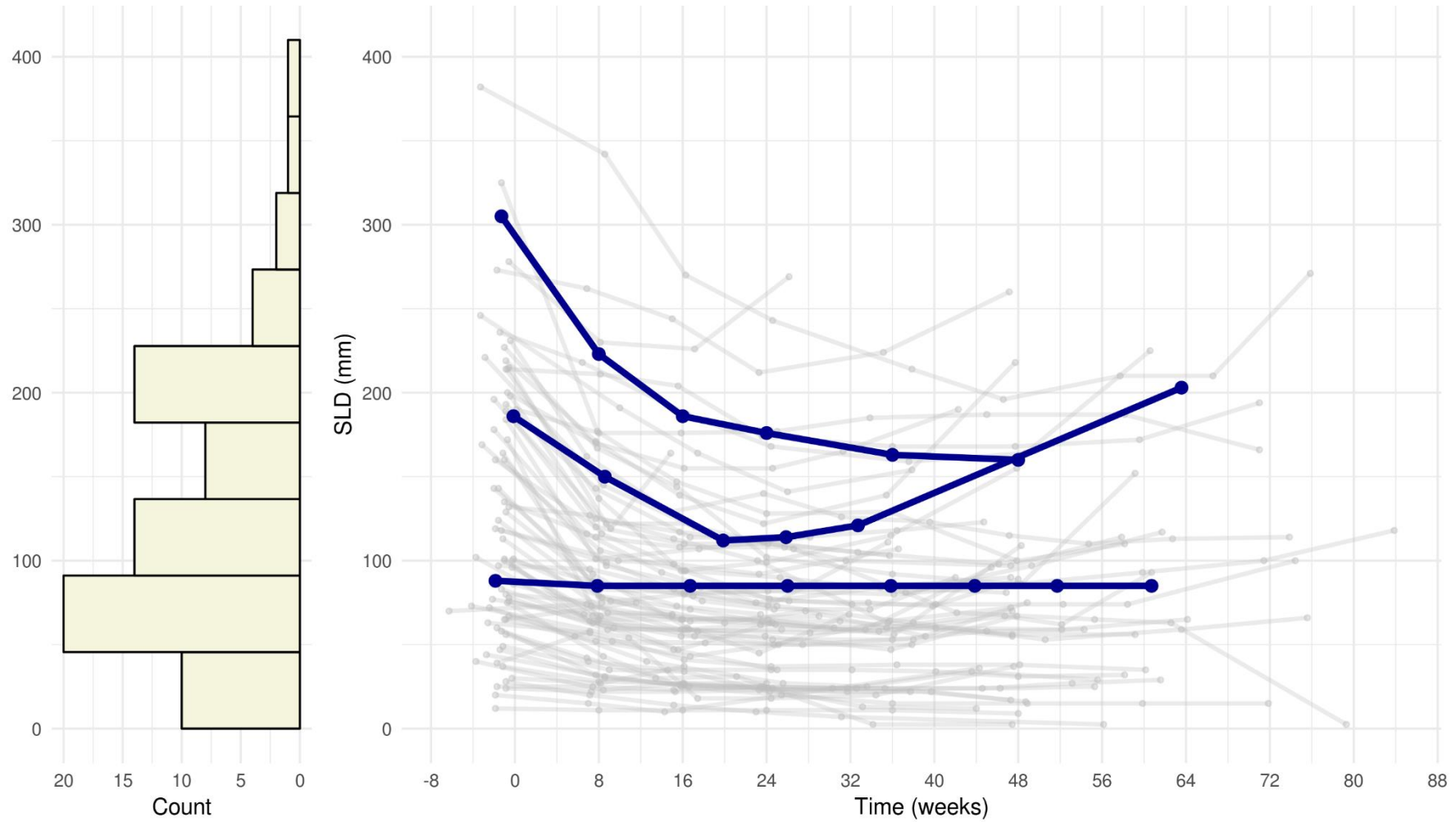
- Tumor size measured on MRI or CT scans, collected every 8 weeks until week 24 and subsequently every 12 weeks until disease progression or death
- Response variable: SLD = sum of lesion diameter (mm)
- SLD is correlated with overall survival; understanding therapeutic effect on SLD time dynamics is critical

[1] Schmoll *et al.* J Clin Oncol 2012, 30:3588-3595

HORIZON III study data [1]



Data display gives insights



[tidyverse+patchwork]

Our goals

1. **Summarize** the time trend at the **population** and at the **individual** levels
2. Investigate if/which intrinsic factors (a.k.a. covariates) may contribute to **explaining the inter-individual variability** (IIV)

Our goals ➔ Our plan

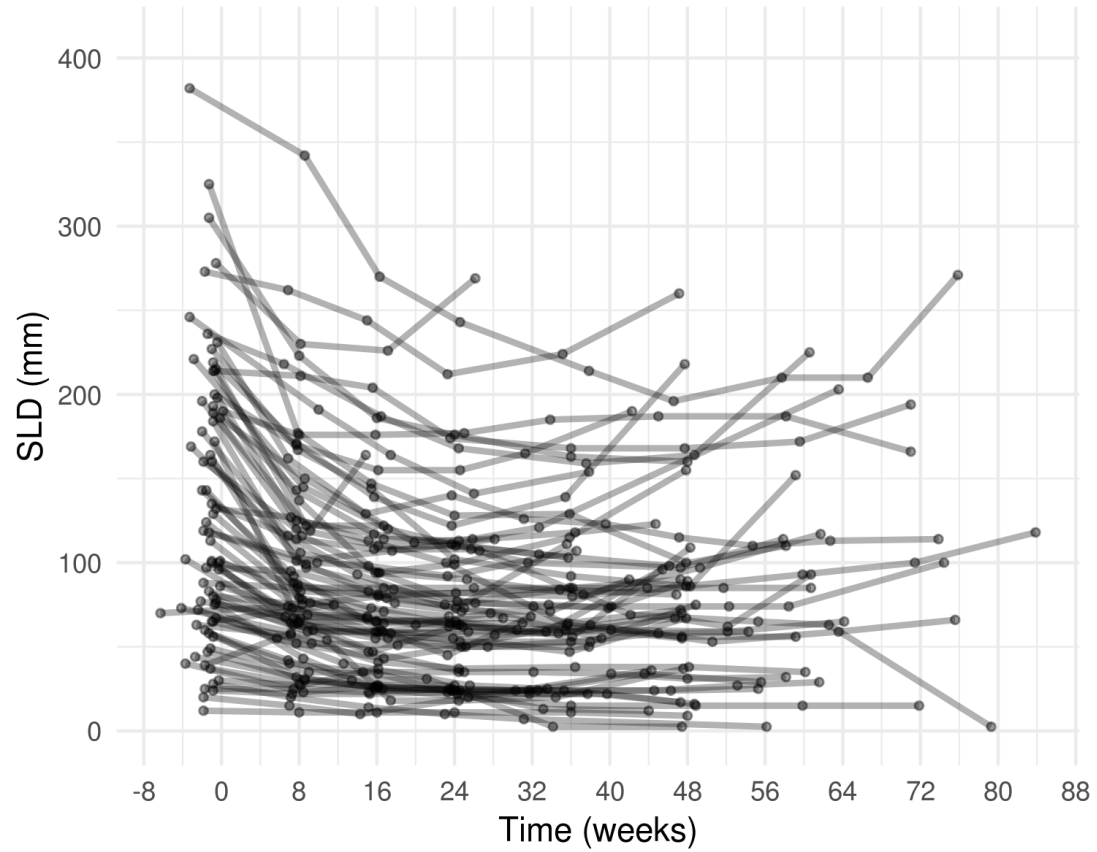
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 - Given a set of **candidate models**, retain the one offering the best **predictive performance**
2. Investigate if/which intrinsic factors (a.k.a. covariates) may contribute to **explaining the IIV**
 - From the best model (among candidates), extract **individual parameter estimates summarizing** the time dynamics of SLD and assess **correlation** with relevant **covariates**

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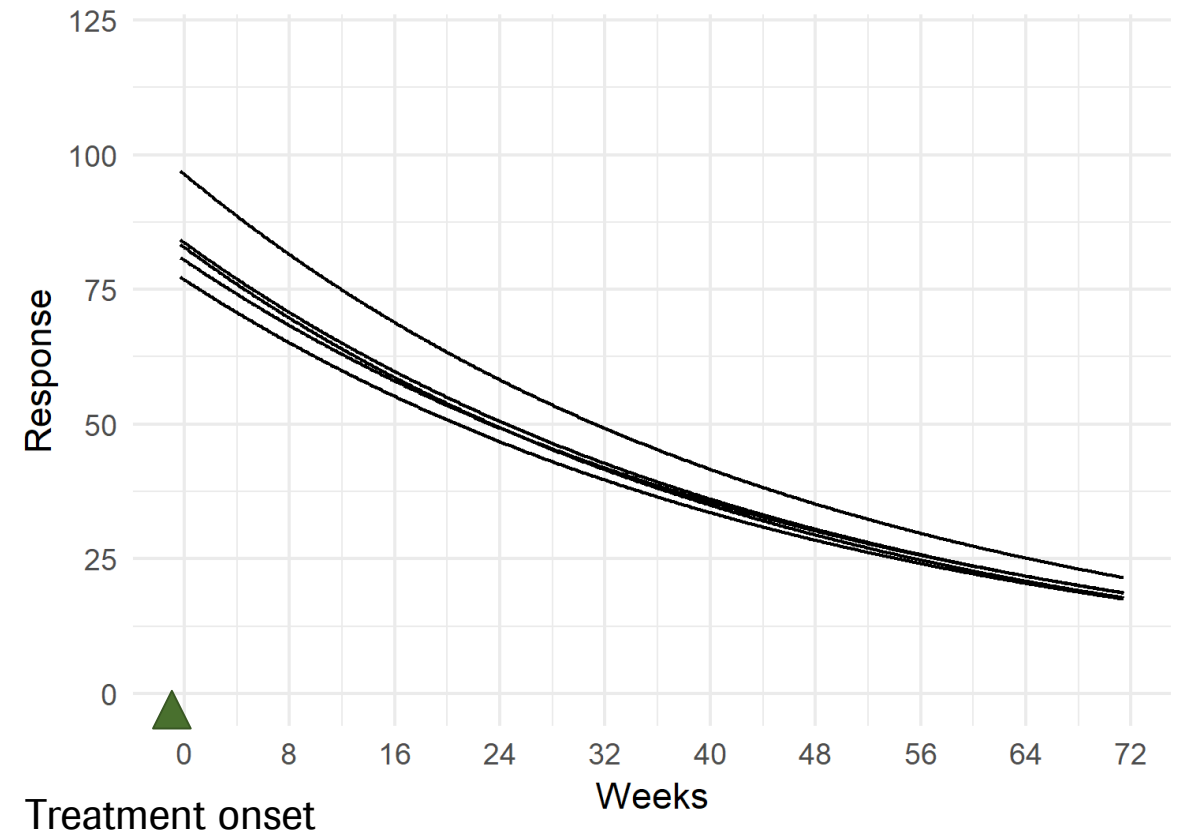
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Candidate models



$$SLD_{ij} = BAS_i \cdot \exp(-KS_i \cdot t_{ij}) + \varepsilon_{ij}$$



Candidate models

Name	Structural form
Exponential decay	$SLD_{ij} = BAS_i \cdot \exp(-KS_i \cdot t_{ij}) + \varepsilon_{ij}$
Stein-Fojo ^[1]	$SLD_{ij} = BAS_i \cdot (\exp(KG_i \cdot t_{ij}) + \exp(-KS_i \cdot t_{ij}) - 1) + \varepsilon_{ij}$
Wang ^[2]	$SLD_{ij} = BAS_i \cdot \exp(KS_i \cdot t_{ij}) + KG_i \cdot t_{ij} + \varepsilon_{ij}$
Generalized Stein-Fojo ^[3]	$SLD_{ij} = BAS_i \cdot ((1 - f) \cdot \exp(KG_i \cdot t_{ij}) + f \cdot \exp(-KS_i \cdot t_{ij})) + \varepsilon_{ij}$

BAS =SLD at time 0 (mm); KS =Shrinkage rate (1/day); KG = Growth rate (1/day); f =Fraction (responder); ε =Residual (mm).

[1] Stein *et al.* DOI: 10.1634/theoncologist.2008-0016; [2] Wang *et al.* DOI: 10.1038/clpt.2009.64; [3] Chatterjee *et al.* DOI:10.1002/psp4.12140.

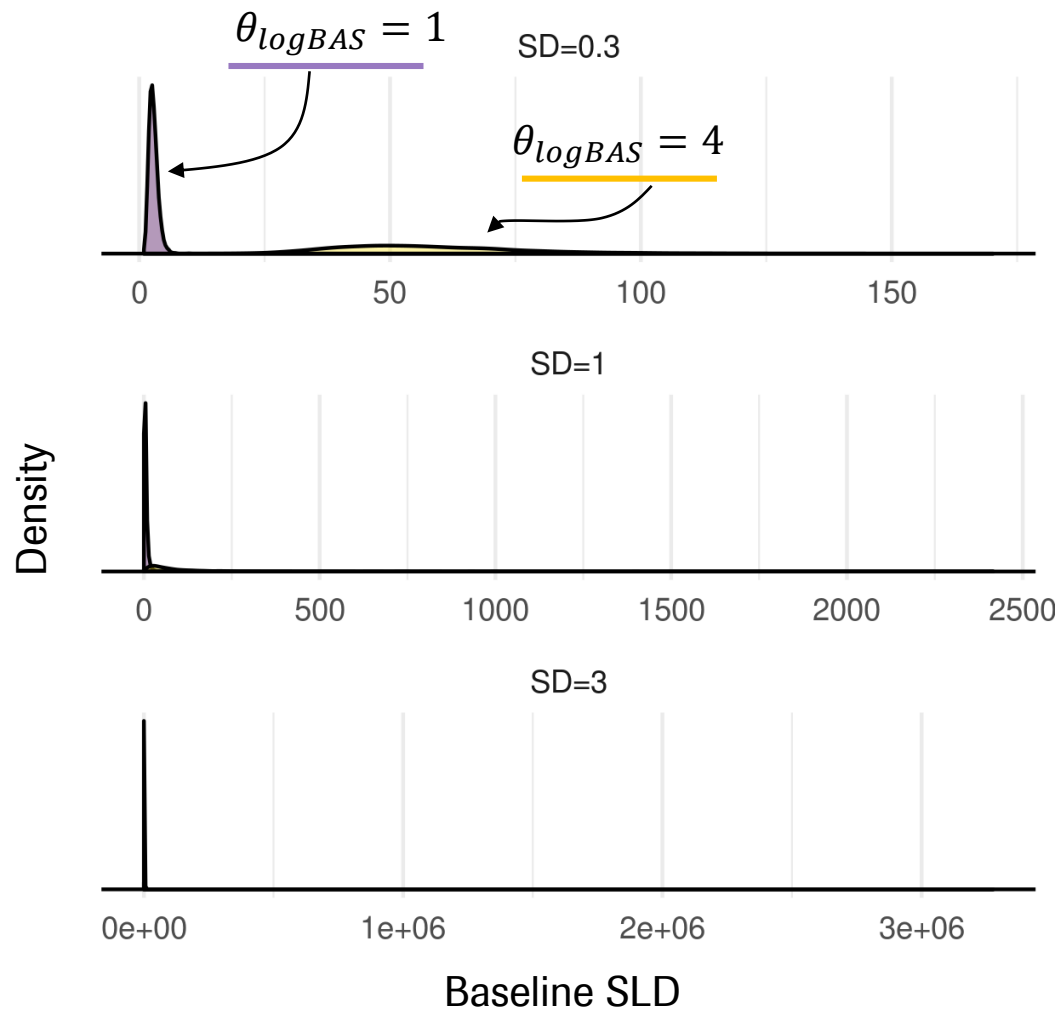
Candidate models

Name	Structural model			
Generalized Stein-Fojo	$SLD_{ij} = BAS_i \cdot \left((1 - f) \cdot \exp(KG_i \cdot t_{ij}) + f \cdot \exp(-KS_i \cdot t_{ij}) \right) + \varepsilon_{ij}$			

Transformation	Param. P	Distribution of P	Distribution of θ	Distribution of ω
$BAS_i = \exp(\log BAS_i)$	$\log BAS$	$\mathbb{N}(\theta_{\log BAS}, \omega_{\log BAS}^2)$	$\mathbb{N}(T_{\log BAS}, S_{\log BAS}^2)$	$\mathbb{N}(V_{\log BAS}, U_{\log BAS}^2)^+$
$KS_i = \exp(\log KS_i)$	$\log KS$	$\mathbb{N}(\theta_{\log KS}, \omega_{\log KS}^2)$	$\mathbb{N}(T_{\log KS}, S_{\log KS}^2)$	$\mathbb{N}(V_{\log KS}, U_{\log KS}^2)^+$
$KG_i = \exp(\log KG_i)$	$\log KG$	$\mathbb{N}(\theta_{\log KG}, \omega_{\log KG}^2)$	$\mathbb{N}(T_{\log KG}, S_{\log KG}^2)$	$\mathbb{N}(V_{\log KS}, U_{\log KS}^2)^+$
$f_i = \text{invlogit}(\text{logit} f_i)$	$\text{logit} f$	$\mathbb{N}(\theta_{\text{logit} f}, \omega_{\text{logit} f}^2)$	$\mathbb{N}(T_{\text{logit} f}, S_{\text{logit} f}^2)$	$\mathbb{N}(V_{\text{logit} f}, U_{\text{logit} f}^2)^+$
-	ε	$\mathbb{N}(0, \sigma^2)$	-	-

Note: sample from a MVN distribution to account for the correlation between hyper-parameters

Beware of the transformation!



Example:

Baseline SLD (*BAS*) are in a [2, 400] mm range, with mode typically between 50 and 100 mm.

↳ $\log BAS$ in $[\log(2), \log(400)] \approx [0.7, 6]$,

↳ Mode: $[\log(50), \log(100)] \approx [4, 4.6]$

As $N(0,1)$ ranges approx. from -3 to +3

↳ $\log BAS \sim 4 + N(0,1)$ approx. ranges in [1, 7]

↳ Equivalent to *BAS* covering the range [2.7, 1096]

Fitting the exponential decay model with 'brms'

```
mExpDecay<-bf(SLD~exp(lbas)*exp(-(exp(lks)/1000)*TIME),  
              lbas~1+(1|UID), lks~1+(1|UID), nl=TRUE)
```

Structural+error models

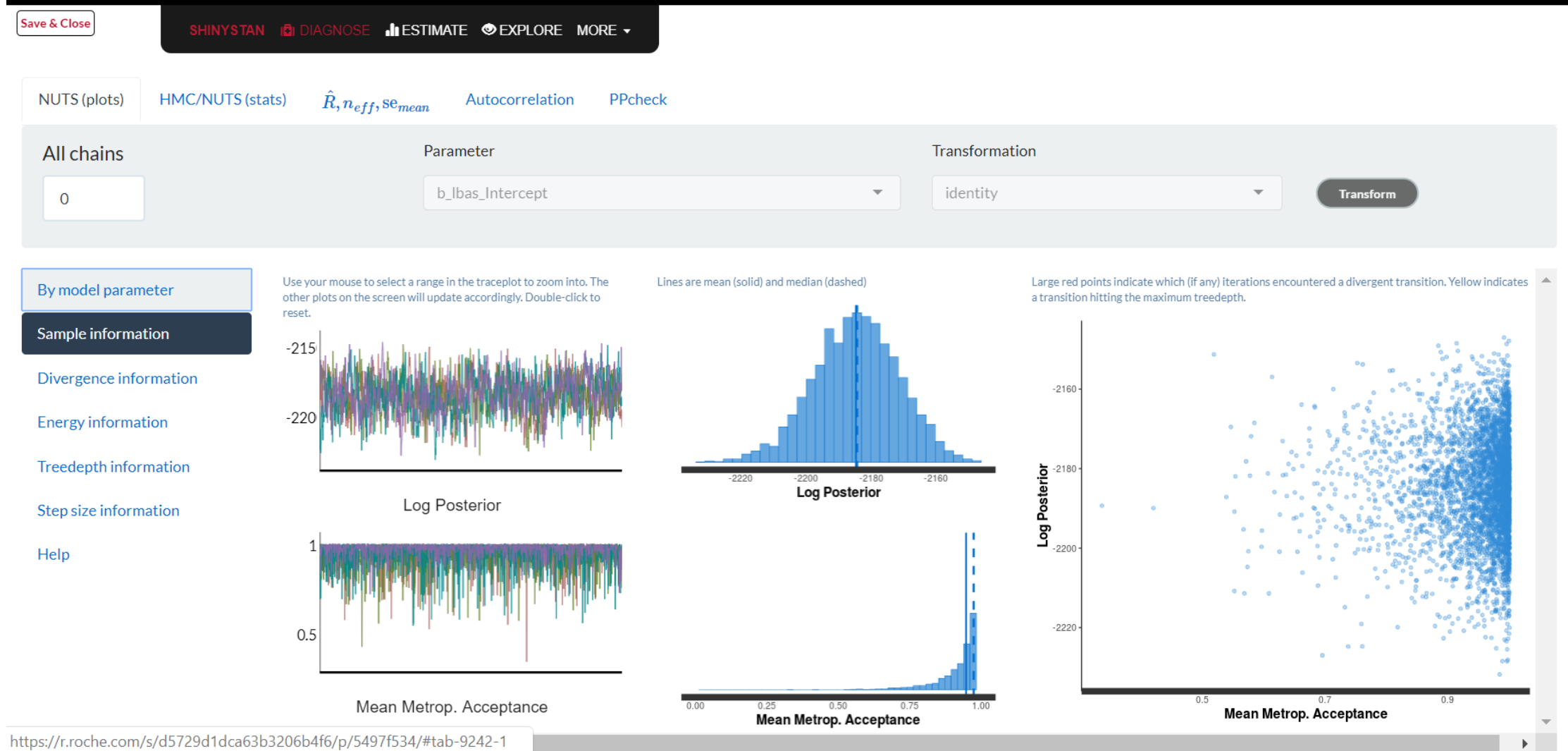
```
Prior01<-c(set_prior("normal(4, 1)", class="b", nlpar="lbas"),  
            set_prior("normal(0, 1)", class="b", nlpar="lks"),  
            set_prior("normal(0, 1)", class="sd", nlpar="lbas"),  
            set_prior("normal(0, 1)", class="sd", nlpar="lks"))
```

Priors

```
m01<-brm(mExpDecay, data=trndf, prior=Prior01, family=gaussian(),  
         iter=2000, chains=4, warmup=1000, seed=1234, cores=4)
```

Run

Checking the convergence



Model building

#ID	Structure	Family	Covariance	LOO-CV IC	SE	10x-CV IC	SE
00	Exp.decay	Gaussian	none	4095	61		
01	Exp.decay	Student	none	3840	60		
02	Stein-Fojo	Student	none	3469	55	4863	38
03	Stein-Fojo	Student	r(lbas, lks, lkg)	3473	54		
04	Wang	Student	none	4195	54		
05	Wang	Student	r(lbas, lks, lkg)	4197	54		
07	Generalized Stein-Fojo	Student	none	3431	56	4849	38
08	Generalized Stein-Fojo	Student	r(lbas, lks, lkg)	3417	57	4841	36

Note: Run time for 4 chains, 8000 iterations, on my average laptop (4 cores in parallel) ranges from 1.5 (model #01) to 1h25 min (model #08).

Model estimates summary

Generalized Stein-Fojo model (model #08)

```

Family: student
Links: mu = identity; sigma = identity; nu = identity
Formula: SLD2 ~ exp(lbas) * ((1 - (1/(1 + exp(-logitf)))) * exp((exp(lkg)/1000) * TIME) + (1/(1 + exp(-logitf)))) * exp(-(exp(lks)/1000) * TIME))
      lbas ~ 1 + (1 | ID1 | UID)
      lks ~ 1 + (1 | ID1 | UID)
      lkg ~ 1 + (1 | ID1 | UID)
      logitf ~ 1 + (1 | ID1 | UID)
Data: trndf (Number of observations: 460)
Samples: 4 chains, each with iter = 5000; warmup = 3000; thin = 1;
         total post-warmup samples = 8000

```

Group-Level Effects:

~UID (Number of levels: 75)

	Estimate	Est.Error	l-95% CI	u-95% CI	Eff.Sample	Rhat
sd(lbas_Intercept)	0.79	0.07	0.67	0.95	280	1.02
sd(lks_Intercept)	0.74	0.14	0.48	1.03	250	1.02
sd(lkg_Intercept)	1.75	0.28	1.25	2.35	353	1.01
sd(logitf_Intercept)	1.92	0.30	1.40	2.56	253	1.02
cor(lbas_Intercept,lks_Intercept)	-0.25	0.16	-0.53	0.09	650	1.00
cor(lbas_Intercept,lkg_Intercept)	0.27	0.14	-0.02	0.53	1193	1.00
cor(lks_Intercept,lkg_Intercept)	-0.42	0.22	-0.75	0.11	194	1.02
cor(lbas_Intercept,logitf_Intercept)	0.05	0.12	-0.21	0.28	1033	1.00
cor(lks_Intercept,logitf_Intercept)	-0.53	0.20	-0.82	-0.07	137	1.03
cor(lkg_Intercept,logitf_Intercept)	0.72	0.11	0.46	0.88	503	1.01

Population-Level Effects:

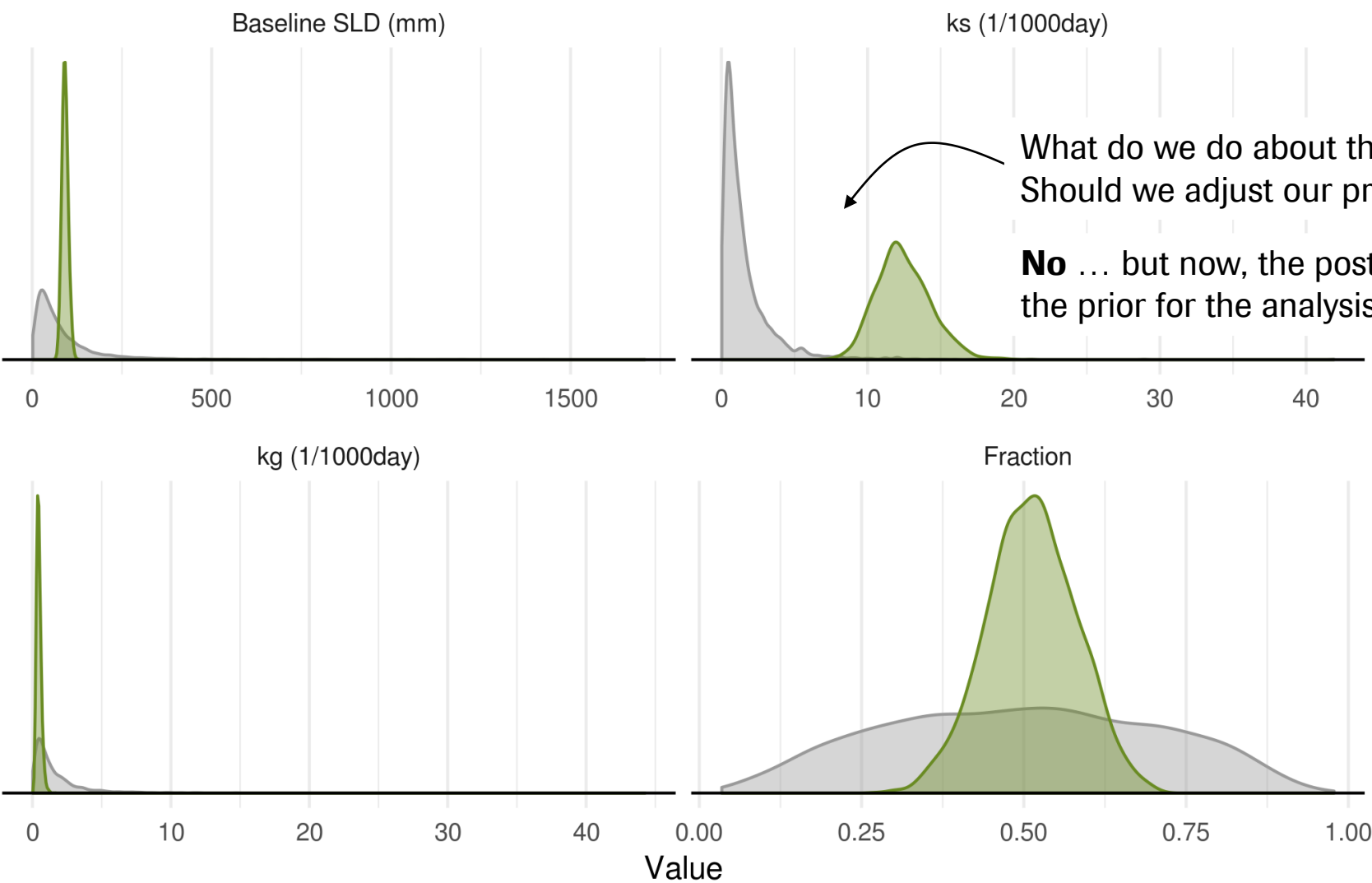
	Estimate	Est.Error	l-95% CI	u-95% CI	Eff.Sample	Rhat
lbas_Intercept	4.51	0.09	4.33	4.68	158	1.01
lks_Intercept	2.51	0.15	2.21	2.79	339	1.01
lkg_Intercept	-0.84	0.36	-1.61	-0.19	559	1.01
logitf_Intercept	0.05	0.28	-0.47	0.65	562	1.01

Family Specific Parameters:

	Estimate	Est.Error	l-95% CI	u-95% CI	Eff.Sample	Rhat
sigma	1.47	0.20	1.13	1.93	412	1.01
nu	1.05	0.05	1.00	1.18	2884	1.00

Samples were drawn using sampling(NUTS). For each parameter, Eff.Sample is a crude measure of effective sample size, and Rhat is the potential scale reduction factor on split chains (at convergence, Rhat = 1).

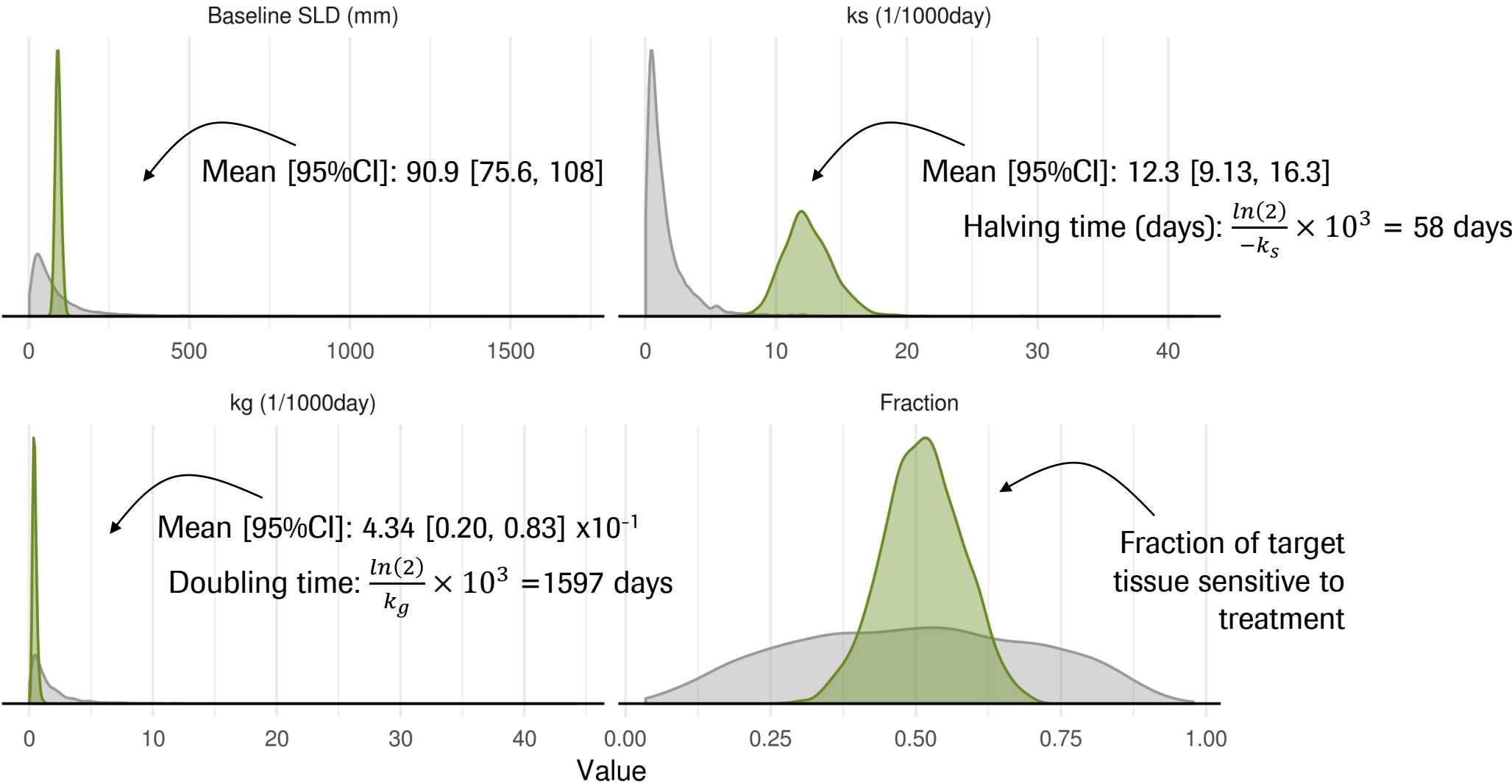
Posterior vs. prior overlap



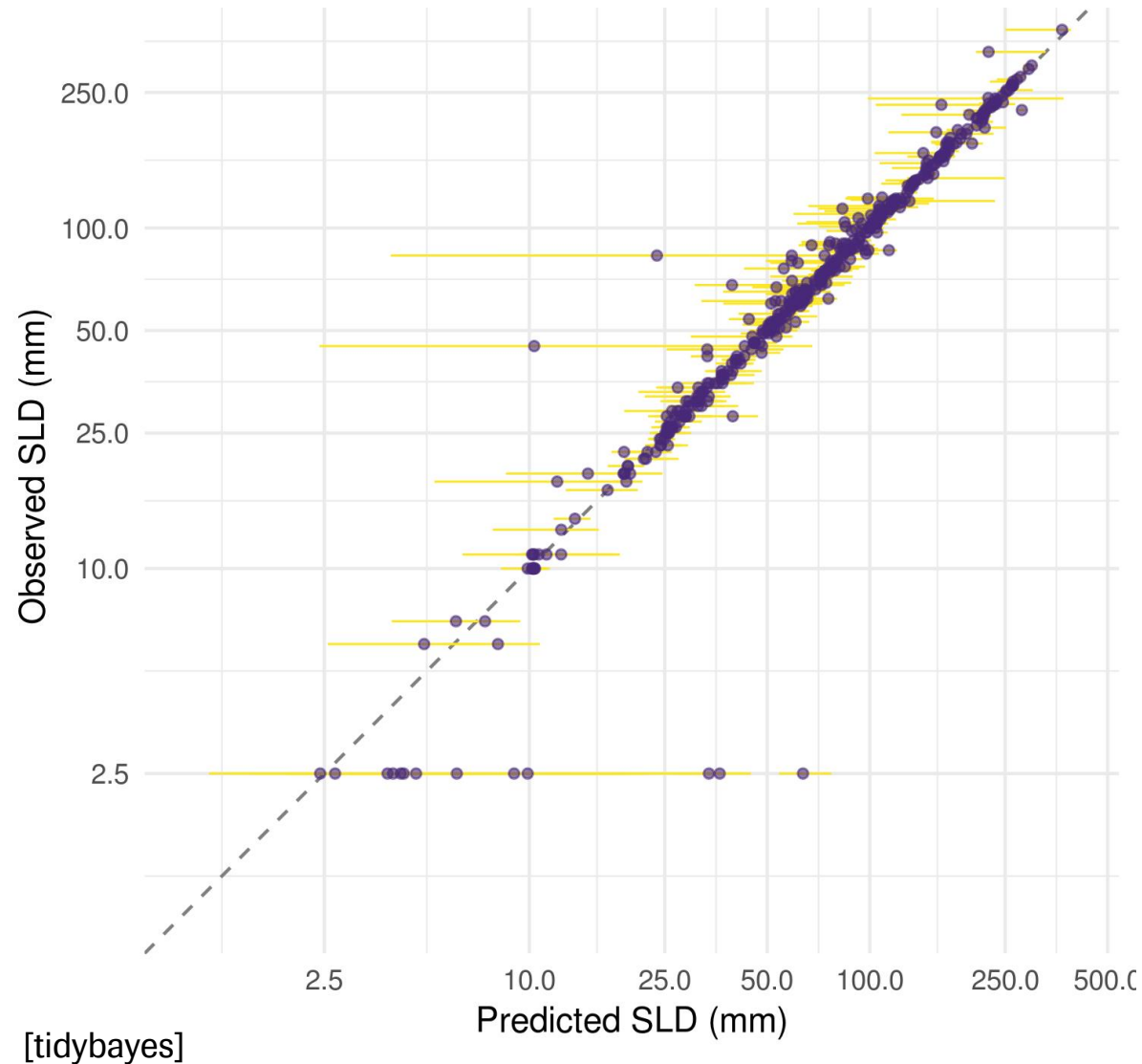
What do we do about this?
Should we adjust our prior?

No ... but now, the posterior can become the prior for the analysis of **new data**

Posterior interpretation

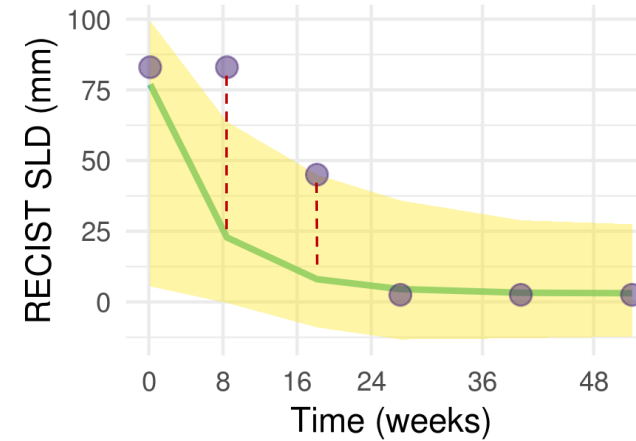
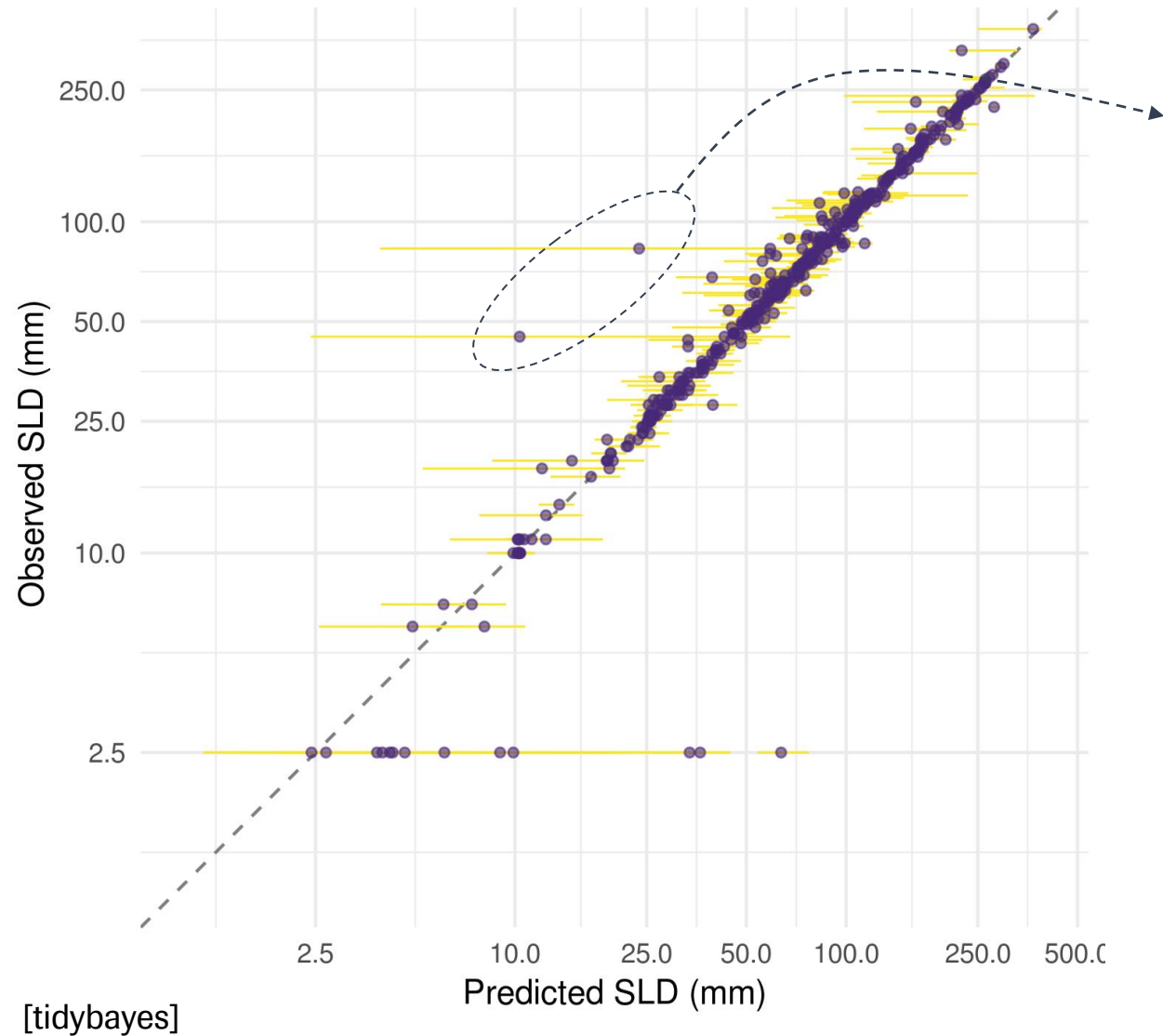


Diagnostic plot: observation vs. prediction

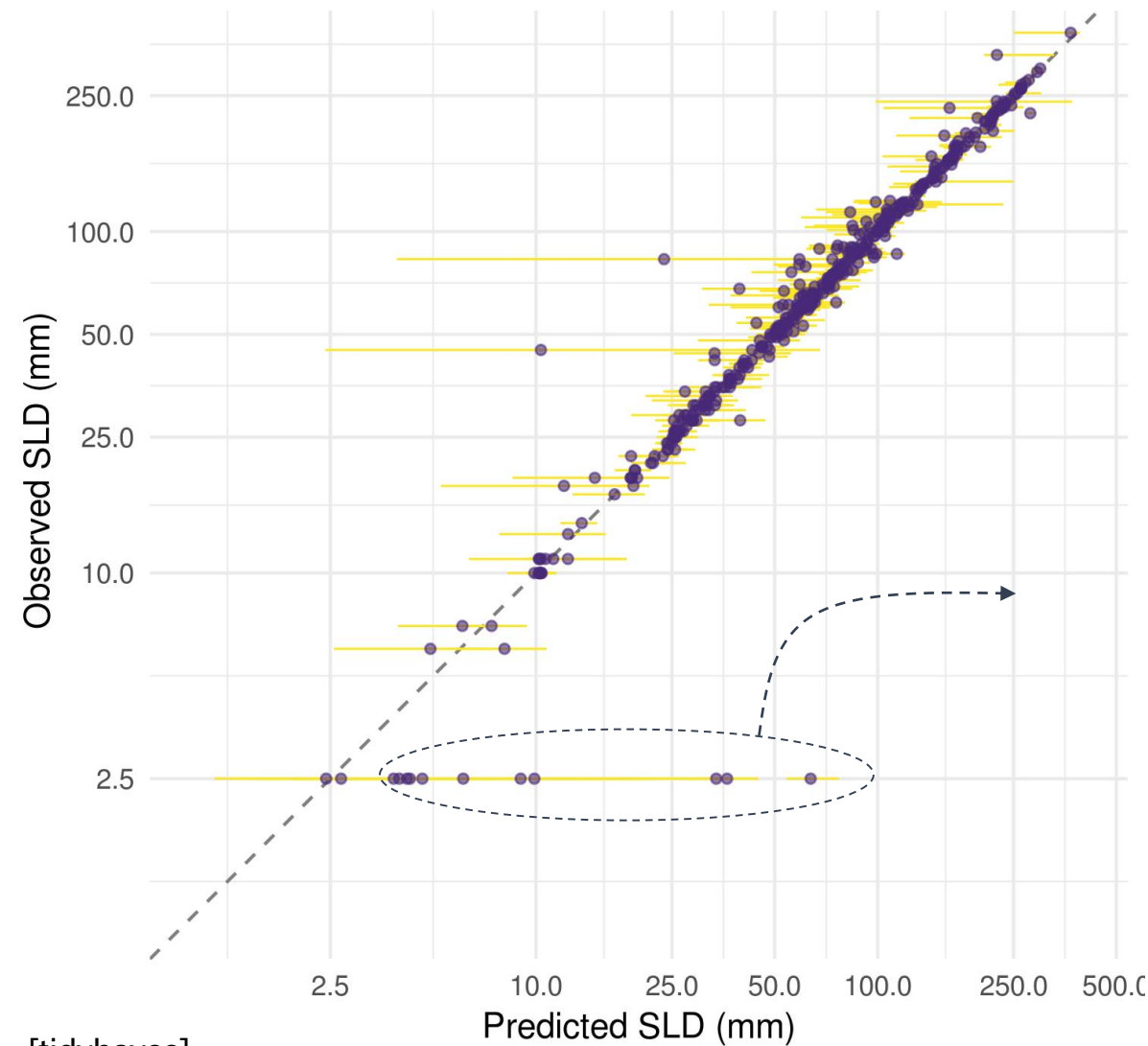


Note: Yellow horizontal bars display 95% credible interval around the predicted mean value of the response distribution (*i.e.* excluding residual error).

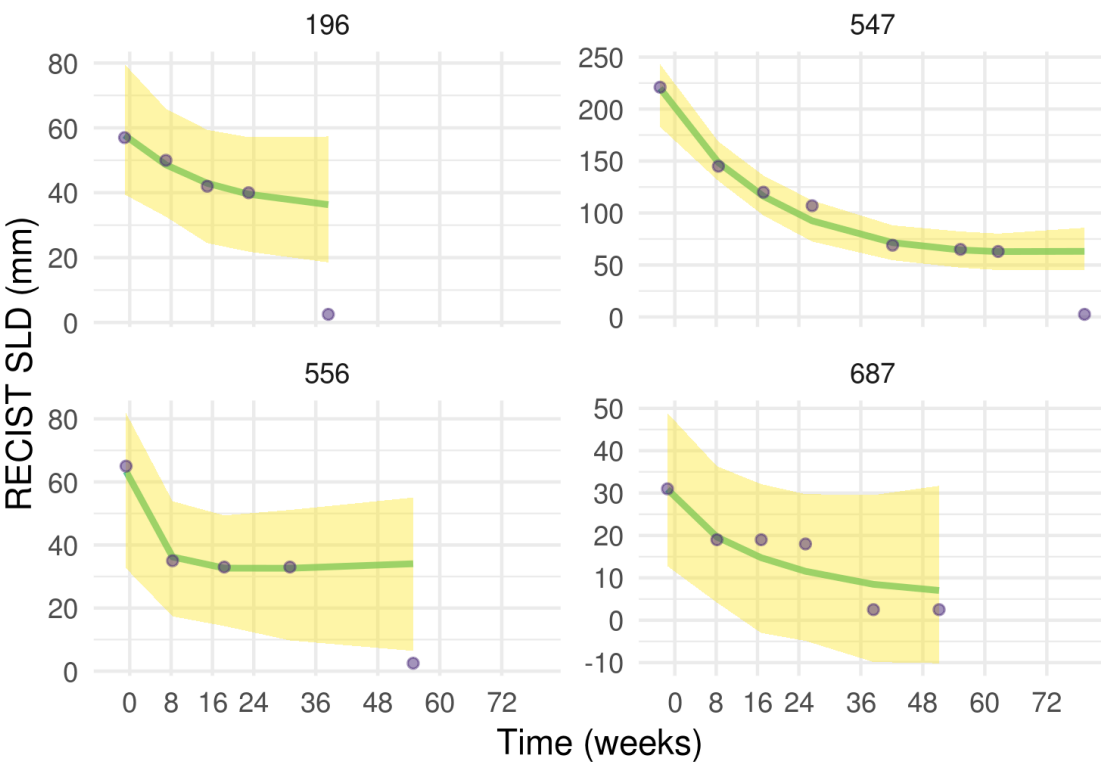
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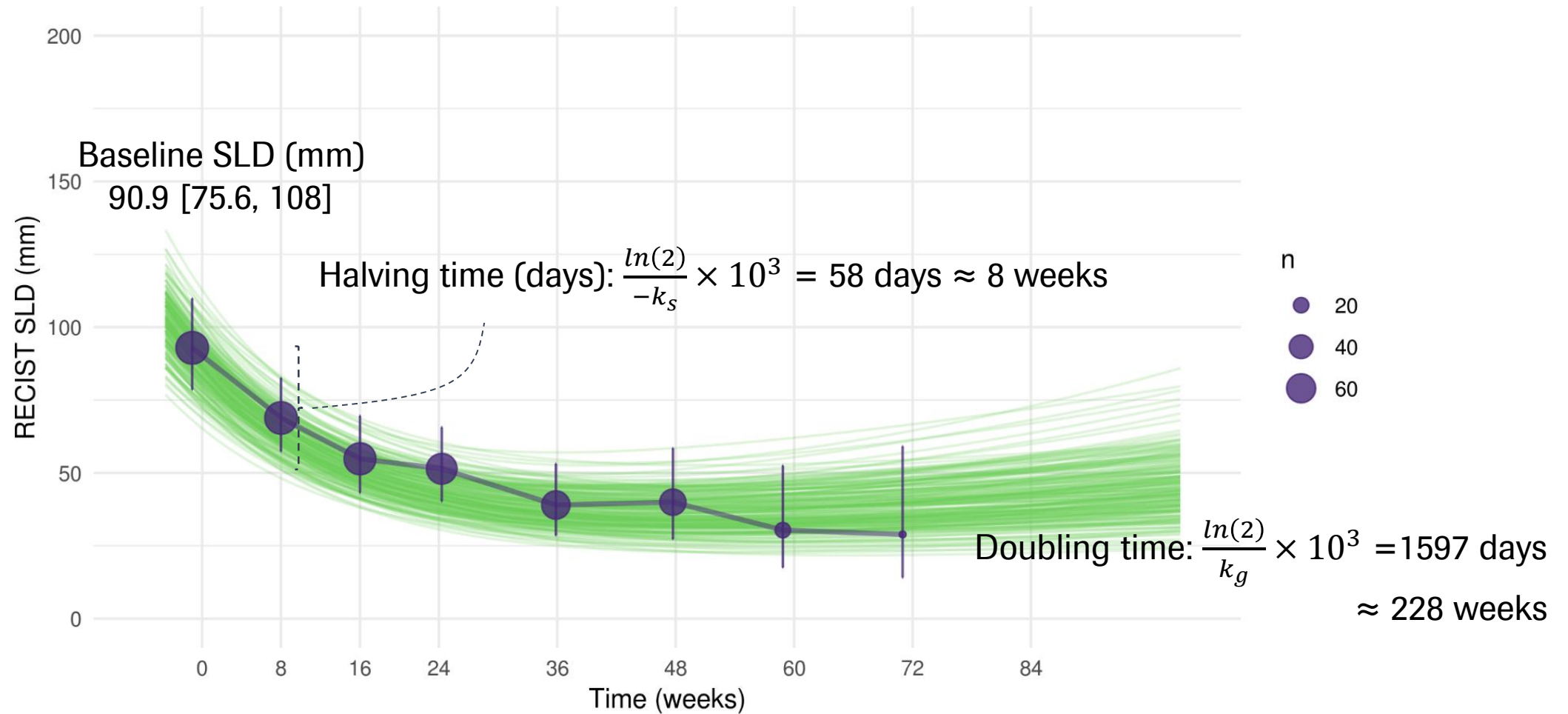


The model needs refinement to handle LLoQ



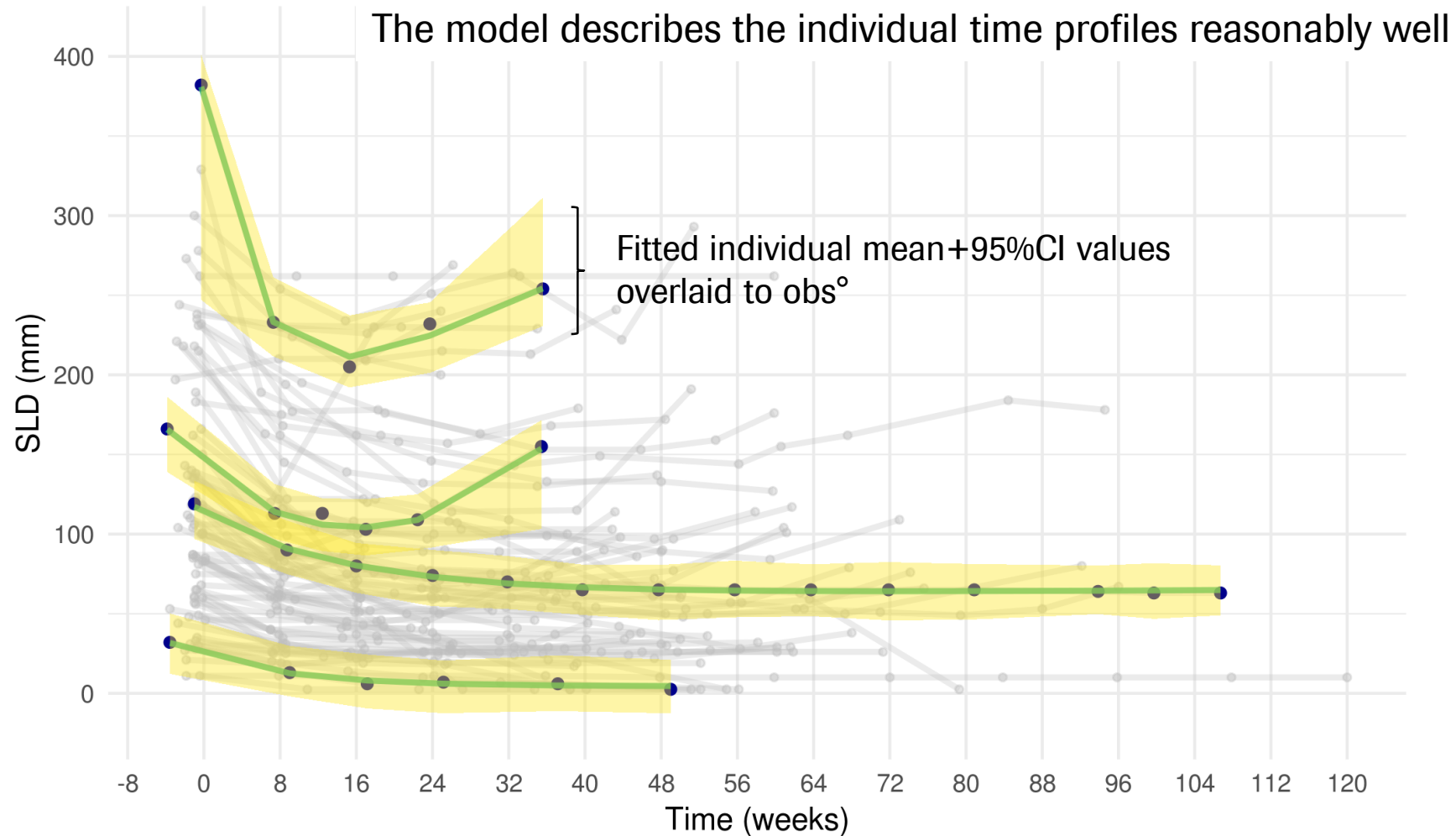
(In-sample) posterior predictive checks

Central tendency



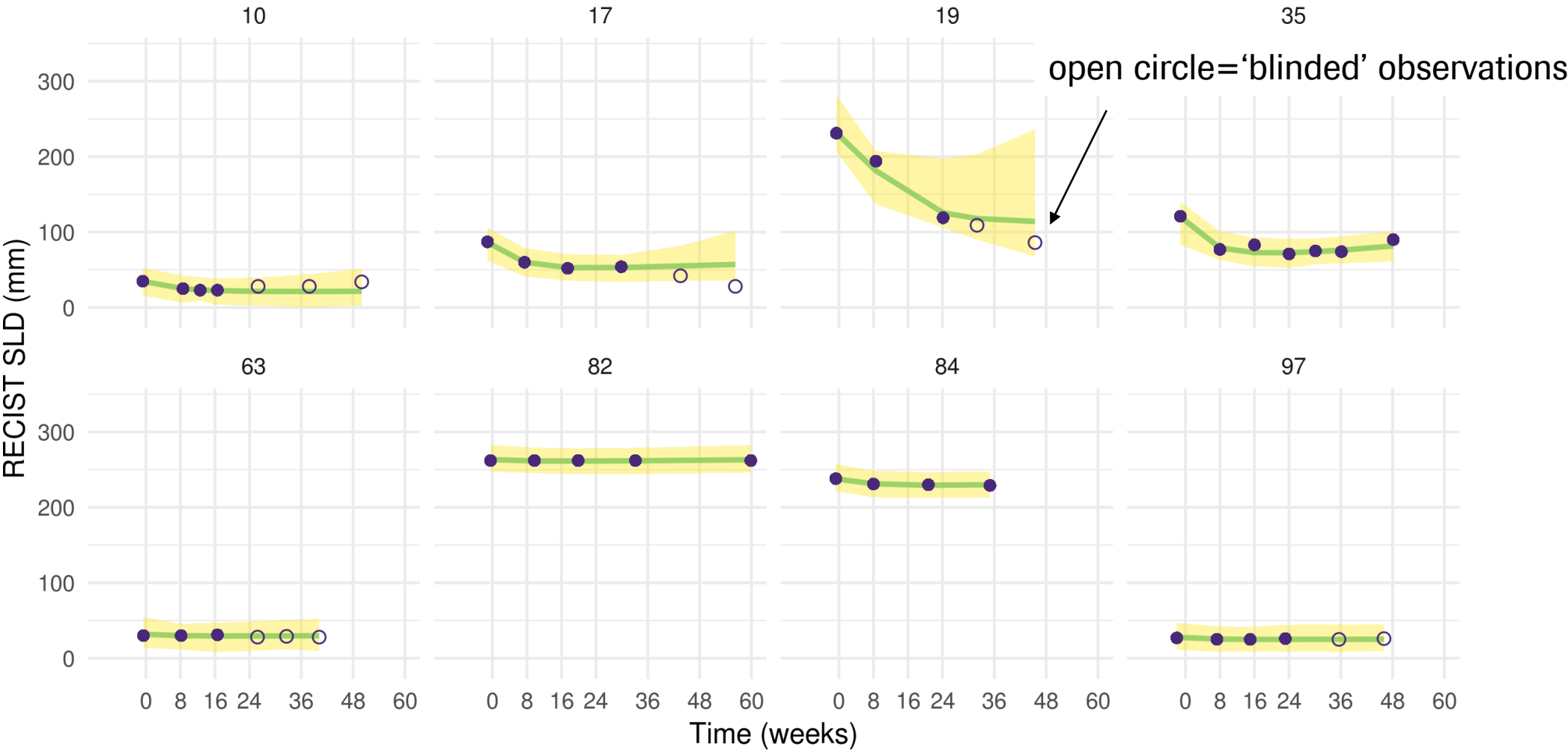
(In-sample) posterior predictive checks

//V



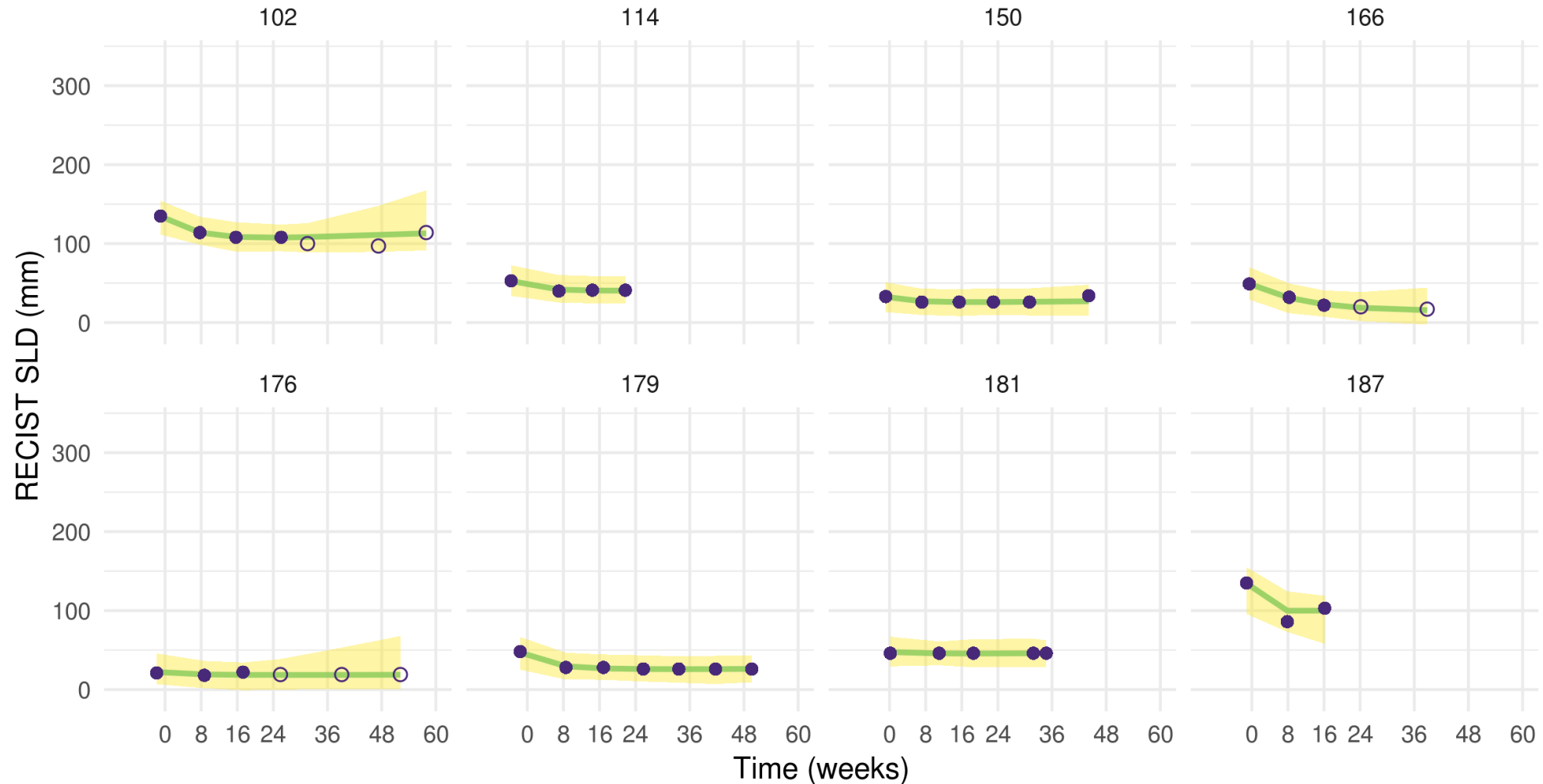
Out of sample predictive check (1/4)

Fit the model with 20% records removed; Confront predictions vs. blinded observations



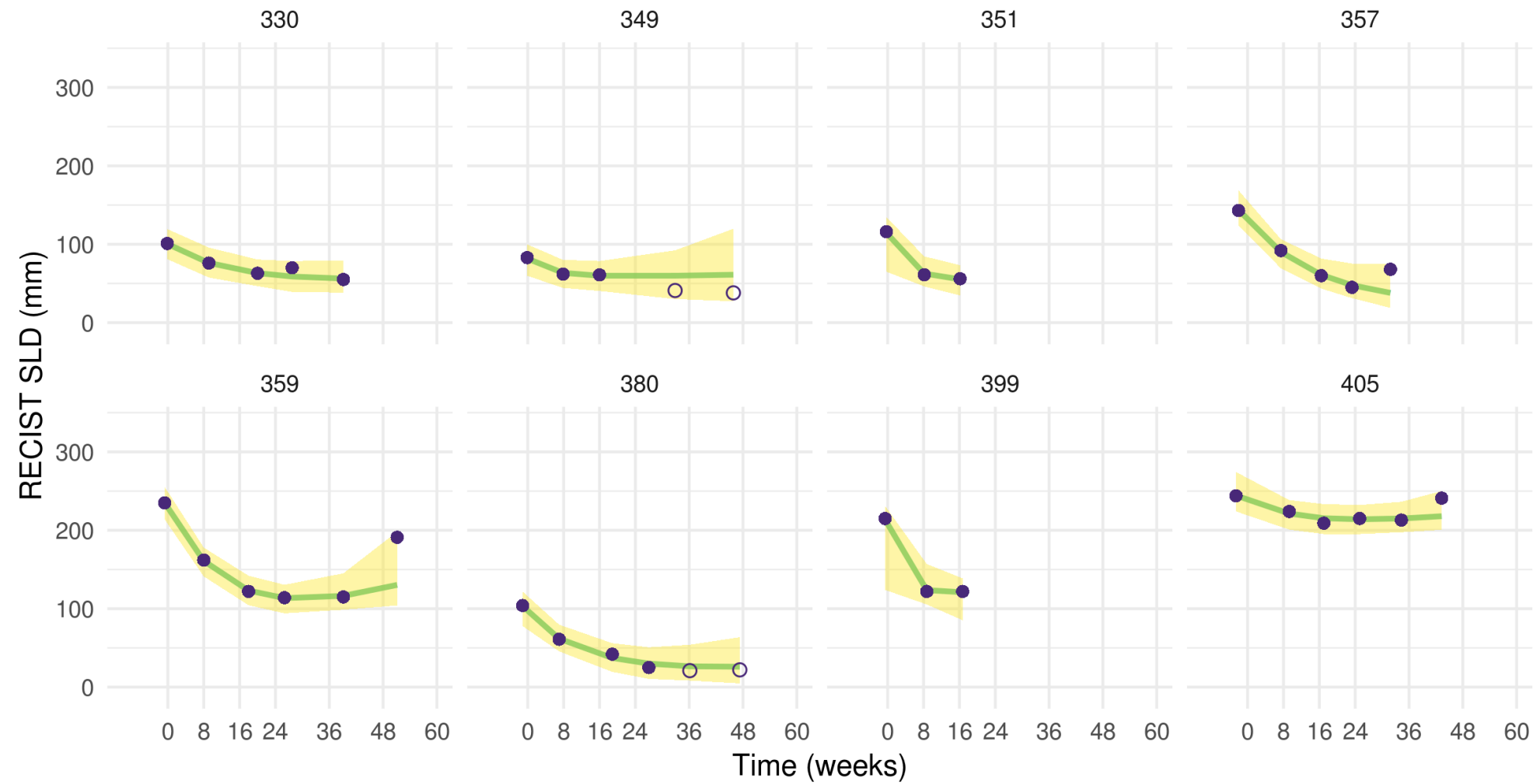
Out of sample predictive check (2/4)

Fit the model with 20% records removed; Confront predictions vs. blinded observations



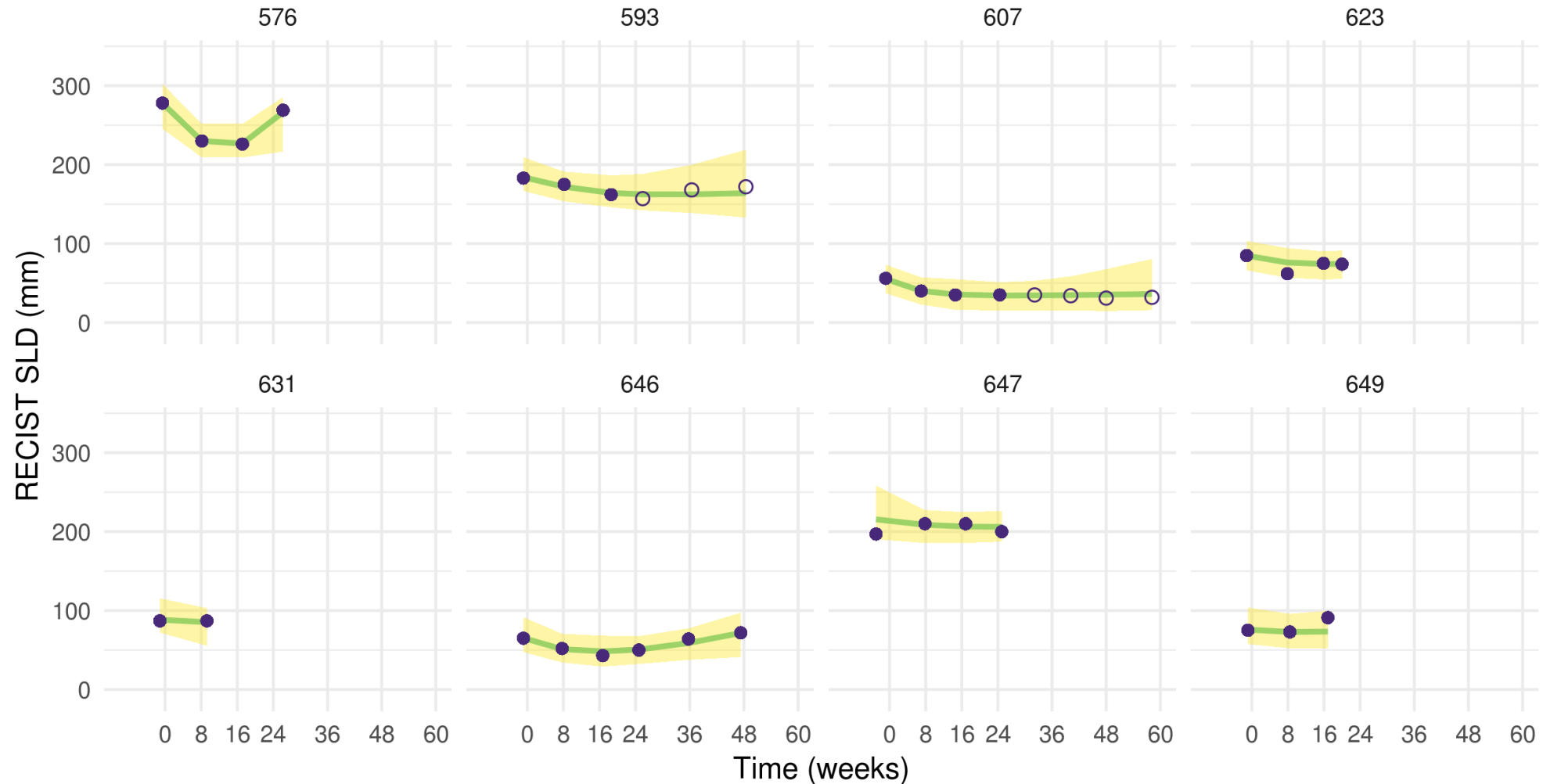
Out of sample predictive check (3/4)

Fit the model with 20% records removed; Confront predictions vs. blinded observations



Out of sample predictive check (4/4)

Fit the model with 20% records removed; Confront predictions vs. blinded observations

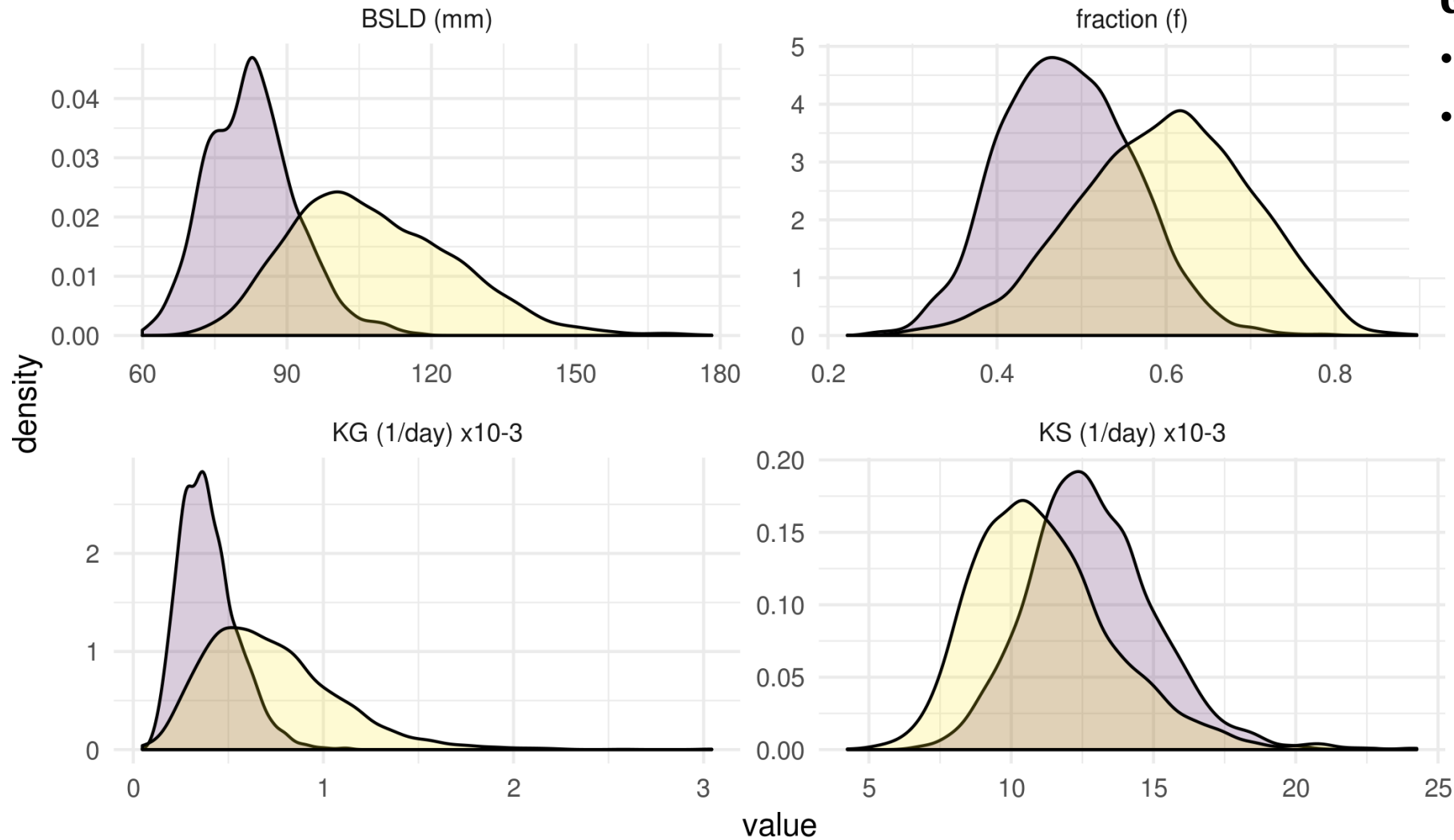


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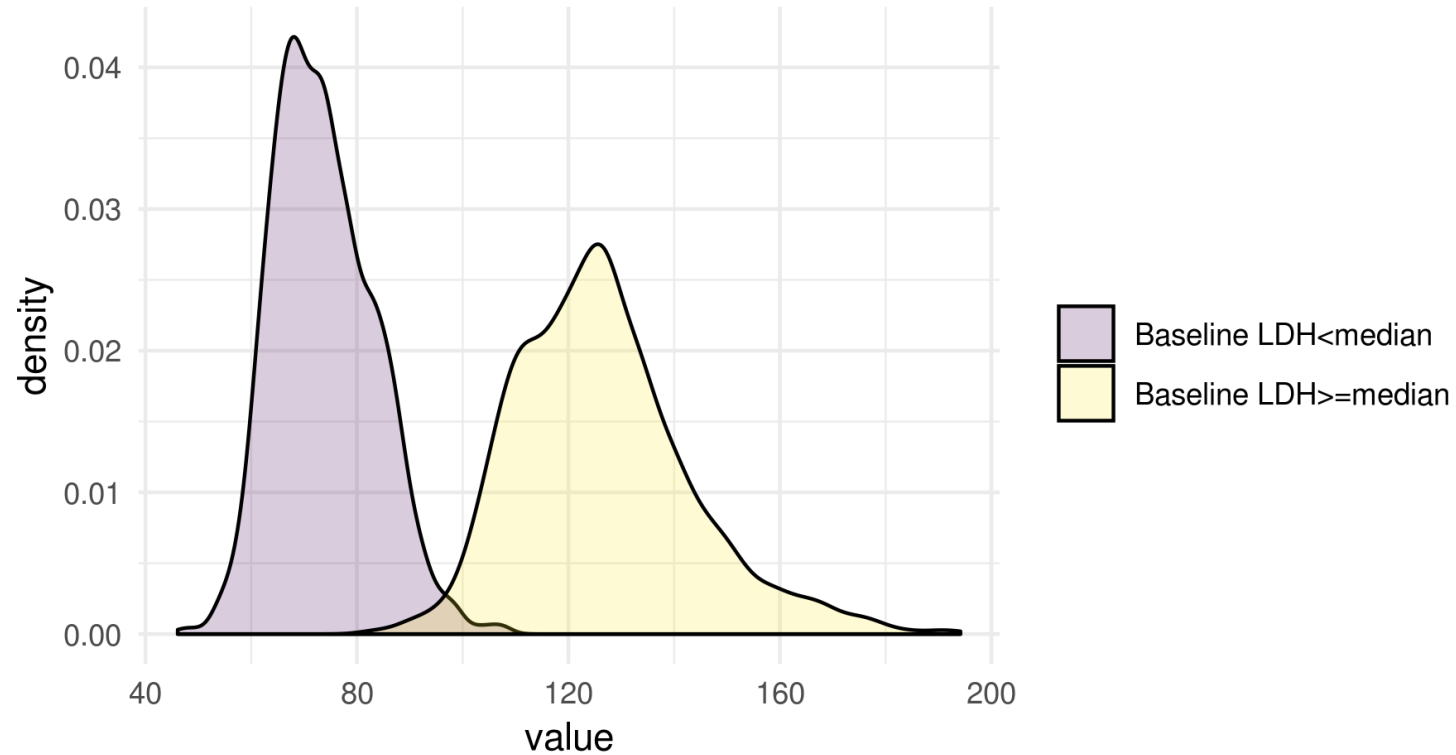
Covariate example 1: Male vs. female



GoF

- LOO-IC=3411
- 10-fold CV IC=5054 (39)
(vs. 4841 w/o Sex)

Covariate example 2: baseline LDH correlated with baseline SLD



GoF

- LOO-IC=3345
- 10-fold CV IC=4634 (37)
(vs. 4841 w/o LDH)

The packages bundle I used ...

Package	Link	Use
brms	https://paul-buerkner.github.io/brms/	Define and fit model, post-processing (summary, plots, predict, ...)
loo	https://mc-stan.org/loo/	Compare models (WAIC, LOO IC, k-fold CV IC)
tidybayes	http://mjskay.github.io/tidybayes/	Post-processing
shinystan	https://mc-stan.org/shinystan/	Check model convergence
stanTuner	https://github.com/jhelvy/stanTuner	Find the parameters of prior distributions (normal, beta, inv.gamma)

Conclusion

- Candidate models and priors
Adequate **transformation** of the parameters is **critical**; Be caution, as the prior and posterior distributions are scaled accordingly
- Recent **wonderful R packages (on top of rstan)** for easy Bayesian models implementation
- Use model for **inference**: ks, kg as efficacy metrics, influence of covariates

Doing now what patients need next