

# Precision Medicine with Imprecise Measurements: Exploring Measurement Error in Personalized Decision Making

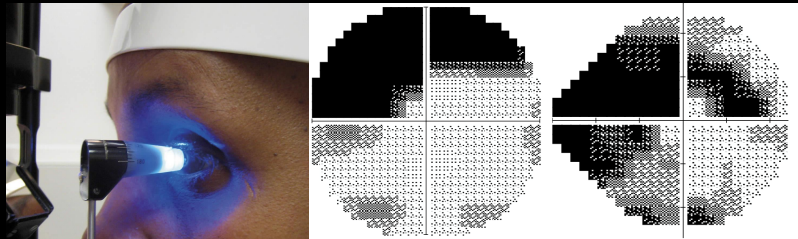
Michael Wallace, University of Waterloo

Slide deck and Shiny app links available at:  
`mpwallace.github.io`

# Glaucoma: One Disease, Many Treatments

Glaucoma: group of eye diseases associated with elevated intraocular pressure (IOP).

Elevated IOP can lead to vision loss.



# Glaucoma: One Disease, Many Treatments

Treatment options attempt to lower IOP (and by extension preserve visual field), they include:

- Lifestyle changes.
- Eye drops (numerous options).
- Surgery.



Treatment decisions based on numerous factors.

Example: Patient is currently taking Azarga eye drops. A personalized treatment rule could be:

*“If current IOP is 15 or higher, add Alphagan eye drops, otherwise continue with only Azarga.”*

- Question: How do we choose the best decision rule?

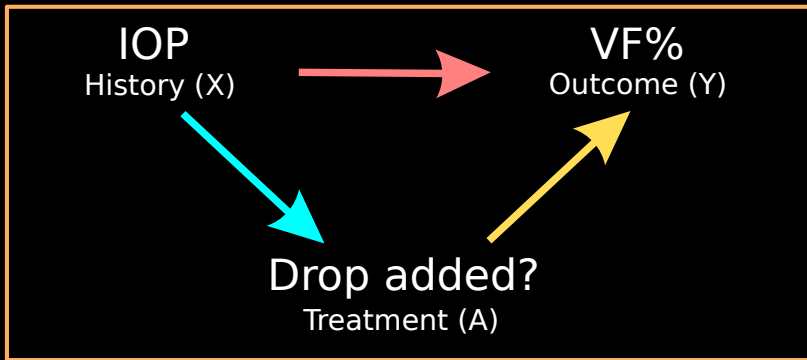
Should our IOP cut-off be 13, 15, 20?

Some hypothetical data:

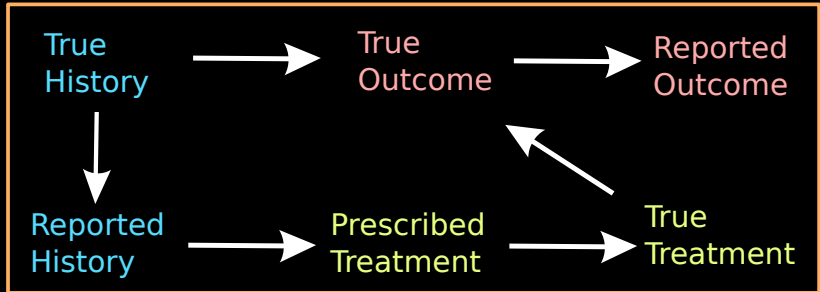
Patient	Observed IOP	Drop added?	VF% at 3 months
1	16	No	73
2	20	Yes	55
3	21	Yes	50
4	16	Yes	61
5	15	No	42
...	...	...	...

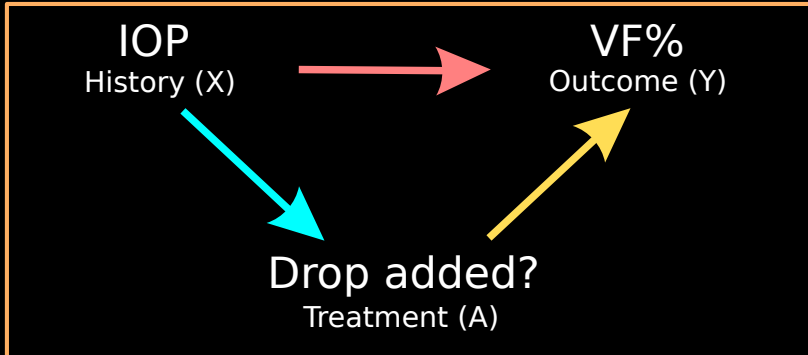
VF% = Visual Field Percentage

Question: How do these variates relate?



Goal: Identify treatment  $A$  that optimizes  $E[Y|X, A]$





First: error-free setting using dWOLS.



# Identifying the best treatment regime

$$\underbrace{E[Y|X, A]}_{\text{Expected outcome (to be maximized)}} \quad A \in \{0, 1\}$$

- We might propose the following model

$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 \text{IOP} + A(\psi_0 + \psi_1 \text{IOP})$$

“Add drop ( $A = 1$ ) if  $\psi_0 + \psi_1 \text{IOP} > 0$ ”

- More generally:

$$\underbrace{E[Y|X, A; \beta, \psi]}_{\text{Expected outcome (to be maximized)}} = \underbrace{G(X; \beta)}_{\text{Treatment-free}} + \underbrace{\gamma(X, A; \psi)}_{\text{Blip}}$$

- Simplifies focus: choose  $A$  that maximizes  $\gamma(X, A; \psi)$ .

# Identifying the best treatment regime

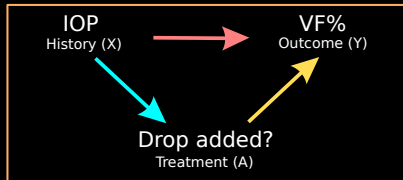
- Suppose the true outcome model is:

$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 \text{IOP} + \beta_2 \text{IOP}^2 + A(\psi_0 + \psi_1 \text{IOP})$$

- But we propose:

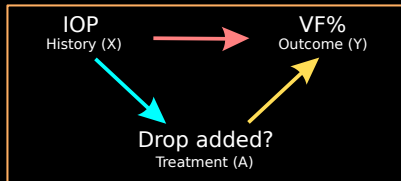
$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 \text{IOP} + A(\psi_0 + \psi_1 \text{IOP})$$

- Problem:  $A$  depends on IOP  $\implies \psi_0, \psi_1$  mis-estimated.
- Solution: Account for this dependency.



$$E[Y|X, A; \beta, \psi] = G(X; \beta) + \gamma(X, A; \psi)$$

- Three models to specify:
  1. Treatment-free model:  $G(X; \beta)$ .
  2. Blip model:  $\gamma(X, A; \psi)$ .
  3. Treatment model:  $P(A = 1|X; \alpha)$ .
- Estimate  $\psi$  via WOLS of  $Y$  on covariates in blip and treatment-free models, with weights  $w = |A - P(A = 1|X; \hat{\alpha})|$ .



# Identifying the best treatment regime

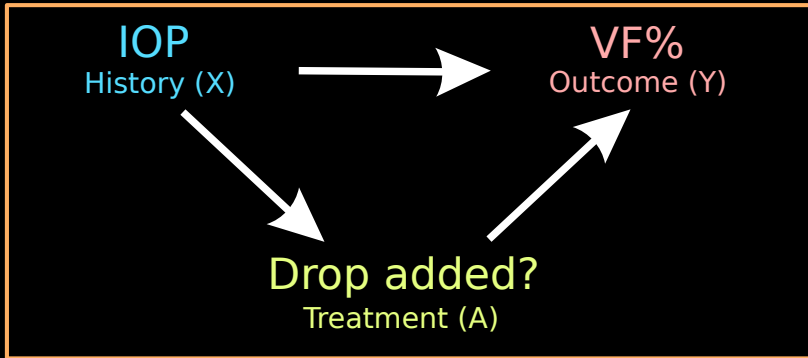
- Suppose the true outcome model is:

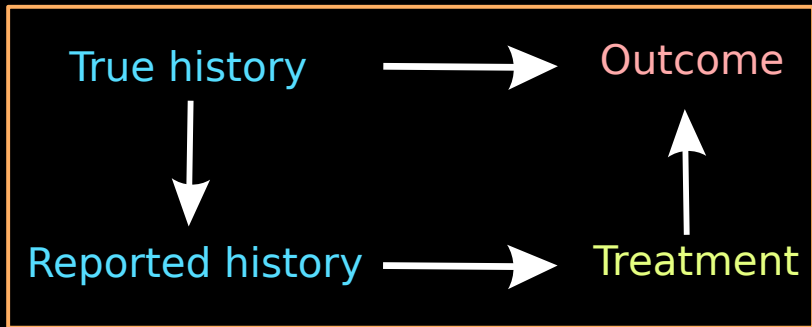
$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 IOP + \beta_2 IOP^2 + A(\psi_0 + \psi_1 IOP)$$

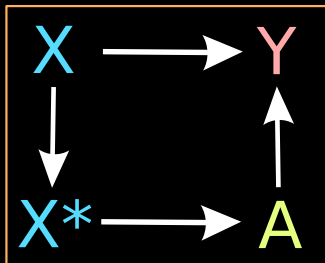
- But we propose:

$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 IOP + A(\psi_0 + \psi_1 IOP)$$

- WOLS with weights  $w = |A - P(A = 1|X; \hat{\alpha})|$  will still yield consistent estimators of  $\psi_0, \psi_1$ .
- Estimators are “doubly robust”: consistent if at least one of treatment-free or treatment components correctly specified.
- The blip must always be correct.







Estimation: suppose the true outcome model is:

$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 X + \beta_2 X^2 + A(\psi_0 + \psi_1 X)$$

but we only observe

$$X^* = X + U \quad U \sim N(\mu_{uX}, \sigma_{uX}^2)$$

← → ↻ shiny.math.uwaterloo.ca/sas/mwallace/ME/dwols/

## Measurement Error and dWOLS

Explore the impact of measurement error on treatment decision rule estimation. Specify which variates are measured with error then click 'Simulate' to generate results. See 'Manual' tab for full details of simulations and input settings. For help or feedback, please contact Michael Wallace at the University of Waterloo through their [webpage](#) or [Twitter](#).

- Error in pre-treatment information (X)?
- Error in treatment (A)?
- Error in outcome (Y)?
- Show advanced options?

Simulate

Summary Table Plot Manual

Is there measurement error in:

- Pre-treatment information? **YES** (error-prone)
- Treatment information? **NO** (error-free)
- Outcome? **NO** (error-free)

Across 100 simulated datasets of size  $n = 500$ , median (IQR) treatment accuracy:

- Using error-free data: **88.10%** (84.95-91.85%)
- Using error-prone data: **82.20%** (80.80-83.40%)

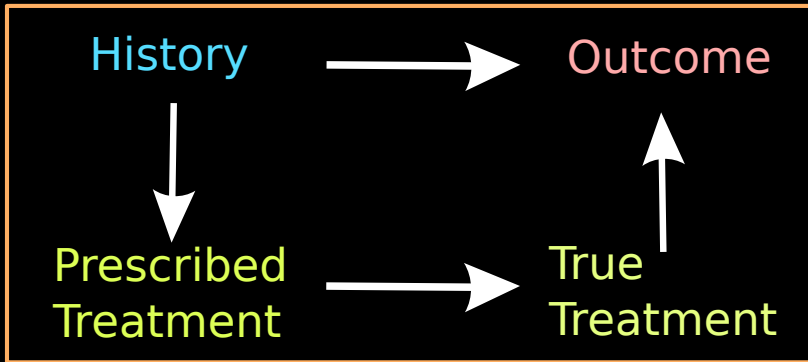
All links available at <https://mpwallace.github.io/>

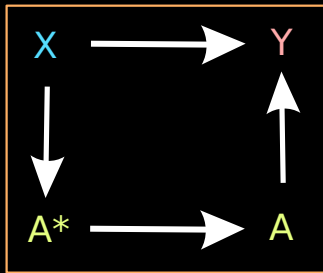


$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 X + \beta_2 X^2 + A(\psi_0 + \psi_1 X)$$

$$X^* = X + U \quad U \sim N(\mu_{ux}, \sigma_{ux}^2)$$

- Much established theory on errors in  $X$  in linear regression.
- Because dWOLS grounded in standard regression theory, existing measurement error correction methods can be used.
- Result: Regression Calibration can be used with dWOLS and maintain double robustness.





For binary  $A$ , misclassification can be characterized by the positive and negative predictive values:

$$PPV = P(A = 1 | A^* = 1) \quad NPV = P(A = 0 | A^* = 0)$$

Key question: Do the misclassification probabilities depend on  $X$ ?

← → ↻ shiny.math.uwaterloo.ca/sas/mwallace/ME/dwols/

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Simulate

Summary

Table

Plot

Manual

Is there measurement error in:

- Pre-treatment information? **NO** (error-free)
- Treatment information? **YES** (independent of X)
- Outcome? **NO** (error-free)

Across 100 simulated datasets of size  $n = 500$ , median (IQR) treatment accuracy:

- Using error-free data: **88.70%** (84.60-92.30%)
- Using error-prone data: **88.00%** (84.75-91.40%)

All links available at <https://mpwallace.github.io/>

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- Show advanced options?

Simulate

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Is there measurement error in:

- Pre-treatment information? **NO** (error-free)
- Treatment information? **YES** (not independent of X)
- Outcome? **NO** (error-free)

Across 100 simulated datasets of size  $n = 500$ , median (IQR) treatment accuracy:

- Using error-free data: **89.10%** (85.70-92.90%)
- Using error-prone data: **31.80%** (26.55-68.00%)

All links available at <https://mpwallace.github.io/>

$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 X + \beta_2 X^2 + A(\psi_0 + \psi_1 X)$$

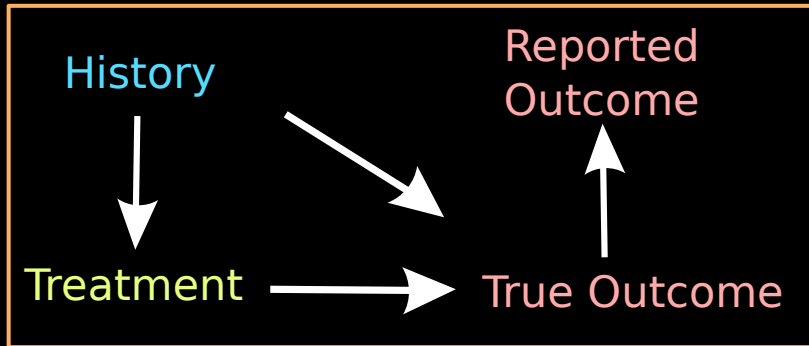
If misclassification does not depend on  $X$ , then our estimates of  $\psi_0, \psi_1$  will be biased:

$$\psi_0^* = (PPV + NPV - 1)\psi_0 \quad \psi_1^* = (PPV + NPV - 1)\psi_1$$

However: our treatment rule is of the form

$$A = 1 \text{ if } \psi_0 + \psi_1 X > 0$$

which is unaffected if  $\psi_0, \psi_1$  are biased by the same factor.



$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 X + \beta_2 X^2 + A(\psi_0 + \psi_1 X)$$
$$Y^* = Y + U \quad U \sim N(\mu_{uy}, \sigma_{uy}^2)$$

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Error in pre-treatment information (X)?

Error in treatment (A)?

Error in outcome (Y)?

Depends on X?

Depends on A?

Simulate

Show advanced options?

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Is there measurement error in:

- Pre-treatment information? **NO** (error-free)
- Treatment information? **NO** (error-free)
- Outcome? **YES** (not independent of X, independent of A)

Across 100 simulated datasets of size  $n = 500$ , median (IQR) treatment accuracy:

- Using error-free data: **87.80%** (84.15-91.65%)
- Using error-prone data: **87.80%** (84.00-91.85%)

Error independent of A:  $\psi$  estimators still consistent.



$$E[Y|X, A; \beta, \psi] = \beta_0 + \beta_1 X + \beta_2 X^2 + A(\psi_0 + \psi_1 X)$$
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Error in pre-treatment information (X)?

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Is there measurement error in:

- Pre-treatment information? **NO** (error-free)
- Treatment information? **NO** (error-free)
- Outcome? **YES** (not independent of X, not independent of A)

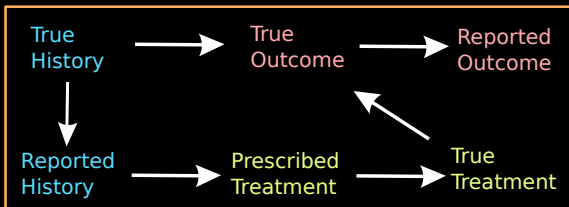
Across 100 simulated datasets of size  $n = 500$ , median (IQR) treatment accuracy:

- Using error-free data: **87.90%** (84.40-91.40%)
- Using error-prone data: **56.20%** (45.75-67.80%)

Error not independent of A:  $\psi$  estimators no longer reliable.

## So where are we now?

- Measurement error an important consideration in all elements of precision medicine problems.
- There are some special cases where errors have limited impact, or may be corrected for with standard theory.
- But: many more cases to explore.



# Looking Ahead: Future Treatment

Suppose we conclude that our treatment rule should be:

“If 3-month average IOP  $\geq 15$  add secondary drop, otherwise, maintain current treatment regime.”

I go to the clinic and my IOP measurement is 16. Then what?

# Looking Ahead: Future Treatment

Exploring these probabilities through a Shiny app:

shiny.math.uwaterloo.ca/sas/mwallace/ME/decisionrule/

## Mistreatment Probabilities

This app explores the probability that an incorrect treatment decision is made as a result of measurement error in a tailoring covariate. Error-prone data of the form  $X^* = X + U$  are generated, with  $X$  and  $U$  normally distributed. A treatment rule of the form "Treat if  $X > t$ " is applied, for some treatment threshold  $t$ . The resulting graph shows the probability that an incorrect treatment decision is made if it is based on the error-prone  $X^*$ . For example, if  $X^* = 16$ ,  $X = 14$ , and the treatment rule is "treat if  $X > 15$ ".

Enter mean of X

16

Enter variance of X

2

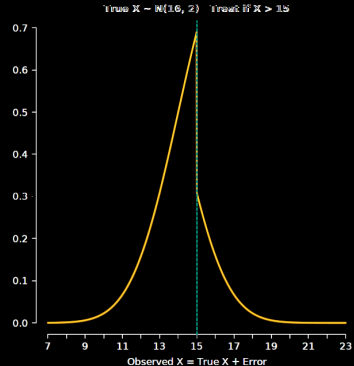
Enter variance of U

2

Enter treatment threshold

15

Adjust plot range



All links available at <https://mpwallace.github.io/>

# Acknowledgments



Dylan Spicker  
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- **dWOLS**: M. P. Wallace and E. E. M. Moodie (2015). Doubly-robust dynamic treatment regimen estimation via weighted least squares. *Biometrics* **71(3)** 636-644.
- **Precision Medicine and Measurement Error in Tailoring Variates**: D. Spicker and M. P. Wallace (2020). Measurement error and precision medicine: error-prone tailoring covariates in dynamic treatment regimes. *Statistics in Medicine* **39(26)**
- **R Package DTRreg**: Available on CRAN.
- **Precision Medicine and Measurement Error More Broadly**: M. P. Wallace. Measurement error and precision medicine. In Cai T., Chakraborty B., Laber E., Moodie E. and van der Laan M. (Eds), Handbook of Statistical Methods for Precision Medicine. Chapman & Hall/CRC Handbooks of Modern Statistical Methods. Expected publication 2023.



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