

Health technology assessment and Stata

Reviewing the old and coding the new

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Stockholm, Sweden

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Unsurprisingly, I mostly failed at both

- Health technology assessment (HTA) is a systematic and multidisciplinary evaluation of the properties of health technologies and interventions covering both their direct and indirect consequences

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- Health technology assessment (HTA) is a systematic and multidisciplinary evaluation of the properties of health technologies and interventions covering both their direct and indirect consequences
- It is a multidisciplinary process that aims to determine the value of a health technology and to inform guidance on how these technologies can be used in health systems around the world.
- It has been described as a bridge that connects the world of research to that of policy making.

<https://www.who.int/health-topics/health-technology-assessment>

A framework for HTA

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- Analysis of a clinical trial with a survival outcome
 - `stmerlin`
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- Combine and compare with existing evidence
 - (Network) meta-analysis `network`, `meta`
 - Matching adjusted indirect comparisons ?

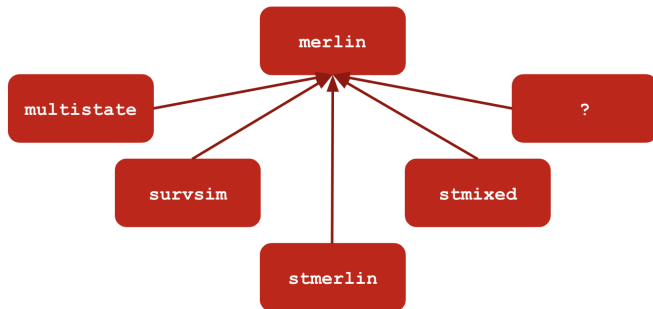
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 - Markov models are the default
- Conduct microsimulation & probabilistic sensitivity analysis
 - `survsim`

A framework for HTA in Stata



Title

merlin — Mixed effects regression for linear, non-linear and user-defined models

See [merlin - a unified framework for data analysis and methods development in Stata](#), for an introduction.

Syntax

```
merlin models [if] [in] [, options]
```

where *models* are the model specifications; see [merlin models](#).

<i>options</i>	Description
model_description_options	fully define, along with <i>models</i> , the model to be fit
estimation_options	method used to obtain estimation results, including specifying initial values
reporting_options	reporting of estimation results

Also see [merlin postestimation](#) for features available after estimation.

An example

- data from 312 patients with PBC collected at the Mayo Clinic 1974-1984 (Murtaugh et al. (1994))
- 158 randomised to receive D-penicillamine and 154 to placebo
- survival outcome is all-cause death, with 140 events observed
 - we're going to pretend we have competing causes of death - cancer and other causes
- 1,945 measurements of serum bilirubin, among other things

data

id	time	logb	prothr~n	trt	stime	cancer	other
1	0	2.674149	12.2	D-penicil	1.09517	1	0
1	.525682	3.058707	11.2	D-penicil	.	.	.
2	0	.0953102	10.6	D-penicil	14.1523	0	1
2	.498302	-.2231435	11	D-penicil	.	.	.
2	.999343	0	11.6	D-penicil	.	.	.
2	2.10273	.6418539	10.6	D-penicil	.	.	.
2	4.90089	.9555114	11.3	D-penicil	.	.	.
2	5.88928	1.280934	11.5	D-penicil	.	.	.
2	6.88588	1.435084	.	D-penicil	.	.	.
2	7.8907	1.280934	.	D-penicil	.	.	.
2	8.83255	1.526056	.	D-penicil	.	.	.

data

id	time	logb	prothr~n	trt	stime	cancer	other
1	0	2.674149	12.2	D-penicil	1.09517	1	0
1	.525682	3.058707	11.2	D-penicil	.	.	.
2	0	.0953102	10.6	D-penicil	14.1523	0	1
2	.498302	-.2231435	11	D-penicil	.	.	.
2	.999343	0	11.6	D-penicil	.	.	.
2	2.10273	.6418539	10.6	D-penicil	.	.	.
2	4.90089	.9555114	11.3	D-penicil	.	.	.
2	5.88928	1.280934	11.5	D-penicil	.	.	.
2	6.88588	1.435084	.	D-penicil	.	.	.
2	7.8907	1.280934	.	D-penicil	.	.	.
2	8.83255	1.526056	.	D-penicil	.	.	.

Let's fit 12 different models, without changing the dataset

```
merlin (logb          /// log serum bilirubin
        time          /// covariate
        ,             /// options
        family(gaussian) /// distribution
    )
```

```
merlin (logb          /// log serum bilirubin
        time          /// covariate
        time#trt      /// interaction
        ,             /// options
        family(gaussian) /// distribution
    )                ///
```

```
merlin (logb                                     /// log serum bilirubin
        time                                     /// covariate
        time#trt                                 /// interaction
        M1[id]@1                                 /// random intercept
        ,                                         /// options
        family(gaussian)                         /// distribution
    )                                             ///
```

```
merlin (logb                                     /// log serum bilirubin
        time                                     /// covariate
        time#trt                                 /// interaction
        M1[id]@1                                 /// random intercept
        time#M2[id]@1                            /// random slope
        ,                                        /// options
        family(gaussian)                        /// distribution
    )
```

```

merlin (logb                                     /// log serum bilirubin
       time                                     /// covariate
       time#trt                                 /// interaction
       M1[id]@1                                 /// random intercept
       time#M2[id]@1                           /// random slope
       ,                                       /// options
       family(gaussian)                       /// distribution
)                                             ///
(pro                                         /// prothrombin index
    rcs(time, df(3))                         /// covariate
    , family(gamma)                          /// distribution
)

```

```

merlin (logb                                     /// log serum bilirubin
        time                                     /// covariate
        time#trt                                 /// interaction
        M1[id]@1                                 /// random intercept
        time#M2[id]@1                           /// random slope
        ,                                        /// options
        family(gaussian)                       /// distribution
    )                                           ///
    (pro                                         /// prothrombin index
        rcs(time, df(3))                       /// covariate
        M3[id]@1                               /// random effect
        , family(gamma)                       /// distribution
    )

```



```

merlin (logb          /// log serum bilirubin
        time          /// covariate
        time#trt      /// interaction
        M1[id]@1      /// random intercept
        time#M2[id]@1 /// random slope
        ,             /// options
        family(gaussian) /// distribution
    )                ///
    (pro             /// prothrombin index
        rcs(time, df(3)) /// covariate
        M3[id]@1      /// random effect
        , family(gamma) /// distribution
    )                ///
    ,               /// main options
    covariance(unstructured) // vcv

```

```

merlin (logb          /// log serum bilirubin
        time          /// covariate
        time#trt      /// interaction
        M1[id]@1      /// random intercept
        time#M2[id]@1 /// random slope
        ,             /// options
        family(gaussian) /// distribution
    )                ///
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        rcs(time, df(3)) /// covariate
        M3[id]@1      /// random effect
        , family(gamma) /// distribution
    )                ///
    ,               /// main options
    covariance(unstructured) /// vcv
    redistribution(t) df(5)  // re dist.

```

```

merlin (logb          /// log serum bilirubin
        time          /// covariate
        time#trt      /// interaction
        M1[id]@1      /// random intercept
        time#M2[id]@1 /// random slope
        ,             /// options
        family(gaussian) /// distribution
    )                ///
    (pro             /// prothrombin index
        rcs(time, df(3)) /// covariate
        M3[id]@1      /// random effect
        , family(gamma) /// distribution
    )                ///
    (stime trt       /// resp. + covariate
        , family(rp, df(3)) /// distribution
            failure(other)) /// event indicator
    )                ///
    ,               /// main options
    covariance(unstructured) /// vcv
    redistribution(t) df(5)  /// re dist.

```

```

merlin (logb          /// log serum bilirubin
        time          /// covariate
        time#trt      /// interaction
        M1[id]@1      /// random intercept
        time#M2[id]@1 /// random slope
        ,              /// options
        family(gaussian) /// distribution
    )
    (pro              /// prothrombin index
        rcs(time, df(3)) /// covariate
        M3[id]@1      /// random effect
        , family(gamma) /// distribution
    )
    (stime trt        /// resp. + covariate
        dEV[logb] EV[pro] /// associations
        , family(rp, df(3)) /// distribution
            failure(other)) /// event indicator
    )
    ,                /// main options
    covariance(unstructured) /// vcv
    redistribution(t) df(5)  /// re dist.

```

```

merlin (logb          /// log serum bilirubin
        time          /// covariate
        time#trt      /// interaction
        M1[id]@1      /// random intercept
        time#M2[id]@1 /// random slope
        ,             /// options
        family(gaussian) /// distribution
    )
    (pro              /// prothrombin index
        rcs(time, df(3)) /// covariate
        M3[id]@1      /// random effect
        , family(gamma) /// distribution
    )
    (stime trt        /// resp. + covariate
        trt#fp(stime, power(0)) /// tde
        dEV[logb] EV[pro] /// associations
        , family(rp, df(3)) /// distribution
            failure(other)) /// event indicator
    )
    ,                /// main options
    covariance(unstructured) /// vcv
    redistribution(t) df(5)  /// re dist.

```

```

merlin (logb time time#trt M1[id]@1          /// model 1
        time#M2[id]@1 ,                      ///
        family(gaussian)                    ///
    )                                         ///
    (pro rcs(time, df(3)) M3[id]@1          /// model 2
      , family(gamma)                      ///
    )                                         ///
    (stime trt                               ///
      trt#fp(stime, power(0))              /// model 3: cause 1
      dEV[logb] EV[pro]                    /// tde
      , family(rp, df(3))                  /// distribution
        failure(other))                    /// event indicator
    )                                         ///
    (stime trt                               /// model 4: cause 2
      trt#rcs(stime, df(3) log)           /// tde
      EV[logb] iEV[pro]                   /// associations
      , family(weibull,                   /// distribution
        failure(cancer))                  /// event indicator
    )                                         ///
    ,                                       ///
    covariance(unstructured)

```

merlin needs a refresh

merlin needs a refresh

- It can do a lot
 - This is great

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- It can do a lot
 - This is great
 - This is not so great

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- It can do a lot
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 - This is not so great
- Priorities
 - Making it faster
 - Allowing factor variables

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Importantly, everything that comes next uses `merlin` under the hood, so if `merlin` gets better, everything else does.

Title

stmerlin — convenience wrapper for estimating a parametric and semi-parametric survival model with **merlin**, optionally including multiple timescales

Syntax

```
stmerlin [indepsyntax] [if] [in] , distribution(model) [, options display_options]
```

where *indep*syntax is a **merlin** linear predictor, which can be anything from a simple *varlist*, to directly specifying spline or fractional polynomial functions of continuous covariates.

You must **stset** your data before using **stmerlin**; see [\[ST\] stset](#).

<i>options</i>	Description
distribution(addrcs)	hazard scale spline model
distribution(@exponential)	exponential model
distribution(cox)	Cox model
distribution(gompertz)	Gompertz model
distribution(ggamma)	generalised gamma
distribution(lognormal)	log normal
distribution(loglogistic)	log logistic
distribution(pwexponential)	piecewise-exponential model
distribution(rp)	Royston–Parmar model
distribution(rcs)	Log-hazard scale spline model
distribution(weibull)	Weibull model

Flexible survival model with stmerlin

```
. webuse brcancer
(German breast cancer data)
. quietly stset rectime, failure(censrec)
. stmerlin hormon, distribution(rp) df(3)
Obtaining initial values
variables created: _rcs1_1 to _rcs1_3
```

Fitting full model:

```
Iteration 0: Log likelihood = -2632.0961
Iteration 1: Log likelihood = -2612.0924
Iteration 2: Log likelihood = -2607.9978
Iteration 3: Log likelihood = -2607.9714
Iteration 4: Log likelihood = -2607.9714
```

Survival model

Number of obs = 686

Log likelihood = -2607.9714

	Coefficient	Std. err.	z	P> z	[95% conf. interval]	
_t:						
hormon	-.3613746	.1248801	-2.89	0.004	-.606135	-.1166142
_cons	-1.192909	.0814642	-14.64	0.000	-1.352576	-1.033243

Warning: Baseline spline coefficients not shown - use ml display

Cox model with multiple timescales

```
. set obs 10000
Number of observations (_N) was 0, now 10,000.
. gen trt = runiform()>0.5
. gen agec = rnormal(50,5) - 50
. gen yearc = 1990 + floor(20*runiform()) - 2000
. survsim stime died, maxtime(5) cov(trt -0.5) ///
> hazard( 0.1:*1.2:*{t}:^0.2 :* ///
> exp( ///
> 0.1 :* (agec :+ {t}) ///
> :+ trt :* 0.1 :* (agec :+ {t}) ///
> :- 0.1 :* (yearc :+ {t}) ///
> ) ///
> )
. qui stset stime, f(died)
. stmerlin trt, dist(cox) time2(df(2) offset(agec) time noorthog) ///
> time3(df(2) offset(yearc) time noorthog)
Obtaining initial values
Fitting full model:
Iteration 0: Log likelihood = -43558.366
Iteration 1: Log likelihood = -43558.364
Survival model Number of obs = 10,000
Log likelihood = -43558.364
```

	Coefficient	Std. err.	z	P> z	[95% conf. interval]	
_t:						
trt	-.1031376	.0282546	-3.65	0.000	-.1585155	-.0477596
racs():1	.1652705	.0101485	16.29	0.000	.1453797	.1851613
racs():2	.0000487	.0000226	2.16	0.031	4.47e-06	.000093
racs():1	-.0949912	.0064554	-14.72	0.000	-.1076435	-.0823389
racs():2	-4.70e-06	.0000326	-0.14	0.885	-.0000686	.0000592

Title

multistate — Multi-state survival analysis

Description

multistate provides a set of commands, described below, for multi-state survival analysis. This includes data preparation tools, obtaining predictions from general continuous time multi-state survival models, both Markov and semi-Markov, and plotting utilities. Transition hazard models must be estimated using the **stmerlin** or **merlin** commands.

There are a number of commands in the **multistate** package, including:

msset is a data preparation tool which converts a dataset from wide (one observation per subject, multiple time and status variables) to long (one observation for each transition of which a subject is at risk).

msboxes creates a descriptive plot of the multi-state process through the transition matrix and numbers at risk.

msaj calculates the non-parametric Aalen-Johansen estimates of transition probabilities, and the length of stay in each state.

predictms calculates a variety of predictions from a Markov or semi-Markov multi-state survival model, including transition probabilities, length of stay (restricted mean time in each state), the probability of ever visiting each state and transition specific hazard and survival functions. Predictions are made at user-specified covariate patterns. Differences and ratios of predictions across covariate patterns can also be calculated. Standardised (study population-averaged) predictions can be obtained. Confidence intervals for all quantities are available. User-defined predictions can also be calculated by providing a user-written Mata function, to provide complete flexibility. **predictms** can be used with a general transition matrix (cyclic or acyclic), and allows the use of transition-specific timescales.

graphs creates stacked transition probability plots, following a **predictms** call.

multistate and HTA

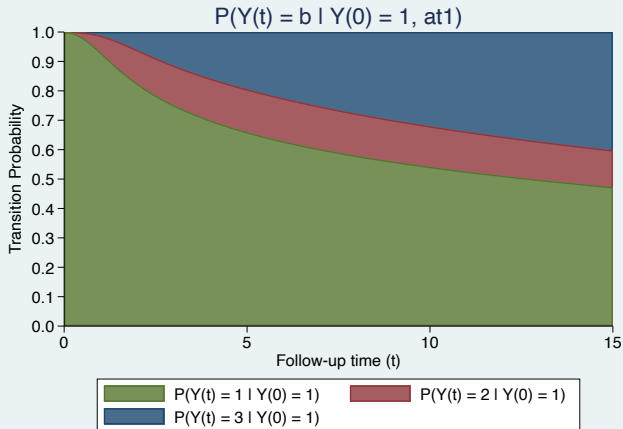
- Markov models are ubiquitous in HTA

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- This assumption is extremely strong, and extremely unlikely

- Markov models are ubiquitous in HTA
- This assumption is extremely strong, and extremely unlikely
- Estimation, prediction and simulation of a non-Markov is not easy in the slightest

multistate and HTA

```
predictms, models(m1 m2 m3) at1(trt 1) probability
```



Title

survsim — Simulate survival data from a parametric distribution, a user-defined distribution, from a fitted **merlin** model, from a cause-specific hazards competing risks model, or from a general multi-state model

Description

survsim simulates survival data from:

help survsim parametric – a parametric distribution including the exponential, Gompertz and Weibull, and 2-component mixtures of them. Baseline covariates can be included, with specified associated log hazard ratios.

Non-proportional hazards can also be included with all models; under an exponential or Weibull model covariates are interacted with log time, under a Gompertz model covariates are interacted with time. See [Crowther and Lambert \(2012\)](#) for more details.

help survsim user – a user-defined distribution. Survival times can be simulated from bespoke, user-defined [log] [cumulative] hazard functions. The function must be specified in Mata code (using colon operators), with survival times generated using a combination of numerical integration and root finding techniques. Time-dependent effects can also be specified with a user-defined function of time. See [Crowther and Lambert \(2013\)](#) for more details.

help survsim model – a fitted **merlin** model. **merlin** fits a broad class of survival models, including standard parametric models, spline-based survival models, and user-defined survival models.

help survsim msm – a competing risks or general multi-state model. Event times can be simulated from transition-specific hazards, where each transition hazard function can be a standard parametric distribution, or a user-defined complex hazard function. Covariates and time-dependent effects can be specified for each transition-specific hazard independently.

```
. survsim, model(m1) maxtime(15)
```

- Bayesian methods are hugely popular in HTA
- Particularly in meta-analysis
- Incorporating prior information is a huge strength, particularly in rare diseases

Bayesian flexible survival analysis - morgana

Title

`morgana` — prefix command for estimating a Bayesian `stmerlin` survival model

Syntax

```
morgana [ , bayesmh_options ] : stmerlin_model
```

Description

The `morgana` prefix command fits Bayesian versions of survival models available with the `stmerlin` command.

`stmerlin` fits survival models, including a range of parametric distributions, flexible spline-based models, and the Cox model. It is a convenience wrapper of the more powerful `merlin` command, but with a much more user-friendly syntax. Time-dependent effects can be specified using restricted cubic splines.

The `merlin` command fits an extremely broad class of mixed effects regression models for linear, non-linear and user-defined outcomes. For full details and many tutorials, take a look at the accompanying website:

reddooranalytics.se/products/merlin

Syncing bayesmh with a likelihood evaluator

```
1  *! version 1.0.0  30aug2023|
2
3  program morgana_ll
4      version 18
5      args lden ${eqns}
6      mata: morgana_ll()
7  end
8
9
10 version 18
11 mata:
12
13 void morgana_ll()
14 {
15     struct merlin_struct scalar gml
16
17     gml = *findexternal(st_global("object"))
18     eqns = tokens(st_global("eqns"))
19     Neqns = cols(eqns)
20     newb = J(1,Neqns,.)
21     for (i=1;i<=Neqns;i++) newb[1,i] = st_numscalar(st_local(eqns[1,i]))
22
23     gml.myb = newb
24     merlin_xb(gml,gml.myb)
25
26     gml.survind = gml.todo = 0
27     if (gml.familys=="rp") {
28         lnL = quadcolsum(merlin_logl_rp(gml,G,H),1)
29     }
30     /*
31      *      other distributions
32      */
33
34     st_numscalar(st_local("lden"),lnL)
35 }
36
37 end
```


Bayesian flexible survival model with morgana & stmerlin

```
. morgana : stmerlin hormon, distribution(rp) df(3)
Obtaining initial values
variables created: _rcs1_1 to _rcs1_3
```

```
Burn-in ...
Simulation ...
Model summary
```

```
Likelihood:
_t ~ morgana_ll({hormon},{_cons1},{_rcs_1_1},{_rcs_1_2},{_rcs_1_3})
Prior:
{hormon _cons1 _rcs_1_1 _rcs_1_2 _rcs_1_3} ~ normal(0,10000)
```

```
Bayesian survival regression          MCMC iterations = 12,500
Random-walk Metropolis-Hastings sampling  Burn-in = 2,500
                                           MCMC sample size = 10,000
                                           Number of obs = 686
                                           Acceptance rate = .2217
                                           Efficiency: min = .05387
                                           avg = .07593
                                           max = .09965

Log marginal-likelihood = -2644.8553
```

	Mean	Std. dev.	MCSE	Median	Equal-tailed [95% cred. interval]	
hormon	-.364192	.1251727	.003965	-.3624191	-.6164516	-.1251256
_cons1	-1.200934	.0787249	.002947	-1.199913	-1.361028	-1.056648
_rcs_1_1	1.61066	.1247576	.005375	1.61113	1.374546	1.865117
_rcs_1_2	.5887768	.1131379	.004268	.5908103	.3721069	.8272459
_rcs_1_3	-.051528	.03358	.001155	-.0512411	-.1216544	.0132672

Adding an informative prior on {hormon}

```
. morgana, prior({hormon}, normal(-0.5,0.03)) : ///  
> stmerlin hormon, distribution(rp) df(3)  
Obtaining initial values  
variables created: _rcs1_1 to _rcs1_3
```

```
Burn-in ...  
Simulation ...  
Model summary
```

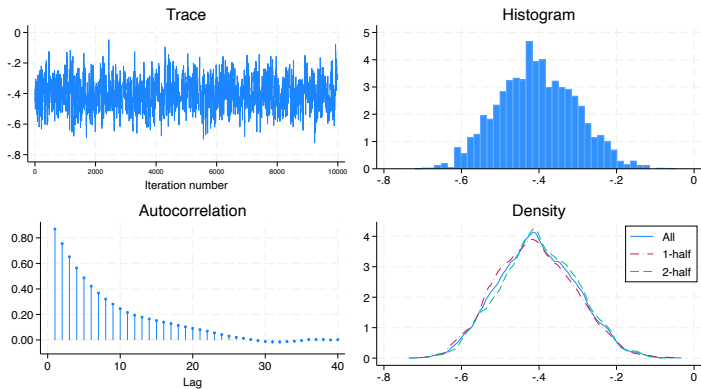
```
Likelihood:  
_t ~ morgana_ll({hormon},{_cons1},{_rcs1_1},{_rcs1_2},{_rcs1_3})  
Priors:  
      {hormon} ~ normal(-0.5,0.03)  
  {_cons1 _rcs1_1 _rcs1_2 _rcs1_3} ~ normal(0,10000)
```

```
Bayesian survival regression          MCMC iterations = 12,500  
Random-walk Metropolis-Hastings sampling  Burn-in = 2,500  
                                          MCMC sample size = 10,000  
                                          Number of obs = 686  
                                          Acceptance rate = .1886  
                                          Efficiency: min = .0246  
                                          avg = .04944  
                                          max = .06889  
  
Log marginal-likelihood = -2638.9597
```

	Mean	Std. dev.	MCSE	Median	Equal-tailed [95% cred. interval]	
hormon	-.4049185	.1003096	.003822	-.4089641	-.5980976	-.2106219
_cons1	-1.18509	.0775748	.003037	-1.183455	-1.340632	-1.039873
_rcs1_1	1.604934	.1259947	.005818	1.59776	1.369986	1.872174
_rcs1_2	.5846417	.1146586	.005626	.5770516	.3746932	.8246799
_rcs1_3	-.0520245	.0357107	.002277	-.051204	-.1203669	.0189753

bayesgraph diagnostic {hormon}

hormon



What I would like

```
. predict s, survival time(timevar) at(hormon 1)
```

- Not so easy to generalise
- Feasible for one specific timepoint

What I would like

```
. predict s, survival time(timevar) at(hormon 1)
```

- Not so easy to generalise
- Feasible for one specific timepoint

Multilevel & multiple outcomes

```
. morgana : merlin (y ... M1[id]@1, family(gaussian)) ///  
                  (...)(...)
```

Summary & future work

- The ecosystem around `merlin` is growing, along with its user base
- There's a lot to do to make it more usable
- I promised a new command called `maic` for Matching-Adjusted Indirect Comparison



merlin stands for *Mixed Effects Regression for Linear, Non-linear and user-defined models*. merlin has the capabilities to fit a linear regression or a Weibull survival model, a three-level logistic mixed effects model, or a multivariate joint model of multiple longitudinal outcomes (of different types) and a recurrent event and survival with non-linear effects... the list is rather endless.

reddooranalytics.se/products/merlin