

# 4-step longitudinal analysis of latent traits derived from measurement scales in chronic diseases: quality-of-life in multiple system atrophy

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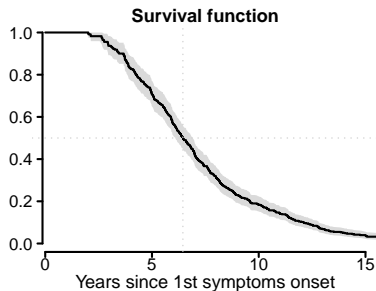
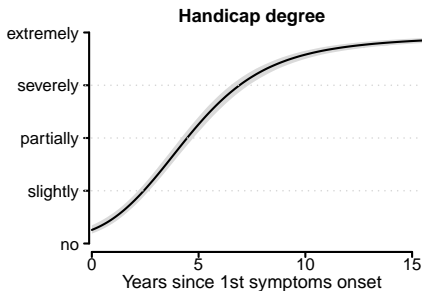
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A. Foubert-Samier, C. Proust-Lima

# Multiple-System Atrophy (MSA)

- neurodegenerative and rare disease  
prevalence around 5,000 cases in France
- Parkinsonian syndrome, cerebellar syndrome, dysautonomic disorders
- fast progression, fatal prognostic, no cure treatment
- potential accelerated model of Parkinson's disease

# French MSA cohort

- Bordeaux and Toulouse hospitals = national reference MSA centre
- open cohort, created in 2007
- > 700 patients
- complete annual follow-ups with clinical assessment



# Quality-of-Life (QoL)

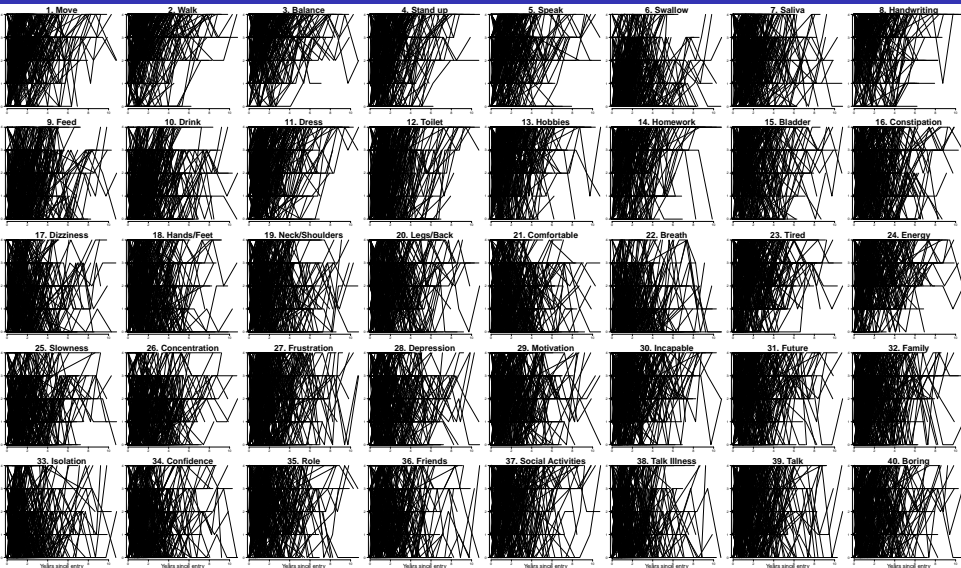
- reflects patients' perception about their health condition
- focus on patients' feelings
  - crucial information to deliver better support
  - FDA requirement: new treatments must improve QoL

# MSA-QoL scale

In the last 4 weeks have you ...	No	Slight	Moderate	Marked	Extreme
1. Had difficulty moving?					
2. Had difficulty walking?					
3. Had problems with your balance?					
4. Had difficulty standing up without support?					
5. Had difficulty speaking?					
6. Had difficulty swallowing food?					
7. Had too much saliva or drooling?					
8. Had difficulty with handwriting?					
9. Had difficulty feeding yourself?					
10. Had difficulty drinking fluids?					
11. Had difficulty dressing yourself?					
12. Needed help to go to the toilet?					
13. Had to stop doing things that you liked to do, e.g. your hobbies?					
14. Had difficulty doing things around the house, e.g. housework?					
15. Experienced bladder problems?					
16. Experienced problems with constipation?					
17. Experienced dizziness when standing up?					
18. Suffered from cold hands or feet?					
19. Experienced pain in your neck or shoulders?					
20. Experienced pain elsewhere, e.g. in your legs or your back?					
21. Had difficulty getting comfortable during the night?					
22. Had difficulty breathing during the night?					
23. Been feeling tired very quickly (without exerting yourself)?					
24. Experienced lack of energy?					
25. Experienced slowness of thinking?					
26. Had difficulty with your concentration, e.g. reading or watching TV?					
27. Felt frustrated?					
28. Felt depressed?					
29. Experienced a loss of motivation?					
30. Been feeling incapable?					
31. Worried about the future?					
32. Worried about your family?					
33. Felt on your own or isolated?					
34. Experienced loss of confidence when interacting with others?					
35. Felt that your role in your family or among friends has changed?					
36. Experienced difficulty seeing your friends?					
37. Had to give up social activities, e.g. going out for a meal, participating in events?					
38. Had difficulty talking to friends about your illness?					
39. Been embarrassed to talk to people?					
40. Felt that life has become boring?					

- specific to MSA
- developed in 2008, by A. SCHRAG team
- 40 ordinal items
- 5 levels :
  0. no problem,
  1. slight,
  2. moderate,
  3. marked,
  4. extreme

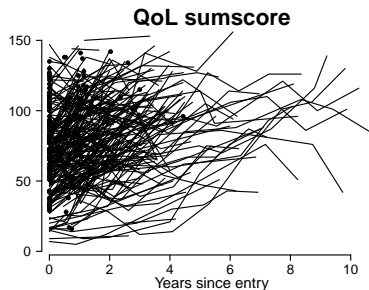
# MSA-QoL data



# Summarize multivariate data : Sumscore

## Sumscore

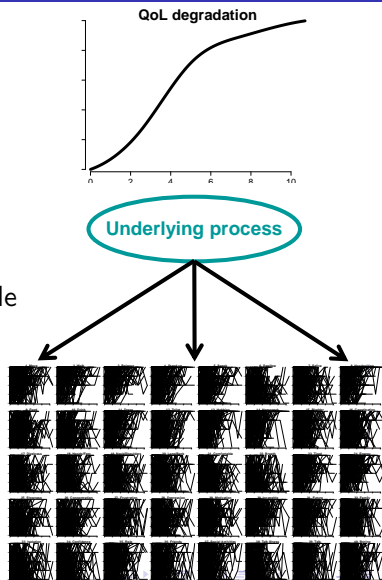
- loss of information
- no distinction between items
- missing item not allowed
- ...



# Summarize multivariate data : Underlying process

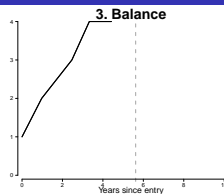
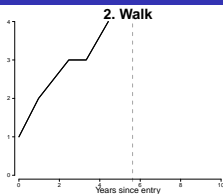
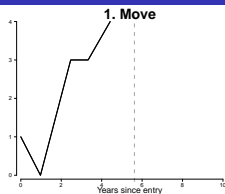
## Underlying process

- creation of a *latent variable*
- not directly measurable or observable





# Other statistical challenges



...

## Challenges

- follow-up / repeated measures
- ordinal outcomes
- death occurrence → [informative] dropout
- multi-dimensionality : not only one quantity of interest

→ **4-step strategy of analysis**

# Cohort description (N = 536)

Characteristics at inclusion	N (%)	mean $\pm$ sd
Sex female (vs male)	268 (50.0%)	
Subtype MSA-P (vs MSA-C)	363 (67.7%)	
Certainty Probable (vs Possible)	400 (74.6%)	
Age at study inclusion		65.1 $\pm$ 8.0
Care delay		4.5 $\pm$ 2.4
Orthostatic hypotension yes (vs no)	361 (67.4%)	
Urinary disorder yes (vs no)	365 (68.1%)	
Handicap degree		
Completely independent (stage I)	111 (20.7%)	
Not completely independent (stage II)	239 (44.6%)	
More dependent (stage III)	105 (19.6%)	
Very dependent (stage IV)	63 (11.8%)	
Totally dependent (stage V)	2 (3.0%)	
Characteristics during follow up		
Visits	1501	
Visits per patient		2.8 $\pm$ 1.9
Years of follow-up		2.5 $\pm$ 2.4
Dropouts	87 (16.2%)	
Deaths	338 (63.1%)	

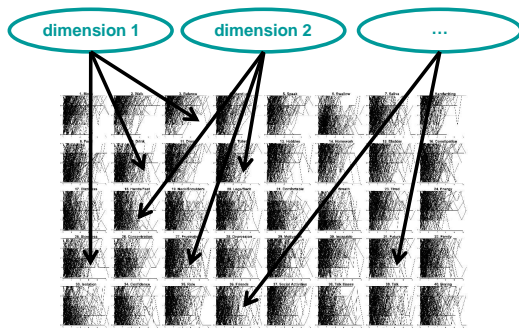
# Step 1 : Identify scale sub-dimensions

## PROMIS method

(B.B. REEVE et al., 2007)

### 3 hypotheses of scale calibration

- **Unidimensionality**  
items from a same  
sub-dimension measure  
the same phenomenon  
→ *factorial analyses*
- Conditional independance
- Increasing monotonicity



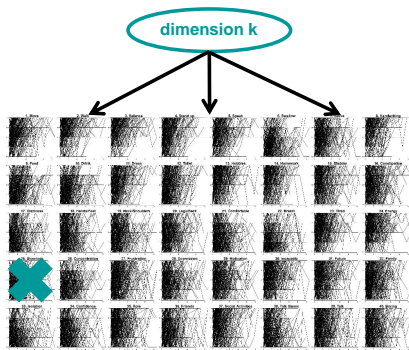
# Step 1 : Identify scale sub-dimensions

## PROMIS method

(B.B. REEVE et al., 2007)

### 3 hypotheses of scale calibration

- Unidimensionality
- **Conditional independance**  
no redundant information  
between items from  
a same sub-dimension  
→ *residual correlations*
- Increasing monotonicity



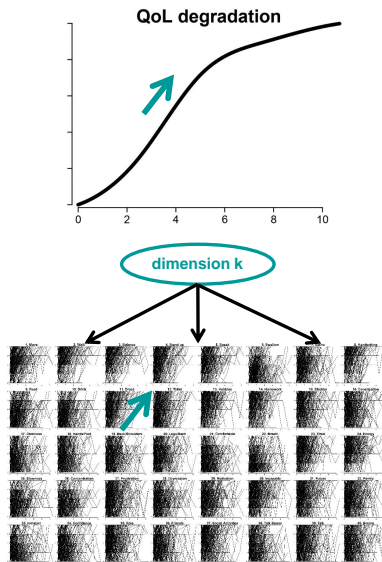
# Step 1 : Identify scale sub-dimensions

## PROMIS method

(B.B. REEVE et al., 2007)

### 3 hypotheses of scale calibration

- **Unidimensionality**
- **Conditional independance**
- **Increasing monotonicity**  
the higher the item level,  
the higher the degradation level  
→ *endorsement probabilities*



# Step 1 : MSA-QoL sub-dimensions

ORIGINAL MSA-QoL SCALE	MOTOR	1. Had difficulty moving?
		2. Had difficulty walking?
		3. Had problems with your balance?
		4. Had difficulty standing up without support?
		5. Had difficulty speaking?
		6. Had difficulty swallowing food?
		7. Had too much saliva or drooling?
		8. Had difficulty with handwriting?
		9. Had difficulty feeding yourself?
		10. Had difficulty drinking fluids?
		11. Had difficulty dressing yourself?
		12. Needed help to go to the toilet?
		13. Had to stop doing things that you liked to do, e.g. your hobbies?
		14. Had difficulty doing things around the house, e.g. housework?
	NON-MOTOR	15. Experienced bladder problems?
		16. Experienced problems with constipation?
		17. Experienced dizziness when standing up?
		18. Suffered from cold hands or feet?
		19. Experienced pain in your neck or shoulders?
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		21. Had difficulty getting comfortable during the night?
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		23. Been feeling tired very quickly (without exerting yourself)?
		24. Experienced lack of energy?
		25. Experienced slowness of thinking?
		26. Had difficulty with your concentration, e.g. reading or watching TV?
	EMOTIONAL / SOCIAL	27. Felt frustrated?
		28. Felt depressed?
		29. Experienced a loss of motivation?
		30. Been feeling incapable?
		31. Worried about the future?
		32. Worried about your family?
		33. Felt on your own or isolated?
		34. Experienced loss of confidence when interacting with others?
		35. Felt that your role in your family or among friends has changed?
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		40. Felt that life has become boring?

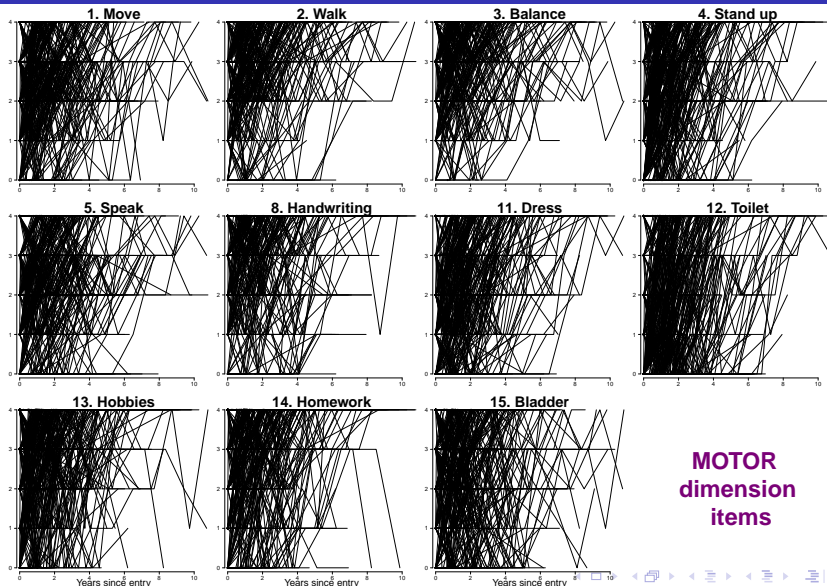
# Step 1 : MSA-QoL sub-dimensions

ORIGINAL MSA-QoL SCALE	MOTOR	1. Had difficulty moving?	MOTOR
		2. Had difficulty walking?	
		3. Had problems with your balance?	
		4. Had difficulty standing up without support?	
		5. Had difficulty speaking?	
		6. Had difficulty swallowing food?	FOOD
		7. Had too much saliva or drooling?	INTAKE
		8. Had difficulty with handwriting?	MOTOR
		9. Had difficulty feeding yourself?	FOOD
		10. Had difficulty drinking fluids?	INTAKE
	MOTOR	11. Had difficulty dressing yourself?	MOTOR
		12. Needed help to go to the toilet?	
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	EMOTIONAL / SOCIAL	25. Experienced slowness of thinking?	X
		26. Had difficulty with your concentration, e.g. reading or watching TV?	NON-MOTOR
		27. Felt frustrated?	EMOTIONAL / SOCIAL
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## Hypotheses :

- **Unidimensionnality**
  - 4 sub-dimensions (instead of 3)
  - similarity with the original scale
- **Conditional independance**
  - item 25 redundant with item 26
- **Increasing monotonicity**
  - checked ✓

# Step 2 : Model each sub-dimension evolution





## Step 2 : Longitudinal submodel structure

### Item Response Theory (IRT) model Graded Response model framework

#### Dimension process

*linear mixed model*

$$\Delta_i(t) = X_i^\top(t)\beta + Z_i^\top(t)b_i$$

with  $b_i \sim \mathcal{N}(0, B)$

#### Items

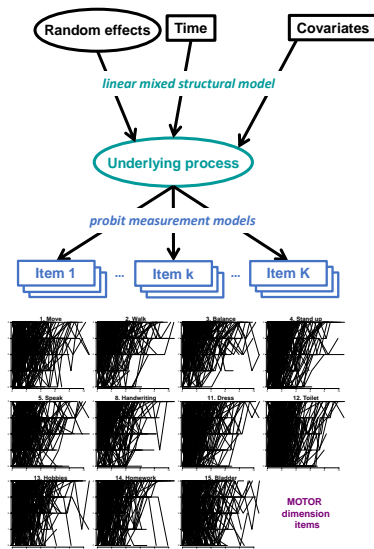
*cumulative probit models*

$$Y_{ik}(t) = m$$

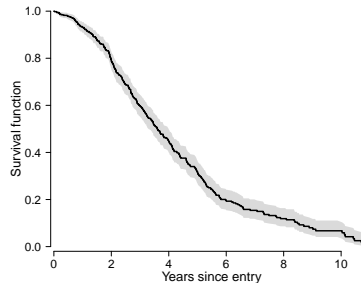
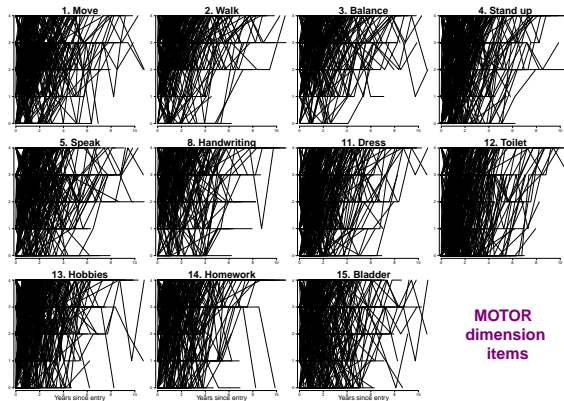
$$\Leftrightarrow \eta_{k,m} < \Delta_i(t) + \epsilon_{ik}(t) \leq \eta_{k,m+1}$$

with  $\epsilon_{ik} \sim \mathcal{N}(0, \sigma_k^2)$ ;  $m \in \{1, \dots, M_k\}$ ;

$$-\infty = \eta_{k,1} \leq \dots \leq \eta_{k,m} \leq \dots \leq \eta_{k,M_k+1} = +\infty$$



## Step 2 : Informative dropout



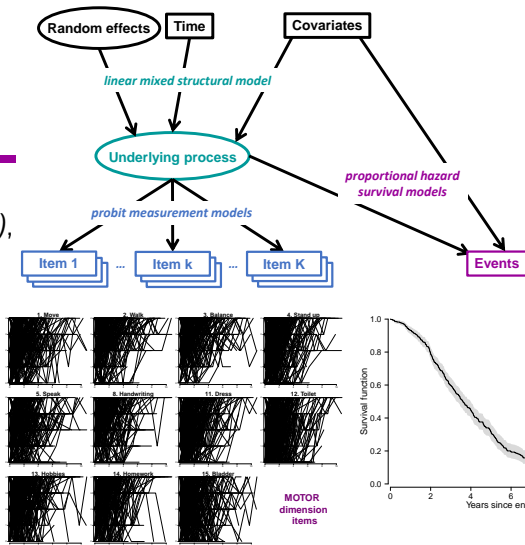
# Step 2 : Survival submodel structure

## IRT model in the **Joint** framework

### Survival part

proportional hazard model(s),  
cause  $p$

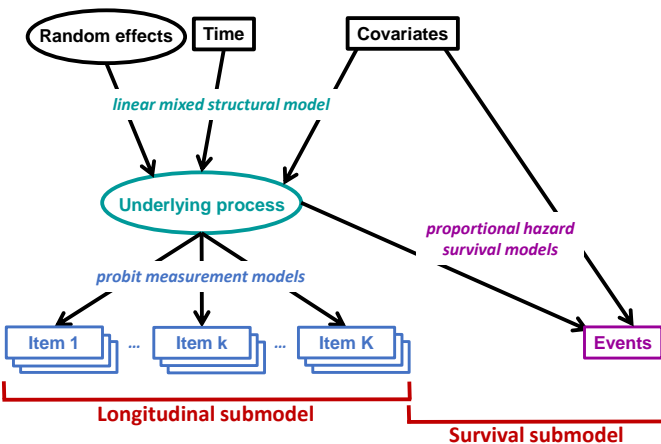
$$\lambda_{ip}(t) = \lambda_{0p}(t; \psi_p) \exp(X_{pi}^T \gamma_p) \times \exp(\Delta_i(t) \alpha_p)$$



## Step 2 : Joint latent process model (JLPM)

### Joint latent process model (JLPM)

based on **Graded Response models** from **Item Response Theory (IRT)**,  
and extended to the **Joint framework**



**implementation**  
R-package **JLPM**  
available on CRAN

**publication**  
Saulnier T. et al.,  
(2022) Methods

## Step 2 : Maximum likelihood estimation

vector of all parameters

$$\Theta = ( \underbrace{\beta, B}_{\text{structural model}}, \underbrace{(\eta_{k,m})_{k,m}, (\epsilon_k)_k}_{\text{measurement models}}, \underbrace{(\psi_p)_p, (\gamma_p)_p, (\alpha_p)_p}_{\text{survival model(s)}}^T$$

**log-likelihood**

$$\mathcal{L}(\Theta) = \sum_{i=1}^N \log L_i(\Theta)$$

with **individual contribution**

$$\begin{aligned} L_i(\Theta) &= f_{Y_i, (T_i, \delta_i)}(Y_i, (T_i, \delta_i); \Theta) \\ &= \int_{\mathbb{R}^q} \prod_{k=1}^K \{f_{Y_{ik}|b_i}(Y_{ik}|b; \Theta)\} f_{(T_i, \delta_i)|b_i}((T_i, \delta_i)|b; \Theta) f_{b_i}(b; \Theta) db \end{aligned}$$

## Step 2 : JLPM algorithms

- **optimisation** algorithm : Marquardt-Levenberg (MLA)
- **integral approximation** algorithms :
  - Quasi-Monte-Carlo (QMC)

$$L_i(\Theta) = \int_{\mathbb{R}^q} \prod_{k=1}^K \{f_{Y_{ik}|b_i}(Y_{ik}|b; \Theta)\} f_{(T_i, \delta_i)|b_i}((T_i, \delta_i)|b; \Theta) f_{b_i}(b; \Theta) db$$

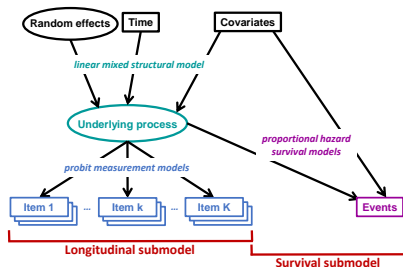
- Gauss-Kronrod Gaussian quadrature with 15 points

$$S_i(t|b; \Theta) = \prod_{p=1}^P \exp\left(-\int_0^t \lambda_{ip}(s|b; \Theta) ds\right)$$

## Step 2 : Specification of MSA-QoL dimensions' models

### Dimension process *linear mixed model*

$$\Delta_i(t) = t \cdot \beta_1 + X_{i,sex}\beta_2 + X_{i,diagnosis}\beta_3 + X_{i,certainty}\beta_4 + X_{i,age.0}\beta_5 + X_{i,orth.hypo.0}\beta_6 + X_{i,urin.dis.0}\beta_7 + X_{i,care.delay}\beta_8 + X_{i,ttt}(t)\beta_9 + b_{0i} + t \cdot b_{1i} \quad \text{with } b_i = (b_{0i}, b_{1i})^\top \sim \mathcal{N}(0, B)$$



### Items *cumulative probit models*

$$Y_{ik}(t) = m \Leftrightarrow \eta_{k,m} < \Delta_i(t) + \epsilon_{ik}(t) \leq \eta_{k,m+1} \quad \forall \text{ item } k, \text{ level } m$$

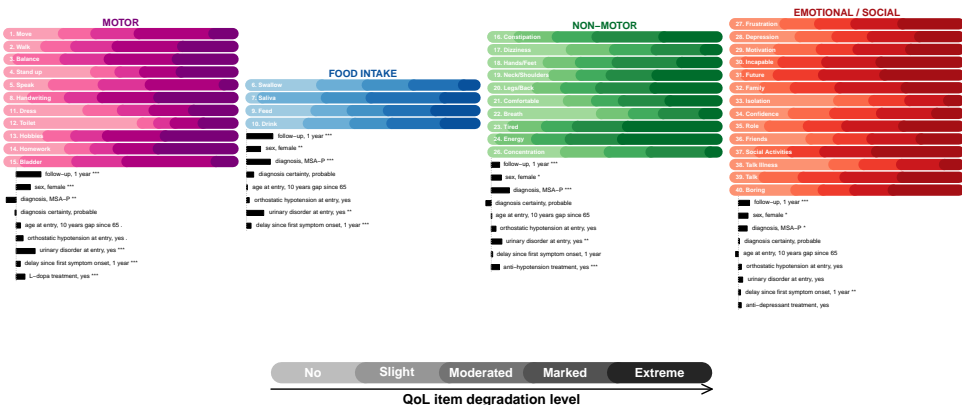
with  $\epsilon_{ik} \sim \mathcal{N}(0, \sigma_k^2)$ ;  $m \in \{1, \dots, M_k\}$

### Survival part *proportional hazard model*, death cause

$$\lambda_i(t) = \lambda_0(t; \Psi) \exp(\Delta_i(t)\alpha)$$

with  $\lambda_0(\cdot)$  Weibull function

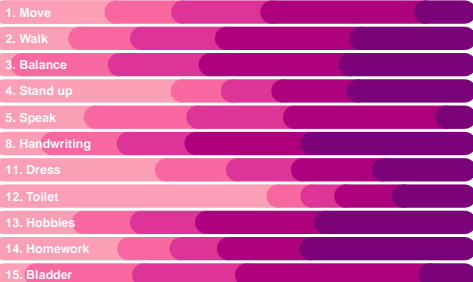
# Step 2 : MSA-QoL sub-dimensions evolution





# Step 2 : ZOOM on MOTOR sub-dimension evolution

## MOTOR



← **Items**

$$Y_{ik}(t) = m$$

$$\Leftrightarrow \eta_{k,m} < \Delta_i(t) + \epsilon_{ik}(t) \leq \eta_{k,m+1}$$

follow-up, 1 year \*\*\*

sex, female \*\*\*

diagnosis, MSA-P \*\*

diagnosis certainty, probable

age at entry, 10 years gap since 65 .

orthostatic hypotension at entry, yes .

urinary disorder at entry, yes \*\*\*

delay since first symptom onset, 1 year \*\*\*

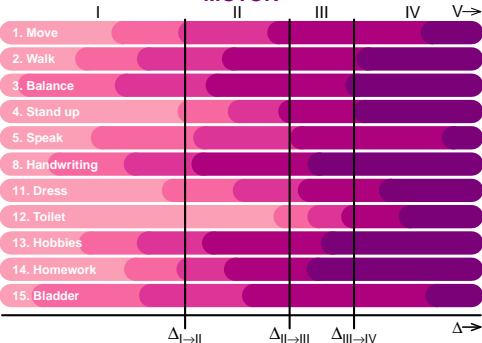
L-dopa treatment, yes \*\*\*

← **Dimension process**

$$\Delta_i(t) = X_i^\top(t)\beta + Z_i^\top(t)b_i$$

# Step 3 : MOTOR sub-dimension linked to disease stages

## MOTOR



Projection of disease stages  
on QoL sub-dimensions' evolution

## MSA stages

**I** completely independent

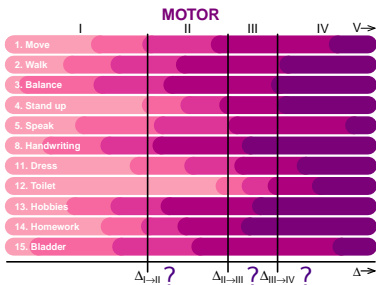
**II** not completely independent

**III** more dependent

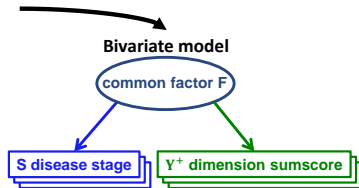
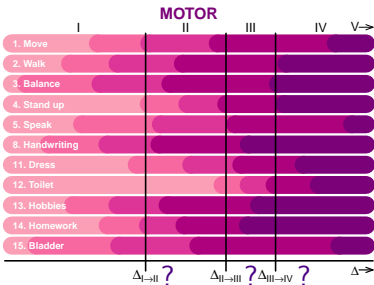
**IV** very dependent

**V** totally dependent, helpless

# Step 3 : Projecting disease stages



# Step 3 : Projecting disease stages



with R-package **JLPM**

## disease stage S

ordinal outcome with 5 levels  
cumulative probit model

$$S_i(t) = s$$

$$\Leftrightarrow \eta_s < F_i(t) + \epsilon_i(t) \leq \eta_{s+1}$$

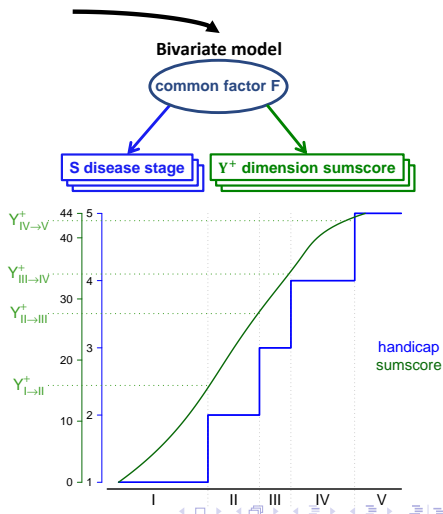
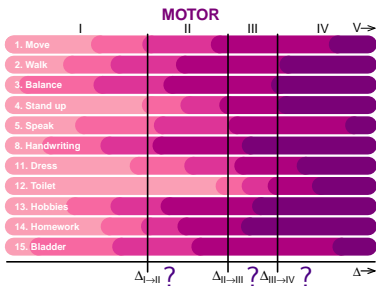
## dimension sumscore $Y^+$

continuous (non-Gaussian) outcome  
curvilinear model

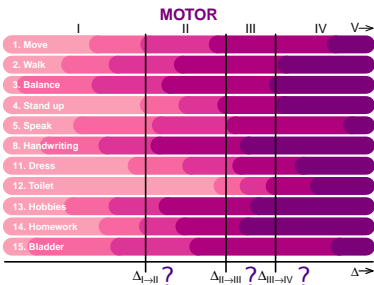
$$H(Y_i^+(t); \eta) = F_i(t) + \epsilon'_i(t)$$

with  $H(\cdot)$  splines function

# Step 3 : Projecting disease stages

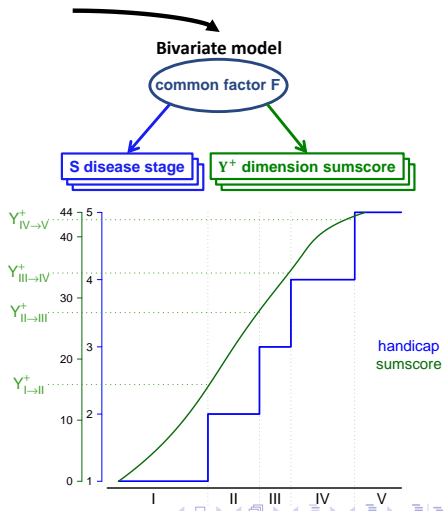


# Step 3 : Projecting disease stages

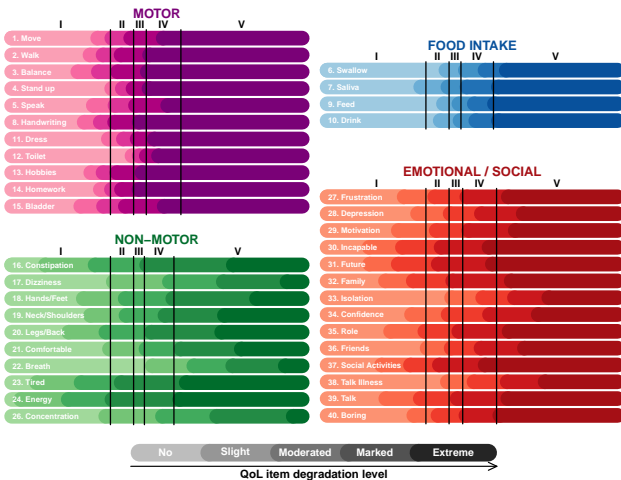


Search  $\Delta$  as

$$\mathbb{E} \left[ \sum_{k=1}^K Y_k | \Delta \right] = Y^+_{s \rightarrow s+1}$$



# Step 3 : MSA-QoL evolution according to disease stages



Projection of disease stages as temporal benchmarks

## MSA stages

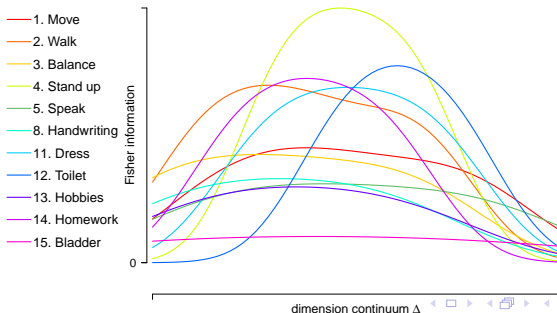
- I completely independent
- II not completely independent
- III more dependent
- IV very dependent
- V totally dependent, helpless

## Step 4 : Information carried by items, Fisher information

**Fisher information function** of item  $k$  for a given degradation level  $\Delta$

$$\begin{aligned} I_k(\Delta) &= -\mathbb{E}\left[\frac{\partial^2}{\partial \Delta^2} \log \mathbb{P}(Y_k|\Delta)\right] \\ &= -\sum_{m=0}^{M_k} [\mathbb{P}(Y_k = m|\Delta) \frac{\partial^2}{\partial \Delta^2} \mathbb{P}(Y_k = m|\Delta)] \end{aligned}$$

### MOTOR

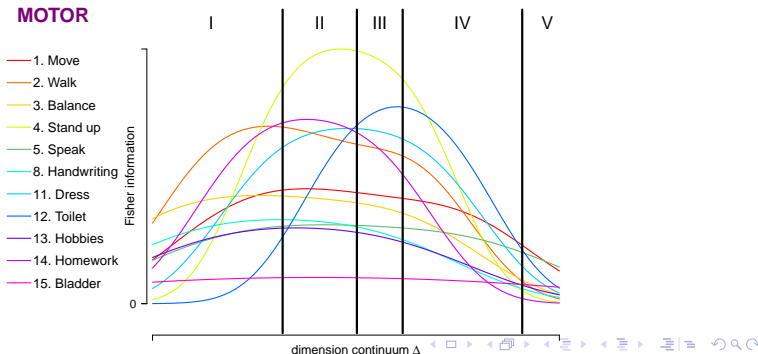




## Step 4 : Information carried by items, Fisher information

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## Step 4 : Information carried by items, Fisher information

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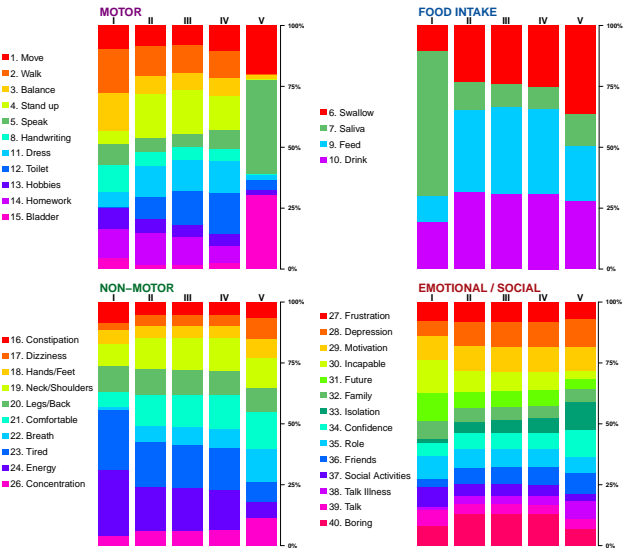
**Fisher information** carried by item  $k$  during stage  $s$

$$I_{k,s} = \int_{\Delta_{s-1} \rightarrow s}^{\Delta_{s \rightarrow s+1}} I_k(\Delta) d\Delta$$

**Percentage of Fisher information** carried by item  $k$  during stage  $s$

$$I_{k,s}^{\%} = \frac{I_{k,s}}{\sum_{j=1}^K I_{j,s}}$$

# Step 4 : MSA-QoL informative items



## MSA stages

**I** completely independent

**II** not completely independent

**III** more dependent

**IV** very dependent

**V** totally dependent, helpless

# Discussion

## Conclusion

Complete strategy to analyze data from measurement scales

Model implemented in a R-package JLPM, available to all

Could also be useful to other pathologies and scales' studies

## References

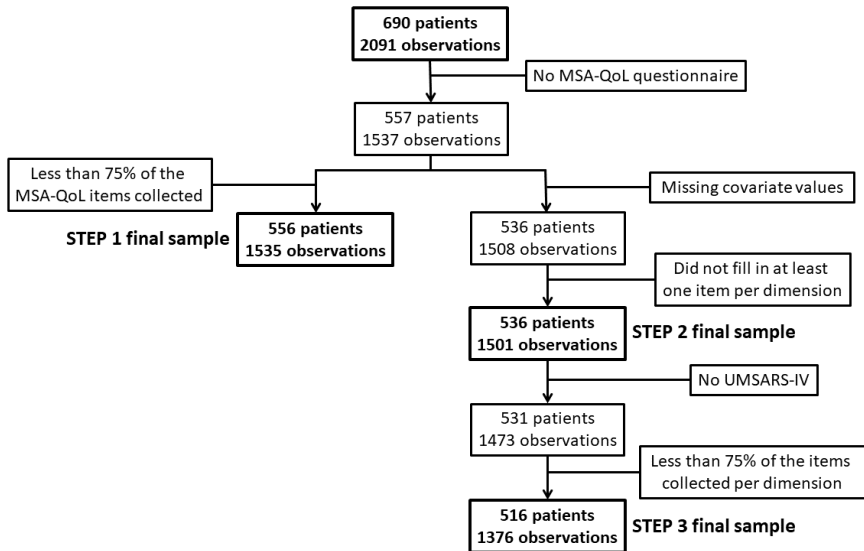
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## Fundings



Thank you for your attention

# APPENDIX 1 : Sample selection - *flowchart*



# APPENDIX 2 : Sample description

Characteristics at inclusion	N (%)	mean $\pm$ sd
Patients	536	
Sex female (vs male)	268 (50.0%)	
Centre Bordeaux (vs Toulouse)	308 (57.5%)	
Subtype MSA-P (vs MSA-C)	363 (67.7%)	
Certainty Probable (vs Possible)	400 (74.6%)	
Age at study inclusion		65.1 $\pm$ 8.0
Age at symptom onset		60.6 $\pm$ 8.1
Care delay		4.5 $\pm$ 2.4
Orthostatic hypotension yes (vs no)	361 (67.4%)	
Urinary disorder yes (vs no)	365 (68.1%)	
Treatment		
Ldopa	366 (68.3%)	
antihypotension	161 (30.0%)	
antidepressant	111 (20.7%)	
Original MSA-QoL scale		
MOTOR dimension sumscore (/56)		27.1 $\pm$ 11.9
NON-MOTOR dimension sumscore (/48)		20.1 $\pm$ 8.9
EMOTIONAL-SOCIAL dimension sumscore (/56)		25.9 $\pm$ 13.2
Handicap degree		
Completely independent (stage I)	111 (20.7%)	
Not completely independent (stage II)	239 (44.6%)	
More dependent (stage III)	105 (19.6%)	
Very dependent (stage IV)	63 (11.8%)	
Totally dependent (stage V)	2 (3.0%)	
Characteristics during follow up		
Visits	1501	
Visits per patient		2.8 $\pm$ 1.9
Years of follow-up		2.5 $\pm$ 2.4
Dropouts	87 (16.2%)	
Deaths	338 (63.1%)	