Mathematics for Cancer Research

making optimal use of cancer data

ACC Coolen King's College London



Mathematics in cancer research

Quality of raw data

- Bayesian analysis of imaging data
- Proteome data decontamination

Complex signalling processes

- Many-variable systems in biology
- Signalling in the proteome
- Cytokine signalling in adaptive immune system

Risk associations and outcome prediction

- Overfitting in clinical outcome prediction
- Bayesian latent variable analysis
- Prediction from high dimensional covariates
- Heterogeneity and competing risks

a selection of past and present projects ...

biomedical research in 21st century

biology, medicine, chemistry, physics, engineering, computer science, mathematics,

• • • •





'next generation' data previous generation analysis



Regression Models and Life-Tables

D. R. Cox

Journal of the Royal Statistical Society. Series B (Methodological), Volum (1972), 187-220.

Stable URL. ACC Coolen (KCL)

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Bayesian analysis of imaging data

Fluorescence Lifetime Imaging data: arrival times of photons

goal

emission lifetime of light emitting molecules

fast processes: small nr of photons





problem with small photon nrs

- to fit to decay curve, need histogram of arrival times
- large bins: time resolution poor ...
 small bins: vertical resolution poor ...



Bayesian analysis

photon detection = emission physics + instrument + noise parameters θ

forward model: $p(data|\theta)$, prior: $p(\theta)$

- calculate $p(data|\theta)$
- Bayesian identity:

$$p(\theta|data) = \frac{p(data|\theta)p(\theta)}{\int d\theta' \ p(data|\theta')p(\theta')}$$



benefits

- exact, statistically optimal
- estimates with error bars

'forward modelling'

includes:

- instrument response function
- artifacts of repetitive excitation
- multi-exponential delay distributions
- Bayesian model selection

example: human epithelial cancer cells



compared to existing methods: half nr photons needed for same accuracy

Protein interaction networks

Quantify topology:

p(k):

fraction of <u>nodes</u> that have k neighbours (degree distr)

W(k, k'):

fraction of <u>links</u> that connect nodes with k and k' neighbours •

Mathematical tools

graph theory, information-theory, and statistical physics

tailored random graph families, characterised by $\{p, W\}$:



quantify complexity, appropriate network null models, algorithms for correct randomisation, proxies for process modelling, network dissimilarity measures, ...

nature biotechnology

Access

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nature.com > Journal home > Table of Contents

Commentary

Nature Biotechnology 26, 69 - 72 (2008) doi:10.1038/nbt0108-69

Protein-protein interaction networks and biology—what's the connection?

Luke Hakes¹, John W Pinney¹, David L Robertson¹ & Simon C Lovell¹

Analysis of protein-protein interaction networks is an increasingly popular means to infer biological insight, but is close enough attention being paid to data handling protocols and the degree of bias in the data?

The availability of large-scale protein-protein interaction data has led ACC Coolen (KCL) Mathematics in cancer research

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Quantify network dissimilarity using information theory



- PPINs of same species are similar only if measured via same method
- strong bias in PPIN data, induced by experimental method, that overrules species information

analysis of data contamination by experimental bias

node undersampling:

 $x(k_i)$: prob to detect protein *i*



- link undersampling:
 y(k_i, k_j): prob to
 detect interaction (i, j)
- Iink oversampling:

 $z(k_i, k_j)/N$: prob to report false positive interaction



methods from statistical physics:

relation between <u>measured</u> p(k) and W(k, k')and <u>true</u> p(k) and W(k, k')

in terms of x(k), y(k), z(k, k')

colour plots of W(k, k')/W(k)W(k'):

60 -

55 ·

50

45

40

35

25

20

15

10

1+

° 30





Bayesian decontamination of PPIN data

- protein species $\ell = 1 \dots L$ <u>unknown</u> networks \mathbf{c}^{ℓ}

- experimental methods $\alpha = 1 \dots M$ (Y2H, PCA, MS, ...) <u>unknown</u> error parameters $\theta^{\alpha} = \{x^{\alpha}(k), y^{\alpha}(k, k'), z^{\alpha}(k, k')\}$



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Analysis of signalling processes

proteome:

usual description reaction equations



Table 2. Model Equations

$$\begin{split} & (RD)_1(dt = k_{01}RDA - k_{10}RD \cdot A + k_{11}RDE - k_{12}RD \cdot E - k_{02}RD + k_{02}R \cdot D + k_{21}RT - k_{12}RD \cdot M \\ & (RT)_1(dt = k_{02}RT - k_{12}RT - k_{22}RT - k_{22}RT - k_{22}RT - k_{22}RT - k_{22}RT - k_{22}RT \cdot E + k_{442}M + k_{12}RD \cdot M \\ & (RD)_1(dt = k_{13}RDE - k_{13}RDE + k_{43}RE - D - k_{42}RT + k_{42}RT + k_{52}RTA - k_{22}RT \cdot A - k_{24}RT \cdot E + k_{442}M + k_{12}RD \cdot M \\ & (RD)_1(dt = k_{13}RDE - k_{13}RE - D + k_{42}RT - k_{42}RT - T + k_{42}R - E - k_{42}RT \\ & (RE)_1(dt = k_{43}RE - D + k_{42}RT - k_{42}RT - k_{52}RT - k_{52}RT E \\ & (RTE)_1(dt = k_{52}RT - A - k_{52}RT + k_{52}RT - k_{52}RT - k_{52}RT \\ & (RTA)_1(dt = k_{52}RT - A - k_{52}RT - k_{52}RT - k_{52}RT - k_{52}RT \\ & (RDA)_1(dt = k_{52}RT - A - k_{52}RT - k_{52}RT - k_{52}RT - k_{52}RT \\ & (RDA)_1(dt = k_{52}RT - k$$

Model equations correspond to the reaction scheme shown in Figure 1. Numbering of the reaction rate constants follows the conventions introduced in Table 3.

- cannot solve eqns analytically ...
- uncertain pathways and parameters ...
- too many components for numerical exploration ...

statistical physics



~ 10^{24} positions, velocities $(\vec{x}_1, \vec{v}_1), (\vec{x}_2, \vec{v}_2), \dots$

Newton's equations

 $\frac{d}{dt}(\vec{x}_1, \vec{v}_1) = \dots, \ \frac{d}{dt}(\vec{x}_2, \vec{v}_2) = \dots \qquad \leftarrow \text{ don't try to solve these!}$

macroscopic description:

densities, correlation functions, perturbation response functions, phase transitions ...

statistical physics



~ 10^{24} positions, velocities $(\vec{x}_1, \vec{v}_1), (\vec{x}_2, \vec{v}_2), \ldots$

Newton's equations

 $\frac{d}{dt}(\vec{x}_1,\vec{v}_1)=...,\ \frac{d}{dt}(\vec{x}_2,\vec{v}_2)=...$

macroscopic theory:

densities, correlation functions, response functions (to perturbations), phase transitions ...

statistical biology



 $\sim 10^4$ concentr of proteins & complexes $\vec{x}_1,~\vec{x}_2,~\vec{x}_3,~\ldots$

reaction equations $\frac{d}{dt}\vec{x}_1 = ..., \frac{d}{dt}\vec{x}_2 = ..., \frac{d}{dt}\vec{x}_3 = ...$

macroscopic theory:

???

numerical illustration

2 post-transl states/protein, binary complexes, random topologies & rates, 7 partners on average dashed: complexes solid: unbound proteins



depends only on param & network statistics!

Signalling dynamics in the proteome

from many-particle physics to *many-particle biology*

notation:

i = 1 ... N labels proteins x_i^{α} : concentr of protein *i* in state α x_{ij} : concentration of dimer $i \asymp j$



events:

complex formation: complex dissociation: conformation change: protein degradation: protein synthesis:

$$(i, \alpha) + (j, \beta) \to (i \asymp j)$$

$$(i \asymp j) \to (i, \alpha) + (j, \beta)$$

$$(i, \alpha) \to (i, \beta)$$

$$(i, \alpha) \to \emptyset$$

$$\emptyset \to (i, \alpha)$$

rate:



• reaction eqns:

$$\frac{\mathrm{d}}{\mathrm{d}t} \mathbf{x}_{i}^{\alpha} = \sum_{j} \mathbf{c}_{ij} \sum_{\beta} [\mathbf{k}_{ij}^{\alpha\beta-} \mathbf{x}_{ij} - \mathbf{k}_{ij}^{\alpha\beta+} \mathbf{x}_{i}^{\alpha} \mathbf{x}_{j}^{\beta}] + \sum_{\beta} [\lambda_{i}^{\beta\alpha} \mathbf{x}_{i}^{\beta} - \lambda_{i}^{\alpha\beta} \mathbf{x}_{i}^{\alpha}] - \overline{\gamma_{i}^{\alpha} \mathbf{x}_{i}^{\alpha}}$$
$$\frac{\mathrm{d}}{\mathrm{d}t} \mathbf{x}_{ij} = \mathbf{c}_{ij} \sum_{\alpha\beta} [\mathbf{k}_{ij}^{\alpha\beta+} \mathbf{x}_{i}^{\alpha} \mathbf{x}_{j}^{\beta} - \mathbf{k}_{ij}^{\alpha\beta-} \mathbf{x}_{ij}]$$

• tailored random PPIN (prescribed degrees)
$$c_{ij} = 0, 1$$

$$\rho(\mathbf{c}) = \frac{\prod_i \delta_{k_i, \sum_{j \neq i} c_{ij}}}{Z} \prod_i \left[c_0 \delta_{c_{ij}, 1} + (1 - c_0) \delta_{c_{ij}, 0} \right]$$

 draw reaction rates randomly from realistic distributions P(k⁺, k⁻), P(λ, γ)



generating functional analysis

calculate correlations, response functions etc ... in heterogeneous many-variable systems without solving microscopic equations!

after calculations ...

(path integral techniques, saddle-point integration, etc)

for $N \to \infty$: exact macroscopic equations

 $W = \mathcal{G}_1[W], \quad D = \mathcal{G}_2[W], \quad \mathcal{G}_{1,2}: \text{ complicated but } \underline{exact} \text{ formulas}$

macroscopic quantities:

$D[\{x\}|\{y\}], W[\{x\}|\{y\}]$

- $\{x\}$: trajectories $x_{\alpha}(t)$
- $\{y\}$: time dependent production rates $y_{\alpha}(t)$

 $D[{x}|{y}]$ describes response to single-node perturbations motivation: immune cancer therapies

Cytokine signalling in adaptive immune system

B-clones b_µ

each can recognise *specific* antigen a_{μ}

T-clones σ_i

coordinate B-clones via cytokines $\xi_i^{\mu} = -1, 0, 1$ $(\xi_i^{\mu} = -1: \text{ contract}, \xi_i^{\mu} = +1: \text{ expand})$



model of Barra and Agliari:

expansion force on clone μ

$$p(\sigma, \mathbf{b}) = \frac{e^{-\sqrt{\beta}H(\sigma, \mathbf{b})}}{Z} \qquad H(\sigma, \mathbf{b}) = \frac{1}{2\sqrt{\beta}} \sum_{\mu=1}^{n_B} b_{\mu}^2 - \sum_{\mu=1}^{n_B} b_{\mu} \left(\sum_{i=1}^{n_T} \xi_i^{\mu} \sigma_i + \lambda_{\mu} a_{\mu} \right)$$

'integrate out' the B-clones, results in model of interacting T-clones:

$$p(\sigma) = \frac{e^{-\beta H(\sigma)}}{Z_T} \qquad H(\sigma) = -\frac{1}{2} \sum_{i,j=1}^{n_T} \sigma_i \sigma_j \sum_{\mu=1}^{n_B} \xi_i^{\mu} \xi_j^{\mu} - \sum_{i=1}^{n_T} \sigma_i \sum_{\mu=1}^{N_B} \lambda_{\mu} g_{\mu} \xi_i^{\mu}$$

$$n_B \sim 10^8$$

$$n_T \sim 2.10^8$$

how can promiscuous T-clones coordinate an extensive number of B-clones simultaneously?

relevant parameters in T-T network:

c: T-clone promiscuity α : n_B/n_T



solve model as a statistical mechanics one (i.e. calculate asymptotic disorder-averaged free energy)

after calculation (finite connectivity replica analysis): exact formula for clonal cross-talk transition lines



 α : n_B/n_T *c*: *T*-cell promiscuity β^{-1} : noise in clonal dynamics

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Number people who drowned by falling into a swimming-pool correlates with Number of films Nicolas Cage appeared in



	<u>1999</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	
Number people who drowned by falling into a swimming-pool Deaths (US) (CDC)	109	102	102	98	85	95	96	98	123	94	102	
Number of films Nicolas Cage appeared in Films (IMDB)	2	2	2	3	1	1	2	3	4	1	4	
Correlation: 0.666004												

Age of Miss America

correlates with

Murders by steam, hot vapours and hot objects



	<u>1999</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	
Age of Miss America Years (Wikipedia)	24	24	24	21	22	21	24	22	20	19	22	
Murders by steam, hot vapours and hot objects Deaths (US) (CDC)	7	7	7	3	4	3	8	4	2	3	2	
Correlation: 0.870127												

Tools to combat overfitting

in covariate-to-outcome analysis

Pin down the problem

predict 'safe' ratio covariates/sample for Cox regression?

Eliminate redundant information

improve covariates/samples ratio latent vars (information theory), find 'true' dimension

Model (avoid?) overfitting effects

handle statistics of full parameter uncertainty, while keeping computations feasible



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all based on Bayesian principles

overfitting in Proportional hazards regression

associations between covariates and risk for time-to-event outcome data, multivariate version for outcome prediction

p-values, confidence intervals don't measure overfitting!

rule of thumb: '10 samples per case' too optimistic ...

developing analytical theory, that predicts onset of overftting in terms of statistics of covariates and nr of samples and cases

uncorrelated covariates

- o: 1000 samples & cases
- •: 500 samples & cases



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Bayesian latent variable methods

for survival analysis

Assume:

- (a) data $Y_k \in \mathbb{R}^d$ are high-dim windows on low dim latent variables $X \in \mathbb{R}^q$
- (b) X actually drives outcome

(c) *q* < *d*

- nonlinear stochastic relations
 Y_k = f_k(X) + noise
- dimension detection: optimal q?
- find most probable latent variables X
- use X to predict clinical outcome

e.g. gene expression



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Results from METABRIC gene signature data

data Y: scores of 28 gene signatures outcome: overall survival time



left: $q \le 5$, dimension of X (predicted from training set, n = 74)

middle: predicted low/high risk groups, q = 2(tested in validation set, n = 74)

right: predicted low/high risk groups from Y (tested in validation set, n = 74)

Discriminant analysis

data: $\mathcal{D} = \{(\mathbf{x}_1, y_1), \dots, (\mathbf{x}_N, y_N)\}$

x_i: covariates

y_i: class labels

goal: class y of new observation \mathbf{x}



model based approaches

parametrise $p(\mathbf{x}|y, \boldsymbol{\theta})$, estimate $\boldsymbol{\theta}$ from data, then use:

$$p(y|\mathbf{x}, \boldsymbol{\theta}) = \frac{p(\mathbf{x}|y, \boldsymbol{\theta})p(y)}{\sum_{y'} p(\mathbf{x}|y', \boldsymbol{\theta})p(y')}$$

popular method: mclustDA (Fraley & Raftery) MAP estimation of θ high dim data, $d \sim 10^3$, 10^4 : optimise $\sim 10^3$, 10^8 pars ...

serious overfitting, CPU demands prohibitive

Bayesian multi-class outcome prediction

for high-dimensional data

in view of overfitting:

full Bayesian parameter estimation, instead of MAP (e.g. mclustDA)

$$\begin{aligned} MAP : \quad p(y|\mathbf{x}, \mathcal{D}) &= p(y|\mathbf{x}, \theta_{MAP}), \quad \theta_{MAP} = argmax_{\theta} \ p(\theta|\mathcal{D}) \\ Bayes : \quad p(y|\mathbf{x}, \mathcal{D}) &= \int d\theta \ p(y|\mathbf{x}, \theta) p(\theta|\mathcal{D}) \\ \rho(\theta|\mathcal{D}) &= \frac{p(\theta)p(\mathcal{D}|\theta)}{\int d\theta' \ p(\theta')p(\mathcal{D}|\theta')} \end{aligned}$$

2 computational feasibility: evaluate *d*-dimensional integrals *analytically*

3 desirable: determine MAP-optimal hyper-pars analytically

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simplest model

Gaussian covariate distribution for each class

$$p(\mathbf{x}|y,\theta) = \frac{\mathrm{e}^{-\frac{1}{2}(\mathbf{x}-\boldsymbol{\mu}_y)^2/\alpha_y^2}}{(\alpha_y\sqrt{2\pi})^d}$$

μ_y: class signatures, with Gaussian priors



generative

all data assumed informative

$$p(\mathbf{x}, \mathbf{x}_1, \ldots, \mathbf{x}_n, y, y_1, \ldots, y_n | \boldsymbol{\theta}) = p(\mathbf{x}, y | \boldsymbol{\theta}) \prod_{i=1}^n p(\mathbf{x}_i, y_i | \boldsymbol{\theta})$$

discriminative

extract only link between \mathbf{x} and y

$$p(\mathbf{x}_1,\ldots,\mathbf{x}_n,y|\mathbf{x},y_1,\ldots,y_n,\boldsymbol{\theta}) = p(y|\mathbf{x},\boldsymbol{\theta})\prod_{i=1}^n p(\mathbf{x}_i|y_i,\boldsymbol{\theta})$$

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Signature- versus variability-based classification

weak class 'signatures' in data:

classification still possible, but will become variability-based: (increasingly effective for large *d*)





LOOCV error curves, averaged over 100 data sets, n=100 samples with identical class centres



Error curves (100 training/100 validation), averaged over 100 data sets, n=100 samples with identical class centres

	<i>f</i> ₁	f ₂	α_1	α_2
Τ	0.1	0.9	0.24	0.28
v	0.9	0.1	0.24	0.28

mclustDA and method I struggle when

training and validation sets differ in class membership balance

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Triple-negative breast cancer

prediction of survival from gene expression

y = 1: BC death within 5 yrs y = 2: survived for at least 5 yrs

n = 165, d = 22,035 $(f_1, f_2) = (0.25, 0.75)$

performance measured via LOOCV, genes ranked by correlation with outcome



- Bayesian methods can go to much larger d
- min $E_V \approx$ 0.24 (~ going for largest class)

either gene expression data confer no predictive information on 5 yr TNBC survival, or all methods suffer from model mismatch



TCGA Breast cancer data

prediction of receptor status

y=1: ER-negative, HER2-negative y=2: ER-positive, HER2-negative y=3: ER-negative, HER2-positive y=4: ER-positive, HER2-positive

n = 500, d = 17,332 $(f_1, f_2, f_3, f_4) = (0.19, 0.66, 0.04, 0.11)$

performance measured via LOOCV, genes ranked by correlation with outcome



optimal predictive information in first 100 ranked genes

- Bayesian methods can go to much larger d
- min $E_V \approx 0.14$ (significant)

gene expression profiles of breast cancer patients are reliable predictors of their ER and HER2 status

conventional methods

- cannot handle disease/host heterogeneity beyond variability in covariates
- assume different risks are uncorrelated
- dangerous when many censoring events ...

Kaplan-Meier estimators Cox regression



probabilities can be badly wrong ...

predicted

survival

More advanced methods

- model all risks and their relations, at individual and cohort level
- event times assumed uncorrelated only at the level of individuals
- individuals with same covariates may have distinct risk profiles
- Bayesian analysis, so reliable error bars

Latent class heterogeneity:



prop hazards within sub classes \Rightarrow prop hazards at cohort level!

can account for:

association heterogeneity, non-proportional hazards, covariate interactions, competing risks,

synthetic data



red dashed: true survival curves

synthetic data



red dashed: true survival curves

Bayesian retrospective class identification

$$P(\ell|t,r,\mathbf{z}) = \frac{W_{\ell} e^{\hat{\boldsymbol{\beta}}_{r}^{\ell}\cdot\mathbf{z}-\sum_{r'=1}^{R} \exp(\hat{\boldsymbol{\beta}}_{r'}^{\ell}\cdot\mathbf{z})\int_{0}^{t} \mathrm{ds} \hat{\lambda}_{r'}(s)}{\sum_{\ell'=1}^{L} W_{\ell'} e^{\hat{\boldsymbol{\beta}}_{r'}^{\ell'}\cdot\mathbf{z}-\sum_{r'=1}^{R} \exp(\hat{\boldsymbol{\beta}}_{r'}^{\ell'}\cdot\mathbf{z})\int_{0}^{t} \mathrm{ds} \hat{\lambda}_{r'}(s)}$$

Data:

3 classes, $w_1 = w_2 = w_3 = \frac{1}{3}$ 2 competing risks

$$\begin{split} &\beta_1^1 = (0.5, 0.5, 0.5) + (2, 0, 2) \\ &\beta_1^2 = (0.5, 0.5, 0.5) + (-2, -2, 0) \\ &\beta_1^3 = (0.5, 0.5, 0.5) + (0, 2, -2) \end{split}$$

each individual *i*: point (p_1^i, p_2^i, p_3^i) in \mathbb{R}^3 $p_\ell^i = P(\ell | t_i, r_i, \mathbf{z}_i)$



Prostate cancer study on the ULSAM data set

hazard rates: $HR_j = e^{2\beta_j}$

N = 2047primary events: 208 death (non-PC): 910 end of trial: 929

	CLASSES	PRIMARY RISK	SECONDARY RISK				
		BMI selen phys1 phys2 smok	BMI selen phys1 phys2 smok				
Сох		0.14 -0.15 0.20 -0.09 -0.08					
new	$w_1 = 0.51$ $w_2 = 0.49$	1.22-0.410.73-0.011.43-0.07-0.160.19-0.10-0.27	0.82 -0.42 -0.31 -0.14 1.35 0.10 -0.07 -0.07 0.04 0.18				
	frailties:	$\beta_{10}^1 - \beta_{10}^2 = -4.61$ (HR 0.010)	$\beta_{20}^1 - \beta_{20}^2 = -4.06$ (HR 0.017)				

healthy group:	strong effects of covariates, BMI and smoking important risk factors
frail group:	weak effects of covariates, BMI and smoking weakly protective (reverse causal effect?)

Breast cancer study (AMORIS data base)

potential of serum lipids, measured prior to diagnosis, to predict risk of BC death

covariates:

triglycerides, cholesterol, glucose age, 3 socio-economic variables

- Cox regression: no significant assoc
- risk-specific KM curves: no proportional hazards in primary risk (Cox invalid ...)
- KM curves themselves unreliable (competing risks 2 and 3?)

N = 1798, all BC diagnosed

primary events (BC death): 259

secondary events (CV death): 179

- tertiary events (other death): 423
 - censoring: 937



heterogeneous model

predicts three classes, explains non-monotonic relations

- class 1, 57%: ۰ Lower triglycerides HR>1 Upper 0.9 age HR>1 Survival probability 0.8 class 2, 37%: 0.7 age HR< 1 class 3, 6%: no significant assoc 0 15
 - correlations of class membership probabilities with covariates:

Class 1, <u>older women</u>: *triglycerides HR*>1, *age HR*>1

Class 2, younger women: age HR<1



Addition of cetuximab to oxaliplatin-based first-line combination chemotherapy for treatment of advanced colorectal cancer: results of the randomised phase 3 MRC COIN trial



Timothy S Maughan, Richard A Adams, Christopher G Smith, Angela M Meade, Matthew T Seymour, Richard H Wilson, Shelley Idziaszczyk, Rebecca Harris, David Fisher, Sarah L Kenny, Edward Kay, Jenna K Mitchell, Ayman Madi, Bharat Jasani, Michelle D James, John Bridgewater, M John Kennedy, Bart Claes, Diether Lambrechts, Richard Kaplan, Jeremy P Cheadle, on behalf of the MRC COIN Trial Investigators

Summary

Background In the Medical Research Council (MRC) COIN trial, the epidermal growth factor receptor (EGFR)-targeted antibody cetuximab was added to standard chemotherapy in first-line treatment of advanced colorectal cancer with the aim of assessing effect on overall survival.

Lancet 2011; 377: 2103-14 Published Online June 4, 2011

outcome:

Interpretation This trial has not confirmed a benefit of addition of cetuximab to oxaliplatin-based chemotherapy in first-line treatment of patients with advanced colorectal cancer. Cetuximab increases response rate, with no evidence of benefit in progression-free or overall survival in *KRAS* wild-type patients or even in patients selected by additional mutational analysis of their tumours. The use of cetuximab in combination with oxaliplatin and capecitabine in first-line chemotherapy in patients with widespread metastases cannot be recommended.

Bayesian latent class analysis of COIN data

hazard ratios:

	FRET	Her3	Her2-Her3	Her2	Cetuximab	KRAS mut
Сох	0.5	1.0	1.8	1.1	0.7	1.7
new model:						
class I, 40%	0.7	1.5	3.7	1.1	0.3	2.5
class II, 60%	0.6	1.2	0.7	0.9	1.1	1.4

higher overall risk in class II

- two sub-cohorts, with similar base hazard rates, but distinct overall frailties and associations.
- methods provides retrospective class assignment
- new tools to identify a priori the responders to Cetuximab?

with thanks to

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