# Introduction to Meta-analysis of Accuracy Data

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# Outline

- Nature of the outcome measures
- Descriptive analysis: plots and figures
- Statistical models
- REVMAN

## Diagnostic Accuracy Data

- Agreement between results of the index test and reference standard
- Many measures of agreement
- Focus on pairs of sensitivity & specificity

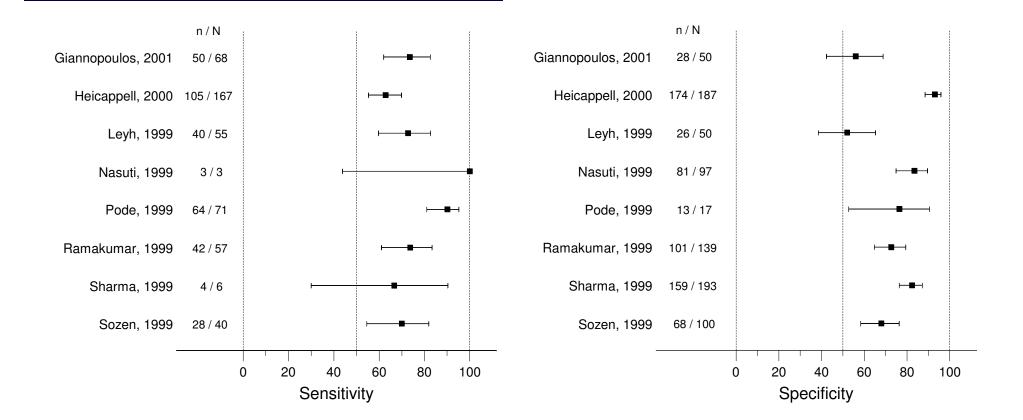
# Clinical Example

- Tumor markers for the detection of bladder cancer
- Measurement in urine rather than invasive cystoscopy
- Several markers: focus on bladder tumor antigen (BTA stat)
- N=8 studies

# Descriptive Analysis

- Forest plots
  - point estimate with 95% CI
  - paired: sensitivity and specificity side-by side

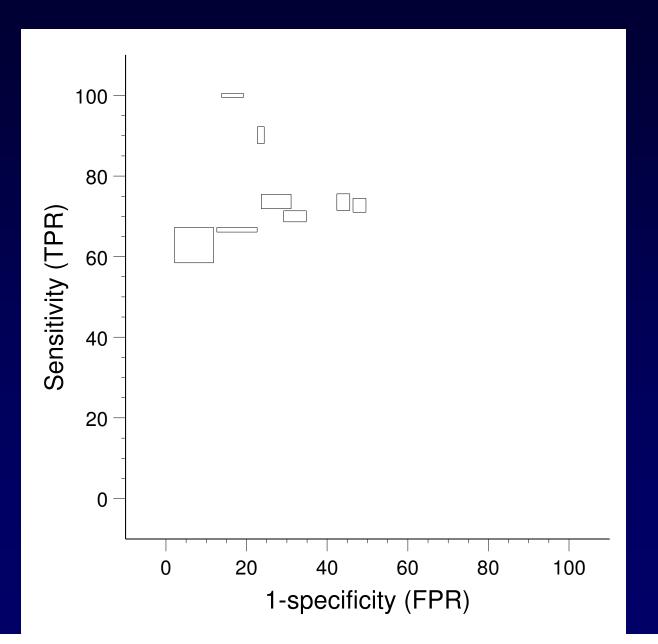
## Forest Plot



## Descriptive Analysis

- Forest plots
  - point estimate with 95% CI
  - paired: sensitivity and specificity side-by side
- ROC plot
  - pairs of sensitivity & specificity in ROC space
  - bubble plot to show differences in precision

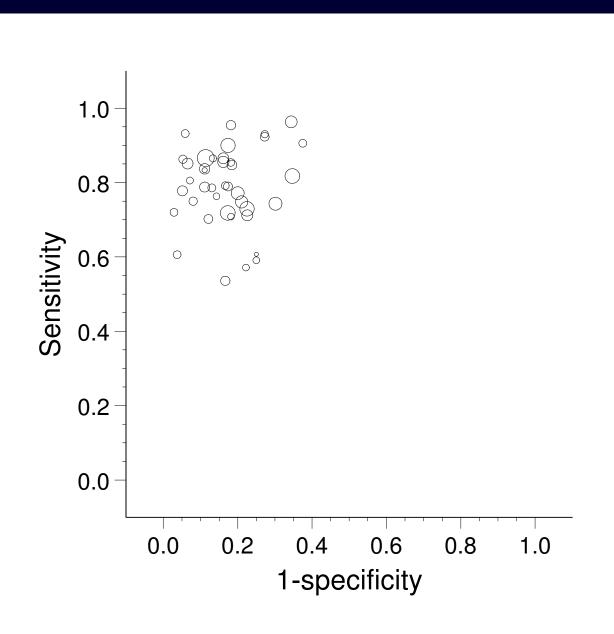
## Plot in ROC Space



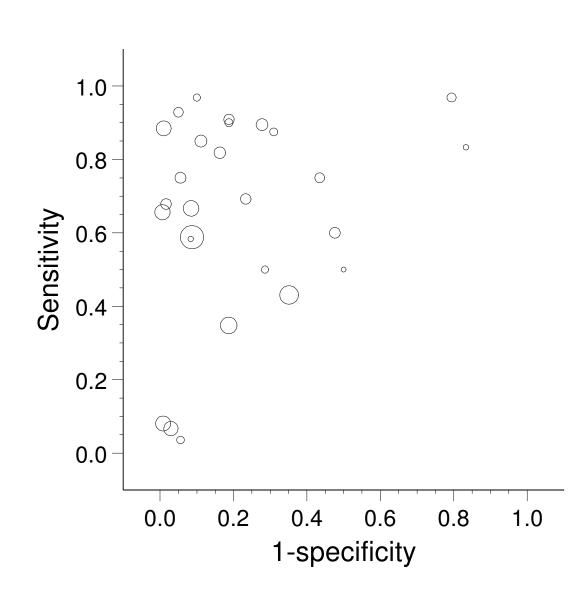
# Challenge

- Understanding sources of variation, as results often vary between studies
- Providing informative summary measures of the data
- Drawing robust conclusions with respect to the research question

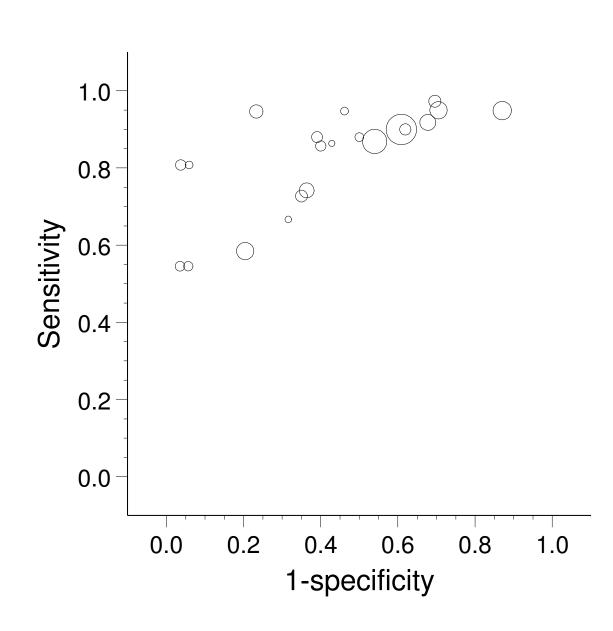
#### Echocardiography in Coronary Heart Disease



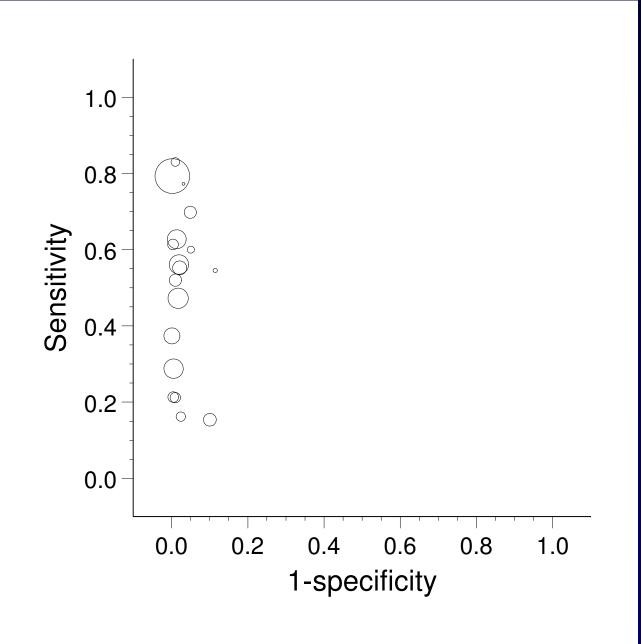
### GLAL in Gram Negative Sepsis



#### F/TPSA in the Detection of Prostate cancer



#### Dip-stick Testing for Urinary Tract Infection



## Sources of Variation

Why do results differ between studies?

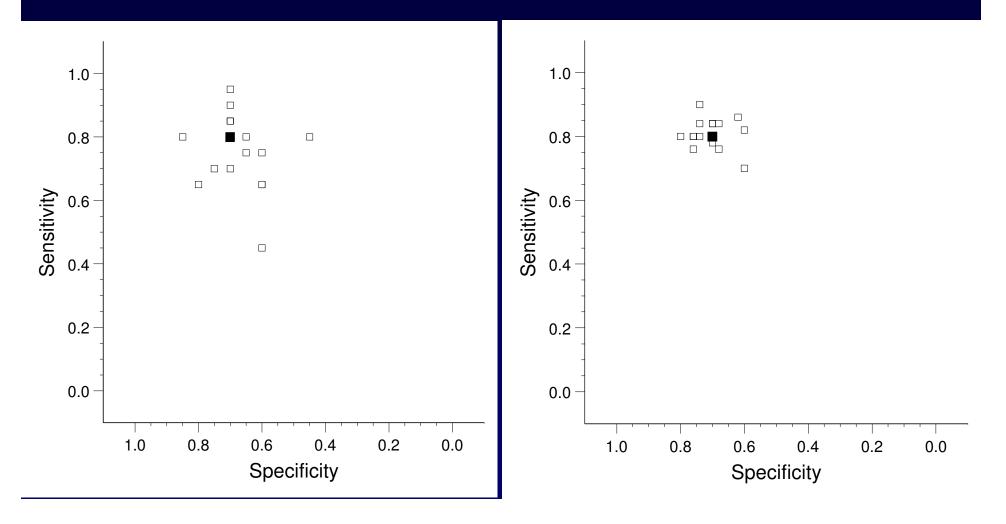
# Sources of Variation

- I. Chance variation
- II. Differences in threshold
- III. Bias
- IV. Subgroups
- V. Unexplained variation

## Sources of Variation: Chance

#### Chance variability: sample size=100

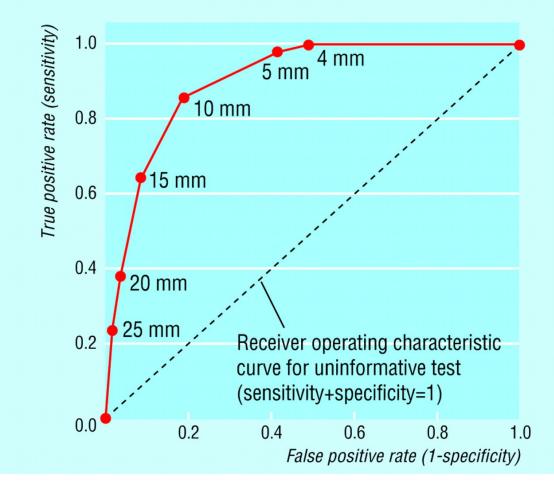
#### Chance variability: sample size=40



## Variation due to Threshold Differences

- Explicit differences
  - studies have used different cut-off values to define positive test results

## Receiver characteristic operating (*ROC*) curve



The ROC curve represents the relationship between sensitivity and specificity of the test at various thresholds

Deeks, J. J BMJ 2001;323:157-162

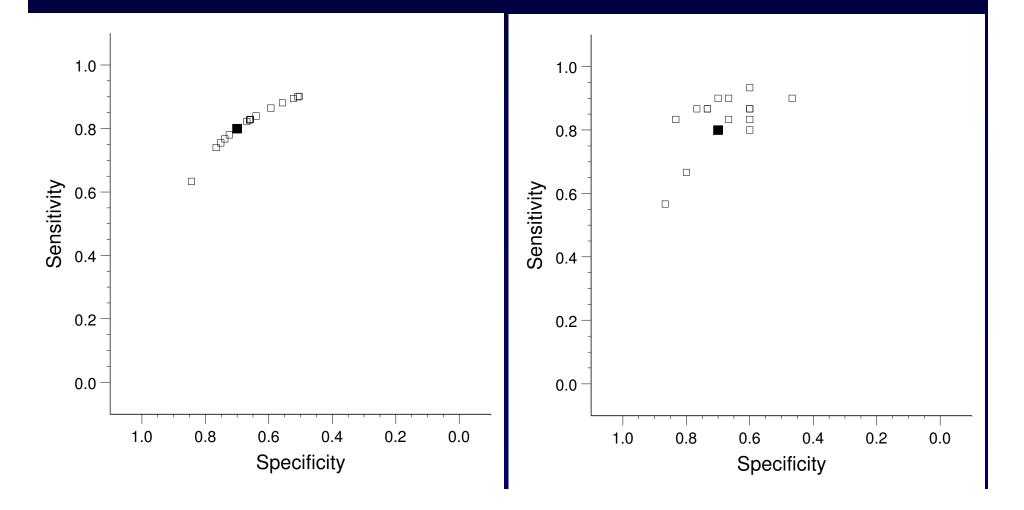
## Variation due to Threshold Differences

- Explicit threshold differences
  - studies have used different cut-off values to define positive test results
- Implicit threshold differences
  - differences in observers
  - differences in equipment
- Consequence: negative correlation arises between sensitivity and specificity

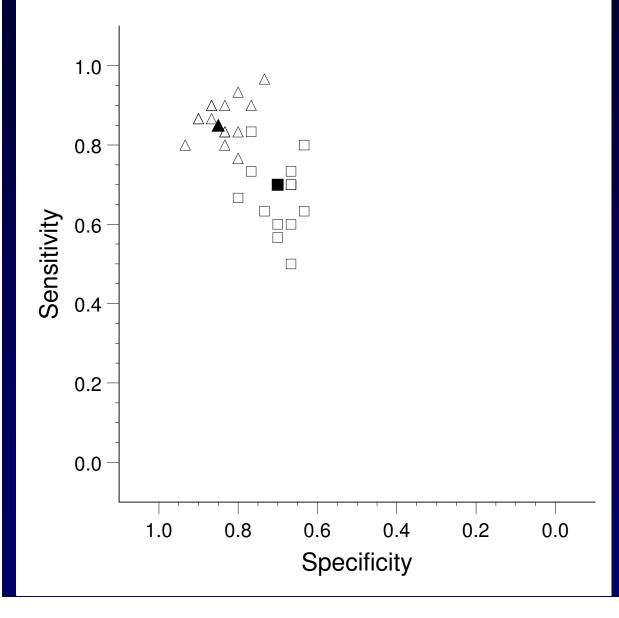
## Sources of Variation: Threshold

Threshold: perfect negative correlation
no chance variability Threshold:

- perfect negative correlation
- + chance variability: ss=60



## Sources of Variation: Bias & Subgroup

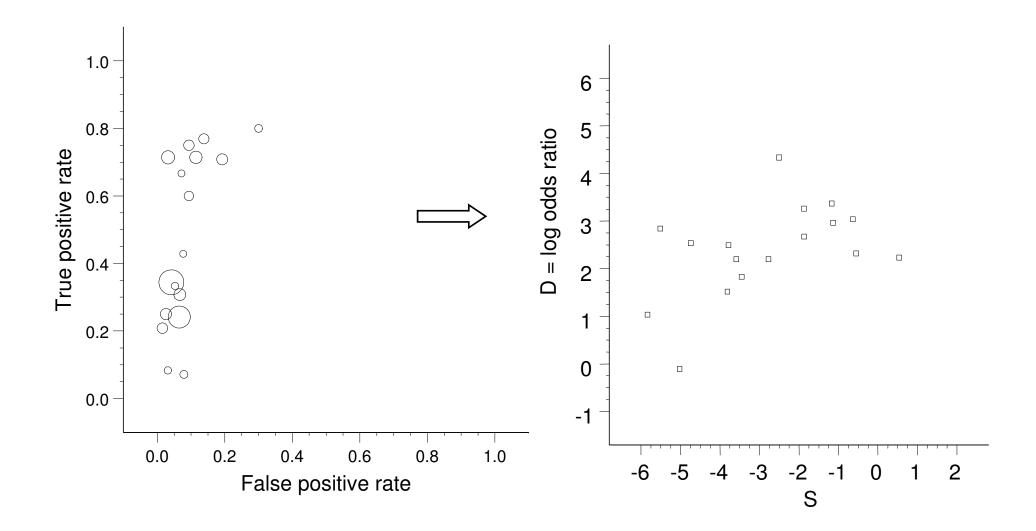


Bias & Subgroup:
sens & spec higher
ss=60
no threshold

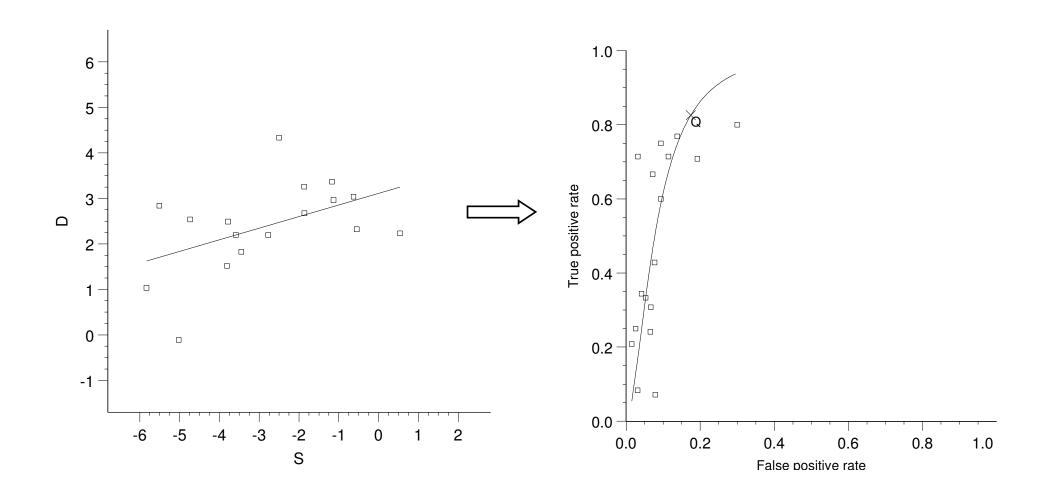
## Overview of Statistical Approaches

- Summary ROC model / Moses-Littenberg (ML)
  - Traditional approach, straightforward
- More complex models
  - Bivariate random approach
  - Hierarchical summary ROC approach

### ML approach: Finding Smooth Curve in ROC



## Linear Regression & Back Transformation



## Drawbacks Moses-Littenberg Approach

- Validity of significance tests
  - Sampling variability in individual studies not properly taken into account
  - P-values and confidence intervals erroneous
- Summary points
  - Average sensitivity/specificity cannot be obtained
  - Sensitivity for a given specificity can be estimated

## Advanced Models – HSROC and Bivariate methods

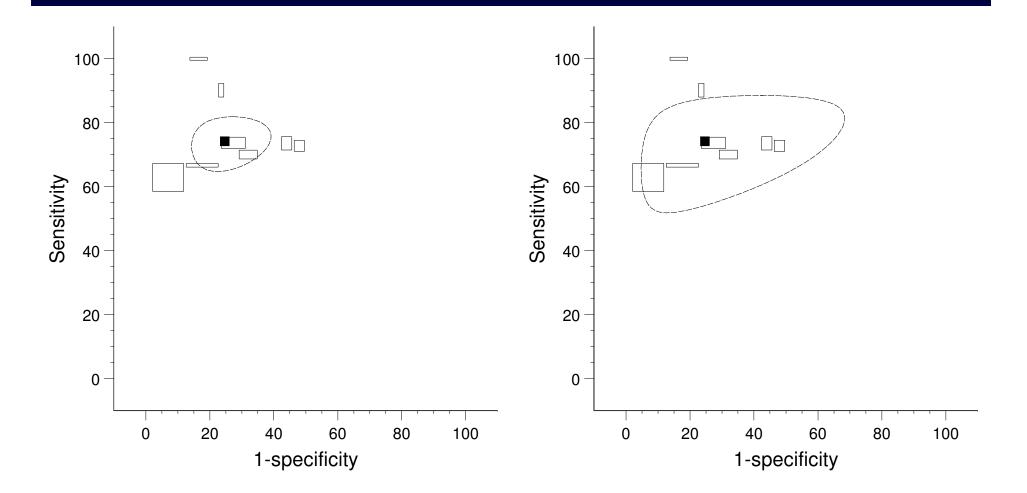
- Hierarchical / multi-level random effects
  - allows for both within and between study variability
- Binomial distribution
  - correctly models sampling uncertainty in both sensitivity and specificity
  - no zero cell adjustments needed
- Regression models
  - flexible in examining sources of heterogeneity

# Presentation of Results

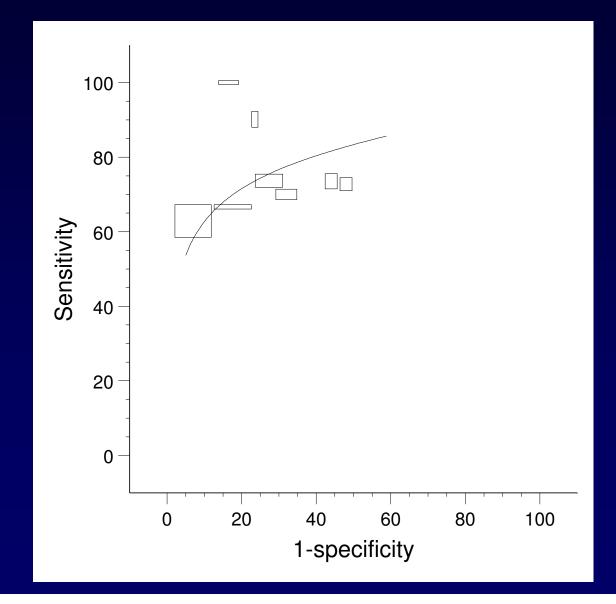
## Summary Values with Ellipses

#### Ellipse around mean value

#### Prediction ellipse



# Curves, Summary Points, Ellipses



## Bad News

- Straightforward and most-frequently used method (Moses-Littenberg model) is statistically flawed
- Advanced models needed to make inferences (e.g. P-values) and to calculate appropriate confidence intervals
- Fitting and checking advanced models require statistical expertise
- Advanced methods not available in RevMan 5

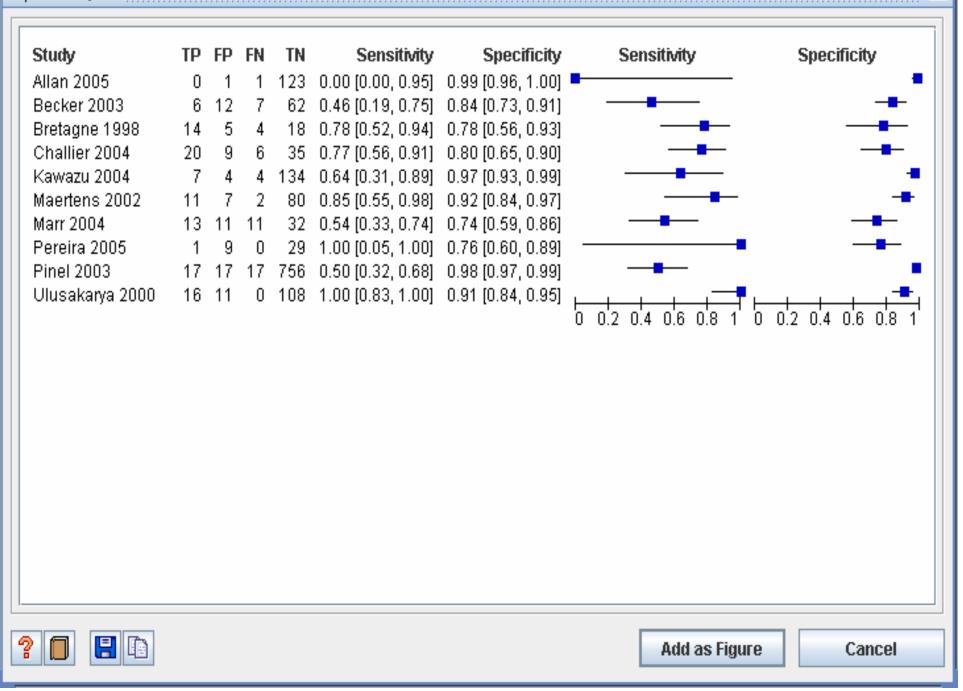
## Good News

- Syntax to run more complex models in SAS, STATA, WINBUGS, S-PLUS, and R are available
- Results from these packages can be entered into RevMan 5 to make graphs

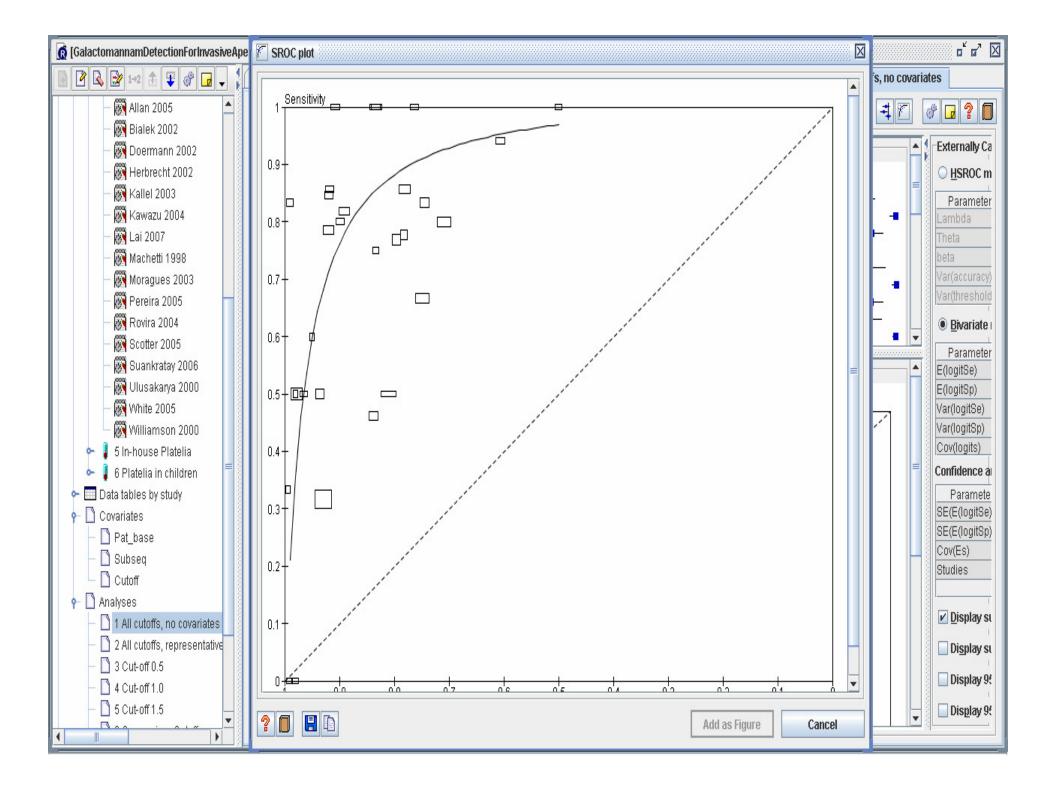
# RevMan 5

- Perform descriptive analyses
- Estimates from hierarchical SROC or bivariate model can be imported into REVMAN to:
  - plot fitted SROC curve
  - display summary points
  - draw confidence or prediction ellipses

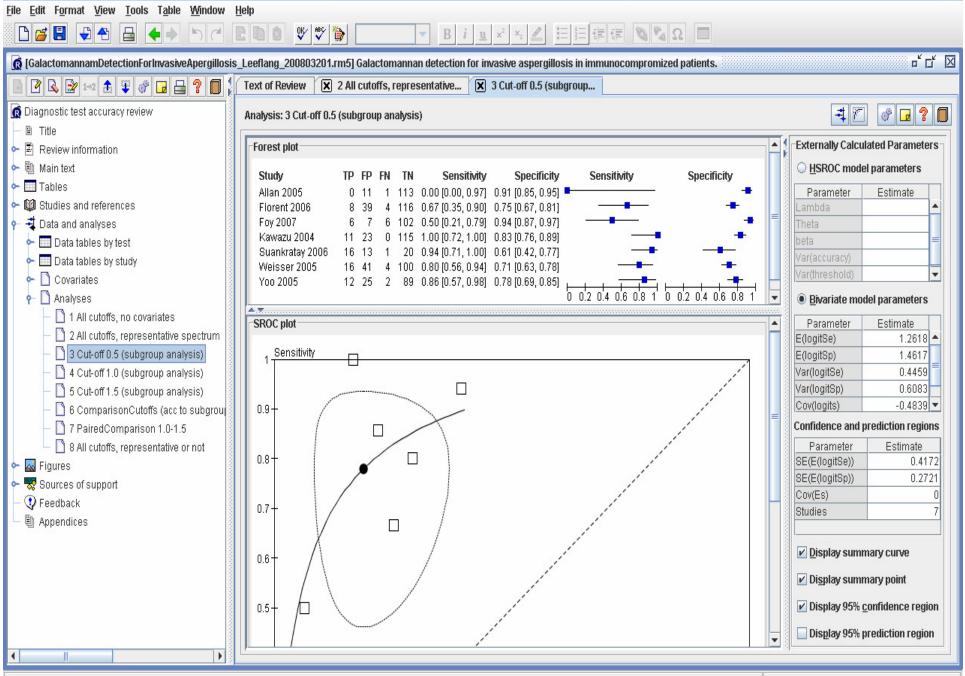
📑 Forest plot



X



#### 5 Review Manager 5





- Cochrane support:
  - CESU and UKSU
  - explanatory papers
  - pilot reviews
  - editorial process with specific attention to metaanalysis
  - workshops at Cochrane Colloquia
- Courses
- Overview on website Diagnostic Test Accuracy Working Group (http://srdta.cochrane.org)

Ad

#### Cochrane entities >

Diagnostic Test Accuracy Working Group

#### Statistical analysis

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Presentations

Statistical models are used in meta-analyses of data in systematic reviews of diagnostic test accuracy.

Models can be run in a variety of different software programmes but this facility is not available in RevMan. Specific statistical parameters from the models run can be input into RevMan in order to draw appropriate graphical displays of the data.

Researchers have prepared macros for statistical models for meta-analysis of data from diagnostic test accuracy studies for several statistical analysis software programs. As these become available we will add them to this page.

#### Macro 1

METADAS: A SAS macro for meta-analysis of diagnostic accuracy studies. User guide version 1.0 beta. December 2008. METADAS (PDF 898KB)

#### Macro 2

METANDI: Stata module to perform meta-analysis of diagnostic accuracy. Harbord 2008

A user-written model for Stata for metaanalysis of DTA studies without covariates with results in both bivariate and HSROC parameterisations, and on a graph.

## Take Home Messages

- Two potentially correlated outcome measures require more complex statistical models
- Moses-Littenberg model is not appropriate for formal testing
- Bivariate and hierarchical summary ROC model are sound, powerful and flexible models
- These models can not be fitted in RevMan, but results can be incorporated
- Statistical expertise required in review team

## Meta-analysis of Accuracy Studies

- Results often highly heterogeneous
  - differences in design and conduct
  - differences in verification
  - differences in spectrum
  - differences in technology of tests or test execution
  - differences in threshold
  - chance variation

# Powerful and Flexible Models

- Examples of multivariate meta-analysis: all advantages apply
- Extension with study-level covariates to explain heterogeneity in results or differences in accuracy between test in accuracy
- Separate effects on sensitivity and specificity
- Testing of joint parameters
- Software: need for non-linear mixed models in SAS, STATA, R, S, WinBugs

## Other View

