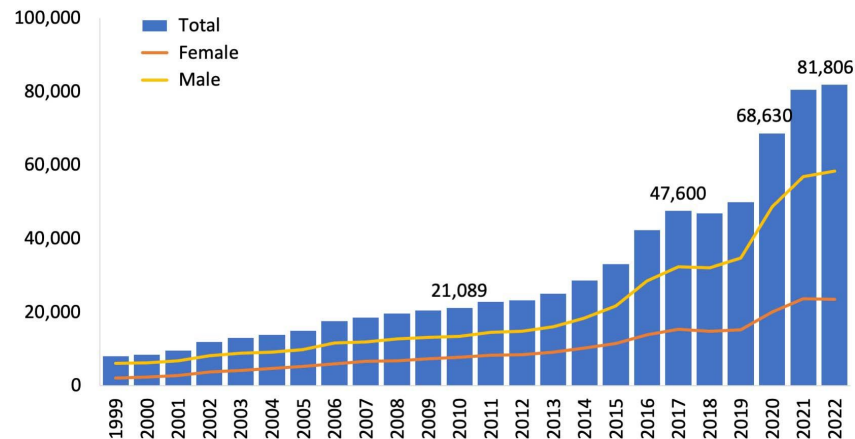


A Cautionary Tale on Integrating Studies with Disparate Outcome Measures for Causal Inference

Harsh Parikh, Trang Nguyen, Elizabeth Stuart, Kara Rudolph, Caleb Miles

More than **80,000**
deaths in 2022
and 2023 were
linked to **Opioids**
in the US

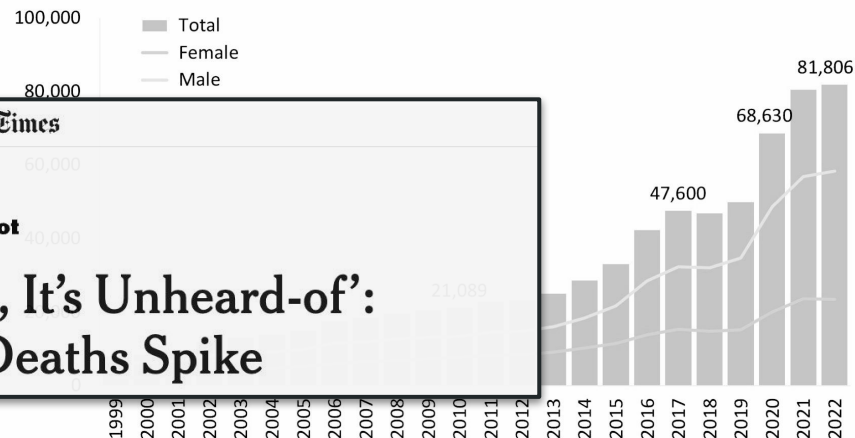
National Overdose Deaths Involving Any Opioid*,
Number Among All Ages, by Sex, 1999-2022



*Among deaths with drug overdose as the underlying cause, the "any opioid" subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2), methadone (T40.3), other synthetic opioids (other than methadone) (T40.4), or heroin (T40.1). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2022 on CDC WONDER Online Database, released 4/2024.

More than **80,000**
deaths in 2022
and 2021
linked to **Opioids**
in the US

National Overdose Deaths Involving Any Opioid*,
Number Among All Ages, by Sex, 1999-2022



**‘It’s Huge, It’s Historic, It’s Unheard-of’:
Drug Overdose Deaths Spike**

*Among deaths with drug overdose as the underlying cause, the “any opioid” subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2), methadone (T40.3), other synthetic opioids (other than methadone) (T40.4), or heroin (T40.1). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2022 on CDC WONDER Online Database, released 4/2024.

Medication such as
Buprenorphine &
Naltrexone are used to
treat OUD



Medication such as
Buprenorphine &
Naltrexone are used to
treat OUD

Major challenge: **Severe
withdrawal symptoms**



Medication such as
Buprenorphine &
Naltrexone are used to
treat OUD

Major challenge: **Severe
withdrawal symptoms**

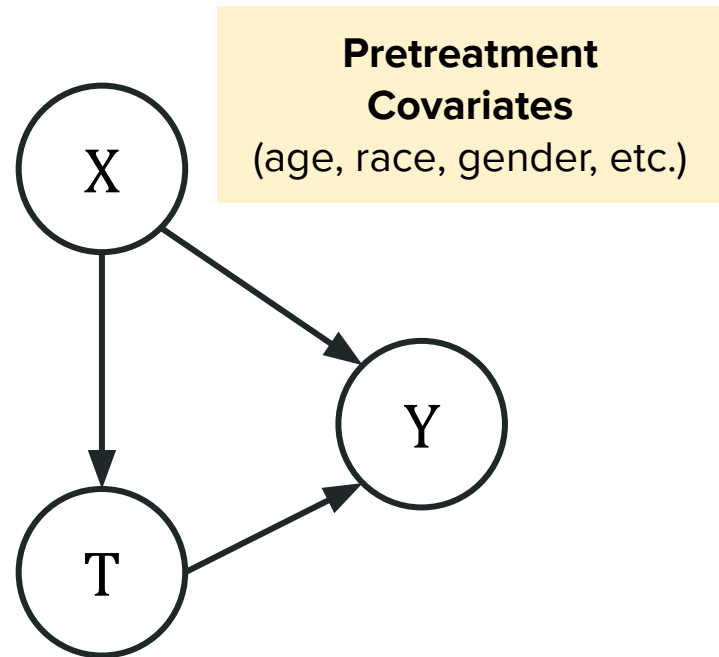
Severity of **withdrawal**
symptoms are *associated*
with **OUD relapse**



Which of the medications for OUD result in least severe withdrawal symptoms? 🤔

X:BOT Study

Cohort Size: 540 patients



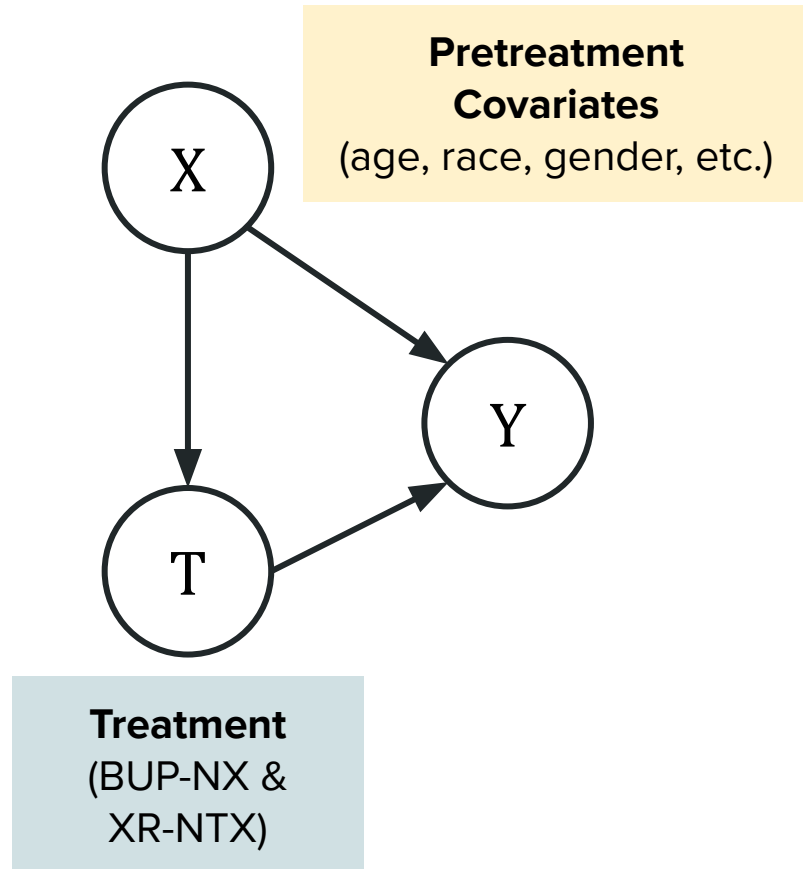
X:BOT Study

Cohort Size: 540 patients

Randomized (1:1) to receive:

$T=0$: Buprenorphine Naloxone
(BUP-NX)

$T=1$: Extended Release Naltrexone
(XR-NTX)



X:BOT Study

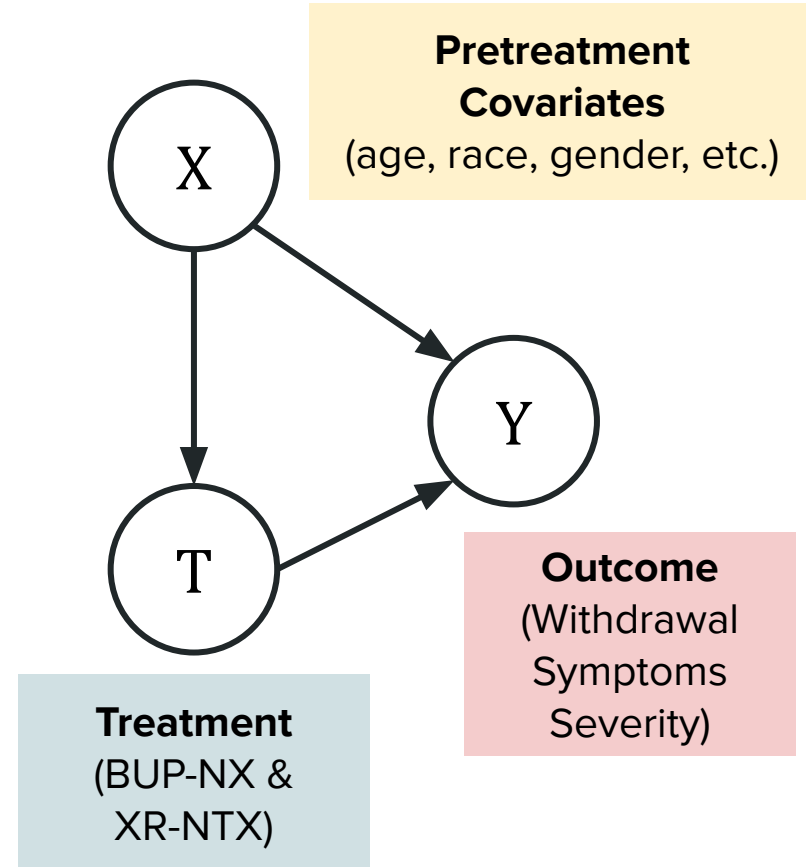
Cohort Size: 540 patients

Randomized (1:1) to receive:

T=0: Buprenorphine Naloxone
(BUP-NX)

T=1: Extended Release Naltrexone
(XR-NTX)

Outcome: Max. Subjective Opioid
Withdrawal Scale (SOWS) Score b/w 10th
and 14th Week



X:BOT Study

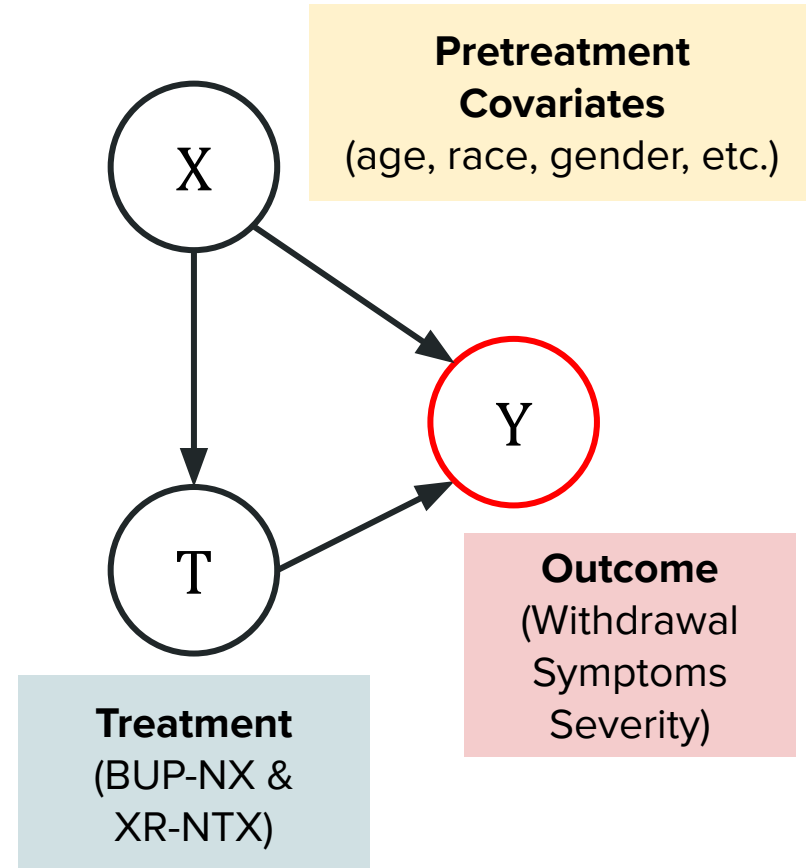
Cohort Size: 540 patients

Randomized (1:1) to receive:

$T=0$: Buprenorphine Naloxone
(BUP-NX)

$T=1$: Extended Release Naltrexone
(XR-NTX)

Outcome: Max. Subjective Opioid
Withdrawal Scale (SOWS) Score b/w 10th
and 14th Week



X:BOT Study

Cohort Size: 540 patients

Randomized (1:1) to receive:

$T=0$: Buprenorphine Naloxone
(BUP-NX)

$T=1$: Extended Release Naltrexone
(XR-NTX)

Outcome: Max. Subjective Opioid
Withdrawal Scale (SOWS) Score b/w 10th
and 14th Week



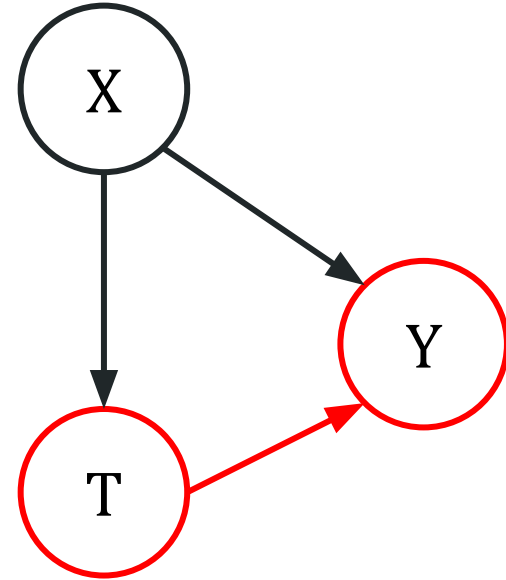
SOWS:

- Score measured using 16 symptoms such as nausea, vomiting, stomach cramp, etc.
- Ranges between 0 and 64
- Higher means worse

X:BOT Study

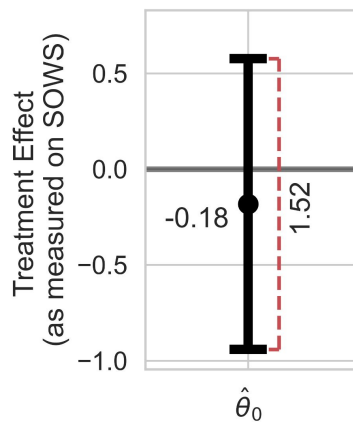
$$Y = \boxed{\theta(X)}T + \boxed{g(X)} + \gamma$$

Treatment Effect Baseline Effect

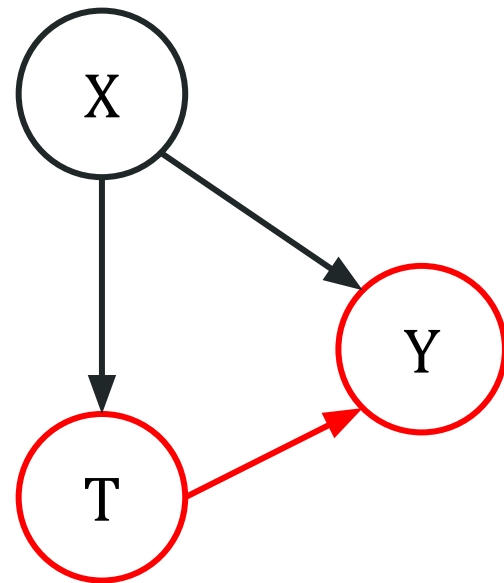


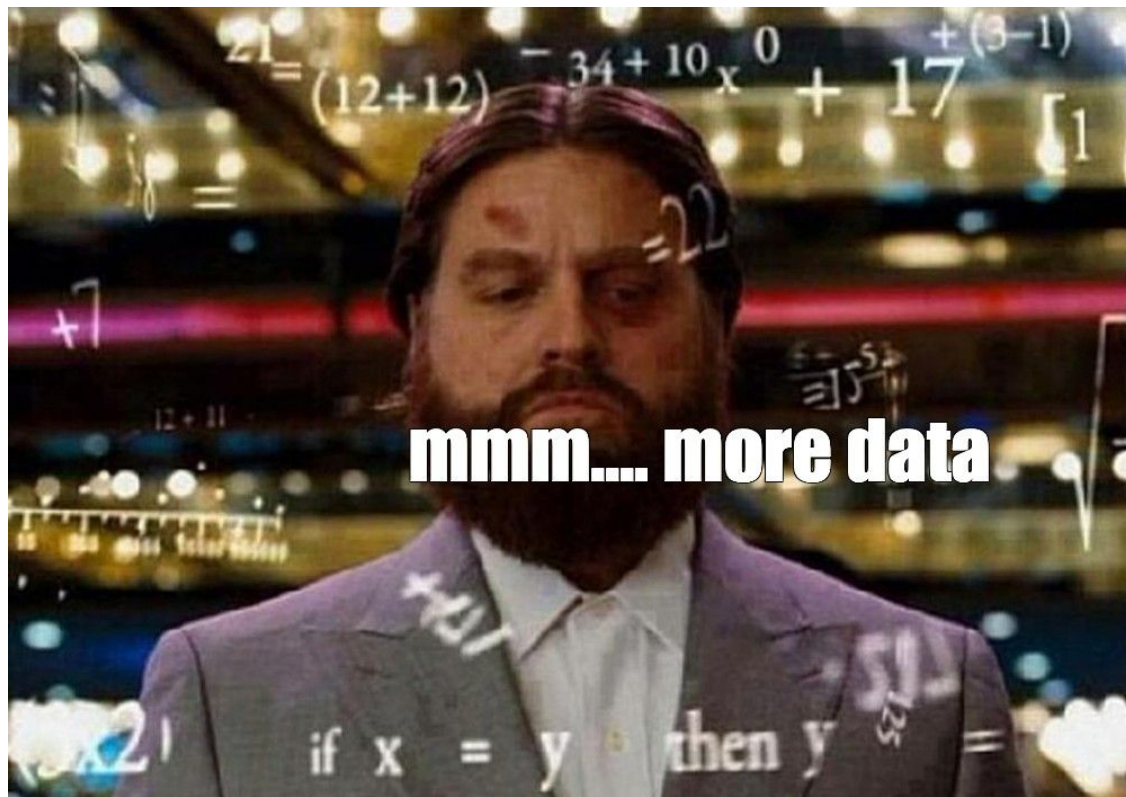
X:BOT Study

$$Y = \underbrace{\theta(X)}_{\text{Treatment Effect}} T + \underbrace{g(X)}_{\text{Baseline Effect}} + \gamma$$



XR-NTX on-par
with BUP-NX





Oh, we have another dataset!

POATS Study

Cohort Size: 360 patients

Treatment:

T=0: Buprenorphine Naloxone
(BUP-NX)

Outcome: Max. Clinical Opiate
Withdrawal Scale (COWS) Score b/w
10th and 14th Week



COWS:

- Measured using 11 symptoms such as sweating, pupil size, pulse rate, etc.
- Administered by clinician
- Ranges between 0 and 55
- Higher means worse

POATS Study

Cohort

Treatment

Outcome

With

10th

Can we integrate POATS data with
X:BOT to *improve* the precision of our
MOUD effect estimates?

- Higher means worse

Why Integrate Data Across Studies? 🤖

Data Integration & Causal Inference

- Combining datasets often collected under different study designs [[Bariembom and Pearl \(2016\)](#)]



Data Integration & Causal Inference

- Combining datasets often collected under different study designs [[Bariembom and Pearl \(2016\)](#)]
- **Goals:**
 - Generalizability [[Stuart et al \(2011\)](#)]
 - Transportability [[Pearl et al \(2011\)](#)]
 - Efficiency Gain [[Yang et al \(2020\)](#)]
 - Bias/Error Correction [[Kallus et al \(2018\)](#), [Parikh et al. \(2024\)](#)]



Data Integration & Causal Inference

- Combining datasets often collected under different study designs [[Bariembom and Pearl \(2016\)](#)]
- **Goals:**
 - Generalizability [[Stuart et al \(2011\)](#)]
 - Transportability [[Pearl et al \(2011\)](#)]
 - Efficiency Gain [[Yang et al \(2020\)](#)]
 - Bias/Error Correction [[Kallus et al \(2018\)](#), [Parikh et al. \(2024\)](#)]
- Data fusion recognized as one of the *top 10 future directions for causal inference research* in a 2022 Commentary featured in the American Journal of Epidemiology (AJE).



Data Integration for *Efficiency Gain*

Primary

unit-id	X_1	...	X_p	T	Y
1	x_{11}	...	x_{1p}	t_1	y_1
2	x_{21}	...	x_{2p}	t_2	y_2
...
n_0	...	...	...	...	...

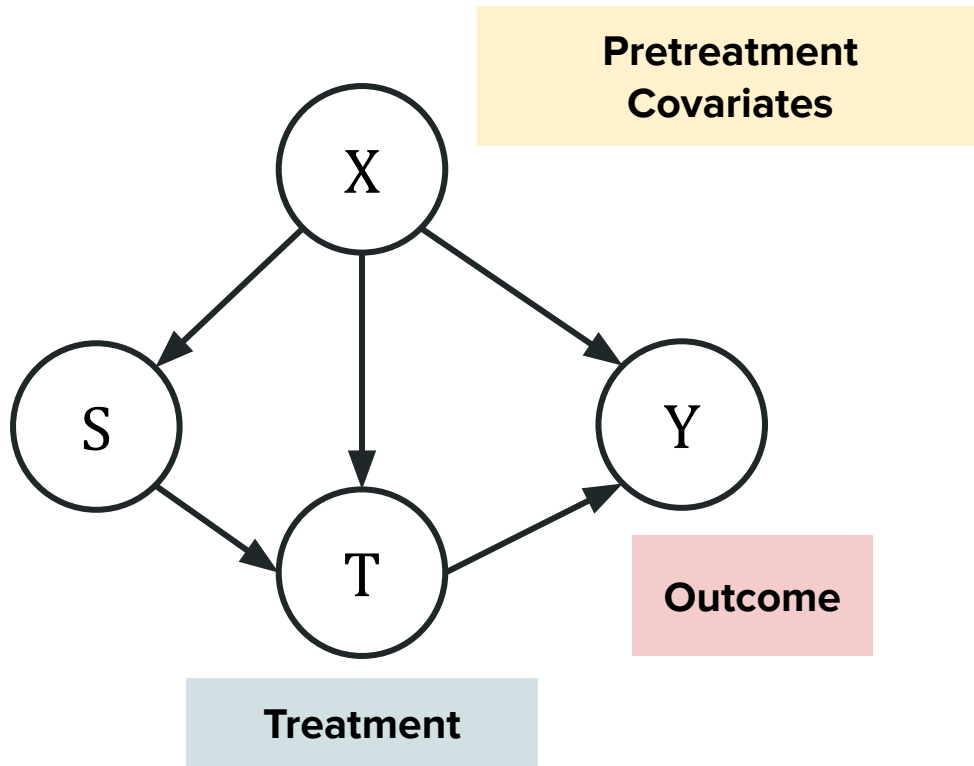
Auxiliary

unit-id	X_1	...	X_p	T	Y
n_0+1	$x_{n_0+1,1}$	...	$x_{n_0+1,p}$	t_{n_0+1}	y_{n_0+1}
...
$n_0 + n_1$	...	...	...	...	...

Notations

Sample Indicator

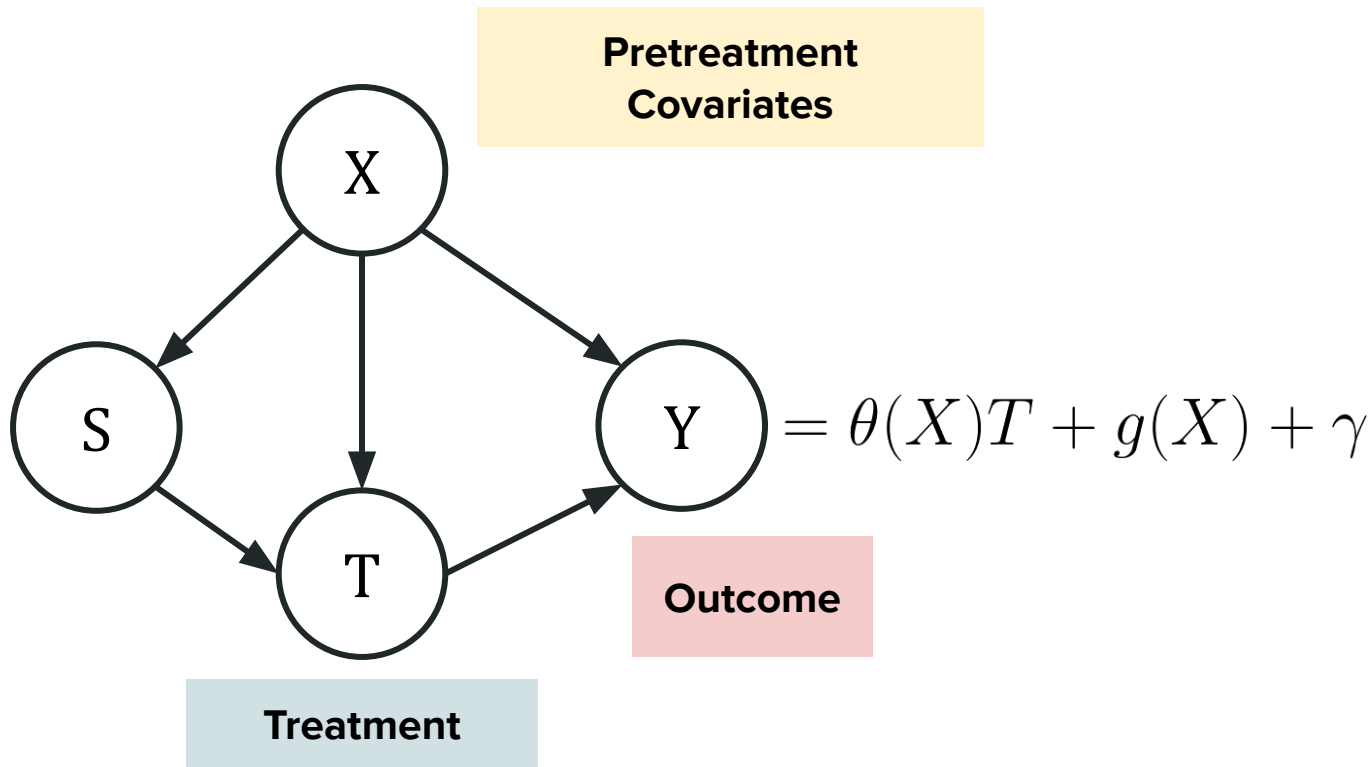
e.g.,
S=0 Primary
S=1 Auxiliary



Notations

Sample Indicator

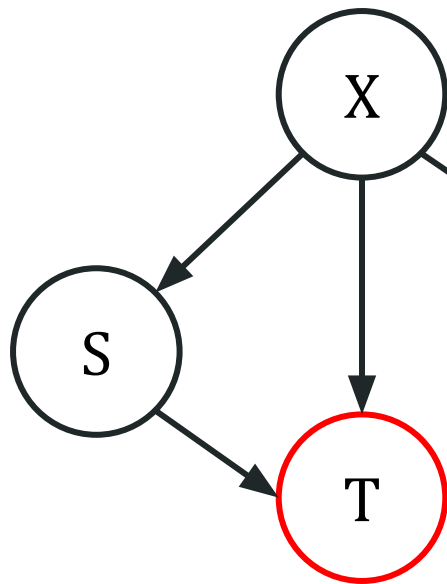
e.g.,
S=0 Primary
S=1 Auxiliary



Estimand of Interest

Sample Indicator

e.g.,
S=0 Primary
S=1 Auxiliary



Pretreatment
Covariates

Treatment

Outcome

$$Y = \theta(X)T + g(X) + \gamma$$

Efficiency Gain

$\hat{\theta}_{D_0}$: Estimator using only Primary Data

Efficiency Gain

$\hat{\theta}_{D_0}$: Estimator using only Primary Data

Quantifying Uncertainty: $\mathbb{E}[(\hat{\theta}_{D_0} - \theta)^2] = \text{Var}(\hat{\theta}_{D_0})$

Efficiency Gain

$\hat{\theta}_{D_0}$: Estimator using only Primary Data

Quantifying Uncertainty: $\mathbb{E}[(\hat{\theta}_{D_0} - \theta)^2] = Var(\hat{\theta}_{D_0})$

Efficient Estimator: $\hat{\theta}_{D_0}$ such that $Var(\hat{\theta}_{D_0})$ is smallest

Efficiency Gain

$\hat{\theta}_{D_0}$: Estimator using only Primary Data

Quantifying Uncertainty: $\mathbb{E}[(\hat{\theta}_{D_0} - \theta)^2] = Var(\hat{\theta}_{D_0})$

Efficient Estimator: $\hat{\theta}_{D_0}$ such that $Var(\hat{\theta}_{D_0})$ is smallest

$\hat{\theta}_{D_0 \oplus D_1}$: Efficient Estimator using both Primary and Auxiliary data

Efficiency Gain

$\hat{\theta}_{D_0}$: Estimator using only Primary Data

Quantifying Uncertainty: $\mathbb{E}[(\hat{\theta}_{D_0} - \theta)^2] = \text{Var}(\hat{\theta}_{D_0})$

Efficient Estimator: $\hat{\theta}_{D_0}$ such that $\text{Var}(\hat{\theta}_{D_0})$ is smallest

$\hat{\theta}_{D_0 \oplus D_1}$: Efficient Estimator using both Primary and Auxiliary data

Consider the efficient estimator $\hat{\theta}_{D_0}$ and $\hat{\theta}_{D_0 \oplus D_1}$

Efficiency Gain

$\hat{\theta}_{D_0}$: Estimator using only Primary Data

Quantifying Uncertainty: $\mathbb{E}[(\hat{\theta}_{D_0} - \theta)^2] = Var(\hat{\theta}_{D_0})$

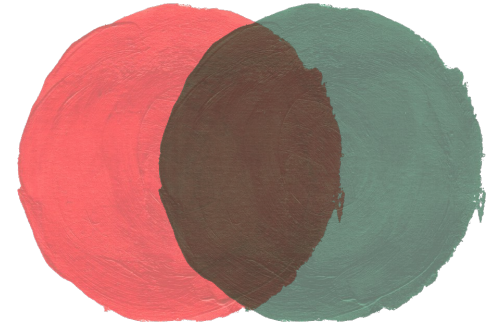
Efficient Estimator: $\hat{\theta}_{D_0}$ such that $Var(\hat{\theta}_{D_0})$ is smallest

$\hat{\theta}_{D_0 \oplus D_1}$: Efficient Estimator using both Primary and Auxiliary data

Consider the efficient estimator $\hat{\theta}_{D_0}$ and $\hat{\theta}_{D_0 \oplus D_1}$

Efficiency Gain : $Var(\hat{\theta}_{D_0 \oplus D_1}) < Var(\hat{\theta}_{D_0})$

**But we have Disparate
Outcomes Measures 🤔**



Studies with Disparate Outcome Measure

Primary

unit-id	X_1	...	X_p	T	Y	W
1	x_{11}	...	x_{1p}	t_1	y_1	?
2	x_{21}	...	x_{2p}	t_2	y_2	?
...	?
n_0	...	...	...	...	...	?

Auxiliary

unit-id	X_1	...	X_p	T	Y	W
n_0+1	$x_{n_0+1,1}$	...	$x_{n_0+1,p}$	t_{n_0+1}	?	w_{n_0+1}
...	?	...
$n_0 + n_1$	...	...	...	...	?	...

Some Related Literature

- Estimating Long-term Treatment Effects
 - [Athey et al \(2019\)](#), [Ghassami et al. \(2022\)](#)
- Leveraging Surrogate / Proxy Outcomes
 - [Wang et al. \(2020\)](#)
- Correcting for Measurement Errors
 - [Ross et al. \(2024\)](#)
- Meta Learning with Disparate Outcomes
 - [Deeks et al. \(2019\)](#)

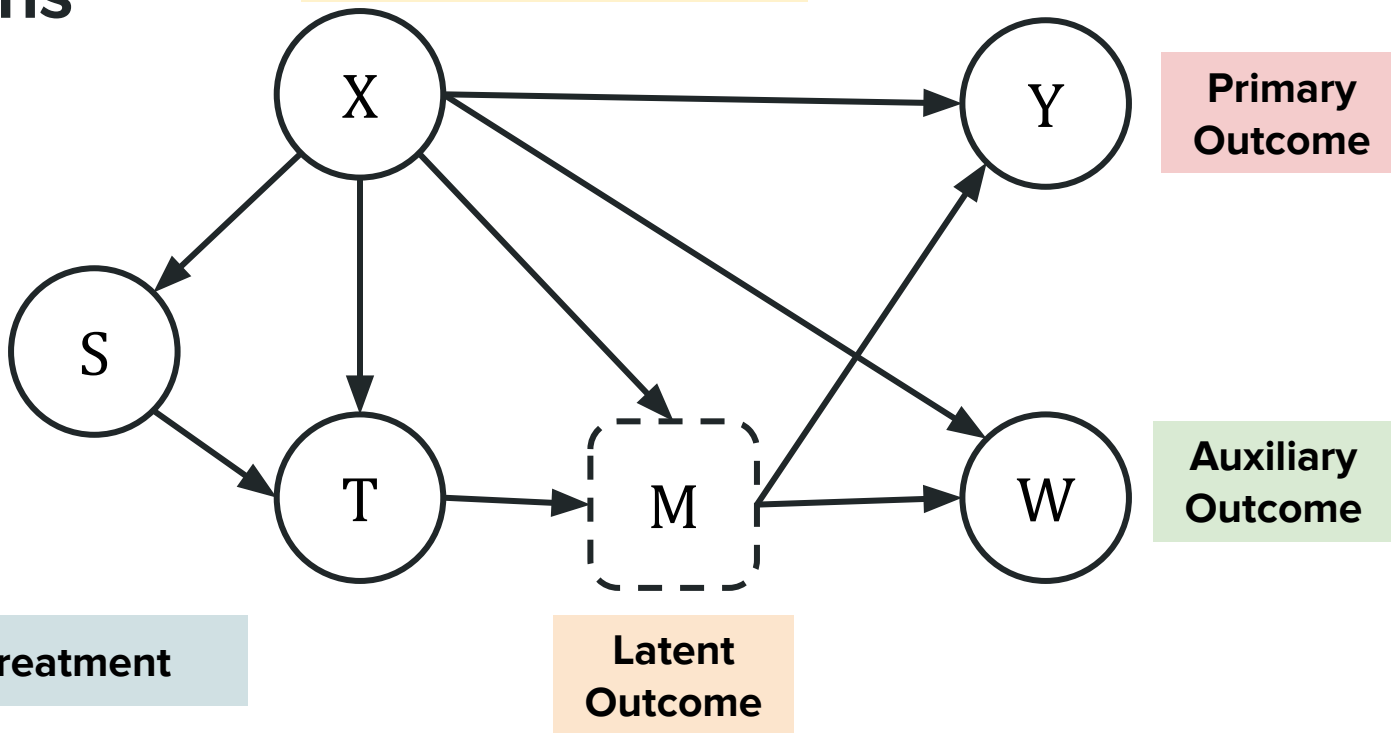
Notations & Assumptions

Sample Indicator

e.g.,
S=0 Primary
S=1 Auxiliary

Pretreatment Covariates

e.g., age, race, gender



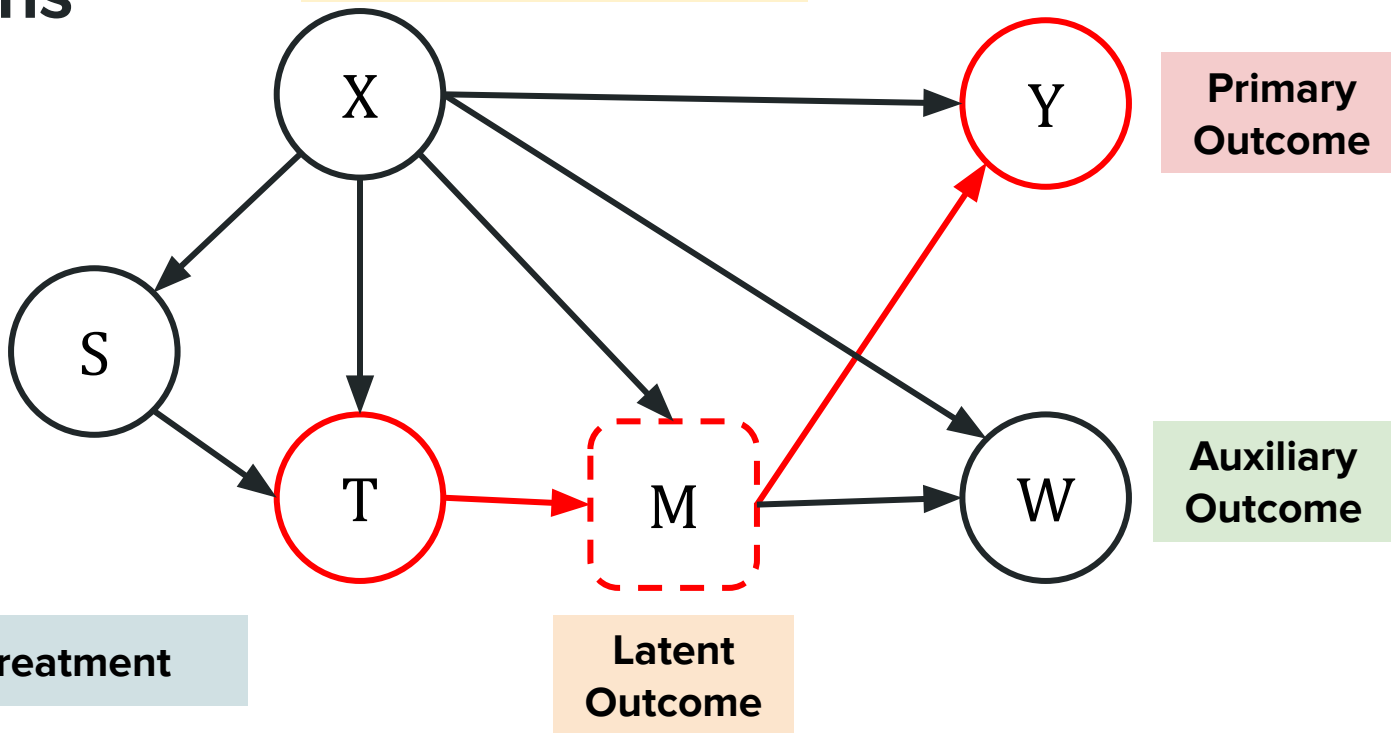
Notations & Assumptions

Sample Indicator

e.g.,
S=0 Primary
S=1 Auxiliary

Pretreatment Covariates

e.g., age, race, gender



Structural Assumptions

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Estimand of Interest

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Recall:

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Q: If and when can leveraging auxiliary data with disparate outcome measure yield *efficiency gain*?

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Linking Primary & Auxiliary Outcomes

$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Linking Primary & Auxiliary Outcomes

$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

Assumptions (from strongest to weakest)

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Linking Primary & Auxiliary Outcomes

$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

Assumptions (from strongest to weakest)

A.a. α and β are a priori known

Biochemical systems with substantial prior research.
Mechanistic parameters connecting intermediate and long term outcomes

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Linking Primary & Auxiliary Outcomes

$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

Assumptions (from strongest to weakest)

A.a. α and β are a priori known

A.b. only β is a priori is known; α unknown

Medical outcomes measured using different scales. Baseline levels are well-known (typically zero). Heterogeneous scaling factors (α) often unknown.

$$Y = \theta(X)T + g(X) + \gamma$$

$$W = \phi(X)T + f(X) + \delta$$

Linking Primary & Auxiliary Outcomes

$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

Assumptions (from strongest to weakest)

A.a. α and β are a priori known

A.b. only β is a priori known; α unknown

A.c. both α and β unknown

Almost every other scenario!

Theoretical Findings

$$\text{Var}(\hat{\theta}_0) = \text{Var}(\hat{\theta}_c) \approx \text{Var}(\hat{\theta}_b) > \text{Var}(\hat{\theta}_a)$$

$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

Assumptions (from strongest to weakest)

A.a. α and β are a priori known

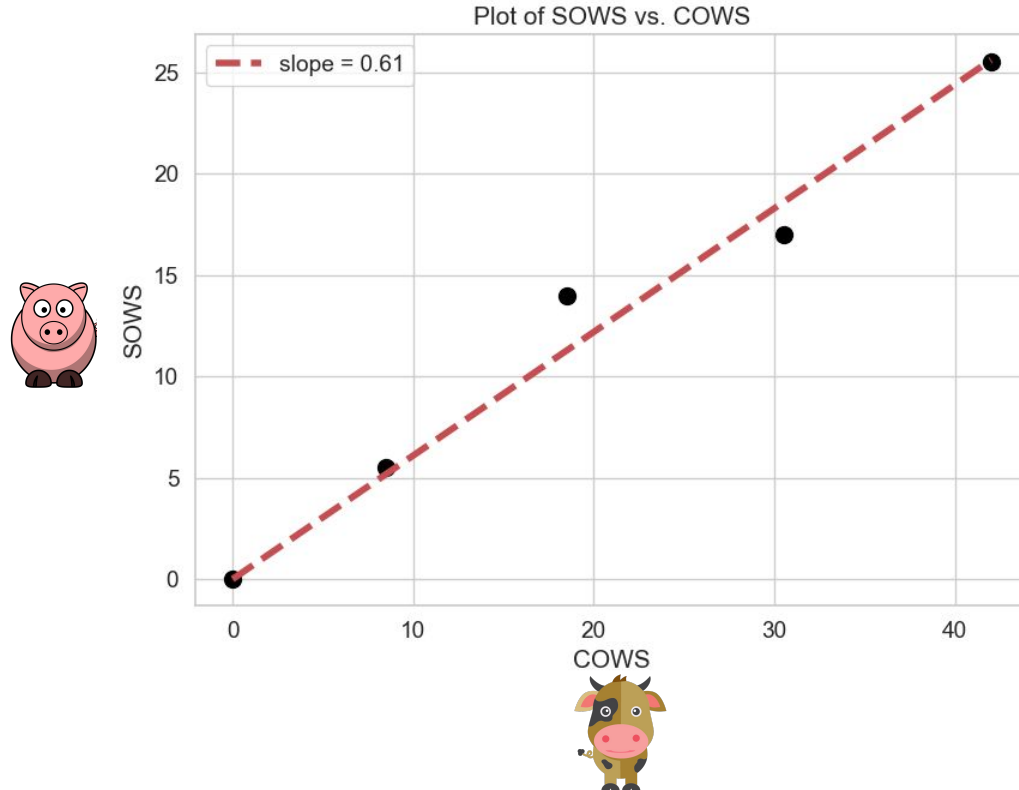
A.b. only β is a priori known; α unknown

A.c. both α and β unknown

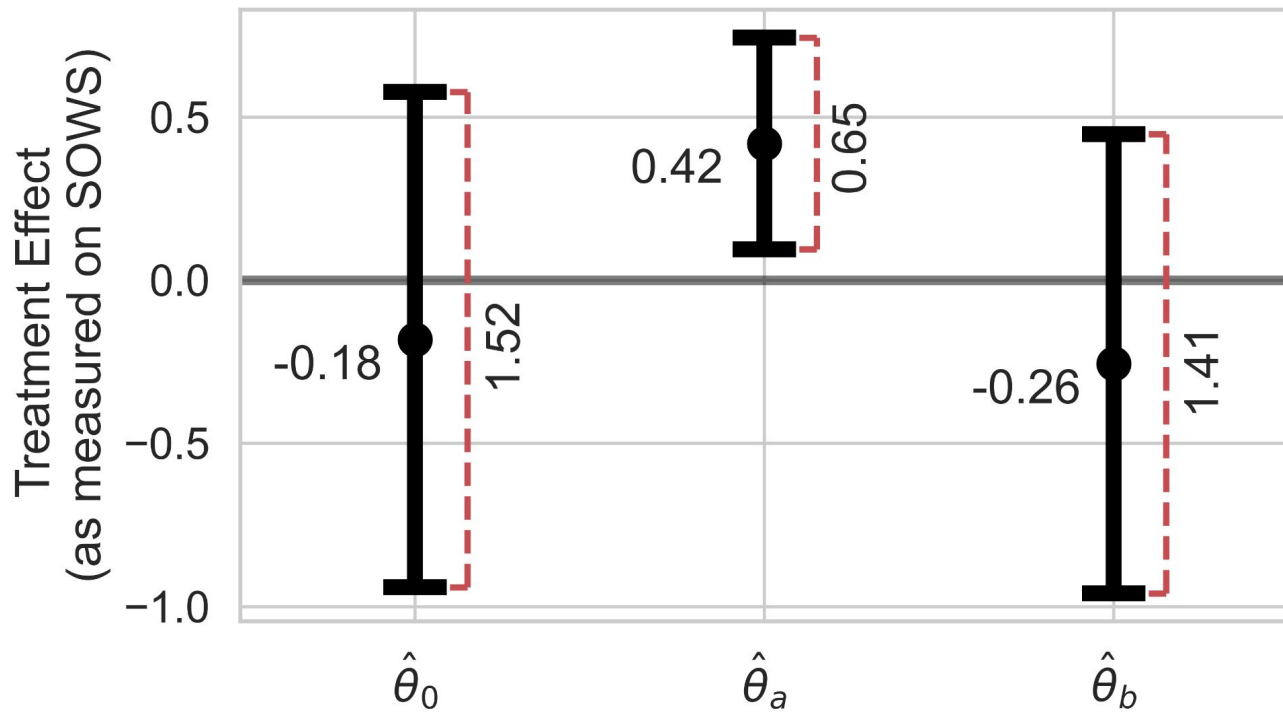
X:BOT ⊕ POATS

MOUD → Withdrawal Symptoms

COWS v/s SOWS (Building on domain knowledge)



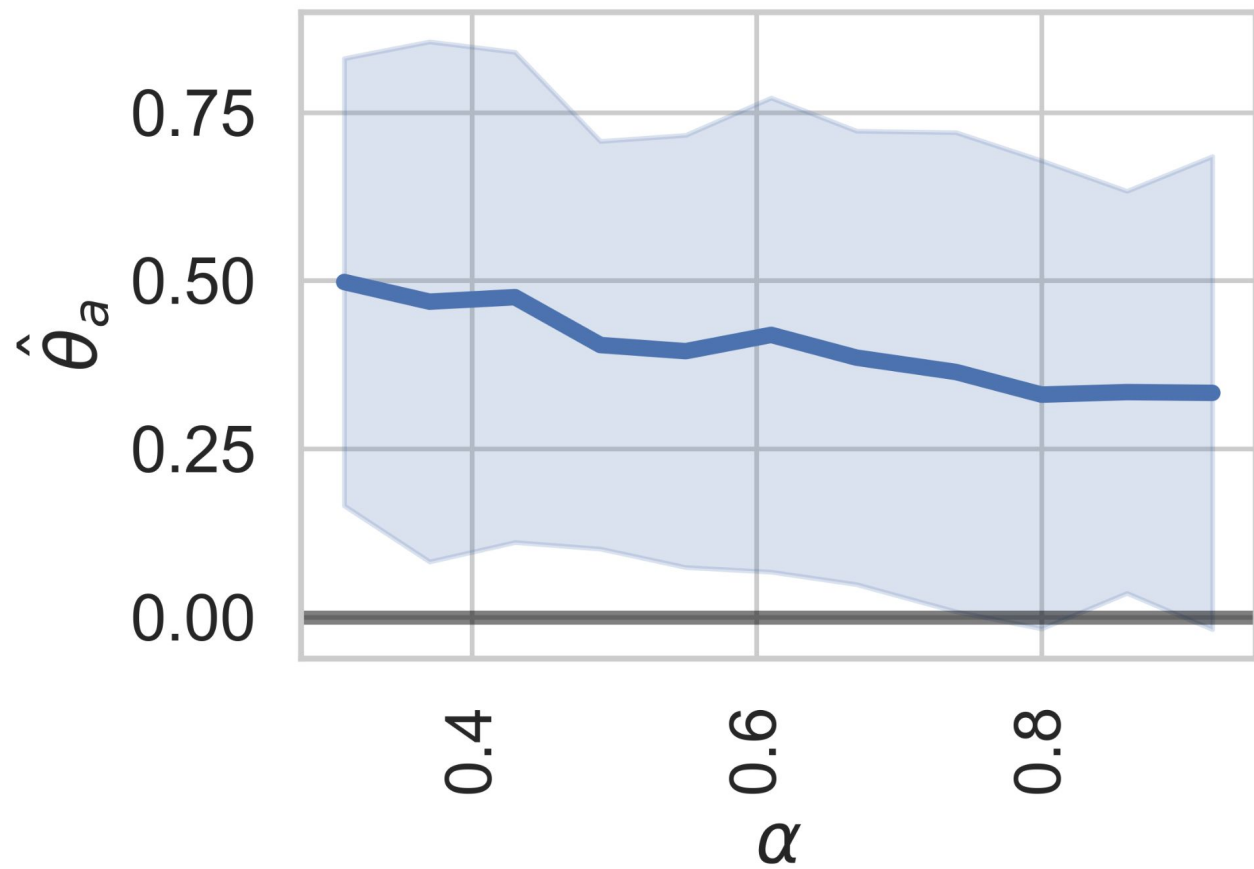
X:BOT \oplus POATS

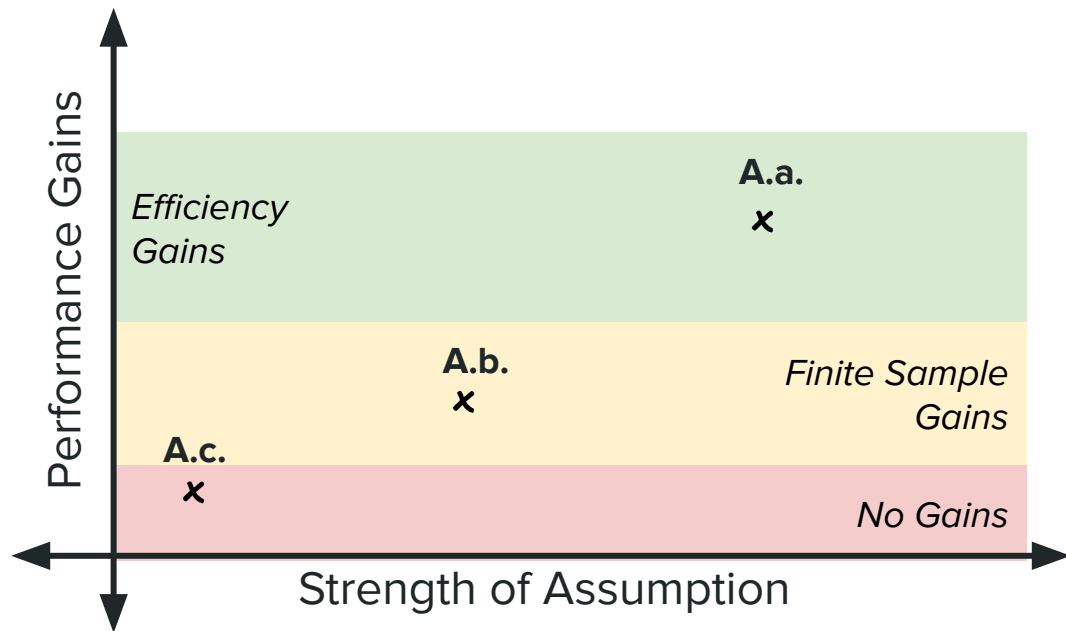


What if we assume
A.a. but our guess of
 $\alpha(X)$ is wrong? 🤔

What if we assume
A.a. but our guess of
 $\alpha(X)$ is wrong? 🤔

$$Bias = \mathbb{E}[(\alpha_{mis.}(X) - \alpha_{true}(X)) \phi(X)]$$





$$\mathbb{E}[Y \mid X] = \alpha(X)\mathbb{E}[W \mid X] + \beta(X)$$

Assumptions (from strongest to weakest)

A.a. α and β are a priori known

A.b. only β is a priori known; α unknown

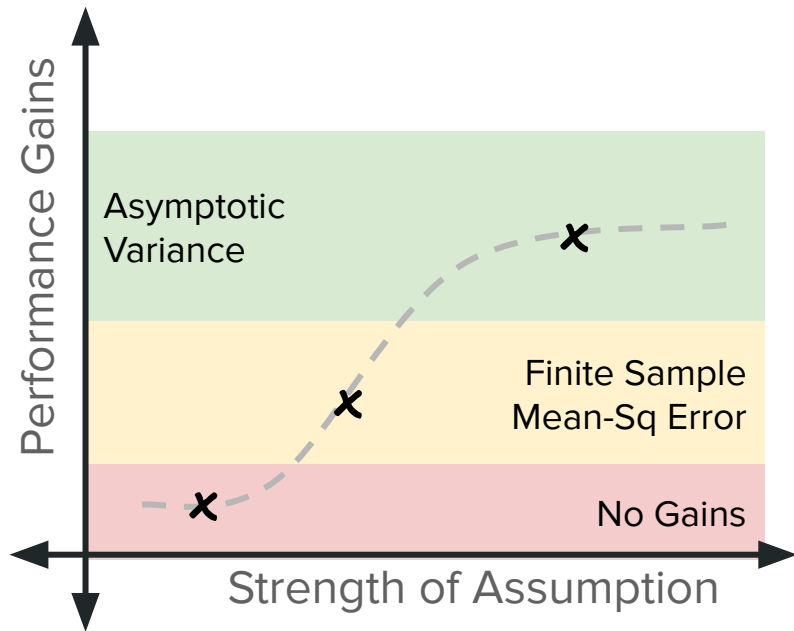
A.c. both α and β unknown

Q: Does Leveraging Auxiliary Study with Disparate Outcome yields Efficiency Gains?

A: It depends on

- Access to background knowledge
- Assumptions one is willing to make
 - Risk of bias due to misspecification

>> *There is no free lunch*



Thank you!