



Review of ORAUT-RPRT-0071 on External Dose Coworker Methodology

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Overview of ORAUT-RPRT-0071

- ◆ Describes a multiple imputation (MI) method for filling in censored – less than the limit of detection (LOD) – readings
- ◆ Current method: one-half of LOD
- ◆ MI fills in censored measurements with multiple replicates
- ◆ Uses average as imputed value
 - Combines with uncensored measurements in further analyses
- ◆ Procedure described has two components
 - Imputation method: MI
 - Probability model underlying the imputations

Summary of SC&A review of RPRT-0071

- ◆ MI justifiable and likely improves on LOD/2
- ◆ MI generally regarded as state-of-the-art for imputation
 - Can reduce bias
 - Allows for measurement of estimator uncertainty
- ◆ Application of lognormal probability model can be problematic in some situations
 - Lognormal assumption should be validated case-by-case
- ◆ SC&A views MI positively but believes there are several topics to be explored further
- ◆ Leads to four high-level observations

Observation 1: RPRT-0071 does not include estimates of uncertainty

- ◆ Significant benefit of MI is to accurately account for error in estimation
- ◆ RPRT-0071 does not capitalize on this benefit
- ◆ Could help understand downstream uncertainty
 - in co-exposure model
 - in probability of causation model

Observation 2: Explore mixture models

- ◆ Nonpositive measurements come from statistical measurement error
- ◆ Applicable to all measurements, not just nonpositive ones
- ◆ Mixture models explored in ORAUT-RPRT-0096
- ◆ Mixture models could be combined with MI to develop better inferences

Observation 3: Determine probability model for each case individually

- ◆ RPRT-0071 notes lognormal is not optimal in all situations
- ◆ Report focuses only on lognormal
- ◆ Misspecification of underlying model will undermine imputations
- ◆ Analysts need to be aware of other possibilities
- ◆ Guidelines for evaluating each situation individually could be helpful

Observation 4: Account for relationship of doses to covariates

- ◆ May be cases where covariate information is more important than underlying statistical distribution
- ◆ For example, dosages may relate to occupation
- ◆ Could stratify by occupation
- ◆ Could include occupation in underlying probability model
 - Lognormal assumption can still be supported in a generalized linear model

SC&A's comments by section of RPRT-0071: section 1.0, "Introduction"

- ◆ Dose reconstruction
 - Doses in table 1-1 “were reconstructed to eliminate the censoring”
 - How doses were reconstructed is not explained
- ◆ **Observation 5:** NIOSH does not provide adequate information on how doses were reconstructed
- ◆ Negative dose measurements
 - Important to think about this type of measurement error
 - We discuss statistical measurement error more fully later

SC&A's comments on RPRT-0071 introduction: Linear imputation model

- ◆ NIOSH: “These linearly imputed doses are given in the Impute C column in Table 1-1”
 - Take the x-axis of a graph to be the dates of the measurements
 - Take the y-axis of same graph as imputed measurement for each dose
 - Draw line starting at $y = 0$ for first date to $y = 0.05$ (LOD) for last date
 - Impute the value of y for the measurement for each date on the x-axis
 - Amounts to $y = 0.05 \times t$, where t indexes date
- ◆ We think model is meant to illustrate *one* of the imputation methods
- ◆ SC&A worries someone might think this is a legitimate model
- ◆ **Observation 6:** Report would benefit from a disclaimer about the linear imputation model

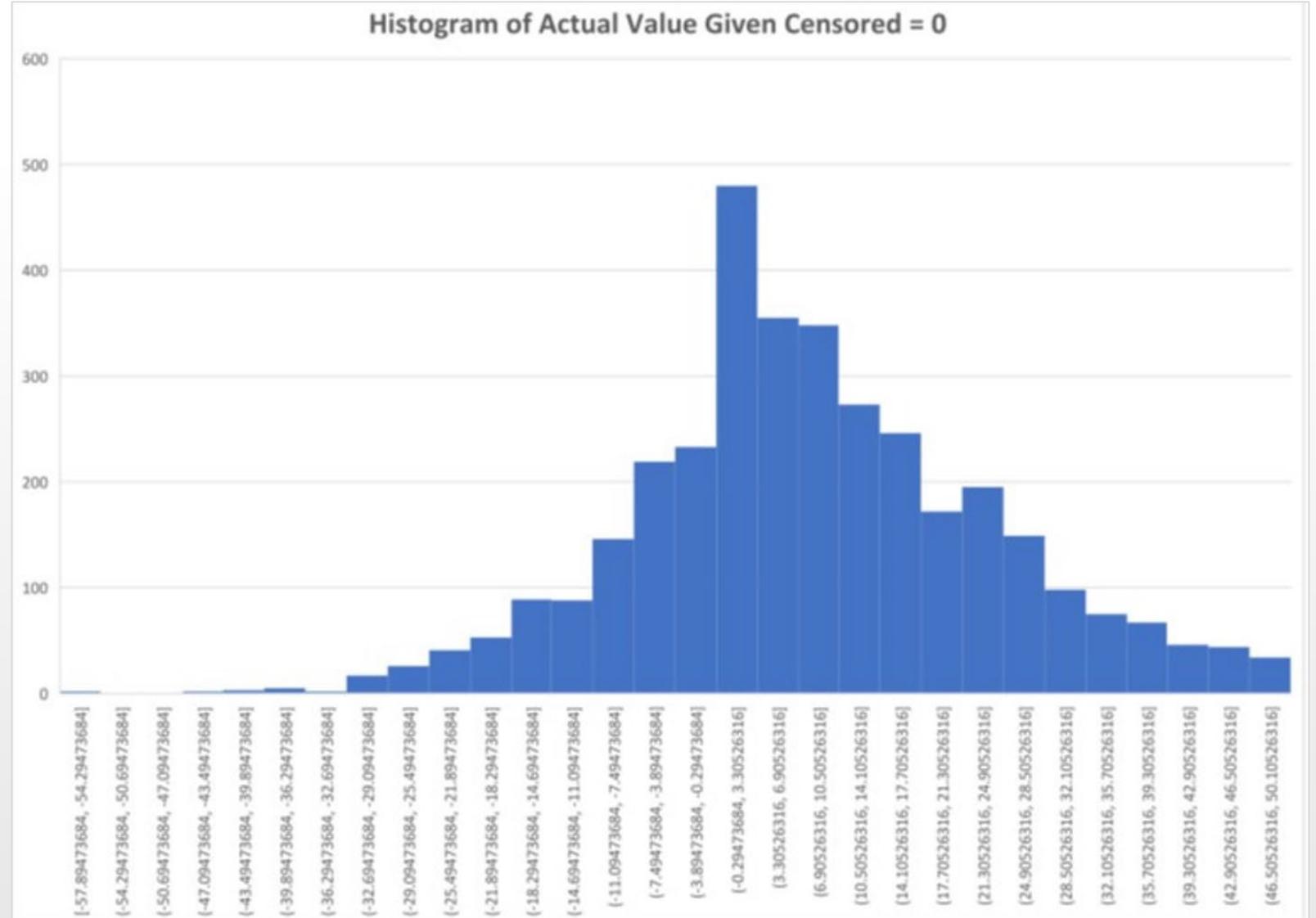
SC&A's comments on RPRT-0071 section 3.0, "Imputation Models and Multiple Imputation"

- ◆ Authors fit a lognormal distribution to data with 3,736 observations from 732 workers
- ◆ Average about 5 observations per worker
- ◆ So, data are clustered by worker
- ◆ If intracluster correlation is not small, need to adjust distribution fitting
- ◆ **Observation 7:** Acknowledge the impact of clustering

SC&A's comments on RPRT-0071, section 3.0, figure 3-1

- ◆ Figure 3-1 data:
 - Report indicates preponderance of data below LOD
 - Hard to see since the figure shows the entire range
 - Can't tell how well lognormal distribution describes data
 - SC&A graphed data below the LOD (graph on next slide)
 - More normal than lognormal
 - Highlights the need for individual analysis of each case
- ◆ **Observation 8:** Provide advice for data that are not lognormal

Graph: figure 3-1 data less than the LOD



SC&A's comments on RPRT-0071 section 3.0: Covariate data

- ◆ Covariate data
 - Page 8 of RPRT-0071 gives examples of other ways to generate multiple imputations
 - Use of covariate data not mentioned
- ◆ Sometimes dosages vary by population of worker
 - Populations may be distinguishable from available information
 - That information could be used to stratify a model
 - Or used as independent variables in a model
- ◆ **Observation 9:** Expand discussion of population subsets

SC&A's comments on RPRT-0071 section 3.0: MI variations

- ◆ There are many varieties of multiple imputation
- ◆ Traditional advice is to apply it within a Bayesian framework (Rubin, 1986)
 - Bayesian framework can be difficult to apply in practice
- ◆ RPRT-0071 uses less complex version than the Bayesian one
- ◆ Bayesian version might be unnecessarily complicated for our application
 - However, shouldn't assume all benefits of the full MI method apply to RPRT-0071 version

SC&A's comments on RPRT-0071 section 4.0, “Coworker Models”

- ◆ NIOSH (p. 9): “The statistician performing the analysis will make the judgment as to whether or not a given dataset is large enough to provide usable parameter estimates”
- ◆ Not just how large dataset is or how well model fits
- ◆ Statistician should quantify uncertainty in model parameter estimates
- ◆ Imputation adds uncertainty, and MI allows statistician to quantify it
- ◆ This report on MI is the place to explore how to quantify it

SC&A's thoughts on further research:

Measuring uncertainty

- ◆ MI method could be implemented with single ($k = 1$), not multiple, imputation
- ◆ Would not alter the bias properties of the model
- ◆ Using $k > 1$ does, though, reduce the uncertainty in the final model estimates and provides a method for assessing that level of uncertainty
 - With $k = 1$, the level of uncertainty is hard to assess
- ◆ RPRT-0071 should highlight and discuss this benefit more
- ◆ Using MI data in co-exposure models allows users to
 - Properly account for the extra uncertainty of model parameters from imputation
 - Estimate resultant standard errors of estimates from models

SC&A's thoughts on further research:

Measurement error

- ◆ Measurement error present in all measurements
 - Not just nonpositive ones
- ◆ Measured dose = true value + measurement error
- ◆ Simple approach usually models just true value
- ◆ RPRT-0071 notes measurement error is at play in nonpositive dose values
 - Attempts to account for that measurement error via imputation
- ◆ Since true dose value must be zero or more, nonpositive doses necessarily have negative measurement error
- ◆ Accounting for only negative measurement errors potentially biases the model

SC&A's thoughts on further research: Mixture models

- ◆ ORAUT-RPRT-0096 examined mixture models
- ◆ Mixture models can account for effects of measurement error
- ◆ Instead of relying solely on a lognormal probability model, it might make sense to use a mixture model that includes a lognormal component
- ◆ RPRT-0071 has a contradiction: It considers negative measurement errors but ignore positive ones
- ◆ **Observation 10:** RPRT-0071 does not acknowledge positive measurement error

Conclusion

- ◆ MI is state-of-the-art
- ◆ It is a credible approach
- ◆ The measurements it targets are the smallest ones, so the imputation method may not make much difference to probability of causation estimates in many cases
- ◆ Nonetheless, if MI is to be pursued, further exploration of issues related to our observations may benefit the dose reconstruction process

References

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