Directed Acyclic Graphs: a useful modern tool in epidemiology (DAGS)

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Causal inference

- Causal inference is a rather new (~ 30 years) branch of statistics, specifically devoted to issues of causality
 - Under what conditions can we estimate causal effects?
 - Which statistical methods are most appropriate for causal effect estimation?

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Causal inference

- The field of causal inference consists of three main parts:
 - 1. A formal language for unambiguously defining causal concepts.
 - 2. Causal diagrams: a tool for clearly displaying our causal assumption, useful for both design and analyses of epidemiological studies.
 - 3. Statistical methods to draw more reliable conclusions from the data at hand.
- In this lecture, we focus on 2.

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Association vs Causation

- Many epidemiological research questions are centered around a particular exposure and a particular outcome
- Typically, we want to learn whether there is an association between the exposure and the outcome
- Often, the aim is more ambitious; we want to know whether the exposure has a causal effect on the outcome

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Ideal randomized trials

In ideal randomized trials exposed and unexposed are exchangeable:

 $(Y_0, Y_1) \amalg A$

As a consequence, Association = Causation:

RR = CRR

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Observational studies

- In observational studies, exchangeability is often implausible
- We may achieve conditional exchangeability by controlling for an appropriate set of covariates:

 $(Y_0, Y_1) \amalg A \mid L$

RR|L = CRR|L

 But selecting an appropriate set of covariates to adjust for is a non-trivial task Directed Acyclic Graphs: a useful modern tool in epidemiology

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- Thus the goal is to identify a set of covariates such that conditional exchangeability holds given these (goal is to minimize confounding)
- This requires background subjects-matter knowledge
- Causal diagrams help us to organize this knowledge and identify whether or not conditional exchangeability holds.

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Directed Acyclic Graphs

- UCLA computer scientist Judea Pearl developed Directed Acyclic Graphs (DAGs)
- Simplify interpretation and communication in causal inference
- We will motivate DAGs in the context of covariate selection



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Aim and data

- Suppose that we carry out an observational study to investigate whether smoking during pregnancy (Exposure) causes malformations (Outcome) in newborns
- For a large number of pregnancies, we collect data on both exposure and outcome
- We record five additional covariates
 - mothers age at conception
 - mothers socioeconomic status/education level at conception
 - mothers diet during pregnancy
 - family history of birth defects
 - indicator of whether the baby was liveborn or stillborn

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Confounding

- We observe an unadjusted association between smoking and malformations (*RR* = 0.8)
- However, we suspect that there is confounding of the exposure and outcome
 - If so, exposed and unexposed are not exchangeable ('comparable'), and
 - the observed risk ratio cannot be given a causal interpretation
- To reduce bias due to confounding we want to adjust for a set of observed covariates

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The need for covariate selection

- One strategy would be to control for all measured covariates
- This strategy may not be optimal, because
 - some covariates may not be confounders, and may increase non-exchangeability if controlled for
 - more covariates requires a bigger model, with a higher potential for bias due to model misspecification
 - some covariates may be prone to measurement errors, and may therefore lead to bias
 - some covariates may reduce statistical power/efficiency when controlled for
- Therefore, it is often desirable to control for a subset of covariates

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Traditional covariate selection strategies

- Control for covariates that are selected in a stepwise regression procedure
- Control for covariates that change the point estimate of interest with more than, say, 10%
- Control for covariates that
 - are associated with the exposure, and
 - are conditionally associated with the outcome, given the exposure, and
 - are not in the causal pathway between exposure and outcome

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Problems with traditional strategies

- They rely on statistical analyses of observed data, rather than a priori knowledge about causal structures
 - require that data is already collected, and cannot not be used at the design stage
- They may select non-confounders, which may increase non-exchangeability if controlled for

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Covariate selection with DAGs

- Directed Acyclic Graphs (DAGs) can be used to overcome the problems with traditional covariate selection strategies
- A DAG is a graphical representation of underlying causal structures
- DAGs for covariate selection:
 - encode our a priori causal knowledge/beliefs into a DAG
 - apply simple graphical rules to determine what covariates to control for

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Directed Acyclic Graphs

- Directed Acyclic Graphs (DAGs) can be used to overcome the problems with the traditional covariate selection strategies
- A DAG is a graphical representation of underlying causal structures
- DAGs for covariate selection
 - encode our *a priori* causal knowledge/beliefs into a DAG
 - apply simple graphical rules to determine what covariates to adjust for

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The simplest DAG



First Step

- We write the exposure and exposure of interest, with an arrow from the exposure to the outcome
- This arrow represents the causal effect we aim to estimate

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How to draw a causal diagram - I

Smoking — — > Malformation



 This arrow represents the causal effect we aim to estimate Directed Acyclic Graphs: a useful modern tool in epidemiology

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How to draw a causal diagram - II



- If there is any common cause of the exposure and the outcome we must write it in the diagram
- We must include this common cause irrespective of whether or not it has been measured in our study
- We continue in this way adding to the diagram any variable (observed or unobserved) which is common cause of two or more variables already included in the diagram

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How to draw a causal diagram - III

- We can choose to include variables that are not common cause of other variables in the diagrams
- For example birth status
- Suppose we finish at this point. The variables and arrows NOT in our diagram represent our causal assumptions



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Directed Acyclic Graph



- Each arrow represents a causal influence
- The graph is
 - Directed, since each connection between two variables consists of an arrow
 - Acyclic, since the graph contains no directed cycles
- Formal connection to potential outcomes/counterfactuals through non-parametric structural equations
 - beyond the scope of the talk

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A note on acyclicness

- We impose acyclicness since a variable cannot cause itself
 - e.g. my BMI today has no effect on my BMI today
- Observed variables are often snapshots of time varying processes
 - e.g. my BMI today certainly affects my BMI tomorrow
- Time varying processes can be depicted in DAGs be explicitly adding one 'realization' of each variable per time unit (more later)



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Underlying assumptions



Assumptions are encoded by the direction of arrows

the arrow from X to Y means that X may affect Y, but not the other way around Directed Acyclic Graphs: a useful modern tool in epidemiology

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Underlying assumptions, cont'd



Assumptions are encoded by the absence of arrows

- the presence of an arrow from X to Y means that X may or may not affect Y
- the absence of an arrow from X to Y means that X does not affect Y

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Underlying assumptions, cont'd



- Assumptions are encoded by the absence of common causes
 - the presence of Z means that X and Y may or may not have common causes
 - the absence of Z means that X and Y do not have any common causes

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Ancestors and descendents



- The ancestors of a variable V are all other variables that affect V, either directly or indirectly
 - Z is the single ancestor of X
- The descendents of a variable V are all other variables that are affected by V, either directly or indirectly
 - Y is the single descendent of X

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Paths

 $X \xrightarrow{V} Y$

- A path is a route between two variables, not necessarily following the direction of arrows
- Which are the paths between X and Y?

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Solution



► Four paths between *X* and *Y*:

$$\blacktriangleright X \to Y$$

$$\blacktriangleright X \to V \to Y$$

$$\blacktriangleright X \leftarrow Z \rightarrow Y$$

$$\blacktriangleright X \to W \leftarrow Y$$

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Causal paths



- A causal path is a route between two variables, following the direction of arrows
 - the causal paths from X to Y mediate the causal effect of X on Y, the non-causal paths do not
- Which are the causal paths between X and Y?

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Blocking of paths



 Paths (both causal and non-causal) are either open or blocked, according to two rules Directed Acyclic Graphs: a useful modern tool in epidemiology

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Rule 1

A path is blocked if somewhere along the path there is a variable Z that sits in a 'chain'



or in a 'fork'

 $\leftarrow Z \longrightarrow$

and we have controlled for Z

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Rule 2

A path is blocked if somewhere along the path there is a variable Z that sits in an 'inverted fork'



and we have **not** controlled for *Z*, or any of its descendents

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Excuse me guys... but what the heck happened Thur-fri? Vi ses i hist!/3H Directed Acyclic Graphs: a useful modern tool in epidemiology

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Once blocked stays blocked

$$A \longleftrightarrow V \longrightarrow W \longleftarrow Y$$

- Adjusting for V blocks the path from A to Y (rule 1)
- Adjusting for W leaves the path open (rule 2)
- Adjusting for both V and W blocks the path

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Relation between 'blocking' and independence

- If all paths between X and Y are blocked, then X and Y are independent
- If at least one path is open between X and Y, then X and Y are generally associated

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Example



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- Suppose that the DAG above depicts the true causal structure
- We want to test whether there is a causal effect of X on Y

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- i.e. does the causal path $X \rightarrow Y$ exist?
- Control or not control for Z?

Heuristic argument



• X = smoking, Y = malformations, Z = age

- Young mothers smoke more often, but their babies have smaller risk for malformations, than old mothers
- Hence, smokers are more likely to be young, and for this reason less likely to have babies with malformations, than non-smokers
- By not controlling for age we may observe an inverse association between smoking and malformations, even in the absence of a causal effect

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Formal solution



- Suppose that we don't control for Z, and that we observe an association between X and Y
- There are two explanations for this association:
 - the causal path $X \to Y$
 - the open non-causal path $X \leftarrow Z \rightarrow Y$ (Rule 1)
- ► Hence, an association between X and Y, when not controlling for Z, does not prove that the causal path X → Y exists

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Formal solution, cont'd



- Suppose that we control for Z
 - we block the non-causal path $X \leftarrow Z \rightarrow Y$ (Rule 1)
- Suppose that we then observe an association between X and Y
 - this can only be explained by the causal path $X \rightarrow Y$
- Hence, an association between X and Y, when controlling for Z, proves that there is a causal effect of X on Y

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Conclusion



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- Motivating example, revisited Potential problems
- If the aim is to test for a causal effect of X on Y, then we should control for Z
- We don't have unconditional exchangeability

$$(Y_0, Y_1) \downarrow X$$

but we have conditional exchangeability, given Z

$$(Y_0, Y_1) \amalg X \mid Z$$

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Remark

- Controlling for Z does not give a causal effect if the DAG is incorrect, e.g. if
 - Y causes X



there are additional common causes of X and Y



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Example



- Suppose that the DAG above depicts the true causal structure
- We want to test whether there is a causal effect of X on Y
 - i.e. does the causal path $X \rightarrow Y$ exist?
- Control or not control for Z?

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Heuristic argument



- X = smoking, Y = malformations, Z = birth status (live/stillborn)
- Smoking and malformations increase the risk for stillbirth
- Consider the group of woman who has stillbirths: what caused the stillbirths?

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Heuristic argument, cont'd



- For the non-smokers who had a stillbirth, smoking was obviously not the cause
 - perhaps malformations then?
- When smoking is ruled out as the cause of malformation, the likelihood of malformation increases
 - an inverse non-causal association between smoking and malformation!
- By controlling for (e.g. stratifying on) birth status we may observe an inverse association between smoking and malformations, even in the absence of a causal effect

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Formal solution



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- Suppose that we control for Z, and that we observe an association between X and Y
- There are two explanations for this association:
 - the causal path $X \rightarrow Y$
 - the open non-causal path $X \rightarrow Z \leftarrow Y$ (Rule 2)
- ► Hence, an association between X and Y, when controlling for Z, does not prove that the causal path X → Y exists

Formal solution



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- Suppose that we control for Z, and that we observe an association between X and Y
- There are two explanations for this association:
 - the causal path $X \rightarrow Y$
 - the open non-causal path $X \rightarrow Z \leftarrow Y$ (Rule 2)
- ► Hence, an association between X and Y, when controlling for Z, does not prove that the causal path X → Y exists

Formal solution, cont'd



- Suppose that we don't control for Z
 - we block the non-causal path $X \rightarrow Z \leftarrow Y$ (Rule 2)
- Suppose that we then observe an association between X and Y
 - this can only be explained by the causal path $X \rightarrow Y$
- Hence, an association between X and Y, when not controlling for Z, proves that there is a causal effect of X on Y

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Conclusion



- If the aim is to test for a causal effect of X on Y, then we should not control for Z
- ▶ We don't have conditional exchangeability, given Z

$$(Y_0, Y_1) \not \perp X \mid Z$$

but we have unconditional exchangeability

$$(Y_0, Y_1) \amalg X$$

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General strategy for covariate selection

- Control for covariates that block non-causal paths between the exposure and the outcome if controlled for
- Don't control for covariates that open non-causal paths between the exposure and the outcome if controlled for
- If we manage to block all non-causal paths, then any observed association must be due to a causal effect
 - we then have conditional exchangeability, given the covariates that we control for

 $(Y_0, Y_1) \amalg X \mid Z$

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Technical note: testing vs estimation

- If we manage to block all non-causal paths, then any observed association must be due to a causal effect
- We thus have a valid test for causation
- This typically, but not necessarily, means that we also have a valid estimate of the causal effect

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Examples revisited



In the left DAG, it can be shown that we have exchangeability:

 $(Y_0, Y_1) \amalg X$

so that the risk ratio is equal to the causal risk ratio

- not controlling for Z gives a valid estimate of the causal effect, as well as a valid test for causation
- In the right DAG, it can be shown that we have conditional exchangeability, given Z:

$(Y_0, Y_1) \amalg X \mid Z$

so that the conditional risk ratio, given Z, is equal to the conditional causal risk ratio, given Z

 controlling for Z gives a valid estimate of the causal effect, as well as a valid test for causation Directed Acyclic Graphs: a useful modern tool in epidemiology

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Counterexample

 $X \longrightarrow Y \longrightarrow Z$

- If we control for Z in the DAG above, then all non-causal paths between X and Y are blocked
 - there are no non-causal paths to start with
- Thus, a conditional association between X and Y, given Z, proves that there is a causal effect of X on Y
 - controlling for Z gives a valid test for causation
- However, it can be shown that controlling for Z does not give exchangeability
 - e.g. the conditional risk ratio, given Z, is not equal to the conditional causal risk ratio, given Z
 - controlling for Z does not give a valid estimate of the causal effect

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Confounding



- Common causes of the exposure and the outcome lead to non-causal paths
- We say that there is confounding if the exposure and the outcome have common causes

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Confounder



- A confounder is a variable that blocks a non-causal path between the exposure and the outcome, if controlled for
 - both Z and U are confounders in the DAG above
- A (set of) variable(s) is sufficient for confounding control if the variable(s) blocks all non-causal paths
 - ► *U* is sufficient for confounding control, *Z* is not

 $(Y_0, Y_1) \amalg X \mid U$ $(Y_0, Y_1) \not \sqcup X \mid Z$

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A possible DAG for the motivating example

 Suppose we agree that the causal structures for our data can be described by the DAG below



Which assumptions are encoded in this DAG?

Can these assumptions be tested?

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Covariate selection



- Given the DAG, which covariates should we control for?
- Which covariates would be selected by the traditional strategies?

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Unmeasured confounding



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- Not a problem with DAGs, but with observational studies
- Try to reduce confounding bias as much as possible
 - i.e. block as many non-causal paths as possible



Weak a priori knowledge

Cannot settle with one plausible DAG



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A complicated DAG

No/little covariate reduction



- But remember that
 - more covariates requires a bigger model, with a higher potential for bias due to model misspecification
 - some covariates may be prone to measurement errors, and may therefore lead to bias
 - some covariates may reduce statistical power/efficiency when controlled for
- It may sometimes be reasonable to exclude covariates with a weak 'confounding effect'

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Summary

- Traditional covariate selection strategies
 - are difficult to apply at the design stage
 - may select non-confounders, which may increase non-exchangeability
- DAGs can be used for covariate selection
 - encode our a priori causal knowledge/beliefs into a DAG
 - control for covariates that block non-causal paths between the exposure and the outcome if controlled for
- DAGs are not only tools for covariate selection
 - generally speaking, they are used to facilitate interpretation and communication in causal inference

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Some References

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