

Using ITSA to examine the effectiveness of the CSU model

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What is ITSA?

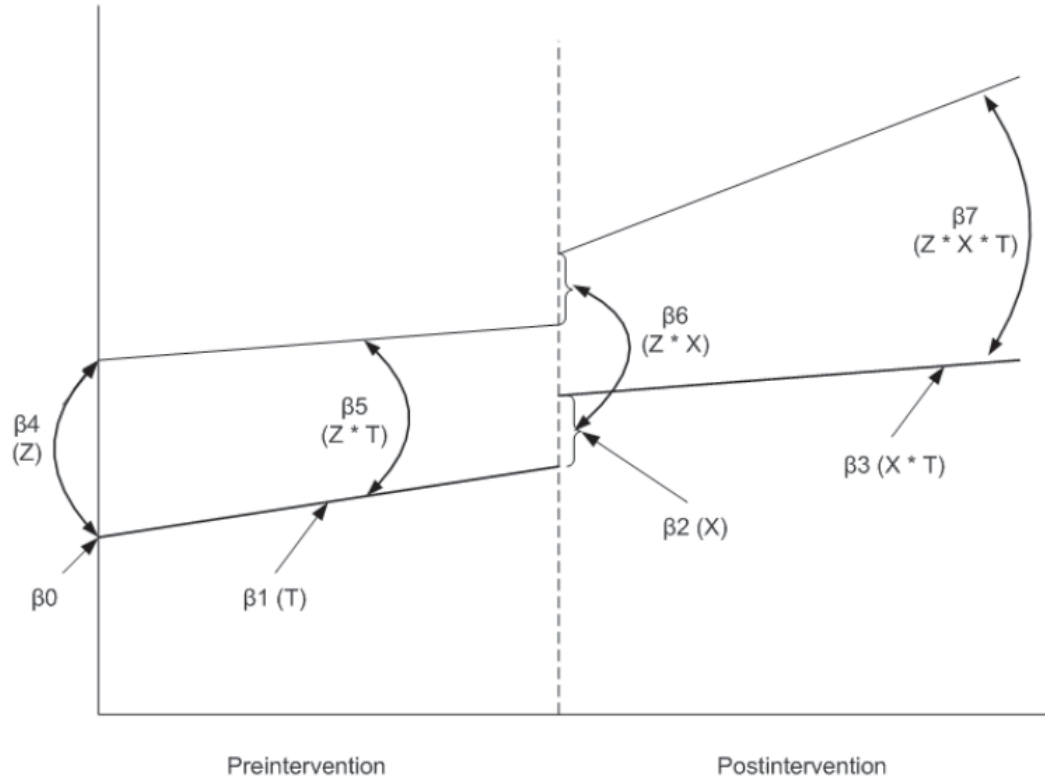


Figure 1. Visual depiction of a single group (lower line) and multiple group (upper and lower lines) interrupted time-series design, from Linden and Adams (2011)

What is ITSA?

$$Y_t = \beta_0 + \beta_1 T_t + \beta_2 X_t + \beta_3 X_t T_t + \epsilon_t \quad (1)$$

Y_t is the aggregated outcome variable measured at each equally spaced time point t , T_t is the time since the start of the study, X_t is a dummy (indicator) variable representing the intervention (preintervention periods 0, otherwise 1), and $X_t T_t$ is an interaction term. These terms are displayed in the lower half of figure 1. In the case of a single-group study, β_0 represents the intercept or starting level of the outcome variable. β_1 is the slope or trajectory of the outcome variable until the introduction of the intervention. β_2 represents the change in the level of the outcome that occurs in the period immediately following the introduction of the intervention (compared with the counterfactual). β_3 represents the difference between preintervention and postintervention slopes of the outcome. Thus we look for significant p -values in β_2 to indicate an immediate treatment effect, or in β_3 to indicate a treatment effect over time (Linden and Adams 2011).

Linden 2015, *Stata Journal*, 15, pp 481

Stata command: itsa

- “performs interrupted time-series analysis using two ordinary least-squares (OLS) regression-based approaches available in the official Stata packages newey and prais.” (Linden 2015)

Viewer - help itsa

File Edit History Help

help itsa

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help itsa

Title

itsa — Interrupted time series analysis for single and multiple groups

Syntax

```
itsa depvar [indepvars] [if] [in] [weight] , trperiod(numlist) [ single treatid(#) contid(numlist) prais lag(#) figure
posttrend replace prefix(string) model_options
```

Dataset for a single panel must be declared as `tsset` if the dataset contains multiple panels, a strongly balanced panel dataset used for multiple group analysis.

options	Description
<code>trperiod(numlist)</code>	Required. The time period in the same units as the panel variable. The period may be specified.
<code>single</code>	Indicates that <code>itsa</code> will be used for a single group analysis. Conversely, omitting <code>single</code> indicates that <code>itsa</code> is for a multiple group comparison.
<code>treatid(#)</code>	When the dataset contains multiple panels, <code>treatid()</code> specifies the identifier of the single treated unit under study. The value entered must be in the same units as the panel variable specified in <code>tsset panelvar timevar</code> ; see <code>tsset</code> . When the dataset contains data for only a single panel, <code>treatid()</code> must be omitted.
<code>contid(numlist)</code>	A list of identifiers to be used as control units in the multiple group analysis. The values entered must be in the same units as the panel variable specified in <code>tsset panelvar timevar</code> ; see <code>tsset</code> . If <code>contid()</code> is not specified, all non-treated units in the data will be used as controls.

CAP NUM OVR

Specifies all available options for `prais` when the `prais` option is chosen; otherwise all available options of `newey` other than `lag()`.

Cochrane Group definition of an ITS design (Ramsay et al. 2003)

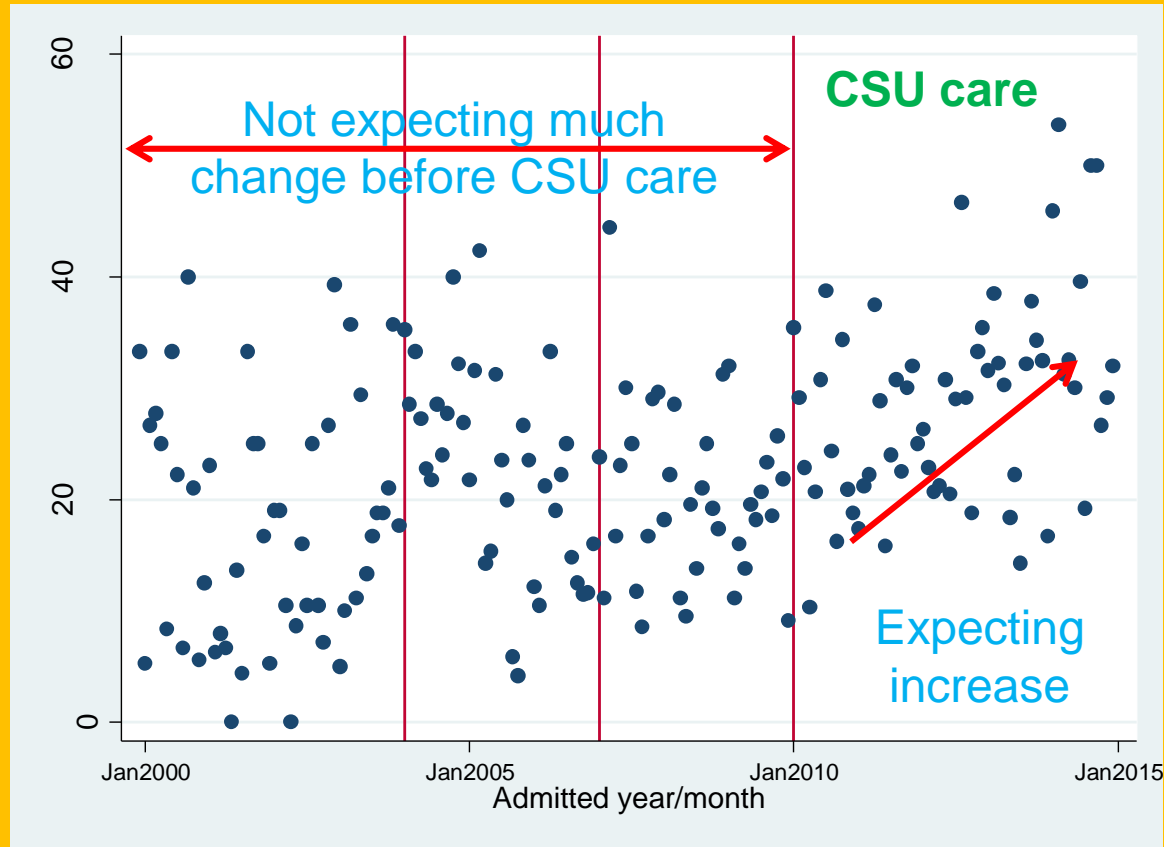
1. ≥ 3 time points before and after the intervention, irrespective of the statistical analysis used;
2. The intervention occurred at a clearly defined point in time;
3. The study measured provider performance or patient outcome objectively

Guidelines on ITS Use (Ramsay et al, 2003)

- Intervention occurred independently of other changes over time
- Intervention was unlikely to affect data collection
- The primary outcome was assessed blindly or was measured objectively
- The primary outcome was reliable or was measured objectively
- The composition of the data set at each time point covered at least 80% of the total number of participants in the study
- The shape of the intervention effect was prespecified
- A rationale for the number and spacing of data points was described
- The study was analyzed appropriately using time series techniques

Application

- In our hospital, we currently have comprehensive stroke unit (CSU), which is the gold standard for stroke care, however, CSU is not something we always had.
- We wanted to evaluate whether the CSU results in better patients' outcomes irrespective of the physician using hospital administrative data.



Data

Add % went to rehab graph without prediction line here.

Check against guidelines

- ✓ Intervention occurred independently of other changes over time
- ✓ Intervention was unlikely to affect data collection
- ✓ The primary outcome was assessed blindly or was measured objectively
- ✓ The primary outcome was reliable or was measured objectively
- ✓ The composition of the data set at each time point covered at least 80% of the total number of participants in the study

Check against guidelines

- ✓ The shape of the intervention effect was prespecified
- ✓ A rationale for the number and spacing of data points was described
 - ✓ Monthly data was used and we had at least 10 points for each interval
- ✓ The study was analysed appropriately using time series techniques
 - ✓ The model was appropriately adjusted for auto-correlation.

Stata command & output

```
>itsa percrehab age male charlson1, ///  
sing trp(528 564 600) replace posttrend  
>actest, lags(12)
```


Stata output

```
. actest, lags(12)
```

```
Cumby-Huizinga test for autocorrelation (Breusch-Godfrey)
```

```
H0: variable is MA process up to order q
```

```
HA: serial correlation present at specified lags >q
```

H0: q=0 (serially uncorrelated) HA: s.c. present at range specified				H0: q=specified lag-1 HA: s.c. present at lag specified			
lags	chi2	df	p-val	lag	chi2	df	p-val
1 - 1	0.012	1	0.9125	1	0.012	1	0.9125
1 - 2	7.969	2	0.0186	2	7.936	1	0.0048
1 - 3	8.348	3	0.0393	3	0.392	1	0.5310
1 - 4	8.366	4	0.0791	4	0.219	1	0.6397
1 - 5	9.592	5	0.0877	5	1.658	1	0.1979
1 - 6	11.243	6	0.0812	6	1.573	1	0.2098
1 - 7	11.637	7	0.1132	7	0.013	1	0.9081
1 - 8	18.367	8	0.0186	8	3.418	1	0.0645
1 - 9	18.446	9	0.0303	9	0.099	1	0.7533
1 - 10	20.424	10	0.0255	10	0.036	1	0.8497
1 - 11	20.623	11	0.0375	11	0.050	1	0.8231
1 - 12	20.827	12	0.0530	12	1.094	1	0.2956

```
Test allows predetermined regressors/instruments
```

```
Test requires conditional homoskedasticity
```

Stata command & output

```
itsa percrehab age male charlson1, ///  
sing trp(528 564 600) lag(2) replace posttrend  
lincom _t+_x_t528  
lincom _t+_x_t528+ _x_t564  
lincom _t+_x_t528+ _x_t564+ _x_t600  
predict res, resid  
kdensity res, normal
```

Stata output

```
. itsa percrehab age male charlson1, sing trp(528 564 600) lag(2) replace posttrend
      time variable: admit_yrmo, Dec1999 to Dec2014
      delta: 1 month
```

```
Regression with Newey-West standard errors      Number of obs      =      181
maximum lag: 2                                F( 10,      170) =      10.25
                                              Prob > F          =      0.0000
```

percrehab	Newey-West		t	P> t	[95% Conf. Interval]	
	Coef.	Std. Err.				
age	-.0007322	.0029674	-0.25	0.805	-.0065899	.0051256
male	.0857055	.0897472	0.95	0.341	-.091457	.2628679
charlson1	.0459728	.0101143	4.55	0.000	.0260069	.0659386
_t	.000686	.0007799	0.88	0.380	-.0008536	.0022255
_x_t528	.1360425	.0294215	4.62	0.000	.0779639	.194121
_x_t528	-.0060821	.0013619	-4.47	0.000	-.0087704	-.0033937
_x_t564	.0997378	.0366214	2.72	0.007	.0274465	.172029
_x_t564	.004457	.0014445	3.09	0.002	.0016056	.0073085
_x_t600	.0472935	.0269766	1.75	0.081	-.0059588	.1005458
_x_t600	.0026732	.0011872	2.25	0.026	.0003295	.0050168
_cons	.0279082	.2582087	0.11	0.914	-.4818001	.5376165

Post-Intervention Linear Trend:

Treated: $_b[_t] + _b[_x_t528] + _b[_x_t564] + _b[_x_t600]$

Linear Trend	Coeff	Std. Err.	t	P> t	[95% Conf. Interval]	
Treated	0.0017	0.0006	2.7312	0.0070	0.0005	0.0030

Stata output

```
. lincom _t+_x_t528
```

(1) $_t + _x_t528 = 0$

percrehab	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
(1)	-.0053961	.0010685	-5.05	0.000	-.0075054	-.0032869

```
. lincom _t+_x_t528+_x_t564
```

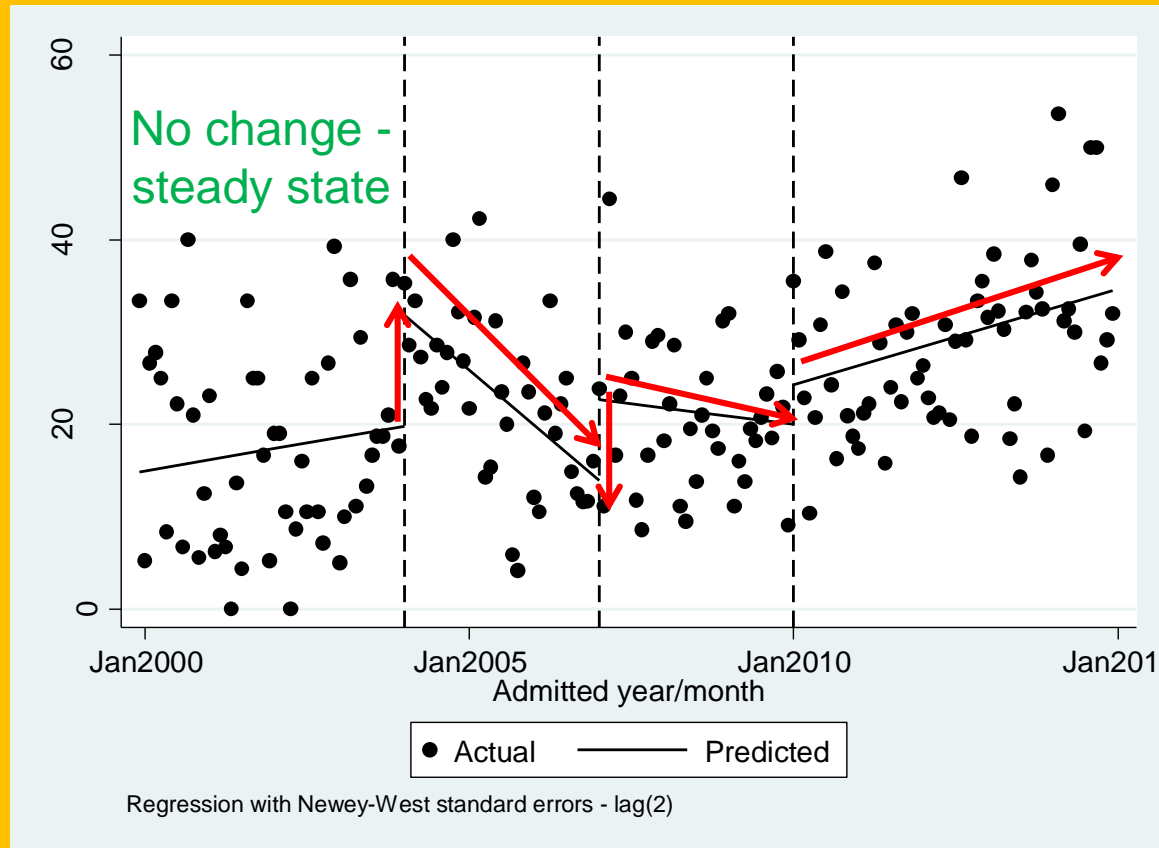
(1) $_t + _x_t528 + _x_t564 = 0$

percrehab	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
(1)	-.0009391	.0010211	-0.92	0.359	-.0029548	.0010766

```
. lincom _t+_x_t528+_x_t564+_x_t600
```

(1) $_t + _x_t528 + _x_t564 + _x_t600 = 0$

percrehab	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]	
(1)	.0017341	.0006349	2.73	0.007	.0004807	.0029874



Results

Prediction line is estimated assuming median age 78 years old with 52% of males and median Charlson's comorbidity index of 3 for each month.

Results

- After the first and second change, there were immediate effect of increase in % discharged to rehabilitation ($P < 0.01$), but it came back down significantly over the time post 1st change ($P < 0.01$) and did not significantly change over the time post 2nd change ($P = 0.359$).

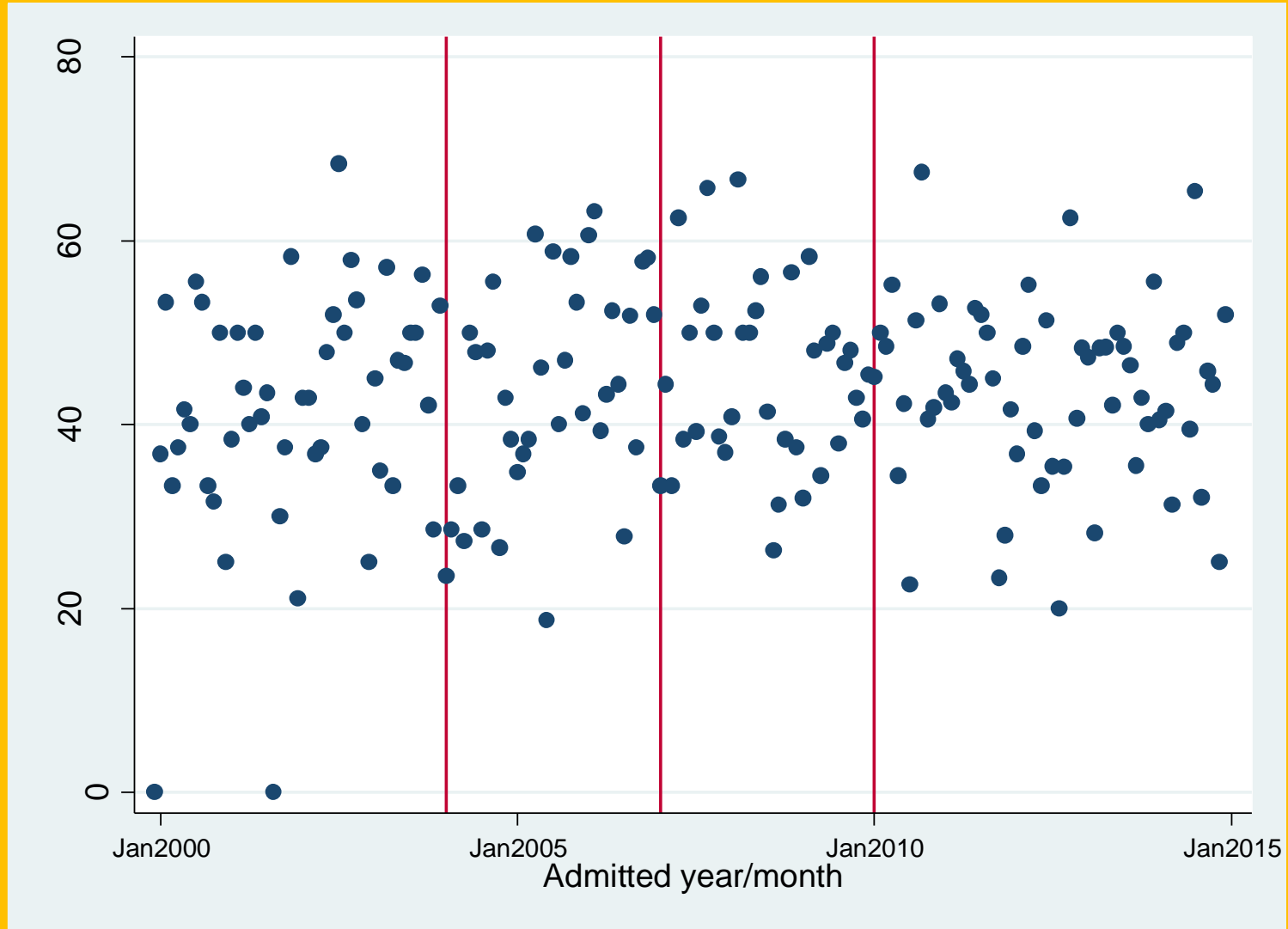
Results

- After the third change, the CSU care, although there was no significant immediate effect of increase in % discharged to rehabilitation ($P=0.081$), there is significant increase over the time ($P<0.01$)

Discussion

- We need to look at this % discharged to rehabilitation in combination with % discharged to own home and aged care facilities to be able to determine whether there's a benefit or not.

% discharged to home



Discussion

- Considering there is no change in % discharged to their own home, CSU care results better patients' outcome compared to old system.

Limitations

- Interrupted time series analysis does not consider data at the patient's level therefore can not predict the likelihood of discharge to rehabilitation at patient's level.
- The estimates of the overall effect on % discharged to rehabilitation involved extrapolation, which is inevitably associated with uncertainty.
- The regression method assumes linear trends over time.

References

1. Ramsay CR, Matowe L, Grilli R, Grimshaw JM, Thomas RE. 2003. Interrupted time series designs in health technology assessment: Lessons from two systematic reviews of behavior change strategies. *Int.J.Technol.Assess.Health Care*, 19, 613-23
2. Linden, A., and J. L. Adams. 2011. Applying a propensity-score based weighting model to interrupted time series data: Improving causal inference in program evaluation. *Journal of Evaluation in Clinical Practice*, 17, 1231–1238.
3. Linden, A. 2015. Conducting interrupted time-series analysis for single- and multiple-group comparisons. *Stata Journal*, 15, 480-500.

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