

# Interrupted time-series analysis to assess the impact of interventions

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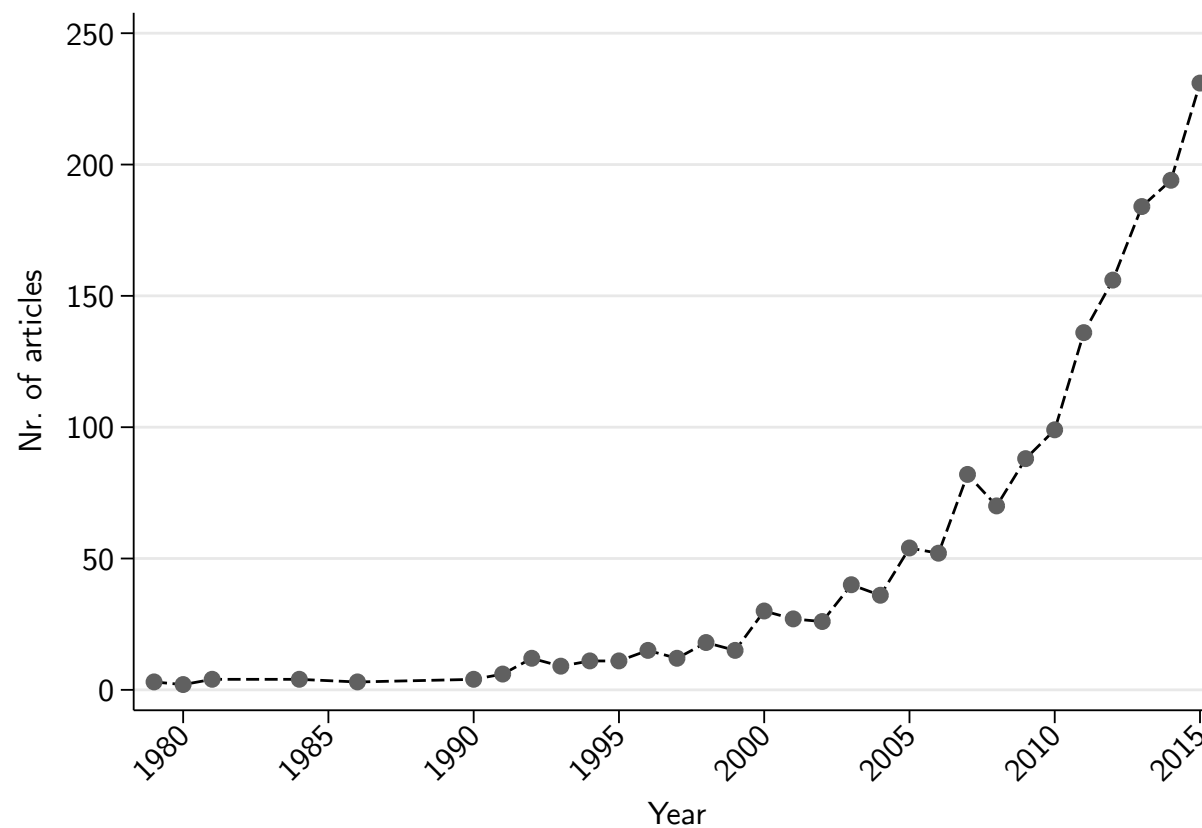
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April 11, 2016

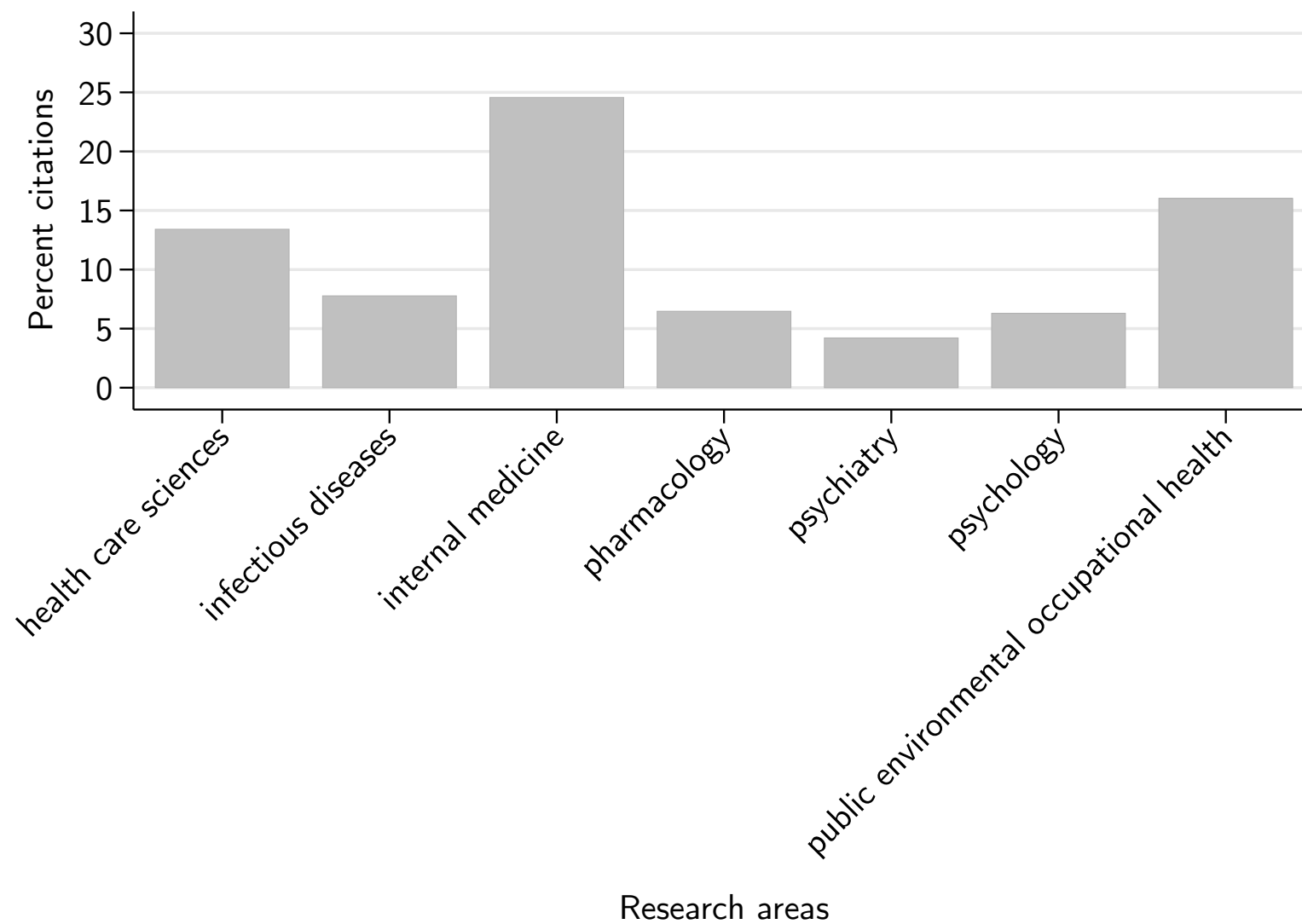
# Outline

- Antibiotics Prescription: A motivational example
- Basic features
- Modelling the time-series
- One group and one intervention
- Two groups and one intervention
- Evaluating a policy on smoking
- Strengths and limitations

1634 articles over the last 35 years  
80% over the last 10 years



Data Source: Web Of Science



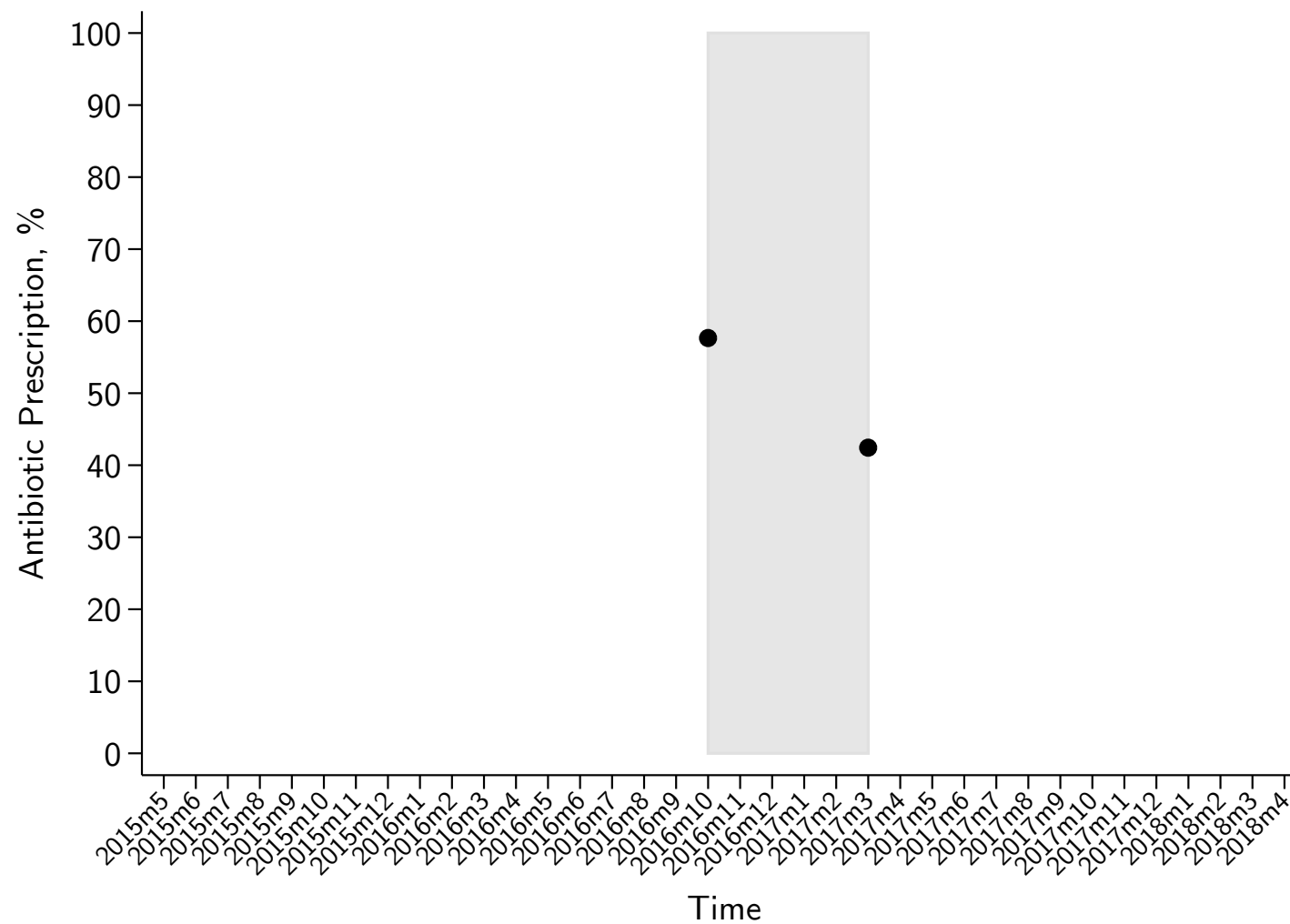
# What is it?

- A time series is a sequence of values of a particular measure taken at regularly spaced intervals over time.
- Interruption of a time series can be due to an experimental intervention, a policy change, or a real-world event.
- Routinely maintained records are commonly used sources of time series data.

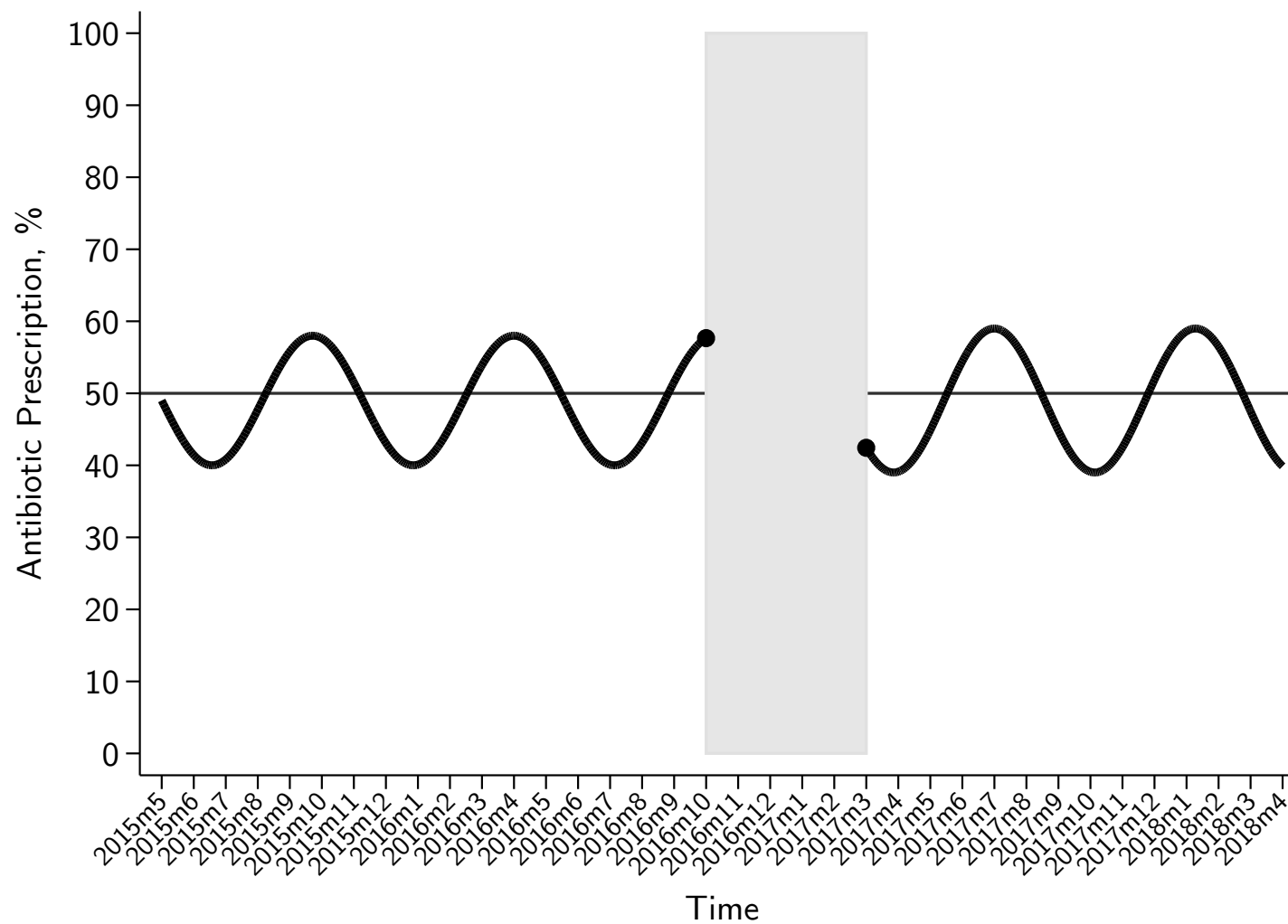
# Design

- Quasi-experimental design (absence of randomization)
- Longitudinal effects of interventions
- If the intervention had an impact, the hypothesis is that observations after intervention will be different from those before intervention.
- Unit of analysis can be a person or a group of persons

# One measure before and after intervention



# Multiple measures before and after intervention

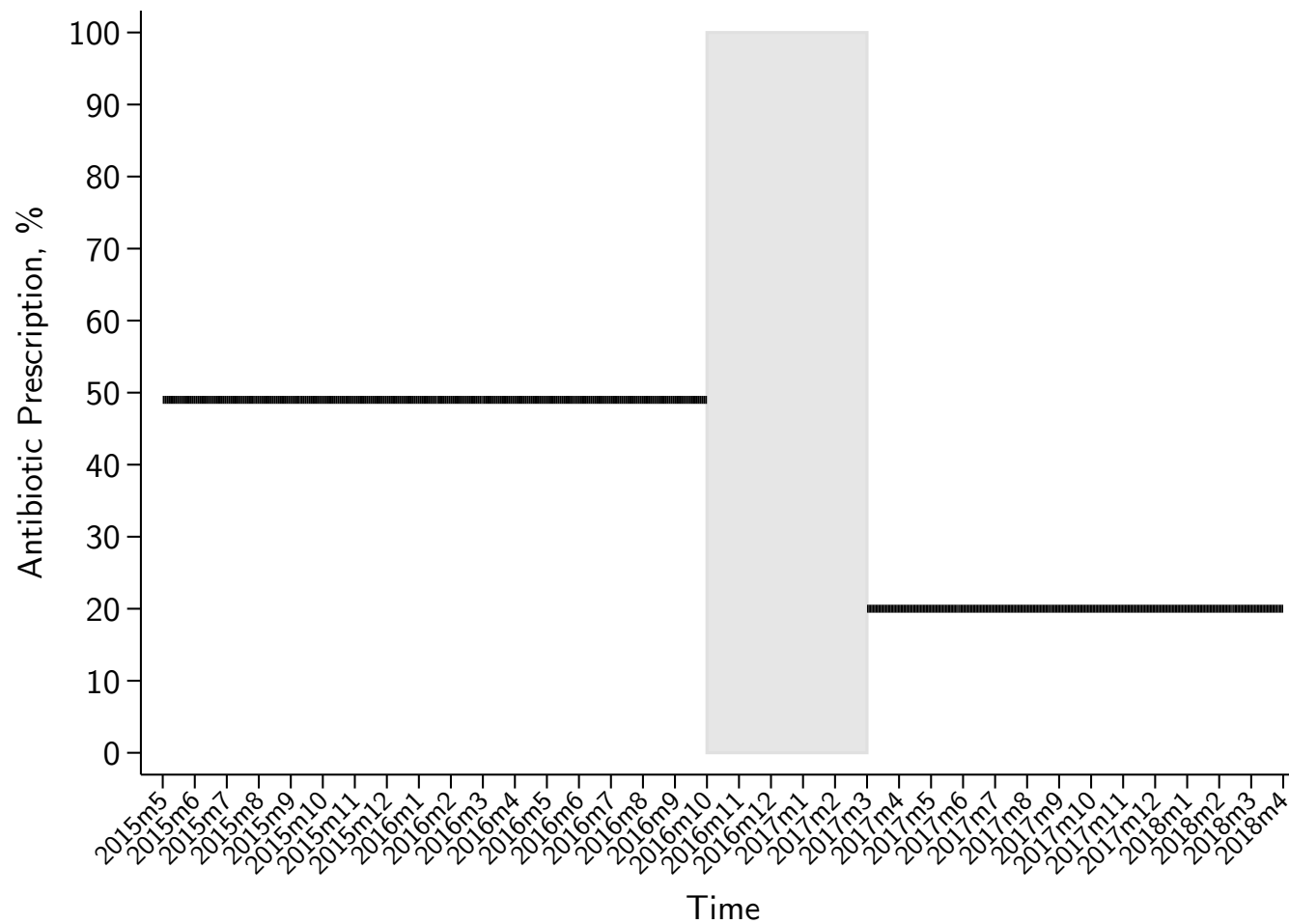




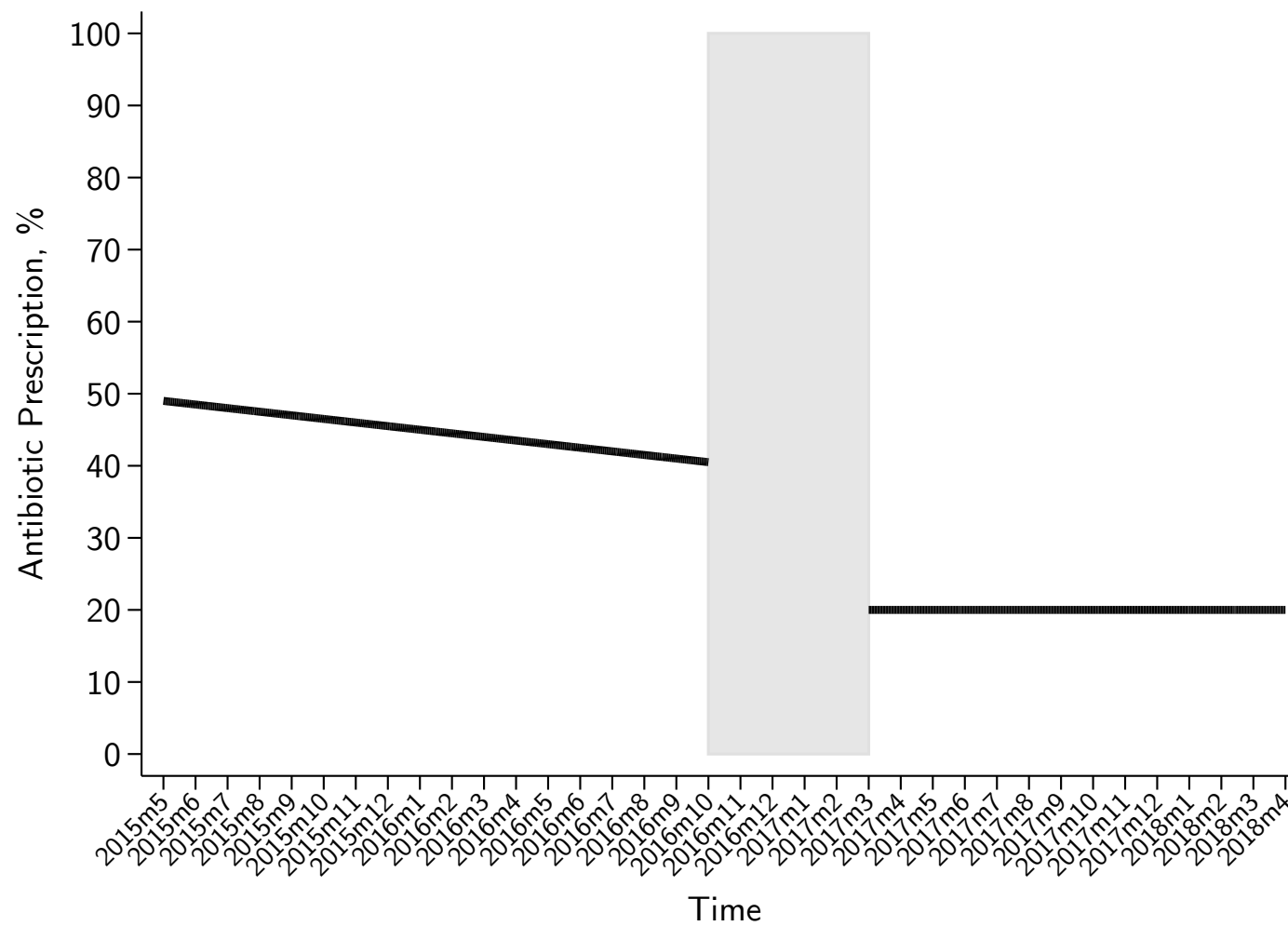
# Different dimension of the effect

- Type of change (level, trend, variability)
- Immediacy (immediate, delayed)
- Duration (permanent, temporary)

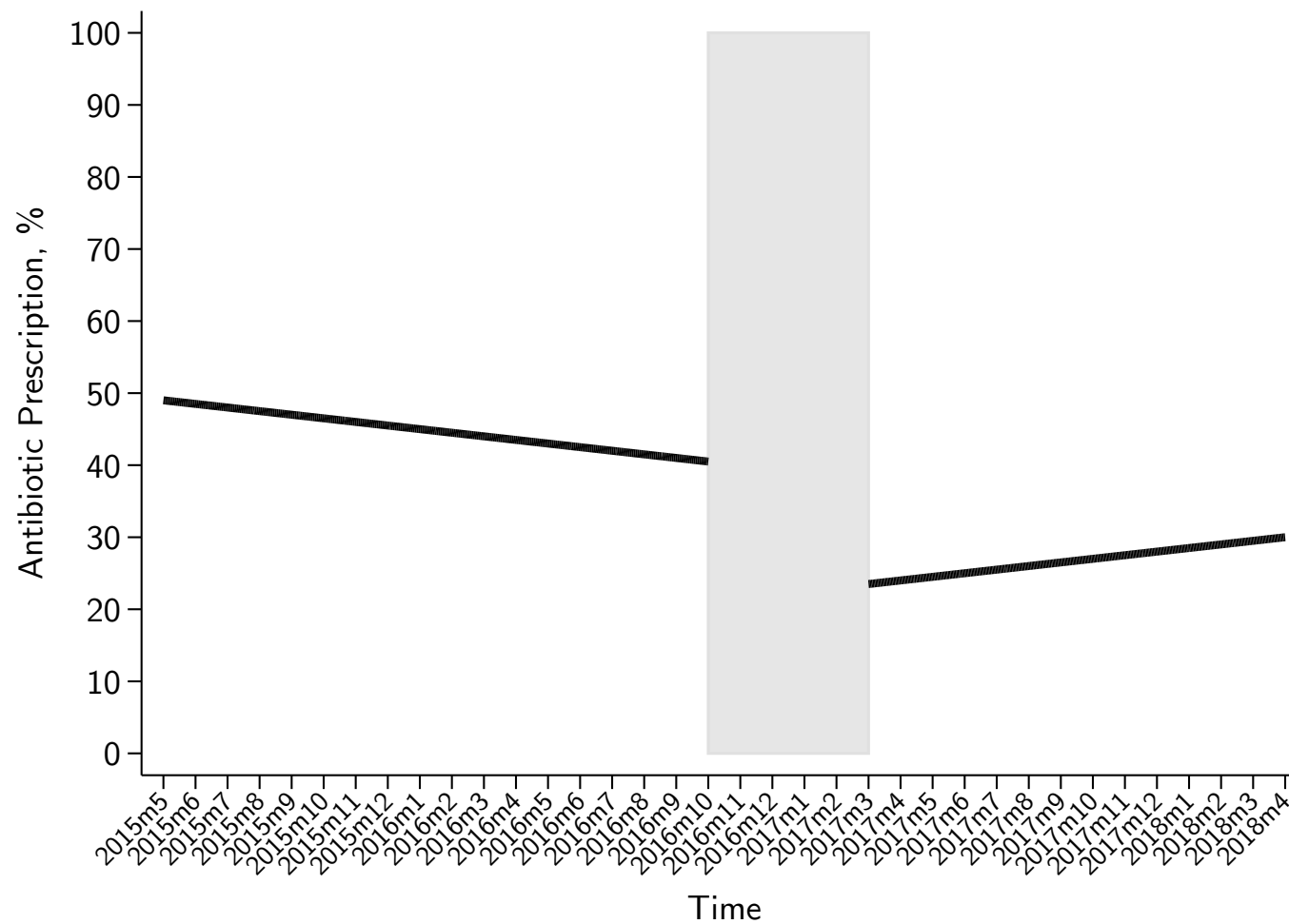
# Scenario 1



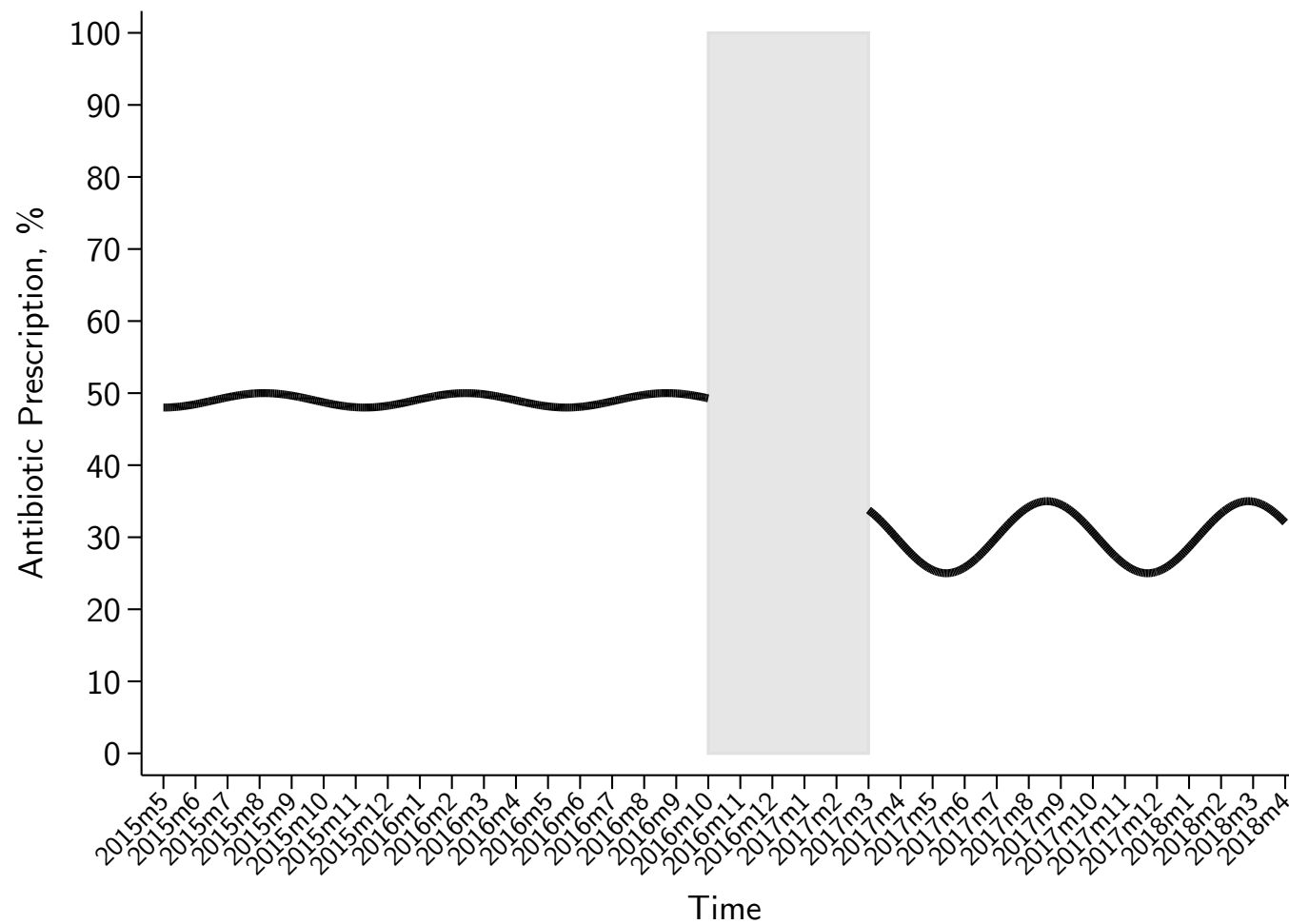
# Scenario 2



# Scenario 3



# Scenario 4



# Regression approach

- Interrupted time-series encompasses a wide range of modelling approaches.
- It can be done using popular regression models for different types of outcome data (linear, quantile, logistic, poisson, multilevel).
- The main quantitative predictor is time.
- Values of the time series are likely to be correlated (autocorrelation). Failing to take into account correlation may lead to biased inference.

# Outcome is a flexible function of time

$$g(\mu|t) = f(t)$$

$\mu$  expected value (mean, proportion, rate) of an outcome

$g$  link function between  $\mu$  and the linear predictor  $f(t)$

# Splines of time

Piecewise polynomials of time  $t$  that depend on  $n$  interventional times  $t_k$  and the degree  $j$

$$t_{kj+} = I(t > t_k)(x - t_k)^j$$

$$k = 1, 2, \dots, n$$

$$t_1 < t_2 < \dots < t_n$$

$j = 0$  constant

$j = 1$  linear

$j = 2$  quadratic

$j = 3$  cubic



# One group and one intervention

Consider one intervention at time  $k$

$$g(\mu|t) = \beta_0 + \beta_1 t + \beta_2 I(t > k)(t - k)^0 + \beta_3 I(t > k)(t - k)^1$$

$$g(\mu|t) = \beta_0 + \beta_1 t + \beta_2 t_{10+} + \beta_3 t_{11+}$$

Common notation used in ITS defines  $x = t_{10+}$  and  $xt = t_{11+}$

$$g(\mu|t) = \beta_0 + \beta_1 t + \beta_2 x + \beta_3 xt$$

$$g(\mu|t) = \beta_0 + \beta_1 t + \beta_2 x + \beta_3 xt$$

$\beta_0$  is the outcome at time 0

$\beta_1$  is the pre-intervention linear trend

$\beta_2$  is the post-intervention change in mean outcome

$\beta_3$  is the post-intervention change in linear trend

# A note on how time is handled

- **Stata** and **SAS** provides dates measured as the number of days since 01jan1960.
- **SPSS** provides dates and datetimes measured as the number of seconds since 14oct1582.
- **R** stores dates as days since 01jan1970.

Make sure you are familiar with date and time functions in your favorite statistical software.

# Definition of time (in Stata)

- October 2016 (first month of intervention)

```
. display ym(2016,10)  
681
```

Centering time  $t$  about the first month of intervention helps interpreting the intercept  $\beta_0$ .

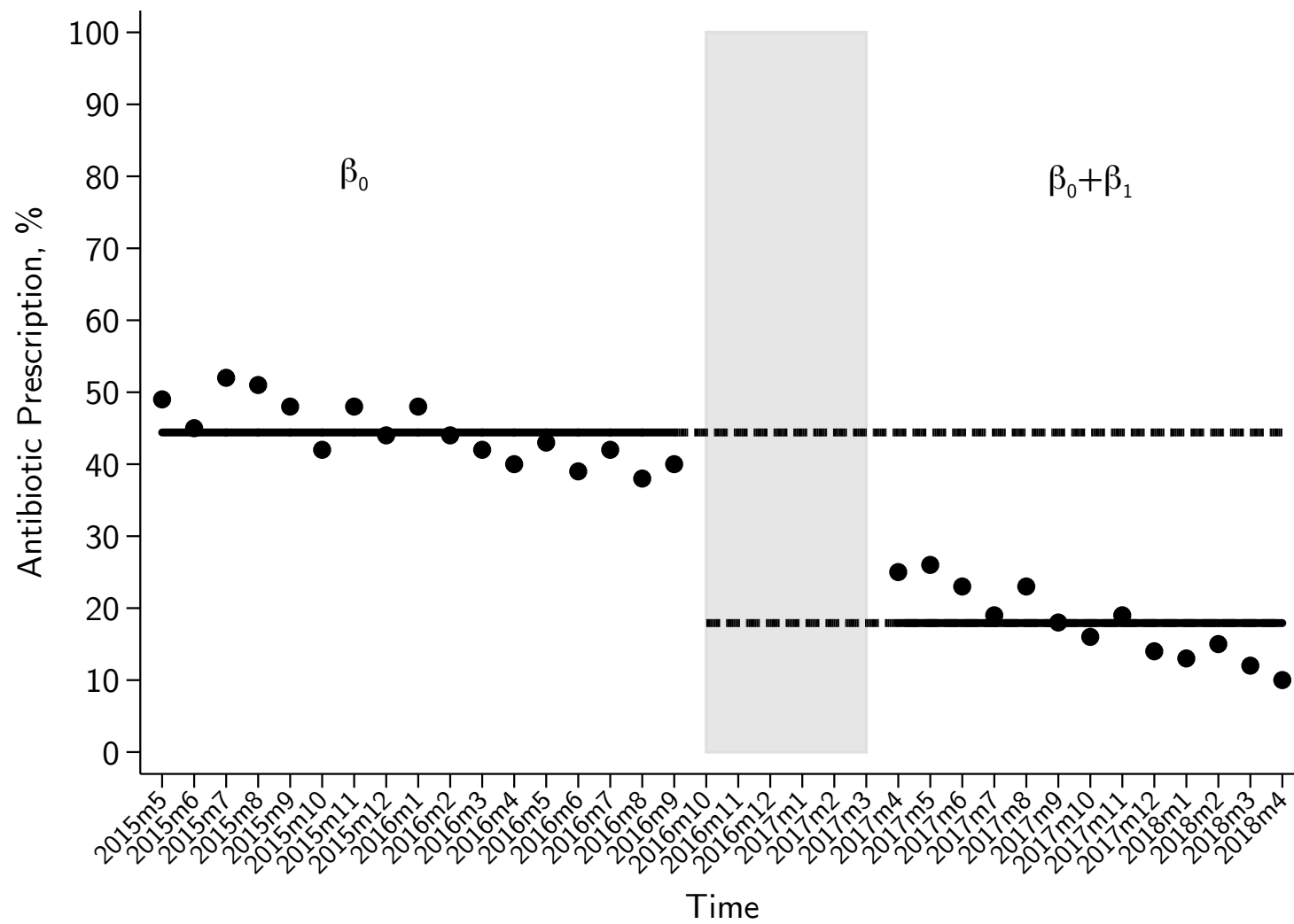
```
. gen t = (time-681)  
. gen x = (t>0) * (time-681) ^0  
. gen xt = (t>0) * (time-681) ^1
```

$$g(\hat{\mu}|t) = 44.4 - 26.5x$$

Before the intervention, the percentage of antibiotic prescription is 44.4%.

After intervention, the percentage of antibiotic prescription decreases by 26.5% compared to the pre-intervention period.

The change in outcome is immediate and permanent until the end of the study period.



# Key assumption

Without the intervention, the pre-intervention trend would continue unchanged into the post-intervention period.

There are no external factors systematically affecting the trends.

$$g(\hat{\mu}|t) = 38.3 - 0.7t - 5.4x - 0.6xt$$

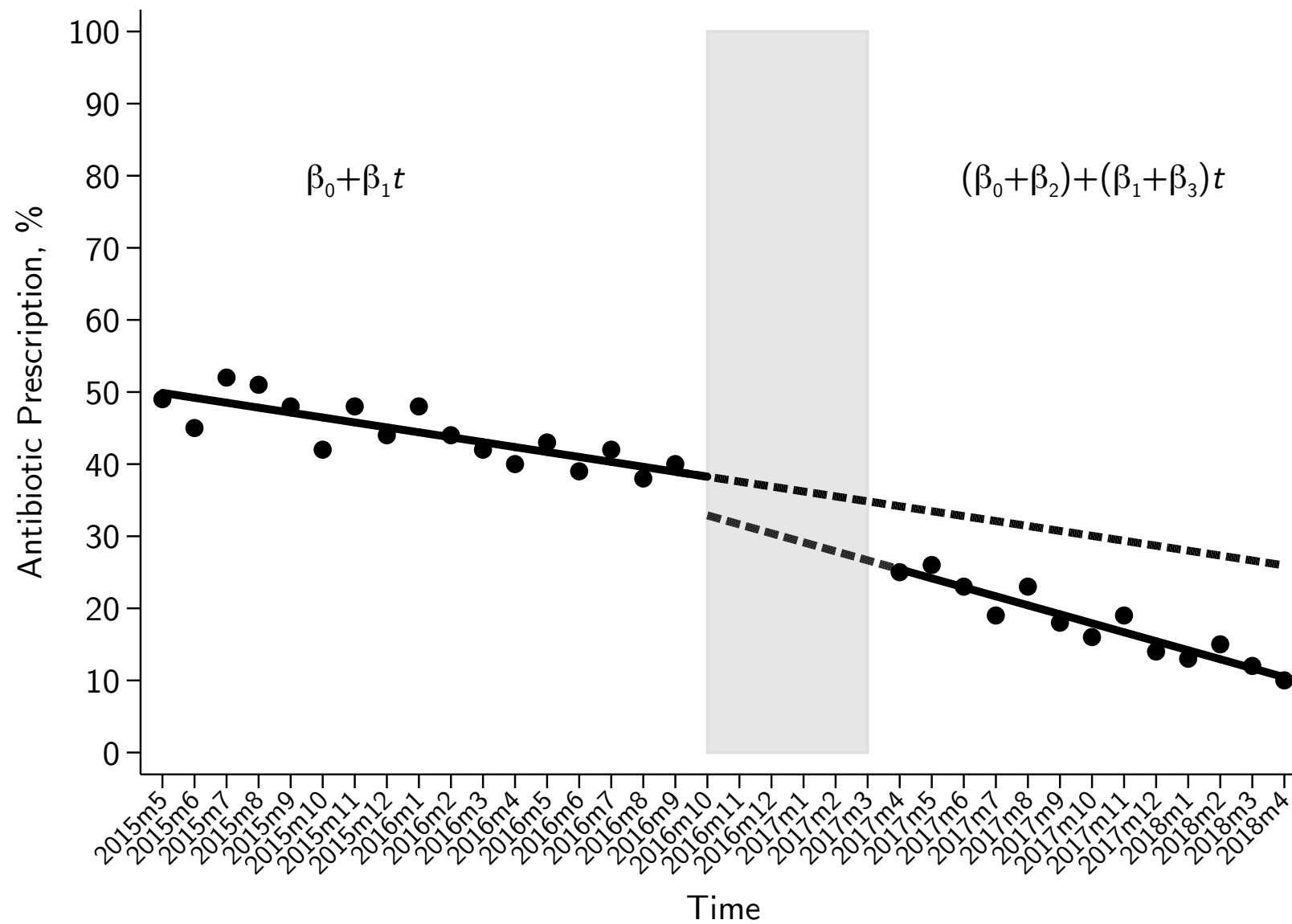
The estimated percentage of antibiotic prescription in October 2016, right before intervention, is 38.3%.

Before intervention, the percentage of antibiotic prescription decreases by 0.7% every month.

Right after intervention, the percentage of antibiotic prescription decreases by 5.4%.

After intervention, the percentage of antibiotic prescription decreases by  $(0.7+0.6)=1.3\%$  every month.





# Expressing intervention effect

What is the predicted outcome at time  $m$  after intervention?

$$g(\mu|t = m, x = 1) = \beta_0 + \beta_1 m + \beta_2 + \beta_3 m$$

What is the predicted outcome at time  $m$  had not been intervened?

$$g(\mu|t = m, x = 0) = \beta_0 + \beta_1 m$$

What is the intervention effect at  $m$  months?

$$g(\mu|t = m, x = 1) - g(\mu|t = m, x = 0) = \beta_2 + \beta_3 m$$

In April 2018, 18 months after beginning of intervention, the percentage of antibiotic prescription is

$$g(\hat{\mu}|t = 18, x = 1) = 38.3 - 0.7 * 18 - 5.4 * 1 - 0.6 * 18 = 10\%$$

In April 2018, in the absence of intervention, the percentage of antibiotic prescription would have been

$$g(\hat{\mu}|t = 18, x = 0) = 38.3 - 0.7 * 18 = 26\%$$

The intervention decreased the percentage of antibiotic prescription by 16% at 18 months from intervention (assuming the trend before intervention would have been the same until the end of the study period).

# Two groups and one intervention

Let's consider another variable  $z$  identifying controls (if possible) or different subgroups within the intervention populations.

$$g(\mu|t, x, z) = \beta_0 + \beta_1 t + \beta_2 x + \beta_3 xt + \beta_4 z + \beta_5 zt + \beta_6 zx + \beta_7 zxt$$

Group 0 ( $z=0$ ). Before and after intervention.

$$g(\mu|t, z = 0) = \beta_0 + \beta_1 t + \beta_2 x + \beta_3 xt$$

$$g(\mu|t, x = 0, z = 0) = \beta_0 + \beta_1 t$$

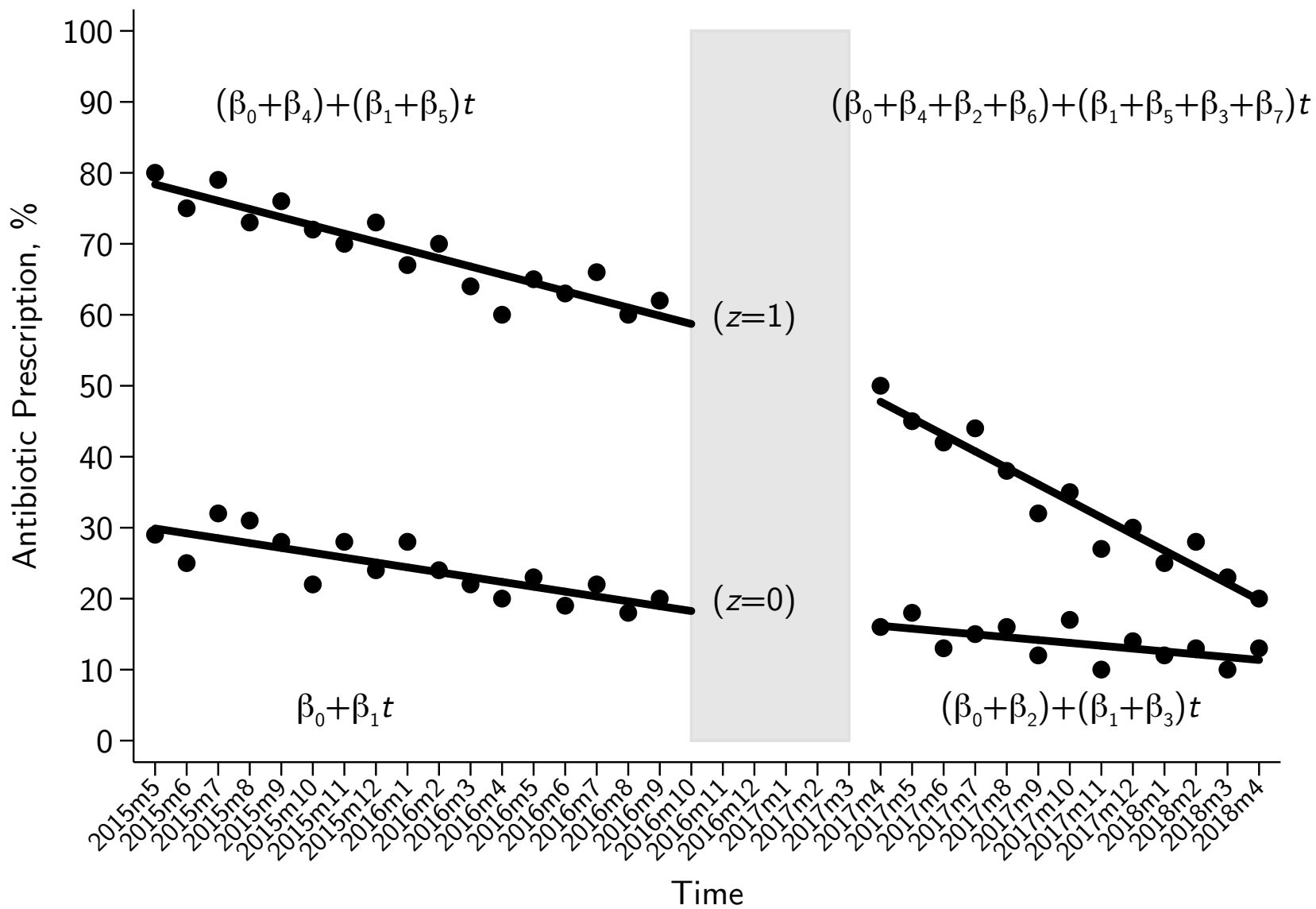
$$g(\mu|t, x = 1, z = 0) = (\beta_0 + \beta_2) + (\beta_1 + \beta_3)t$$

Group 1 ( $z=1$ ). Before and after intervention.

$$g(\mu|t, z = 1) = (\beta_0 + \beta_4) + (\beta_1 + \beta_5)t + (\beta_2 + \beta_6)x + (\beta_3 + \beta_7)xt$$

$$g(\mu|t, x = 0, z = 1) = (\beta_0 + \beta_4) + (\beta_1 + \beta_5)t$$

$$g(\mu|t, x = 1, z = 1) = (\beta_0 + \beta_4 + \beta_2 + \beta_6) + (\beta_1 + \beta_5 + \beta_3 + \beta_7)t$$



# Possible measures of interests

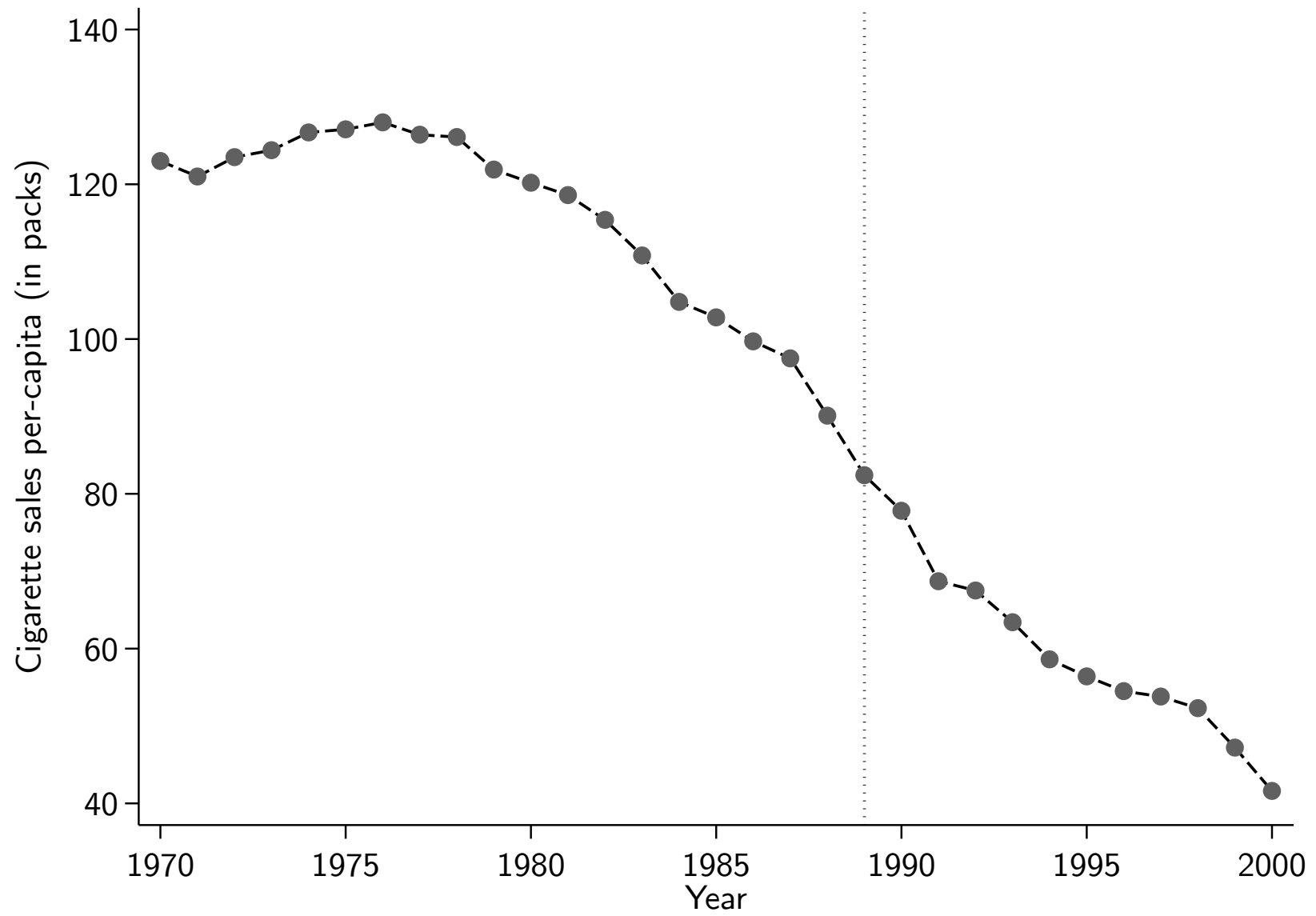
$\beta_5$  represents the group difference in trend before intervention

$\beta_5 + \beta_7$  represents the group difference in trend after intervention

# Effect of a policy on smoking

In 1988, California passed the voter-initiative Proposition 99, which was a widespread effort to reduce smoking rates by raising the cigarette excise tax by 25 cents per pack and to fund anti-smoking campaigns and other related activities throughout the state.

Per capita cigarette sales (in packs) is the most widely used indicator of smoking prevalence found in the tobacco research literature and serves here as the aggregate outcome variable under study, measured at the state level from 1970 until 2000 (with 1989 representing the first year of the intervention). (Linden, 2015)





```
. gen t = year - 1989
. gen x = (t>0)
. gen xt = x*t

. clist state year t x xt
```

	state	year	t	x	xt
16.	California	1985	-4	0	0
17.	California	1986	-3	0	0
18.	California	1987	-2	0	0
19.	California	1988	-1	0	0
20.	California	1989	0	0	0
21.	California	1990	1	1	1
22.	California	1991	2	1	2
23.	California	1992	3	1	3
24.	California	1993	4	1	4

# One-group and one-intervention

```
. newey cigsale t x xt , lag(1)
```

```
Regression with Newey-West standard errors      Number of obs      =      31
maximum lag: 1                                F( 3,              27) =     308.98
                                                Prob > F            =     0.0000
```

```
-----
```

cigsale	Coef.	Newey-West Std. Err.	t	P> t	[95% Conf. Interval]
t	-2	0	-4.84	0.000	-3 -1
x	-19	5	-3.79	0.001	-29 -9
xt	-1	0	-2.43	0.022	-2 -0
_cons	95	4	22.69	0.000	87 104

```
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```

```
. lincom _b[t] + _b[xt]
```

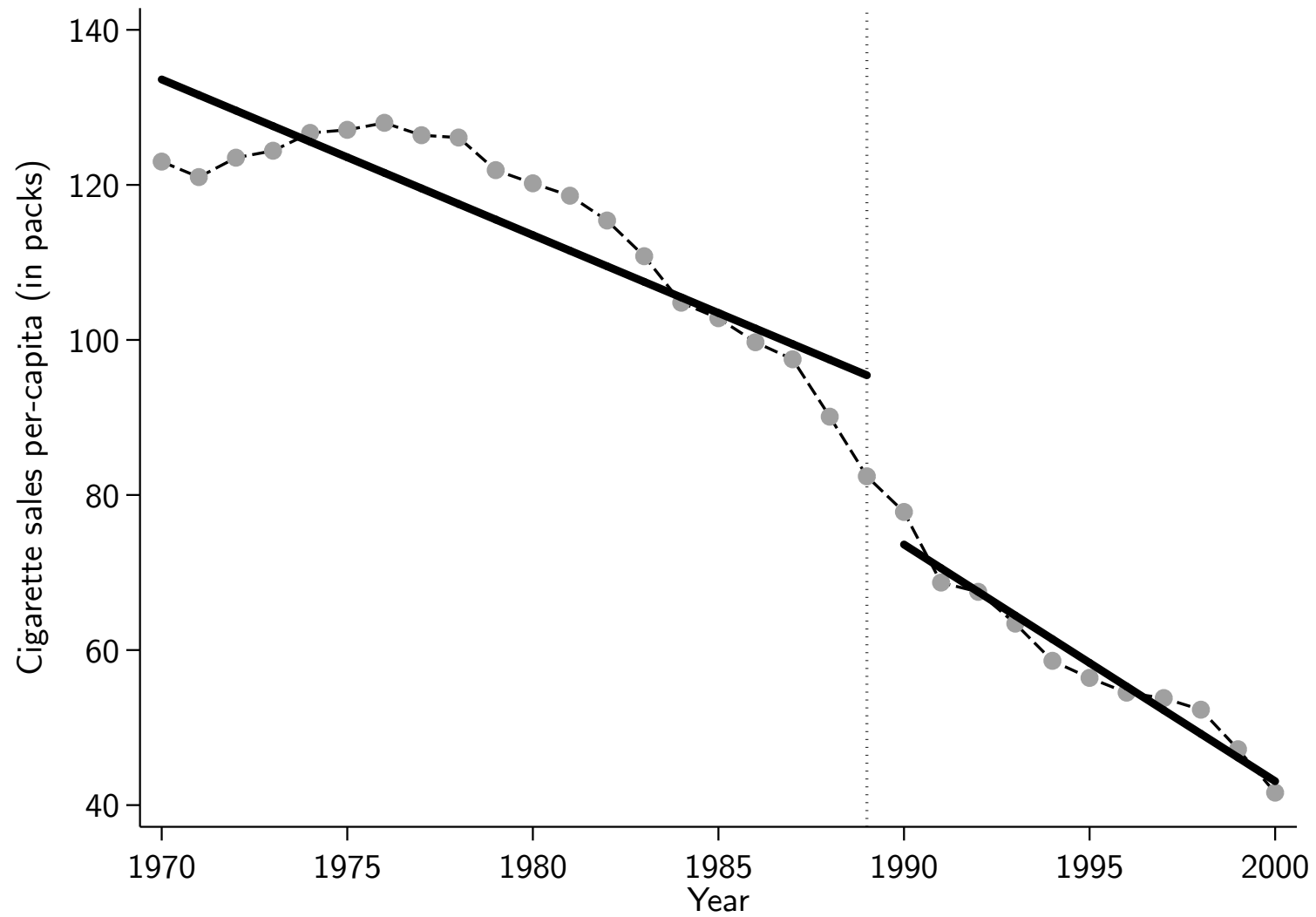
```
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```

cigsale	Coef.	Std. Err.	t	P> t	[95% Conf. Interval]
(1)	-3.1	0.2	-13.23	0.000	-3.5 -2.6

```
-----
```

# Abstract

In 1989, level of the per capita cigarette sales was estimated at 95 packs. Sales appeared to decrease significantly every year prior to 1989 by 2 packs (95% CI = -3, -1). In the first year of the intervention (1989), there appeared to be a significant decrease in per capita cigarette sales of 19 packs (95% CI = -29, -9), followed by a significant decrease in the annual trend of sales (relative to the preintervention trend) of 1 pack per capita per year ( $P = 0.002$ ). After the introduction of Proposition 99, per capita cigarette sales decreased annually at a rate of 3 packs (95% CI = -3.5, -2.6).



# Two-groups and one-intervention

We now compare California's time-series with that of other 3 similar states.

We limit the analysis to only those states that are comparable with California on baseline level and trend of the outcome variable. Three comparison states meet this criteria: Colorado, Idaho, and Montana.

Ideally, a control group that is identical to the study group but does not experience the intervention is followed over the same time period as the intervention group.

```

Regression with Newey-West standard errors      Number of obs      =      124
maximum lag: 1                                F( 7,              116) =      251.48
                                                Prob > F           =      0.0000
  
```

	Newey-West					[95% Conf. Interval]	
cigsale	Coef.	Std. Err.	t	P> t			
_t	-1.5	0.4	-3.82	0.000	-2.2	-0.7	
_z	2.0	6.2	0.33	0.743	-10.3	14.4	
_z_t	-0.3	0.5	-0.59	0.556	-1.4	0.7	
_x1989	-13.6	4.2	-3.25	0.002	-21.9	-5.3	
_x_t1989	0.5	0.5	0.95	0.344	-0.5	1.5	
_z_x1989	-6.5	6.2	-1.05	0.298	-18.7	5.8	
_z_x_t1989	-2.0	0.7	-3.01	0.003	-3.3	-0.7	
_cons	132.0	4.4	30.30	0.000	123.3	140.6	

Comparison of Linear Postintervention Trends: 1989

Treated :  $\_b[\_t] + \_b[\_z\_t] + \_b[\_x\_t1989] + \_b[\_z\_x\_t1989]$

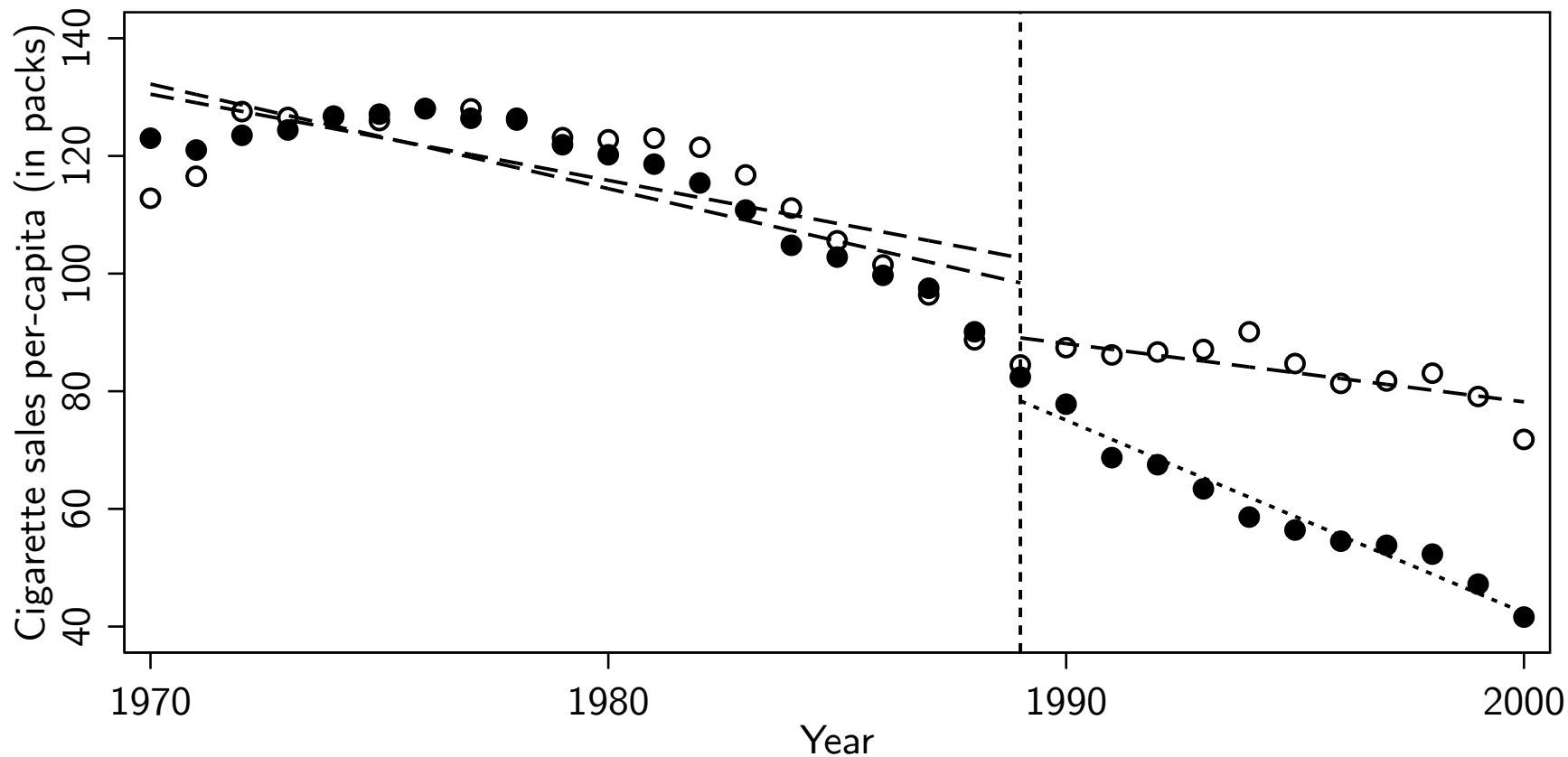
Controls :  $\_b[\_t] + \_b[\_x\_t1989]$

Difference :  $\_b[\_z\_t] + \_b[\_z\_x\_t1989]$

Linear Trend	Coeff	Std. Err.	t	P> t	[95% Conf. Interval]	
Treated	-3.2741	0.2594	-12.6234	0.0000	-3.7878	-2.7604
Controls	-0.9899	0.2883	-3.4336	0.0008	-1.5608	-0.4189
Difference	-2.2843	0.3878	-5.8905	0.0000	-3.0523	-1.5162

# California and average of controls

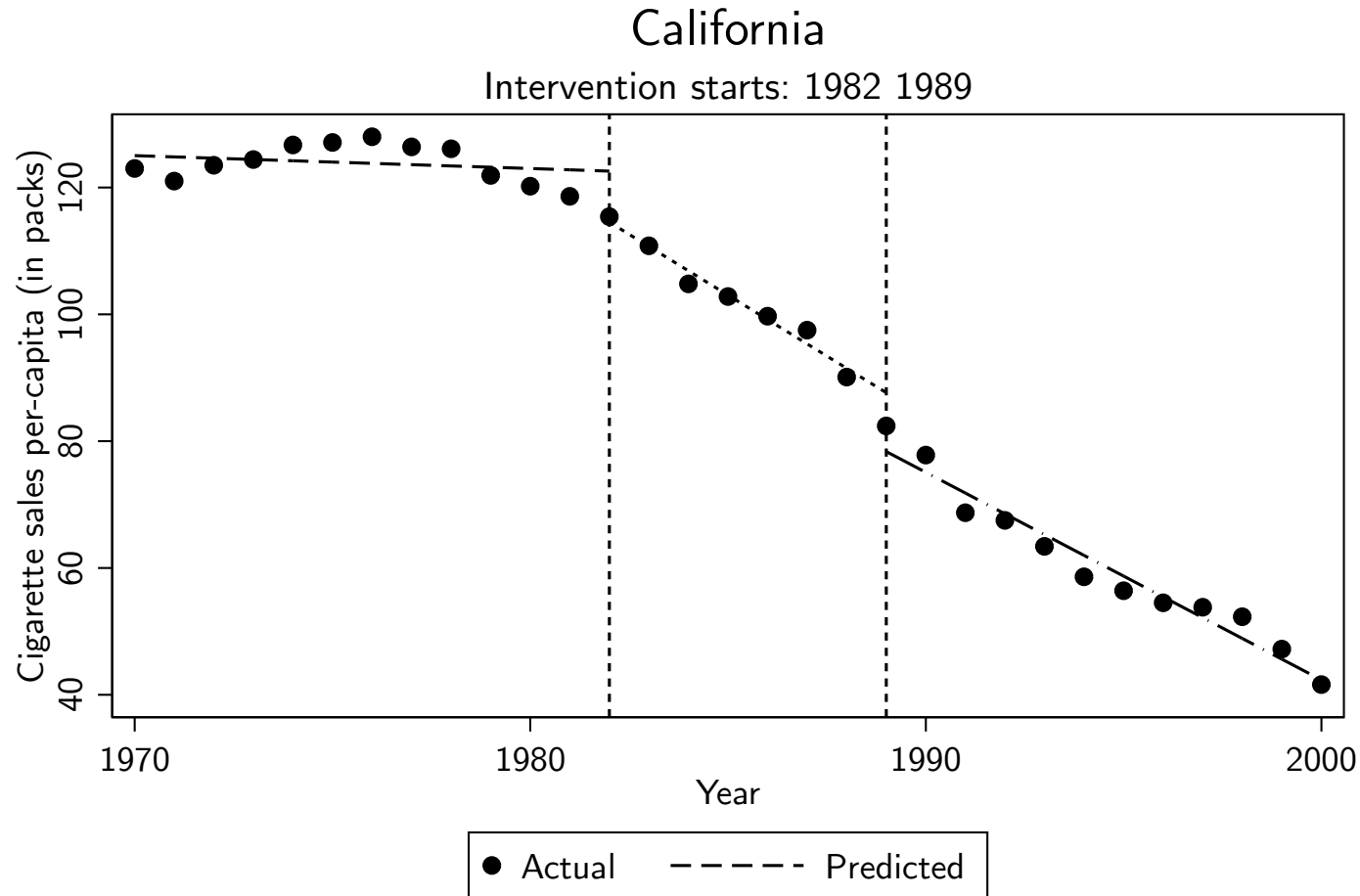
Intervention starts: 1989



California:	● Actual	--- Predicted
Controls average:	○ Actual	--- Predicted

Regression with Newey-West standard errors - lag(1)

# One group and multiple-interventions



Regression with Newey-West standard errors - lag(1)



# Strengths

- Time series designs are considered the strongest, quasi-experimental designs to estimate the intervention effects in non-randomized settings.
- Times series analysis allow the analyst to control for prior trends in the outcome and to study the dynamics of change in response to an intervention
- Time series graphs presents the dynamic of a series showing whether an effect is immediate or delayed, abrupt or gradual, and whether or not an effect persists or is temporary.

# Limitations

- Other factors related to the outcome and that changed at the time of intervention. For example:
  - ✓ effect of simultaneously occurring interventions or co-interventions,
  - ✓ seasonal changes that happen during the time of intervention,
  - ✓ changes in composition of the study population,
  - ✓ changes in measurement of the outcome at the time of intervention

- The common linearity assumption for the time series before and after intervention may not hold. Changes may follow non-linear patterns. Checking departure from linearity can be a problem when there are only a few pre-intervention time points and is impossible with only two.
- Detecting seasonality requires series that span enough periods to detect these cyclic patterns.
- Lack of consistency of recording the outcome routinely collected.

# Selected References

## Recent paper on a top medical journal

- Kontopantelis E, Doran T, Springate DA, Buchan I, Reeves D. Regression based quasi-experimental approach when randomisation is not an option: interrupted time series analysis. *BMJ* 2015;350:h2750

## A book on quasi experimental designs (a chapter is on interrupted time-series)

- William R. Shadish, Thomas D. Cook, Donald Thomas Campbell. *Experimental and Quasi-experimental Designs for Generalized Causal Inference*. 2002.

## Statistical software component for the case N = 1 (Smoking example)

- Linden A. Conducting interrupted time-series analysis for single- and multiple-group comparisons. *The Stata Journal*. Volume 15 Number 2: pp. 480-500.