

Risk ratio, odds ratio, risk difference:

Which causal measure is easier to generalize?

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Causal measure formalism

Inserm

A variety of measures....

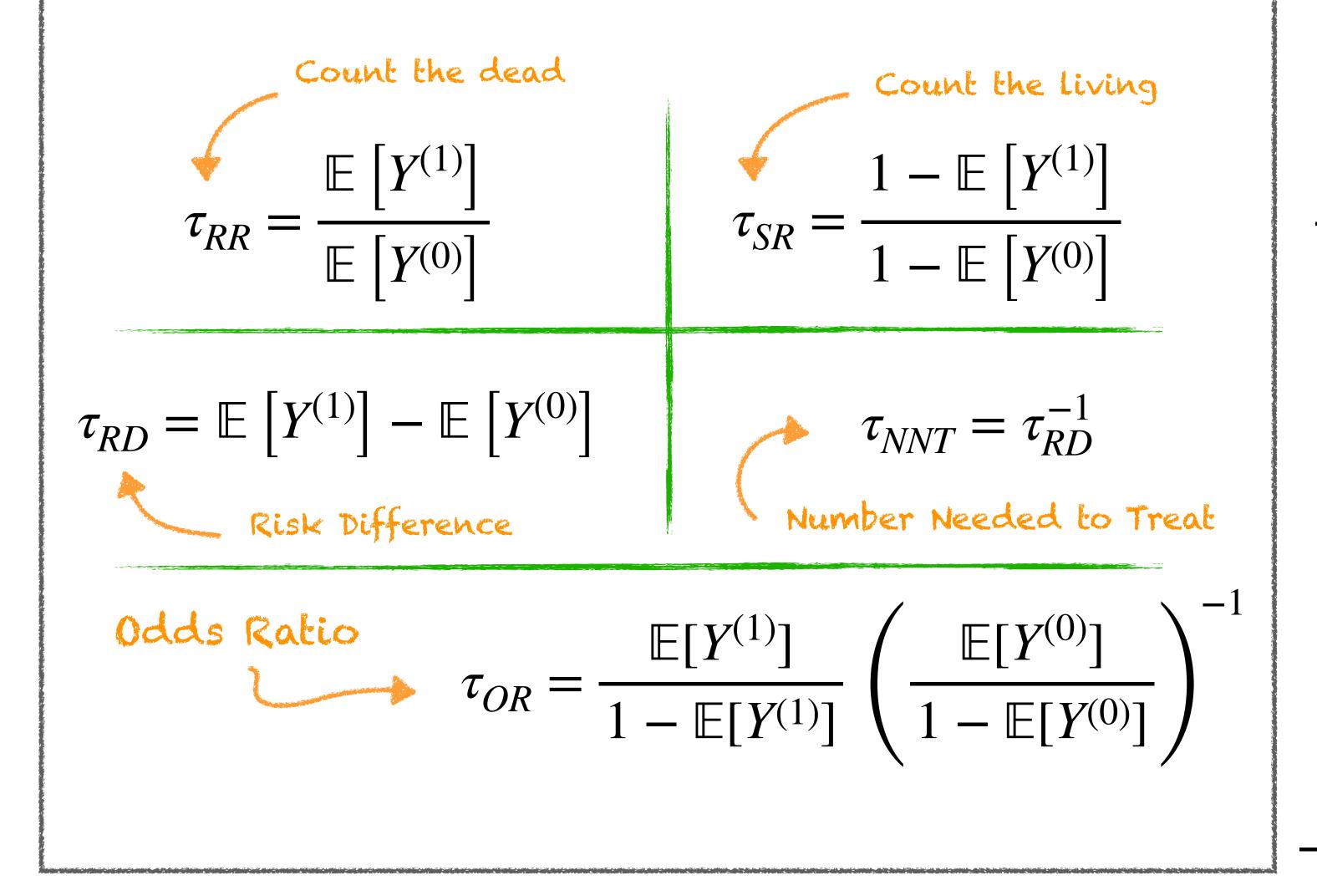
 $\mathbb{E}\left[Y^{(0)}\right]$ $\mathbb{E}\left[Y^{(1)}\right]$

Expected outcome if treated (1) or control (0)

E.g. benefit of antihyperintensive therapy (A) against stroke (Y) [1]

	$ au_{ m RD}$	$ au_{ m RR}$	$ au_{ m SR}$	$ au_{ m NNT}$	$ au_{ m OR}$
All (P_s)	-0.0452	0.6	1.05	22	0.57
X = 1	-0.006	0.6	1.01	167	0.6
$\mathbf{X} = 0$	-0.08	0.6	1.1	13	0.545



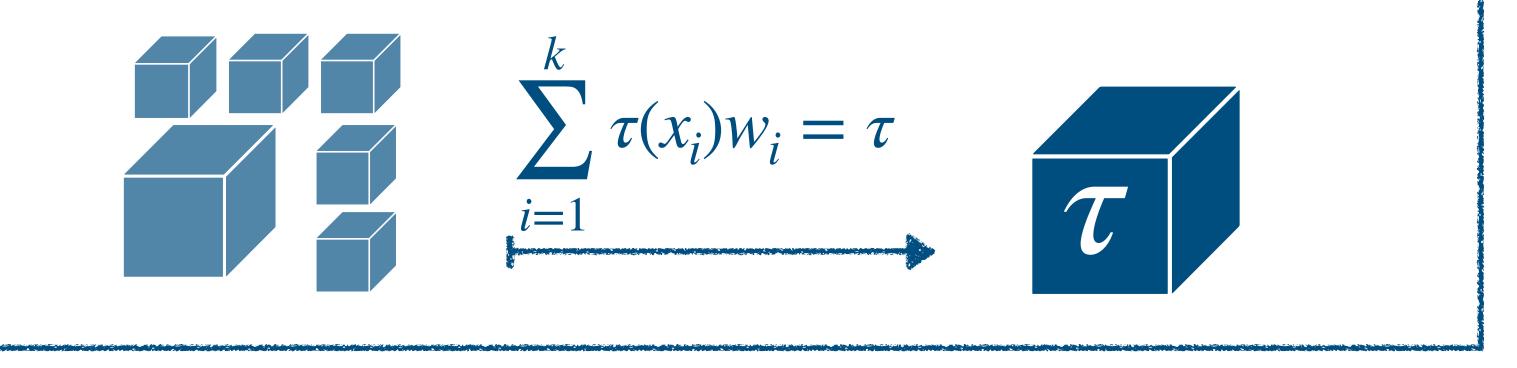


Treated group has 0.6 times the risk of having a stroke outcome when compared with the placebo." — ``The Number Needed to Treat is 22." — ``Effect is stronger on subgroup X=0 but not on the ratio scale."

— leading to different impressions and heterogeneity patterns

A desirable property: collapsibility

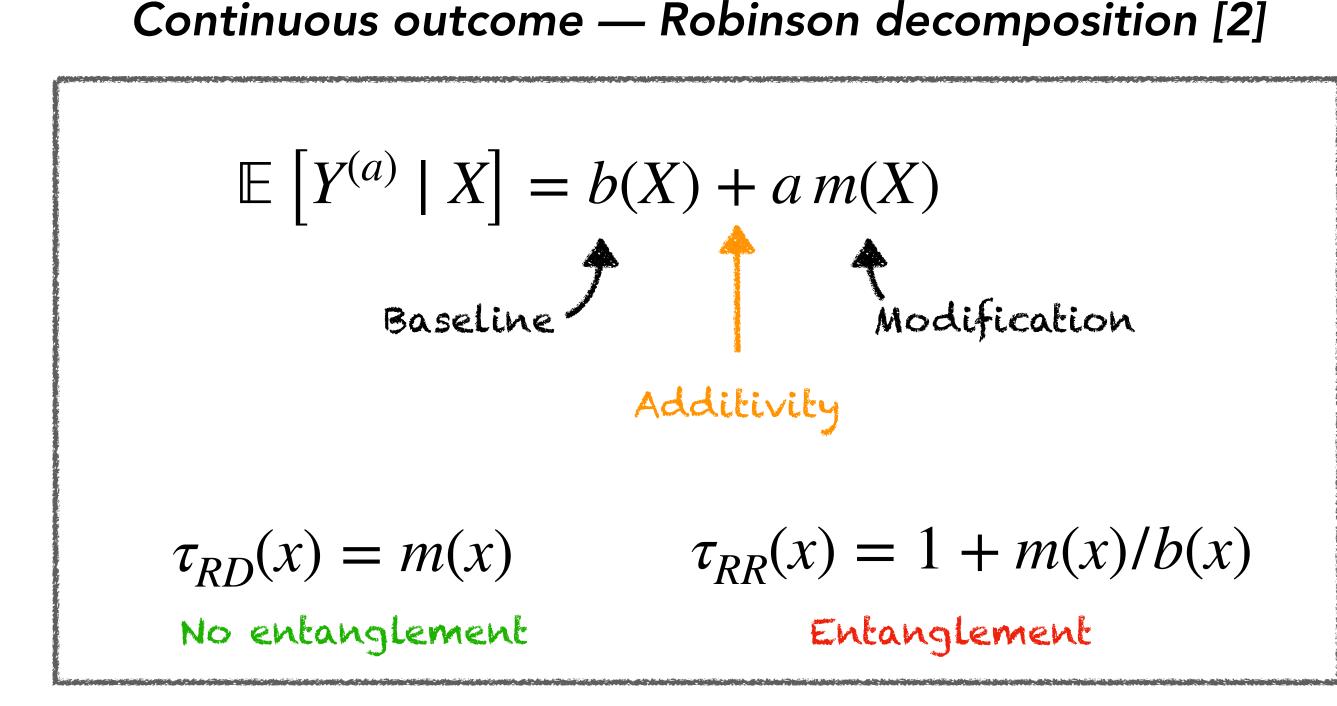
i.e. population's effect is equal to a weighted sum of local effects



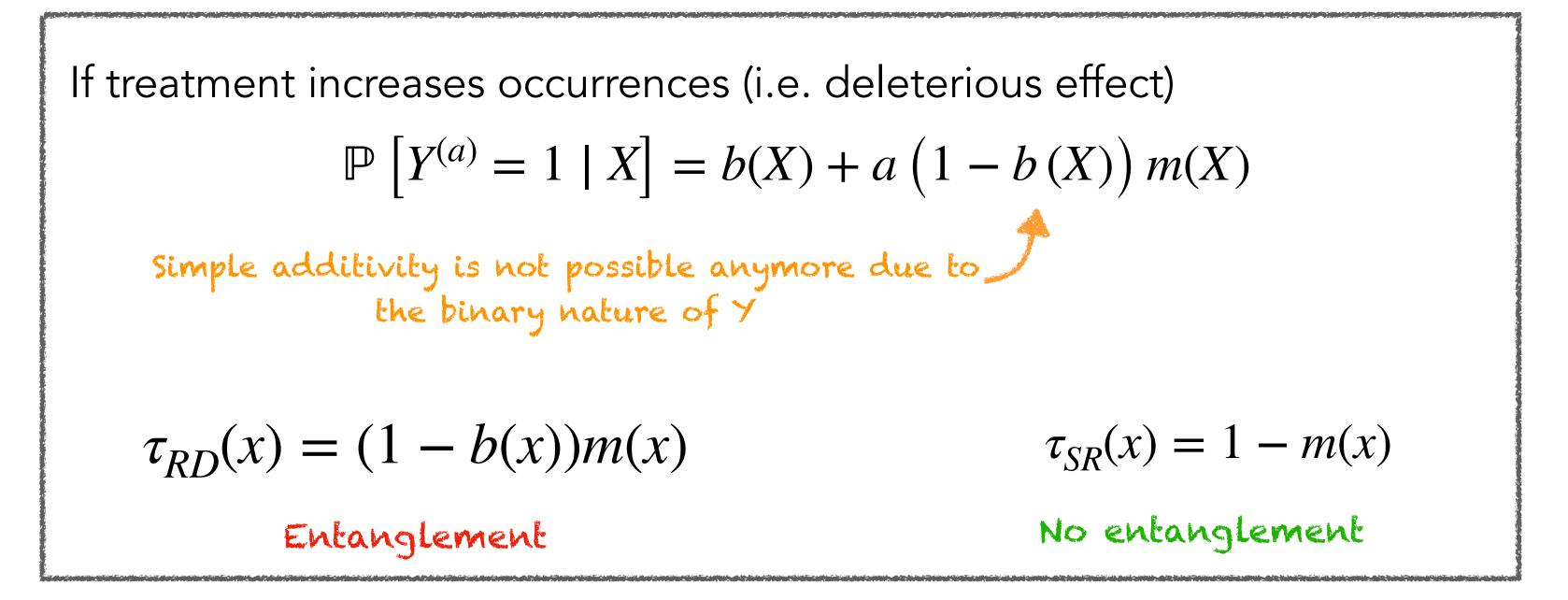
— Unfortunately, not all measures are collapsible (e.g. OR, log-OR, NNT)

Reverse the thinking, through the lens of baseline covariates

— Every generative process can be decomposed in a baseline level and alteration part with no assumption.

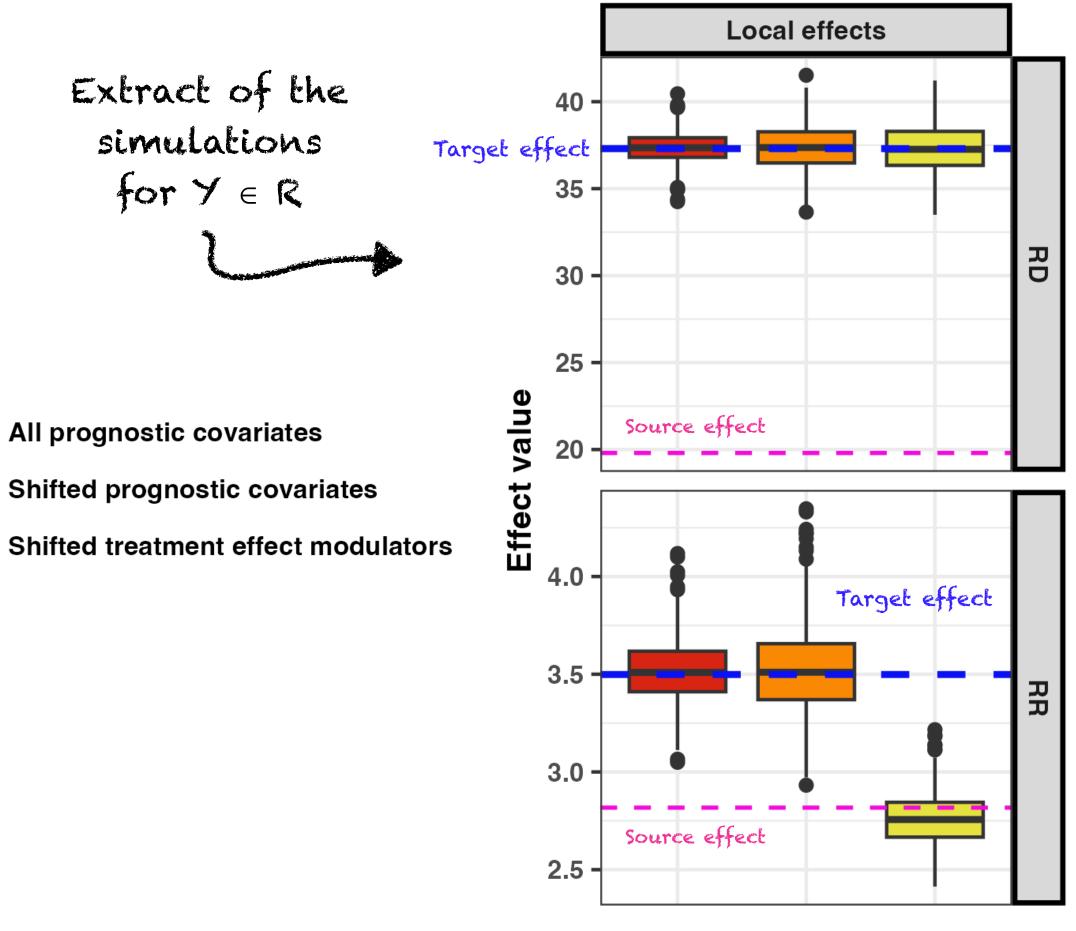


Binary outcome — What model?



Different sets of covariates for generalization of causal effects?

Transferring trial's findings to a





Generalisation: re-weighting trial local effects $\tau(x)$ [3,4,5]

— requires measure collapsibility

— requires in general all shifted covariates that are prognostic or treatment effect modifiers

— but some measures requires less covariates^(*) as soon as they locally disentangle baseline and modification —- if Y is binary RR or SR, if Y is continuous RD

(*) This may require to have access to Y(0) in the target sample. As an alternative, one can generalize conditional outcomes but with all shifted prognostic covariates

[1] Cook and Sackett, 1995; [2] Robinson, 1988; [3] Pearl and Bareinboim, 2011; [4] Huitfeld, 2018; [5] Pearl and Cinelli 2020

— RD can be recovered with less covariates