

# Machine Learning for Healthcare

HST.956, 6.S897

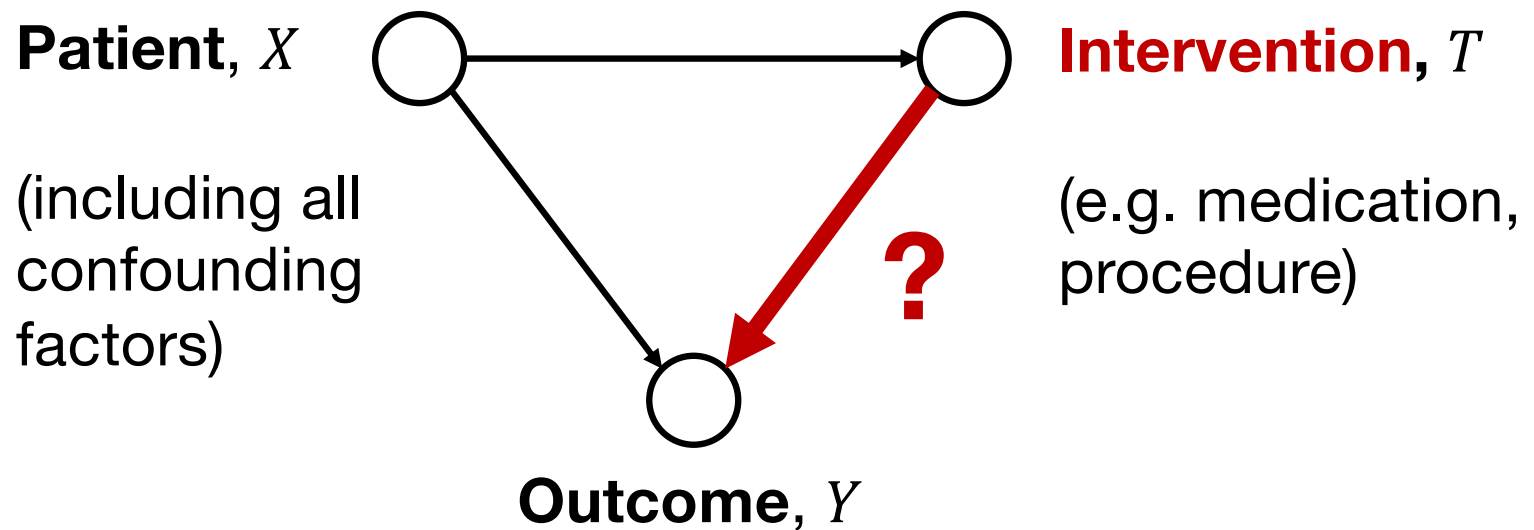
## Lecture 15: Causal Inference Part 2

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Acknowledgement: adapted from slides by Uri Shalit (Technion)

# Reminder: Causal inference



*High dimensional*

*Observational data*

# Reminder: Potential Outcomes

- Each unit (individual)  $x_i$  has two potential outcomes:
  - $Y_0(x_i)$  is the potential outcome had the unit not been treated:  
“**control outcome**”
  - $Y_1(x_i)$  is the potential outcome had the unit been treated:  
“**treated outcome**”

- Conditional average treatment effect for unit  $i$ :  
$$CATE(x_i) = \mathbb{E}_{Y_1 \sim p(Y_1|x_i)} [Y_1|x_i] - \mathbb{E}_{Y_0 \sim p(Y_0|x_i)} [Y_0|x_i]$$

- Average Treatment Effect:

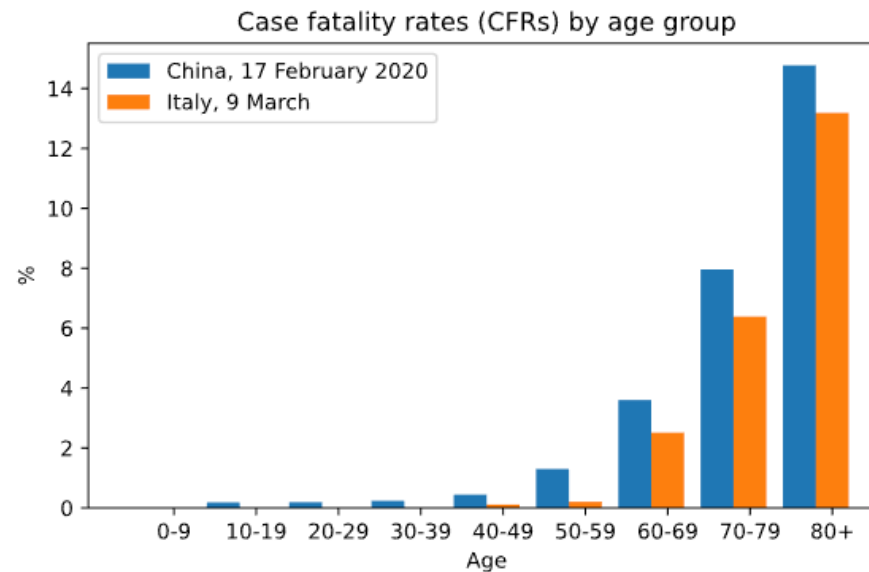
$$ATE = \mathbb{E}_{x \sim p(x)} [CATE(x)]$$

# Causal inference for COVID19

-

# Causal inference for COVID19

- Example (simplified; for educational purposes only)
  - Understanding case fatality rates (CFR)  
Paradox: CFR in Italy reported at 4.3% and CFR in China reported at 2.3%. Yet:



Courtesy of [Julius von Kuegelgen & Luigi Gresele](#). Used with permission.

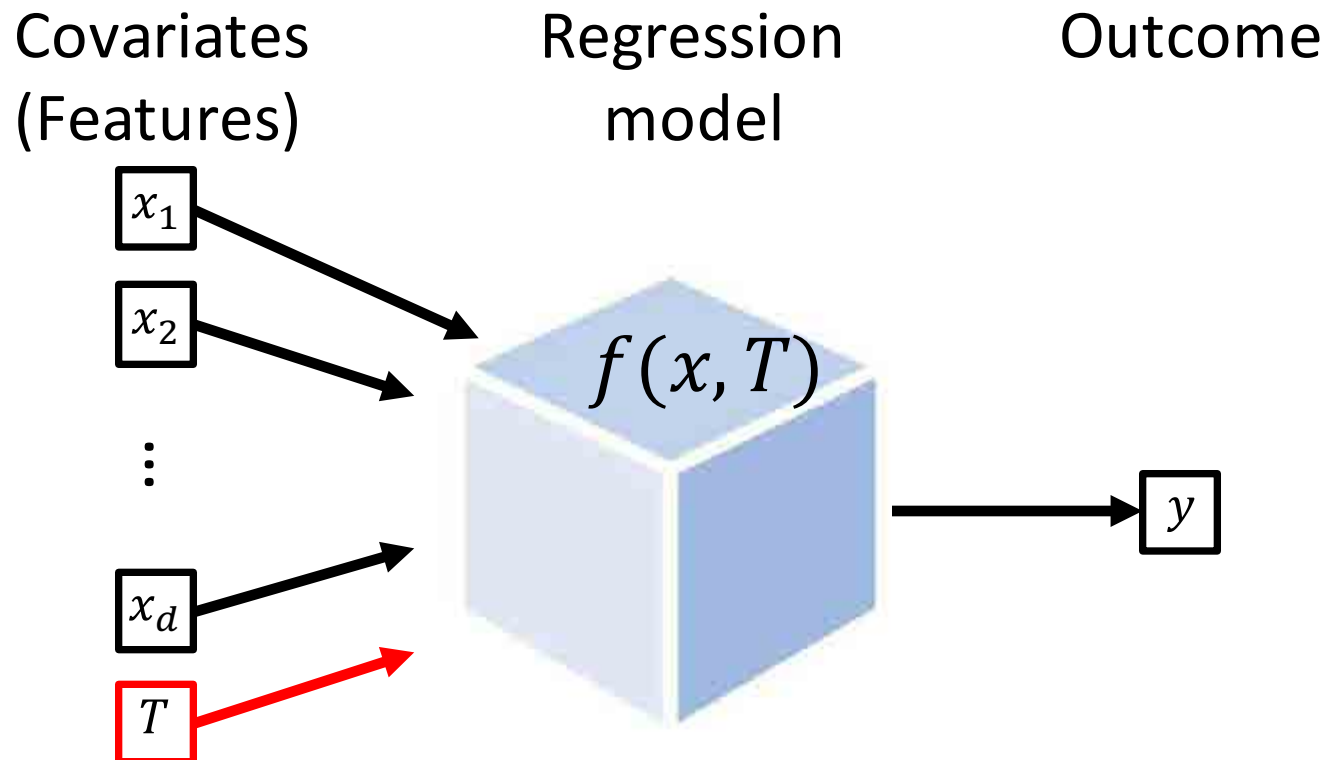
# Two common approaches for counterfactual inference

Covariate adjustment

Propensity scores

# Covariate adjustment (reminder)

Explicitly model the relationship between treatment, confounders, and outcome:



# Covariate adjustment (reminder)

- Under ignorability,

$$CATE(x) =$$

$$\mathbb{E}_{x \sim p(x)} \left[ \mathbb{E}[Y_1 | T = 1, x] - \mathbb{E}[Y_0 | T = 0, x] \right]$$

- Fit a model  $f(x, t) \approx \mathbb{E}[Y_t | T = t, x]$ , then:

$$\widehat{CATE}(x_i) = f(x_i, 1) - f(x_i, 0).$$



# Covariate adjustment with linear models

- Assume that:

Blood pressure      age      medication

$$Y_t(x) = \beta x + \gamma \cdot t + \epsilon_t$$
$$\mathbb{E}[\epsilon_t] = 0$$

- Then:

$$Y_1(x) - Y_0(x) =$$

# Covariate adjustment with random effects

- Assume that:

$$y_t(x) = \beta_0 + \gamma \cdot x + \epsilon_t$$

$$\mathbb{E}[\epsilon_t] = 0$$

- The :

$$CATE(x) := \mathbb{E}[y_1(x) - y_0(x)] =$$

$$\mathbb{E}[(\cancel{\beta_0} + \gamma + \epsilon_1) - (\cancel{\beta_0} + \epsilon_0)] =$$

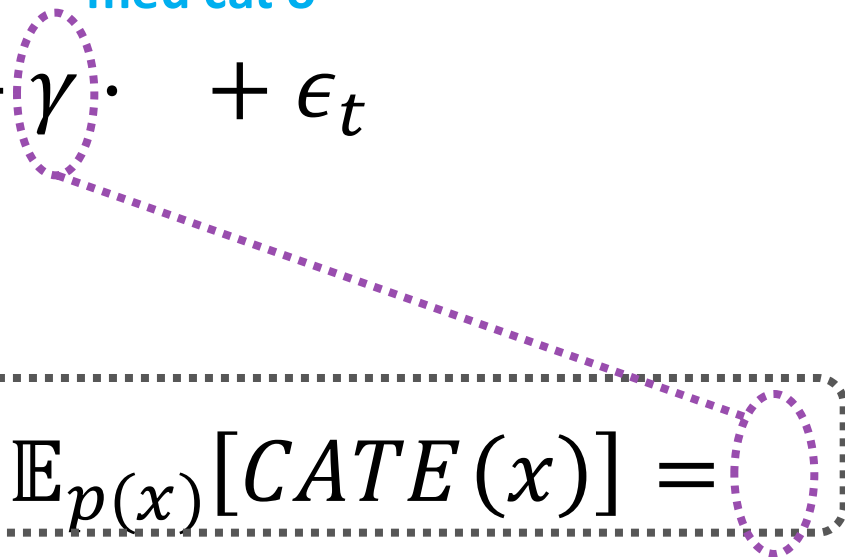
$$ATE := \mathbb{E}_{p(x)}[CATE(x)] =$$

# Covariate adjustment with linear models

- Assume that:

Blood pressure = age +  $\gamma$  · med cat o +  $\epsilon_t$

$\mathbb{E}[\epsilon_t] = 0$



$$ATE := \mathbb{E}_{p(x)}[CATE(x)] = \gamma$$

- For causal inference, need to estimate well, not  $t(\cdot)$  - **Identification, not prediction**
- *Major difference between ML and statistics*

# What happens true models not linear?

- True data generating process,  $x \in \mathbb{R}$ :

$$Y_t(x) = \alpha + \beta \cdot t + \gamma \cdot x^2$$

$$ATE = \mathbb{E}[Y_1 - Y_0] = \gamma$$

- Hypothesized model:

$$\hat{Y}_t(x) = \hat{\alpha} + \hat{\beta} \cdot x$$

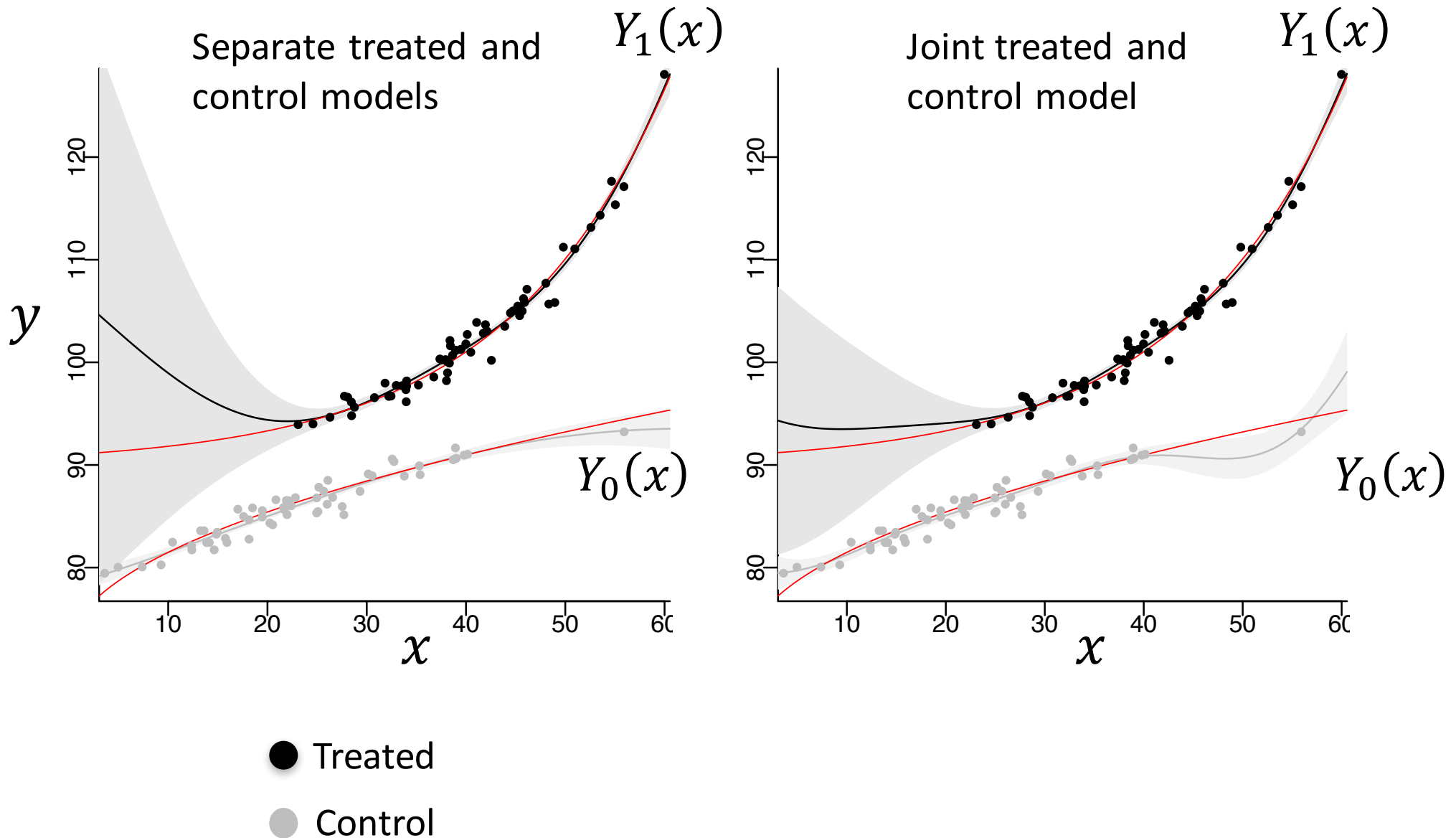
$$\hat{\beta} = \frac{\mathbb{E}[\hat{\alpha}] \mathbb{E}[x^2] - \mathbb{E}[x^2] \mathbb{E}[\hat{\alpha}]}{\mathbb{E}[\hat{\alpha}]^2 - \mathbb{E}[x^2] \mathbb{E}[t^2]}$$

Dependent  $\delta$ , can be made to be arbitrary arguments!

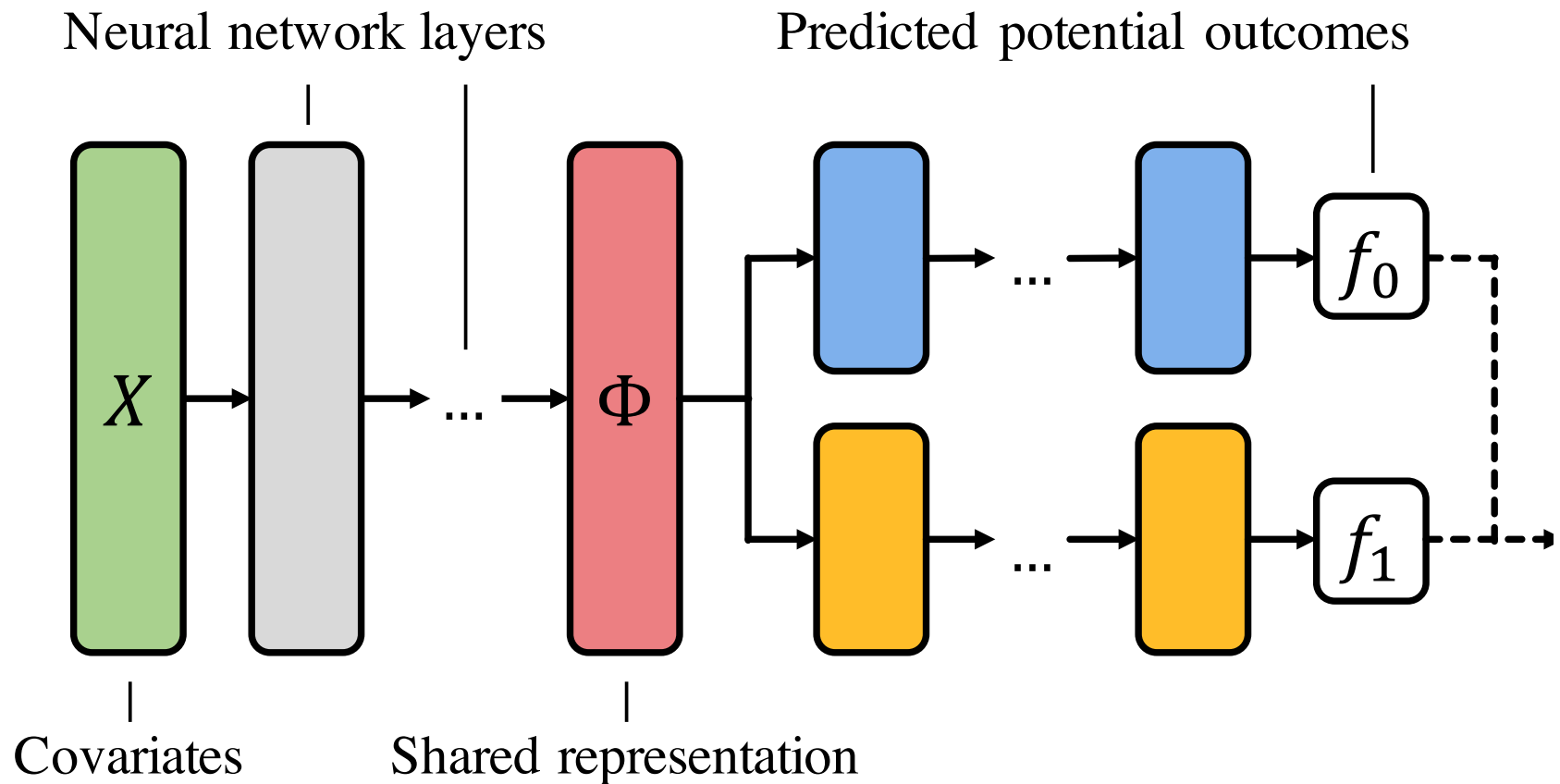
# Covariate adjustment with non-linear models

- Random forests and Bayesian trees  
Hill (2011), Athey & Imbens (2015), Wager & Athey (2015)
- Gaussian processes  
Hoyer et al. (2009), Zigler et al. (2012)
- Neural networks  
Beck et al. (2000), Johansson et al. (2016), Shalit et al. (2016), Lopez-Paz et al. (2016)

# Example: Gaussian processes



# Example: Neural networks

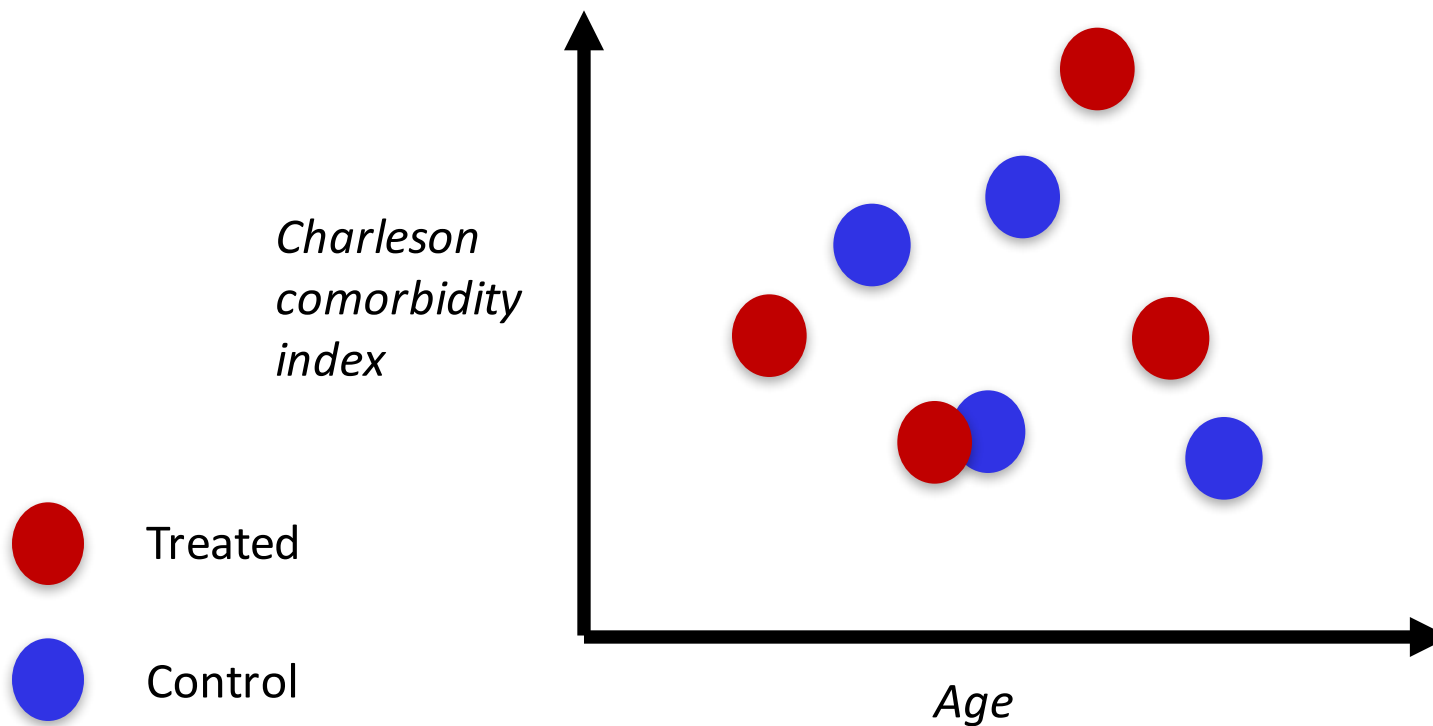


# Matching

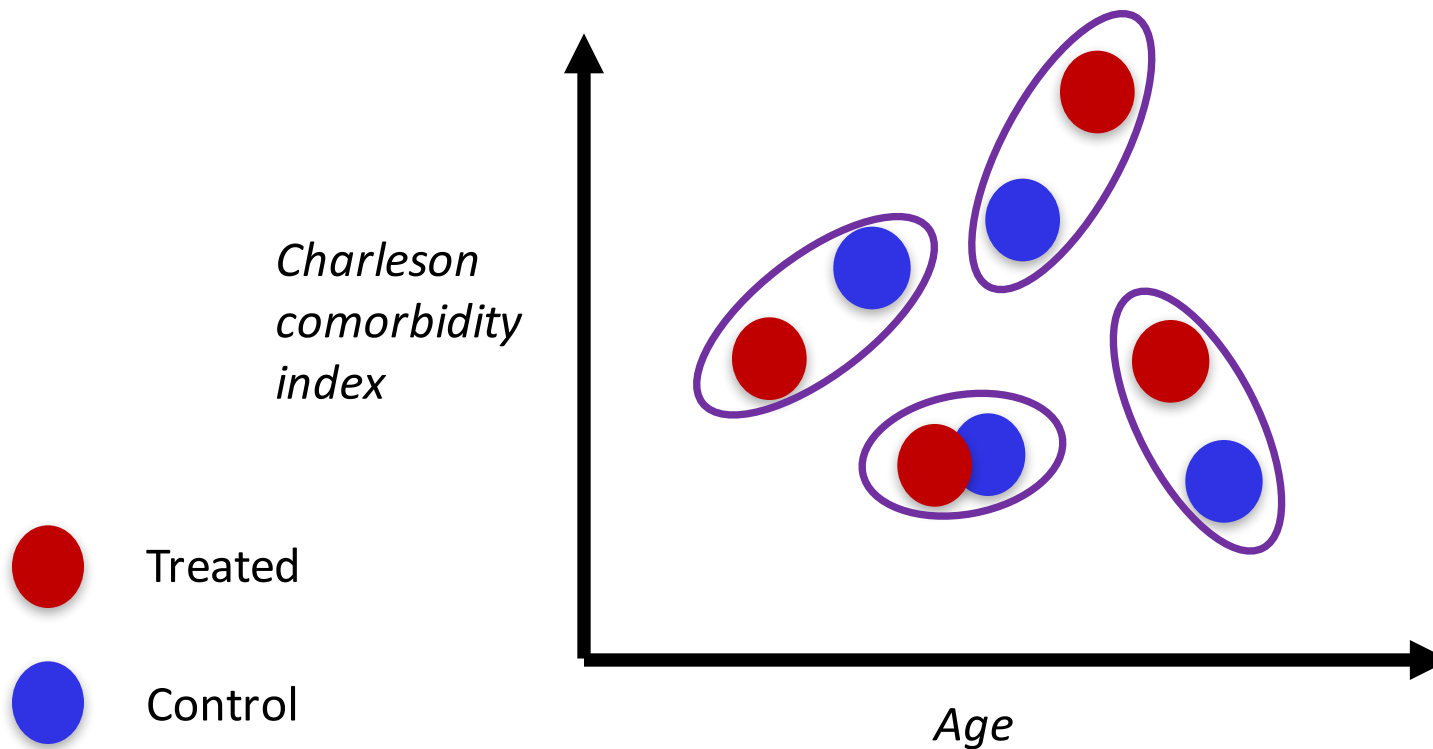
- Find each unit's long-lost counterfactual identical twin, check up on his outcome
- Used for estimating both ATE and CATE



# Match to nearest neighbor from opposite group



# Match to nearest neighbor from opposite group



# 1-NN Matching

- Let  $d(\cdot, \cdot)$  be a metric between  $x$ 's
- For each  $i$ , define  $j(i) = \underset{j \text{ s.t. } t_j \neq t_i}{\operatorname{argmin}} d(x_j, x_i)$

$j(i)$  is the nearest counterfactual neighbor of  $i$

- $t_i = 1$ , unit  $i$  is treated:

$$\widehat{CATE}(x_i) = y_i - y_{j(i)}$$

- $t_i = 0$ , unit  $i$  is control:

$$\widehat{CATE}(i) = y_{j(i)} - y_i$$

# 1-NN Matching

- Let  $d(\cdot, \cdot)$  be a metric between  $x$ 's
- For each  $i$ , define  $j(i) = \underset{j \text{ s.t. } t_j \neq t_i}{\operatorname{argmin}} d(x_j, x_i)$

$j(i)$  is the nearest counterfactual neighbor of  $i$

- $\widehat{CATE}(x_i) = (2t_i - 1)(y_i - y_{j(i)})$
- $\widehat{ATE} = \frac{1}{n} \sum_{i=1}^n \widehat{CATE}(x_i)$

# Matching

- Interpretable, especially in small-sample regime
- Nonparametric
- Heavily reliant on the underlying metric
- Could be misled by features which don't affect the outcome

# Covariate adjustment and matching

- Matching is equivalent to covariate adjustment with two 1-nearest neighbor classifiers:

$$\hat{Y}_1(x) = y_{NN_1(x)}, \hat{Y}_0(x) = y_{NN_0(x)}$$

where  $y_{NN_t}(\cdot)$  is the nearest-neighbor of  $x$  among units with treatment assignment  $t = 0, 1$

- 1-NN matching is in general inconsistent, though only with small bias (Imbens 2004)

# Two common approaches for counterfactual inference

Covariate adjustment

Propensity scores

# Propensity scores

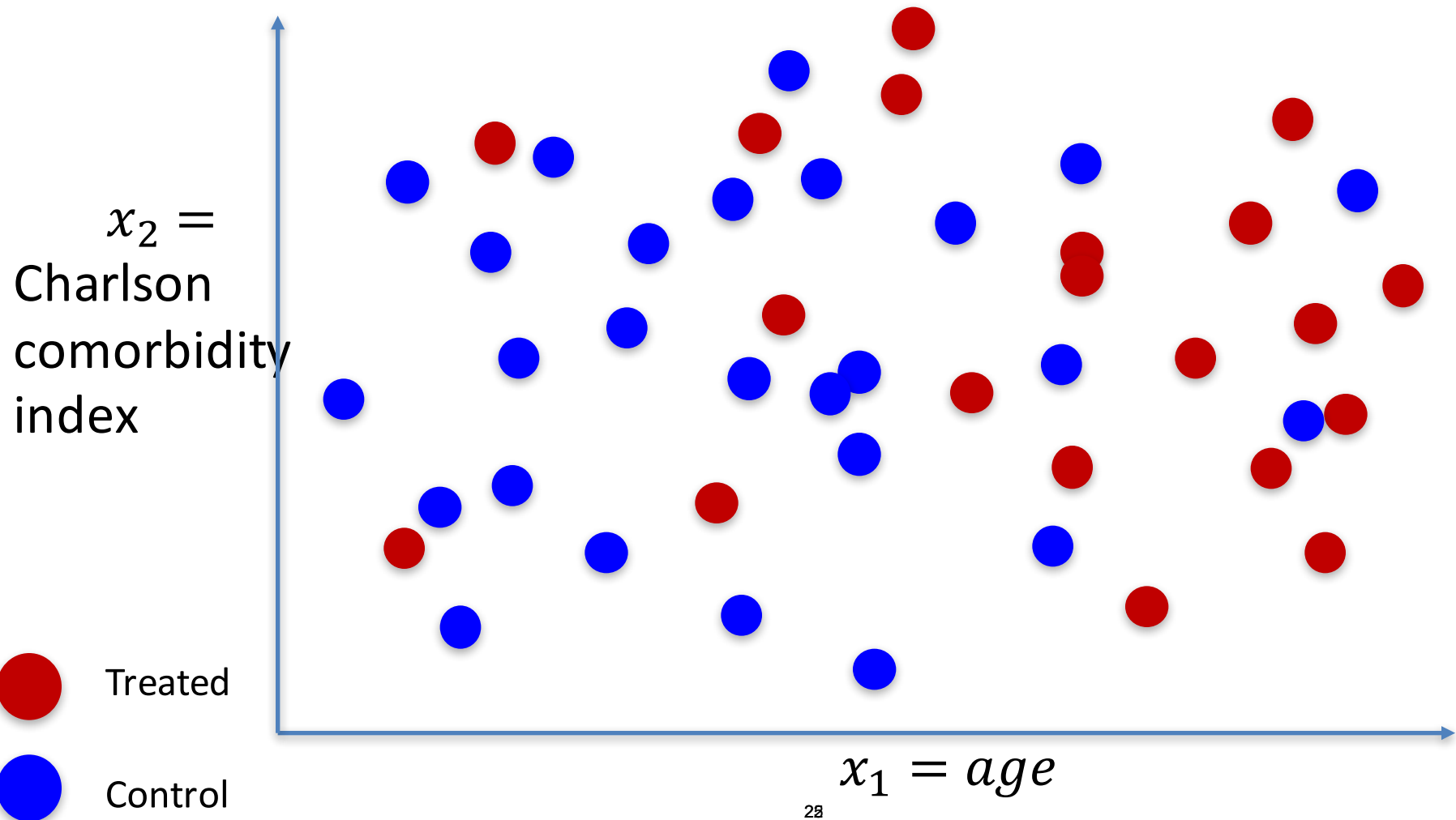
- Tool for estimating ATE
- Basic idea: turn observational study into a pseudo-randomized trial by re-weighting samples, similar to importance sampling



# Inverse propensity score re-weighting

$$p(x|t=0) \neq p(x|t=1)$$

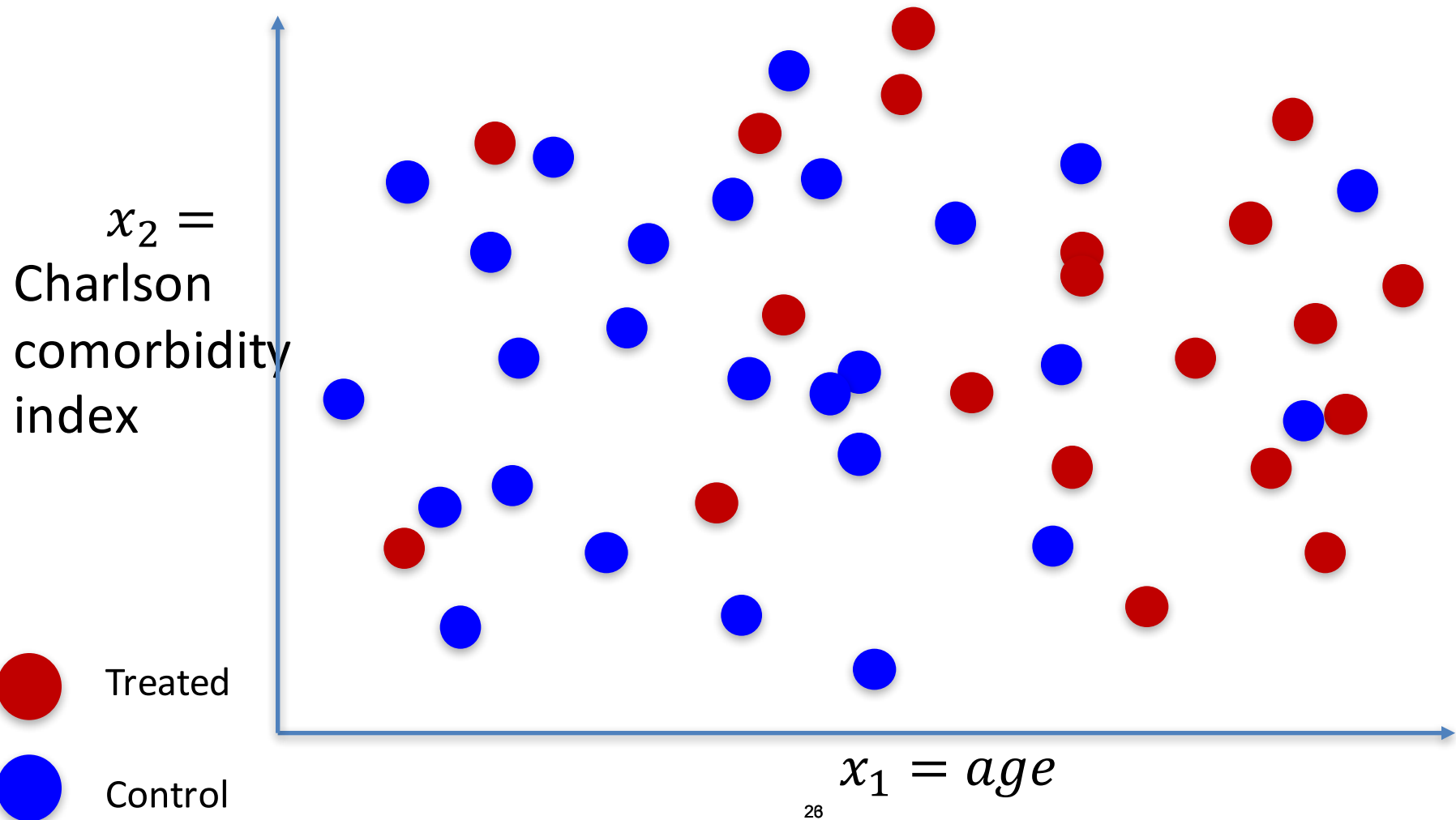
*control*                      *treated*



# Inverse propensity score re-weighting

$$p(x|t=0) \cdot w_0(x) \approx p(x|t=1) \cdot w_1(x)$$

*reweighted control*                      *reweighted treated*



# Propensity score

- Propensity score:  $p(T = 1|x)$ ,  
using machine learning tools
- Samples re-weighted by the inverse propensity  
score of the treatment they received

# Propensity scores – algorithm

*Inverse probability of treatment weighted estimator*

How to calculate ATE with propensity score  
for sample  $(x_1, t_1, y_1), \dots, (x_n, t_n, y_n)$

1. Use any ML method to estimate  $\hat{p}(T = t|x)$

$$2. \hat{ATE} = \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{\hat{p}(t_i = 1|x_i)} - \frac{1}{n} \sum_{i \text{ s.t. } t_i=0} \frac{y_i}{\hat{p}(t_i = 0|x_i)}$$

# Propensity scores – algorithm

*Inverse probability of treatment weighted estimator*

How to calculate ATE with propensity score  
for sample  $(x_1, t_1, y_1), \dots, (x_n, t_n, y_n)$

1. Randomized trial  $p(T = t|x) = 0.5$

$$2. \hat{ATE} = \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{\hat{p}(t_i = 1|x_i)} - \frac{1}{n} \sum_{i \text{ s.t. } t_i=0} \frac{y_i}{\hat{p}(t_i = 0|x_i)}$$

# Propensity scores – algorithm

*Inverse probability of treatment weighted estimator*

How to calculate ATE with propensity score  
for sample  $(x_1, t_1, y_1), \dots, (x_n, t_n, y_n)$

1. Randomized trial  $p(T = t|x) = 0.5$

$$2. \hat{ATE} = \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{0.5} - \frac{1}{n} \sum_{i \text{ s.t. } t_i=0} \frac{y_i}{0.5} =$$

# Propensity scores – algorithm

*Inverse probability of treatment weighted estimator*

How to calculate ATE with propensity score  
for sample  $(x_1, t_1, y_1), \dots, (x_n, t_n, y_n)$

1. Randomized trial  $p = 0.5$

$$\begin{aligned} 2. \hat{ATE} &= \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{0.5} - \frac{1}{n} \sum_{i \text{ s.t. } t_i=0} \frac{y_i}{0.5} = \\ &= \frac{2}{n} \sum_{i \text{ s.t. } t_i=1} y_i - \frac{2}{n} \sum_{i \text{ s.t. } t_i=0} y_i \end{aligned}$$

# Propensity scores – algorithm

*Inverse probability of treatment weighted estimator*

How to calculate ATE with propensity score  
for sample  $(x_1, t_1, y_1), \dots, (x_n, t_n, y_n)$

Sum over  $\sim \frac{n}{2}$  terms

1. Randomized trial  $p = 0.5$

$$2. \hat{ATE} = \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{0.5} - \frac{1}{n} \sum_{i \text{ s.t. } t_i=0} \frac{y_i}{0.5} =$$
$$\frac{2}{n} \sum_{i \text{ s.t. } t_i=1} y_i - \frac{2}{n} \sum_{i \text{ s.t. } t_i=0} y_i$$



# Propensity scores - derivation

- How do we derive this estimator?

$$\widehat{ATE} = \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{\hat{p}(t_i = 1|x_i)} - \frac{1}{n} \sum_{i \text{ s.t. } t_i=0} \frac{y_i}{\hat{p}(t_i = 0|x_i)}$$

- Recall definition of average treatment effect:

$$ATE = \mathbb{E}_{x \sim p(x)} [Y_1(x)] - \mathbb{E}_{x \sim p(x)} [Y_0(x)]$$

- Naively, using observed data we can estimate

$$\mathbb{E}_{x \sim p(x|T=1)} [Y_1(x)] \quad \& \quad \mathbb{E}_{x \sim p(x|T=0)} [Y_0(x)]$$

- We want:  $\mathbb{E}_{x \sim p(x)} [Y_1(x)]$

Propensity scores -  
derivation

- We know that:

$$p(x|T=1) \cdot \frac{p(T=1)}{p(T=1|x)} = p(x)$$

- Thus:

$$\mathbb{E}_{x \sim p(x|T=1)} \left[ \frac{p(T=1)}{p(T=1|x)} Y_1(x) \right] = \mathbb{E}_{x \sim p(x)} [Y_1(x)]$$

- We can approximate this empirically as:

$$\frac{1}{n_1} \sum_{i \text{ s.t. } t_i=1} \left[ \frac{n_1/n}{\hat{p}(t_i=1|x_i)} y_i \right] = \frac{1}{n} \sum_{i \text{ s.t. } t_i=1} \frac{y_i}{\hat{p}(t_i=1|x_i)}$$

(similarly for  $t_i=0$ )

# Problems with IPW

- Need to estimate propensity score (problem in all propensity score methods)
- If there's not much overlap, propensity scores become non-informative and easily miscalibrated
- Weighting by inverse can create large variance and large errors for small propensity scores
  - Exacerbated when more than two treatments

# Many more ideas and methods

- Natural experiments & regression discontinuity
- Instrumental variables

# Many more ideas and methods – Natural experiments

- Does stress during pregnancy affect later child development?
- Confounding: genetic, mother personality, economic factors...
- Natural experiment: the Cuban missile crisis of October 1962. Many people were afraid a nuclear war is about to break out.
- Compare children who were in utero during the crisis with children from immediately before and after

# Many more ideas and methods – Instrumental variables

- Informally: a variable which affects treatment assignment but not the outcome
- Example: are private schools better than public schools?
- Confounding: different student population, different teacher population
- Can't force people which school to go to

# Many more ideas and methods – Instrumental variables

- Informally: a variable which affects treatment assignment but not the outcome
- Example: are private schools better than public schools?
- Can't force people which school to go to
- *Can randomly give out vouchers to some children, giving them an opportunity to attend private schools*
- *The voucher assignment is the instrumental variable*

# Summary

- Two approaches to use machine learning for causal inference
  - Predict outcome given features and treatment, then use resulting model to impute counterfactuals (*covariate adjustment*)
  - Predict treatment using features (*propensity score*), then use to reweight outcome or stratify the data
- Consistency of estimates depend on:
  - Causal graph being correct (i.e., no unobserved confounding)
  - Identifiability of causal effect (i.e., overlap)
  - Nonparametric regression is used (or correctly specified model)



# References

- Recent work from ML community:  
<https://sites.google.com/view/nips2018causallearning/> and  
[http://tripods.cis.cornell.edu/neurips19\\_causalml/](http://tripods.cis.cornell.edu/neurips19_causalml/)
- Recent book on causal inference by Miguel Hernan and Jamie Robins:  
<https://www.hsph.harvard.edu/miguel-hernan/causal-inference-book/>  
Recent book on causal inference by Jonas Peters, Dominik Janzing and Bernhard Schölkopf:  
<https://mitpress.mit.edu/books/elements-causal-inference>  
(download PDF for free on left: “Open Access Title”)
- Examples of recent papers in this research field:  
<https://arxiv.org/abs/1906.02120>  
<https://arxiv.org/abs/1705.08821>  

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<https://arxiv.org/abs/1810.02894>

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