

An Introduction to Mediation

Real World Medical Statistics Meeting

NIHR Statistics Group



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Cambridge Clinical Trials Unit (CCTU)
Friday, June 22nd, 2018

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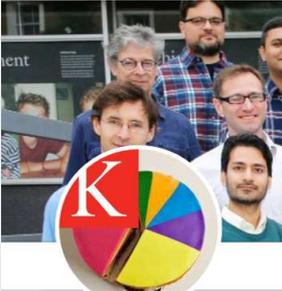
@KimberleyGol – Kim

@KCLBHI – Kim and Richard's Department

@gsmaclennan – Graeme

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Session Outline

- Introduction to mediation and its application
Kim ~10 – 15 min
- Mediation in fields other than psychology/psychiatry
Graeme ~ 10 – 15 min
- Group Discussion
All ~ 30 – 40 min
 - Questions about mediation
 - Mediation in other fields
 - What are your mediation hypotheses?

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Mediation

Hyman, 1955:

*“When the analyst interprets a relationship, he determines the **process** through which the assumed **cause** is related to what we take to be its **effect**. **How** did the result come about? What are the ‘links’ between the two variables? Described in formal terms, the interpretation of a statistical relationship between two variables involves the introduction of further variables and an examination of the resulting interrelationships between all of the factors”.*

David Kenny (on his website):

*“One reason for testing mediation is trying to understand the **mechanism** through which the **causal variable affects the outcome**”.*

In other words, **mediation** allows for **MECHANISM EVALUATION**.

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Mediation and mediators

A **mediator (M)** is a variable that occurs in the causal pathway from an exposure (D) or a randomised treatment (R) to an outcome variable (Y).

It causes variation in the outcome and itself is caused to vary by the exposure/treatment variable.

This causal chain implies a temporal relation

- D or R occurs before M and
- M occurs before Y

Mediating variables are often called **intervening** or **intermediate variables**. (They have also been called process variables; but we reserve this term for variables that measures aspects of the therapeutic process.)

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Treatment mechanisms of change: Why are we interested?



- Further develop or confirm postulated theoretical treatment models
Such models can and should be evaluated using mediation analysis
- May provide information about accuracy of the theoretical model and how intervention works
- May highlight ways in which treatment can be developed, tailored or refined
Treatment failed to change the hypothesized M? Change treatment.
M failed to influence Y? Change target.

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So we can...

Ask not just whether a treatment works....

But also how it works....

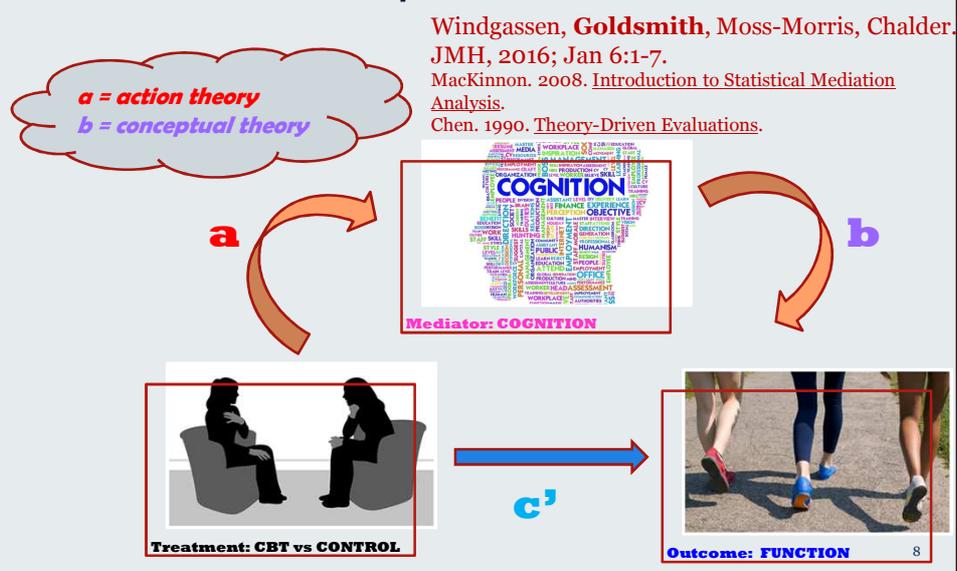
And if it didn't work, why this might have happened

Giving us more information about treatments from trials,
which are expensive and time-consuming

(Explanatory trials)

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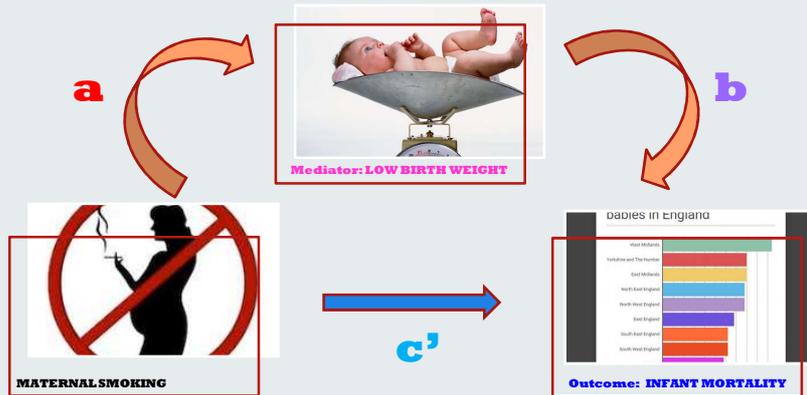
Clinical psychology and psychiatry mediation example



Mediation examples in other fields

Epidemiology:

e.g. Hypothesised mechanisms for the transmission of disease.
Often using binary endpoints such as death, disease or injury.

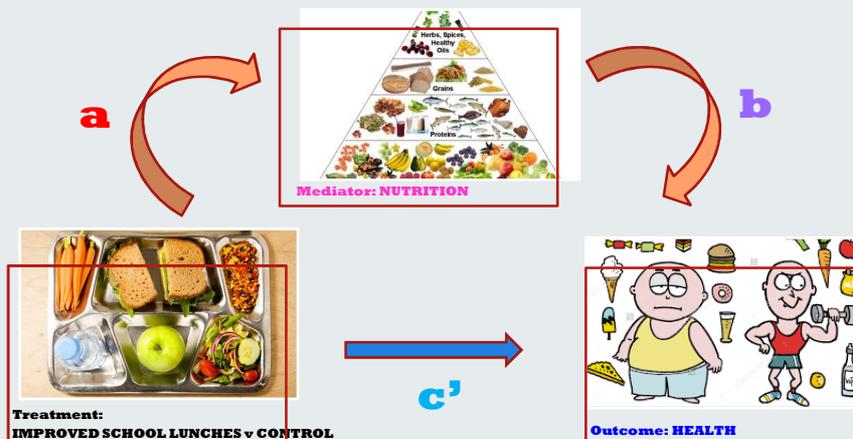


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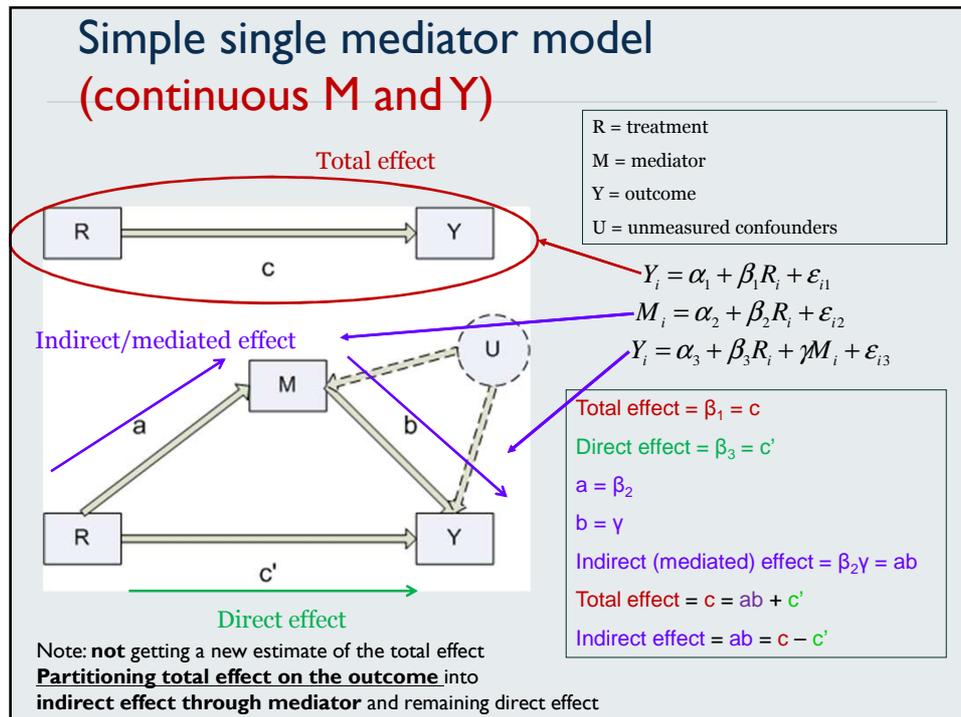
Mediation examples in other fields

Prevention research:

Public health treatments are typically based on a mediation theory:



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Baron and Kenny Steps Method

Baron and Kenny (1986) (Judd and Kenny (1981)) discussed four steps to establish mediation (see also David Kenny website):

Highly cited & well-known (so mentioned), but:

1. Not as powerful as other methods (MacKinnon et al, 2002)
2. Require significance of total effect
Now widely agreed not necessary for mediation analysis
Treatment didn't work? Mediation analysis probably more important
3. Does **not calculate** ab , which quantifies the indirect effect

**Instead: Product of coefficients [POC, see previous slide]
(or causal inference methods)**

MacKinnon. 2001. Mediating variable. *International Encyclopedia of the Social and Behavioural Sciences*, p. 9503-7.
 MacKinnon. 2008. *Introduction to Statistical Mediation Analysis*, Chps 3 and 4.

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Linear Structural Equation Models (LSEM) for mediation

Can implement product of coefficients approach in this framework

Are useful because they allow for:

- 👉 Simultaneous fitting of multiple regressions
- 👉 Measurement error by modelling latent variables
- 👉 Use full information maximum likelihood, so account for missing data under a missing at random assumption
- 👉 (Allow longitudinal/repeated measures modelling, see Goldsmith et al, 2016 and 2017)

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Other considerations

- **Mediation is longitudinal**
 - Hypothesises causal chain - by definition a longitudinal process
 - Study design and analysis should respect this
- **Confounding of mediator – outcome relationship could = bias**
 - And of all relationships in observational studies
 - Consider potential confounders at design stage, measure during study, include in models
 - Measure and adjust for baseline mediator and outcome (Pickles et al 2015, Landau et al 2018)
- **Measurement error in mediator could = bias**
 - Repeated measures or other designs -> use of structural equation models
- **Reporting**
 - Various effect sizes (MacKinnon, 2008)
 - Report both **a** and **b paths** as well as indirect effect (**a x b**)
 - Appropriate confidence interval (percentile bootstrap, Fritz et al 2012)
 - Stata **sem** example: <https://stats.idre.ucla.edu/statalfaq/how-can-i-do-mediation-analysis-with-the-sem-command/>

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Implications of results – treatment refinement

a path – action theory – answers important question:

Did the treatment affect the mediator?

If **a** is not significant :

Suggests treatment not acting as expected (does not change the targeted mediator)

Suggests the **treatment needs to be modified so that it either:**

1. affects that mediator
2. affects a different mediator that is related to the outcome, or
3. both

b path – conceptual theory – answers important question:

Is there a relationship between the mediator and outcome?

If **b** is not significant :

Suggests outcome cannot be changed by affecting that mediator

Suggests **need to modify treatment** to affect mediator **related to the outcome**

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Recommendations for triallists interested in mediation

Key point is to build in study of mediators in at the design stage:

- Measure mediators and outcome at baseline
- Measure potential confounders of M – Y relationship at baseline
- Measure mediators at important intermediate time points, to respect temporality
- Consider multiple arm designs where possible
 - True for trials in general, but also in terms of mediators, provides rich data information about treatments in shorter amount of time
- Plan in time/funding for such analyses

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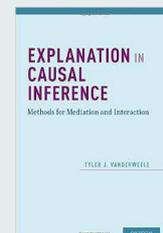
Causal mediation analysis

Statistical mediation as described here has four main problems:

1. Unmeasured confounding between mediator and outcome
2. No interactions between exposure and mediator on outcome
3. Doesn't easily extend to non-linear models
4. Assumes correctly specified models

Causal mediation analysis has arisen from the causal inference literature, and addressed these problems.

Formally defines the causal mediation parameters.



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Mediation analysis in Stata

Sobel test

- **sgmediation**
- Could run individual regressions and code to obtain indirect effect/to provide 95% percentile bootstrap CI

LSEM approach

- **sem** with additional code to provide 95% percentile bootstrap CI
 - Need to take care in obtaining estimates for categorical/count variables or in the presence of interactions

Causal inference approach

When used with certain settings, give same results as other approaches, but also more flexible

- **paramed**
 - Outcome variable Y: binary, continuous, or count
 - Treatment variable T: binary or continuous
 - Mediator variable M: binary or continuous
 - Covariates: categorical or continuous
 - Proper estimates in the presence of exposure-mediator interaction

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