

Social disadvantage and infant mortality: the birth weight paradox revisited

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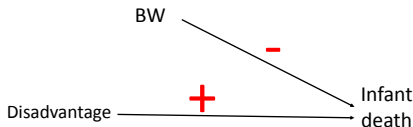
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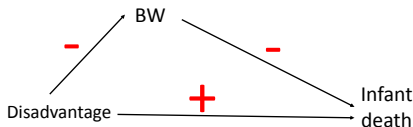
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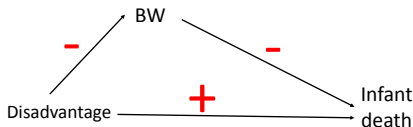
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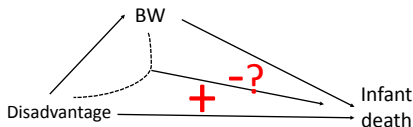
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BW

Aim of the talk

Study the mediating role of BW using 30 years data from ONS LS.

1 Background

2 Methods

3 Results

4 Conclusions

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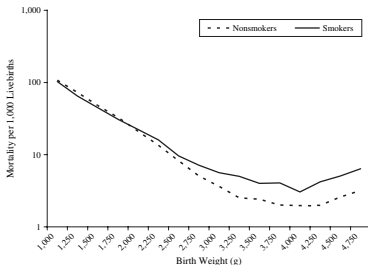


Figure: Birth-weight-specific infant mortality curves, US, 1991

- Also found for other high-risk populations (*e.g.* defined by social class, ethnicity, region) (Yerushalmy (1964, 1971), Hernandez-Diaz (2006)).



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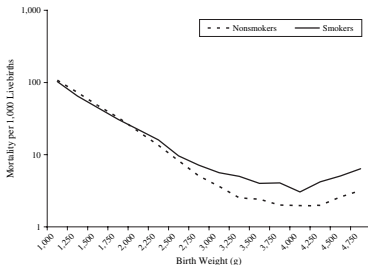


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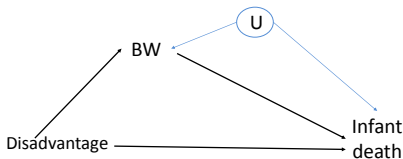
An explanation of the low BW paradox

- There are unmeasured confounders U between BW and Infant death.

- Comparing rates by disadvantage at given values of BW ...
opens up a spurious path from disadvantage to death.

"Low BW may occur because of disadvantage or U (or both): knowing the disadvantage status of a baby is informative of his/her U , hence the induced association."

- Reasonable values of $U \rightarrow$ BW and $U \rightarrow$ death sufficient to explain this paradox.



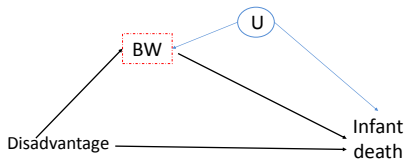
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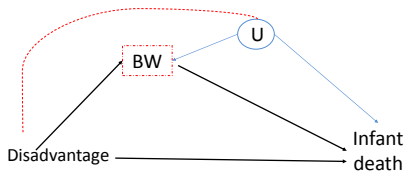


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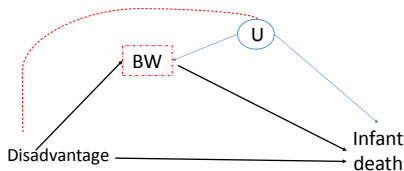


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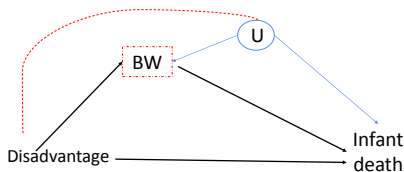


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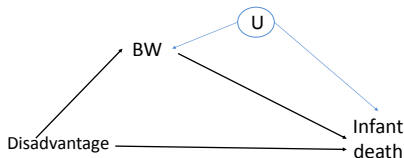
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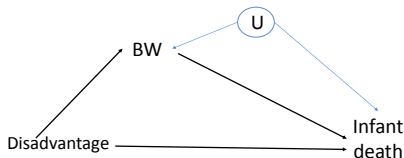
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- To proceed we need to address this problem. Options:

■ Sensitivity analyses

■ Instrumental variables (e.g., genetic variants)



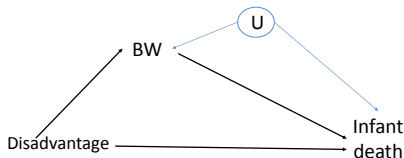
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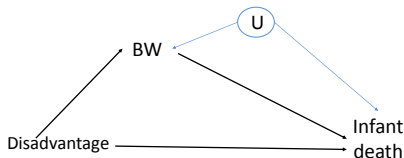
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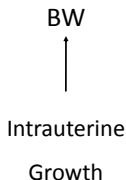
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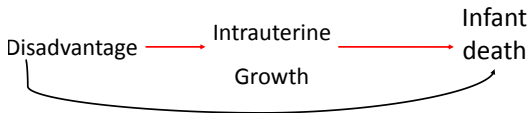
An informed approach to unmeasured confounding

- BW is a crude measure: it is only a **proxy** for **intrauterine growth**.
- Intrauterine growth likely to **lie on pathways** from Disadvantage to Infant death ...
- and hence to confound the BW to Infant death relationship.
- Data on intrauterine growth not generally available.
- If diagram is correct, intrauterine growth plays role of *U*.



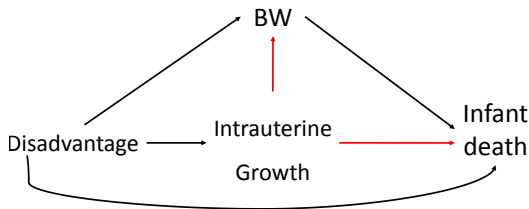
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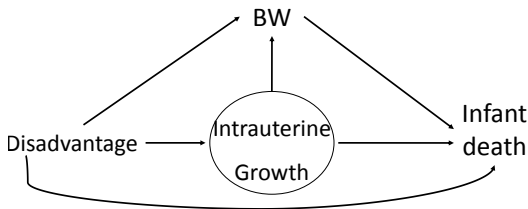
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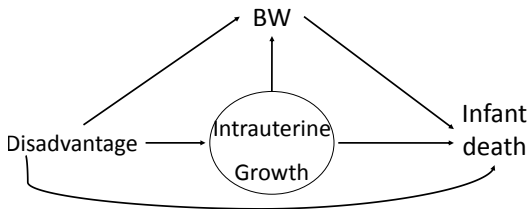
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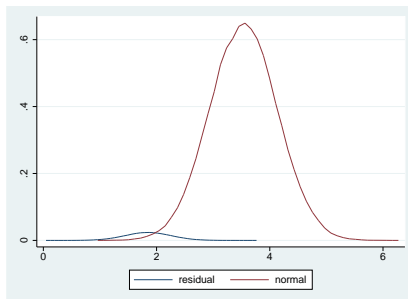


Retrieving data on U

- We can draw on external information and assumptions to retrieve data on intrauterine growth.
- Wilcox suggested that there are two sub-populations of newborns:
 - (a) **predominant**: mostly term babies
 - (b) **residual**: contributing to the low-end tail.
- We can draw inspiration from this model.

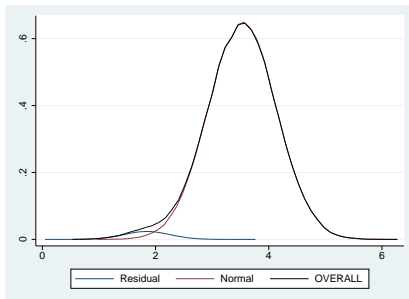
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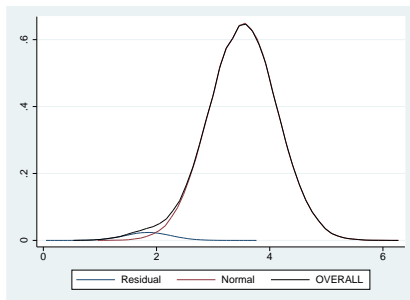
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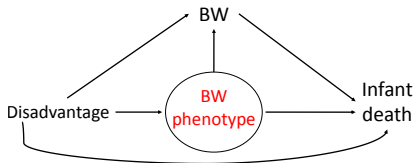
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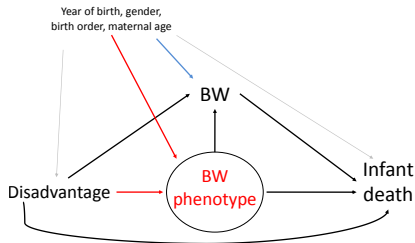
- there are a number of latent **BW phenotypes** (classes)
 - BW for each class is **normal**
 - there are measured predictors for these distributions (in blue) and for the Prob(Class) (in red)
- Then we can use **Latent Class Modelling** to impute the missing value of BW phenotype.





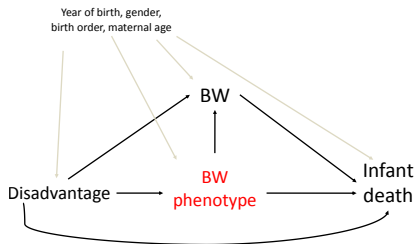
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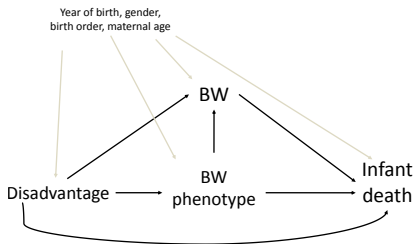


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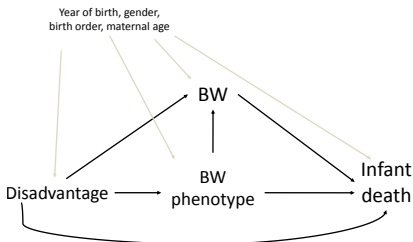


■ Given the model,



- aim to quantify the effect of Disadvantage that is **mediated** by BW
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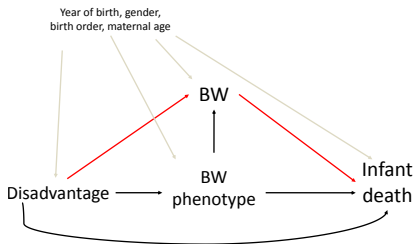
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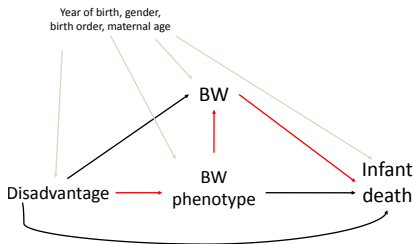
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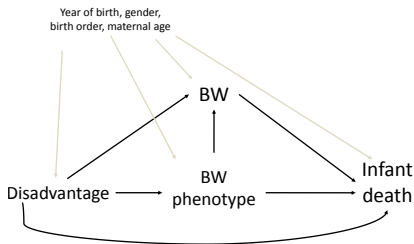
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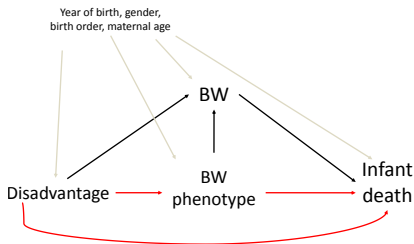
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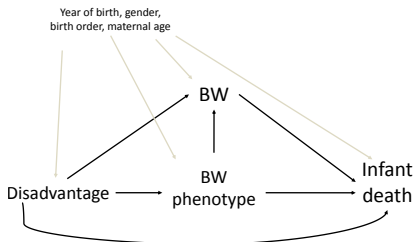
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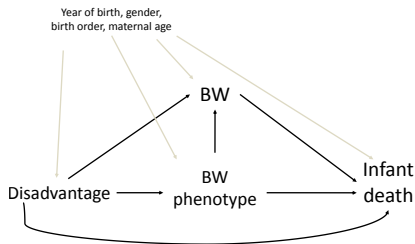
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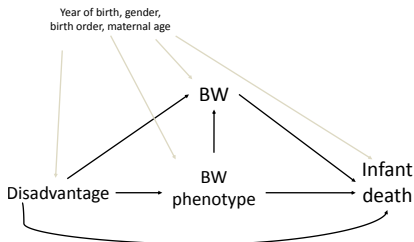


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We estimate them as Natural Direct (**NDE**) and Natural Indirect Effects (**NIE**)^a (on the OR scale), using Monte Carlo G-computation with bootstrapped SEs (to account for the imputation step; Daniel *et al.*, 2011).

^aMore precisely, randomized interventional analogies of NDE and NIE (VanderWeele *et al.* (2014)).

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The England and Wales ONS Longitudinal Study

- Record linkage study set up in 1974 (see <http://www.ucl.ac.uk/celsius/>).
- Comprises linked census and event (and thus infant mortality records for **1% of the population of England and Wales** (about 500,000 people at any one census)).
- Includes BW of **babies born to LS mothers** (recorded at registration).
- Several indicator of **social disadvantage**
- **Restrictions:**
 - singleton births to white mothers (~85%)
 - births from 1981 to ensure coverage

The study population

- **168,472** singleton live births in 1981-2012.
- *E*:
 - 38% of mothers with fewer than 5 O-levels
 - 41% of parents in manual occupation
- *M*: 5.4% with birth weight < 2.5kg.
- *Y*: 0.58% (973) infant deaths.

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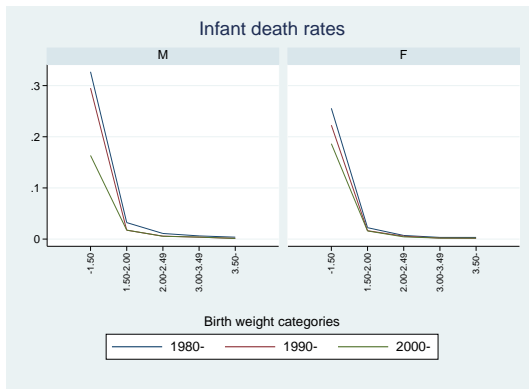
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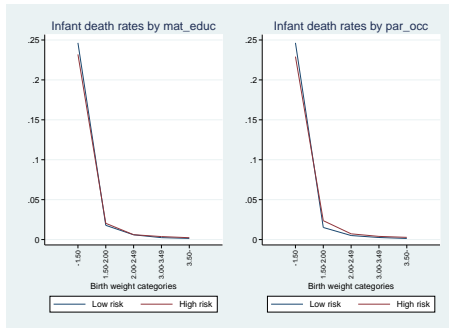


Mortality rates vary greatly by BW, moderately by sex, improving with calendar time:



Source: E&W ONS LS

Apparent reversal of effect at the lower end of BW:

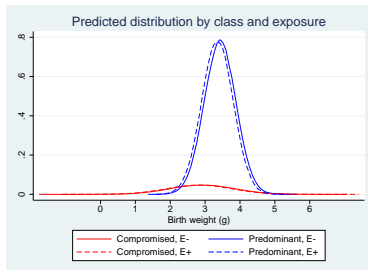


OR	0.90	1.08	0.97	1.48	1.51	0.65	1.12	1.34	1.08	1.38
p-value			0.03					0.01		

Source: E&W ONS LS



About 11% of births predicted to be “compromised”.

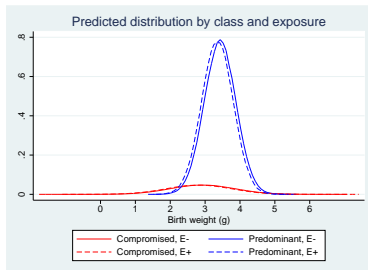


- Mean BW: 3.43 (SD=0.45) and 2.92 (SD=0.92)
- OR of being in compromised class is **1.36** (1.25, 1.47) when exposed to **low maternal education**.
- Shifted by **-0.10** (-0.15, -0.06) and **-0.08** (-0.08, -0.07) when exposed.

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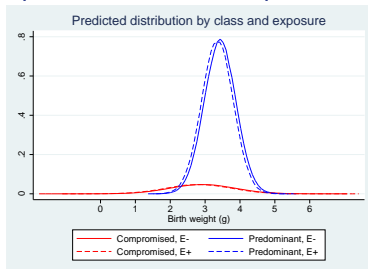


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Similar results when exposed to **parental manual occupation**.

Source: E&W ONS LS

	Mat education			Par occupation		
	ln OR	(95% CI)	%	ln OR	(95% CI)	%
Controlling for latent class:						
TCE	1.43	(1.30, 1.63)	100.0	1.55	(1.48, 1.77)	100.0
NDE	1.06	(0.93, 1.21)	15.5	1.13	(1.06, 1.30)	18.2
NIE	1.35	(1.08, 1.52)	84.5	1.38	(1.31, 1.46)	71.8
Not controlling for latent class:						
NDE	1.21	(1.05, 1.34)	55.4	1.35	(1.25, 1.49)	67.8
NIE	1.15	(1.14, 1.17)	43.6	1.15	(1.15, 1.16)	32.2

Source: E&W ONS LS

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- Attempted to identify some of the unmeasured confounders that may explain the birth weight paradox.
- Results depends on strong and partly unverifiable assumptions for:
 - the representation of the underlying biological process via a latent variable
 - for the partitioning of direct and indirect effects.
- However, if correct, they should not suffer from confounding bias to the same extent as more traditional analyses.
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The authors alone are responsible for the interpretation of the data.

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- Basso O, Wilcox AJ, Weimberg CR. Birth Weight and Mortality: Causality or Confounding? AJE 2006;164:303-311.
- Basso O, Wilcox AJ. Intersecting Birth Weight-specific Mortality Curves: Solving the Riddle. AJE 2009;169:787-797
- Daniel RM, De Stavola BL, Cousens SN. gformula: Estimating causal effects in the presence of time-varying confounding or mediation using the g-computation formula. Stata J. 2011;11(4):479-517.
- Hernandez-Diaz S, Schisterman EF, Hernan MA. The birth weight "paradox" uncovered? AJE 2006;164(11):1115-2.
- Kramer MS, Zhang X, Platt RW. Analysing risks in adverse pregnancy outcomes. AJE 2014;179(3):361-367.
- Melve KK, Skjaerven R. Birthweight and perinatal mortality: paradoxes, social class, and sibling dependencies. International Journal of Epidemiology 2003 Aug;32(4):625-32.
- Paneth, NS. The Problem of Low Birth Weight. The Future of Children 1995;5(1):19-34.
- Petersen ML, Sinisi SE, van der Laan MJ. Estimation of direct causal effects. Epidemiology. 2006;17(3):276-284.
- Robins JM, Greenland S. Identifiability and exchangeability for direct and indirect effects. Epidemiology. 1992;3(2):143-155.
- VanderWeele T, Vansteelandt S, Robins JM. Effect decomposition in the presence of an exposure-induced mediator-outcome confounder. Epidemiology 2014; 25(2):300-306.
- Yerushalmy, J. Mother's cigarette smoking and survival of infant. AJOG 1964;88:505-518.
- Wilcox AJ, Russell I. Birthweight and perinatal mortality standardizing for birthweight is biased. AJE 1983; 118 (6):857-864.
- Wilcox AJ. On the importance - and the unimportance - of birth weight. International Journal of Epidemiology. 2001 Dec;30(6):1233-41.
- Yerushalmy, J. The relationship of parents cigarette smoking to outcome of pregnancy. Implications as to problem of inferring causation from observed associations. AJE 1971;93(6):443-456.

ADDITIONAL SLIDES



ORs by socio-economic disadvantage and BW

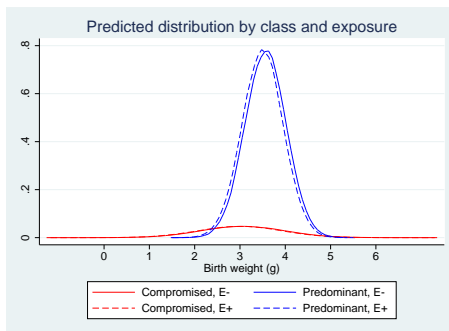
Effect modification by BW

BW (in kg)	M educ		P occup	
	OR	(95% CI)	OR	(95% CI)
Overall	1.32	(1.14, 1.51)	1.55	(1.36, 1.77)
p-value				
significance	<0.01		<0.001	
<1.5	0.90	(0.69, 1.18)	0.65	(0.43, 0.98)
1.5-2.00	1.08	(0.77, 1.52)	1.12	(0.71, 1.78)
2.0-2.49	0.97	(0.70, 1.33)	1.34	(0.98, 1.85)
3.0-3.49	1.48	(1.09, 1.99)	1.08	(0.71, 1.65)
≥3.5	1.51	(1.06, 2.15)	1.38	(0.86, 2.20)
p-value				
Interaction	0.03		0.01	

Average predicted latent class distributions

By parental occupation

About 11% of births predicted to be “compromised”.



- similar BW, SD and shift.
- **OR** of being in compromised class is 1.40 (1.28, 1.53) when exposed.