# Cutting Edge HSR Techniques

A View of Expertise from the Trauma Community

James P. Byrne, MD, PhD Johns Hopkins University

### **Objectives**

- Brief overview of selected HSR methods of increasing importance in the trauma literature
- 2. Showcase how you might use these techniques
- 3. Highlight expertise in the trauma research community

## The Power of Hierarchical Data

Clusters, Caterpillars, and So Much More

## Why Hierarchical Modelling?

#### **Assumptions of Most Regression Models:**

- 1. Model fits data
- 2. Model is not over-specified
- 3. No influential observations
- 4. Observations are *independent*

## Why Hierarchical Modelling?

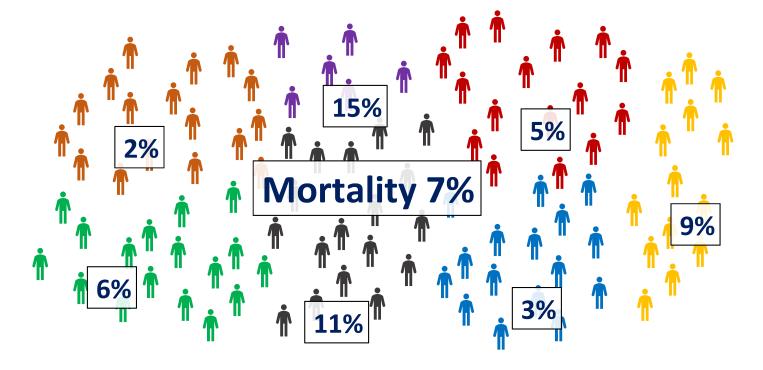
#### **Assumptions of Most Regression Models:**

- 1. Model fits data
- 2. Model is not over-specified
- 3. No influential observations
- 4. Observations are independent

#### **Clustered Data**



#### **Clustered Data**



#### **Clustered Data**





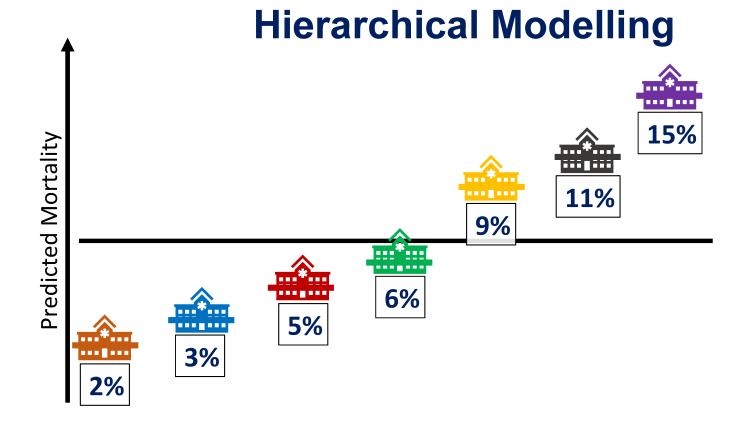


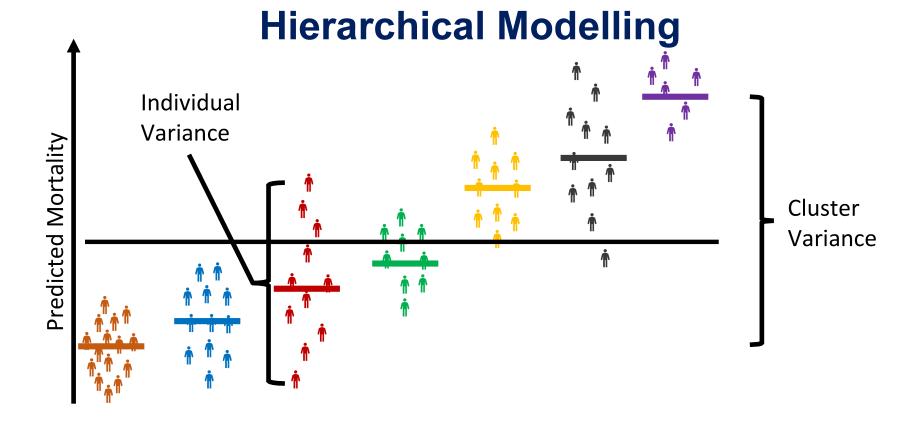












#### Now the Standard

#### Practical Guide to Comparative Effectiveness Research Using Observational Data

Ryan P. Merkow, MD, MS; Todd A. "A common approach is risk Schwartz, DrPH; Avery B. Nathens, adjustment using regression models ontrol for known factors when estimating the association of the exposure or variables of interest with the outcome. An important component to risk adjustment is that variation is often hierarchical. Patients are nested within hospitals, which are nested within regions and states. Accounting for this nested nature in multilevel models should be used when possible. Regression techniques controlling for known

Practical Guide to Surgical Data Sets: National Trauma Data Bank (NTDB)

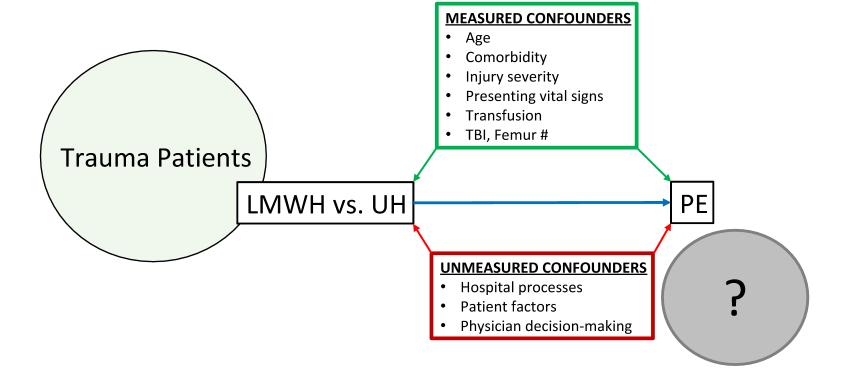
Zain G. Hashmi, MBBS: Amy H. Kaji, "Additionally, model performance MD, PhD: Avery B. Nathens, MD, statistics and whether MPH, PhD multicollinearity and effect modification were assessed should be specified. If data include a facility identifier, hierarchical analyses should be used to account for correlated patients outcomes, as patients are nested within facilities."

JAMA Surgery: Guide to Statistics ar

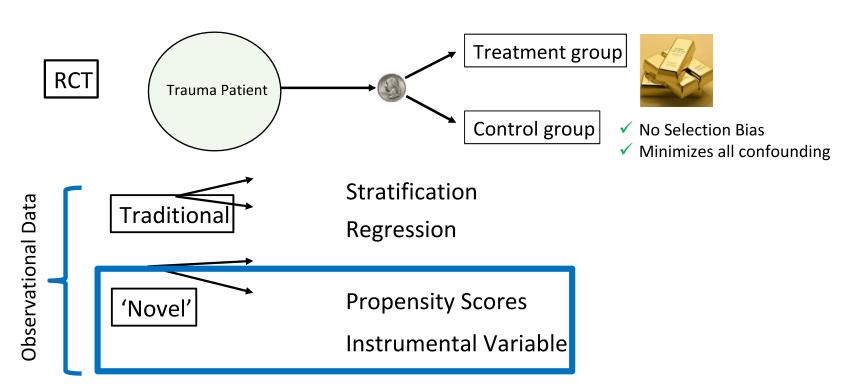
## **Advanced Confounder Control**

**Propensity Scores and Instrumental Variable** 

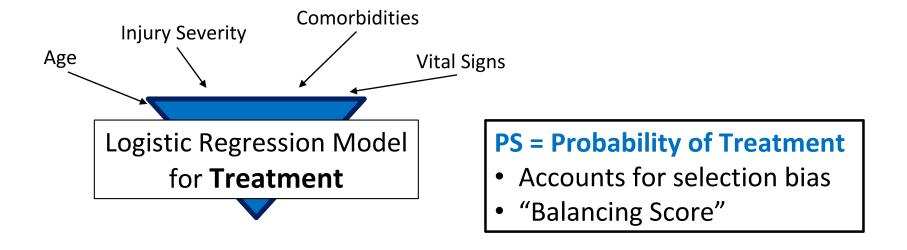
#### **Definition of Confounder**



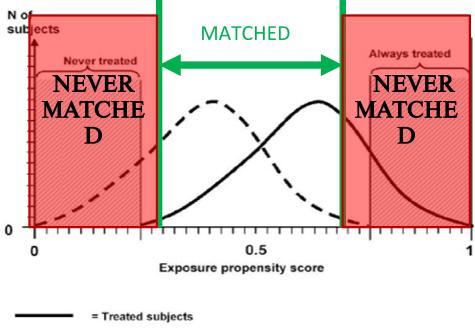
## **Study Design Options**



## **Propensity Scores**



## **Propensity Scores**



#### **PS Best Practices**

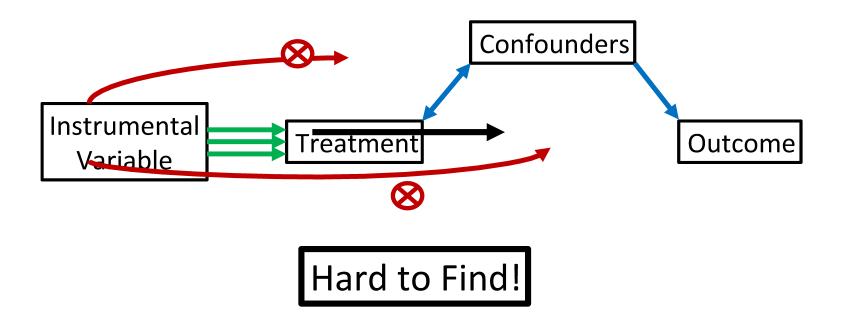
A systematic review of propensity score methods in the acute care surgery literature: avoiding the pitfalls and proposing a set of reporting guidelines

T.L. Zakrison, P.C. Austin, V.A. McCredie

Eur J Trauma Emerg Surg (2018); 44: 385-395.

PS Matching Studies - Overall Poorly Reported

## **Instrumental Variable Analysis**



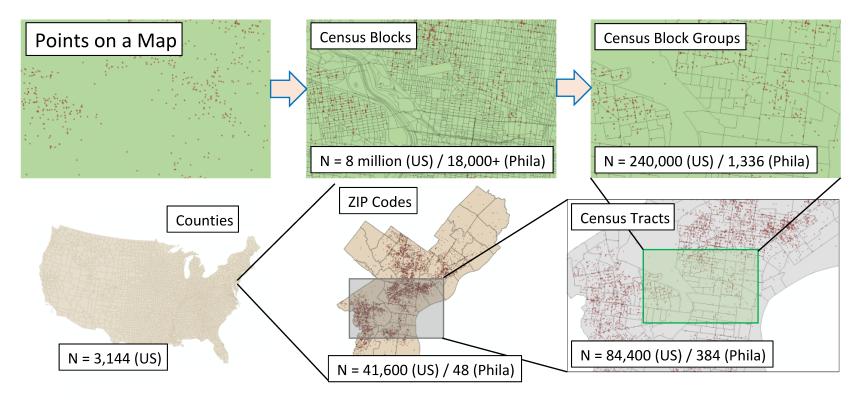
# **Geospatial Analysis**

A Picture = 1000 Words

## When to Use Geospatial Analysis

- 1. Have data with **location information** (coordinates, address, zip code, county)
- 2. Want to visually represent geographic data
- 3. Measure **relationship between two points** on a map

#### **Geographic Units of Measurement**



#### **Access to Care**

