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Beyond MICE in RWE

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Agenda

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- **RWE Concept & Challenges**
- **Imputation Workflow & Approaches**
- **Classification of missing data**
- **About MICE**
- **What is Beyond MICE?**



Real World Evidence

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Randomized trials are like test-driving a car on a closed track.

Real-World Evidence (RWE) is driving it through real traffic - potholes, detours, warning lights, and all.

By analyzing routine healthcare data, RWE shows how treatments actually perform in everyday clinical practice. The catch? Real-world data often comes with missing pieces - like a dashboard where half the indicators don't light up.

Imputing missing data is one of RWE's biggest challenges: necessary to keep the car moving, but tricky to do without accidentally changing the destination. Getting it right is key to turning real-world chaos into reliable, decision-ready evidence.



Workflow Diagram for RWE Imputation

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STEP	OBJECTIVE	TOOLS/METHODS
Explore Missingness	Identify extent and pattern	Heatmaps, summary statistics
Identify Mechanism	Classify MCAR/MAR/MNAR	Little's test, correlations
Select Method	Choose appropriate imputation	MICE, ML-based
Diagnostics	Validate imputation quality	Distribution checks
Sensitivity Analysis	Test robustness	Tipping-point analysis

Classify – MCAR, MAR or MNAR

MCAR

(Missing Completely At Random)

P(missing) is unrelated to any variable – observed or missing



Lab tech forgot to record 10 random samples

→ Little's MCAR test

MAR

(Missing At Random)

P(missing) depends on observed variables only



Older, heavier patients are less likely to have BMI recorded

→ Logistic Regression

MNAR

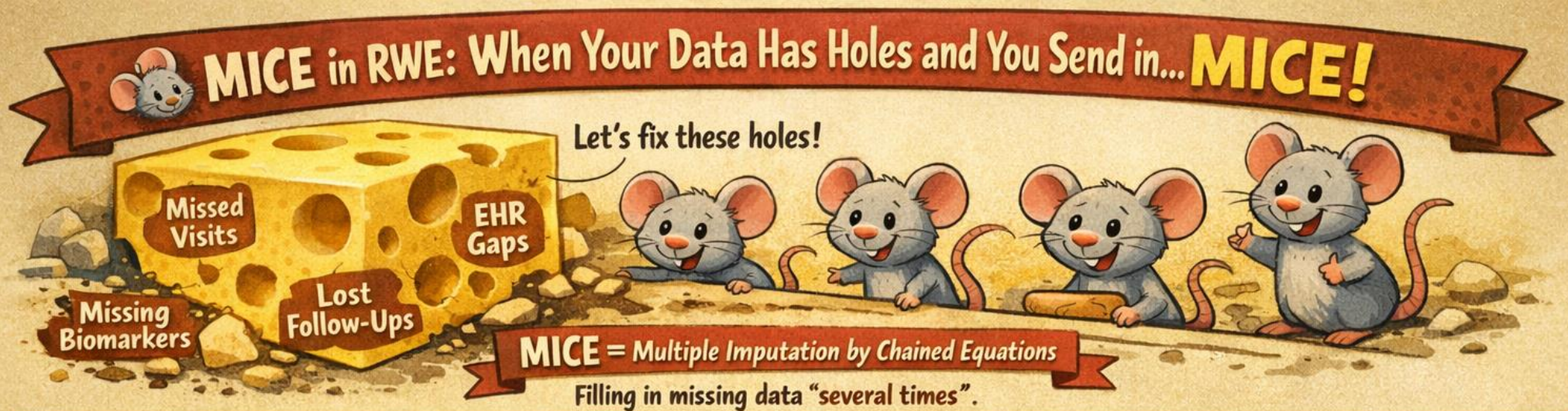
(Missing Not At Random)

P(missing) depends on the missing value itself

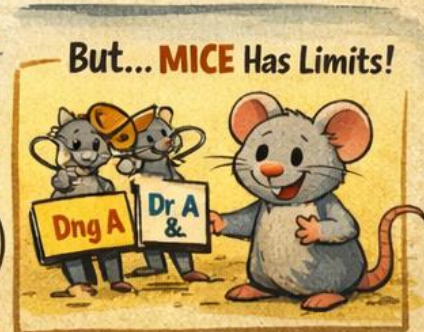


Patients with high HbA1c skip tests

→ Sensitivity Analysis



How MICE Works

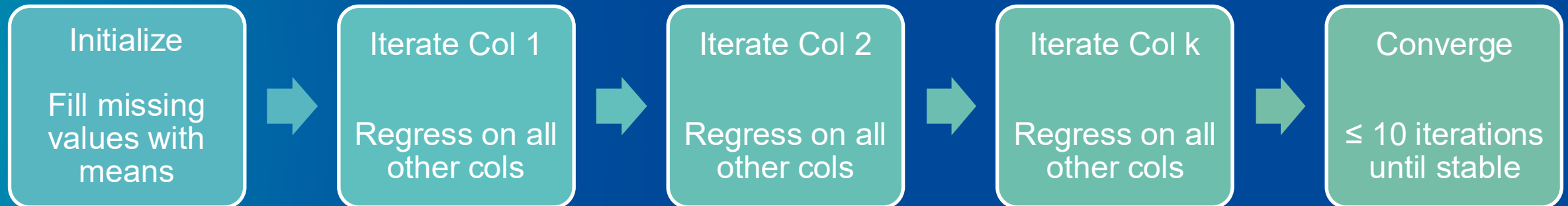




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What is Beyond MICE?

MICE: Bayesian – RF – PMM

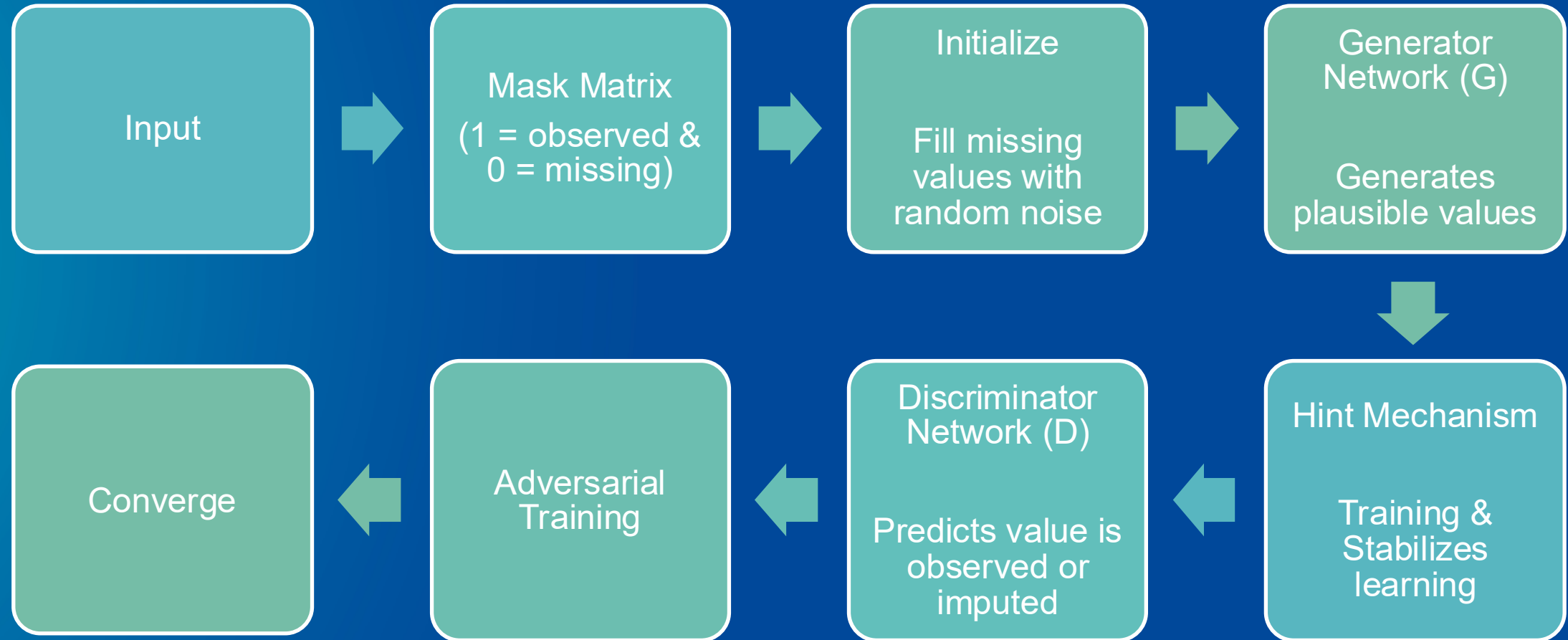


3 Estimators – Bayesian Ridge, Random Forest, Predictive Mean Matching



Generative Adversarial Imputation Networks

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Simulation



Simulation1

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Method	Variable	RMSE	MAE
MICE – Bayesian Ridge	HbA1c	0.2364	0.0637
MICE – Random Forest		0.2512	0.0686
MICE – PMM		0.3367	0.0937
GAIN		0.2707	0.0748

N = 1500 patients

Columns: Age, Sex, eGFR, LDL, Insulin, SBP, HbA1c

$$Y = 2A + 0.5W_1 + 0.7W_2 + \epsilon$$



Average Treatment Effect
(True ATE)

N = 1500 patients

W_1 = age ($\approx 50 \pm 10$), W_2 = severity, A = treatment (Drug A)

Y = outcome (disease improvement score)

ϵ = random noise



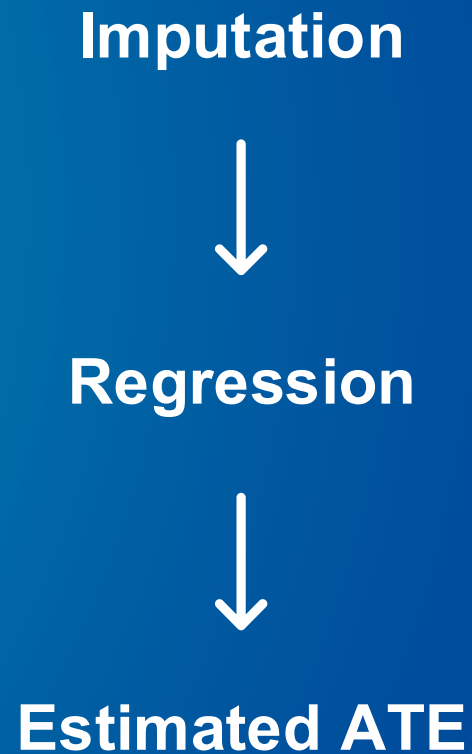
“If we switch our patient population from Drug B to Drug A, how much would the disease improvement score (Y) change on average?”



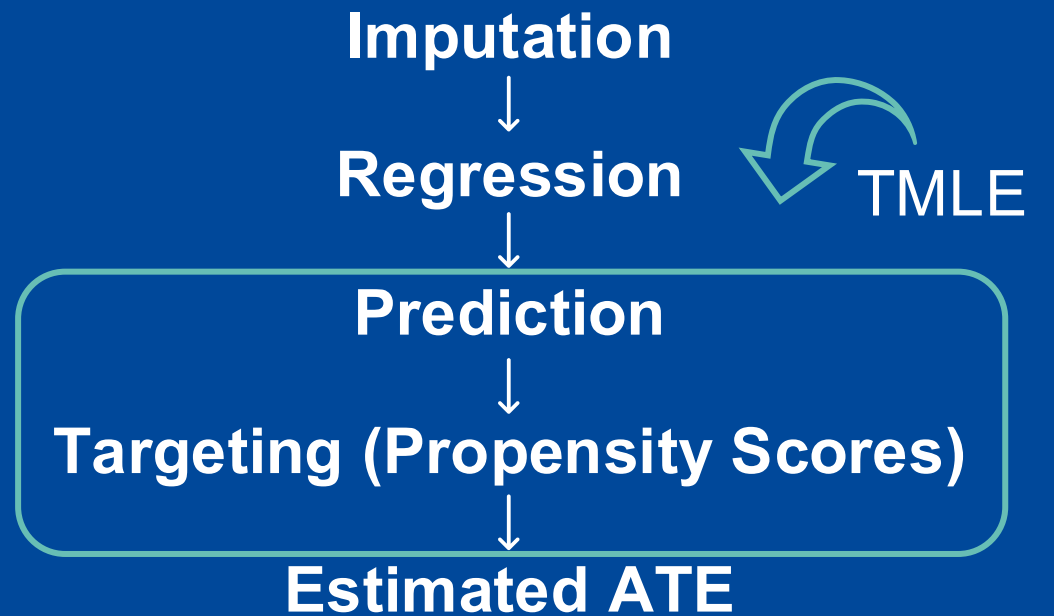
Simulation2

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MICE Approach



GAIN + TMLE Approach





Simulation2

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Method	ATE	Difference (Estimated – True ATE)	RMSE
True ATE = 2			
Complete Case	1.56	-0.44	0.38
MICE	1.72	-0.28	0.15
GAIN + TMLE	2.18	0.18	0.07



Conclusion

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MICE assumes the world is nice.
GAIN + TMLE prepares for when it isn't.

Not to replace MICE - but to explore what lies beyond
when missingness tells a story.



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Thank You!

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