ParkProg project

The 4S method for the longitudinal analysis of multidimensional questionnaires: application to Parkinson's disease progression from patient perception

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Parkinson's Disease (PD)

Neurodegenerative disorder

- +10.000.000 people with PD worldwide (13.000 in NZ, 219.000 in AUS, 270.000 in FR, ...)
- >1% after 65 years old

Symptomatology

Context

Progressive loss of neurons in the brain, inducing

- motor symptoms rest tremor, slowness, rigidity, ... · non-motor symptoms
- speech difficulties, sleep disturbances, cognitive issues, anxiety/depression, ...

Potential factors ageing, pesticide exposure, genetic mutation, ...

Treatment no cure

Real need of research

Forecast: PD prevalence to double by 2050

- → Better understand the origin, progression, and factors
- → Assess risks, provide better support to patients, and explore therapeutic avenues



Health-related Quality of Life (Hr-QoL)



What?

Context

Health-related Quality of Life = [Testa et al., 1996] patient's perception of their own health condition, combining

- physical health (pain, fatigue, mobility, ...)
- psychological well-being (self-esteem, +/- affects, ...)
- social relationships (support, role, work, ...)



patient's perception

Why?

Subjective health, growing interest in studies with

- another perspective on disease progression
- deliver better support based on patient's feelings
- FDA requirement for the development of new treatments

= objective health = subjective health

clinician's perception

How?

Hr-QoL measure instruments

patient-reported questionnaires (PRO data)



Hr-QoL in PD

Context

_		Due to having PD, how often during the last month have you
		Had difficulty doing the leisure activities which you would like to do?
		Had difficulty looking after your home, e.g. DIY, housework, cooking?
		3. Had difficulty carrying bags of shopping?
	È	4. Had problems walking half a mile?
	МОВІЦТУ	Had problems walking 100 yards? Had problems getting around the house as easily as you would like?
	M	Had difficulty getting around in public?
		Needed someone else to accompany you when you went out?
		Felt frightened or worried about falling over in public?
		10. Been confined to the house more than you would like?
		11. Had difficulty washing yourself?
		12. Had difficulty dressing yourself?
	ADL	13. Had problems doing up your shoe laces?
	¥	14. Had problems writing clearly?
		15. Had difficulty cutting up your food?
		16. Had difficulty holding a drink without spilling it?
		17. Felt depressed?
9	EMOTIONAL WELL-BEING	18. Felt isolated and lonely?
5	0 B	19. Felt weepy or tearful?
20	[J	20. Felt angry or bitter?
ź	ĕ ≽	21. Felt anxious?
JRIGHTAL PUQ-39 SCALE		22. Felt worried about your future?
ž	<	23. Felt you had to conceal your Parkinson's from people?
2	STIGMA	24. Avoided situations which involve eating or drinking in public?
5		25. Felt embarrassed in public due to having Parkinson's disease?
		26. Felt worried by other people's reaction to you?
	SOCIAL	27. Had problems with your close personal relationships?
	SOCIAL	28. Lacked support in the ways you need from your spouse or partner?
	S OS	29. Lacked support in the ways you need from your family or close friends?
	COGNITION	30. Unexpectedly fallen asleep during the day?
		31. Had problems with your concentration, e.g. when reading or watching TV?
		32. Felt your memory was bad?
		33. Had distressing dreams or hallucinations?
	COMMU	34. Had difficulty with your speech?
		35. Felt unable to communicate with people properly?
		36. Felt ignored by people?
	BODILY COMMU DISCOMFORT NICATION	37. Had painful muscle cramps or spasms?
		38. Had aches and pains in your joints or body?
		39. Felt unpleasantly hot or cold?

the PDQ-39 questionnaire

developed by Peto *et al.*, 1995 specific to PD self-reported

39 questions/items 8 dimensions

5 ordinal levels of response

0 : never

1: occasionally

2: sometimes

3: often

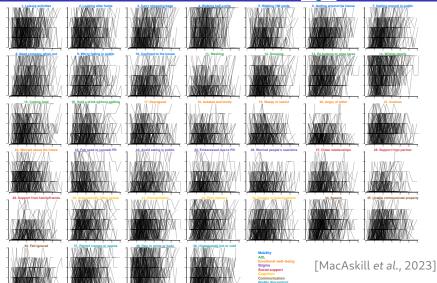
4: always



PDQ-39 item observations on NZP³



(N=410, n=1436)



Context

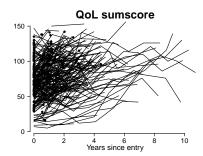
Summarize multivariate ordinal data

Sumscore

 \rightarrow loss of information

Context

- no distinction between items
- no missing item allowed



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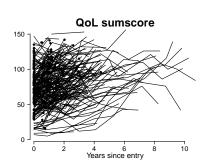
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Context

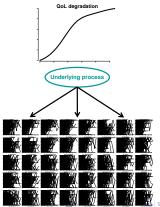
- no distinction between items
- no missing item allowed



Latent variable

real quantity of interest

- not directly measurable/observable
- latent trajectory underlying items





Tiphaine Saulnier

Other challenges

Context



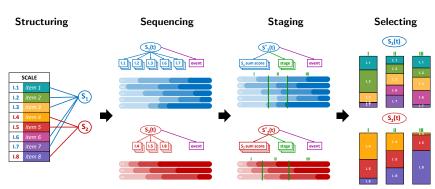
- ordinal items → nature-adapted model
- multiple items → multivariate model
- repeated measures → mixed model
- ullet delayed entry o left truncation model
- informative dropout / MNAR data (eg. due to death) \rightarrow *joint model*
- questionnaire multidimensionality → strategy of analysis



The 4S method

Context



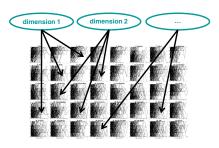


Step 1 - Structuring: Identify questionnaire dimensions

Hypotheses of scale calibration

PROMIS method from [B.B. Reeve et al., 2007] for cross-sectional data

- + replication approach to adapt to longitudinal data
 - Unidimensionality items from a same dimension measure the same trait
 - $\rightarrow \textit{factor analyses}$
 - Conditional independance no redundant items within the same dimension → residual correlations
 - Increasing monotonicity
 the higher the item level,
 the higher the dimension level
 → item response probabilities

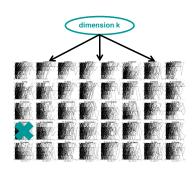


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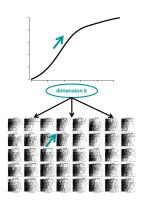


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 - \rightarrow item response probabilities



Step 1 - Structuring: PDQ-39 dimensions

			Leisure activities	
		2	Looking after home	
		3	Carry shopping bags	
	Mobility	4	Walking half a mile	
		5	Walking 100 yards	
		6	Getting around the house	
		7	Getting around in public	
		8	Need company when going out	
		9	Worry falling in public	
		10	Confined to the house	
		11	Washing	
		12	Dressing	
	Activities in Daily Living	13	Do buttons or shoe laces	
	Activities iii Daily Living	14	Writing clearly	
		15	Cutting food	
		16	Hold a drink without spilling	
		17	Depressed	
		18	Isolated and lonely	
Original	Emotional well-being	19	Weepy or tearful	
PDQ-39	Elliptional Mell-pellig	20	Angry or bitter	
questionnaire		21	Anxious	
		22	Worried about the future	
	Stigma	23	Felt need to conceal PD	
		24	Avoid eating/drinking in public	
		25	Embarassed due to PD	
		26	Worried people's reactions	
	Social support	27	Close relationships	
		28	Support from partner	
		29	Support from family or friends	
	Cognition	30	Unexpectedly fallen asleep	
		31	Concentration	
		32	Poor memory	
		33	Dreams or hallucinations	
	Communication	34	Speech	
		35	Unable communicate properly	
		36	Felt ignored	
	Bodily discomfort	37	Painful cramps or spams	
		38	Pain in joints or body	
		39	Unpleasantly hot or cold	

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Step 1 - Structuring: PDQ-39 dimensions

11 Washing 12 Dressing 13 Do buttons or shoe laces ADL 14 Wirting clearly 14 Wirting clearly 15 Utting fload 15 Utting fload 16 Hold a drink without spilling 17 Depressed 18 tolated and lonely 19 Weepv or tearful 20 Angry or bitter 21 Anvisor 22 Worried about the future 23 Felt need to conceal PD 24 Avoid eating/drinking in public 25 Embarssed due to PD 25 Stigma 25 World and public 25 Embarssed due to PD 26 Wirting 27 Wirting 28 World and public 28 Wirting 29 Wirting		Mobility	1 Leisure activities 2 Looking after home 3 Coarry shopping bags 4 Walking half a mile 5 Walking 100 yards 6 Getting around the house 6 Getting around in public 8 Need company when going out 9 Worry falling in public 10 Confined to the house	Mobility		
Original POC-39 questionnaire Emotional well-being 19 Weepy or tearful 19 Weepy or tearful 19 Psycho-social 20 Angry or bitter 21 Anxious 22 Worried about the future 23 Felt need to conceal PD 24 Avoid eating/drinking in public 25 Avoid 25 Avoi		Activities in Daily Living	12 Dressing 13 Do buttons or shoe laces 14 Writing clearly 15 Cutting food	ADL		
Stigma 24 Avoid eating/drinking in public Stigma	PDQ-39	Emotional well-being	18 Isolated and Ionely 19 Weepy or tearful 20 Angry or bitter 21 Anxious	Psycho-social		
26 Worried people's reactions		Stigma	24 Avoid eating/drinking in public 25 Embarassed due to PD	Stigma		
27 Close relationships Social support 28 Support from partner 29 Support from family or friends		Social support	28 Support from partner 29 Support from family or friends	Psycho-social		
30 Unexpectedly fallen asleep 31 Concentration 32 Poor memory 33 Dreams or hallucinations		Cognition	31 Concentration 32 Poor memory	Cognition/ Communication/ Bodily discomfort		
S4 Speech Communication/		Communication	35 Unable communicate properly			
37 Painful cramps or spams Bodily discomfort 38 Pain in joints or body 39 Unpleasantly hot or cold		Bodily discomfort	38 Pain in joints or body			

Results

Unidimensionnality

- highlight **5 dimensions** (instead of 8)
- similarities with the original scale

Conditional independance

satisfying √

Unidimensionnality

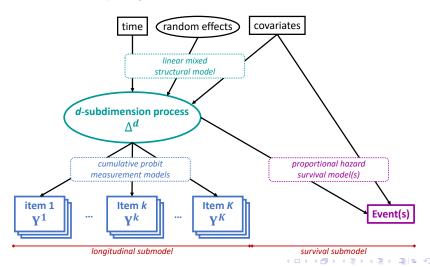
satisfying √



Step 2 - Sequencing: Model each dimension progression

Step 2 - Sequencing

R-package JLPM (for Joint Latent Process Model)

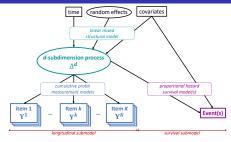


Step 2 - Sequencing: Structure of the JLPM model

Dimension process

linear mixed model, dimension d

$$\Delta_i^d(t) = X_i^{\top}(t)\beta^d + Z_i^{\top}(t)b_i^d$$
with $b_i^d \sim \mathcal{N}(0, B^d)$



Items

cumulative probit models, item $k \in \mathcal{K}^d$

$$Y_i^k(t_{ij}) = m \Leftrightarrow \delta_{k,m} < \Delta_i^d(t_{ij}) + \epsilon_{ij}^k \le \delta_{k,m+1}$$

$$\text{with } \epsilon_i^k \sim \mathcal{N}(0, \sigma_k^2); m \in \{1, ..., M_k\};$$

$$-\infty = \eta_{k,1} \le ... \le \eta_{k,m} \le \eta_{k,m+1} \le ... \le \eta_{k,M_k+1} = +\infty$$

Survival part

proportional hazard model(s), cause p

$$\lambda_i^{dp}(t) = \lambda_0^{dp}(t; \xi^{dp}) \exp(W_i^{dp\top} \gamma^{dp} + g^{dp}(b_i^d, t)^{\top} \alpha^{dp})$$



Step 2 - Sequencing: Estimation of the JLPM model

Vector of parameters
$$\Theta^d = (\underbrace{\beta^d, B^d}_{\text{structural models}}, \underbrace{(\delta_{k,m})_{k,m}, (\sigma_k)_k}_{\text{measurement}}, \underbrace{(\xi^{dp})_p, (\gamma^{dp})_p, (\alpha^{dp})_p}_{\text{survival model(s)}})^{\top}$$

Maximum log-likelihood estimation

$$\hat{\Theta} = \underset{\Theta}{\operatorname{argmax}} \log \mathsf{L}(\Theta)$$

with the model likelihood

$$\mathsf{L}(\Theta) = \prod_{i=1}^{N} \mathsf{L}_i(\Theta)$$

and the individual contribution

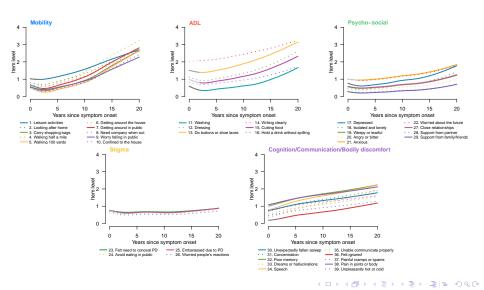
$$L_{i}(\Theta) = f_{Y_{i}, T_{i}}(Y_{i}, T_{i}; \Theta)$$

$$= \int_{\mathbb{R}^{q}} f_{Y_{i}|b_{i}}(Y_{i}|b; \Theta) f_{T_{i}|b_{i}}(T_{i}|b; \Theta) f_{b_{i}}(b; \Theta) db$$

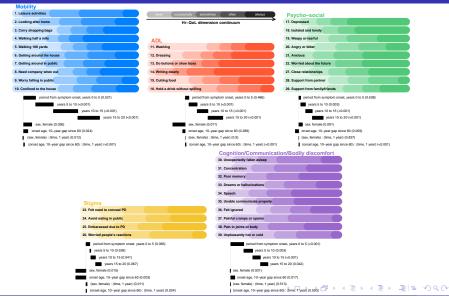
using Marquart-Levenberg algorithm for optimization, and Quasi-Monte-Carlo and Gauss-Kronrod algorithms for integral approximation



Step 2 - Sequencing: Progression of PDQ-39 dimensions over time



Step 2 - Sequencing: PDQ-39 sequences of impairment



Step 2 - Sequencing: PDQ-39 sequences of impairment



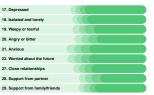
Step 3 - Staging

Step 3 - Staging: PDQ-39 progression

Mobility 1. Leisure activities 2. Looking after home 3. Carry shopping bags ADL 4. Walking half a mile 5. Walking 100 yards 11. Washing 6. Getting around the house 12. Dressing 7. Getting around in public 13. Do buttons or shoe laces 8. Need company when out 14. Writing clearly 9. Worry falling in public 15. Cutting food 10. Confined to the house 16. Hold a drink without spilling Cognition/Communication/Bodily discomfort 30. Unexpectedly fallen asleep 31. Concentration 32. Poor memory 33. Dreams or hallucinations 34. Speech Stiama 35. Unable communicate properly 23. Felt need to conceal PD 36. Felt ignored 24. Avoid eating in public 37. Painful cramps or spams 25. Embarassed due to PD 38. Pain in joints or body

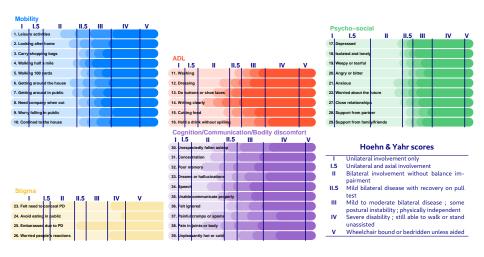
39. Unpleasantly hot or cold

Psycho-social



26. Worried people's reactions

Step 3 - Staging: PDQ-39 progression according to PD stages



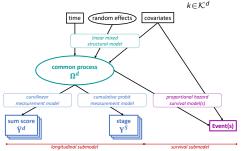
Step 3 - Staging: Link dimension progressions to disease stages

Projection approch

determine thresholds δ_s^d in Δ^d latent scale corresponding to stage s transition

1. Bivariate II PM

btw dimension score $\bar{Y}^d = \sum_{i} Y^k$ and disease stage Y^S

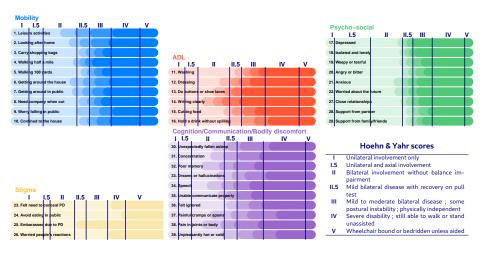


$$\begin{cases} \Omega_{i}^{d}(t) = X_{i}(t)^{\top}\mu^{d} + Z_{i}(t)^{\top}v_{i}^{d} \\ \text{linear mixed model} \\ \bar{Y}_{i}^{d}(t_{ij}) = H_{d}^{-1}\left(\Omega_{i}^{d}(t_{ij}) + \varepsilon_{ij}^{\bar{Y}d}\right) \\ \text{curvilinear model} \\ Y_{i}^{S}(t_{ij}) = s \Leftrightarrow \omega_{s}^{d} < \Omega_{i}^{d}(t_{ij}) + \varepsilon_{ij}^{YS}{}^{d} \leq \omega_{s+1}^{d} \\ \text{cumulative probit model} \\ \zeta_{i}^{dp}(t) = \zeta_{0}^{dp}(t; \psi^{d}) \exp\left(W_{i}^{dp\top}\kappa^{dp} + g^{dp}(v_{i}^{d}, t)^{\top}\tau^{dp}\right) \\ \text{risk model for cause p} \end{cases}$$

2. Matching the sum of the items $\sum Y^k$ and the score \bar{Y}^d

$$\mathbb{E}\left[\sum_{k \in \mathcal{K}^d} Y^k \mid \Delta^d = \hat{\delta}^d_s\right] = \mathbb{E}\left[\bar{Y}^d \mid \Omega^d = \hat{\omega}^d_s\right]$$

Step 3 - Staging: PDQ-39 progression according to PD stages



Step 4 - Selecting: Quantify each item information during stages

Fisher information function of item k for dimension level Δ

$$I_{k}(\Delta) = -\mathbb{E}\left[\frac{\partial^{2}}{\partial \Delta^{2}} \log P_{k}(\Delta)\right]$$

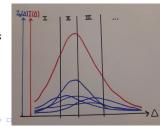
$$= -\sum_{m=0}^{M_{k}} \mathbb{P}(Y_{k} = m \mid \Delta) \frac{\partial^{2}}{\partial \Delta^{2}} \log \mathbb{P}(Y_{k} = m \mid \Delta)$$

Information carried by item k during stage s

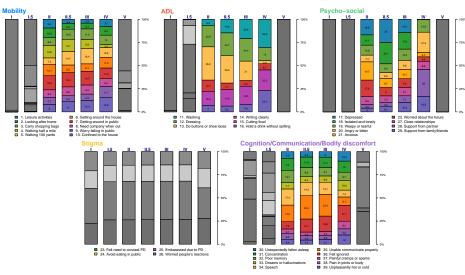
$$I_{k,s} = \int_{\hat{\delta}_s^d}^{\hat{\delta}_{s+1}^d} I_k(\Delta) d\Delta$$

Pourcentage of information carried by item *k* during stage *s*

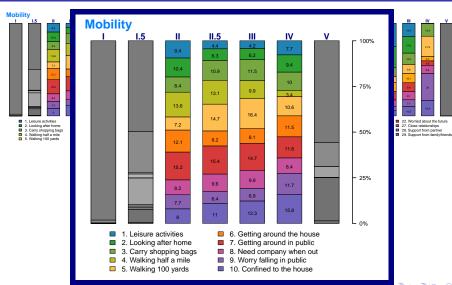
$$I_{k,s}^{\%} = \frac{I_{k,s}}{\sum_{I \in \mathcal{K}^d} I_{I,s}}$$



Step 4 - Selecting: PDQ-39 most informative items during PD course

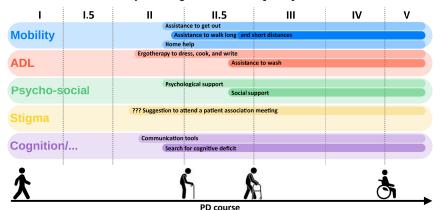


Step 4 - Selecting: PDQ-39 most informative items during PD course



4S method - final output : Monitoring mind map draft

MindMap: Management of the Quality of Life in PD



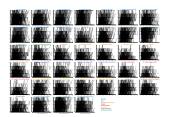
Conclusion

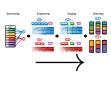
4S method = complete strategy to analyze questionnaire data

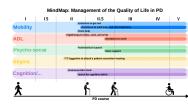
- based on a joint model adapted to ordinal items
- accounting for potential informative dropout
- treating multidimensionality



Study of Parkinson's progression from patient perspective Useful to **other pathologies and questionnaires' studies**







Scientific contributions





T. Saulnier et al., Joint models for the longitudinal analysis of measurement scales in the presence of informative dropout, Methods (2022)



package JLPM, available on CRAN



in collaboration with Viviane Philipps





T. Saulnier et al., Structuring, Sequencing, Staging, Selecting: the 4S method for the longitudinal analysis of multidimensional questionnaires in chronic diseases, Biometrics Practice (2025) (preprint arXiv:2407.08278)



T. Saulnier et al., Patient-perceived progression in multiple system atrophy: natural history of quality of life, Journal of Neurology, Neurosurgery & Psychiatry (2024)



replication script, available on GitHub

https://github.com/VivianePhilipps/JLPM/blob/main/vignettes/script_4Smethod_Rmd \(< \circ

Thank you for your attention!

Other references

- Su et al. (2025) Projections for prevalence of Parkinson's disease and its driving factors in 195 countries and territories to 2050: modelling study of Global Burden of Disease Study 2021. BMJ, 388.
- Testa et al. (1996) Assessment of quality-of-life outcomes. New England journal of medicine, 334(13), 835-840.
- Peto et al. (1998) PDQ-39: a review of the development, validation and application of a Parkinson's disease quality of life questionnaire and its associated measures. Journal of neurology, 245(Suppl 1), S10-S14.
- MacAskill et al. (2023) The New Zealand Parkinson's progression programme. Journal of the Royal Society of New Zealand, 53(4), 466-488.
- Reeve et al. (2007) Psychometric evaluation and calibration of health-related quality of life item banks: plans for the Patient-Reported Outcomes Measurement Information System (PROMIS). Medical care, 45(5), S22-S31.
- Philipps et al. (2020) Robust and efficient optimization using a Marquardt-Levenberg algorithm with R package marqLevAlg. R Journal.

Acknowledgments



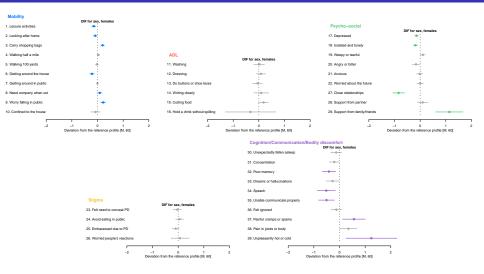
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Step 2 - Sequencing: PDQ-39 detected DIF for sex



Step 2 - Sequencing: PDQ-39 detected DIF for onset age

