

Harnessing Big Data in Nephrology: What Makes Your Data-Driven Research Publishable?

Presented by
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THE UNIVERSITY OF
SYDNEY



Disclosures

- Associate Editor of Kidney International
- Past Associate Editor of Transplantation

Promise of Big Data



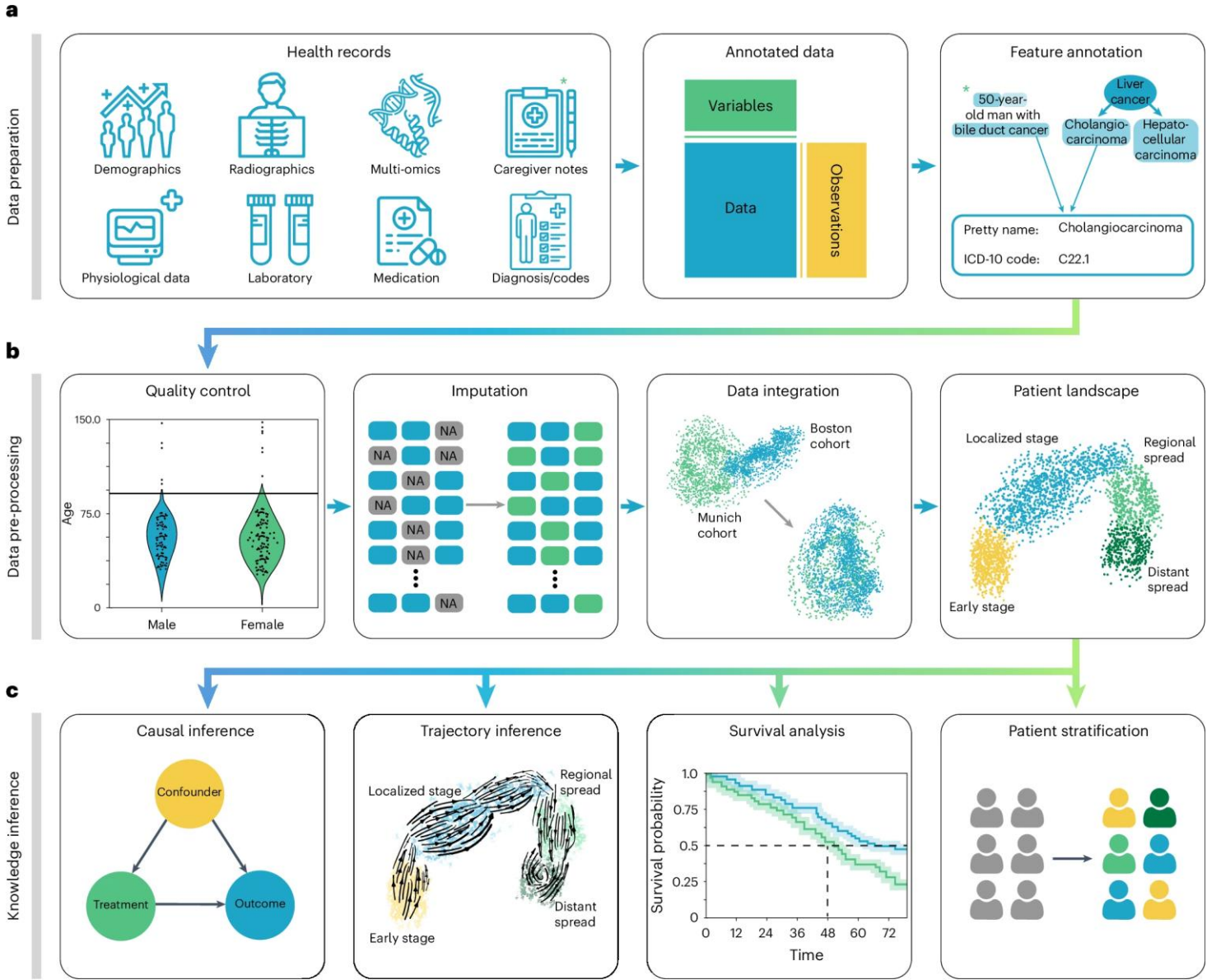
Data sources: Omics

Omics	Sample	Outcomes
Genomics	Blood and biopsies	Acute and chronic rejection, long-term allograft function
Transcriptomics	Biopsies, whole blood and urine	IFTA, acute and chronic rejection, tolerance, graft function
Proteomics	Urine	Acute and chronic rejection, IFTA
Metabolomics	Urine, serum, biopsies	Allograft function, rejection
Multi-omics	Blood, biopsies, plasma	Acute and chronic rejection

Registry data

- International Registry in Organ Donation and Transplantation (IRODaT)
www.irodat.org/
- WHO Global Observatory on Donation and Transplantation (GODT)
www.transplant-observatory.org
- Council of Europe: Newsletter Transplant: International figures on Donation and Transplantation 2014
https://www.edqm.eu/sites/default/files/newsletter_transplant_2015_2.pdf
- Bone Marrow Donors Worldwide
www.bmdw.org
- Familial Amyloidotic Polyneuropathy World Transplant Register
www.fapwtr.org
- International Intestinal Transplant Registry
www.intestinaltransplant.org/itr
- International Islet Transplant Registry
www.med.uni-giessen.de/itr
- International Pancreas & Islet Transplant Association (IPITA)
www.tts.org/ipita/valuable-resources-and-links/registries
- International Registry for Heart and Lung Transplantation (ISHLT)
www.isHLT.org/registries/heartLungRegistry.asp
- Australia and New Zealand: Organ Donation and Transplantation Registry
www.anzdata.org.au
- Collaborative Transplant Study (CTS) (Heidelberg University)
<http://www.ctstransplant.org>
- European Liver Transplant Registry
www.eltr.org
- European Renal Association - European Dialysis and Transplant Association Registry - ERA-EDTA
www.era-edta.org/
- Eurotransplant statistics (Austria, Belgium, Germany, Luxemburg, the Netherlands, Slovenia and Croatia)
<http://www.eurotransplant.org/cms/index.php?page=yearlystats>
- Indian Transplant Registry
www.transplantindia.com
- La Sociedad de Trasplante de América Latina y el Caribe (STALYC) registry
<http://www.stalyc.net/en/registry.html>
- Scandiatransplant (Island, Norway, Finland, Denmark and Sweden)
www.scandiatransplant.org/data/scandiatransplant-figures

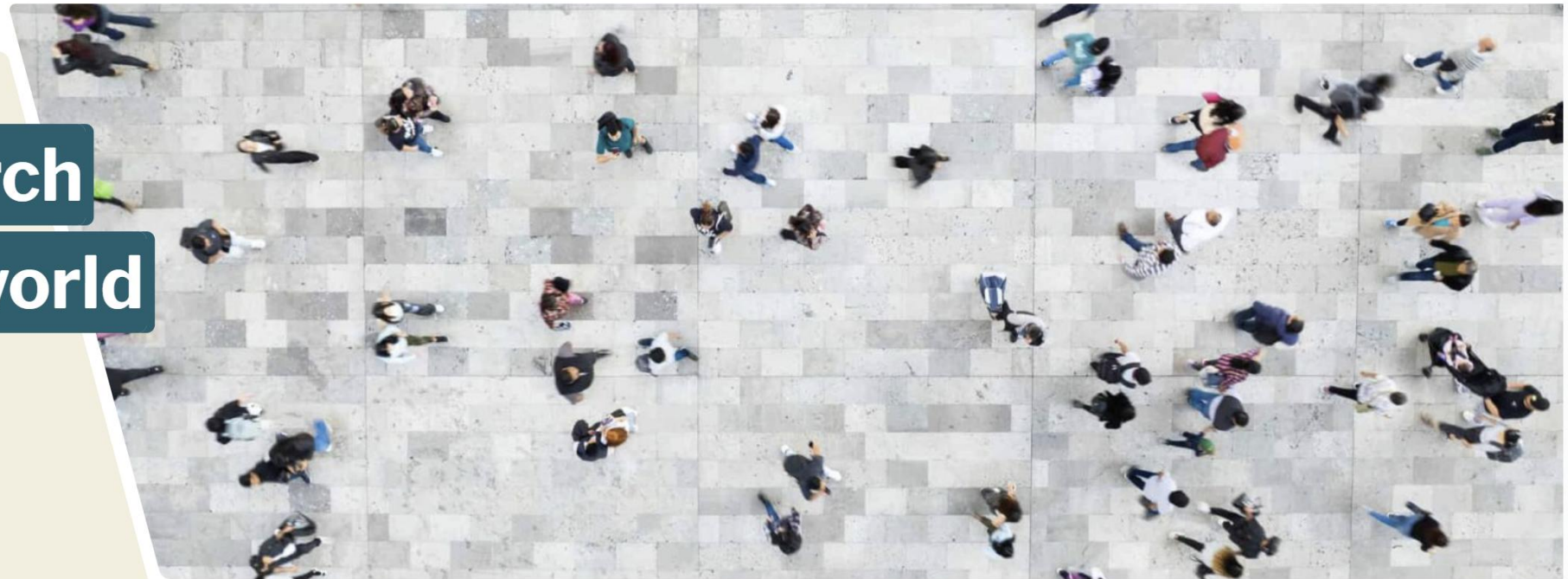
Electronic Health Record



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**Health research
data for the world**



Research question

- Well-formulated
- Address an important clinical question
- Addresses a knowledge gap
- Research impact

Not data mine



Hypotheses?

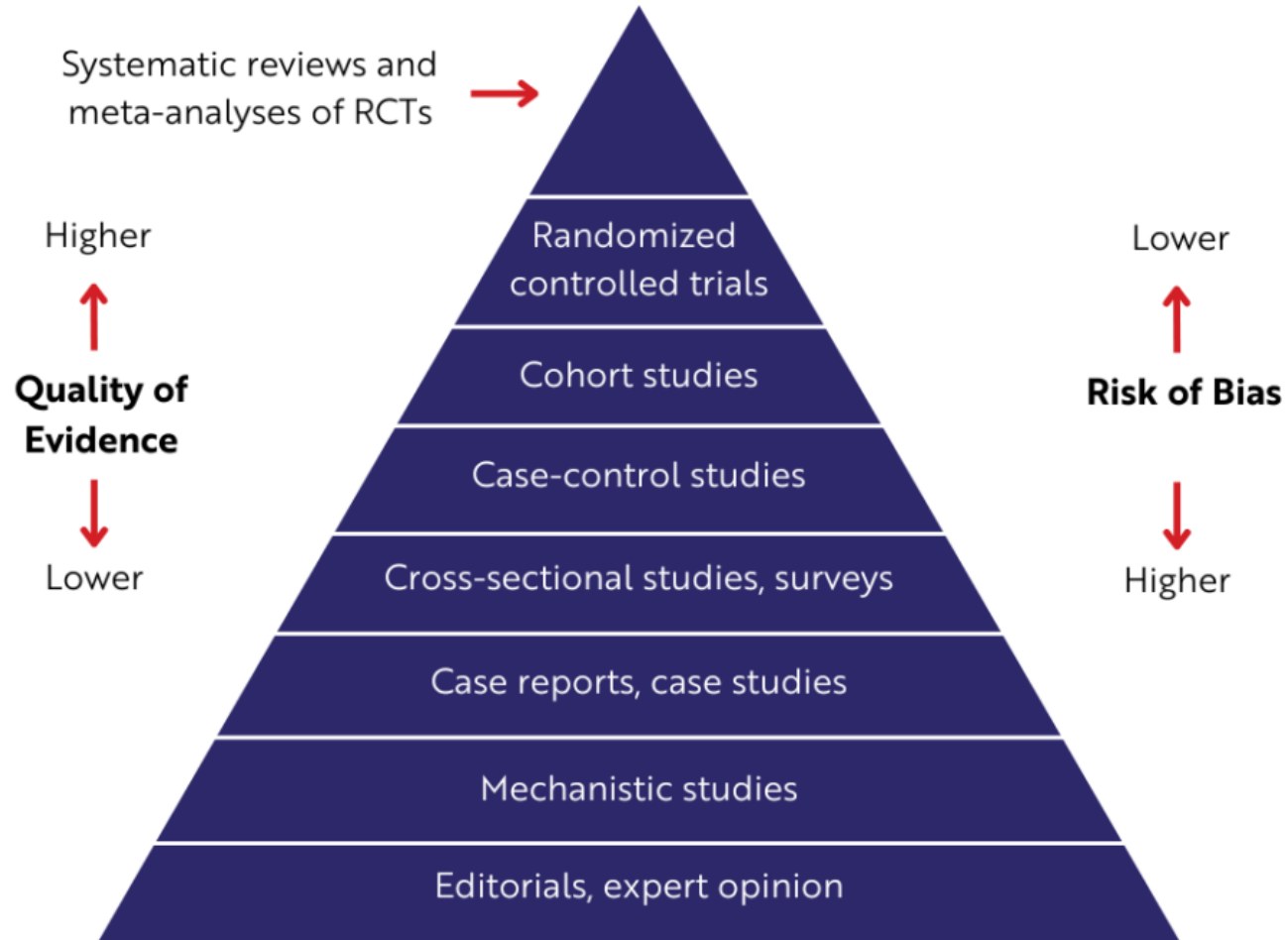
Beware of testing too many of them!

Testing too many may exaggerate the significance of the findings (Type 1 error)

Or can also lead to falsely accepting a null hypothesis (Type 2 error)

Study designs

Hierarchy of Evidence



Publishability

An appropriate study design to address the research question of interest

Methodology - Quantitative research – Editors' pet hate!

DO NOT claim

DO NOT claim causality when you have found an association

DO NOT conduct

DO NOT conduct multiple tests without correction

DO NOT forget about

DO NOT forget about missing values

Methodology - Quantitative research – Editors' pet hate!

DO NOT

DO NOT
over-adjust
for
mediators

DO NOT
misinterpret

DO NOT
misinterpret
the P values
and the
Confidence
Intervals

DO NOT ignore

DO NOT
ignore study
power and
precision

ENSURE

ENSURE
appropriate
measures of
exposure
and
outcomes

DO NOT ignore

DO NOT
ignore time-
varying
covariates

Methodology - Quantitative research – Editors' pet hate!

DO NOT violate

DO NOT violate
model
assumptions

DO NOT

DO NOT data dredge
and p-
hacking

DO NOT

DO NOT over-
generalize
findings

DO NOT ignore

DO NOT ignore
competing
risk

DO NOT treat

DO NOT treat
observational
like
randomized
controlled
trial

Methodology - Quantitative research – Editors' pet hate!

DO NOT

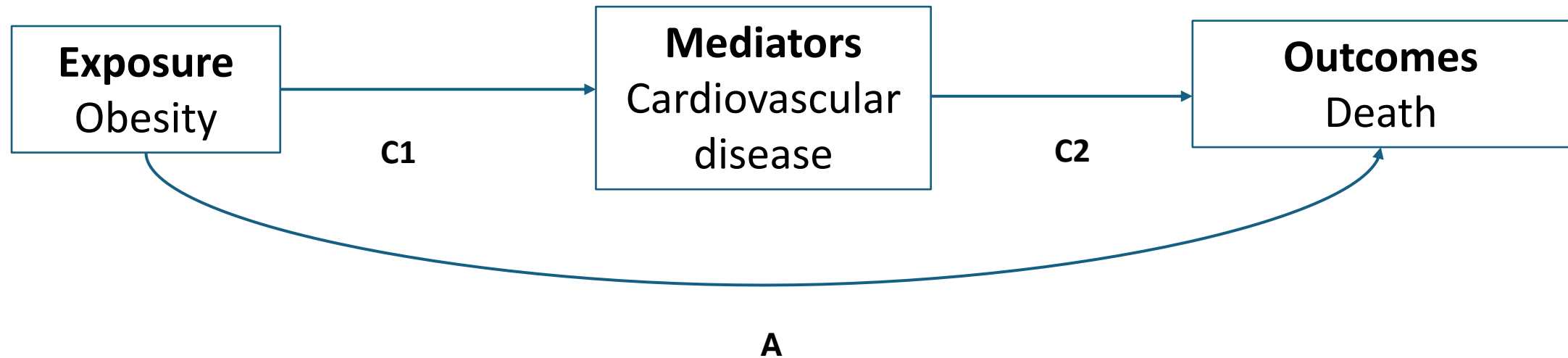
DO NOT
over-adjust
for
mediators

Over-adjustment bias

Research Question:

In patients treated with dialysis, does being obese increase the risk of overall mortality? (**Direct effect - A**)

What are the factors that may contribute to this relationship? (**Indirect effect C1 and C2**)

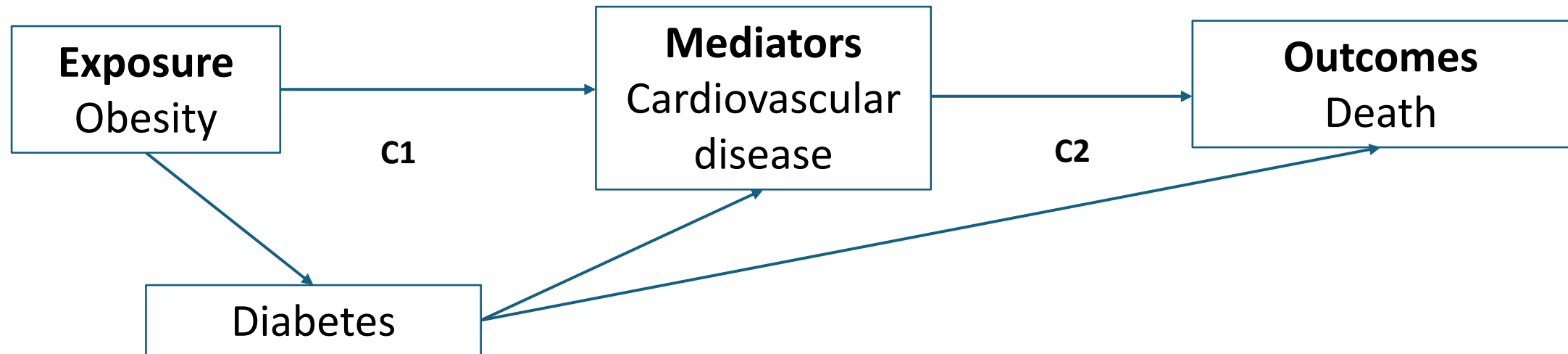


Over-adjustment bias

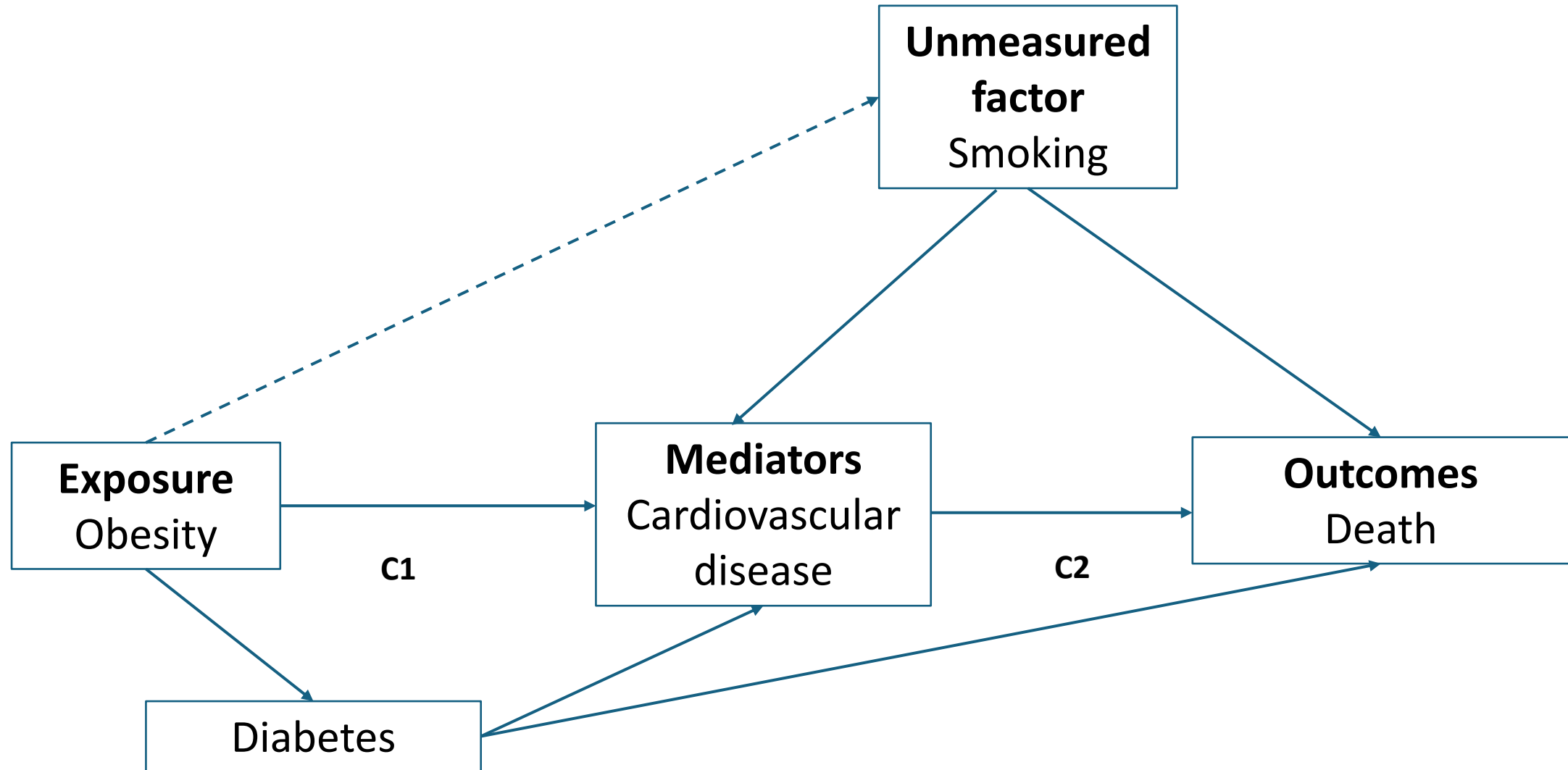
Research Question:

In patients treated with dialysis, does being obese increase the risk of overall mortality? (**Direct effect - A**)

What are the factors that may contribute to this relationship? (**Indirect effect C1 and C2**)



Collider bias





ORIGINAL ARTICLE

Avoiding overadjustment bias in social epidemiology through appropriate covariate selection: a primer

Anita van Zwieten^{a,b}, Peter W.G. Tennant^{c,d,e}, Michelle Kelly-Irving^{f,g}, Fiona M. Blyth^{a,h},
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Methodology - Quantitative research – Editors' pet hate!

DO NOT ignore

DO NOT
ignore time-
varying
covariates

Time-Dependent Anemia, EPO Use, and Mortality in Dialysis

- Anemia is a dynamic, time-varying exposure in dialysis.
- EPO dosing responds to anemia → creating feedback loops.
- Structure: Anemia(t) → EPO(t) → Anemia(t+1) → Mortality.
- EPO is both a mediator and a time-dependent confounder affected by prior anemia.
- Standard Cox models introduce:
 - – Over-adjustment (blocking anemia→EPO→mortality pathway)
 - – Collider bias when conditioning on EPO or Hb
- Correct causal method: Marginal Structural Models (MSMs) with IPTW.

Reporting guidelines



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Reporting guidelines for main study types

Randomised trials	CONSORT	Extensions
Observational studies	STROBE	Extensions
Systematic reviews	PRISMA	Extensions
Study protocols	SPIRIT	PRISMA-P
Diagnostic/prognostic studies	STARD	TRIPOD
Case reports	CARE	Extensions
Clinical practice guidelines	AGREE	RIGHT
Qualitative research	SRQR	COREQ
Animal pre-clinical studies	ARRIVE	
Quality improvement studies	SQUIRE	Extensions
Economic evaluations	CHEERS	Extensions

What makes a quantitative big-data research paper publishable?

Clear, clinically
meaningful
research question

Casual framework
for guidance

Analytic rigour
and transparency

Avoid big-data
pitfalls

Data provenance,
quality and
validation

Interpretable,
clinically plausible
findings

Coherent
narrative