

Adaptive prior weighting in generalized regression

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Adaptive Prior Weighting

- I. Power prior in clinical trials (joint with Isaac Gravestock)

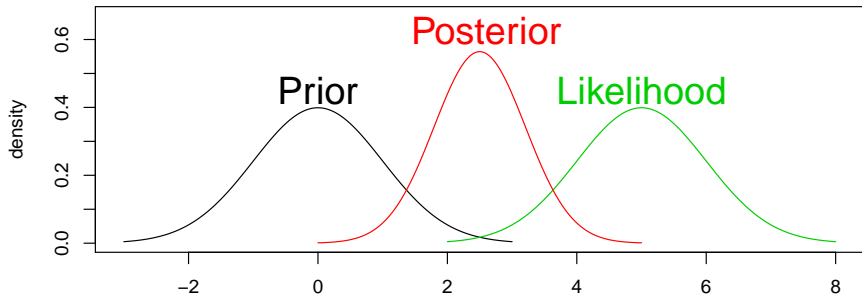


- II. Generalized Regression (joint with Rafael Sauter)

Prior-Data Conflict

“Bayesian: One who, vaguely expecting a horse and catching a glimpse of a donkey, strongly concludes that he has seen a mule.”

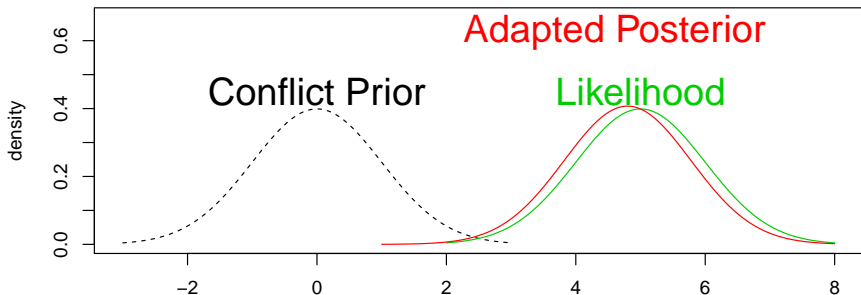
Senn (2007)



Adaptive Prior Weighting

“Bayesian: One who, vaguely expecting a horse and catching a glimpse of a donkey, concludes that he has seen . . . most likely a donkey!”

not Senn (2007)



Where Does the Prior Come From?

1 Historical data

Spiegelhalter *and others* (2004)

2 Expert opinion

O'Hagan *and others* (2006)

3 Structural considerations

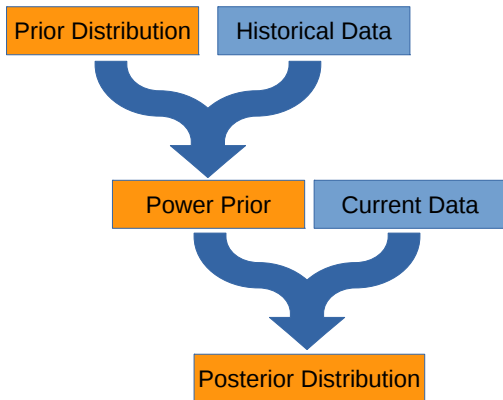
Greenland (2006, 2007)

e. g. $\Pr(1/10 \leq \text{OR} \leq 10) = 0.95$ in logistic regression

4 Proper default priors in regression

- ▶ Ridge prior
- ▶ g -prior
- ▶ Lasso

The Power Prior



The Power Prior

- 1 Start with a prior on the parameter θ , maybe uninformative or uniform

$$p_0(\theta)$$

- 2 Update the prior based on the likelihood $L(\theta; x_0)$ of historical data x_0 raised to a power δ between 0 and 1

$$p(\theta | \delta, x_0) \propto L(\theta; x_0)^\delta p_0(\theta)$$

Ibrahim and Chen (2000)

→ If the historical study has n_0 patients, then the prior sample size is δn_0

- 3 Current study has n_* patients and data x_* , say.

- 4 Current study is combined with power prior to posterior

→ Total sample size is $n_* + \delta n_0$

Unknown Power Parameter

- ▶ Treat δ as unknown and include prior $p_0(\delta)$
- ▶ Requires **normalisation**:

$$\begin{aligned} p(\theta, \delta | x_0) &= p(\theta | \delta, x_0) p_0(\delta) \\ &= \frac{L(\theta; x_0)^\delta p_0(\theta)}{\int L(\theta; x_0)^\delta p_0(\theta) d\theta} p_0(\delta) \end{aligned}$$

Duan *and others* (2006)

Neuenschwander *and others* (2009)

- ▶ Joint posterior:

$$p(\theta, \delta | x_*, x_0) \propto L(\theta; x_*) p(\theta, \delta | x_0)$$

Choosing δ

Possible approaches for choosing δ from the literature:

- ▶ Pick some fixed values and do a **sensitivity analysis** afterwards
- ▶ Don't. Integrate it out of joint posterior and use a **fully Bayesian** approach

We propose an **empirical Bayes** (EB) method:

- ▶ Combines Bayesian and classical ideas
- ▶ Select the best prior based on the data
- ▶ Maximise the marginal likelihood to choose δ :

$$\begin{aligned}\hat{\delta}_{\text{EB}} &= \arg \max_{\delta \in [0,1]} L(\delta; x_0, x_*) \\ &= \arg \max_{\delta \in [0,1]} \frac{\int L(\theta; x_*) L(\theta; x_0)^\delta p_0(\theta) d\theta}{\int L(\theta; x_0)^\delta p_0(\theta) d\theta}.\end{aligned}$$

Binomial Model

Want to estimate true proportion θ

- ▶ Initial prior: $\theta \sim \text{Beta}(a, b)$
- ▶ Historical data: $X_0 \sim \text{Bin}(n_0, \theta)$
- ▶ Current data: $X_* \sim \text{Bin}(n_*, \theta)$
- ▶ Prior for power parameter δ (for fully Bayesian approach):
 $\delta \sim \text{Beta}(\alpha, \beta)$

Antibiotics Trials

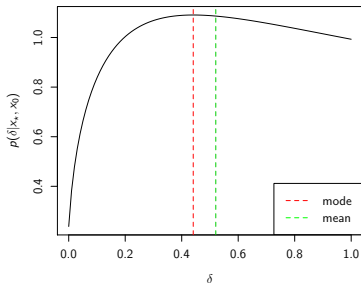
- ▶ Treating nosocomial pneumonia
- ▶ 2 studies comparing Linezolid and Vancomycin
- ▶ Binary outcome: all cause mortality

Study	Linezolid	Vancomycin
Rubinstein (2001)	36/203 (18%)	49/193 (25%)
Wunderink (2003)	64/321 (20%)	61/302 (20%)

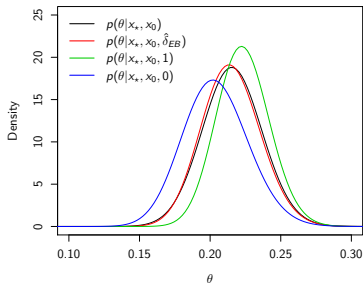
Vancomycin Estimates

- ▶ Start with uniform priors on θ (and δ)
- ▶ Use Rubinstein results as historical data: $x_0/n_0 = 49/193$
- ▶ Empirical Bayes: $\hat{\delta} = 0.44 \rightarrow$ prior sample size $\hat{\delta}n_0 = 86$
- ▶ Posterior mean: $\hat{\delta} = 0.52 \rightarrow$ prior sample size $\hat{\delta}n_0 = 101$

Posterior of δ



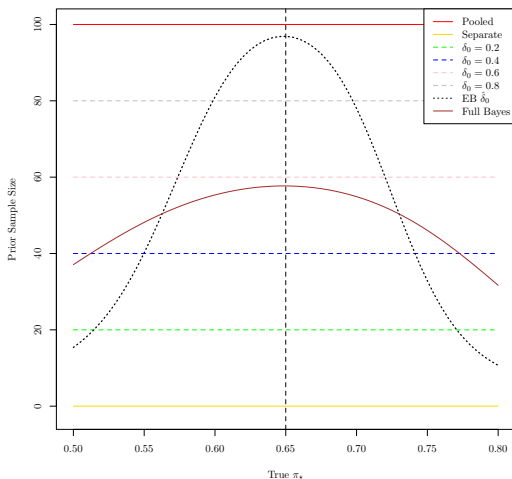
Posterior of θ



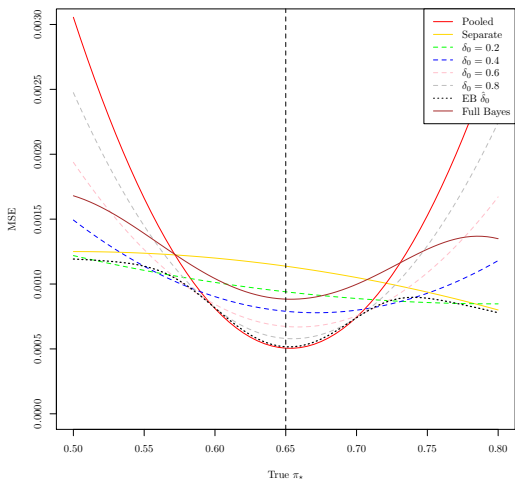
Operating Characteristics

- ▶ Viele et al. (2014) look at performance of various borrowing methods for the control arm of a randomized controlled clinical trial (RCT).
 - ▶ Expected Prior Sample Size
 - ▶ Mean Square Error
 - ▶ Power
 - ▶ Type I Error
- ▶ Binomial setting:
 - Historical control arm data: $x_0 = 65, n_0 = 100$
 - Current control arm data: $X_{\star} \sim \text{Bin}(n_{\star} = 200, \pi_{\star})$
 - Current treatment arm data: $X_T \sim \text{Bin}(n_T = 200, \pi_T)$
- ▶ “Bayesian Significance” if $\Pr(\pi_T > \pi_{\star}) > 0.975$
- ▶ Empirical Bayes compares favourably!

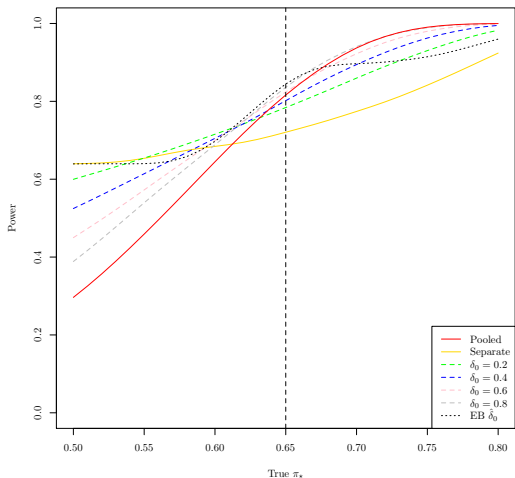
Expected Prior Sample Size



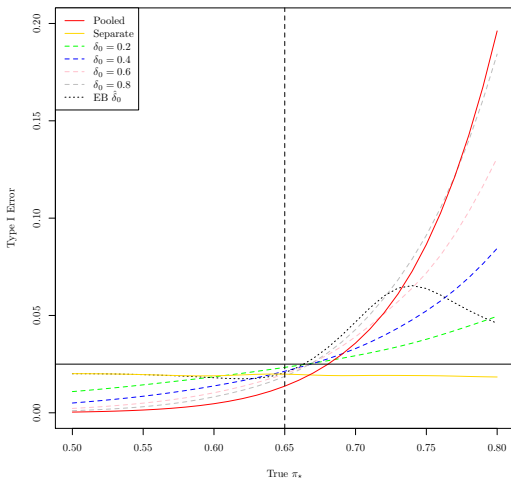
Mean Square Error



Power to Detect Difference $\pi_T - \pi_\star = 12\%$



Type I Error $\pi_T - \pi_*$



Box's p -value

- ▶ Box (1980) defined a p -value to measure **conflict** between prior and data $X_\star = x_\star$:

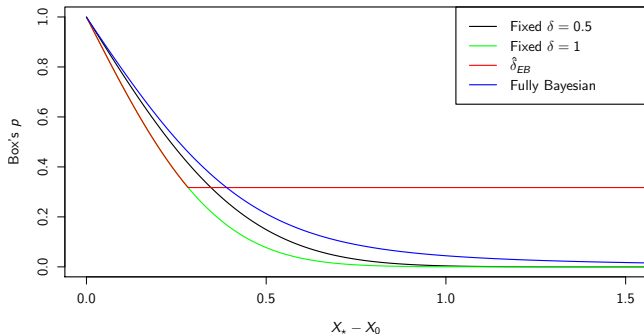
$$\Pr(p(X_\star | x_0) \leq p(x_\star | x_0))$$

- Probability that observed (or more extreme) data could come from prior predictive distribution $p(x_\star | x_0)$
- ▶ Low p -values suggest that prior is in conflict with data
- ▶ Calculate predictive distribution by

$$p(x_\star | x_0) = \int_{\theta} \int_{\delta} p(x_\star | \theta) \times p(\theta, \delta | x_0) d\delta d\theta$$

Box's p -value for Power Prior

- ▶ Power prior based on normal likelihood: $X_0 \sim N(\theta, 0.2^2)$
- ▶ Current data also normal: $X_* \sim N(\theta, 0.2^2)$
- ▶ Uniform prior on θ (and δ)



→ EB automatically adjusts compatibility between prior and data.

II. Adaptive Prior Weighting in Regression

- ▶ A multivariate normal prior distribution on the regression coefficients is a natural choice, especially if prior comes from historical data.
- ▶ However, careless specification of mean and covariance matrix may have strong effects on posterior inference.
- ▶ We discuss empirical and fully Bayesian approaches to avoid extreme prior-data disagreement and agreement, by adaptively weighting the prior distribution.
- ▶ The proposed methodology provides an alternative to the recently proposed Cauchy prior distributions for the regression coefficients of suitably standardized covariates.

Gelman *and others* (2008)

Preliminaries: Prior Weighting in the Linear Model

Consider the linear model with mean

$$E(y_i) = \alpha + \mathbf{x}_i^\top \boldsymbol{\beta}$$

with residual variance σ^2 and centred regression coefficients $\mathbf{X}^\top \mathbf{1} = \mathbf{0}$. An improper reference prior for α and σ^2 , $f(\alpha, \sigma^2) \propto \sigma^{-2}$, is combined with a proper normal prior for $\boldsymbol{\beta}$:

$$\boldsymbol{\beta} | \sigma^2 \sim N_d(\boldsymbol{\nu}, g \sigma^2 \boldsymbol{\Sigma})$$

→ Prior weight $\delta = 1/g > 0$

Note: Prior weight δ can be larger 1

→ Prior up- and downweighting possible

The g -prior

- ▶ Zellner's g -prior (Zellner, 1986) uses $\Sigma = (\mathbf{X}^\top \mathbf{X})^{-1}$

→ Shrinkage of $\hat{\beta}_{\text{ML}}$ towards ν :

$$E(\beta | \mathbf{y}) = \frac{\hat{\beta}_{\text{ML}} + 1/g \cdot \nu}{1 + 1/g}$$

- ▶ For $\nu = \mathbf{0}$ we have

$$E(\beta | \mathbf{y}) = \frac{g}{g+1} \hat{\beta}_{\text{ML}}$$

→ Shrinkage factor $t = g/(g+1)$

Box's p -Value

- ▶ Take $\hat{\beta}_{\text{ML}}$ as the “data” with distribution

$$\hat{\beta}_{\text{ML}} | \beta, \sigma^2 \sim N_d \left(\beta, \sigma^2 (\mathbf{X}^\top \mathbf{X})^{-1} \right)$$

- ▶ Combined with prior $\beta | \sigma^2 \sim N_d(\nu, g \sigma^2 \Sigma)$ we obtain the **prior predictive distribution**

$$\hat{\beta}_{\text{ML}} | \sigma^2 \sim N_d \left(\nu, \sigma^2 \left\{ (\mathbf{X}^\top \mathbf{X})^{-1} + g \Sigma \right\} \right)$$

so

$$T(g) = \left(\hat{\beta}_{\text{ML}} - \nu \right)^\top \left\{ (\mathbf{X}^\top \mathbf{X})^{-1} + g \Sigma \right\}^{-1} \left(\hat{\beta}_{\text{ML}} - \nu \right) / \sigma^2$$

can be evaluated against a $\chi^2(d)$ distribution.

- ▶ Exact calculation based on F -distribution is also possible.

Box's p -Value: Some Properties

- ▶ Box's $p \rightarrow 1$ for the “uninformative” choice $g \rightarrow \infty$
- ▶ Copas (1983) has derived an empirical Bayes (EB) estimate of g under the g -prior:

$$\hat{g} = \max\{F_{\text{obs}} - 1, 0\},$$

where F_{obs} is the F statistic for $H_0 : \beta = \nu$.

- For $F_{\text{obs}} > 1$, one can show that Box's p -value is $p \approx 0.5$, *i. e.* empirical Bayes **automatically adjusts** the compatibility between the prior and the data.
- ▶ This suggests to estimate g for arbitrary prior covariance matrix Σ by solving the equation $T(g) = E\{\chi^2(d)\} = d$ for g , *i. e.*

$$\hat{g} = \begin{cases} T^{-1}(d) & \text{if } T(0) > d \\ 0 & \text{else} \end{cases}$$

Generalized Linear Model

- ▶ Consider now a generalized linear model (GLM) with outcomes y_i with mean $\mu_i = h(\eta_i)$ and linear predictor

$$\eta_i = \alpha + \mathbf{x}_i^\top \boldsymbol{\beta}$$

- ▶ Prior $f(\alpha) \propto 1$ combined with $\boldsymbol{\beta} \sim N_d(\boldsymbol{\nu}, g \boldsymbol{\Sigma})$
- ▶ MLE $\hat{\boldsymbol{\beta}}_{\text{ML}}$, where $\hat{\boldsymbol{\beta}}_{\text{ML}} | \boldsymbol{\beta} \sim N_d(\boldsymbol{\beta}, \mathcal{T})$, is used to evaluate

$$T(g) = (\hat{\boldsymbol{\beta}}_{\text{ML}} - \boldsymbol{\nu})^\top (\mathcal{T} + g \boldsymbol{\Sigma})^{-1} (\hat{\boldsymbol{\beta}}_{\text{ML}} - \boldsymbol{\nu})$$

against a $\chi^2(d)$ distribution to compute Box's p -value.

- ▶ EB estimate under the (generalized) g -prior based on the deviance z_{obs} (Copas, 1997):

$$\hat{g} = \max\{z_{\text{obs}}/d - 1, 0\}.$$

- ▶ Can be extended to arbitrary $N_d(\boldsymbol{\nu}, g \boldsymbol{\Sigma})$ prior by solving $T(g) = d$.

Application: Study on Obstetric Care and Neonatal Death

From Sullivan and Greenland (2013):

Table 1 Multiple logistic regressions of neonatal-death risk in a cohort of 2992 births with 17 deaths, intercept and 14 regressors in each model. Shown are the prior median odds ratio OR_{prior} and 95% limits; ML estimates with 95% Wald and profile-likelihood (profile) limits; approximate posterior medians from data augmentation including a prior on all 14 regressors with 95% Wald and profile limits, using prior data with $\frac{1}{2}$ correction ($A=4.5$) or with rescaled prior data ($S=10, A=400$); and simulated posterior medians and 95% limits (2.5th and 97.5th percentiles) from MCMC with normal priors

Regressor (X_i)	Deaths with $X_i > 0$	Prior median OR_{prior} (95% prior limits)	ML estimate: $A=0$ (95% Wald and profile limits)	Approximate posterior median (95% posterior limits)		
				Data augmentation: $A=4.5^a$	Data augmentation with a rescaled ($S=10$) prior ^a	MCMC ^b
Non-White	5	2 (0.5,8)	1.9 (0.55,6.5) (0.51,6.3)	1.8 (0.75,4.2) (0.72,4.1)	1.8 (0.73,4.3) (0.71,4.2)	1.8 (0.70,4.2)
Early age	3	2 (0.5,8)	1.6 (0.39,6.7) (0.32,6.1)	1.6 (0.65,4.1) (0.62,3.9)	1.6 (0.63,4.1) (0.61,4.0)	1.6 (0.59,4.0)
Nulliparity	8	2 (0.5,8)	1.5 (0.51,4.7) (0.50,4.9)	1.6 (0.69,3.5) (0.68,3.6)	1.5 (0.67,3.6) (0.67,3.6)	1.6 (0.67,3.6)
Gestational age	10	4 (1,16)	4.9 (2.4,9.8) (2.4,10.0)	4.5 (2.5,8.0) (2.5,8.1)	4.5 (2.5,8.1) (2.5,8.1)	4.6 (2.5,8.3)
Isoimmunization	1	2 (0.5,8)	3.0 (0.91,10) (0.62,8.5)	2.4 (0.95,6.0) (0.87,5.6)	2.4 (0.94,6.2) (0.85,5.7)	2.3 (0.81,5.6)
Past abortion	2	1 (0.25,4)	0.72 (0.18,2.9) (0.12,2.3)	0.84 (0.34,2.1) (0.31,1.9)	0.83 (0.33,2.1) (0.31,1.9)	0.79 (0.29,1.9)
Hydramnios	1	4 (1,16)	60 (5.7,635) (2.8,478)	5.8 (1.6,21) (1.6,22)	6.1 (1.6,23) (1.6,23)	6.0 (1.6,22)
Labour progress	2	2 (0.5,8)	0.50 (0.06,3.9) (0.04,2.8)	1.3 (0.45,3.5) (0.42,3.3)	1.2 (0.43,3.5) (0.41,3.3)	1.2 (0.40,3.3)
PCA	1	2 (0.5,8)	3.1 (0.33,29) (0.15,20)	2.2 (0.71,7.1) (0.67,7.0)	2.3 (0.68,7.5) (0.65,7.2)	2.2 (0.64,7.1)
No monitor	3	2 (0.5,8)	1.2 (0.32,4.9) (0.35,5.9)	1.8 (0.68,4.5) (0.70,4.7)	1.7 (0.66,4.6) (0.68,4.8)	1.8 (0.71,5.0)
Twin, triplet	3	4 (1,16)	8.2 (1.8,37) (1.5,33)	5.1 (1.9,14) (1.8,14)	5.2 (1.9,15) (1.8,14)	5.3 (1.8,14)
Public ward	6	2 (0.5,8)	0.86 (0.26,2.9) (0.25,2.8)	1.3 (0.56,3.0) (0.54,3.0)	1.3 (0.54,3.0) (0.53,3.0)	1.3 (0.53,3.0)
PROM	1	2 (0.5,8)	0.54 (0.06,4.8) (0.03,3.2)	1.3 (0.45,3.5) (0.41,3.3)	1.2 (0.43,3.5) (0.41,3.3)	1.2 (0.39,3.3)
Malpresented	3	4 (1,16)	3.9 (0.88,17) (0.73,15)	3.9 (1.5,10.0) (1.4,9.8)	3.9 (1.4,10) (1.4,9.9)	3.8 (1.4,10.0)

ML: Maximum likelihood; MCMC: Markov-chain Monte Carlo; PCA: placental or cord anomaly. PROM: premature rupture of membranes.

Variables are indicators except early age (0 = 20+, 1 = 15–19, 2 = under 15), gestational age (0 = no, 1 = 36–38 weeks, 2 = 33–36 weeks; under 33 weeks excluded), isoimmunization (0 = no, 1 = Rh, 2 = ABO), labour progress (0 = no, 0.33 = prolonged, 0.67 = protracted, 1 = arrested) and past abortion (0 = none, 1 = 1, 2 = 2+).

^aLimits shown are Wald exp(estimate \pm 1.96 \times standard error) and profile likelihood from PROC LOGISTIC.

^bNumber of MCMC samples was 100 000

Assessment of Prior-Data Conflict

Prior I: $N_{14}(\boldsymbol{\nu}, g \boldsymbol{\Sigma})$ (Sullivan and Greenland (2013) prior)

Prior II: $N_{14}(\mathbf{0}, g \boldsymbol{\Sigma})$ (ridge prior)

with

$$\boldsymbol{\nu} = \log(2, 2, 2, 4, 2, 1, 4, 2, 2, 2, 4, 2, 2, 4)^\top$$

$$\boldsymbol{\Sigma} = \text{diag}(1/2)$$

- ▶ Prior I gives Box's $p = 0.91$ (!) for $g = 1$.
 - ▶ Prior II gives Box's $p = 0.13$ for $g = 1$.
- no evidence for prior-data conflict under both priors.
- ▶ The EB estimates are $\hat{g} = 0$ ($p = 0.60$) and $\hat{g} = 2.10$ ($p = 0.45$)
 - ▶ However, EB estimates $\hat{g} = 0$ are useless for parameter estimation.

Hyper- g Prior

- ▶ The EB approach avoids arbitrary choices of g which may be at odds with the data. However, the uncertainty about the estimate \hat{g} is ignored and the posterior of β is degenerate for $\hat{g} = 0$.
- ▶ We propose to use the hyper- g prior with **shrinkage factor**

$$t = g/(1 + g) \sim U(0, 1)$$

Liang *and others* (2008)

- Prior median of g is 1, distribution of g and $\delta = 1/g$ are the same.
- No preference regarding up- or downweighting
- ▶ Under the g -prior, posterior mode of t is equal to the corresponding EB estimate.

Held *and others* (2015)

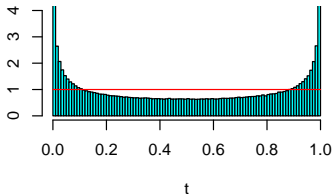
- Hyper- g prior **regularizes** EB approach.

Other Choices

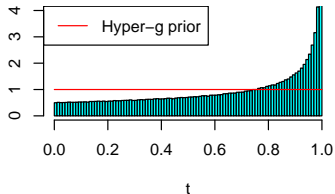
- ▶ Horseshoe prior: $t \sim \text{Be}(1/2, 1/2)$
Carvalho *and others* (2010)
- ▶ Strawderman-Berger: $t \sim \text{Be}(1, 1/2)$
Berger (1980)
- ▶ Cauchy prior distributions for the regression coefficients corresponds to a (possibly scaled) $\text{IG}(1/2, 1/2)$ prior for g
Gelman *and others* (2008)

Other Choices

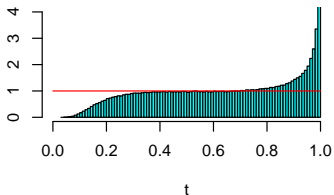
Horseshoe



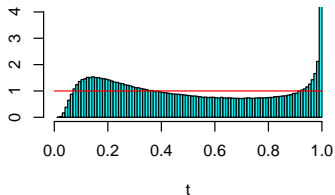
Strawderman–Berger



Standard Cauchy



Cauchy with scale 2.5



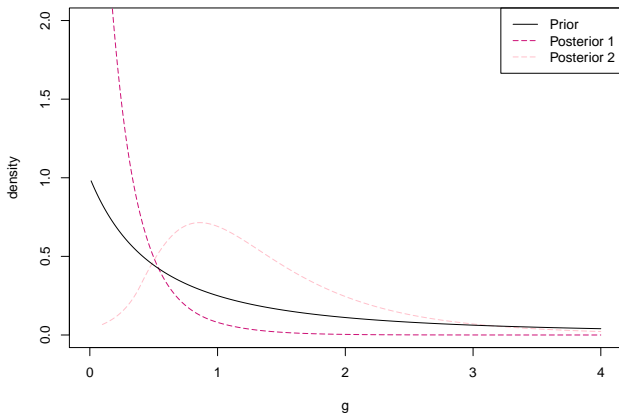
Implementation in INLA

- ▶ Rewrite linear predictor as

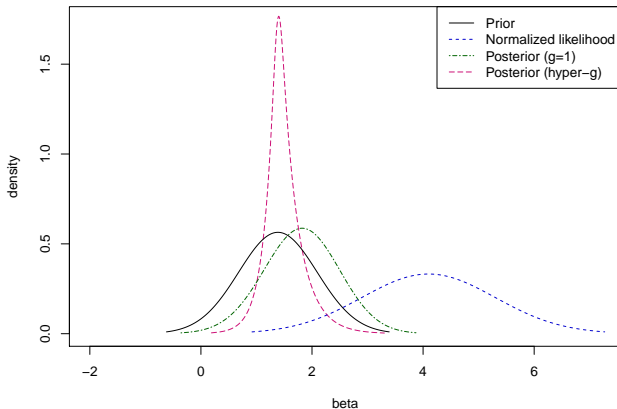
$$\eta_i = \alpha + \underbrace{\mathbf{x}_i^\top \boldsymbol{\nu}}_{\text{Offset}} + \mathbf{x}_i^\top \tilde{\boldsymbol{\beta}} \text{ where } \tilde{\boldsymbol{\beta}} \sim N_d(\mathbf{0}, g \boldsymbol{\Sigma}).$$

- Use generic Gaussian Markov random field (GMRF) with mean $\mathbf{0}$ and pre-specified precision matrix $\boldsymbol{\Sigma}^{-1}$ - up to the possibly unknown multiplicative weight factor $w = 1/g$.
- ▶ Now use the copy feature in INLA to define d identical copies of $\tilde{\boldsymbol{\beta}}$.
- The j -th component of the j -th copy of $\tilde{\boldsymbol{\beta}}$ is then multiplied with the covariate values $\mathbf{x}_j = (x_{1j}, \dots, x_{nj})^\top$ as a “weights vector”.
- ▶ Hyper- g (or any other) prior on g can be incorporated.

Hyper-g Prior and Posterior in Neonatal Death Study

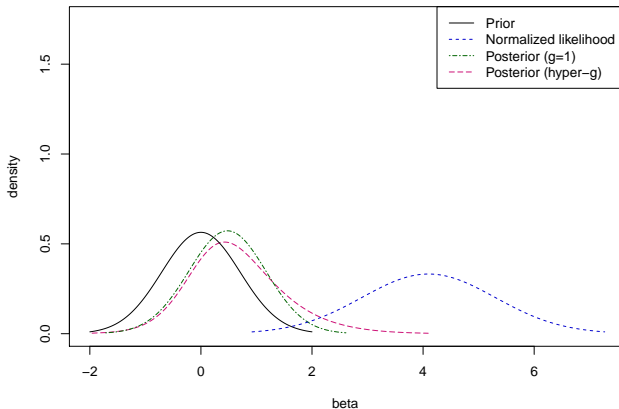


Posterior of β_{hydram} (Prior I)



Method	OR Estimate	95% CI
ML	60	5.7 to 635
$g = 1$	6.1	1.6 to 22.8
Hyper- g	4.3	2.3 to 10.5

Posterior of β_{hydram} (Prior II)

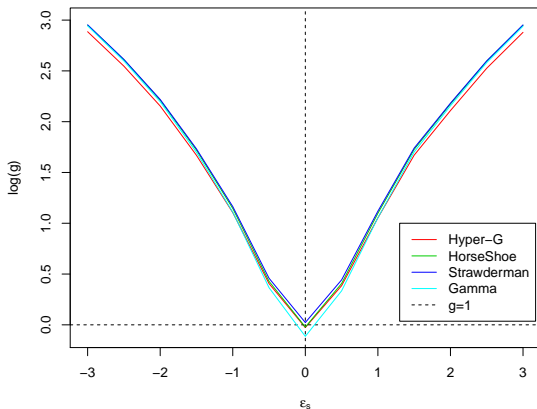


Method	OR Estimate	95% CI
ML	60	5.7 to 635
$g = 1$	1.6	0.4 to 6.3
Hyper- g	1.8	0.4 to 13.4

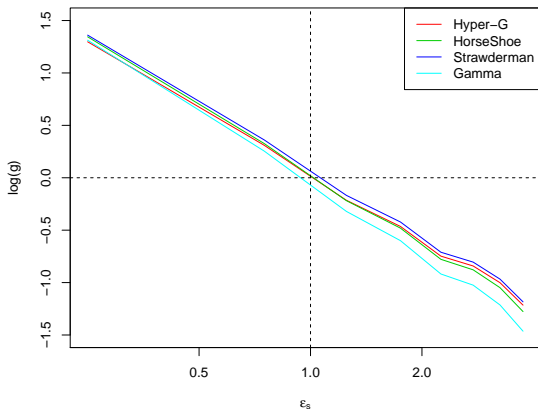
Simulation Study (preliminary results)

- 1 Based on the (centred) design matrix \mathbf{X} of neonatal death study
- 2 Draw $k = 1, \dots, 100$ times from misspecified prior
 - a) $\beta^{(k)} \sim N(\boldsymbol{\nu} + \epsilon \mathbf{1}, \boldsymbol{\Sigma}), \epsilon \in \{-3, -2.5, \dots, 0, 0.5, \dots, 3\}$
 - b) $\beta^{(k)} \sim N(\boldsymbol{\nu}, \epsilon \boldsymbol{\Sigma}), \epsilon \in \{1/4, 1/2, 1, 2, 4\}$
- 3 Simulate $\mathbf{y}^{(k)} \sim \text{Bin}(1, \text{expit}\{\mathbf{X}^\top \beta^{(k)}\})$
- 4 Use INLA with $\beta \sim N(\boldsymbol{\nu}, g \boldsymbol{\Sigma})$ prior and different hyperpriors for g .

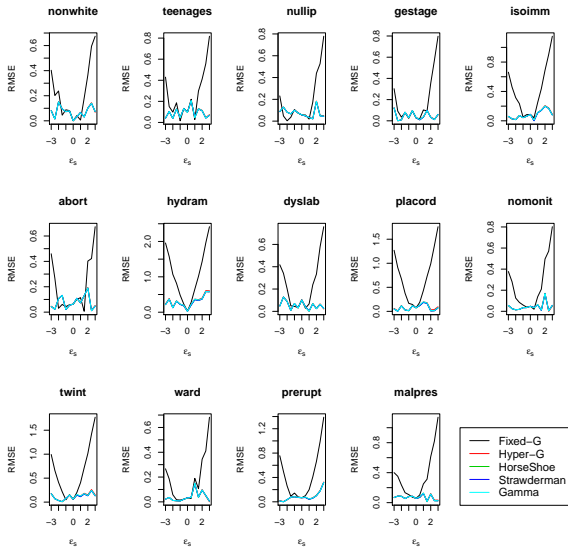
Simulation a): Mean estimate of g



Simulation b): Mean estimate of g



Simulation a): RMSE



Summary and Outlook

- ▶ Empirical Bayes is useful to **downweight** historical data using the **power prior**.
- ▶ In **generalized regression**, hyper- g prior regularizes EB and allows for **both up- or downweighting** of the prior distribution.
- ▶ Approach can be viewed as replacing a normal prior on the regression coefficients with a “robustified” scale mixture of normals prior.
- ▶ Implementation in INLA allows to extend the approach to more complex models, *e. g.* generalized linear mixed models or spatial models.
- ▶ Can also be generalized to **several** prior weight parameters for blocks of regression coefficients.

Literature I

- Berger, J. (1980). A robust generalized Bayes estimator and confidence region for a multivariate normal mean, *Annals of Statistics* **8**(4): 716–761.
- Carvalho, C. M., Polson, N. G. and Scott, J. G. (2010). The horseshoe estimator for sparse signals, *Biometrika* **97**(2): 465–480.
- Copas, J. B. (1983). Regression, prediction and shrinkage, *Journal of the Royal Statistical Society. Series B (Methodological)* **45**(3): 311–354.
- Copas, J. B. (1997). Using regression models for prediction: shrinkage and regression to the mean, *Statistical Methods in Medical Research* **6**(2): 167–183.
- Duan, Y., Smith, E. P. and Ye, K. (2006). Using Power Priors to Improve the Binomial Test of Water Quality, *Journal of Agricultural, Biological, and Environmental Statistics* **11**(2): 151–168.
- Gelman, A., Jakulin, A., Grazia, M. P. and Yu-Sung, S. (2008). A weakly informative default prior distribution for logistic and other regression models, *Annals of Applied Statistics* **2**: 1360–1383.

Literature II

- Greenland, S. (2006). Bayesian perspectives for epidemiological research: I. Foundations and basic methods, *International Journal of Epidemiology* **35**: 765–775.
- Greenland, S. (2007). Bayesian perspectives for epidemiological research. II. Regression analysis, *International Journal of Epidemiology* **36**(1): 195–202.
- Held, L., Sabanés Bové, D. and Gravestock, I. (2015). Approximate Bayesian model selection with the deviance statistic, *Statistical Science* **30**: 242–257.
- Ibrahim, J. G. and Chen, M.-H. (2000). Power prior distributions for regression models, *Statistical Science* **15**(1): 46–60.
- Liang, F., Paulo, R., Molina, G., Clyde, M. A. and Berger, J. O. (2008). Mixtures of g priors for Bayesian variable selection, *Journal of the American Statistical Association* **103**(481): 410–423.
- Neuenschwander, B., Branson, M. and Spiegelhalter, D. J. (2009). A note on the power prior, *Statistics in Medicine* **28**(28): 3562–3566.

Literature III

- O'Hagan, A., Buck, C. E., Daneshkhah, A., Eiser, J. R., Garthwaite, P. H., Jenkinson, D. J., Oakley, J. E. and Rakow, T. (2006). *Uncertain Judgements; Eliciting Experts' Probabilities*, Wiley, Chichester.
- Senn, S. (2007). *Statistical Issues in Drug Development*, 2nd edn, Wiley.
- Spiegelhalter, D. J., Abrams, K. R. and Myles, J. P. (2004). *Bayesian Approaches to Clinical Trials and Health-Care Evaluation*, Wiley, New York.
- Sullivan, S. G. and Greenland, S. (2013). Bayesian regression in SAS software, *International Journal of Epidemiology* **42**(1): 308–317.
- Viele, K., Berry, S., Neuenschwander, B., Amzal, B., Chen, F., Enas, N., Hobbs, B., Ibrahim, J. G., Kinnersley, N., Lindborg, S. et al. (2014). Use of historical control data for assessing treatment effects in clinical trials, *Pharmaceutical Statistics* **13**(1): 41–54.
- Zellner, A. (1986). On assessing prior distributions and Bayesian regression analysis with g -prior distributions, in P. K. Goel and A. Zellner (eds), *Bayesian Inference and Decision Techniques: Essays in Honor of Bruno de Finetti*, Vol. 6 of *Studies in Bayesian Econometrics and Statistics*, North-Holland, Amsterdam, chapter 5, pp. 233–243.