

Generalization of the Risk Difference, Risk Ratio, OR, etc... from one trial to a target population.

Ahmed Boughdiri (INRIA, Premedical Team)



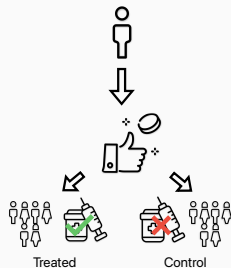
A Unified Framework for the Transportability of Population-Level Causal Measures



Clément Berenfeld (INRIA, Montpellier), Julie Josse (INRIA, Montpellier) and Erwan Scornet (Sorbonne, Paris)

Introduction to Generalization

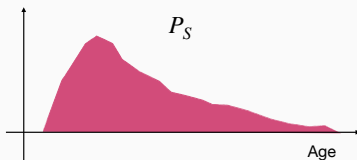
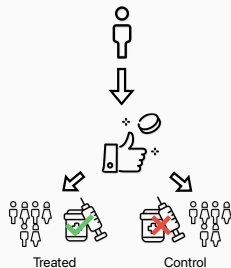
Randomized Controlled Trials:



- + direct causal association
- selective population, small sample, not always feasible

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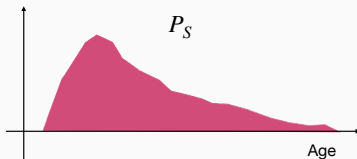
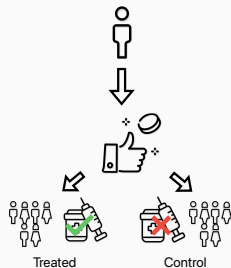
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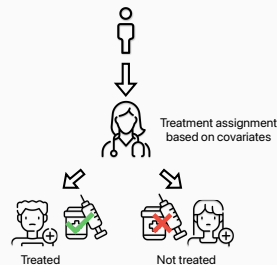
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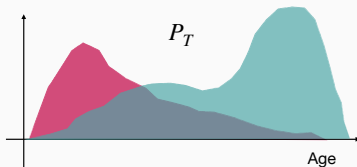
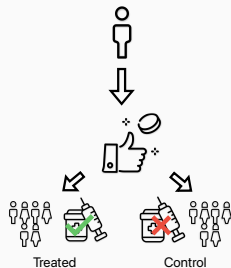
Observational Data:



- + abundant, representative population
- confounding factors

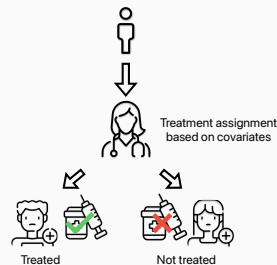
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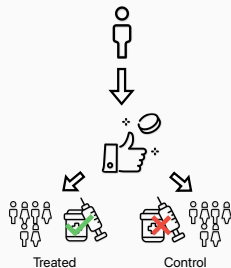
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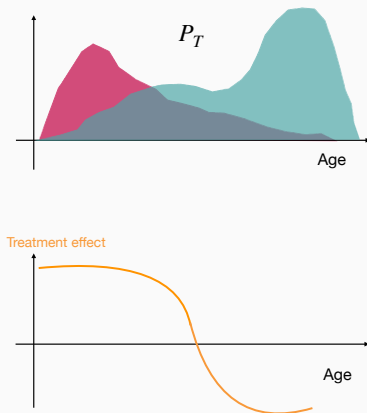
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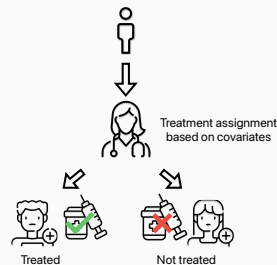
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$$p_S(x) \neq p_T(x) \Rightarrow \underbrace{\text{ATE in the RCT}}_{>0} \neq \underbrace{\text{Target ATE}}_{<0}$$

Problem setting: Generalization from one **RCT** to a **Target pop.**

Goal: estimate the **treatment effect** on the **target population**.

Source	Obs.	Covariates			Treatment	Outcomes	Potential Outcomes	
S	<i>i</i>	X^1	X^2	X^3	<i>A</i>	<i>Y</i>	$Y^{(1)}$	$Y^{(0)}$
0	1	37	2.0	F	0	1.7	??	1.7
$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$
0	<i>m</i>	52	1.7	M	1	2.4	2.4	??

IPW, G-formula, AIPW under $Y(1), Y(0) \perp A \mid X \implies$ Strong assumption !

Problem setting: Generalization from one RCT to a Target pop.

Generalization: estimate the treatment effect on the target population using the RCT

Source	Obs.	Covariates			Treatment	Outcomes	Potential Outcomes	
S	i	X^1	X^2	X^3	A	Y	$Y^{(1)}$	$Y^{(0)}$
1	1	23	1.5	M	1	3.2	3.2	??
$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$
1	n	17	2.9	M	0	1.5	??	1.5
0	1	37	2.0	F	??	??	??	??
$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$
0	m	52	1.7	M	??	??	??	??

Note that here we do not need the treatment and the outcome in the target population.

The age-old question of how to report treatment effects

Count the dead $\tau_{RR} = \frac{\mathbb{E}[Y^{(1)}]}{\mathbb{E}[Y^{(0)}]}$	Count the Living $\tau_{SR} = \frac{1 - \mathbb{E}[Y^{(1)}]}{1 - \mathbb{E}[Y^{(0)}]}$
$\tau_{RD} = \mathbb{E}[Y^{(1)}] - \mathbb{E}[Y^{(0)}]$ Risk Difference	$\tau_{NNT} = \tau_{RD}^{-1}$ Number Needed to Treat
Odds Ratio $\tau_{OR} = \frac{\mathbb{E}[Y^{(1)}]}{1 - \mathbb{E}[Y^{(1)}]} \left(\frac{\mathbb{E}[Y^{(0)}]}{1 - \mathbb{E}[Y^{(0)}]} \right)^{-1}$	

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Risk Ratio, odds ratio, risk difference... Which causal measure is easier to generalize?

<i>Bénédicte Colnet</i>	<i>Julie Josse</i>	<i>Gaël Varoquaux</i>	<i>Erwan Scornet</i>
Measure	Dir. collapsible	Collapsible	Logic-respecting
RD	Yes	Yes	Yes
NNT	No	No	Yes
RR	No	Yes	Yes
SR	No	Yes	Yes
OR	No	No	No

e.g. Huitfeldt et al., 2021; Lapointe-Shaw et al., 2022; Liu et al., 2022; Colnet, et al. J.J. 2022;
Colnet, J.J et al. 2023; Boughdiri, J.J et al 2025; Dumas, E., Stensrud (2025) ...

- **CONSORT guidelines recommend to report all of them** •

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Existing studies have generalized the RD but not other causal measures. Here, we propose

A Unified Framework for the Transportability of Population-Level Causal Measures

First moment population-level measure

- τ^P a 1st moment population-level¹ measure if $\exists \Phi : D_\Phi \rightarrow \mathbb{R}, D_\Phi \subset \mathbb{R}^2$

$$\tau_\Phi^P = \Phi(\mathbb{E}_P[Y(1)], \mathbb{E}_P[Y(0)])$$

Note that a 1st moment population-level measure depends on a population P : $\tau_\Phi^S \neq \tau_\Phi^T$

¹Fay & Li. (2024). Causal interpretation of the hazard ratio in RCTs. *Clinical Trials*.

²Even, J.J. (2025). Rethinking the win ratio: causal framework for hierarchical outcome Analysis.

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Measure	Effect Measure	Domain D_Φ
Risk Difference (RD)	$\Phi(x, y) = x - y$	$\mathbb{R}^2$
Risk Ratio (RR)	$\Phi(x, y) = \frac{x}{y}$	$\mathbb{R} \times \mathbb{R}^*$
Odds Ratio (OR)	$\Phi(x, y) = \frac{x}{1-x} \cdot \frac{1-y}{y}$	$\mathbb{R}/\{1\} \times \mathbb{R}^*$
NNT	$\Phi(x, y) = \frac{1}{x-y}$	$\{(x, y) \in \mathbb{R}^2 x - y \neq 0\}$

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- In contrast an individual-level measure depends on the joint distribution. Most are non identifiable but workarounds exist². Ex: $\mathbb{E} \left[\frac{Y_i(1)}{Y_i(0)} \right] \neq \frac{\mathbb{E}[Y_i(1)]}{\mathbb{E}[Y_i(0)]}$ or $\mathbb{P}[Y(1) > Y(0)]$

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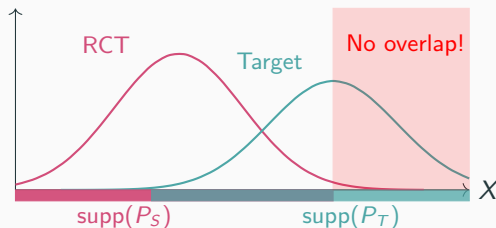
Assumptions for ATE identifiability in generalization

Overlap

$\forall x \in \mathbb{X}, p_S(x) > 0$ and

$$\text{supp}(P_T(X)) \subset \text{supp}(P_S(X))$$

Density



Intuition: Every covariate profile in the target population must be represented in the RCT. We cannot generalize on people not represented in S

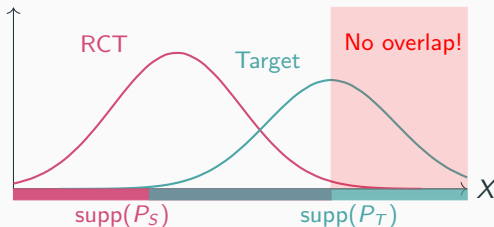
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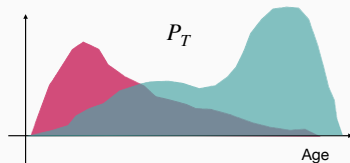
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Exchangeability in mean

$\forall a \in \{0, 1\},$

$$\mathbb{E}_S[Y(a) | X] = \mathbb{E}_T[Y(a) | X]$$

In general $\mathbb{E}_S[Y(a)] \neq \mathbb{E}_T[Y(a)]$ since:



- what about: $\mathbb{E}_S[Y(a)|age] = \mathbb{E}_T[Y(a)|age]$?
- what if we have $p_S(\text{weight}) \neq p_T(\text{weight})$?

*Intuition: X must contain all **shifted** and **prognostic** covariates.*

Reweighting the RCT: reweight Horvitz-Thomson

Reweighted Horvitz-Thomson

$$\hat{\tau}_{\Phi, \text{wHT}} = \Phi \left(\frac{1}{n} \sum_{S_i=1} \hat{r}(X_i) \frac{A_i Y_i}{\pi}, \frac{1}{n} \sum_{S_i=1} \hat{r}(X_i) \frac{(1 - A_i) Y_i}{1 - \pi} \right)$$

Estimate the **ratio of densities** with a logistic regression

$$r(X) := \frac{p_T(X)}{p_S(X)} = \frac{\mathbb{P}(X = x | S = 0)}{\mathbb{P}(X = x | S = 1)}$$

$$\stackrel{\text{Bayes}}{=} \frac{\mathbb{P}(S = 1) \mathbb{P}(S = 0 | X = x)}{\mathbb{P}(S = 0) \mathbb{P}(S = 1 | X = x)}$$

$$\frac{\mathbb{P}(S = 0 | X = x)}{\mathbb{P}(S = 1 | X = x)} = \exp(x^\top \beta)$$



Transport the RCT: G-formula

Fit models on RCT data

$$\hat{\mu}_a^S(X) = \mathbb{E}_S[Y|A=a, X]$$

Predict on the target data

$$Y(a) = \hat{\mu}_a^S(X) \text{ where } X \sim P_T(X)$$

Average over the target

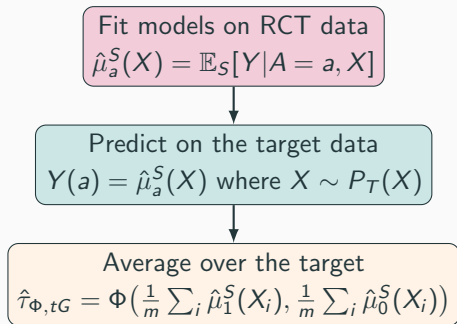
$$\hat{\tau}_{\Phi, \text{tG}} = \Phi\left(\frac{1}{m} \sum_i \hat{\mu}_1^S(X_i), \frac{1}{m} \sum_i \hat{\mu}_0^S(X_i)\right)$$

X^1	X^2	X^3	$Y^{(1)}$	$Y^{(0)}$
37	2.0	F	$\hat{\mu}_0^S(X_1)$	$\hat{\mu}_1^S(X_1)$
$\vdots$	$\vdots$	$\vdots$	$\vdots$	$\vdots$
52	1.7	M	$\hat{\mu}_0^S(X_m)$	$\hat{\mu}_1^S(X_m)$

Transported G-formula

$$\hat{\tau}_{\Phi, \text{tG}} = \Phi\left(\frac{1}{m} \sum_{S_i=0} \hat{\mu}_{(1)}^S(X_i), \frac{1}{m} \sum_{S_i=0} \hat{\mu}_{(0)}^S(X_i)\right)$$

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We use data from the RCT to train $\hat{\mu}_{(1)}$ and $\hat{\mu}_{(0)}$ using

- Linear Regressions
- Random Forests

Proposition

Under a logistic $S|X$ and linear $Y(a)|X$ model for respectively the source and the outcome we have,

$$V_{\Phi, tG}^{\text{OLS}} \leq V_{\Phi, \text{HT}},$$

Doubly robust estimator

Estimated equation estimator

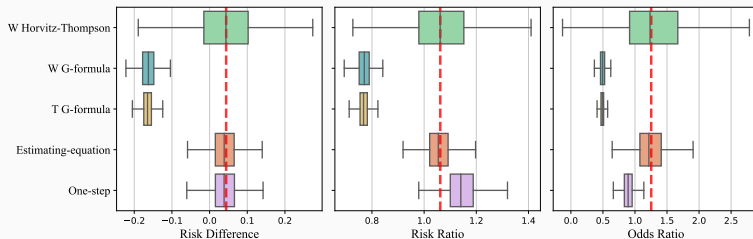
Given estimators $\hat{\mu}_{(a)}$ (resp. $\hat{r}$) of $\mu_{(a)}$ (resp. r), an estimating equation estimator $\hat{\tau}_{\Phi}^{\text{EE}}$ of τ_{Φ} is given by $\hat{\tau}_{\Phi}^{\text{EE}} = \Phi(\hat{\psi}_1^{\text{EE}}, \hat{\psi}_0^{\text{EE}})$ where for all $a \in \{0, 1\}$

$$\hat{\psi}_a^{\text{EE}} := \frac{1}{m} \sum_{S_i=0} \hat{\mu}_{(a)}(X_i) + \frac{1}{n} \sum_{S_i=1} \frac{1\{A=a\}}{\mathbb{P}(A=a)} \hat{r}(X_i)(Y - \hat{\mu}_{(a)}(X_i))$$

Doubly Robust: The estimator $\hat{\tau}_{\Phi}^{\text{EE}}$ is consistent as soon as either $\hat{\mu}_{(a)} = \mu$ or $\hat{r} = r$.

Robust to miss-specification :

- Logistic model on $S|X$
- **Non-linear** model on $Y(a)|X$



Doubly robust estimator

Estimated equation estimator

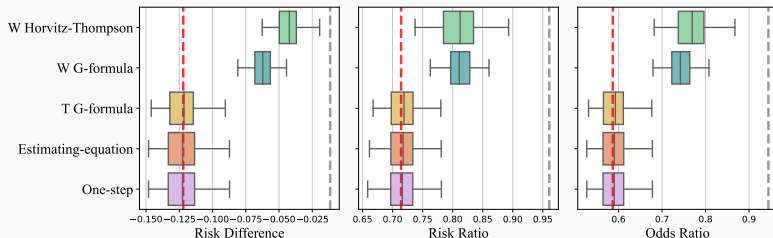
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Robust to miss-specification :

- Non-Logistic model on $S|X$
- Linear model on $Y(a)|X$



Relaxing exchangeability in mean

Exchangeability in mean

$\forall a \in \{0, 1\},$

$$\mathbb{E}_S[Y(a) \mid X] = \mathbb{E}_T[Y(a) \mid X]$$

X contains *shifted prognostic* variables

Exchangeability in effect measure

For a given ϕ , we have

$$\tau_{\phi}^R(x_c) = \tau_{\phi}^T(x_c)$$

X_c contains all *shifted* effect modifiers. $X_c \subseteq X$

If $Y^{(0)}$ is known in the target population, then the target treatment effect (for a given Φ) is **identifiable**:

$$\tau_{\Phi}^T = \Phi \left(\mathbb{E}_T \left[\Gamma \left(\tau_{\Phi}^S(X_c), \mu_{(0)}^T(X_c) \right) \right], \mathbb{E}_T \left[Y^{(0)} \right] \right)$$

where Γ is the inverse of $\psi_1 \mapsto \Phi(\psi_1, \psi_0)$ It leads naturally to:

- Weighted estimators
- Regression-based estimators
- **Doubly robust** estimators combining both approaches

Estimate the treatment effect on the Target pop.

	Observational studies	Gen with Conditional Outcome	Gen with Local effects
Ass.	$Y(1), Y(0) \perp A \mid X$	$\mathbb{E}_{\mathbf{R}}[Y(a) \mid X] = \mathbb{E}_{\mathbf{T}}[Y(a) \mid X]$	$\tau_{\Phi}^{\mathbf{R}}(x) = \tau_{\Phi}^{\mathbf{T}}(x)$
Var.	confounding variables	shifted prognostic covariates	shifted effect modifiers $Y(0)$ in the target population
Meas.	RD, RR ³ but can be extended	RD, RR, NNT, OR, SR, ...	only Φ

³Boughdiri, J.J., Scornet. Estimating Risk Ratios in Causal Inference. ICML2025

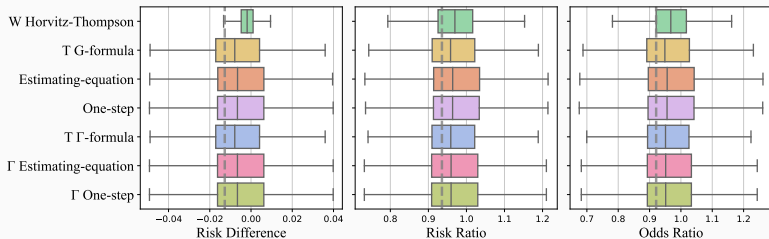
Generalizing CRASH-3 findings to the Traumabase population

CRASH-3 trial (Mostly Pakistan)

- Randomized trial ($n \approx 9,000$)
- Patients with TBI, GCS ≤ 12 , within 3h
- Treatment: Tranexamic Acid (TXA)
- Outcome: Head injury-related death at 28 days

Traumabase cohort (France)

- Observational registry ($m \approx 8,200$)
- Selected CRASH-3-eligible patients
- Treatment: Tranexamic Acid (TXA)
- Deleterious/No evidence



³Colnet, J.J et al (2023). *Causal inference methods for combining randomized trials and observational studies: a review.*

Conclusion & Perspectives

- Identification relies on:
 - **Exchangeability in mean/effect measure:** $\mathbb{E}_S[Y(a) | X] = \mathbb{E}_T[Y(a) | X]$ or $\tau_\phi^S(x) = \tau_\phi^T(x)$
 - **Overlap:** $\text{supp}(P_T(X)) \subseteq \text{supp}(P_S(X))$

What we did:

- Generalized RD, RR and OR under Overlap and Exchangeability.
- Build and studied weighted, regression and **doubly robust** estimators.
- Applied this to **transported** the effect of TXA using **CRASH-3** and **Traumabase**.

Perspectives:

- Relaxing **overlap**.
- Build a R and Python package.
- Meta-analysis [[Berenfeld et al., 2025](#)]



Thank you!

[Berenfeld et al., 2025] Berenfeld, C., Boughdiri, A., Colnet, B., van Amsterdam, W. A., Bellet, A., Khellaf, R., Scornet, E., and Josse, J. (2025).

Causal meta-analysis: Rethinking the foundations of evidence-based medicine.

arXiv preprint arXiv:2505.20168.