# Package 'pvEBayes'

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```
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```

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pvEBa	es-package A suite of empirical Bayes methods to use in pharmacovigilance.	

# Description

pvEBayes provides a collection of parametric and non-parametric empirical Bayes methods implementation for pharmacovigilance (including signal detection and signal estimation) on spontaneous reporting systems (SRS) data.

An SRS dataset catalogs AE reports on I AE rows across J drug columns. Let  $N_{ij}$  denote the number of reported cases for the i-th AE and the j-th drug, where i=1,...,I and j=1,...,J. We assume that for each AE-drug pair,  $N_{ij} \sim \operatorname{Poisson}(\lambda_{ij}E_{ij})$ , where  $E_{ij}$  is expected baseline value measuring the expected count of the AE-drug pair when there is no association between i-th AE and j-th drug. The parameter  $\lambda_{ij} \geq 0$  represents the relative reporting ratio, the signal strength, for the (i,j)-th pair measuring the ratio of the actual expected count arising due to dependence to the null baseline expected count. Current disproportionality analysis mainly focuses on signal detection which seeks to determine whether the observation  $N_{ij}$  is substantially greater than the corresponding null baseline  $E_{ij}$ . Under the Poisson model, that is to say, its signal strength  $\lambda_{ij}$  is significantly greater than 1.

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In addition to signal detection, Tan et al. (Stat. in Med., 2025) broaden the role of disproportionality to signal estimation. The use of the flexible non-parametric empirical Bayes models enables more nuanced empirical Bayes posterior inference (parameter estimation and uncertainty quantification) on signal strength parameter  $\{\lambda_{ij}\}$ . This allows researchers to distinguish AE-drug pairs that would appear similar under a binary signal detection framework. For example, the AE-drug pairs with signal strengths of 1.5 and 4.0 could both be significantly greater than 1 and detected as a signal. Such differences in signal strength may have distinct implications in medical and clinical contexts.

The methods included in pvEBayes differ by their assumptions on the prior distribution. Implemented methods include the Gamma-Poisson Shrinker (GPS), Koenker-Mizera (KM) method, Efron's nonparametric empirical Bayes approach, the K-gamma model, and the general-gamma model.

The GPS model uses two gamma mixture prior by assuming the signal/non-signal structure in SRS data. However, in real-world setting, signal strengths  $(\lambda_{ij})$  are often heterogeneous and thus follows a multi-modal distribution, making it difficult to assume a parametric prior. Non-parametric empirical Bayes models (KM, Efron, K-gamma and general-gamma) address this challenge by utilizing a flexible prior with general mixture form and estimating the prior distribution in a data-driven way.

pvEBayes offers the first implemention of the bi-level Expectation Conditional Maximization (ECM) algorithm proposed by Tan et al. (2025) for efficient parameter estimation in gamma mixture prior based models: GPS K-gamma and general-gamma.

The KM method has an existing implementation in the REBayes package, but it relies on Mosek, a commercial convex optimization solver, which may limit accessibility due to licensing issue. pvEBayes provides a alternative fully open-source implementation of the KM method using CVXR.

Efron's method also has a general nonparametric empirical Bayes implementation in the deconvolveR package; however, that implementation does not support an exposure or offset parameter in the Poisson model, which corresponds to the expected null value  $E_{ij}$ . In pvEBayes, the implementation of the Efron's method is adapted and modified from deconvolveR to support  $E_{ij}$  in Poisson model.

For an introduction to pvEBayes, see the vignette.

#### Author(s)

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#### References

Tan Y, Markatou M and Chakraborty S. Flexible Empirical Bayesian Approaches to Pharmacovigilance for Simultaneous Signal Detection and Signal Strength Estimation in Spontaneous Reporting Systems Data. *Statistics in Medicine*. 2025; 44: 18-19, https://doi.org/10.1002/sim.70195.

Tan Y, Markatou M and Chakraborty S. pvEBayes: An R Package for Empirical Bayes Methods in Pharmacovigilance. *arXiv*:2512.01057 (stat.AP). https://doi.org/10.48550/arXiv.2512.01057

Koenker R, Mizera I. Convex Optimization, Shape Constraints, Compound Decisions, and Empirical Bayes Rules. *Journal of the American Statistical Association* 2014; 109(506): 674–685, https://doi.org/10.1080/01621459.2013.869224

Efron B. Empirical Bayes Deconvolution Estimates. *Biometrika* 2016; 103(1); 1-20, https://doi.org/10.1093/biomet/asv068 DuMouchel W. Bayesian data mining in large frequency tables, with an application to the FDA spontaneous reporting system. *The American Statistician*. 1999; 1;53(3):177-90.

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# See Also

Useful links:

```
• https://github.com/YihaoTancn/pvEBayes
```

- https://yihaotancn.github.io/pvEBayes/
- Report bugs at https://github.com/YihaoTancn/pvEBayes/issues

AIC.pvEBayes

Obtain Akaike Information Criterion (AIC) for a pvEBayes object

# **Description**

This function defines the S3 AIC method for objects of class pvEBayes. It extracts the Akaike Information Criterion (AIC) from a fitted model.

# Usage

```
## S3 method for class 'pvEBayes'
AIC(object, ..., k = 2)
```

# **Arguments**

a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.
 other input parameters. Currently unused.
 numeric, the penalty per parameter to be used; the default k = 2 is the classical AIC.

## Value

numeric, AIC score for the resulting model.

# **Examples**

```
fit <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.3, n_posterior_draws = NULL
)

AIC_score <- AIC(fit)</pre>
```

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BIC.pvEBayes

Obtain Bayesian Information Criterion (BIC) for a pvEBayes object

# Description

This function defines the S3 BIC method for objects of class pvEBayes. It extracts the Bayesian Information Criterion (BIC) from a fitted model.

## Usage

```
## S3 method for class 'pvEBayes'
BIC(object, ...)
```

# **Arguments**

object a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.
... other input parameters. Currently unused.

## Value

numeric, BIC score for the resulting model.

# **Examples**

```
fit <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.3, n_posterior_draws = NULL
)

BIC_score <- BIC(fit)</pre>
```

 $\verb|estimate_null_expected_count|\\$ 

Estimate expected null baseline count based on reference row and column

# **Description**

This function estimates the expected null baseline count  $(E_{ij})$  for each AE-drug combination under the assumption of independence between rows and columns. The expected count is calculated using a reference row (other AEs) and reference column (other drugs). This null baseline is typically used in empirical Bayes modeling of **pvEBayes** package for signal detection and estimation in spontaneous reporting system (SRS) data.

#### Usage

```
estimate_null_expected_count(contin_table)
```

## **Arguments**

contin\_table

an IxJ contingency table showing pairwise counts of adverse events for I AEs (along the rows) and J drugs (along the columns). The reference row "Other AEs" and the reference column "Other drugs" need to be the I-th row and J-th column respectively.

#### **Details**

This null value estimator is proposed by Tan et al. (2025).

#### Value

```
an nrow(contin_table) by ncol(contin_table) matrix.
```

## References

Tan Y, Markatou M and Chakraborty S. Flexible Empirical Bayesian Approaches to Pharmacovigilance for Simultaneous Signal Detection and Signal Strength Estimation in Spontaneous Reporting Systems Data. *Statistics in Medicine*. 2025; 44: 18-19, https://doi.org/10.1002/sim.70195.

# **Examples**

```
estimate_null_expected_count(statin2025_44)
```

```
extract_all_fitted_models
```

Extract all fitted models from a tuned pvEBayes Object

## **Description**

This function retrieves the list of all fitted models from a pvEBayes\_tuned object, which is the output of the pvEBayes\_tune() function.

# Usage

```
extract_all_fitted_models(object)
```

## **Arguments**

object

An object of class pvEBayes\_tuned, usually returned by pvEBayes\_tune. This function will throw an error if the input is not of the correct class.

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## Value

A list containing the results of each model fitted during the tuning process.

## **Examples**

```
valid_matrix <- matrix(c(1, 2, 3, 4, 5, 6, 7, 8), nrow = 2)
rownames(valid_matrix) <- c("AE_1", "AE_2")
colnames(valid_matrix) <- c("drug_1", "drug_2", "drug_3", "drug_4")

tuned_object <- pvEBayes_tune(valid_matrix,
    model = "general-gamma",
    return_all_fit = TRUE
)
extract_all_fitted_models(tuned_object)</pre>
```

eyeplot\_pvEBayes

Generate an eyeplot showing the distribution of posterior draws for selected drugs and adverse events

# **Description**

This function creates an eyeplot to visualize the posterior distributions of  $\lambda_{ij}$  for selected AEs and drugs. The plot displays posterior median, 90 percent credible interval for each selected AE-drug combination.

## Usage

```
eyeplot_pvEBayes(
    x,
    num_top_AEs = 10,
    num_top_drugs = 8,
    specified_AEs = NULL,
    specified_drugs = NULL,
    N_threshold = 1,
    text_shift = 4,
    x_lim_scalar = 1.3,
    text_size = 3,
    log_scale = FALSE
)
```

#### **Arguments**

```
x a pvEBayes object, which is the output of the function pvEBayes or pvEBayes_tune.

num_top_AEs a number of most significant AEs appearing in the plot. Default to 10.

num_top_drugs a number of most significant drugs appearing in the plot. Default to 7.
```

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a vector of AE names that are specified to appear in the plot. If a vector of AEs specified\_AEs is given, argument num\_top\_AEs will be ignored. specified\_drugs a vector of drug names that are specified to appear in the plot. If a vector of drugs is given, argument num\_top\_drugs will be ignored. N\_threshold a integer greater than 0. Any AE-drug combination with observation smaller than N threshold will be filtered out. text\_shift numeric. Controls the relative position of text labels, (e.g., "N = 1", "E = 2"). A larger value shifts the "E = 2" further away from its original position. numeric. An x-axis range scalar that ensures text labels are appropriately inx\_lim\_scalar cluded in the plot. text\_size numeric. Controls the size of text labels, (e.g., "N = 1", "E = 2"). logical. If TRUE, the eye plot displays the posterior distribution of  $\log(\lambda_{ij})$  for log\_scale the selected AEs and drugs.

#### Value

a ggplot2 object.

# Examples

```
fit <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.3, n_posterior_draws = 1000
)

AE_names <- rownames(statin2025_44)[1:6]
  drug_names <- colnames(statin2025_44)[-7]

eyeplot_pvEBayes(
  x = fit
)</pre>
```

gbca2025

FDA GBCA dataset with 1328 adverse events

## **Description**

An adverse event-drug count dataset (contingency table) obtained from the FDA FAERS database for the quarters 2021Q1 - 2024Q4.

## Usage

gbca2025

gbca2025\_69

#### **Format**

An object of class matrix (inherits from array) with 1328 rows and 8 columns.

#### **Details**

Data are stored in the form of a contingency table, with drugs listed across the columns and the 1328 AEs presented across the rows. Each cell in the contingency table represents the total report counts associated with that (AE, drug) pair and detected in the FDA FAERS database during 2021Q1 - 2024Q4.

The dataset catalogs 7 Gadolinium-Based Contrast Agents (GBCAs):

Gadobenate, Gadobutrol, Gadodiamide, Gadopentetate, Gadoterate, Gadoteridol, Gadoxetate

The 1328 adverse events presented across the rows are AEs that contain at least one report for the 7 GBCA drugs during 2021Q1 - 2024Q4.

This dataset is an updated version of gbca from the pvLRT package which collects the same scope of AEs for 7 gbca drugs for quarters 2014Q3 - 2020Q4.

#### Source

https://fis.fda.gov/extensions/FPD-QDE-FAERS/FPD-QDE-FAERS.html

gbca2025\_69

FDA GBCA dataset with 69 adverse events

# **Description**

An adverse event-drug count dataset (contingency table) obtained from the FDA FAERS database for the quarters 2021Q1 - 2024Q4

#### Usage

gbca2025\_69

#### **Format**

An object of class matrix (inherits from array) with 70 rows and 8 columns.

#### **Details**

Data are stored in the form of a contingency table, with drugs listed across the columns and the 69 AEs presented across the rows. Each cell in the contingency table represents the total report counts associated with that (AE, drug) pair and detected in the FDA FAERS database during 2021Q1 - 2024Q4.

The dataset catalogs 7 Gadolinium-Based Contrast Agents (GBCAs) (across columns):

Gadobenate, Gadobutrol, Gadodiamide, Gadopentetate, Gadoterate, Gadoteridol, Gadoxetate.

The 69 adverse events presented across the rows are selected from 1328 AEs of gbca2025 which are related to the brain or neural system. Other AEs are collapsed to one reference row: "Other AEs".

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## Source

```
https://fis.fda.gov/extensions/FPD-QDE-FAERS/FPD-QDE-FAERS.html
```

generate\_contin\_table Generate random contingency tables based on a reference table embedded signals, and possibly with zero inflation

# **Description**

This function generates random contingency tables that resemble a given reference table, with the option to embed signals and zero-inflation.

#### Usage

```
generate_contin_table(
  n_table = 1,
  ref_table,
  signal_mat = NULL,
  Variation = FALSE,
  zi_indic_mat = NULL
)
```

## **Arguments**

n\_table a number of random matrices to generate. ref\_table a reference table used as the basis for generating random tables. signal\_mat a numeric matrix of the same dimension as the reference table (ref table). The entry at position (i, j) in signal\_mat represents the signal strength between the i-th adverse event and the j-th drug. By default, each pair is assigned a value of 1, indicating no signal for that pair. Variation logical. Include random noises to sig\_mat while generating random tables. Default to FALSE. If set to TRUE, n\_table of sig\_mat incorporating the added noise will also be returned. zi\_indic\_mat logical matrix of the same size as ref\_table indicating the positions of structural zero.

## Value

A list of length n\_table, with each entry being a nrow(ref\_table) by ncol(ref\_table) matrix.

## References

Tan Y, Markatou M and Chakraborty S. Flexible Empirical Bayesian Approaches to Pharmacovigilance for Simultaneous Signal Detection and Signal Strength Estimation in Spontaneous Reporting Systems Data. *Statistics in Medicine*. 2025; 44: 18-19, https://doi.org/10.1002/sim.70195.

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## **Examples**

```
set.seed(1)
ref_table <- statin2025_44

# set up signal matrix with one signal at entry (1,1)
sig_mat <- matrix(1, nrow(ref_table), ncol(ref_table))
sig_mat[1, 1] <- 2

# set up structural zero matrix
Z <- matrix(0, nrow(ref_table), ncol(ref_table))
Z[5, 1] <- 1

simu_table <- generate_contin_table(ref_table,
    signal_mat = sig_mat,
    n_table = 1,
    Variation = TRUE,
    zi_indic_mat = Z
)[[1]][[1]]</pre>
```

heatmap\_pvEBayes

Generate a heatmap plot visualizing posterior probabilities for selected drugs and adverse events

## **Description**

This function generates a heatmap to visualize the posterior probabilities of being a signal for selected AEs and drugs.

## Usage

```
heatmap_pvEBayes(
    x,
    num_top_AEs = 10,
    num_top_drugs = 8,
    specified_AEs = NULL,
    specified_drugs = NULL,
    cutoff_signal = NULL
)
```

## Arguments

a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.

num\_top\_AEs
num\_top\_drugs
num\_top\_drugs
specified\_AEs
a vector of AE names that are specified to appear in the plot. If a vector of AEs is given, argument num\_top\_AEs will be ignored.

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```
specified_drugs
```

a vector of drug names that are specified to appear in the plot. If a vector of drugs is given, argument num\_top\_drugs will be ignored.

cutoff\_signal

numeric. Threshold for signal detection. An AE-drug combination is classified as a detected signal if its 5th posterior percentile exceeds this threshold.

# Value

```
a ggplot2 object.
```

# Examples

```
fit <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.3, n_posterior_draws = 1000
)

heatmap_pvEBayes(
  x = fit,
  num_top_AEs = 10,
  num_top_drugs = 8,
  specified_AEs = NULL,
  specified_drugs = NULL,
  cutoff_signal = 1.001
)</pre>
```

logLik.pvEBayes

Extract log marginal likelihood for a pvEBayes object

# **Description**

This function defines the S3 logLik method for objects of class pvEBayes. It extracts the log marginal likelihood from a fitted model.

## Usage

```
## S3 method for class 'pvEBayes'
logLik(object, ...)
```

## **Arguments**

object a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.
... other input parameters. Currently unused.

## Value

returns log marginal likelihood of a pvEBayes object.

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## **Examples**

```
fit <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.3, n_posterior_draws = NULL
)
logLik(fit)</pre>
```

plot.pvEBayes

Plotting method for a pvEBayes object

# Description

This function defines the S3 plot method for objects of class pvEBayes.

## Usage

```
## S3 method for class 'pvEBayes'
plot(x, type = "eyeplot", ...)
```

# Arguments

x a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.

type character string determining the type of plot to show. Available choices are "eyeplot" which calls eyeplot\_pvEBayes and "heatmap" which calls heatmap\_pvEBayes.

Note that the input for 'type' is case-sensitive.

additional arguments passed to heatmap\_pvEBayes or eyeplot\_pvEBayes.

#### Value

A ggplot object.

# **Examples**

```
obj <- pvEBayes(statin2025_44, model = "general-gamma", alpha = 0.5)
plot(obj, type = "eyeplot")</pre>
```

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posterior\_draws

Generate posterior draws for each AE-drug combination

## **Description**

This function generates posterior draws from the posterior distribution of  $\lambda_{ij}$  for each AE-drug combination, based on a fitted empirical Bayes model. The posterior draws can be used to compute credible intervals, visualize posterior distributions, or support downstream inference.

## Usage

```
posterior_draws(obj, n_posterior_draws = 1000)
```

# **Arguments**

```
obj a pvEBayes object, which is the output of the function pvEBayes or pvEBayes_tune.

n_posterior_draws

number of posterior draws for each AE-drug combination.
```

## Value

The function returns an S3 object of class pvEBayes with posterior draws.

## **Examples**

```
fit <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.3, n_posterior_draws = NULL
)
fit_with_draws <- posterior_draws(fit, n_posterior_draws = 1000)</pre>
```

print.pvEBayes

Print method for a pvEBayes object

# **Description**

This function defines the S3 print method for objects of class pvEBayes. It displays a concise description of the fitted model.

#### Usage

```
## S3 method for class 'pvEBayes' print(x, ...)
```

# **Arguments**

x a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.
... other input parameters. Currently unused.

#### Value

Invisibly returns the input pvEBayes object.

# **Examples**

```
obj <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.5, n_posterior_draws = 10000
)
print(obj)</pre>
```

pvEBayes

Fit a general-gamma, GPS, K-gamma, KM or efron model for a contingency table.

# Description

This function fits a non-parametric empirical Bayes model to an AE-drug contingency table using one of several empirical Bayes approaches with specified hyperparameter, if is required. Supported models include the "general-gamma", "GPS", "K-gamma", "KM", and "efron".

## Usage

```
pvEBayes(
  contin_table,
  model = "general-gamma",
  alpha = NULL,
  K = NULL,
  p = NULL,
  c0 = NULL,
  maxi = NULL,
  tol_ecm = 1e-04,
  rtol_efron = 1e-10,
  rtol_KM = 1e-06,
  n_posterior_draws = 1000,
  E = NULL
)
```

(along the rows) and J drugs (along the columns).

## **Arguments**

c0

contin\_table

mode1 the model to fit. Available models are "general-gamma", "K-gamma", "GPS", "KM" and "efron". Default to "general-gamma". Note that the input for model is case-sensitive. alpha numeric between 0 and 1. The hyperparameter of "general-gamma" model. It is needed if "general-gamma" model is used. Small 'alpha' encourages shrinkage on mixture weights of the estimated prior distribution. See Tan et al. (2025) for further details. a integer greater than or equal to 2 indicating the number of mixture components K in the prior distribution. It is needed if "K-gamma" model is used. See Tan et al. (2025) for further details. a integer greater than or equal to 2. It is needed if "efron" mode is used. Larger p p leads to smoother estimated prior distribution. See Narasimhan and Efron (2020) for detail.

numeric and greater than 0. It is needed if "efron" mode is used. Large c0 encourage estimated prior distribution shrink toward discrete uniform. See Narasimhan

and Efron (2020) for detail.

a upper limit of iteration for the ECM algorithm. maxi

tol\_ecm a tolerance parameter used for the ECM stopping rule, defined as the absolute

> change in the joint marginal likelihood between two consecutive iterations. It is used when 'GPS', 'K-gamma' or 'general-gamma' model is fitted. Default to

> an IxJ contingency table showing pairwise counts of adverse events for I AEs

rtol\_efron a tolerance parameter used when 'efron' model is fitted. Default to 1e-10. See

'stats::nlminb' for detail.

rtol\_KM a tolerance parameter used when 'KM' model is fitted. Default to be 1e-6. See

'CVXR::solve' for detail.

n\_posterior\_draws

a number of posterior draws for each AE-drug combination.

A matrix of expected counts under the null model for the SRS frequency table.

If NULL (default), the expected counts are estimated from the SRS data using

'estimate\_null\_expected\_count()'.

# **Details**

Ε

This function implements the ECM algorithm proposed by Tan et al. (2025), providing a stable and efficient implementation of Gamma-Poisson Shrinker(GPS), K-gamma and "general-gamma" methods for signal estimation and signal detection in Spontaneous Reporting System (SRS) data table.

Method "GPS" is proposed by DuMouchel (1999) and it is a parametric empirical Bayes model with a two gamma mixture prior distribution.

Methods "K-gamma" and "general-gamma" are non-parametric empirical Bayes models, introduced by Tan et al. (2025). The number of mixture components "K" needs to be prespecified when fitting a

"K-gamma" model. For "general-gamma", the mixture weights are regularized by a Dirichlet hyper prior with hyperparameter  $0 \le \alpha < 1$  that controls the shrinkage strength. As "alpha" approaches 0, less non-empty mixture components exist in the fitted model. When  $\alpha = 0$ , the Dirichlet distribution is an improper prior still offering a reasonable posterior inference that represents the strongest shrinkage of the "general-gamma" model.

Parameter estimation for the "KM" model is formulated as a convex optimization problem. The objective function and constraints follow the same construction as in **REBayes**. Parameter estimation is performed using the open-source convex optimization package **CVXR**.

The implementation of the "efron" model in this package is adapted from the **deconvolveR** package, developed by Bradley Efron and Balasubramanian Narasimhan. The original implementation in **deconvolveR** does not support an exposure or offset parameter in the Poisson model, which corresponds to the expected null value  $(E_{ij})$  for each AE-drug combination. To address this, we modified the relevant code to allow for the inclusion of  $E_{ij}$  in the Poisson likelihood. In addition, we implemented a method for estimating the degrees of freedom, enabling AIC- or BIC-based hyperparameter selection for the "efron" model (Tan et al. 2025). See pvEBayes\_tune for details.

#### Value

The function returns an S3 object of class pvEBayes containing the estimated model parameters as well as posterior draws for each AE-drug combination if the number of posterior draws is specified.

#### References

DuMouchel W. Bayesian data mining in large frequency tables, with an application to the FDA spontaneous reporting system. *The American Statistician*. 1999; 1;53(3):177-90.

Tan Y, Markatou M and Chakraborty S. Flexible Empirical Bayesian Approaches to Pharmacovigilance for Simultaneous Signal Detection and Signal Strength Estimation in Spontaneous Reporting Systems Data. *Statistics in Medicine*. 2025; 44: 18-19, https://doi.org/10.1002/sim.70195.

Narasimhan B, Efron B. deconvolveR: A G-modeling program for deconvolution and empirical Bayes estimation. *Journal of Statistical Software*. 2020; 2;94:1-20.

Koenker R, Gu J. REBayes: an R package for empirical Bayes mixture methods. *Journal of Statistical Software*. 2017; 4;82:1-26.

Fu, A, Narasimhan, B, Boyd, S. CVXR: An R Package for Disciplined Convex Optimization. *Journal of Statistical Software*. 2020; 94;14:1-34.

## **Examples**

```
set.seed(1)
ref_table <- statin2025_44

# set up signal matrix with one signal at entry (1,1)
sig_mat <- matrix(1, nrow(ref_table), ncol(ref_table))
sig_mat[c(1, 5), 1] <- 2

simu_table <- generate_contin_table(
    ref_table = ref_table,</pre>
```

```
signal_mat = sig_mat,
  n_{table} = 1
)[[1]]
# fit general-gamma model with a specified alpha
fit <- pvEBayes(</pre>
  contin_table = simu_table,
  model = "general-gamma",
  alpha = 0.3,
  n_posterior_draws = 1000,
  E = NULL,
  maxi = NULL
# fit K-gamma model with K = 3
fit_Kgamma <- pvEBayes(</pre>
  contin_table = simu_table, model = "K-gamma",
 K = 3, n_posterior_draws = 1000
)
# fit Efron model with specified hyperparameters
\# p = 40, c0 = 0.05
## Not run:
fit_efron <- pvEBayes(</pre>
  contin_table = simu_table,
 model = "efron",
  p = 40,
  c0 = 0.05,
  n_posterior_draws = 1000
## End(Not run)
# fit GPS model and comapre with 'openEBGM'
fit_gps <- pvEBayes(simu_table, model = "GPS")</pre>
## Not run:
## Optional comparison with openEBGM (only if installed)
## tol_ecm is the absolute tolerance for ECM stopping rule.
## It is set to ensure comparability to `openEBGM`.
fit_gps <- pvEBayes(simu_table, model = "GPS", tol_ecm = 1e-2)</pre>
if (requireNamespace("openEBGM", quietly = TRUE)) {
  E <- estimate_null_expected_count(simu_table)</pre>
  simu_table_stacked <- as.data.frame(as.table(simu_table))</pre>
```

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```
simu_table_stacked$E <- as.vector(E)</pre>
 colnames(simu_table_stacked) <- c("var1", "var2", "N", "E")</pre>
 simu_table_stacked_squash <- openEBGM::autoSquash(simu_table_stacked)</pre>
 hyper_estimates <- openEBGM::hyperEM(simu_table_stacked_squash,</pre>
    theta_init = c(2, 1, 2, 2, 0.2),
   method = "nlminb",
   N_star = NULL,
   zeroes = TRUE,
   param_upper = Inf,
   LL_{tol} = 1e-2,
   max_iter = 10000
}
theta_hat <- hyper_estimates$estimates</pre>
qn <- openEBGM::Qn(theta_hat,</pre>
 N = simu_table_stacked$N,
 E = simu_table_stacked$E
)
simu_table_stacked$q05 <- openEBGM::quantBisect(5,</pre>
 theta_hat = theta_hat,
 N = simu_table_stacked$N,
 E = simu_table_stacked$E,
 qn = qn
)
## obtain the detected signal provided by openEBGM
simu_table_stacked %>%
 subset(q05 > 1.001)
## detected signal from pvEBayes presented in the same way as openEBGM
fit_gps %>%
 summary(return = "posterior draws") %>%
 apply(c(2, 3), quantile, prob = 0.05) %>%
 as.table() %>%
 as.data.frame() %>%
 subset(Freq > 1.001)
## End(Not run)
```

pvEBayes\_tune

Select hyperparameter and obtain the optimal general-gamma or efron model based on AIC and BIC

## **Description**

This function performs hyperparameter tuning for the general-gamma or Efron model using AIC or BIC. For a given AE-drug contingency table, the function fits a series of models across a grid

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of candidate hyperparameter values and computes their AIC and BIC. The models with the lowest AIC or BIC values are selected as the optimal fits.

# Usage

```
pvEBayes_tune(
  contin_table,
  model = "general-gamma",
  alpha_vec = NULL,
  p_vec = NULL,
  c0_vec = NULL,
  use_AIC = TRUE,
  n_posterior_draws = 1000,
  return_all_fit = FALSE,
  return_all_AIC = TRUE,
  return_all_BIC = TRUE,
  tol_ecm = 1e-04,
  rtol_efron = 1e-10,
  E = NULL
)
```

# Arguments

contin_table	an IxJ contingency table showing pairwise counts of adverse events for I AEs (along the rows) and J drugs (along the columns).			
mode1	the model to be tuned. Available models are "general-gamma" and "efron". Default to "general-gamma". Note that the input for model is case-sensitive.			
alpha_vec	vector of hyperparameter alpha values to be selected. Alpha is a hyperparameter in general-gamma model which is numeric and between 0 and 1. If is NULL, a default set of alpha values (0, 0.1, 0.3, 0.5, 0.7, 0.9) will be used.			
p_vec	vector of hyperparameter p values to be selected. p is a hyperparameter in "efron" model which should be a positive integer. If is NULL, a default set of p values (80, 100, 120, 150, 200) will be used.			
c0_vec	vector of hyperparameter c0 values to be selected. c0 is a hyperparameter in "efron" model which should be a positive number. If is NULL, a default set of c0 values (0.001, 0.01, 0.1, 0.2, 0.5) will be used.			
use_AIC	logical, indicating whether AIC or BIC is used. Default to be TRUE.			
n_posterior_draws				
	number of posterior draws for each AE-drug combination.			
return_all_fit	logical, indicating whether to return all the fitted model under the selection. Default to be FALSE.			
return_all_AIC	logical, indicating whether to return AIC values for each fitted model under the selection. Default to be TRUE.			
return_all_BIC	logical, indicating whether to return BIC values for each fitted model under the selection. Default to be TRUE.			

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tol_ecm	a tolerance parameter used for the ECM stopping rule, defined as the absolute change in the joint marginal likelihood between two consecutive iterations. It is used when 'GPS', 'K-gamma' or 'general-gamma' model is fitted. Default to be 1e-4.
rtol_efron	a tolerance parameter used when 'efron' model is fitted. Default to 1e-10. See 'stats::nlminb' for detail.
E	A matrix of expected counts under the null model for the SRS frequency table. If NULL (default), the expected counts are estimated from the SRS data using 'estimate_null_expected_count()'.

#### Value

The function returns an S3 object of class pvEBayes containing the selected estimated model parameters as well as posterior draws for each AE-drug combination if the number of posterior draws is specified.

## References

Akaike H. A new look at the statistical model identification. *IEEE Transactions on Automatic Control*. 2003; 19(6):716-23.

Schwarz G. Estimating the dimension of a model. The Annals of Statistics. 1978; 1:461-4.

Tan Y, Markatou M and Chakraborty S. Flexible Empirical Bayesian Approaches to Pharmacovigilance for Simultaneous Signal Detection and Signal Strength Estimation in Spontaneous Reporting Systems Data. *Statistics in Medicine*. 2025; 44: 18-19, https://doi.org/10.1002/sim.70195.

# Examples

```
fit <- pvEBayes_tune(statin2025_44,
  model = "general-gamma",
  alpha_vec = c(0, 0.1, 0.3, 0.5, 0.7, 0.9)
)</pre>
```

statin2025

FDA statin dataset with 5119 adverse events

# **Description**

An adverse event-drug count dataset (contingency table) obtained from the FDA FAERS database for the quarters 2021Q1 - 2024Q4.

# Usage

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#### **Format**

An object of class matrix (inherits from array) with 5119 rows and 7 columns.

#### **Details**

The dataset catalogs 6 statin drugs (across columns): Atorvastatin, Fluvastatin, Lovastatin, Pravastatin, Rosuvastatin and Simvastatin.

Data are stored in the form of a contingency table, with drugs listed across the columns and the 5119 AEs presented across the rows. Each cell in the contingency table represents the total report counts associated with that (AE, drug) pair and detected in the FDA FAERS database during 2021Q1 - 2024Q4.

The dataset catalogs 6 statin drugs (across columns):

Atorvastatin, Fluvastatin, Lovastatin, Pravastatin, Rosuvastatin and Simvastatin.

The 5119 adverse events presented across the rows are AEs that contain at least one report for 6 statin drugs during 2021Q1 - 2024Q4.

This dataset is an updated version of statin from the pvLRT package which collects the same scope of AEs for 6 statin drugs for quarters 2014Q3 - 2020Q4.

#### Source

https://fis.fda.gov/extensions/FPD-QDE-FAERS/FPD-QDE-FAERS.html

statin2025\_44

FDA statin dataset with 44 adverse events

## **Description**

An adverse event-drug count dataset (contingency table) obtained from the FDA FAERS database for the quarters 2021Q1 - 2024Q4.

#### Usage

statin2025\_44

## **Format**

An object of class matrix (inherits from array) with 45 rows and 7 columns.

# Details

Data are stored in the form of a contingency table, with drugs listed across the columns and the 44 AEs presented across the rows. Each cell in the contingency table represents the total report counts associated with that (AE, drug) pair and detected in the FDA FAERS database during 2021Q1 - 2024Q4.

The dataset catalogs 6 statin drugs (across columns):

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Atorvastatin, Fluvastatin, Lovastatin, Pravastatin, Rosuvastatin and Simvastatin.

The 44 adverse events presented across the rows are considered significant by FDA.

This dataset is an updated version of statin46 from the pvLRT package which collect the same scope of AEs for 6 statin drugs for quarters 2014Q3 - 2020Q4.

During 2021Q1 - 2024Q4, there was no AE report for "BLOOD CREATINE PHOSPHOKINASE MM INCREASED" and "MYOGLOBIN BLOOD PRESENT". Therefore, these two AEs are not presented in the statin2025\_44 dataset.

#### Source

https://fis.fda.gov/extensions/FPD-QDE-FAERS/FPD-QDE-FAERS.html

statin42

FDA statin dataset with 42 adverse events

## **Description**

An adverse event-drug count dataset (contingency table) obtained from the FDA FAERS database for the quarters 2014Q3 - 2020Q4.

#### **Usage**

statin42

#### **Format**

An object of class matrix (inherits from array) with 43 rows and 7 columns.

#### **Details**

Data are stored in the form of a contingency table, with drugs listed across the columns and the 42 AEs presented across the rows. Each cell in the contingency table represents the total report counts associated with that (AE, drug) pair and detected in the FDA FAERS database during 2014Q3 - 2020Q4.

The dataset catalogs 6 statin drugs (across columns):

Atorvastatin, Fluvastatin, Lovastatin, Pravastatin, Rosuvastatin and Simvastatin.

This dataset is derived from the statin46 dataset in the pvLRT package, with four AEs removed.

The excluded AEs are: "Blood Creatine Phosphokinase Mm Increased", "Myoglobin Blood Present", "Myoglobin Urine Present", and "Myoglobinaemia".

## Source

https://fis.fda.gov/extensions/FPD-QDE-FAERS/FPD-QDE-FAERS.html

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summary.pvEBayes

Summary method for a pvEBayes object

# **Description**

This function defines the S3 summary method for objects of class pvEBayes. It provides a detailed summary of the fitted model.

# Usage

```
## S3 method for class 'pvEBayes'
summary(object, return = NULL, ...)
```

# **Arguments**

object a pvEBayes object, which is the output of the function pvEBayes or pvEBayes\_tune.

return a character string specifying which component the summary function should

return. Valid options include: "prior parameters", "likelihood", "detected signal" and "posterior draws". If set to NULL (default), all components will be returned

in a list. Note that the input for 'return' is case-sensitive.

... other input parameters. Currently unused.

#### Value

a list including estimated prior parameters, log\_marginal\_likelihood, indicator matrix of detected signal and posterior\_draws for each AE-drug pair.

# **Examples**

```
obj <- pvEBayes(
  contin_table = statin2025_44, model = "general-gamma",
  alpha = 0.5, n_posterior_draws = 10000
)
summary(obj)</pre>
```

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