

Endpoints in Subscreen Package Subgroup Analysis

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The subscreen package example uses **two survival endpoints** for comprehensive subgroup analysis of treatment effects.

1 Primary Endpoints

1.1 PFS (Progression-Free Survival)

```
1 template.event.pfs <- sample(c(0, 1), dim(pbcdat)[1], replace = TRUE)
2 template.timepfs <- sample(1:5000, dim(pbcdat)[1], replace = TRUE)
```

- **Event:** event.pfs (0 = no progression/death, 1 = progression/death)
- **Time:** timepfs (time to progression or death)
- **Source:** Randomly generated for demonstration
- **Range:** 1-5000 time units

1.2 OS (Overall Survival)

```
1 template.event.os <- pbcdat$event # Original PBC event data
2 template.timeos <- pbcdat$time # Original PBC time data
```

- **Event:** event.os (0 = alive, 1 = death)
- **Time:** timeos (time to death)
- **Source:** Original PBC dataset (real survival data)
- **Purpose:** Realistic survival analysis

2 Endpoint Usage in Analysis

2.1 Hazard Ratio Calculation

```

1 hazardratio <- function(D) {
2   # PFS hazard ratio
3   HRpfs <- tryCatch(
4     exp(coxph(Surv(D$timepfs, D$event.pfs) ~ D$trt)$coefficients[[1]]),
5     warning = function(w) {NA}
6   )
7
8   # OS hazard ratio
9   HRos <- tryCatch(
10    exp(coxph(Surv(D$timeos, D$event.os) ~ D$trt)$coefficients[[1]]),
11    warning = function(w) {NA}
12  )
13
14  data.frame(HR.pfs = round(1/HRpfs, 2), HR.os = round(1/HRos, 2))
15 }

```

2.2 Funnel Plot Specification

```

1 results_factorial_complement_true <- subscreenfunnel(
2   data = pbcdata,
3   H = results_factorial_complement_true1,
4   eval_function = hazardratio,
5   endpoints = c("timepfs", "event.pfs", "timeos", "event.os")
6 )

```

3 Endpoint Summary

Endpoint	Event Variable	Time Variable	Data Source	Purpose
PFS	event.pfs	timepfs	Synthetic	Demonstration
OS	event.os	timeos	Original PBC	Realistic analysis

4 Clinical Interpretation

4.1 Hazard Ratio Interpretation

For each subgroup, the analysis calculates hazard ratios where:

- **HR < 1:** Treatment benefit (reduces risk)
- **HR > 1:** Treatment harm (increases risk)
- **HR = 1:** No treatment effect

4.2 Dual-Endpoint Advantages

Using both PFS and OS endpoints allows:

1. **Consistency assessment:** Compare treatment effects across outcomes
2. **Differential effects:** Identify subgroups benefiting for one endpoint only

3. **Methodological demonstration:** Show multi-endpoint handling
4. **Clinical realism:** Reflect actual trial practice

5 Key Definitions

- **PFS:** Time from treatment start to disease progression or death (whichever occurs first). Common primary endpoint in oncology trials.
- **OS:** Time from treatment start to death from any cause. Gold standard endpoint in survival analysis.

This dual-endpoint approach provides a comprehensive framework for subgroup analysis that mirrors real clinical trial methodology.