

ECP 8506 Clinical Trial Simulations

The Nomenclature of Population Pharmacokinetics

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ECP 8506 Simulation Sciences

- Introduce basic concepts and nomenclature of nlme modeling
- The reason why is mrgsolve relies on many of the same concepts, and uses many of the same terms
- Simulations often take off where the model estimation process ends
- With modeling, we start with data and fit a model to the data
- With simulation, we start with the model and generate predictions for model qualification or for what-if scenarios

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Model = Equation = Function

- A MODEL → equation that produces a family of lines
 - $y = mx + b$
 - $C_p = D/V \exp(-kt)$
 - $E = E_{\max} \cdot C/(EC_{50} + C)$
- PARAMETERS (m, b, k, V, E_{max}, EC₅₀) impose a unique shape

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To start... ...we'll make it simple


- Consider the model for a straight line

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$y = mx + b$



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How Does This All Work?

- We start with data
 - From an EXPERIMENT
- Then we need a model that plausibly goes through the data
 - Up to the modeling scientist, guided by EXPERIENCE
 - (and there a lot of models to choose from)
- Then we need parameters for that model to specify a particular shape to best fit the model predictions to observed data
 - We most often turn parameter estimation over to ELECTRONS in a computer program
 - (and there are a lot of them to choose from)

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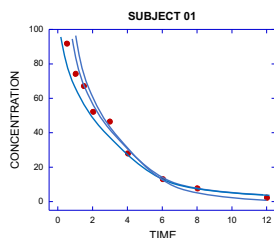
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We start with data

Then we propose a MODEL that might reasonably predict the data

Then we need to think about which parameters to choose to match the data



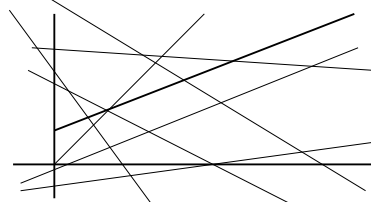
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$$y = mx + b$$



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Getting Parameters

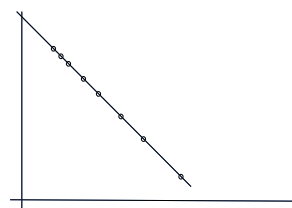
- Model
- Parameters
- What does it mean to have a line go through the data?

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Getting Parameters

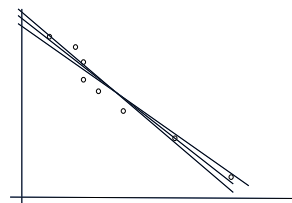
- Model
- Parameters
- What does it mean to have a line go through the data?
- Make the line go as close to as many of the data points as possible

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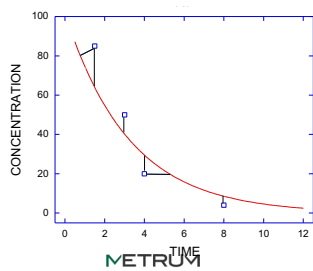
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Now time to get more quantitative



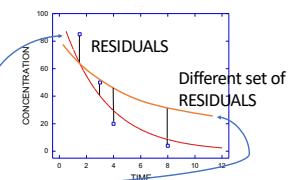
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What you need

- Observed data
- Model
 $C_p = D/V \exp(-kt)$
- Model parameters
 $V = 48L$
 $K = 0.412 \text{ hr}^{-1}$

Predicted data
 $V = 42L$
 $K = 0.356 \text{ hr}^{-1}$



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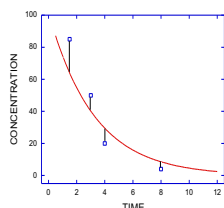
14

Nonlinear Regression Time to get more mathematical

$$SSQ = \sum (C_{obs} - C_{pred})^2$$

where

C_{obs} are the data
 $C_{pred} = D/V \cdot \exp(-kt)$
 D is dose
 t is time
 k is a first-order rate constant
 V is volume of distribution



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Nonlinear Regression Algorithm

1. You must give initial starting values for each parameter in your model
2. Computer calculates the SSQ
3. Search for another parameter set (i.e., new pair of CL , V)
4. Compute new SSQ
5. If new SSQ is lower; loop back to 3, or
6. Stop when a lower SSQ cannot be found

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Terms from estimation you need for Simulation

- Model
- Parameters
- Observed data
- Predicted data (i.e., simulated under the model)
- Residuals

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Objective Function Value

$$OFV_{OLS} = \sum_j (C_{ij,obs} - C_{ij,pred})^2$$

where

in individual i , at time j

$$C_{ij,pred} = \frac{D_i}{V_i} \exp\left(\frac{-CL_i}{V_i} \times t_{ij}\right)$$

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Analytical Variability

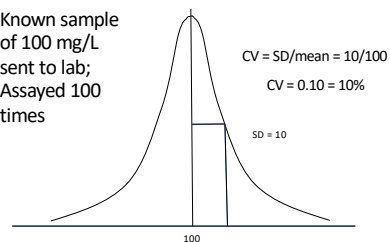
- With most analytical systems, the noise of the response increases in proportion to the signal
- Constant S/N ratio
- Constant Coefficient of Variation (CV)
 $CV = SD/mean$
- Analytical variability is usually 5-10%; acceptable up to 20% (FDA)

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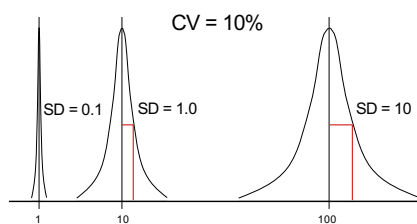
Known sample
of 100 mg/L
sent to lab;
Assayed 100
times



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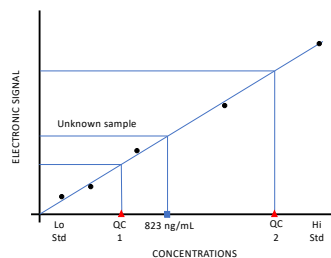
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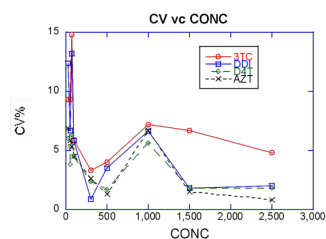
ZIDOVUDINE
QCs

Sample	75	300	1500
1	75.3	306	1567
2	78.2	299	1553
3	72.6	305	1532
4	69.1	302	1525
5	69.4	287	1510
mean	72.9	300	1537
SD	3.89	7.66	22.66
CV%	5.30%	2.60%	1.50%

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So why is all this important?

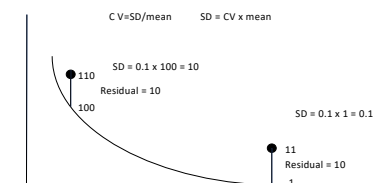
- An assumption of nonlinear regression is that the variance at all observations is equal
- Homoscedasticity
- Clearly not what we have in PK systems

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Heteroscedasticity



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Objective Function Value (WLS)

$$OFV_{WLS} = \sum_j \frac{(C_{ij,obs} - C_{ij,pred})^2}{W_{ij}}$$

where
in individual i , at time j

$$C_{ij,pred} = \frac{D_i}{V_i} \exp(-CL_i / V_i \times t_{ij})$$

$$W_{ij} = \text{weight} = \text{variance} = SD^2 = (CV \times C_p)^2$$

Residuals (RES)
are now
Weighted Residuals
(WRES)

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Terms from estimation you need for Simulation

- Model
- Parameters
- Observed data
- Predicted data (i.e., simulated under the model)
- Residuals
- **Weighted residuals (WRES)**

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NLME Population Pharmacokinetics

- Experimental unit is the population, not the individual
- The PK parameters of interest are POPULATION means and variances, not those in any individual subject
- Pool ALL data from ALL subjects and analyze them simultaneously

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PopPK Modeling four models

- PK model
 - Covariate model
 - Between subject variability (BSV)
Interindividual variability
 - Residual unexplained variability (RUV)
Intraindividual variability
- ALL FOUR MODELS ALSO APPLY TO SIMULATION

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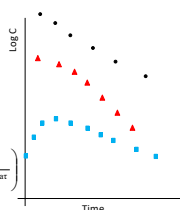
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PK Model

$$C_p = D/V \exp^{-kt}$$

$$\text{Rate of elim} = V_{\max} \times C / (K_m + C)$$

$$C_p = \frac{F \times D \times K_a}{V \times (K_a - K)} \times \left(\frac{\exp^{-K_t}}{1 - \exp^{-K_t}} - \frac{\exp^{-K_{at}}}{1 - \exp^{-K_{at}}} \right)$$



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Covariate Model

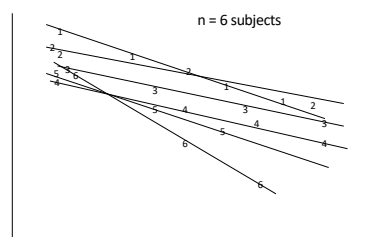
- Covariates help us understand what patient-specific characteristics are important determinants of PK parameters
- The covariate model specifies a mathematical relationship between a PK parameter and the covariate (*fixed effects*)
- usually requires the addition of another parameter in the model

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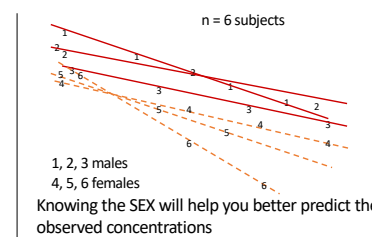
Categorical Covariates



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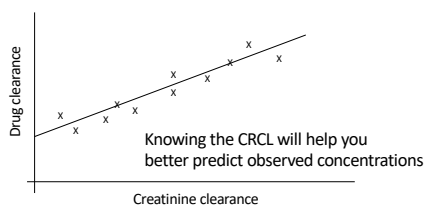


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Continuous Covariates



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NONMEM "Typical Value" notation

- TVCL, TVV, TVEmax, TVEC50
- Typical values of PK/PD parameters in the population
- Population-level values (not individual values)
- Think about it like a population average

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Regression Parameters

- THETAs are the labels used for the regression parameters
- $y = mx + b$

$$y = \text{THETA}(1) * x + \text{THETA}(2)$$
- USING NONMEM TV notation

$$\text{TVslope} = \text{THETA}(1)$$

$$\text{TVintercept} = \text{THETA}(2)$$

$$y = \text{TVslope} * x + \text{TVintercept}$$

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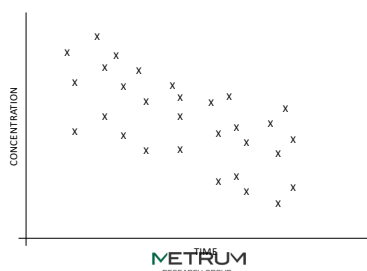
NONMEM Typical Value notation

- PK parameters vs. Regression parameters
 - PK/PD models can get complex, and each "PK parameter" might have multiple regression parameters
- $$\text{TVCL} = \text{THETA}(1) + \text{THETA}(2) * \text{CLCR}$$
- $$\text{TVV} = \text{THETA}(3) \text{ if male, or}$$
- $$\text{TVV} = \text{THETA}(4) \text{ if female}$$

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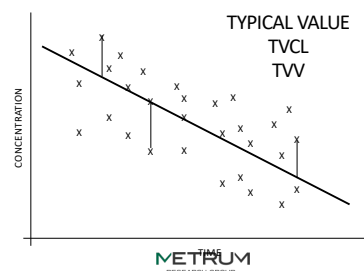
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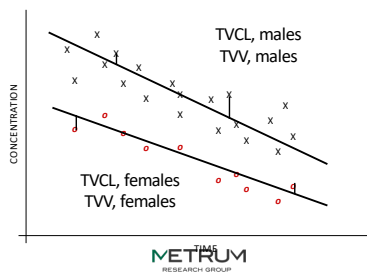
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Categorical Covariates

- Often modeled as a fractional multiplier

$$\text{TVCL} = \text{THETA}(1)$$

$$\text{IF (SEX.EQ.0) TVCL} = \text{TVCL} * \text{THETA}(2)$$
- THETA(1) is the TVCL for males
- THETA(2) is the fraction by which the male TVCL is multiplied to get the female TVCL
- THETA(1)=4.0; THETA(2)=0.75
- TVCLmale = 4.0; TVCLfemale = 4.0 x 0.75 = 3.0

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Continuous Covariates

- $TVCL = THETA(1) * (WT/70) ** THETA(2)$
 - Allows a bend in the relationship
 - Usually a more stable parameterization
 - $THETA(1)$ is the TVCL for a standard 70kg subject
 - $THETA(2) \sim 0 \rightarrow$ no relationship with WT
 - $THETA(2) \sim 1 \rightarrow$ CL proportional with WT
- You might choose the denominator as a reference value
- Often chosen as the median, or the mean of the covariate

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Terms from estimation you need for Simulation

- Model
- Parameters
- Observed data
- Predicted data (i.e., simulated under the model)
- Residuals
- Weighted residuals
- Typical Value notation (TVCL, TVV, etc.)
- Fixed effects
- Covariate models

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Limitation to Fixed-effects

- Not all 32 yo, 6'4", 84 kg, *1*3 males with a CRCL of 93 mL/min will have the same actual CL that is being predicted by the regression equation
- PopPK is interested in means and variances
- How can we formalize the notion that not everyone is at the mean?

RANDOM EFFECTS

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More NONMEMese

- η (ETA)
- The difference between an individual's true parameter (e.g., CL_i) and that **predicted** by the regression equation (TVCL_i)
 - e.g., $TVCL_i = THETA(1) * WT_i$
 - $CL_i = TVCL_i + \eta_i$

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Between Subject Variability (BSV) Model

- $TVCL = THETA(1) + THETA(2) * WT + \dots$
 $CL = TVCL + \eta(1)$
- An individual may have a CL different from the TV, even AFTER that TVCL has been adjusted for WT, SEX, RACE, AGE, etc.
- Similar for V, etc.
 $V = TVV + \eta(2)$

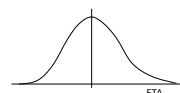
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Random Variable

- Not really interested in individual ETAs
- We really want the variance of the distribution of ETAs



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Random Variable

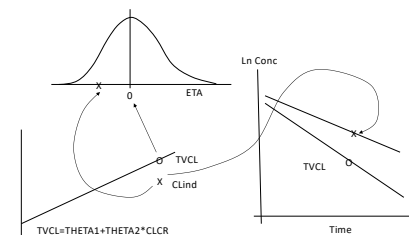
- ETAs are a RANDOM variable because they are defined ONLY as a distribution with a mean and estimable variance (OMEGA^2)
- The variance of the ETAs relates directly to the variance of the PK parameter



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BSV: Additive Model

$CL = TVCL + \text{ETA}(1)$

- In this additive model, the SD of the ETAs (OMEGA) is the SD of the parameter in the population
- $\text{OMEGA}(1)^2 = 16$
SD of CL is 4.0

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BSV Model

- However, biological parameters are often right (positively) skewed because they are bounded by zero at the low end
- Better approximated using a log normal distribution
- Normal distribution in the log world

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BSV: Exponential Model

$CL = TVCL * \text{EXP}(\text{ETA}(1))$

$$\log CL = \log TVCL + \text{ETA}(1)$$

- In this exponential model, OMEGA is the variability expressed as the CV in the population
- If $\text{OMEGA}(1)^2 = 0.09$
CV of CL is 30% ($\text{SQRT } 0.09 = 0.30$)

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Terms from estimation you need for Simulation

- Model
- Parameters
- Observed data
- Predicted data
- Residuals
- Weighted residuals
- Typical Value notation
- Fixed effects
- Covariate models
- Random effects
- BSV/IIIV
- ETA
- Omega

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Residual Unexplained Variability (RUV) Model

- Even after you get the right PK model
- and even after you take into account all the covariates that are predictive,
- and even after you allow BSV to account for differences in PK parameters
- You still cannot perfectly predict most concentrations

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Sources of RUV

- Analytical errors
- Model misspecification
- Errors in recording time of dose
- Errors in recording time of blood draws
- Compliance issues
- Content uniformity of dosage forms

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More NONMEMese

- Epsilon (ϵ)
- The difference between the observed concentration and the concentration predicted by the model
- $C_{obs} = C_{pred} + \epsilon$

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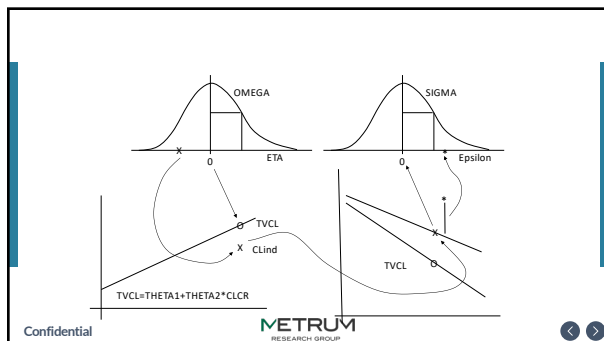
RUV

- We don't have an interest in any particular difference, only the collection of them
- Epsilon is another RANDOM variable
- Defined by a mean and a variance ($SIGMA^2$)
- The estimated variance of the Epsilons is an estimate of how much variability remains in the system after you take into account the PK, covariate, and BSV models

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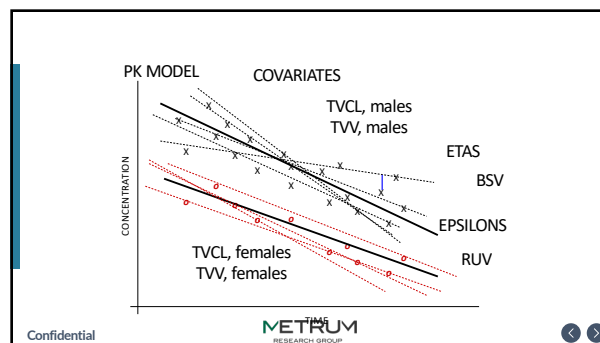
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RUV: Additive Error Model

$$Y = F + \text{EPS}(1)$$

- Observation
- Prediction
- Error

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RUV: Additive Error Model

$$Y = F + \text{EPS}(1)$$

- Constant SD across all concentrations
- SD of the epsilons (SIGMA) is the SD of the residual unexplained errors
- $\text{SIGMA}^2 = 5.29$
- SD RUV = +/- 2.3 mg/L
- May be appropriate with concentrations over a limited range, such as TDM data

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RUV: Proportional Error Model

$$Y = F + F \cdot \text{EPS}(1)$$

- Observation
- Prediction
- Error

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RUV: Proportional Error Model

$$Y = F + F \cdot \text{EPS}(1)$$

- Constant CV model
- The SD of the epsilons (SIGMA) is the CV of the RUV
- $\text{SIGMA}^2 = 0.0234$
- CV% RUV = 15.3%
- Absolute error is usually smaller at lower concentrations, increases with observation

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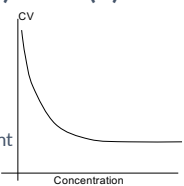
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Combined Error Model

$$Y = F + F \cdot \text{EPS}(1) + \text{EPS}(2)$$

- Proportional component
- Additive component
- At low Cp, $F \cdot \text{EPS}(1)$ is insignificant and $\text{EPS}(2)$ dominates
- At high Cp, $\text{EPS}(2)$ is insignificant and $F \cdot \text{EPS}(1)$ dominates
- CV decreases and plateaus



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Terms from estimation you need for Simulation

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- Typical Value notation
- Fixed effects
- Covariate models
- Random effects
- BSV/IIV
- ETA
- Omega
- RUV
- Epsilon
- Sigma

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PRED vs. IPRED

- **PRED** is the prediction based on the population-based (TV) regression equations

$$TVCL = THETA(1) + THETA(2) * WT + \dots$$
- All the ETAs are set to zero

$$C_{pred} = D / TVV * \exp[-(TVCL / TVV) * t]$$
- **IPRED** is the prediction based on CL_i , not $TVCL_i$, with individual ETAs calculated

$$CL_i = TVCL_i + ETA(1) \quad V_i = TVV_i + ETA(2)$$

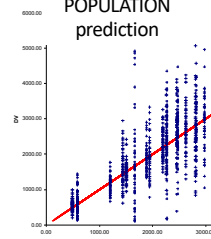
$$C_{ipred} = D / V_i * \exp[-(CL_i / V_i) * t]$$

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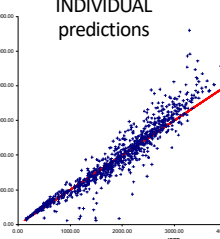
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PRED is based on
POPULATION
prediction



IPREDs are from
INDIVIDUAL
predictions



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WRES vs CWRES

- **WRES** are calculated using the **PRED**, and then weighted
- It's a historical definition
- **CWRES** are calculated with the RES based on **IPREDs**, and then weighted
- You will usually see CWRES in plots rather than WRES

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```

:: 1. Based on: 001
:: 2. Description: 1-comp iv, linear elim
:: 3. Label:
:: x1. Author:

$PROBLEM PK
$INPUT C ID TIME DV AMT CMT MDV EVID WT CRCL AGE SEX CENT
$DATA demo.csv IGNORE=@
$SUBROUTINES ADVAN1 TRANS2

$PK
CL = THETA(1) * EXP(ETA(1))
V = THETA(2) * EXP(ETA(2))
S1 = V

$ERROR
IPRED = F
W = F
Y = IPRED * F * EPS(1) + EPS(2)
IRES = DV - IPRED
IWRES = IRES / W

```

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```

$THETA
(0, 10) ; CL
(0, 100) ; V

$OMEGA
(0, 1) ; IIV CL
(0, 1) ; IIV V1

$SIGMA
0.01 ; PROP
1 ; ADD

$EST METHOD=1 INTER MAXEVAL=2000 SIG=3 PRINT=1
$COV

; Xpose
$TABLE ID TIME DV MDV EVID IPRED IWRES CWRES ONEHEADER NOPRINT
FILE=sdtab001.tab
$TABLE CL V ONEHEADER NOPRINT FIRSTONLY FILE=patab001.tab

```

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NONMEM DATASETS Rules and Structure

- Numbers only
- NO alpha characters
- No symbols

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NONMEM DATASETS Rules and Structure

- EVENT RECORD: Each row of the data set
- Only one type of event can occur per record
 - AMT event (dose)
 - DV (observation) event
 - OTHER type occasionally used (e.g., covariate changes)
- Each AMT and DV (drug conc, metabolite conc, or PD effect) must EACH be on different rows
- EVEN IF AT THE SAME TIME!!!

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NONMEM DATASETS Rules and Structure

- All records from an individual MUST be contiguous
- Within each individual, all records must be in time order
 - But there is a way to reset the system back to TIME=0
 - Handy for multiple doses

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75

Example Data Records

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
	1	0	0	500	58.4	51	4.49	1	1
	1	1	1.67	0	58.4	51	4.49	1	1
	1	4	2.79	0	58.4	51	4.49	1	1
	1	10	0.58	0	58.4	51	4.49	1	1
	1	24	0.14	0	58.4	51	4.49	1	1
	2	0	0	500	79.3	53	5.05	0	1
	2	1	1.32	0	79.3	53	5.05	0	1

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76

IGNORE=@ IGNORE=C in \$DATA

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
	1	0	0	500	58.4	51	4.49	1	1
	1	1	1.67	0	58.4	51	4.49	1	1
	1	4	2.79	0	58.4	51	4.49	1	1
	1	10	0.58	0	58.4	51	4.49	1	1
	1	24	0.14	0	58.4	51	4.49	1	1
	2	0	0	500	79.3	53	5.05	0	1
	2	1	1.32	0	79.3	53	5.05	0	1

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77

An ID column is required for NONMEM

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L/hr	1=Y	1=M
	1	0	0	500	58.4	51	4.49	1	1
	1	1	1.67	0	58.4	51	4.49	1	1
	1	4	2.79	0	58.4	51	4.49	1	1
	1	10	0.58	0	58.4	51	4.49	1	1
	1	24	0.14	0	58.4	51	4.49	1	1
	2	0	0	500	79.3	53	5.05	0	1
	2	1	1.32	0	79.3	53	5.05	0	1

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78

DV column is required for NONMEM

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L/hr	1=Y	1=M
	1	0	0	500	58.4	51	4.49	1	1
	1	1	1.67	0	58.4	51	4.49	1	1
	1	4	2.79	0	58.4	51	4.49	1	1
	1	10	0.58	0	58.4	51	4.49	1	1
	1	24	0.14	0	58.4	51	4.49	1	1
	2	0	0	500	79.3	53	5.05	0	1
	2	1	1.32	0	79.3	53	5.05	0	1

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79

TIME column is required

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L.hr	1=Y	1=M
1	0	0	500	58.4	51	4.49	1	1	
1	1	1.67	0	58.4	51	4.49	1	1	
1	4	2.79	0	58.4	51	4.49	1	1	
1	10	0.58	0	58.4	51	4.49	1	1	
1	24	0.14	0	58.4	51	4.49	1	1	
2	0	0	500	79.3	53	5.05	0	1	
2	1	1.32	0	79.3	53	5.05	0	1	

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80

AMT column is required

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L.hr	1=Y	1=M
1	0	0	500	58.4	51	4.49	1	1	
1	1	1.67	.	58.4	51	4.49	1	1	
1	4	2.79	.	58.4	51	4.49	1	1	
1	10	0.58	.	58.4	51	4.49	1	1	
1	24	0.14	.	58.4	51	4.49	1	1	
2	0	0	500	79.3	53	5.05	0	1	
2	1	1.32	0	79.3	53	5.05	0	1	

\$INPUT ... DOSE=AMT ...

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81

MUST be sequenced in TIME order

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L.hr	1=Y	1=M
1	0	0	500	58.4	51	4.49	1	1	
1	1	1.67	0	58.4	51	4.49	1	1	
1	4	2.79	0	58.4	51	4.49	1	1	
1	10	0.58	0	58.4	51	4.49	1	1	
1	24	0.14	0	58.4	51	4.49	1	1	
2	0	0	500	79.3	53	5.05	0	1	
2	1	1.32	0	79.3	53	5.05	0	1	

NMTRAM is going to check to make sure DV and AMT are not BOTH positive

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82

No covariates are required for NONMEM

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L.hr	1=Y	1=M
1	0	0	500	58.4	51	4.49	1	1	
1	1	1.67	0	58.4	51	4.49	1	1	
1	4	2.79	0	58.4	51	4.49	1	1	
1	10	0.58	0	58.4	51	4.49	1	1	
1	24	0.14	0	58.4	51	4.49	1	1	
2	0	0	500	79.3	53	5.05	0	1	
2	1	1.32	0	79.3	53	5.05	0	1	

As such, NO rule to use WT, WGT, SIZE, TBW, IBW etc.

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83

RATE column is recognized by PREDPP

C	ID	TIME	DV	AMT	RATE	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	mg/hr	yr	L.hr	1=Y	1=M
1	0	0	500	500	51	4.49	1	1	
1	1	1.67	0	.	51	4.49	1	1	
1	4	2.79	0	.	51	4.49	1	1	
1	10	0.58	0	.	51	4.49	1	1	
1	24	0.14	0	.	51	4.49	1	1	
2	0	0	500	1000	53	5.05	0	1	
2	1	1.32	0	.	53	5.05	0	1	

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84

C	ID	TIME	DV	AMT	WT	AGE	CRCL	SMK	SEX
C		hr	mg/L	mg	kg	yr	L.hr	1=Y	1=M
1	0	.	500	58.4	51	4.49	1	1	
1	1	96	.	58.4	51	4.49	1	1	
1	12	55	.	58.4	51	4.49	1	1	
1	12	.	250	58.4	51	4.49	1	1	
1	24	9.3	.	57.1	51	4.49	1	1	
1	24	.	250	57.1	51	4.49	1	1	
1	48	5.1	.	57.5	51	5.05	1	1	

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85

Multiple doses can be administered

Or give implicit doses using two new PREDPP-defined data items
ADDL item with Interdose Interval (II) item

C	ID	TIME	DV	AMT	ADDL	II	WT
	1	0	.	500	5	24	58.4
	1	132	67	.	.	.	57.1

ADDL will give 5 ADDITIONAL doses identical to the one
on this record, given at the interval indicated on II.

NMTRAN keeps track of the elapsed time.

nb: May or may not be at SS by 132 hours

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C	ID	TIME	DV	AMT	SS	II	WT	AGE
C		hr	mg/L	mg			kg	yr
	1	0	.	500	.	.	58.4	51
	1	2	96	.	.	.	58.4	51
	1	12	55	.	.	.	58.4	51
	2	0	.	500	1	24	57.1	51
	2	0	34	.	.	.	57.1	51
	2	2	143	.	.	.	57.1	51
	2	12	67	.	.	.	57.1	51
	2	26	57.1	51

500mg has been given every 24h for a gazillion dose
BUT... 500mg at time=0 is the last dose given
(without additional dosing recs)

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MDV

- Missing Dependent Variable
 - 1 = DV missing (i.e., usually a dose event)
 - 0 = DV not missing (i.e., an Observation record)
- Required by NONMEM
- NMTRAN will append this column in FDATA if
you don't provide it

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88

EVID

- Event ID
 - 0 = observation event
 - 1 = dosing record
 - 2 = other record
 - 3 = resets time and zeroes out compartments
 - 4 = resets time and compartments, AND gives another dose,
using the same event record
- Required by PREDPP
- NMTRAN will append it to FDATA

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89

EVID=4 zeroes out ALL compartments; resets TIME; AND...

C	ID	TIME	DV	AMT	SS	II	EVID	MDV	WT
C		hr	mg/L	mg					
	1	0	.	500	.	.	1	1	77
	1	1	96	.	.	.	0	0	77
	1	12	55	.	.	.	0	0	77
	1	0	.	500	1	24	4	1	81
	1	24	34	.	.	.	0	0	81
	1	24	.	1000	1	24	4	1	89
	1	36	67	.	.	.	0	0	89

AND gives the DOSE specified on the record

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This last dose could be months later

C	ID	TIME	DV	AMT	SS	II	EVID	MDV	WT
C		hr	mg/L	mg					
	1	0	.	500	.	.	1	1	77
	1	1	96	.	.	.	0	0	77
	1	12	55	.	.	.	0	0	77
	1	0	.	500	1	24	4	1	81
	1	24	34	.	.	.	0	0	81
	1	24	.	1000	1	24	4	1	89
	1	36	67	.	.	.	0	0	89

EVID=4 zeroes out ALL compartments; resets TIME=0 or TIME=24
(or whatever); AND with SS=1, puts the system at a NEW steady state

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91

