



MRC
Biostatistics
Unit



UNIVERSITY OF
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Adaptive Methods in Clinical Research

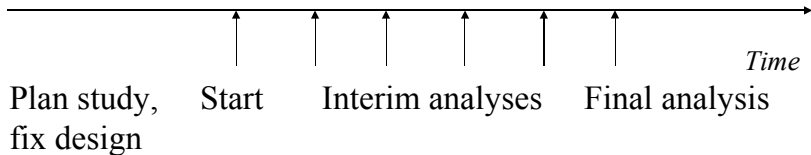
Lecture 8: Fully adaptive designs

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Adaptive Designs



At each interim

- decide whether or not to stop
- change sample size
- drop or add a dose
- change the endpoint
- change the question

Fisher's combination method

	First stage	Second stage
Observations	n_1	n_2
one-sided p-value	p_1	p_2

- p-values need to be independent
- Combine the evidence from the two stages via taking product of p-values from both stages
- Under H_0 , $-2 \log(p_1 \times p_2) \sim \chi_4^2$ (Fisher, 1932)

The null distribution of a p-value

Consider a test of $H_0 : \theta = 0$ vs $H_1 : \theta > 0$, based on a continuously distributed test statistic $T(\mathbf{x})$ computed from data \mathbf{x} .

Let p denote the resulting one-sided p-value

$$p = \mathbb{P}(T \geq t | \theta = 0)$$

where T denotes the random value and t the observed value of the test statistic.

p itself is an observed value of a random variable P , and the probability $\mathbb{P}(P \leq p | \theta = 0) = p$.

That is, under H_0 , P is uniformly distributed on $(0, 1)$.

under H_0

$$p_1 \sim U(0, 1) \quad \text{and independently} \quad p_2 \sim U(0, 1)$$

Hence

$$-\log(p_1) \sim \text{Exp}(1) \quad \text{and} \quad -\log(p_2) \sim \text{Exp}(1)$$

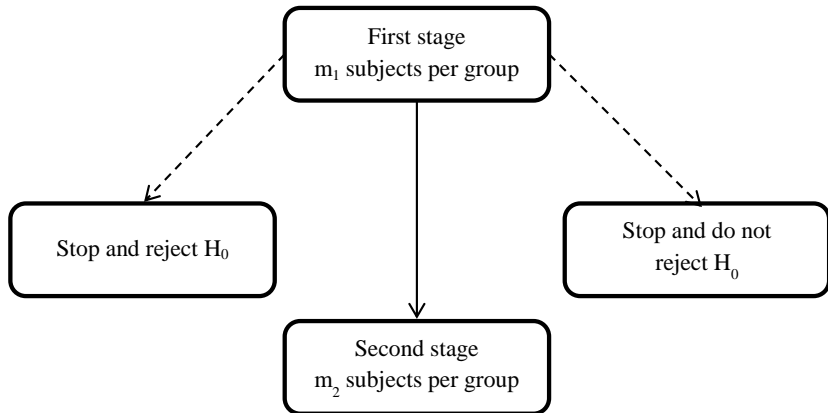
and so

$$-\log(p_1 p_2) = -\log(p_1) - \log(p_2) \sim \text{Ga}(2, 1)$$

and therefore

$$-2 \log(p_1 p_2) \sim \text{Ga}\left(\frac{4}{2}, \frac{1}{2}\right) = \chi_4^2$$

Two-stage design with early stopping



- Proposed by Bauer & Köhne (1994)
- Stage 1 and Stage 2 need to be independent

Two-stage design with early stopping

The upper 0.975 point of the χ_4^2 distribution is 11.14. Setting $\alpha = 0.025$ (one-sided), we will PROCEED to claim that $E > C$ if

$$-2 \log(p_1 p_2) \geq 11.14$$

or equivalently if

$$p_1 p_2 \leq 0.0038$$

If after the first stage, we already know that

$$p_1 \leq 0.0038$$

then there is no need to conduct the second stage: we will PROCEED to claim that $E > C$

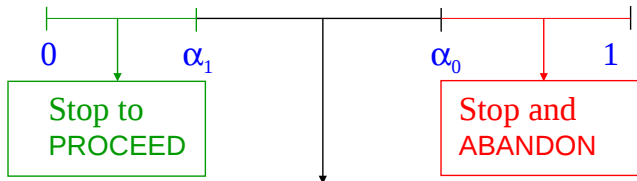
– curtailed sampling

Two-stage design with early stopping

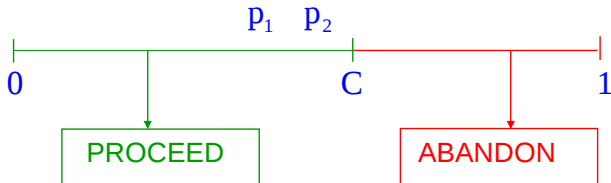
The full procedure is as shown:

– for $\alpha = 0.025$, $\alpha_1 = 0.0038$

First stage:



Second stage:

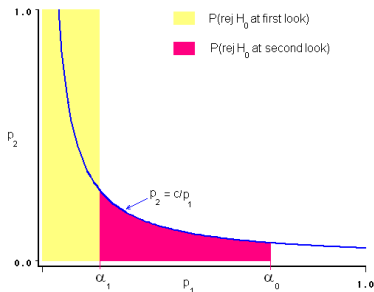


Two-stage design with early stopping

If the early PROCEED boundary is set at α_1 and the early ABANDON boundary is set at α_0 , then in order to achieve an overall one-sided type I error rate of α ,

$$C = \frac{\alpha - \alpha_1}{\log(\alpha_0) - \log(\alpha_1)}$$

found by integration



Two-stage design with early stopping

Hence

$$\begin{aligned}\alpha &= \alpha_1 + \int_{\alpha_1}^{\alpha_0} \frac{c}{p_1} dp_1 \\ &= \alpha_1 + c \left[\log(p_1) \right]_{\alpha_1}^{\alpha_0} \\ &= \alpha_1 + c \left[\log(\alpha_0) - \log(\alpha_1) \right]\end{aligned}$$

so that

$$c = \frac{\alpha - \alpha_1}{\log(\alpha_0) - \log(\alpha_1)}$$

Beyond 2 stages

- Wassmer (1999) extended this approach to any number of stages
- At the i^{th} interim analysis calculate the product of p-values
 1. Stop and PROCEED if $p_1 \times \dots \times p_i \leq c_i$
 2. Stop and ABANDON if $p_i \geq \alpha_{0i}$
 3. Use a recursive method to find c_1, \dots, c_k and $\alpha_{01}, \dots, \alpha_{0k}$ satisfying some chosen constraints
- Calculations become more complex as number of stages increases
- All stages equally weighted

For group sequential trials we need test statistics B_i and V_i which, under the null hypothesis, satisfy

- $B_i \sim N(0, V_i)$
- increments $(B_i - B_{i-1})$ between interims are independent

Regardless of where these statistics come from

Note:

$$Z = \frac{B}{\sqrt{V}}$$

where B is the score statistic and V is the Fisher information.

Transforming the p-value

Let

$$Z = \Phi^{-1}(1 - P)$$

where Φ denotes the $N(0, 1)$ distribution function

Then

$$\begin{aligned}\mathbb{P}(Z \leq z | \theta = 0) &= \mathbb{P}(\Phi^{-1}(1 - P) \leq z | \theta = 0) \\ &= \mathbb{P}((1 - P) \leq \Phi(z) | \theta = 0) \\ &= \mathbb{P}(P \geq 1 - \Phi(z) | \theta = 0) \\ &= \Phi(z)\end{aligned}$$

so that $Z \sim N(0, 1)$.

Combining the p-values

Consider tests of $H_{i0} : \theta_i = 0$ vs $H_{i1} : \theta_i > 0$, based on independent, sequentially available data sets \mathbf{x}_i , with corresponding one-sided p-values, p_i , $i = 1, \dots, k$

Then

$$Z_i = \Phi^{-1}(1 - P_i), \quad i = 1, \dots, k$$

are independent $N(0, 1)$ random variables, and

$$Y_i = W_i \Phi^{-1}(1 - P_i), \quad i = 1, \dots, k$$

are independent $N(0, W_i^2)$ random variables.

Now put

$$B_i = Y_1 + \dots + Y_i \quad V_i = W_1^2 + \dots + W_i^2$$

Then if all null hypotheses $H_{i0} : \theta_i = 0$ are true,

- $B_i \sim N(0, V_i)$
- increments $(B_i - B_{i-1})$ between interims are independent

So, if these statistics are plotted and compared with sequential stopping boundaries, then the required type I error will be achieved.

Applications

1. Hypotheses H_{i0} could all be the same: $\theta = 0$, based on independent data \mathbf{x}_i , each comprising the new data only observed between the i^{th} and the $(i-1)^{th}$ interim analyses

 \Rightarrow the sample size, allocation ratio or other design features concerning the i^{th} dataset can depend on previous data
2. The hypotheses H_{i0} could concern different endpoints (mortality, time to progression, tumour shrinkage), or different test statistics (logrank, Wilcoxon, binary) based on independent groups of patients

 \Rightarrow the endpoint or test statistic could be changed between interim analyses, provided that H_0 : “the treatments are identical” is to be tested

Example: Group sequential trials

Suppose that $H_0: \theta = 0$ is tested against $H_1: \theta > 0$ at the i^{th} interim, based on the group sequential statistic $(B_i - B_{i-1})$.

Corresponding one-sided p-values, P_i , are

$$P_i = 1 - \Phi \left(\frac{B_i - B_{i-1}}{\sqrt{V_i - V_{i-1}}} \right)$$

Put $W_i^2 = (V_i - V_{i-1})$, so that

$$\begin{aligned} Y_i &= W_i \Phi^{-1}(1 - P_i) \\ &= \sqrt{V_i - V_{i-1}} \Phi^{-1} \left(\Phi \left(\frac{B_i - B_{i-1}}{\sqrt{V_i - V_{i-1}}} \right) \right) \\ &= (B_i - B_{i-1}) \end{aligned}$$

It follows that

$$B_i = Y_1 + \cdots + Y_i = B_i \quad \text{and} \quad V_i = W_1^2 + \cdots + W_i^2 = V_i$$

so that the inverse normal approach and the group sequential approach are identical in this case.

This is a good thing!

It means that the approach is built on solid foundations

Closed testing

Treatments: k experimentals T_1, \dots, T_k
one control T_0

Adaptive designs tend to use pairwise comparisons i.e.
individually test each $H_{0,i}: \theta_i = 0$

To strongly control the type I error rate for testing multiple hypotheses closed testing procedures are used (Marcus et al., 1976)

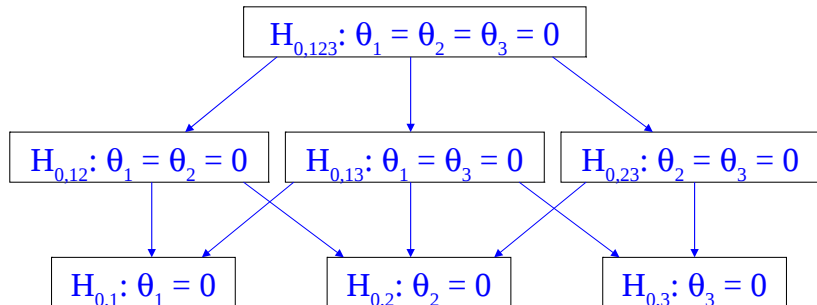
Consider one stage only

Closed testing procedure

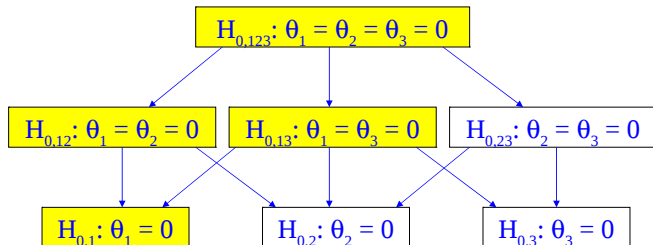
Form a family of H_0 's from all possible intersections of $H_{0,i}$'s

Reject $H_{0,i}$ at level α , iff all H_0 's that imply $H_{0,i}$ are rejected at level α .

e.g. 3 experimental treatments



Reject $H_{0,1} : \theta_1 = 0$, iff we reject



Let I be a set of m individual hypotheses from k ($m \leq k$)
 $H_{0,I}$ denote the intersection hypothesis

$$H_{0,I} = \bigcap_{i \in I} H_{0,i}$$

e.g. if $I = \{1, 2\}$ then $H_{0,I} = H_{0,12}$

p-values for intersection hypotheses

We need to calculate p -value p_I to test $H_{0,I}$

Suppose we calculate a p -value, p_i , for each $H_{0,i} : \theta_i = 0$

Bonferroni correction

$$p_I = m \times \min(p_i)$$

where m is the number of indices in I

e.g. $k = 3$, $p_1 = 0.2$, $p_2 = 0.05$, $p_3 = 0.03$

then for $I = \{2, 3\}$ we find $m = 2$, $p_I = 0.03 \times 2 = 0.06$

Dunnnett p -values are valid for multiple comparisons against a common control.

Compute a standardised test statistic Z_i for each $H_{0,i} : \theta_i = 0$. Let z^* be the maximum of the observed z values for $H_{0,i}$, $i \in I$.

Then the Dunnnett p -value is

$$\mathbb{P}\{\max_{i \in I} Z_i > z^*\}$$

calculated assuming that $\{Z_i\}_{i \in I}$ follow a multivariate normal joint distribution with each $Z_i \sim N(0, 1)$ and $\text{cov}(Z_i, Z_j) = 0.5$ for $i \neq j$.

Recall our previous example:

$k = 3$, $p_1 = 0.2$, $p_2 = 0.05$, $p_3 = 0.03$.

which correspond to $z_1 = 0.842$, $z_2 = 1.645$, $z_3 = 1.881$.

For $I = \{2, 3\}$ we find $z^* = 1.881$, $p_I = 0.054$.

Using closed testing procedure we therefore need to conduct tests for $(2^k - 1)$ hypotheses.

For each hypothesis, $H_{0,l}$ calculate a p-value from data collected at stage j , $p_{l,j}$

Take p-values for $H_{0,l}$ convert into a test statistic e.g. using the inverse normal method as

$$Y_{l,j} = \frac{1}{\sqrt{j}} \sum_{i=1}^j \Phi^{-1} (1 - p_{l,i})$$

Compare test statistic for $H_{0,l}$ using the **same boundaries** calculated as for the two treatments (T_1 and T_0) case, as

adaptive approach adjusts for the multiple treatments via the p -values, not via the boundaries.

Stop for efficacy

When conclude at least one T_i is superior to T_0 via the closed testing procedure

i.e when all test statistics for those H_0 's that imply $H_{0,i}$ crosses the upper boundary, u_j

Stop for futility

When test statistic for global H_0 crosses the lower boundary, l_j or when maximum number of looks is reached

- Sample size calculations
 - ▶ difficult under complex rules
 - ▶ larger than specialised methods
- Can do other adaptations, e.g.
 - ▶ select populations
 - ▶ Changing the primary endpoint
 - ▶ Changing the trial objective (such as switching from non-inferiority to superiority)
 - ▶ sample size re-estimation
- Ordering in treatment effects could be incorporated into closed testing procedure