# The Effect of Dosage Errors and Step Selection Method on the Performance of the Up-and-Down Method

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<u>DISCLAIMER</u>: The findings presented in this briefing are not to be construed as an official Department of the Army position unless so designated by other authorizing documents.

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### Background

- Up-and-Down (UaD) Method is a common approach for estimating median effective stress
  - O Originally developed by the Explosives Research Laboratory, Bruceton, PA in early 1940's, and the Bruceton Method was basis for work of Dixon and Mood (1948)
  - O Extensive documentation shows that the method provides an accurate estimate while keeping number of trials to a minimum
  - O Numerous testing applications
    - Explosives
    - Metal fatigue
    - Development of Medical Procedures
    - Toxicology and Pharmacology
      - $\square$  Median effective stress ==> median effective dose/dosage (ED<sub>50</sub>)

# Background--Conducting an UaD Bioassay Experiment

- Technique is simple to execute but has inspired extensive discussions on how to analyze the data
  - O Trials are conducted one at a time until stopping criteria is met
  - O For trial *i*, a subject is given some administered log dose (d<sub>i</sub>) and the binary response is recorded (R<sub>i</sub>)
  - O The log dose for the next trial (d<sub>i+1</sub>) is dependent on value for R<sub>i</sub>
    - If a response occurs  $(R_i = X \text{ or } 1)$ :

$$d_{i+1} = d_i - \Delta d$$

■ If a response does not occur  $(R_i = O \text{ or } 0)$ :

$$d_{i+1} = d_i + \Delta d$$

- ∆d is the step size
  - ☐ In original method, △d kept fixed in value throughout experiment
- Several modifications of the basic method have been developed
  - O Example: various schemes for changing ∆d during course of experiment



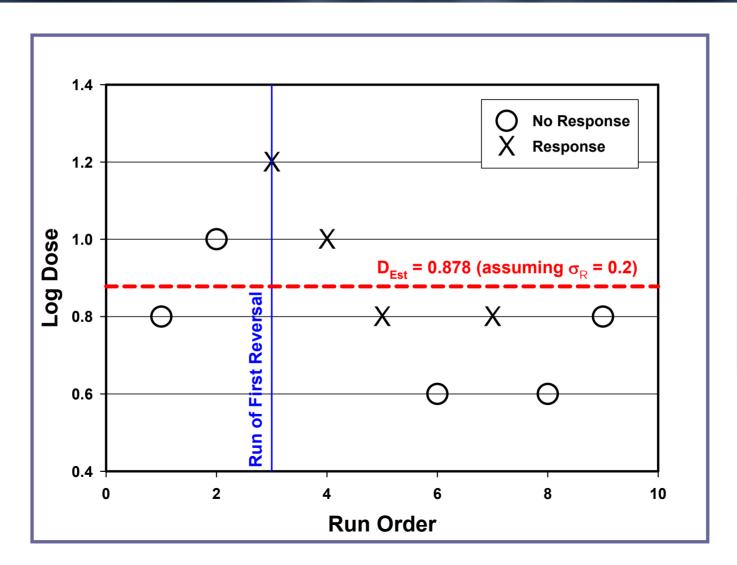
#### Obtaining an Estimate of the ED<sub>50</sub>

- Maximum Likelihood Estimation (MLE) used to find estimate,  $D_{Est}$ , of the true  $log(ED_{50})$ ,  $D_{Tr}$ 
  - O Normal distribution is favorite though others used (ex. Little (1974))
    - For bioassays, normal distribution obtained by working with the logarithms of the doses
  - O With small sample sizes,  $D_{Est}$  is solved for while  $\sigma_R$  is set equal to  $\Delta d$  (Dixon (1965)
- Precision of  $D_{Fst}$  increases as  $\Delta d$  decreases
- Speed of convergence towards region of D<sub>Tr</sub> decreases as  $\Delta d$  decreases

## Characteristics of UaD Bioassay Experiment

- Optimum ∆d range:
  - O  $(\sigma_R / 2) < \Delta d < (2\sigma_R)$ 
    - lacksquare  $\sigma_R$  -- standard deviation of distribution of effective dosages, which needs to be estimated prior to start of experiment
  - O Above range represents a trade-off between precision and efficiency
- Standard error  $(\sigma_{ED})$  of  $D_{Est}$  from UaD experiment
  - O  $\sigma_{ED}$  approximately equals  $\{(\sigma_R)(2 / N)^{(1/2)}\}$  (from Dixon (1965))
    - It is assumed that  $\sigma_R$  equals  $\Delta d$
    - $\blacksquare$  N is the nominal sample size (versus N<sub>T</sub> the total number of trials conducted)
      - $\square$  Common practice is to base N on N<sub>FR</sub> (run of first reversal {O to X, or X to O})
      - $\square$   $N = N_T N_{FR} + 2$

# Example of an Up and Down Experiment



 $\Delta d = 0.2$   $N_T = 9$   $N_{FR} = 3$  N = 8

### UaD Method and Errors in Dosage Administration and Measurement

- What happens when irregular spacing of dosages occurs--found with UaD in inhalation toxicology?
  - O Dosage errors (assumed to be normally distributed)
    - Administration error:  $\sigma_A$ 
      - ☐ Difficulty in precisely generating the target dosage
    - Measurement error:  $\sigma_M$ 
      - ☐ Error involved in measuring the actual dosage produced by generation device
    - Total error:  $\sigma_{Total} = (\sigma_A^2 + \sigma_M^2)^{(1/2)}$
- Vast majority of work/theory on UaD method assumes that both types of errors essentially equal zero.
- How are the accuracy and efficiency of UaD method affected by nonzero  $\sigma_A$  and/or  $\sigma_M$ ?

#### Experimental Method

- Monte Carlo simulations were performed using MINITAB® v. 13
- Three different dosage parameters were tracked
  - O  $d_T$  -- The target value for the log dosage to be administered
  - O d<sub>A</sub> -- The actual log dosage administered
  - O d<sub>M</sub> -- The measured/observed value of the administered log dosage
- Binary responses generated from the following underlying normal distribution of effective dosages
  - O  $D_{Tr}$  set equal to  $log_{10}(80)$
  - O  $\sigma_R$  set equal to (1/15) (or 0.0667)
- Each UaD experiment consisted of 10 trials
  - O Wish to examine situations where number of available runs at premium

## Binary Response Simulation Procedure

- d<sub>T,i</sub> is calculated from result of previous trial or chosen as initial guess
  - O Dosage step can be taken from either d<sub>T</sub> or d<sub>M</sub> of previous step
    - Method T (previous target):  $d_{T,i+1} = d_{T,i} \pm \Delta d$
    - Method M (previous measured):  $d_{T,i+1} = d_{M,i} \pm \Delta d$
- d<sub>A,i+1</sub> is randomly generated from d<sub>T,i+1</sub>
  - O Distribution: N ( $d_{T,i+1}$ ,  $\sigma_A^2$ )
- d<sub>M,i+1</sub> is randomly generated from d<sub>A,i+1</sub>
  - O Distribution: N  $(d_{A,i+1}, \sigma_M^2)$
- R<sub>i+1</sub> generated from binomial distribution
  - O Probability of response ( $R_{i+1} = X$ ) equals the area under N ( $D_{Tr}$ ,  $\sigma_R^2$ ) between the limits of  $-\infty$  to  $d_{A,i+1}$

# Calculation of ED<sub>50</sub> for Individual Experiment

- A MLE solution for D<sub>Est</sub> was obtained numerically using the Newton-Raphson method and a probit link function
  - O A MINITAB® macro was written to perform the calculations
  - O d<sub>M</sub> values were used in the calculations for D<sub>Est</sub>
  - O As default for MLE calculations,  $\sigma_R$  was set equal to the  $\Delta d$  value used for the experiment
    - However, sometimes large values of  $\sigma_A$  and/or  $\sigma_M$  will produce situations where no solution was possible (using MINITAB®) unless  $\sigma_R$  was increased
    - Calculation artifacts would occur due to arbitrary cutoff of normit values by MINITAB®
      - □ Values below -7 were rounded up to -7, and values above 7 were rounded down to 7.
- Several other MLE related parameters were calculated
  - O Wald Test statistic
  - O Score Test statistic
  - O Likelihood-Ratio Test statistic
  - O Log Likelihood of final MLE fit

#### Factors Investigated

Factor	Description	Definition				
Α	Step Size	$(\Delta d/\sigma_R)$				
$B_A$	Administration Error	$(\sigma_A / \sigma_R)$				
$B_M$	Measurement Error	$(\sigma_{M}/\sigma_{R})$				
С	Location Initial Log Dosage	$([d_{T,1} \pm D_{Tr}] / \sigma_R)$				
D	Basis for Calculation of Next Dosage	Method T: $d_{T,i+1} = d_{T,i} \pm \Delta d$ Method M: $d_{T,i+1} = d_{M,i} \pm \Delta d$				

#### Factor Level Values

Factor -	Level Values								
	1	2	3	4	5	6	7	8	9
Α	0.500	0.707	1.000	1.414	2.000	2.828	4.000	5.657	
B <sub>A</sub>	0.000	0.125	0.250	0.500	1.000	2.000			
B <sub>M</sub>	0.000	0.125	0.250	0.500	1.000	2.000			
С	-3.000	-2.250	-1.500	-0.750	0.000	0.750	1.500	2.250	3.000
D	Т	М							

Values in shaded boxes were not used with Method M

50 experiments per coordinate point

Method	Т	М	Total	
# Coordinates	2592	1440	4032	
# Experiments	129600	72000	201600	

### Results

- Efficiency
  - O Number of experiments that "failed"
    - Experiments that consists of either all responses or all nonresponses
  - O Run of first reversal (RFR)
    - Indication of how quickly region of the median has been reached
  - O Number of responses in an experiment
    - Indication of how well region of the median has been covered

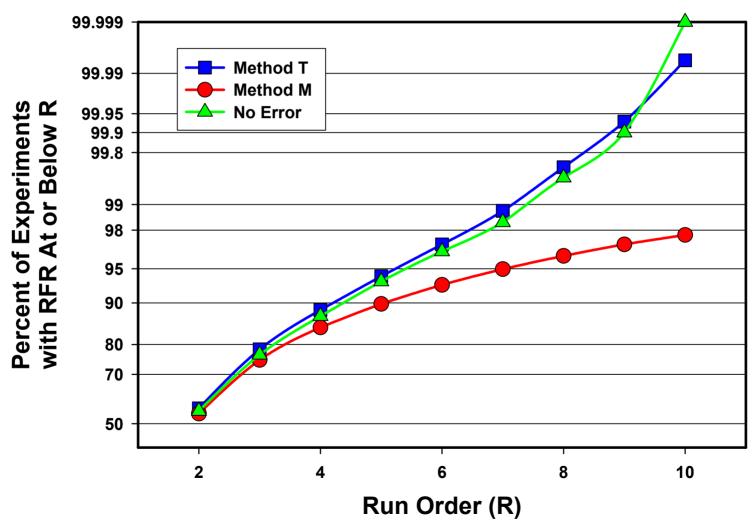
#### Precision

- O Standard error (SE) of D<sub>est</sub>
  - $\blacksquare$  Expressed as multiples of  $\sigma_R$
- O Mean square error (MSE) of D<sub>est</sub>
  - Expressed as multiples of  $\sigma_R^2$

#### Efficiency Results

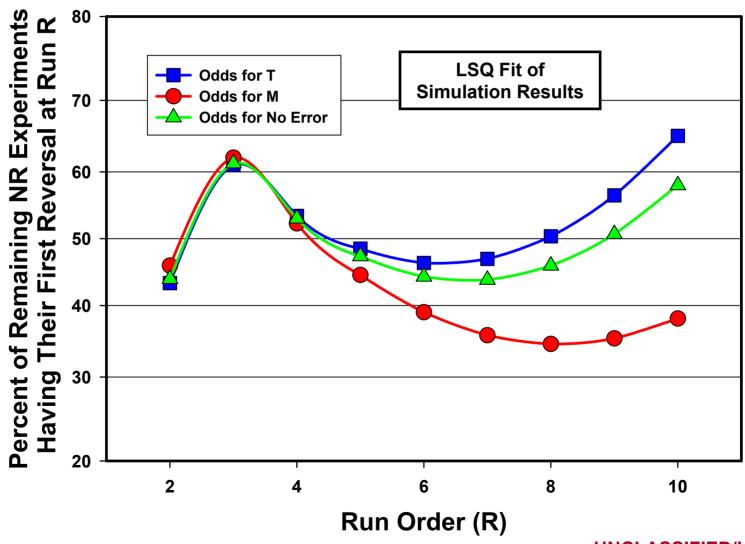
- Obtaining Early Run of First Reversal (RFR)
  - O Factors in order of decreasing importance: A, D, CC, B<sub>A</sub>, B<sub>M</sub> and AA
  - O Many statistically significant interactions also exist
  - O Target dosage basis (D) more important than dosage errors (B<sub>A</sub> and B<sub>M</sub>)
- Success rate (T vs. M): Method T slightly better
  - O Success rate of Method T closely parallels that of experiments executed with  $B_A = B_M = 0$  as a function of Run of First Reversal (RFR)

### Run of First Reversal Breakdown by Method and Run Order



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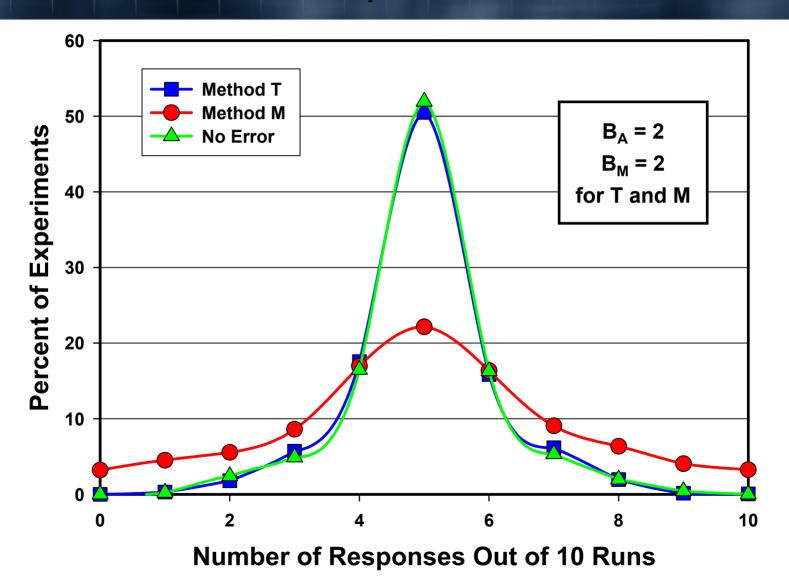
#### Chance of Non-Reversed (NR) Experiment having a Reversal



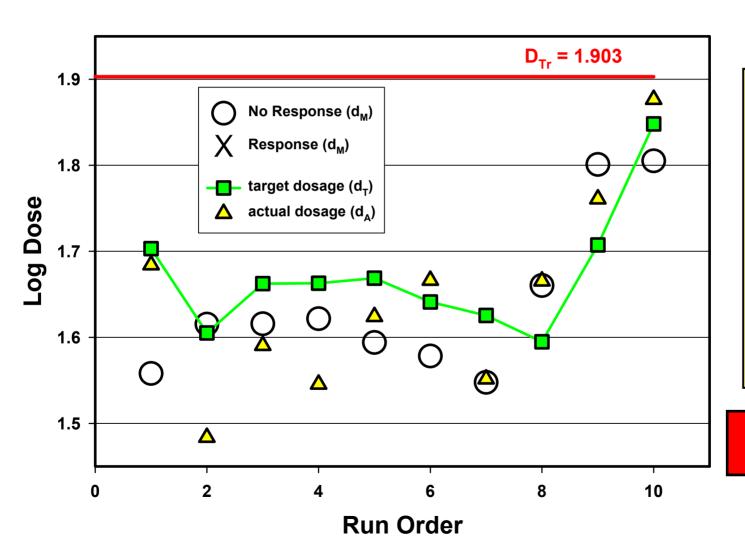
#### Efficiency Results (Cont.)

- Distribution of Number of Responses
  - O Results for Method T (with any dosage errors present) mirrors than of UaD operated with no dosage errors
  - O Distribution for Method M becomes shorter and broader as the dosage error increases
- Method T is more robust in recovering from "dead ends" than Method M
  - O Target dosages in Method M are more readily influenced by fluctuations resulting from administration ( $\sigma_A$ ) and measurement ( $\sigma_M$ ) errors
    - Smaller step sizes can be easily overwhelmed
    - Advice on recommended step size ( $\Delta d = \sigma_R$  or A = 1) may need to be revised

## Distribution of Number of Response



## Example of a Wandering Experiment with Method M



**Expt 64040M** 

**Method M** 

$$\Delta d = (0.047)$$

$$\sigma_{R} = (1/15)$$

$$A = 0.707$$

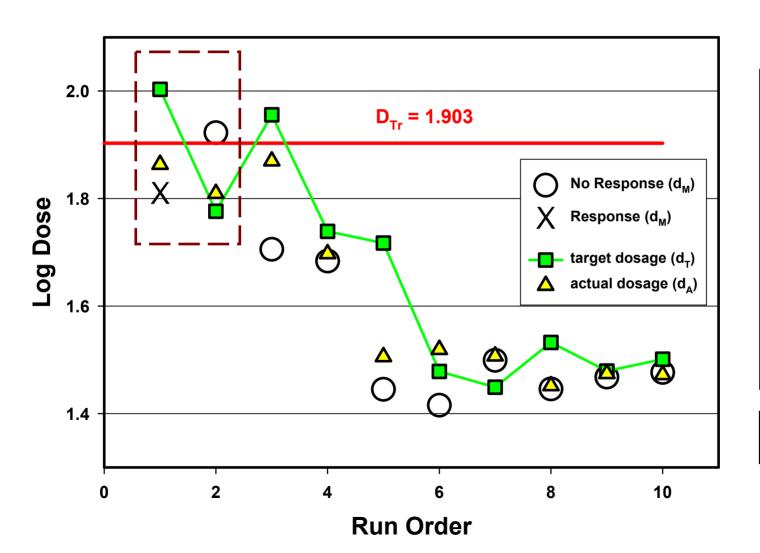
$$B_A = 1$$

$$B_{M} = 1$$

$$C = -3$$

No Estimate of D<sub>Tr</sub> Possible

#### Example of a Negative Step Direction with Method M



**Expt 28159M** 

**Method M** 

$$\Delta d = (1/30)$$

$$\sigma_{R} = (1/15)$$

$$A = 0.5$$

$$B_A = 1$$

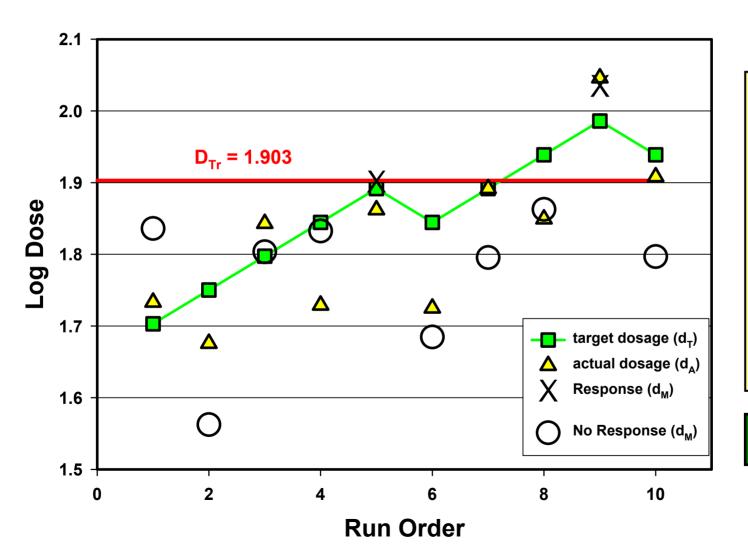
$$B_M = 1$$

$$C = 1$$

 $D_{Est} = 1.866$ 



# Example of an Experiment with Method T



**Expt 64013T** 

**Method T** 

$$\Delta d = (0.047)$$

$$\sigma_{R} = (1/15)$$

$$A = 0.707$$

$$B_A = 1$$

$$B_M = 1$$

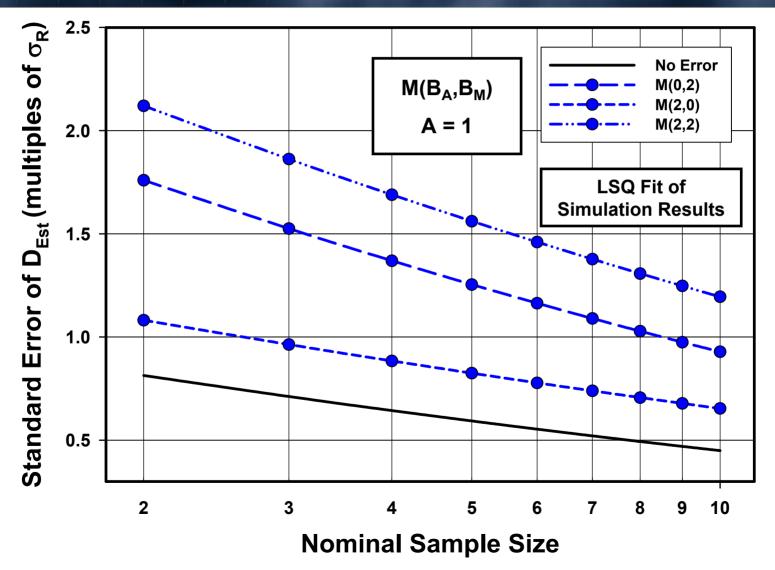
$$C = -3$$

 $D_{Est} = 1.901$ 

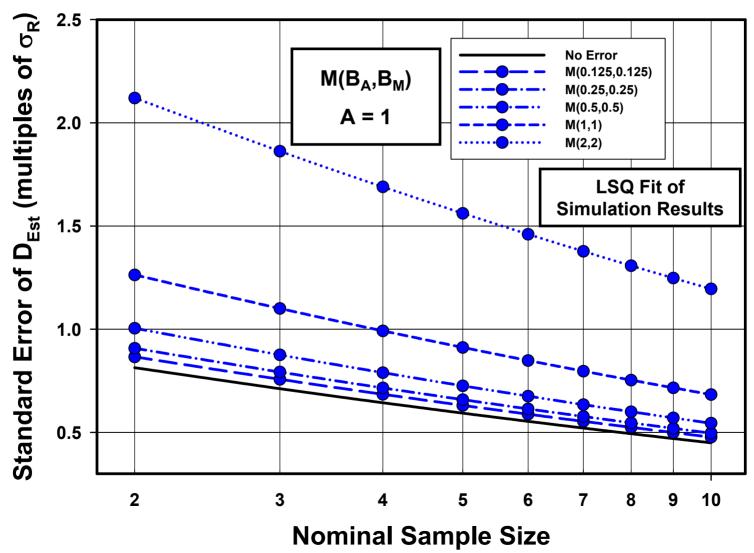
#### Precision Results

- Additional factor introduced--N (nominal sample size)
  - O Accomplished by dividing up the 50 runs per coordinate point into five equal size groups having  $N_T$  values of 6, 7, 8, 9 and 10, respectively
    - Knowing RFR for each experiment, N was calculated from N<sub>T</sub> and N<sub>FR</sub>
      - □ Values of N from 2 to 10 obtained
- Factors in order of decreasing importance: logN, B<sub>M</sub>,
   A, B<sub>A</sub>, B<sub>M</sub>B<sub>M</sub> and B<sub>A</sub>B<sub>A</sub>
  - O Many statistically significant interactions also exist
  - O D is only significant when involved in an interaction (ex. AD and B<sub>M</sub>D)
  - O Dosage errors (B<sub>A</sub> and B<sub>M</sub>) more important than agent dosage basis (D)
    - This is in contrast to the reverse being true for experiment success rate
- Standard error for D<sub>Est</sub> is smaller using Method T than with Method M

# Standard Error of $D_{Est}$ for Method M as a Function of N, $B_A$ and $B_M$

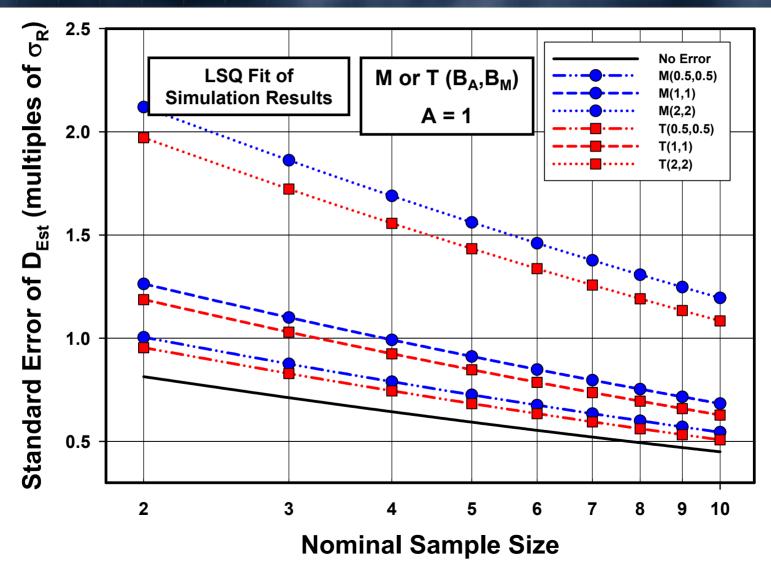


## Standard Error of $D_{Est}$ for Method M as a Function of N and $(B_A + B_M)$

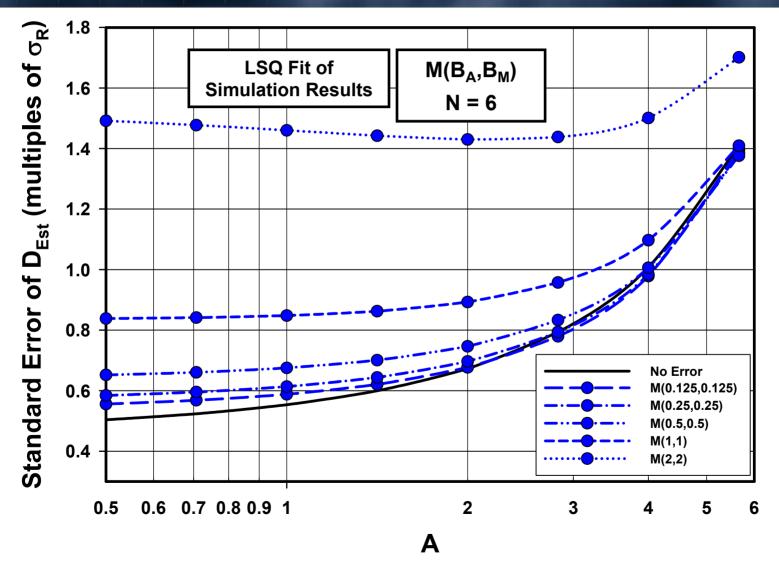


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## Standard Error of $D_{Est}$ for Methods M and T as a Function of N and $(B_A + B_M)$

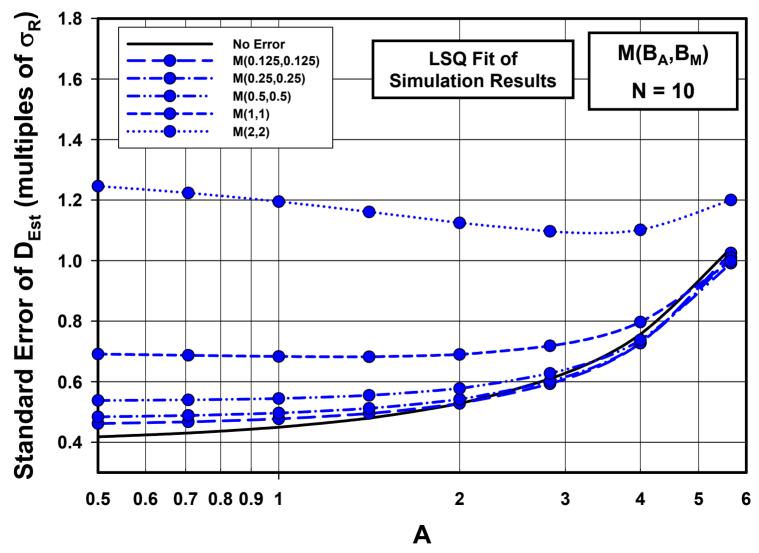


## Standard Error of $D_{Est}$ for Method M as a Function of A and $(B_A + B_M)$



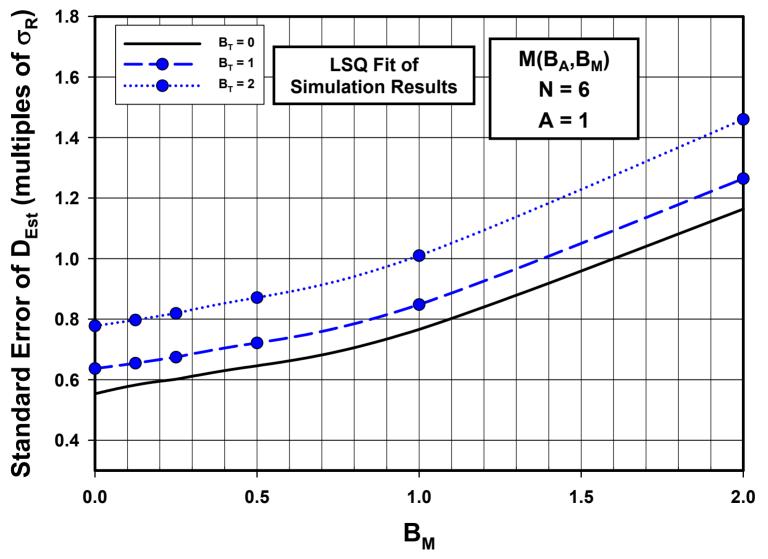
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## Standard Error of $D_{Est}$ for Method M as a Function of A and $(B_A + B_M)$



#### **UNCLASSIFIED/UNLIMITED**

## Standard Error of $D_{Est}$ for Method M as a Function of $B_A$ and $B_M$



### FCBC Summary

- With non-zero dosage errors (B<sub>A</sub> & B<sub>M</sub>), UaD Method is robust with respect to efficiency & precision in the following parameter space
  - O  $-3 \le C$  (initial dosage)  $\le 3$
  - O Neither B<sub>A</sub> and/or B<sub>M</sub> exceeds roughly 0.25 to 0.5
- When selecting next target dosage (Factor D),
   Method T is better than Method M overall
  - O Difference between methods becomes more pronounced as:
    - A decreases
    - B<sub>A</sub> and/or B<sub>M</sub> increases
    - |C| increases
  - O Method T is more able to resist effects of large values of B<sub>A</sub> & B<sub>M</sub>

#### Summary (Cont.)

- Method T produces a distribution of number of responses and Run of First Reversal that is essentially identical to what is produced by traditional UaD (no dosage errors)
- Method T produces more precise D<sub>Est</sub> values than Method M
  - O However, dosage errors (B<sub>A</sub> & B<sub>M</sub>) have larger impact on precision than Factor D (Methods T and M) (the reverse is true for efficiency)

#### Conclusions

- Dosage administration and measurements errors do have an effect on the efficiency and precision of the Up-and-Down Method
- The effect of dosage errors on efficiency is significant overall
  - O Can be practically eliminated by using Method T (basing next step on the previous target dosage) instead of Method M (basing next step on the previous measured dosage)
- The greater precision afforded by smaller step sizes is increasingly eroded by increasing dosage errors
  - O Dosage measurement error has greater impact than both step size and dosage administration error on precision