



Designing Phase I Single Agent Dose-Escalation Studies

Lecture 5: Introduction to crmPack

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Why we wrote crmPack

- More flexible than commercial software (FACTS, East, Addplan DF)
- Wish to adopt and implement new designs quickly
- Other R-packages on CRAN (bcrm, dfcrm, CRM) are not (easily) extensible
- crmPack development started in 2014
- Package is available on CRAN since 2016 (latest version: 0.2.7)

Differences to other packages

- Allows inclusion of placebo control
- Implements bivariate methods (safety and efficacy)
- Is based on S4 classes and methods
- It can make nice plots . . .

Object oriented programming

- Identify real objects and operations on them that are interesting
- Examples:
 - Object: cdf or pdf
 - Method: mean, median, skewness,...
- Objects should know how to deal with all relevant operations
 - cdf should know how to find a mean, but not how to fit a linear model



Class structure in crmPack

NextBest

 How to identify the next dose given the model and data

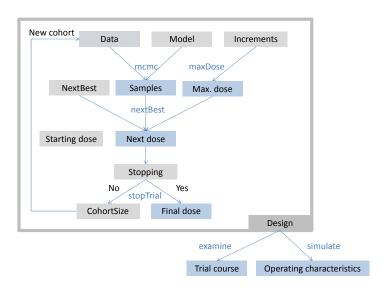
Stopping

 conditions under which the dose escalation is stopped

CohortSize

Determines number of patients in the next cohort of the trial

crmPack classes and methods





Data object

Contains dose grid and current data

Load package

library(crmPack)
Loading required package: ggplot2
Type crmPackHelp() to open help browser
Type crmPackExample() to open example

Create dose grid

- > doseGrid <- seq(from=40, to=200, by=10)
- > doseGrid

[1] 40 50 60 70 80 90 100 110 120 130 140 150 160 170 180 190 200

Data

Data object

Contains dose grid and current data

- Create data object
 - 2 patients on 40mg without DLTs
 - 2 patients on 50mg with one DLT

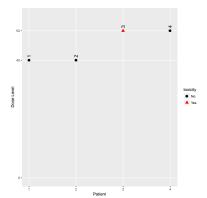
[1] 1 1 2 2

Data

Data object

Contains dose grid and current data

> plot(data)



Data

Model object

Specification

The following model for the probability of toxicity at dose x, $\phi(x)$, is used:

Model

$$logit(\phi(x)) = \alpha_0 + \alpha_1 * log(x)$$

and prior distribution is

$$(\alpha_0, log(\alpha_1))^T \sim N\left(\begin{pmatrix} -4.47 \\ 0.0033 \end{pmatrix}, \begin{pmatrix} \sigma_0^2 & \rho\sigma_0\sigma_1 \\ \rho\sigma_0\sigma_1 & \sigma_1^2 \end{pmatrix}\right)$$

with $\sigma_0 = 1.0278$, $\sigma_1 = 1.65$, $\rho = 0.5$.

NOTE: No reference dose used!

Model object

Specification

Can use LogisticLogNormal as a readily available model

Model



Obtaining samples

- The usual MCMC options
 - > mcmcOptions <- McmcOptions()</pre>
 - ► 10,000 burn-in iterations
 - step size 2
 - target sample size 10,000
- For prior use empty dataset
 - > emptyData <- Data(doseGrid=doseGrid)</pre>
- Run the sampler (normal distribution)
 - > set.seed(12)
 - > priorSamples <- mcmc(emptyData, model,</pre>
 - + mcmcOptions)

Obtaining samples

Similar for posterior samples

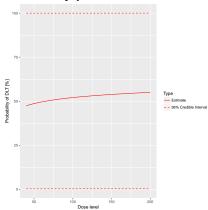
```
> set.seed(92)
> postSamples <- mcmc(data, model,
+ mcmcOptions)</pre>
```

Internally JAGS (Just another Gibbs Sampler) is used for sampling

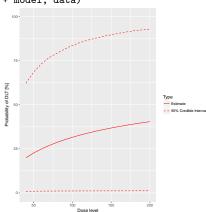


Plotting the models

- > plot(priorSamples,
- + model, emptyData)



- > plot(postSamples,
- + model, data)



Increments object

Specification

Define that dose can increase by 100% at most

Increments

```
> increments <- IncrementsRelative(interval=0,
+ increments=1)</pre>
```

- interval specifies the range of doses that applies to
- The increments rule is used by maxDose to obtain the maximum allowable dose given the current data:

```
> maxDose(increments, data)
[1] 100
```

NextBest object

Specification

 In order to use the CRM with target toxicity interval from 16% to 33%, and a maximum overdosing probability of 25%, we specify¹:

NextBest

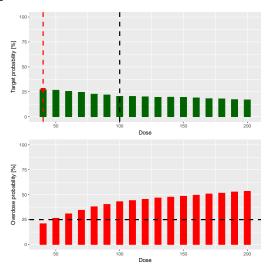
 The NextBest rule is used by the nextBest function in order to calculate the dose recommendation:

¹NCRM called in the package, because Neuenschwander and colleagues first published this method.



Summary plot

> doseRec\$plot





Cohort size and stopping rules

Always 3 patients in a cohort:

cohort <- CohortSizeConst(size = 3)</pre>

CohortSize

Cohort size and stopping rules

Always 3 patients in a cohort:

cohort <- CohortSizeConst(size = 3)</pre>

CohortSize

We would like to stop the trial if:

- there are at least 2 cohorts at the MTD and
- at least 6 cohorts in total

Stopping

OR the maximum sample size of 30 has been reached.

```
> stop1 <- StoppingCohortsNearDose(nCohorts = 2, percentage = 0)
```

- > stop2 <- StoppingMinCohorts(nCohorts = 6)
- > stop3 <- StoppingMinPatients(nPatients = 30)
- > stopRule <- (stop1 & stop2) | stop3



[#] percentage specifies doses that are considered similar

Stopping

We can check if stopping criterion is fulfilled using stopTrial

```
stopTrial(stopRule, doseRec$value, postSamples, model, data)
[1] FALSE
attr(, "message")
attr(,"message")[[1]]
attr(,"message")[[1]][[1]]
[1] "1 cohorts lie within 0% of the next best dose 40.
     This is below the required 2 cohorts"
attr(, "message")[[1]][[2]]
[1] "Number of cohorts is 2 and thus below the prespecified
     minimum number 6"
attr(, "message")[[2]]
[1] "Number of patients is 4 and thus below the prespecified minimum
     number 30"
```



Simulations

• We bundle all parts of the design in the Design object:

Scenario is given in terms of ED50 and slope:

```
> scenario <- function(dose, ED50, alpha1){
+    alpha0 <- qlogis(0.5)-alpha1*log(ED50)
+    model@prob(dose,alpha0=alpha0, alpha1 = alpha1)
+ }</pre>
```



Scenarios

```
> curve(scenario(dose, ED50=100, alpha1=25), from=40, to=200,
     xname="dose",ylab="Scenario") # Scenario 1
> curve(scenario(dose, ED50=200, alpha1=25), from=40, to=200,
     xname="dose", add=TRUE, col="red") # Scenario 2
> # Prior model
> lines(fit(priorSamples, model, emptyData), col="blue")
# Use fit function to get prior model fit
                       0.8
                       9.0
                    Scenario
                       0.4
                       2.2
                       0.0
                            50
                                      100
                                               150
```

dose

Running simulations

• Generate 10 hypothetical trials (\sim 10 secs)

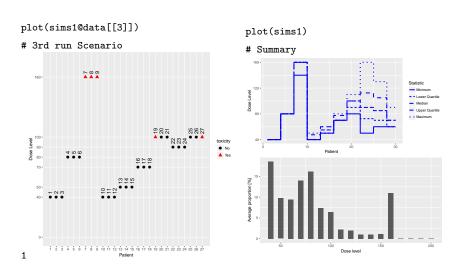
```
> sims1 <- simulate(design, nsim=10,
+    seed = 456, truth=scenario, args=list(ED50=100, alpha1=25),
+    mcmcOptions = mcmcOptions,
+    parallel = TRUE)</pre>
```

Analogously for the second scenario:

```
> sims2 <- simulate(design, nsim=10,
+    seed = 457, truth=scenario, args=list(ED50=200, alpha1=25),
+    mcmcOptions = mcmcOptions,
+    parallel = TRUE)</pre>
```



Plotting simulated trials





Summarizing simulations

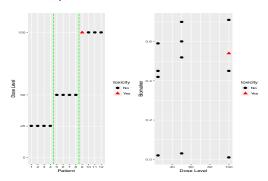
```
> summary(sims1, truth=scenario,
     target=ncrm@target, ED50=100, alpha1=25)
Summary of 10 simulations
Target toxicity interval was 16, 33 %
Target dose interval corresponding to this was 93.6, 97.2
Intervals are corresponding to 10 and 90 % quantiles
Number of patients overall: mean 28 (24, 30)
Number of patients treated above target tox interval: mean 7 (6, 9)
Proportions of DLTs in the trials: mean 21 % (18 %, 24 %)
Mean toxicity risks for the patients on active : mean 22 % (18 %, 26 %)
Doses selected as MTD : mean 79 (68. 100)
True toxicity at doses selected : mean 11 % (0 %, 50 %)
Proportion of trials selecting target MTD: 0 %
Dose most often selected as MTD: 70
Observed toxicity rate at dose most often selected: 0 %
Fitted toxicity rate at dose most often selected: mean 21 % (18 %, 23 %)
```



Dual Endpoints

```
> PL <- 0.001

> data2 <- DataDual(x = c(PL, 25, 25, 25, PL, 50, 50, 50, PL, 100, 100, 100), PL, 100, 100, 100), PL, 100, 100, 100), PL, 100, 100, 100, PL, 100, 100, PL, 100, 100, PL, 100, PL, 100, 100, 100, 100, 100, PL, 100, P
```



Two models and a gain function

Safety and efficacy model

```
> emptydata2 <- DataDual(doseGrid = data2@doseGrid, placebo = TRUE)
> DLTmodel <- LogisticIndepBeta(binDLE = c(1.05, 1.8),
+ DLEweights = c(3, 3), DLEdose = c(25, 300),
+ data = emptydata2)
> Effmodel <- Effloglog(Eff = c(1.223, 2.513), Effdose = c(25, 300),
+ nu = c(a = 1, b = 0.025), data = emptydata2, c = 2)</pre>
```

Gain function depends on safety and effiacy parameters which will be estimated using posterior modal estimates

```
> newDLTmodel <- update(object = DLTmodel, data = data2)
> newEffmodel <- update(object = Effmodel, data = data2)
> GainNextBest <- NextBestMaxGain(DLEDuringTrialtarget = 0.35,
+ DLEEndOfTrialtarget = 0.3)</pre>
```



Next dose

A more advanced increment rule

```
> myIncrements <- IncrementsRelative(intervals = c(0, 125, 200),
+ increments = c(1, 0.75, 0.5))</pre>
```

A maximum increase of 100% for doses below 125 mg, 75% for doses in the range from 125 mg to 200 mg, and 50% for doses equal or above 200 mg

Identify maximum next dose

```
> nextMaxDose <- maxDose(myIncrements, data2)
> nextMaxDose
[1] 200
```



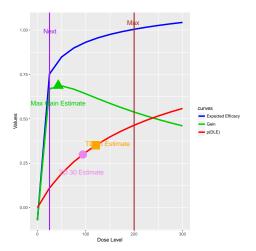
Next dose

Finding the next dose

- After new data are observed newDLTmodel and newEffmodel need to be updated
- No MCMC used here

Plotting the decision

> doseRecGain\$plot





Stopping

- Stop when maximum number of patients are observed
- The optimal dose can be estimated precisely enough

```
> stop4 <- StoppingGstarCIRatio(targetRatio = 5,
+ targetEndOfTrial = GainNextBest@DLEEndOfTrialtarget)
> myStoppingDual <- stop3 | stop4</pre>
```



Simulations

Define design object

```
> design2 <- DualResponsesDesign(nextBest = GainNextBest,
+ model = DLTmodel, Effmodel = Effmodel,
+ data = emptydata2,
+ stopping = myStoppingDual,
+ increments = myIncrements,
+ cohortSize = cohort, startingDose = 25)</pre>
```

Define scenarios



Simulations

Simulate

```
> sims3 <- simulate(object = design2, args = NULL,
+ trueDLE = trueDLT, trueEff = trueEff,
+ trueNu = 1 / 0.025, nsim = 100,
+ seed = 19, parallel = TRUE)</pre>
```

Summarize and plot

```
> mean(sims3@FinalOptimalDose)
[1] 149.0867
> summary(sims3,trueDLE=trueDLT,trueEff=trueEff)
> plot(sims3@data[[90]])
> plot(sims3)
```



Simulation plots

