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Phase II: Single-arm Trials and Optimization under Uncertainty

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Outline

- ① Why phase-II?
- ② Why single-arm?
- ③ Why optimize?
- ④ What to optimize?
- ⑤ How to optimize?
- ⑥ Demo
- ⑦ Remarks

Why Phase-II?

- ▶ phase-II serves as 'gate-keeper'
- ▶ not necessarily demonstrate efficacy ...
- ▶ ... but filter futile candidate drugs early!
- ▶ phase-II closes the gap between phase-I (purely exploratory) and phase-III (randomized + confirmatory)

Consequence:

- ▶ wide range of objectives, wide range of methods - 'phase-II' trial rather an umbrella term
- ▶ Here: specifically phase-II designs in oncology (of course: anything said for phase-I and III might also apply!)

Why single-arm?

- ▶ Smaller sample size, thus
- ▶ ... less recruitment problems in small, targeted population
- ▶ ... potentially more attractive to participants (no lottery to treatment)!
- ▶ ... faster study completion
- ▶ ... lower cost
- ▶ In oncology: randomization potentially unethical if
 - ▶ no gold-standard treatment at all or ...
 - ▶ ... large effect size anticipated
 - ▶ cf. 'Right-to-Try bill' 2018

... and why maybe not single-arm?

- ▶ No randomization: no causal treatment effect estimable without further assumptions!
- ▶ Must compare to historical data (response rate)
- ▶ No blinding possible - additional bias potential
- ▶ Single-arm trials typically not sufficient for 'early-approval' by FDA (evidence from randomized trial required if possible)

Single- vs. two- or multi-arm trials

- ▶ Choice depends on study objective, feasibility and ethical considerations, more: cf. [3]
- ▶ Single-arm trials well-established in oncology
- ▶ Bayesian approach to planning a trial most important when uncertainty is high during planning (early phase-II)
- ▶ Most principles explained in the following are applicable to any trial design (and being worked on!)
- ▶ Principles are simpler to explain by example of single-arm trials

↪ *continue with single-arm trial for the moment*

Two-stage designs

- ▶ Idea: perform interim analysis after n_1 patients and continue depending on this interim outcome
- ▶ Most importantly: binding early stopping for futility to protect against ineffective treatment
- ▶ Early stopping for efficacy: potentially further speeds-up development program
- ▶ More than two stages often infeasible (delayed response), little gains

Binary endpoint: two-stage more important

- ▶ In oncology often: binary endpoint (tumor response, early surrogate)
- ▶ **Question:** response rate ρ larger than historic rate ρ_0 ?
- ▶ Test null $\mathcal{H}_0 : \rho \leq \rho_0$ for given α and β at $\rho_1 > \rho_0$
- ▶ Single stage binomial test is simplest solution:
- ▶ $X \sim \text{binom}(n, \rho)$, reject \mathcal{H}_0 iff $X > c$
- ▶ Choose $c(n)$ as the maximal c such that $\mathbf{P}_{\rho_0}[X > c] \leq \alpha$
- ▶ Pick minimal n such that $\mathbf{P}_{\rho_1}[X > c(n)] \geq 1 - \beta$
- ▶ Fixed-size test ineffective due to discreteness!

Ineffectiveness of binomial test

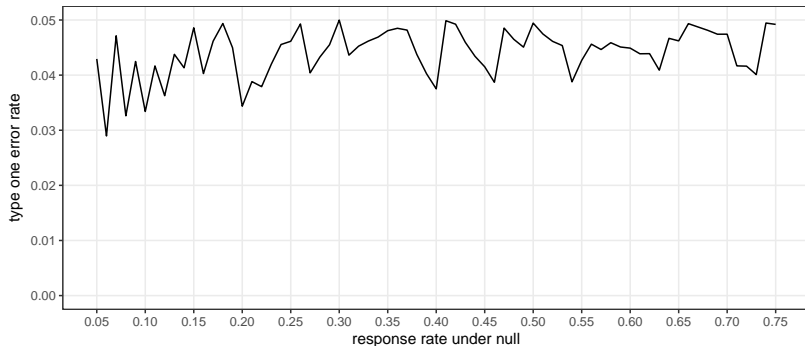


Figure: True type one error rate for $\alpha = 0.05$, $\beta = 0.2$, and varying response rate under the null (ρ_0) for the simple binomial test

Two-stage designs for binary endpoint

- ▶ Two-stage design: allow early stopping
- ▶ Three new parameters:
 - ▶ n_1 (stage-one sample size)
 - ▶ c_f (early futility boundary, stop if $X_1 < c_f$)
 - ▶ c_e (early efficacy boundary, stop if $X_1 > c_e$)
- ▶ More degrees of freedom: Designs can better exhaust the given α level (i.e. almost perfectly!)
- ▶ Final sample size no longer constant but function of X_1
- ▶ 'Smallest' sample size no longer well defined as random!
- ▶ Idea: minimize expected sample size [1]

Optimization problem

$$\underset{n_1, n, c_f, c_e, c}{\operatorname{argmin}}: \quad \mathbf{P}_{\rho}[X_1 \in (c_f, c_e)] n + \mathbf{P}_{\rho}[X_1 \notin (c_f, c_e)] n_1 \quad (1)$$

$$\text{subject to:} \quad \mathbf{P}_{\rho_0}[X_1 > c_e] + \mathbf{P}_{\rho_0}[X_2 > c - X_1, X_1 \leq c_e] \leq \alpha \quad (2)$$

$$\mathbf{P}_{\rho_1}[X_1 > c_e] + \mathbf{P}_{\rho_1}[X_2 > c - X_1, X_1 \leq c_e] \geq 1 - \beta \quad (3)$$

- Technically easy to solve by exhaustive search

Different objective criteria

- ▶ $\mathbf{E}_{\rho}[n(X_1)]$ depends on unknown ρ
(if $n \equiv n_{const}$, $\mathbf{E}_{\rho}[n(X_1)] = n_{const}$ for all ρ)
- ▶ \rightsquigarrow 'optimal' two-stage design no longer unique!
- ▶ Mander and Thomson [2] studied optimal designs under both ρ_0 and ρ_1
- ▶ In the following: $\alpha = 0.05, 1 - \beta = 0.8$

Different objective criteria

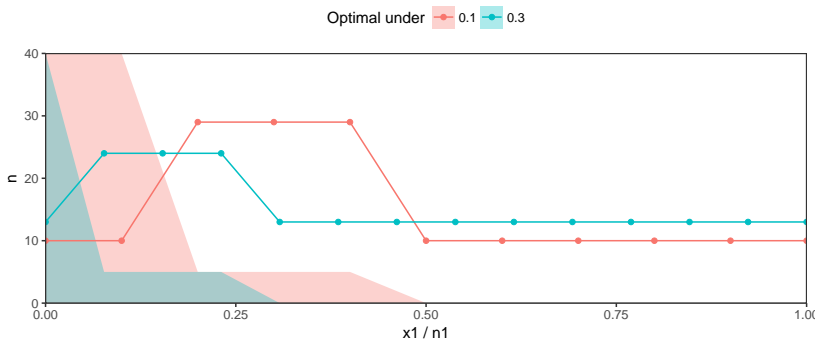


Figure: Visual comparison of the optimal two-stage designs of Mander and Thmason for expected sample size under the alternative ($\rho = 0.3$) or the null hypothesis ($\rho = 0.1$); shaded are is rejection region

Why should second-stage be constant?

- ▶ So far: second stage sample size fixed upon continuation, why?
- ▶ Rationale: larger x_1 give more evidence against \mathcal{H}_0
 $\rightsquigarrow n(\cdot)$ could be decreasing in x_1
- ▶ More general definition of two-stage design:
 $(n_1, c(\cdot), n(\cdot))$ where $\mathcal{H}_0 : \rho \leq \rho_0$ is rejected iff
 $X_1 + X_2 > c(X_1)$, $X_1 \sim \text{binom}(n_1, \rho)$,
 $X_2 | X_1 = x_1 \sim \text{binom}(n(x_1) - n - 1, \rho)$.
- ▶ $c(x_1) = -\infty \rightsquigarrow$ early efficacy
- ▶ $c(x_1) = \infty \rightsquigarrow$ early futility

Example

$x_1 :$	≤ 1	2	3	4	≥ 5
$n(x_1) :$	10	29	29	29	10
$c(x_1) :$	∞	5	5	5	$-\infty$

Table: ρ_0 -optimal design of Mander and Thomson for $\rho_0 = 0.1$, $\rho_1 = 0.3$, $\alpha = 5\%$, $1 - \beta = 80\%$.

Modified optimization problem

$$\begin{array}{ll} \text{argmin:} & \sum_{x_1=0}^{n_1} \mathbf{P}_{\rho} [X_1 = x_1] n(x_1) \\ n_1, n(\cdot), c(\cdot) & \end{array} \quad (4)$$

$$\text{subject to:} \quad \mathbf{P}_{\rho_0} [X > c(X_1)] \leq \alpha \quad (5)$$

$$\mathbf{P}_{\rho_1} [X > c(X_1)] \geq 1 - \beta \quad (6)$$

$$n(x_1) = n_1 \Leftrightarrow c(x_1) \in \{-\infty, \infty\} \quad (7)$$

$$c(x_1) = \infty \Rightarrow c(x_1 - 1) = \infty \quad (8)$$

$$c(x_1) = -\infty \Rightarrow c(x_1 + 1) = -\infty \quad (9)$$

- ▶ Much more difficult to optimize, still discrete
- ▶ Exhaustive search is futile, gradient descent does not work
- ▶ Details later

Where to minimize sample size

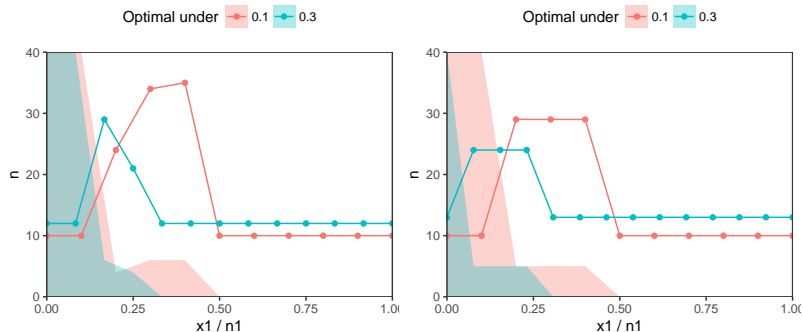


Figure: Visual comparison of the optimal two-stage designs with flexible second stage for expected sample size under the alternative ($\rho = 0.3$) or the null hypothesis ($\rho = 0.1$) (left) and constant second stage (right)

Performance gains?

When stage-two sample size is flexible:

- ▶ Difference between designs even more pronounced
- ▶ Performance gain over constant second stage is modest (< 0.5 patients on average under the respective objective)
- ▶ But: why not?

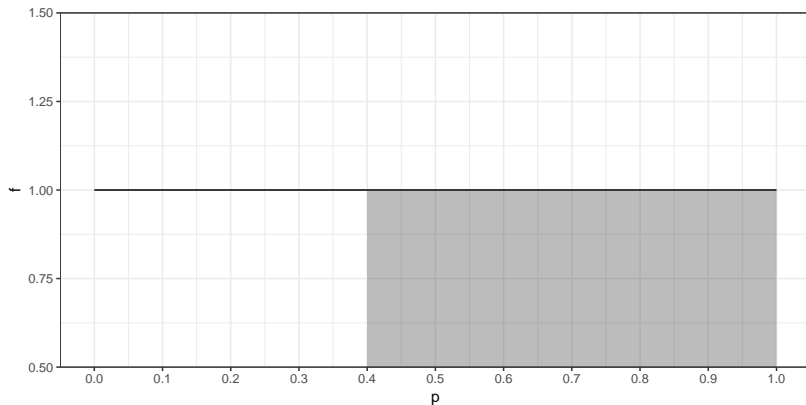
What to optimize

- ▶ Obviously, very different optimal designs for varying ρ
- ▶ Sponsors unhappy with minimizing $\mathbf{E}_{\rho_0}[n(X_1)]$
- ▶ Patients unhappy with minimizing $\mathbf{E}_{\rho_1}[n(X_1)]$
- ▶ Both positions are extreme in that they assume a single parameter value to be true, but ρ is uncertain during planning!
- ▶ Principled way of modeling planning uncertainty about ρ is by using a Bayesian approach
- ▶ Assume $\rho \sim F$ for prior distribution F with PDF $f(\rho)$

Example

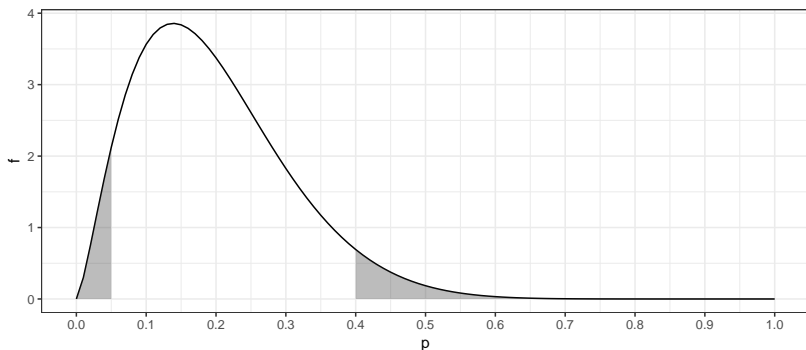
- ▶ Developing new anti-cancer drug
- ▶ 6 months RECIST objective response rate historically about 0.1
- ▶ Experts believe that response rate under new drug lies in $[0.05, 0.4]$
- ▶ maybe - phase-I data of 10 subjects is available with 4 responses
- ▶ How do we get a prior density f ?

How to (not) construct a prior



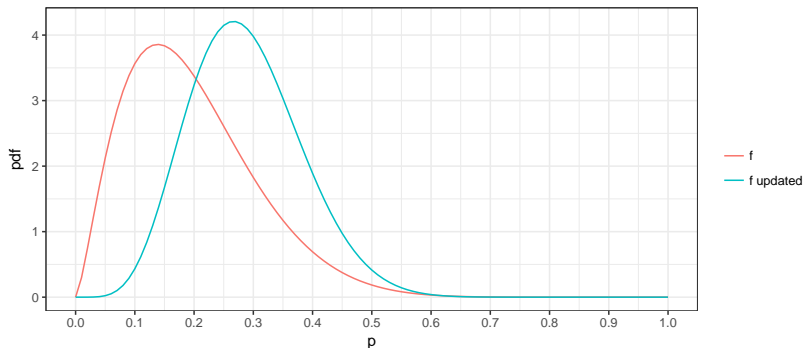
- Non-informative obviously nonsense: $\mathbf{P}[\rho > 0.4] = 0.6$

A quick informative prior



- Better: fit Beta distribution so that $\mathbf{P}[\rho < 0.05] = \mathbf{P}[\rho > 0.4] = 0.05$ - here Beta(2.45, 10.0)

Incorporating previous results



- Advantage of using Beta: analytical update available (conjugate prior)
- Phase-I updated prior would be $\text{Beta}(2.45 + 4, 10.0 + 6)$

Result: less flexible design

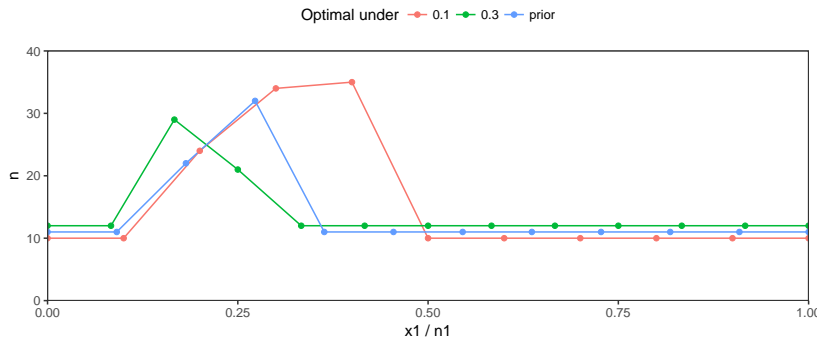


Figure: Effect of using prior Beta(2.45, 10.0) (assuming no phase-I data) on shape of optimal sample size function.

What about power?

- ▶ Incorporated planning uncertainty about ρ in objective (expected sample size) ...
- ▶ ... but not in constraints - why only power at ρ_1 ?
- ▶ Power is also a function of (unknown) ρ
- ▶ If only response rates $> \rho_1$ are of interest, powering solely on ρ_1 is fine (minimal clinically relevant response rate)
- ▶ If ρ_1 is considered the most likely effect, there is uncertainty and the power constraint should reflect that.

A 'Bayesian' Power constraint 1)

- Natural: integrate power curve with respect to f :

$$\int_0^1 \mathbf{P}_\rho[X > c(X_1)] f(\rho) d\rho \quad (10)$$

- But if $\rho \leq \rho_0$ power is actually type one error rate! I.e. the part

$$\int_0^{\rho_0} \mathbf{P}_\rho[X > c(X_1)] f(\rho) d\rho \quad (11)$$

corresponds to the expected type one error rate

- Expected power should be conditional on a minimal relevant response rate - say $\rho_0 + \delta$ (typically $\delta = 0.05 - 0.2$):

$$\int_{\rho_0+\delta}^1 \mathbf{P}_\rho[X > c(X_1)] f(\rho | \rho > \rho_0) d\rho \quad (12)$$

Is there an alternative?

- ▶ Expected power seems to be intuitive
- ▶ But how does it react when we 'tweak' the power curve of our design?
- ▶ Expected power is a functional of the power curve
- ▶ Functional derivative with respect to local variation in power curve can be computed

Functional derivative of expected power

$$\frac{\partial}{\partial \mathbf{P}_\rho[X > c(X_1)]} \int_{\rho_0 + \delta}^1 \mathbf{P}_\rho[X > c(X_1)] f(\rho | \rho > \rho_0 + \delta) d\rho \\ = f(\rho | \rho > \rho_0 + \delta)$$

- ▶ Intuitive: increase power for most likely values of ρ
- ▶ But: ignores level of power, i.e. does not matter if power increases from 20% to 21% or 70% to 71%
- ▶ realistic?

Alternative to averaging power

- ▶ Don't want correct power on average - doing the trial only once
- ▶ Rather: sufficient power (say 80%) in most cases (say 66%)
- ▶ I.e. want $\mathbf{P}[\text{Power}_{\mathcal{D}}(\rho) > 0.8 \mid \rho > \rho_0 + \delta] \geq 0.66$
- ▶ Gives high a-prior chance (here 66%) of ending up with sufficient power (given favourable response rate) instead of getting correct power on average

Looks complicated but ...

- ▶ Note power curve is monotone!
- ▶ Let ρ^* be defined by $\text{Power}_{\mathcal{D}}(\rho^*) = 1 - \beta$

$$\mathbf{P}[\text{Power}_{\mathcal{D}}(\rho) > 1 - \beta \mid \rho > \rho_0 + \delta] \geq \eta \quad (13)$$

$$\Leftrightarrow \mathbf{P}[\rho > \rho^* \mid \rho > \rho_0 + \delta] \geq \eta \quad (14)$$

$$\Leftrightarrow \mathbf{P}[\rho \leq \rho^* \mid \rho > \rho_0 + \delta] \geq 1 - \eta \quad (15)$$

$$\Leftrightarrow \rho^* \text{ is } 1 - \eta \text{ quantile of } f(\rho \mid \rho > \rho_0 + \delta) \quad (16)$$

- ▶ Thus: compute ρ^* during planning and get optimal design subject to $\text{Power}_{\mathcal{D}}(\rho^*) \geq 1 - \beta$
- ▶ Just a more principled way of choosing ρ_1 !
- ▶ Widely applicable without changing techniques!

Let's compare

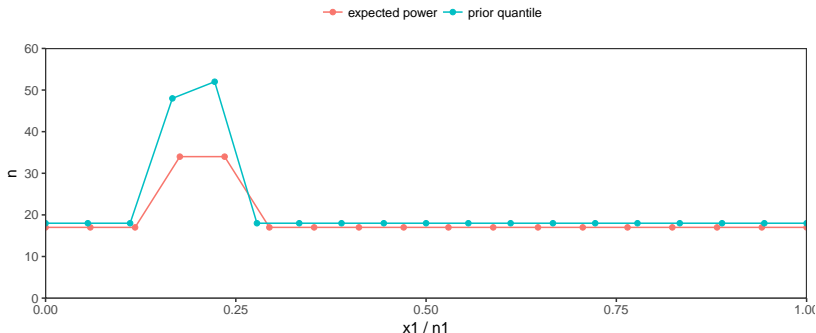
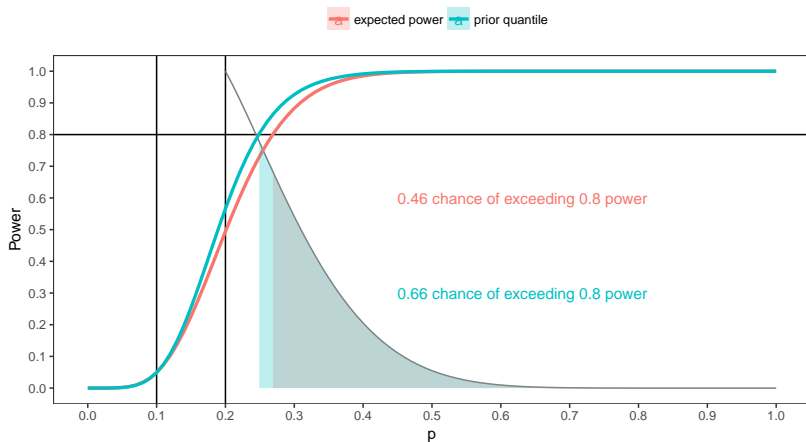


Figure: Comparison of different Bayesian power constraint; using expected power is less strict (smaller design) than prior quantile approach ($\delta = 0.1$, $\eta = 0.66$, target power 80%, expected power $\geq 80\%$).

Let's compare II



Questions?

- ▶ Two-stage designs arise natural in situations with high uncertainty
- ▶ Require the choice of optimality criterion as there is no 'canonical' one
- ▶ Bayesian planning is a principled way to avoid over-fitting to particular values of ρ
- ▶ Bayesian designs much less variable (sometimes even constant second stage!)
- ▶ Theoretically appealing framework for making planning assumptions explicit
- ▶ Not restricted to phase-II

How to actually optimize such designs?

$$\underset{n_1, n(\cdot), c(\cdot)}{\operatorname{argmin}}: \sum_{x_1=0}^{n_1} \mathbf{P}[X_1 = x_1] n(x_1) \quad (17)$$

$$\text{subject to: } \mathbf{P}_{\rho_0}[X > c(X_1)] \leq \alpha \quad (18)$$

$$\mathbf{P}_{\rho_1}[X > c(X_1)] \geq 1 - \beta \quad (19)$$

- ▶ Both $n(\cdot)$ and $c(\cdot)$ are discrete functions
- ▶ Gradient-based approaches infeasible (integer problem)
- ▶ Problem of finding optimal values is NP-hard!
- ▶ For relatively small $n_1 \ll 50$ and $n_2 \ll 150$, still feasible with dynamic programming

Let others do the heavy lifting...

- ▶ Either use custom solution algorithm or leverage existing technology by transforming the problem into an integer linear program
- ▶ can the be solved by standard software

Getting to an integer linear problem [4]

- ▶ Introduce binary auxiliary variables $y[x_1, n, c] \in \{0, 1\}$
- ▶ Define $y[x_1, n, c] = 1$ iff $n(x_1) = n$ and $c(x_1) = c$
- ▶ Require $\sum_{n,c} y[x_1, n, c] = 1$, i.e. exactly one 'selection' is active in the solution
- ▶ Many functionals can be written as linear functions in $y[x_1, n, c]$:

$$\text{ESS}(f) = \sum_{x_1, n, c} n \mathbf{P}_f[X_1 = x_1] y[x_1, n, c]$$

$$\text{power}(\rho) = \sum_{x_1, n, c} \mathbf{P}_\rho[X_2 > c - x_1] \mathbf{P}_\rho[X_1 = x_1] y[x_1, n, c]$$

Implementation

- ▶ Use specialized integer linear programming software like Gurobi or Cbc to solve the problem
- ▶ Only need to compute the coefficients for $y[x_1, n_2, c_2]$ for the various constraints - most expensive part, R badly suited for this (slow for loops)
- ▶ Implementation in Julia is available at <https://github.com/kkmann/BinaryTwoStageDesigns> but still experimental

Time for a demo!



Further Comments

Is this 'truly' Bayesian?

- ▶ Arguable whether methods presented are truly 'Bayesian'
- ▶ Do not invoke Bayes Theorem at all!
- ▶ Only use prior as weight function of potential scenarios (sensible even without the Bayesian interpretation!)
- ▶ Still, objective functions derived in a Bayesian spirit

Post trial inference

- ▶ No time to talk about the (extremely) interesting topic of inference in two-stage designs
- ▶ Details on point estimation in [5], in short
 - ▶ slightly tweaked Bayesian mean a posteriori estimator substantially improves MSE over maximum likelihood estimator...
 - ▶ ... but is not unbiased
 - ▶ ... and allows the definition of a sensible p value
- ▶ Confidence intervals described in [6]

Beyond binary endpoint & single-arm designs

- ▶ Exact methods for discrete outcomes do not generalize well to multiple arms (search space grows exponentially)
- ▶ But: Multi-arm trials usually larger, therefore approximations viable (Z-test)
- ▶ E.g., test for rate difference δ via stage-wise z-statistics

Beyond binary endpoint & single-arm designs

$$\underset{n_1, n(\cdot), c(\cdot)}{\operatorname{argmin}}: \quad \int n(z_1) \phi(z_1) \, \mathrm{d} z_1 \quad (20)$$

$$\text{subject to:} \quad \mathbf{P}_{\delta=0} [Z > c(Z_1)] \leq \alpha \quad (21)$$

$$\mathbf{P}_{\delta=\delta_1} [Z > c(Z_1)] \geq 1 - \beta \quad (22)$$

- ▶ n and c are now functions in a continuous variable z_1
 \rightsquigarrow variational problem!
- ▶ Actively worked on but not ready yet
- ▶ Can also be extended to incorporate prior uncertainty

Thank you!

Slides and code available at

<https://github.com/kkmann/Sommerschule2018>

References I



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References II



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