

Simulation Report

ROADMAP: RandOmised Arthroplasty infection worlDwide Multidomain Adaptive Platform trial simulation report

Investigator initiated, Randomised Embedded Multifactorial Adaptive Platform (REMAP) trial, conducted across multiple hospitals in several regions of the world.

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Sponsor: University of Newcastle, NSW, Australia

Registration (ANZCTR): todo

HREC todo

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Study title: ROADMAP: RandOmised Arthroplasty infection worlDwide

Multidomain Adaptive Platform trial

Intervention: Surgery type, backbone antibiotic duration, extended

prophylaxis, antibiotic type

Study design: Randomised Embedded Multifactorial Adaptive Platform trial

Sponsor: University of Newcastle, NSW, Australia

Protocol: Version 1.1 01AUG2024

Registration: todo HREC: todo Study date of first todo

consent:

Principal coordinating Professor Joshua Davis and Professor Laurens Manning

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Version history

Version	Date	Change	Reason
0.1	05/2025	First version	N/A

Repository status

```
main /Users/mark/Documents/project/roadmap/src/roadmap-sap
## Local:
## Remote:
            main @ origin (https://github.com/maj-biostat/roadmap-sap.git)
## Head:
            [9c5f442] 2025-06-24: Prioritise notes
##
## Branches:
## Tags:
## Commits:
                   43
## Contributors:
## Stashes:
## Ignored files:
## Untracked files: 24
## Unstaged files:
## Staged files:
##
## Latest commits:
## [9c5f442] 2025-06-24: Prioritise notes
## [ef44a5e] 2025-06-24: WIP
\#\# [12812a1] 2025-06-23: Add expected N at time of stopping by domain and arm
## [36316d4] 2025-06-19: Update report
## [7041484] 2025-06-19: Forgot to update to latest sim results
```

Preface

This simulation report documents the current set of simulations for the operating characteristics of the ROADMAP study. The simulation report is an operational document that will be updated, as necessary, over the course of the study. It should be read in conjunction with the relevant version of the statistical analysis plan (also contained in this respository).

In this report, reference to the current statistical analysis report, means reference to SAP version 0.2.

1 Introduction

Data generation assumptions, modelling approaches, scenarios and results that were used to explore the ROADMAP design operating characteristics.

These results are based on simulation ID sim07-05 with 10000 trials run per scenario.

2 Data generation

Data is generated based on the empirical distributions obtained from the PIANO study, Browning et al. (2022) and domain experts. The data generated process is a simplification of reality but aims to capture the essential elements of the design. The distributional assumptions of each data component follows.

We simulate silo membership from a multinomial distribution with probabilities 0.3, 0.5 and 0.2 for early, late and chronic. Site of infection is not modelled as decisions are to be made on the overall pattern of response rather than joint specific estimates.

Each of the domain intervention allocations are simulated independently and then design rules are use to enforce the logical structure. We simulate both domain entry and allocation. All participants are assumed to enter into the surgical domain, albeit some receive non-randomised treatment.

For the surgical domain, we simulate clinical preference of revision type from a multinomial distribution with probabilities 0.65, 0.35 (rev(1), rev(2) | early), 0.3, 0.7 (rev(1), rev(2) | late), 0.25, 0.75 (rev(1), rev(2) | chronic). Surgical intervention allocations are simultated based on a binomial distribution with probabilities 0.15 (revision | early), 0.5 (revision | late), 0.8 (revision | chronic). The revision indicator is subsequently decomposed into one and two-stage based on the value of preferences.

For the antibiotic duration domain, we simulate entry from a binomial random variable with a probability of 0.7 across all silos and allocation to randomised treatment is 1:1 across all silos. For the extended prophylaxis domain, we simulate entry from a binomial random variable with a probability of 0.9 across all silos and allocation to randomised treatment is 1:1 across all silos. For the antibiotic choice domain, we simulate entry from a binomial random variable with a probability of 0.6 across all silos and allocation to randomised treatment is 1:1 across all silos.

Based on the unconditional entry and allocations, we overlay the design rules. For the surgical domain, allocation to the control state maps assignment to DAIR and allocation to revision maps to revision type based on preference.

For the antibiotic duration domain, if one-stage has been assigned as the revision type, then conditional on the entry indicator, the participant is assigned to non-randomised treatment or the allocation level.

For the extended prophylaxis domain, if two-stage has been assigned as the revision type, then conditional on the entry indicator, the participant is assigned to non-randomised treatment or the allocation level.

For the antibiotic choice domain, conditional on the entry indicator, the participant is assigned to non-randomised treatment or the allocation level.

The data is generated sequentially at the start of each interim analysis. As the trial progresses, decisions may be made which lead to some allocations being shut off and thus restricting the possible assignments.

The linear predictor is constructed conditional on the surgical domain intervention, see Section 3. Treatment success is simulated as a bernoulli random variable with probability equal to the inverse logit transform of the log-odds from the linear predictor. To speed up the model, we aggregate number of successes and number of trials by covariate group which gives the analogous binomial random variable representation.

3 Modelling

In order to reduce computational burden, we use a simplified version of the primary analysis model presented in the statistical analysis plan, section 2.6. For the simulations, we have a single, multivariable logistic regression model with a linear predictor that incorporates all domains and is specified as follows:

$$Y \sim \operatorname{Binomial}(\pi, n)$$

$$\operatorname{logit}(\pi) = \alpha + \lambda_s + \delta$$

$$\delta = \begin{cases} \beta_{1[d1,s]} + \beta_{4[d4]} + \phi_p & \text{(dair)} \\ \beta_{1[d1,s]} + \beta_{2[d2]} + \beta_{4[d4]} & \text{(one-stage)} \\ \beta_{1[d1,s]} + \beta_{3[d3]} + \beta_{4[d4]} + \phi_p & \text{(two-stage)} \end{cases}$$

where *Y* is a binomial variable for the number of events out of *n* trials for a distinct covariate pattern occurring with probability π calculated from the linear predictor as follows:

- α reference level log-odds of a successful outcome
- λ_s silo membership s
- $\beta_{1[d_1,s]}$ surgical intervention d_1 in silo s
- $\beta_{2[d_2]}$ backbone antibiotic duration intervention d_2
- $\beta_{3[d_3]}$ extended prophylaxis duration intervention d_3
- $\beta_{4[d_4]}$ antibiotic choice intervention d_4
- ϕ_p surgeon preference for one/two stage, p, assuming unit randomised to revision

Relative to the primary analysis model, the simulation model is constructed with a binomial likelihood and excludes terms for time, region, site and prognostic variables. The manner in which terms enter the model is convoluted and understanding the dependency implications and consequently care is needed with the data preparation.

Bar the surgical domain, for which 'by silo' deviations are implicit in the existing parameterisation, no further interactions are included.

4 Decision procedures

Decision procedures follow those that are documented in the current SAP. In brief, at each interim, we assess the posterior and if a decision threshold is met, we make claims as directed by the results. Within the simulations, we assume the decisions are binding and constrain the subsequent data generation options. Specifically, if a superiority decision is reached in one of the domains for which this decision type is relevant, then we consider that domain complete and all subsequent participants are assigned to receive the superior intervention. Non-inferiority is handled in an analogous manner. If a futility decision is reached (either for superiority of non-inferiority, as applicable for the given domain) then we consider that domain completed and all subsequent participants are assigned to receive the reference intervention.

In all cases, we continue to update the full joint posterior until we get to the point where all questions have been answered across all domains, at which point the trial will stop.

5 Scenarios

Each scenario adopted a maximum sample size of 2500 with interim analyses run after each 500 participants reach the primary endpoint. For simplicity, the treatment effects were specified on the log odds scale with treatment effects calibrated to target the domain level treatment effects in terms of risk differences. All scenarios used the same reference values and decision thresholds. After a long period of iteration, Table 5.1 shows the current set of simulation scenarios considered as the reference set for the design.

Table 5.1: ROADMAP simulation scenarios

ID	Scenario
1	RD = 0 in all domains +silo specific d1
2	RD = 0.12: surgical revision (one and two-stage) +silo specific d1
3	RD = 0.12: surgical revision (one-stage only) +silo specific d1
4	RD = 0.12: surgical revision (two-stage only) +silo specific d1
5	RD = 0.12: abx duration 6wk effect +silo specific d1
6	RD = 0.12: ext-proph 12wk effect +silo specific d1
7	RD = 0.12: abx choice rif effect +silo specific d1
8	RD = 0.12: all domains +silo specific d1
9	RD = -0.05: abx duration 6wk effect +silo specific d1
10	RD = 0.12 surgical, $RD = 0.08$ abx choice +silo specific d1

6 Results

6.1 Probability of triggering decisions

Table 6.1 provides the cumulative probability of decision types by domain. For the Surgical, Extended prophylaxis and Choice domains, the results indicate the cumulative probability of a superiority decision with the probability of futility for the superiority decisions in parentheses. For the Antibiotic duration domain, the results indicate the cumulative probability of a non-inferiority decision with the probability of futility for the non-inferiority decisions in parentheses.

Table 6.1: Cumulative probability of decision at each interim (enrolment by interim)

	Cumulative probability of decision as applicable to domain									
Domain	Decision type	500	1000	1500	2000	2500				
RD = 0 in all domains +silo specific d1										
Surgical	Superiority (fut)	0.021 (0.538)	0.037 (0.709)	0.051 (0.79)	0.06 (0.839)	0.066 (0.869)				
AB Duration	NI (fut)	0.112 (0.088)	0.181 (0.131)	0.231 (0.164)	0.275 (0.185)	0.309 (0.203)				
AB Ext-proph	Superiority (fut)	0.04 (0.543)	0.062 (0.685)	0.076 (0.755)	0.085 (0.797)	0.092 (0.824)				
AB Choice	Superiority (fut)	0.01 (0.653)	0.016 (0.83)	0.021 (0.905)	0.024 (0.94)	0.027 (0.96)				
RD = 0.12: surg	ical revision (one an	d two-stage) +si	lo specific d1							
Surgical	Superiority (fut)	0.318 (0.068)	0.557 (0.091)	0.703 (0.099)	0.795 (0.104)	0.842 (0.105)				
AB Duration	NI (fut)	0.115 (0.088)	0.203 (0.145)	0.274 (0.183)	0.336 (0.212)	0.387 (0.231)				
AB Ext-proph	Superiority (fut)	0.042 (0.545)	0.067 (0.727)	0.085 (0.818)	0.095 (0.858)	0.1 (0.881)				
AB Choice	Superiority (fut)	0.009 (0.661)	0.014 (0.837)	0.02 (0.911)	0.024 (0.946)	0.025 (0.963)				
RD = 0.12: surg	ical revision (one-sta	ıge only) +silo s _î	pecific d1							
Surgical	Superiority (fut)	0.043 (0.393)	0.085 (0.539)	0.117 (0.618)	0.144 (0.671)	0.167 (0.707)				
AB Duration	NI (fut)	0.11 (0.092)	0.186 (0.14)	0.243 (0.173)	0.284 (0.194)	0.32 (0.212)				
AB Ext-proph	Superiority (fut)	0.037 (0.542)	0.059 (0.69)	0.074 (0.764)	0.086 (0.809)	0.092 (0.837)				
AB Choice	Superiority (fut)	0.011 (0.647)	0.019 (0.825)	0.024 (0.901)	0.028 (0.94)	0.03 (0.957)				

Table 6.1: Cumulative probability of decision at each interim (enrolment by interim)

		Jumulative pro	bability of decis	sion as applicab	ie to domain	
Domain	Decision type	500	1000	1500	2000	2500
RD = 0.12: surg	ical revision (two-st	age only) +silo s	pecific d1			
Surgical	Superiority (fut)	0.201 (0.132)	0.379 (0.177)	0.509 (0.202)	0.602 (0.215)	0.664 (0.223)
AB Duration	NI (fut)	0.104 (0.093)	0.185 (0.141)	0.247 (0.177)	0.305 (0.203)	0.353 (0.222
AB Ext-proph	Superiority (fut)	0.038 (0.545)	0.063 (0.722)	0.079 (0.808)	0.087 (0.854)	0.093 (0.88)
AB Choice	Superiority (fut)	0.01 (0.654)	0.018 (0.832)	0.022 (0.904)	0.026 (0.941)	0.028 (0.959
RD = 0.12: abx	duration 6wk effect	+silo specific d1				
Surgical	Superiority (fut)	0.021 (0.518)	0.036 (0.691)	0.049 (0.777)	0.06 (0.827)	0.066 (0.861
AB Duration	NI (fut)	0.38 (0.012)	0.595 (0.016)	0.717 (0.017)	0.796 (0.018)	0.853 (0.018
AB Ext-proph	Superiority (fut)	0.038 (0.55)	0.061 (0.692)	0.073 (0.764)	0.082 (0.807)	0.087 (0.835
AB Choice	Superiority (fut)	0.008 (0.654)	0.016 (0.829)	0.021 (0.906)	0.025 (0.941)	0.027 (0.958
RD = 0.12: ext-p	proph 12wk effect +s	ilo specific d1				
Surgical	Superiority (fut)	0.028 (0.486)	0.047 (0.66)	0.061 (0.748)	0.073 (0.801)	0.08 (0.837)
AB Duration	NI (fut)	0.113 (0.087)	0.193 (0.132)	0.241 (0.162)	0.282 (0.184)	0.315 (0.202
AB Ext-proph	Superiority (fut)	0.385 (0.088)	0.607 (0.106)	0.72 (0.113)	0.785 (0.118)	0.822 (0.119
AB Choice	Superiority (fut)	0.009 (0.664)	0.017 (0.831)	0.022 (0.905)	0.026 (0.942)	0.029 (0.958
RD = 0.12: abx	choice rif effect +silo	specific d1				
Surgical	Superiority (fut)	0.019 (0.538)	0.035 (0.71)	0.045 (0.795)	0.055 (0.842)	0.062 (0.871
AB Duration	NI (fut)	0.107 (0.09)	0.176 (0.138)	0.227 (0.17)	0.268 (0.193)	0.305 (0.21)
AB Ext-proph	Superiority (fut)	0.042 (0.545)	0.062 (0.688)	0.075 (0.758)	0.083 (0.805)	0.09 (0.831)
AB Choice	Superiority (fut)	0.458 (0.037)	0.802 (0.04)	0.925 (0.041)	0.954 (0.042)	0.96 (0.042)
RD = 0.12: all d	omains +silo specifi	c d1				
Surgical	Superiority (fut)	0.38 (0.046)	0.618 (0.063)	0.753 (0.07)	0.828 (0.074)	0.872 (0.077
AB Duration	NI (fut)	0.417 (0.007)	0.728 (0.009)	0.878 (0.009)	0.946 (0.01)	0.97 (0.01)
AB Ext-proph	Superiority (fut)	0.434 (0.074)	0.74 (0.089)	0.861 (0.093)	0.896 (0.094)	0.907 (0.094
AB Choice	Superiority (fut)	0.473 (0.035)	0.815 (0.04)	0.924 (0.041)	0.953 (0.041)	0.96 (0.041)
RD = -0.05: abx	duration 6wk effect	+silo specific d	1			
Surgical	Superiority (fut)	0.019 (0.533)	0.036 (0.695)	0.048 (0.778)	0.059 (0.826)	0.066 (0.859
AB Duration	NI (fut)	0.058 (0.166)	0.09 (0.26)	0.109 (0.324)	0.124 (0.374)	0.135 (0.414
AB Ext-proph	Superiority (fut)	0.035 (0.547)	0.057 (0.684)	0.069 (0.755)	0.078 (0.801)	0.085 (0.832
AB Choice	Superiority (fut)	0.011 (0.651)	0.016 (0.835)	0.019 (0.91)	0.023 (0.944)	0.025 (0.961
RD = 0.12 surgi	cal, RD = 0.08 abx ci	hoice +silo speci	fic d1			
Surgical	Superiority (fut)	0.322 (0.07)	0.566 (0.091)	0.709 (0.101)	0.792 (0.107)	0.842 (0.11)

Table 6.1: Cumulative probability of decision at each interim (enrolment by interim)

	Cumulative probability of decision as applicable to domain								
Domain	Decision type	500	1000	1500	2000	2500			
AB Duration	NI (fut)	0.114 (0.091)	0.206 (0.142)	0.281 (0.179)	0.344 (0.204)	0.4 (0.223)			
AB Ext-proph	Superiority (fut)	0.038 (0.56)	0.062 (0.743)	0.077 (0.832)	0.086 (0.873)	0.091 (0.895)			
AB Choice	Superiority (fut)	0.482 (0.032)	0.828 (0.035)	0.936 (0.035)	0.963 (0.036)	0.968 (0.036)			

6.2 Sample size

6.2.1 Randomised comparisons

Table 6.2 and Figure 6.1 show the expected sample size by interim analysis for the randomised comparisons within each domain. When domain level decisions are triggered, subsequent enrolments are redirected to the remaining arms, which leads to the observed divergence between arms. The figures are to give a sense of how much information is available for estimating quantities that lead to trial decisions. Subsequent tables give the expected number of participants by treatment group within each domain when a decision is triggered.

Table 6.2: Expected number of participants entering into randomised comparisons

		Expected sa	ample size for	randomised	comparisons	by enrolment
Domain	Treatment arm	500	1000	1500	2000	2500
RD = 0 in all do	mains +silo specifi	c d1				
Surgical	DAIR	125	305	480	640	784
Surgical	rev(1)	37	55	67	76	82
Surgical	rev(2)	88	129	157	177	191
Surgical	Revision	125	185	224	252	273
AB Duration	12 wks	25	43	57	68	78
AB Duration	6 wks	25	44	59	71	82
AB Ext-proph	none	70	141	203	256	301
AB Ext-proph	12 wks	70	95	110	121	130
AB Choice	no-rif	150	384	614	825	1,012
AB Choice	rif	150	203	231	246	257
RD = 0.12: surg	ical revision (one a	nd two-stage) +silo specific	d1		
Surgical	DAIR	125	217	280	321	350

Table 6.2: Expected number of participants entering into randomised comparisons

Expected sample size for randomised comparisons by enrolm							
Domain	Treatment arm	500	1000	1500	2000	2500	
Surgical	rev(1)	37	82	127	166	198	
Surgical	rev(2)	87	192	296	387	462	
Surgical	Revision	125	274	423	553	660	
AB Duration	12 wks	25	52	77	98	115	
AB Duration	6 wks	25	53	80	103	121	
AB Ext-proph	none	70	184	302	407	494	
AB Ext-proph	12 wks	70	109	136	155	169	
AB Choice	no-rif	150	388	615	807	961	
AB Choice	rif	150	202	228	242	250	
RD = 0.12: surg	ical revision (one-s	tage only) +si	lo specific d1				
Surgical	DAIR	125	286	442	584	711	
Surgical	rev(1)	38	62	80	96	108	
Surgical	rev(2)	87	144	188	223	252	
Surgical	Revision	125	205	268	318	360	
AB Duration	12 wks	25	45	62	76	87	
AB Duration	6 wks	25	46	63	79	92	
AB Ext-proph	none	70	152	227	293	350	
AB Ext-proph	12 wks	70	98	115	128	138	
AB Choice	no-rif	150	385	620	834	1,025	
AB Choice	rif	150	204	232	249	260	
RD = 0.12: surg	ical revision (two-s	tage only) +si	ilo specific d1				
Surgical	DAIR	125	239	330	403	459	
Surgical	rev(1)	38	77	115	150	180	
Surgical	rev(2)	88	179	269	350	419	
Surgical	Revision	125	255	384	500	599	
AB Duration	12 wks	25	50	74	94	112	
AB Duration	6 wks	25	51	76	98	117	
AB Ext-proph	none	70	176	287	388	477	
AB Ext-proph	12 wks	70	105	130	147	160	
AB Choice	no-rif	150	390	627	836	1,014	
AB Choice	rif	150	203	230	247	257	
RD = 0.12: abx d	duration 6wk effec	t +silo specific	e d1				
Surgical	DAIR	125	293	437	548	631	
Surgical	rev(1)	37	56	68	75	80	
Surgical	rev(2)	88	131	159	176	188	

Table 6.2: Expected number of participants entering into randomised comparisons

		Expected sample size for randomised comparisons by enrolmen					
Domain	Treatment arm	500	1000	1500	2000	2500	
Surgical	Revision	125	187	226	252	268	
AB Duration	12 wks	25	37	43	48	50	
AB Duration	6 wks	25	49	68	83	93	
AB Ext-proph	none	70	141	196	236	265	
AB Ext-proph	12 wks	70	94	109	118	124	
AB Choice	no-rif	150	373	567	717	827	
AB Choice	rif	150	203	229	243	251	
RD = 0.12: ext-p	proph 12wk effect +	silo specific d	!1				
Surgical	DAIR	125	299	469	624	763	
Surgical	rev(1)	38	58	71	81	89	
Surgical	rev(2)	88	134	166	189	207	
Surgical	Revision	125	192	238	271	296	
AB Duration	12 wks	25	44	58	70	80	
AB Duration	6 wks	25	44	60	74	85	
AB Ext-proph	none	70	106	126	139	148	
AB Ext-proph	12 wks	70	135	196	250	297	
AB Choice	no-rif	150	387	619	830	1,017	
AB Choice	rif	150	202	229	244	253	
RD = 0.12: abx	choice rif effect +si	lo specific d1					
Surgical	DAIR	125	307	484	641	782	
Surgical	rev(1)	38	56	67	75	81	
Surgical	rev(2)	87	130	157	176	190	
Surgical	Revision	125	185	224	251	271	
AB Duration	12 wks	25	43	57	69	78	
AB Duration	6 wks	25	44	58	71	81	
AB Ext-proph	none	70	143	205	256	300	
AB Ext-proph	12 wks	70	94	109	120	128	
AB Choice	no-rif	150	236	270	283	291	
AB Choice	rif	150	355	579	788	972	
RD = 0.12: all d	omains +silo specij	fic d1					
Surgical	DAIR	125	207	256	285	301	
Surgical	rev(1)	38	85	117	133	140	
Surgical	rev(2)	88	198	274	311	327	
Surgical	Revision	125	282	391	444	467	
AB Duration	12 wks	25	43	51	55	56	

Table 6.2: Expected number of participants entering into randomised comparisons

	_	Expected sample size for randomised comparisons by enrolme						
Domain	Treatment arm	500	1000	1500	2000	2500		
AB Duration	6 wks	25	64	94	109	116		
AB Ext-proph	none	70	122	145	153	156		
AB Ext-proph	12 wks	70	176	260	305	326		
AB Choice	no-rif	150	234	262	271	274		
AB Choice	rif	150	353	514	603	648		
RD = -0.05: abx	duration 6wk effec	t +silo specif	ic d1					
Surgical	DAIR	125	303	474	628	766		
Surgical	rev(1)	37	56	68	76	83		
Surgical	rev(2)	87	130	158	178	194		
Surgical	Revision	125	185	226	255	276		
AB Duration	12 wks	25	45	61	75	86		
AB Duration	6 wks	25	41	54	64	73		
AB Ext-proph	none	70	142	204	256	300		
AB Ext-proph	12 wks	70	94	109	120	129		
AB Choice	no-rif	150	382	609	814	996		
AB Choice	rif	150	204	230	245	255		
RD = 0.12 surgi	$cal, RD = 0.08 \ abx \ abx$	choice +silo s _l	pecific d1					
Surgical	DAIR	125	217	278	319	347		
Surgical	rev(1)	38	83	128	166	198		
Surgical	rev(2)	87	193	298	387	460		
Surgical	Revision	125	276	425	553	658		
AB Duration	12 wks	25	52	77	98	115		
AB Duration	6 wks	25	54	81	103	121		
AB Ext-proph	none	70	187	307	411	498		
AB Ext-proph	12 wks	70	108	133	150	162		
AB Choice	no-rif	150	232	261	272	279		
AB Choice	rif	150	361	584	774	928		

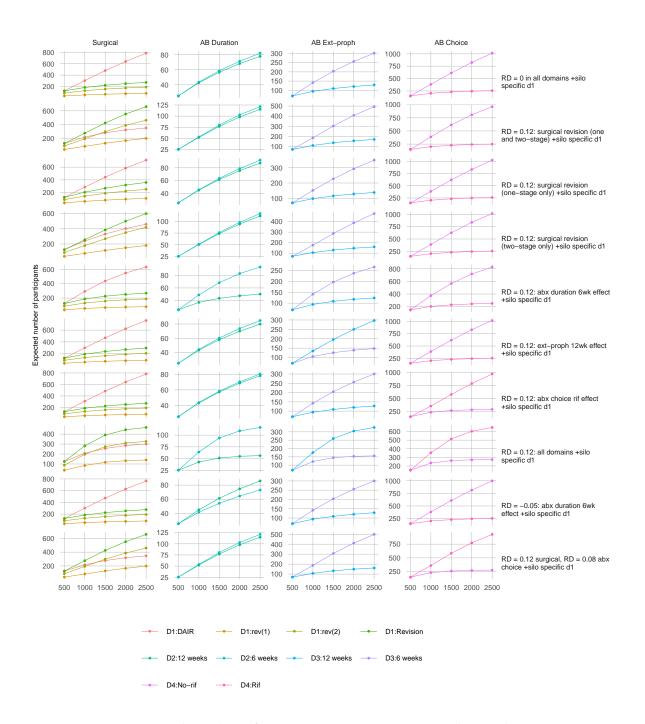


Figure 6.1: Expected number of participants entering into randomised comparisons

Table 6.3 shows the expected number of participants on each treatment arm until a decision is triggered, for each domain and each decision type. For example, for the surgical domain, some of the simulated trials will result in a superiority decision, some will result in a futility (of superiority) decision and some of the simulated trials will run until their maximum sample

size without any decision being made. Earlier results show approximately what proportion of decision types are made under each scenario.

Table 6.3: Expected number of participants entering into randomised comparisons

	Expected sample size for by stopping rule and domain									
		Surgical		AB Du	AB Duration		t-proph	AB ch	oice	
Decision	DAIR	rev(1)	rev(2)	12 wk	6 wk	none	12 wk	no-rif	rif	
RD = 0 in all domains +silo specific d1										
superiority	305	91	214	-	-	120	120	342	340	
futility (sup)	210	63	147	-	-	100	99	230	230	
ni	-	-	-	51	51	-	-	-	-	
futility (ni)	-	-	-	46	47	-	-	-	-	
no decision	624	187	438	88	89	221	220	748	751	
RD = 0.12: sur	gical rev	ision (one	and two	-stage) +s	silo spec	ific d1				
superiority	272	81	190	-	-	158	159	336	337	
futility (sup)	193	58	136	-	-	124	124	227	227	
ni	-	-	-	76	76	-	-	-	-	
futility (ni)	-	-	-	64	64	-	-	-	-	
no decision	623	188	437	149	149	364	362	749	750	
RD = 0.12: sur	gical rev	ision (one	e-stage on	ly) +silo	specific	d1				
superiority	328	99	230	-	-	131	131	342	342	
futility (sup)	231	69	162	-	-	105	105	230	230	
ni	-	-	-	56	56	-	-	-	-	
futility (ni)	-	-	-	49	49	-	-	-	-	
no decision	625	187	437	98	99	239	239	750	751	
RD = 0.12: sur	gical rev	ision (two	o-stage or	ıly) +silo	specific	d1				
superiority	305	91	214	-	-	156	154	329	330	
futility (sup)	217	65	152	-	-	121	121	228	228	
ni	-	-	-	73	73	-	-	-	-	
futility (ni)	-	-	-	60	61	-	-	-	-	
no decision	625	188	437	134	134	306	305	750	749	
RD = 0.12: abx	duratio	n 6wk eff	ect +silo s	specific d	1					
superiority	312	93	217	-	-	121	121	362	359	
futility (sup)	216	65	152	-	-	100	100	228	228	
ni	-	-	-	45	45	-	-	-	-	
futility (ni)	-	-	-	33	33	-	-	-	-	

Table 6.3: Expected number of participants entering into randomised comparisons

		Expected sample size for by stopping rule and domain								
		Surgical		AB Du	ration	AB Ex	t-proph	AB ch	oice	
Decision	DAIR	rev(1)	rev(2)	12 wk	6 wk	none	12 wk	no-rif	rif	
no decision	624	187	439	81	81	219	219	752	750	
RD = 0.12: ext-proph 12wk effect +silo specific d1										
superiority	295	89	206	-	-	117	117	361	358	
futility (sup)	221	66	155	-	-	87	87	226	226	
ni	-	-	-	51	51	-	-	-	-	
futility (ni)	-	-	-	48	48	-	-	-	-	
no decision	625	188	436	91	92	208	208	749	748	
RD = 0.12: abs	c choice r	rif effect +	-silo speci	fic d1						
superiority	311	94	218	-	-	117	117	259	259	
futility (sup)	210	63	147	-	-	100	100	172	170	
ni	-	-	-	52	52	-	-	-	-	
futility (ni)	-	-	-	47	47	-	-	-	-	
no decision	625	187	437	88	88	217	217	753	753	
RD = 0.12: all	domains	+silo spe	cific d1							
superiority	255	77	179	-	-	135	135	255	255	
futility (sup)	212	64	149	-	-	92	92	181	181	
ni	-	-	-	54	54	-	-	-	-	
futility (ni)	-	-	-	35	36	-	-	-	-	
no decision	625	187	438	124	125	275	276	755	746	
RD = -0.05: ab	x duratio	on 6wk e <u>f</u>	fect +silo	specific a	!1					
superiority	314	94	220	-	-	125	125	340	340	
futility (sup)	212	64	148	-	-	101	101	228	228	
ni	-	-	-	46	46	-	-	-	-	
futility (ni)	-	-	-	49	49	-	-	-	-	
no decision	625	187	437	89	89	222	220	748	751	
RD = 0.12 surg	gical, RD	= 0.08 ab	x choice -	+silo spec	ific d1					
superiority	269	81	188	-	-	160	160	251	252	
futility (sup)	204	61	142	-	-	123	123	172	171	
ni	-	-	-	77	78	-	-	-	-	
futility (ni)	-	-	-	64	64	-	-	-	-	
no decision	624	188	436	150	149	336	338	743	747	

6.2.2 Total enrolments

Table 6.4 shows the average total number of enrolments until each decision type by domain and scenario and, in parentheses, the proportion of trials on which the decision type was made.

Table 6.4: Expected number of enrolments by decision type (including reaching maximum sample size)

Expected number of total enrolments to hit stopping rule by domain				
Decision	Surgical	AB Duration	AB Ext-proph	AB choice
RD = 0 in all a	lomains +silo s	pecific d1		
superiority	1,220 (7%)		1,061 (9%)	1,137 (3%)
futility (sup)	839 (86%)		811 (82%)	766 (96%)
ni		1,208 (31%)		
futility (ni)		1,101 (20%)		
no decision	2,500 (7%)	2,500 (49%)	2,500 (9%)	2,500 (1%)
RD = 0.12: sur	gical revision (one and two-sta	ge) +silo specific d1	
superiority	1,085 (84%)		1,035 (10%)	1,127 (2%)
futility (sup)	775 (10%)		823 (88%)	757 (96%)
ni		1,300 (39%)		
futility (ni)		1,135 (23%)		
no decision	2,500 (6%)	2,500 (38%)	2,500 (3%)	2,500 (1%)
RD = 0.12: sur	gical revision (one-stage only)	+silo specific d1	
superiority	1,315 (16%)		1,092 (9%)	1,141 (3%)
futility (sup)	924 (70%)		821 (83%)	767 (95%)
ni		1,212 (32%)		
futility (ni)		1,090 (21%)		
no decision	2,500 (13%)	2,500 (47%)	2,500 (8%)	2,500 (2%)
RD = 0.12: sur	gical revision (two-stage only)	+silo specific d1	
superiority	1,221 (66%)		1,055 (9%)	1,100 (3%)
futility (sup)	866 (22%)		832 (88%)	761 (96%)
ni		1,308 (35%)		
futility (ni)		1,117 (22%)		
no decision	2,500 (12%)	2,500 (42%)	2,500 (3%)	2,500 (2%)
RD = 0.12: abx	duration 6wk	effect +silo spec	ific d1	
superiority	1,245 (7%)		1,047 (9%)	1,203 (3%)

Table 6.4: Expected number of enrolments by decision type (including reaching maximum sample size)

Expected number of total enrolments to hit stopping rule by doma					
Decision	Surgical	AB Duration	AB Ext-proph	AB choice	
futility (sup)	865 (86%)		813 (83%)	761 (96%)	
ni		1,041 (85%)			
futility (ni)		771 (2%)			
no decision	2,500 (7%)	2,500 (13%)	2,500 (8%)	2,500 (2%)	
RD = 0.12: ext	-proph 12wk e	ffect +silo specifi	c d1		
superiority	1,177 (8%)		976 (82%)	1,200 (3%)	
futility (sup)	884 (83%)		718 (12%)	754 (96%)	
ni		1,186 (32%)			
futility (ni)		1,099 (20%)			
no decision	2,500 (9%)	2,500 (48%)	2,500 (6%)	2,500 (1%)	
RD = 0.12: abx	c choice rif effe	ect +silo specific d	d1		
superiority	1,244 (6%)		1,032 (9%)	862 (96%)	
futility (sup)	840 (87%)		817 (83%)	571 (4%)	
ni		1,225 (31%)			
futility (ni)		1,094 (21%)			
no decision	2,500 (7%)	2,500 (48%)	2,500 (8%)	2,500 (0%)	
RD = 0.12: all	domains +silo	specific d1			
superiority	1,019 (87%)		881 (90%)	849 (96%)	
futility (sup)	850 (8%)		640 (9%)	603 (4%)	
ni		970 (97%)			
futility (ni)		670 (1%)			
no decision	2,500 (5%)	2,500 (2%)	2,500 (0%)	2,500 (0%)	
RD = -0.05: ab	x duration 6w	k effect +silo spe	cific d1		
superiority	1,254 (6%)		1,091 (8%)	1,136 (2%)	
futility (sup)	848 (86%)		824 (83%)	762 (96%)	
ni		1,094 (14%)			
futility (ni)		1,143 (41%)			
no decision	2,500 (8%)	2,500 (45%)	2,500 (8%)	2,500 (1%)	
RD = 0.12 surg	gical, RD = 0.08	8 abx choice +silo	o specific d1		
superiority	1,074 (83%)		1,032 (9%)	838 (96%)	
futility (sup)	815 (11%)		812 (89%)	571 (4%)	
ni		1,318 (40%)			

Table 6.4: Expected number of enrolments by decision type (including reaching maximum sample size)

	Expected number of total enrolments to hit stopping rule by domain				
Decision	Surgical	AB Duration	AB Ext-proph	AB choice	
futility (ni)		1,120 (22%)			
no decision	2,500 (6%)	2,500 (38%)	2,500 (2%)	2,500 (0%)	

6.3 Parameter estimation

Table 6.5 and Figure 6.2 show the expected value of the posterior means for the treatment effects by domain and interim analyse under each scenario along with the 95% interval of the posterior means.

Table 6.5: Parameter estimation - risk difference (expectation of posterior means and 95% interval)

Risk difference (expectation of posterior means and 95 pct interval)					rval)
Domain	500	1000	1500	2000	2500
RD = 0 in all do	mains +silo specific o	d1			
Surgical	0 (-0.14, 0.14)	0 (-0.12, 0.11)	-0.01 (-0.12, 0.1)	-0.01 (-0.11, 0.1)	-0.01 (-0.11, 0.1)
AB Duration	0 (-0.22, 0.22)	0 (-0.21, 0.2)	0 (-0.2, 0.2)	0 (-0.2, 0.2)	0 (-0.2, 0.2)
AB Ext-proph	0 (-0.16, 0.16)	0 (-0.13, 0.13)	0 (-0.13, 0.13)	0 (-0.13, 0.12)	-0.01 (-0.13, 0.12)
AB Choice	0 (-0.11, 0.11)	0 (-0.09, 0.08)	0 (-0.08, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)
RD = 0.12: surgi	ical revision (one and	l two-stage) +silo spe	ecific d1		
Surgical	0.11 (-0.03, 0.24)	0.11 (-0.01, 0.23)	0.12 (0, 0.22)	0.12 (0, 0.22)	0.12 (0, 0.22)
AB Duration	0 (-0.21, 0.21)	0 (-0.19, 0.19)	0 (-0.18, 0.19)	0 (-0.18, 0.18)	0 (-0.18, 0.18)
AB Ext-proph	0 (-0.15, 0.15)	0 (-0.13, 0.12)	0 (-0.12, 0.11)	-0.01 (-0.12, 0.11)	-0.01 (-0.12, 0.11)
AB Choice	0 (-0.1, 0.1)	0 (-0.08, 0.08)	0 (-0.08, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)
RD = 0.12: surgi	ical revision (one-sta	ge only) +silo specifi	c d1		
Surgical	0.02 (-0.12, 0.16)	0.02 (-0.1, 0.14)	0.02 (-0.09, 0.13)	0.02 (-0.09, 0.13)	0.02 (-0.09, 0.13)
AB Duration	0 (-0.22, 0.22)	0 (-0.2, 0.2)	0 (-0.19, 0.19)	0 (-0.19, 0.19)	0 (-0.19, 0.19)
AB Ext-proph	0 (-0.16, 0.15)	0 (-0.13, 0.13)	0 (-0.13, 0.12)	-0.01 (-0.13, 0.12)	-0.01 (-0.12, 0.11)
AB Choice	0 (-0.11, 0.11)	0 (-0.08, 0.08)	0 (-0.08, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)
RD = 0.12: surgi	ical revision (two-sta	ge only) +silo specifi	ic d1		
Surgical	0.08 (-0.06, 0.22)	0.09 (-0.03, 0.2)	0.09 (-0.03, 0.2)	0.09 (-0.02, 0.2)	0.09 (-0.02, 0.2)
AB Duration	0 (-0.22, 0.22)	0 (-0.2, 0.2)	0 (-0.19, 0.19)	0 (-0.19, 0.19)	0 (-0.19, 0.19)
AB Ext-proph	0 (-0.15, 0.15)	0 (-0.13, 0.12)	0 (-0.12, 0.11)	-0.01 (-0.12, 0.1)	-0.01 (-0.11, 0.1)
AB Choice	0 (-0.11, 0.11)	0 (-0.09, 0.08)	0 (-0.08, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)
RD = 0.12: $abx d$	duration 6wk effect +	-silo specific d1			
Surgical	0 (-0.14, 0.14)	0 (-0.13, 0.12)	-0.01 (-0.12, 0.11)	-0.01 (-0.12, 0.11)	-0.01 (-0.12, 0.11)
AB Duration	0.1 (-0.12, 0.31)	0.11 (-0.08, 0.3)	0.12 (-0.06, 0.3)	0.12 (-0.04, 0.3)	0.13 (-0.03, 0.3)
AB Ext-proph	0 (-0.15, 0.16)	0 (-0.14, 0.13)	0 (-0.13, 0.13)	-0.01 (-0.13, 0.13)	-0.01 (-0.13, 0.13)
AB Choice	0 (-0.11, 0.11)	0 (-0.09, 0.08)	0 (-0.09, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)

Table 6.5: Parameter estimation - risk difference (expectation of posterior means and 95% interval)

Risk difference (expectation of posterior means and 95 pct interval)					rval)
Domain	500	1000	1500	2000	2500
RD = 0.12: ext-p	proph 12wk effect +si	ilo specific d1			
Surgical	0.01 (-0.13, 0.15)	0 (-0.11, 0.12)	0 (-0.11, 0.11)	0 (-0.11, 0.11)	0 (-0.11, 0.1)
AB Duration	0 (-0.22, 0.22)	0 (-0.2, 0.2)	0 (-0.19, 0.2)	0 (-0.19, 0.19)	0 (-0.19, 0.19)
AB Ext-proph	0.11 (-0.04, 0.26)	0.12 (-0.02, 0.24)	0.12 (-0.01, 0.24)	0.12 (-0.01, 0.24)	0.12 (-0.01, 0.24)
AB Choice	0 (-0.11, 0.11)	0 (-0.09, 0.08)	0 (-0.08, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)
RD = 0.12: abx	choice rif effect +silo	specific d1			
Surgical	0 (-0.14, 0.13)	0 (-0.12, 0.11)	-0.01 (-0.12, 0.1)	-0.01 (-0.11, 0.09)	-0.01 (-0.11, 0.09)
AB Duration	0 (-0.22, 0.22)	0 (-0.2, 0.2)	0 (-0.19, 0.19)	0 (-0.19, 0.19)	0 (-0.19, 0.19)
AB Ext-proph	0 (-0.16, 0.15)	0 (-0.13, 0.13)	0 (-0.13, 0.12)	0 (-0.12, 0.12)	-0.01 (-0.12, 0.12)
AB Choice	0.12 (0.01, 0.22)	0.12 (0.04, 0.2)	0.12 (0.05, 0.2)	0.12 (0.05, 0.2)	0.12 (0.06, 0.2)
RD = 0.12: all de	omains +silo specific	: d1			
Surgical	0.12 (-0.01, 0.24)	0.12 (0, 0.23)	0.12 (0.01, 0.22)	0.12 (0.01, 0.22)	0.12 (0.01, 0.22)
AB Duration	0.1 (-0.09, 0.29)	0.11 (-0.04, 0.28)	0.12 (-0.01, 0.28)	0.12 (0, 0.28)	0.13 (0.01, 0.28)
AB Ext-proph	0.11 (-0.02, 0.25)	0.12 (0, 0.23)	0.12 (0.01, 0.23)	0.12 (0.01, 0.23)	0.12 (0.01, 0.23)
AB Choice	0.12 (0.02, 0.22)	0.12 (0.04, 0.2)	0.12 (0.05, 0.19)	0.12 (0.05, 0.19)	0.12 (0.05, 0.19)
RD = -0.05: abx	duration 6wk effect	+silo specific d1			
Surgical	0 (-0.14, 0.14)	0 (-0.12, 0.11)	-0.01 (-0.12, 0.1)	-0.01 (-0.11, 0.1)	-0.01 (-0.11, 0.1)
AB Duration	-0.04 (-0.26, 0.18)	-0.05 (-0.25, 0.16)	-0.05 (-0.24, 0.16)	-0.05 (-0.24, 0.16)	-0.05 (-0.24, 0.16)
AB Ext-proph	0 (-0.15, 0.15)	0 (-0.13, 0.13)	0 (-0.13, 0.12)	-0.01 (-0.13, 0.12)	-0.01 (-0.13, 0.12)
AB Choice	0 (-0.11, 0.11)	0 (-0.09, 0.08)	0 (-0.08, 0.07)	0 (-0.08, 0.06)	0 (-0.08, 0.06)
RD = 0.12 surgio	cal, RD = 0.08 abx ch	noice +silo specific d1	!		
Surgical	0.11 (-0.03, 0.24)	0.11 (0, 0.22)	0.11 (0, 0.22)	0.11 (0, 0.22)	0.12 (0.01, 0.21)
AB Duration	0 (-0.2, 0.2)	0 (-0.18, 0.18)	0 (-0.17, 0.17)	0 (-0.17, 0.17)	0 (-0.17, 0.17)
AB Ext-proph	0 (-0.15, 0.14)	0 (-0.12, 0.11)	-0.01 (-0.11, 0.1)	-0.01 (-0.11, 0.1)	-0.01 (-0.11, 0.1
AB Choice	0.12 (0.02, 0.22)	0.12 (0.04, 0.2)	0.12 (0.05, 0.2)	0.12 (0.06, 0.2)	0.12 (0.06, 0.2)

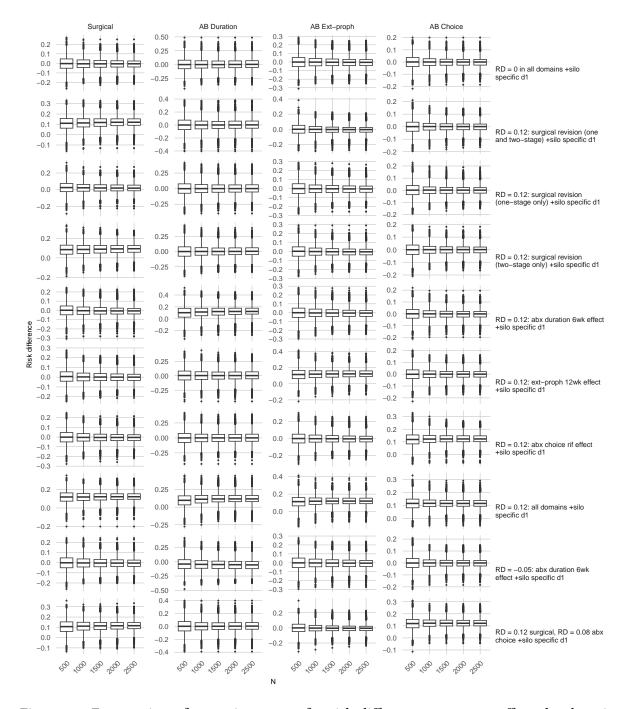


Figure 6.2: Expectation of posterior means for risk difference treatment effects by domain and simulation scenario

6.4 Observed proportion with treatment success

Table 6.6 shows the observed proportion with treatment success by domain and treatment arm. For simplicity, the treatment arms have been represented generically by the numbers 1 to 3 and have a domain specific interpretation.

For the surgical domain, 1 corresponds to DAIR, 2 corresponds to one-stage revision and 3 corresponds to two-stage revision. For the antibiotic duration domain, 2 corresponds to 12 weeks and 3 corresponds to 6 weeks. For the extended prophylaxis domain, 2 corresponds to 6 weeks and 3 corresponds to 12 weeks. For the antibiotic choice domain, 2 corresponds to no rifampacin and 3 corresponds to rifampacin.

Table 6.6: Observed proportion with treatment success

	Empirical risk by d	lomain and treatment ar	m
Domain	1	2	3
RD = 0 in all domain	ıs +silo specific d1		
Surgical	0.59	0.62	0.57
AB Duration	-	0.65	0.65
AB Ext-proph	-	0.6	0.6
AB Choice	-	0.62	0.62
RD = 0.12: surgical 1	revision (one and two	o-stage) +silo specific d1	
Surgical	0.56	0.71	0.67
AB Duration	-	0.7	0.7
AB Ext-proph	-	0.65	0.65
AB Choice	-	0.64	0.64
RD = 0.12: surgical i	revision (one-stage or	nly) +silo specific d1	
Surgical	0.56	0.68	0.55
AB Duration	-	0.68	0.68
AB Ext-proph	-	0.59	0.59
AB Choice	-	0.61	0.61
RD = 0.12: surgical i	revision (two-stage of	nly) +silo specific d1	
Surgical	0.56	0.6	0.68
AB Duration	-	0.63	0.63
AB Ext-proph	-	0.66	0.66
AB Choice	-	0.63	0.63

Table 6.6: Observed proportion with treatment success

	Empirical risk by	lomain and treatment ar	m
Domain	1	2	3
RD = 0.12: abx dura	tion 6wk effect +silo	specific d1	
Surgical	0.59	0.66	0.57
AB Duration	-	0.63	0.75
AB Ext-proph	-	0.6	0.6
AB Choice	-	0.62	0.62
RD = 0.12: ext-propl	n 12wk effect +silo sp	pecific d1	
Surgical	0.58	0.62	0.62
AB Duration	-	0.65	0.65
AB Ext-proph	-	0.58	0.7
AB Choice	-	0.63	0.63
RD = 0.12: abx choic	ce rif effect +silo spec	eific d1	
Surgical	0.62	0.65	0.61
AB Duration	-	0.69	0.69
AB Ext-proph	-	0.63	0.63
AB Choice	-	0.6	0.72
RD = 0.12: all doma	ins +silo specific d1		
Surgical	0.6	0.79	0.76
AB Duration	-	0.71	0.83
AB Ext-proph	-	0.66	0.78
AB Choice	-	0.64	0.76
RD = -0.05: abx dure	ation 6wk effect +silo	specific d1	
Surgical	0.59	0.62	0.57
AB Duration	-	0.67	0.62
AB Ext-proph	-	0.6	0.6
AB Choice		0.62	0.62
RD = 0.12 surgical, 1	RD = 0.08 abx choice	+silo specific d1	
Surgical	0.6	0.75	0.71
AB Duration	-	0.74	0.74
AB Ext-proph	-	0.69	0.69
AB Choice	-	0.62	0.74

6.5 References

Browning, S., Manning, L., Metcalf, S., Paterson, D., Robinson, J., Clark, B., Davis, J., 2022. Characteristics and outcomes of culture-negative prosthetic joint infections from the prosthetic joint infection in australia and new zealand observational (PIANO) cohort study. Journal of Bone and Joint Infection 7, 203–211. https://doi.org/10.5194/jbji-7-203-2022