

# RxODE user manual

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# Contents

<b>1</b>	<b>Introduction</b>	<b>5</b>
<b>2</b>	<b>Related R packages</b>	<b>7</b>
2.1	ODE solving . . . . .	7
2.2	PK Solved systems . . . . .	8
<b>3</b>	<b>Installation</b>	<b>9</b>
3.1	Development Version . . . . .	10
<b>4</b>	<b>Getting Started</b>	<b>11</b>
4.1	Specify ODE parameters and initial conditions . . . . .	11
4.2	Specify Dosing and sampling in RxODE . . . . .	12
4.3	Solving ODEs . . . . .	13
<b>5</b>	<b>RxODE syntax</b>	<b>17</b>
5.1	Example . . . . .	17
5.2	Syntax . . . . .	18
5.3	Logical Operators . . . . .	20
5.4	cmt() changing compartment numbers for states . . . . .	20



# Chapter 1

## Introduction

Welcome to the RxODE user guide; **RxODE** is an R package for solving and simulating from ode-based models. These models are converted from the RxODE mini-language to C and create a compiled dll for fast solving. ODE solving using RxODE has a few key parts:

- **RxODE()** which creates the C code for fast ODE solving based on a simple syntax (Chapter 5) related to Leibnitz notation.
- The event data, which can be:
  - a **NONMEM** or **deSolve** compatible data frame (Chapter ??), or
  - created with **et()** or **EventTable()** for easy simulation of events (Chapter ??)
  - The data frame can be augmented by adding time varying or adding individual covariates (**iCov=** as needed)
- **rxSolve()** which solves the system of equations using initial conditions and parameters to make predictions
  - With multiple subject data, this may be parallelized.
  - With single subject the output data frame is adaptive
  - Covariances and other metrics of uncertainty can be used to simulate while solving.

While this is the user guide, there are other places that you can visit for help:

This book was assembled on Fri Dec 11 22:28:13 2020 with RxODE version 1.0.0.0 automatically by github actions.



## Chapter 2

# Related R packages

### 2.1 ODE solving

This is a brief comparison of pharmacometric ODE solving R packages to **RxODE**.

There are several R packages for differential equations. The most popular is **deSolve**.

However for pharmacometrics-specific ODE solving, there are only 2 packages other than **RxODE** released on CRAN. Each uses compiled code to have faster ODE solving.

- **mrgsolve**, which uses C++ **lsoda** solver to solve ODE systems. The user is required to write hybrid R/C++ code to create a **mrgsolve** model which is translated to C++ for solving.

In contrast, **RxODE** has a R-like mini-language that is parsed into C code that solves the ODE system.

Unlike **RxODE**, **mrgsolve** does not currently support symbolic manipulation of ODE systems, like automatic Jacobian calculation or forward sensitivity calculation (**RxODE** currently supports this and this is the basis of **nlmixr**'s **FOCEi** algorithm)

- **dMod**, which uses a unique syntax to create “reactions”. These reactions create the underlying ODEs and then created c code for a compiled **deSolve** model.

In contrast **RxODE** defines ODE systems at a lower level. **RxODE**'s parsing of the mini-language comes from C, whereas **dMod**'s parsing comes from R.

Like **RxODE**, **dMod** supports symbolic manipulation of ODE systems and calculates forward sensitivities and adjoint sensitivities of systems.

Unlike `RxODE`, `dMod` is not thread-safe since `deSolve` is not yet thread-safe.

And there is one package that is not released on CRAN:

- `PKPDsim` which defines models in an R-like syntax and converts the system to compiled code.

Like `mrgsolve`, `PKPDsim` does not currently support symbolic manipulation of ODE systems.

`PKPDsim` is not thread-safe.

The open pharmacometrics open source community is fairly friendly, and the `RxODE` maintainers has had positive interactions with all of the ODE-solving pharmacometric projects listed.

## 2.2 PK Solved systems

`RxODE` supports 1-3 compartment models with gradients (using `stan` math's auto-differentiation). This currently uses the same equations as `PKADVAN` to allow time-varying covariates.

`RxODE` can mix ODEs and solved systems.

### 2.2.1 The following packages for solved PK systems are on CRAN

- `mrgsolve` currently has 1-2 compartment (poly-exponential models) models built-in. The solved systems and ODEs cannot currently be mixed.
- `pmxTools` currently have 1-3 compartment (super-positioning) models built-in. This is a R-only implementation.
- `PKPDmodels` has a one-compartment model with gradients.

### 2.2.2 Non-CRAN libraries:

- `PKADVAN` Provides 1-3 compartment models using non-superpositioning. This allows time-varying covariates.



# Chapter 3

## Installation

You can install the released version of RxODE from CRAN with:

```
install.packages("RxODE")
```

To build models with RxODE, you need a working c compiler. To use parallel threaded solving in RxODE, this c compiler needs to support open-mp.

You can check to see if R has working c compiler you can check with:

```
## install.packages("pkgbuild")  
pkgbuild::has_build_tools(debug = TRUE)
```

If you do not have the toolchain, you can set it up as described by the platform information below:

### 3.0.1 Windows

In windows you may simply use installr to install rtools:

```
install.packages("installr")  
library(installr)  
install.rtools()
```

Alternatively you can download and install rtools directly.

### 3.0.2 Mac OSX

To get the most speed you need OpenMP enabled and compile RxODE against that binary. Here is some discussion about this:

<https://mac.r-project.org/openmp/>

### 3.0.3 Linux

To install on linux make sure you install `gcc` (with openmp support) and `gfortran` using your distribution's package manager.

## 3.1 Development Version

Since the development version of RxODE uses StanHeaders, you will need to make sure your compiler is setup to support C++14, as described in the `rstan` setup page

Once the C++ toolchain is setup appropriately, you can install the development version from GitHub with:

```
# install.packages("devtools")  
devtools::install_github("nlmixrdevelopment/RxODE")
```

## Chapter 4

# Getting Started

The model equations can be specified through a text string, a model file or an R expression. Both differential and algebraic equations are permitted. Differential equations are specified by `d/dt(var_name) =`. Each equation can be separated by a semicolon.

To load RxODE package and compile the model:

```
library(RxODE)
library(units)

mod1 <- RxODE({
  C2 = centr/V2;
  C3 = peri/V3;
  d/dt(depot) = -KA*depot;
  d/dt(centr) = KA*depot - CL*C2 - Q*C2 + Q*C3;
  d/dt(peri) = Q*C2 - Q*C3;
  d/dt(eff) = Kin - Kout*(1-C2/(EC50+C2))*eff;
})
```

### 4.1 Specify ODE parameters and initial conditions

Model parameters can be defined as named vectors. Names of parameters in the vector must be a superset of parameters in the ODE model, and the order of parameters within the vector is not important.

```
theta <-
  c(KA=2.94E-01, CL=1.86E+01, V2=4.02E+01, # central
    Q=1.05E+01, V3=2.97E+02,             # peripheral
    Kin=1, Kout=1, EC50=200)             # effects
```

Initial conditions (ICs) can be defined through a vector as well. If the elements are not specified, the initial condition for the compartment is assumed to be zero.

```
inits <- c(eff=1);
```

If you want to specify the initial conditions in the model you can add:

```
eff(0) = 1
```

## 4.2 Specify Dosing and sampling in RxODE

RxODE provides a simple and very flexible way to specify dosing and sampling through functions that generate an event table. First, an empty event table is generated through the “eventTable()” function:

```
ev <- eventTable(amount.units='mg', time.units='hours')
```

Next, use the `add.dosing()` and `add.sampling()` functions of the `EventTable` object to specify the dosing (amounts, frequency and/or times, etc.) and observation times at which to sample the state of the system. These functions can be called multiple times to specify more complex dosing or sampling regimens. Here, these functions are used to specify 10mg BID dosing for 5 days, followed by 20mg QD dosing for 5 days:

```
ev$add.dosing(dose=10000, nbr.doses=10, dosing.interval=12)
ev$add.dosing(dose=20000, nbr.doses=5, start.time=120, dosing.interval=24)
ev$add.sampling(0:240)
```

If you wish you can also do this with the `mattigr` pipe operator `%>%`

```
ev <- eventTable(amount.units="mg", time.units="hours") %>%
  add.dosing(dose=10000, nbr.doses=10, dosing.interval=12) %>%
  add.dosing(dose=20000, nbr.doses=5, start.time=120, dosing.interval=24) %>%
  add.sampling(0:240);
```

The functions `get.dosing()` and `get.sampling()` can be used to retrieve information from the event table.

```
head(ev$get.dosing())
```

```
#>   id low time high      cmt  amt rate ii addl evid ss dur
#> 1  1  NA    0   NA (default) 10000    0 12   9   1  0  0
#> 2  1  NA  120   NA (default) 20000    0 24   4   1  0  0
```

```
head(ev$get.sampling())
```

```
#>   id low time high      cmt amt rate ii addl evid ss dur
#> 1  1  NA    0   NA (obs)  NA   NA NA   NA    0 NA  NA
#> 2  1  NA    1   NA (obs)  NA   NA NA   NA    0 NA  NA
#> 3  1  NA    2   NA (obs)  NA   NA NA   NA    0 NA  NA
#> 4  1  NA    3   NA (obs)  NA   NA NA   NA    0 NA  NA
#> 5  1  NA    4   NA (obs)  NA   NA NA   NA    0 NA  NA
#> 6  1  NA    5   NA (obs)  NA   NA NA   NA    0 NA  NA
```

You may notice that these are similar to NONMEM event tables; If you are more familiar with NONMEM data and events you could use them directly with the event table function `et`

```
ev <- et(amountUnits="mg", timeUnits="hours") %>%
  et(amt=10000, addl=9, ii=12, cmt="depot") %>%
  et(time=120, amt=2000, addl=4, ii=14, cmt="depot") %>%
  et(0:240) # Assumes sampling when there is no dosing information
```

You can see from the above code, you can dose to the compartment named in the RxODE model. This slight deviation from NONMEM can reduce the need for compartment renumbering.

These events can also be combined and expanded (to multi-subject events and complex regimens) with `rbind`, `c`, `seq`, and `rep`. For more information about creating complex dosing regimens using RxODE see the RxODE events vignette.

## 4.3 Solving ODEs

The ODE can now be solved by calling the model object's `run` or `solve` function. Simulation results for all variables in the model are stored in the output matrix `x`.

```
x <- mod1$solve(theta, ev, inits);
knitr::kable(head(x))
```

time	C2	C3	depot	centr	peri	eff
0	0.00000	0.0000000	10000.000	0.000	0.0000	1.000000
1	44.37555	0.9198298	7452.765	1783.897	273.1895	1.084664
2	54.88296	2.6729825	5554.370	2206.295	793.8758	1.180825
3	51.90343	4.4564927	4139.542	2086.518	1323.5783	1.228914
4	44.49738	5.9807076	3085.103	1788.795	1776.2702	1.234610
5	36.48434	7.1774981	2299.255	1466.670	2131.7169	1.214742

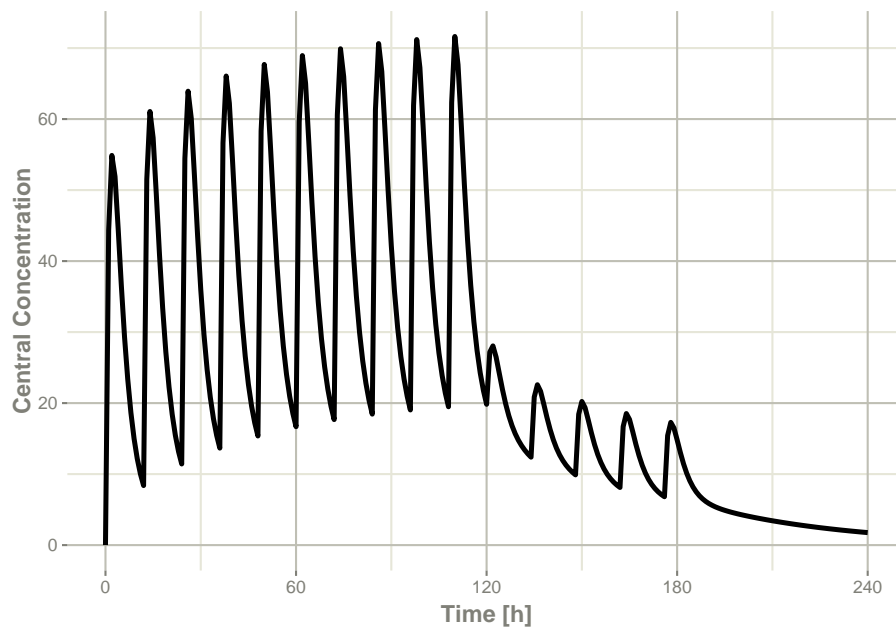
You can also solve this and create a RxODE data frame:

```
x <- mod1 %>% rxSolve(theta, ev, inits);
x
```

```
#> ----- Solved RxODE object -----
#> -- Parameters (x$params): -----
#>      V2      V3      KA      CL      Q      Kin      Kout      EC50
#> 40.200 297.000  0.294 18.600 10.500  1.000  1.000 200.000
#> -- Initial Conditions (x$inits): -----
#> depot centr peri eff
#>    0    0    0    1
#> -- First part of data (object): -----
#> # A tibble: 241 x 7
#>   time    C2    C3  depot centr  peri  eff
#>   [h] <dbl> <dbl> <dbl> <dbl> <dbl> <dbl>
#> 1     0     0     0  10000     0     0     1
#> 2     1  44.4  0.920  7453. 1784.  273.  1.08
#> 3     2  54.9  2.67  5554. 2206.  794.  1.18
#> 4     3  51.9  4.46  4140. 2087. 1324.  1.23
#> 5     4  44.5  5.98  3085. 1789. 1776.  1.23
#> 6     5  36.5  7.18  2299. 1467. 2132.  1.21
#> # ... with 235 more rows
#> -----
```

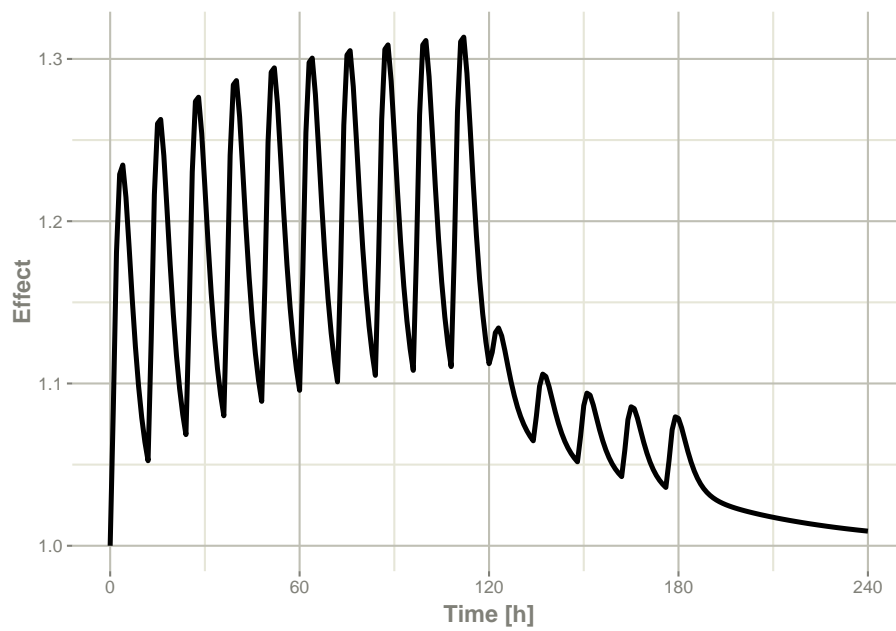
This returns a modified data frame. You can see the compartment values in the plot below:

```
library(ggplot2)
plot(x, C2) + ylab("Central Concentration")
```



Or,

```
plot(x,eff) + ylab("Effect")
```



Note that the labels are automatically labeled with the units from the initial event table. RxODE extracts **units** to label the plot (if they are present).



## Chapter 5

# RxODE syntax

This briefly describes the syntax used to define models that RxODE will translate into R-callable compiled code. It also describes the communication of variables between R and the RxODE modeling specification.

### 5.1 Example

```
# An RxODE model specification (this line is a comment).

if(comed==0){ # concomitant medication (con-med)?
  F = 1.0;    # full bioavailability w.o. con-med
}
else {
  F = 0.80;   # 20% reduced bioavailability
}

C2 = centr/V2; # concentration in the central compartment
C3 = peri/V3;  # concentration in the peripheral compartment

# ODE describing the PK and PD

d/dt(depot) = -KA*depot;
d/dt(centr) = F*KA*depot - CL*C2 - Q*C2 + Q*C3;
d/dt(peri)  = Q*C2 - Q*C3;
d/dt(eff)   = Kin - Kout*(1-C2/(EC50+C2))*eff;
```

## 5.2 Syntax

An RxODE model specification consists of one or more statements optionally terminated by semi-colons ; and optional comments (comments are delimited by # and an end-of-line).

A block of statements is a set of statements delimited by curly braces, { ... }.

Statements can be either assignments, conditional **if/else if/else**, **while** loops (can be exited by **break**), special statements, or printing statements (for debugging/testing)

Assignment statements can be:

- **simple** assignments, where the left hand is an identifier (i.e., variable)
- special **time-derivative** assignments, where the left hand specifies the change of the amount in the corresponding state variable (compartment) with respect to time e.g.,  $d/dt(\text{depot})$ :
- special **initial-condition** assignments where the left hand specifies the compartment of the initial condition being specified, e.g.  $\text{depot}(0) = 0$
- special model event changes including **bioavailability** ( $f(\text{depot})=1$ ), **lag time** ( $\text{alag}(\text{depot})=0$ ), **modeled rate** ( $\text{rate}(\text{depot})=2$ ) and **modeled duration** ( $\text{dur}(\text{depot})=2$ ). An example of these model features and the event specification for the modeled infusions the RxODE data specification is found in RxODE events vignette.
- special **change point syntax, or model times**. These model times are specified by  $\text{mtime}(\text{var})=\text{time}$
- special **Jacobian-derivative** assignments, where the left hand specifies the change in the compartment ode with respect to a variable. For example, if  $d/dt(y) = dy$ , then a Jacobian for this compartment can be specified as  $df(y)/dy(dy) = 1$ . There may be some advantage to obtaining the solution or specifying the Jacobian for very stiff ODE systems. However, for the few stiff systems we tried with LSODA, this actually slightly slowed down the solving.

Note that assignment can be done by =, <- or ~.

When assigning with the ~ operator, the **simple assignments** and **time-derivative** assignments will not be output.

Special statements can be:

- **Compartment declaration statements**, which can change the default dosing compartment and the assumed compartment number(s) as well as add extra compartment names at the end (useful for multiple-endpoint nlmixr models); These are specified by `cmt(compartmentName)`

- **Parameter declaration statements**, which can make sure the input parameters are in a certain order instead of ordering the parameters by the order they are parsed. This is useful for keeping the parameter order the same when using 2 different ODE models. These are specified by `param(par1, par2,...)`

An example model is shown below:

```
# simple assignment
C2 = centr/V2;

# time-derivative assignment
d/dt(centr) = F*KA*depot - CL*C2 - Q*C2 + Q*C3;
```

Expressions in assignment and `if` statements can be numeric or logical, however, no character nor integer expressions are currently supported.

Numeric expressions can include the following numeric operators `+`, `-`, `*`, `/`, `^` and those mathematical functions defined in the C or the R math libraries (e.g., `fabs`, `exp`, `log`, `sin`, `abs`).

You may also access the R's functions in the R math libraries, like `lgammafn` for the log gamma function.

The RxODE syntax is case-sensitive, i.e., `ABC` is different than `abc`, `Abc`, `ABc`, etc.

### 5.2.1 Identifiers

Like R, Identifiers (variable names) may consist of one or more alphanumeric, underscore `_` or period `.` characters, but the first character cannot be a digit or underscore `_`.

Identifiers in a model specification can refer to:

- State variables in the dynamic system (e.g., compartments in a pharmacokinetics model).
- Implied input variable, `t` (time), `tlast` (last time point), and `podo` (oral dose, in the undocumented case of absorption transit models).
- Special constants like `pi` or R's predefined constants.
- Model parameters (e.g., `ka` rate of absorption, `CL` clearance, etc.)
- Others, as created by assignments as part of the model specification; these are referred as *LHS* (left-hand side) variable.

Currently, the RxODE modeling language only recognizes system state variables and “parameters”, thus, any values that need to be passed from R to the ODE

model (e.g., `age`) should be either passed in the `params` argument of the integrator function `rxSolve()` or be in the supplied event data-set.

There are certain variable names that are in the RxODE event tables. To avoid confusion, the following event table-related items cannot be assigned, or used as a state but can be accessed in the RxODE code:

- `cmt`
- `dvid`
- `addl`
- `ss`
- `rate`
- `id`

However the following variables are cannot be used in a model specification - `evid` - `ii`

Sometimes RxODE generates variables that are fed back to RxODE. Similarly, `nlmixr` generates some variables that are used in `nlmixr` estimation and simulation. These variables start with the either the `rx` or `nlmixr` prefixes. To avoid any problems, it is suggested to not use these variables starting with either the `rx` or `nlmixr` prefixes.

### 5.3 Logical Operators

Logical operators support the standard R operators `==`, `!=`, `>=`, `<=`, `>` and `<`. Like R these can be in `if()` or `while()` statements, `ifelse()` expressions. Additionally they can be in a standard assignment. For instance, the following is valid:

```
cov1 = covm*(sexf == "female") + covm*(sexf != "female")
```

Notice that you can also use character expressions in comparisons. This convenience comes at a cost since character comparisons are slower than numeric expressions. Unlike R, `as.numeric` or `as.integer` for these logical statements is not only not needed, but will cause an syntax error if you try to use the function.

### 5.4 `cmt()` changing compartment numbers for states

The compartment order can be changed with the `cmt()` syntax in the model. To understand what the `cmt()` can do you need to understand how RxODE numbers the compartments.

Below is an example of how RxODE numbers compartments

### 5.4.1 How RxODE numbers compartments

RxODE automatically assigns compartment numbers when parsing. For example, with the Mavoglurant PBPK model the following model may be used:

```
library(RxODE)
pbpk <- RxODE({
  KbBR = exp(1KbBR)
  KbMU = exp(1KbMU)
  KbAD = exp(1KbAD)
  CLint= exp(1CLint + eta.LCLint)
  KbBO = exp(1KbBO)
  KbRB = exp(1KbRB)

  ## Regional blood flows
  CO = (187.00*WT^0.81)*60/1000;          # Cardiac output (L/h) from White et al (1968)
  QHT = 4.0 *CO/100;
  QBR = 12.0*CO/100;
  QMU = 17.0*CO/100;
  QAD = 5.0 *CO/100;
  QSK = 5.0 *CO/100;
  QSP = 3.0 *CO/100;
  QPA = 1.0 *CO/100;
  QLI = 25.5*CO/100;
  QST = 1.0 *CO/100;
  QGU = 14.0*CO/100;
  QHA = QLI - (QSP + QPA + QST + QGU); # Hepatic artery blood flow
  QBO = 5.0 *CO/100;
  QKI = 19.0*CO/100;
  QRB = CO - (QHT + QBR + QMU + QAD + QSK + QLI + QBO + QKI);
  QLU = QHT + QBR + QMU + QAD + QSK + QLI + QBO + QKI + QRB;

  ## Organs' volumes = organs' weights / organs' density
  VLU = (0.76 *WT/100)/1.051;
  VHT = (0.47 *WT/100)/1.030;
  VBR = (2.00 *WT/100)/1.036;
  VMU = (40.00*WT/100)/1.041;
  VAD = (21.42*WT/100)/0.916;
  VSK = (3.71 *WT/100)/1.116;
  VSP = (0.26 *WT/100)/1.054;
  VPA = (0.14 *WT/100)/1.045;
  VLI = (2.57 *WT/100)/1.040;
  VST = (0.21 *WT/100)/1.050;
  VGU = (1.44 *WT/100)/1.043;
  VBO = (14.29*WT/100)/1.990;
  VKI = (0.44 *WT/100)/1.050;
```

```

VAB = (2.81 *WT/100)/1.040;
VVB = (5.62 *WT/100)/1.040;
VRB = (3.86 *WT/100)/1.040;

## Fixed parameters
BP = 0.61;      # Blood:plasma partition coefficient
fup = 0.028;    # Fraction unbound in plasma
fub = fup/BP;   # Fraction unbound in blood

KbLU = exp(0.8334);
KbHT = exp(1.1205);
KbSK = exp(-.5238);
KbSP = exp(0.3224);
KbPA = exp(0.3224);
KbLI = exp(1.7604);
KbST = exp(0.3224);
KbGU = exp(1.2026);
KbKI = exp(1.3171);

##-----
S15 = VVB*BP/1000;
C15 = Venous_Blood/S15

##-----
d/dt(Lungs) = QLU*(Venous_Blood/VVB - Lungs/KbLU/VLU);
d/dt(Heart) = QHT*(Arterial_Blood/VAB - Heart/KbHT/VHT);
d/dt(Brain) = QBR*(Arterial_Blood/VAB - Brain/KbBR/VBR);
d/dt(Muscles) = QMU*(Arterial_Blood/VAB - Muscles/KbMU/VMU);
d/dt(Adipose) = QAD*(Arterial_Blood/VAB - Adipose/KbAD/VAD);
d/dt(Skin) = QSK*(Arterial_Blood/VAB - Skin/KbSK/VSK);
d/dt(Spleen) = QSP*(Arterial_Blood/VAB - Spleen/KbSP/VSP);
d/dt(Pancreas) = QPA*(Arterial_Blood/VAB - Pancreas/KbPA/VPA);
d/dt(Liver) = QHA*Arterial_Blood/VAB + QSP*Spleen/KbSP/VSP + QPA*Pancreas/KbPA/VPA;
d/dt(Stomach) = QST*(Arterial_Blood/VAB - Stomach/KbST/VST);
d/dt(Gut) = QGU*(Arterial_Blood/VAB - Gut/KbGU/VGU);
d/dt(Bones) = QBO*(Arterial_Blood/VAB - Bones/KbBO/VBO);
d/dt(Kidneys) = QKI*(Arterial_Blood/VAB - Kidneys/KbKI/VKI);
d/dt(Arterial_Blood) = QLU*(Lungs/KbLU/VLU - Arterial_Blood/VAB);
d/dt(Venous_Blood) = QHT*Heart/KbHT/VHT + QBR*Brain/KbBR/VBR + QMU*Muscles/KbMU/VMU;
d/dt(Rest_of_Body) = QRB*(Arterial_Blood/VAB - Rest_of_Body/KbRB/VRB);
})

```

If you look at the summary, you can see where RxODE assigned the compartment number(s)

```
summary(pbpk)
```

```
#> RxODE 1.0.0-0 model named rx_2e57f6731796bc01c8971d9f443861b6 model (ready).
#> DLL: /home/matt/.cache/R/RxODE/rx_2e57f6731796bc01c8971d9f443861b6_..rx_2e57f6731796bc01c8
#> NULL
#>
#> Calculated Variables:
#> [1] "KbBR" "KbMU" "KbAD" "CLint" "KbBO" "KbRB" "CO" "QHT" "QBR"
#> [10] "QMU" "QAD" "QSK" "QSP" "QPA" "QLI" "QST" "QGU" "QHA"
#> [19] "QBO" "QKI" "QRB" "QLU" "VLU" "VHT" "VBR" "VMU" "VAD"
#> [28] "VSK" "VSP" "VPA" "VLI" "VST" "VGU" "VBO" "VKI" "VAB"
#> [37] "VVB" "VRB" "fub" "KbLU" "KbHT" "KbSK" "KbSP" "KbPA" "KbLI"
#> [46] "KbST" "KbGU" "KbKI" "S15" "C15"
#> ----- RxODE Model Syntax -----
#> RxODE({
#>   KbBR = exp(1KbBR)
#>   KbMU = exp(1KbMU)
#>   KbAD = exp(1KbAD)
#>   CLint = exp(1CLint + eta.LClint)
#>   KbBO = exp(1KbBO)
#>   KbRB = exp(1KbRB)
#>   CO = (187 * WT^0.81) * 60/1000
#>   QHT = 4 * CO/100
#>   QBR = 12 * CO/100
#>   QMU = 17 * CO/100
#>   QAD = 5 * CO/100
#>   QSK = 5 * CO/100
#>   QSP = 3 * CO/100
#>   QPA = 1 * CO/100
#>   QLI = 25.5 * CO/100
#>   QST = 1 * CO/100
#>   QGU = 14 * CO/100
#>   QHA = QLI - (QSP + QPA + QST + QGU)
#>   QBO = 5 * CO/100
#>   QKI = 19 * CO/100
#>   QRB = CO - (QHT + QBR + QMU + QAD + QSK + QLI + QBO + QKI)
#>   QLU = QHT + QBR + QMU + QAD + QSK + QLI + QBO + QKI + QRB
#>   VLU = (0.76 * WT/100)/1.051
#>   VHT = (0.47 * WT/100)/1.03
#>   VBR = (2 * WT/100)/1.036
#>   VMU = (40 * WT/100)/1.041
#>   VAD = (21.42 * WT/100)/0.916
#>   VSK = (3.71 * WT/100)/1.116
#>   VSP = (0.26 * WT/100)/1.054
#>   VPA = (0.14 * WT/100)/1.045
```

```

#> VLI = (2.57 * WT/100)/1.04
#> VST = (0.21 * WT/100)/1.05
#> VGU = (1.44 * WT/100)/1.043
#> VBO = (14.29 * WT/100)/1.99
#> VKI = (0.44 * WT/100)/1.05
#> VAB = (2.81 * WT/100)/1.04
#> VVB = (5.62 * WT/100)/1.04
#> VRB = (3.86 * WT/100)/1.04
#> BP = 0.61
#> fup = 0.028
#> fub = fup/BP
#> KbLU = exp(0.8334)
#> KbHT = exp(1.1205)
#> KbSK = exp(-0.5238)
#> KbSP = exp(0.3224)
#> KbPA = exp(0.3224)
#> KbLI = exp(1.7604)
#> KbST = exp(0.3224)
#> KbGU = exp(1.2026)
#> KbKI = exp(1.3171)
#> S15 = VVB * BP/1000
#> C15 = Venous_Blood/S15
#> d/dt(Lungs) = QLU * (Venous_Blood/VVB - Lungs/KbLU/VLU)
#> d/dt(Heart) = QHT * (Arterial_Blood/VAB - Heart/KbHT/VHT)
#> d/dt(Brain) = QBR * (Arterial_Blood/VAB - Brain/KbBR/VBR)
#> d/dt(Muscles) = QMU * (Arterial_Blood/VAB - Muscles/KbMU/VMU)
#> d/dt(Adipose) = QAD * (Arterial_Blood/VAB - Adipose/KbAD/VAD)
#> d/dt(Skin) = QSK * (Arterial_Blood/VAB - Skin/KbSK/VSK)
#> d/dt(Spleen) = QSP * (Arterial_Blood/VAB - Spleen/KbSP/VSP)
#> d/dt(Pancreas) = QPA * (Arterial_Blood/VAB - Pancreas/KbPA/VPA)
#> d/dt(Liver) = QHA * Arterial_Blood/VAB + QSP * Spleen/KbSP/VSP +
#>   QPA * Pancreas/KbPA/VPA + QST * Stomach/KbST/VST + QGU *
#>   Gut/KbGU/VGU - CLint * fub * Liver/KbLI/VLI - QLI * Liver/KbLI/VLI
#> d/dt(Stomach) = QST * (Arterial_Blood/VAB - Stomach/KbST/VST)
#> d/dt(Gut) = QGU * (Arterial_Blood/VAB - Gut/KbGU/VGU)
#> d/dt(Bones) = QBO * (Arterial_Blood/VAB - Bones/KbBO/VBO)
#> d/dt(Kidneys) = QKI * (Arterial_Blood/VAB - Kidneys/KbKI/VKI)
#> d/dt(Arterial_Blood) = QLU * (Lungs/KbLU/VLU - Arterial_Blood/VAB)
#> d/dt(Venous_Blood) = QHT * Heart/KbHT/VHT + QBR * Brain/KbBR/VBR +
#>   QMU * Muscles/KbMU/VMU + QAD * Adipose/KbAD/VAD + QSK *
#>   Skin/KbSK/VSK + QLI * Liver/KbLI/VLI + QBO * Bones/KbBO/VBO +
#>   QKI * Kidneys/KbKI/VKI + QRB * Rest_of_Body/KbRB/VRB -
#>   QLU * Venous_Blood/VVB
#> d/dt(Rest_of_Body) = QRB * (Arterial_Blood/VAB - Rest_of_Body/KbRB/VRB)
#> })
#> -----

```



In this case, `Venous_Blood` is assigned to compartment 15. Figuring this out can be inconvenient and also lead to re-numbering compartment in simulation or estimation datasets. While it is easy and probably clearer to specify the compartment by name, other tools only support compartment numbers. Therefore, having a way to number compartment easily can lead to less data modification between multiple tools.

### 5.4.2 Changing compartments by pre-declaring with `cmt()`

To add the compartments to the RxODE model in the order you desire you simply need to pre-declare the compartments with `cmt`. For example specifying is `Venous_Blood` and `Skin` to be the 1st and 2nd compartments, respectively, is simple:

```
pbpk2 <- RxODE({
  cmt(Venous_Blood) ## Now this is the first compartment, ie cmt=1
  cmt(Skin) ## Skin may be a compartment you wish to dose to as well, so it is now cmt=2
  KbBR = exp(1KbBR)
  KbMU = exp(1KbMU)
  KbAD = exp(1KbAD)
  CLint= exp(1CLint + eta.LCLint)
  KbBO = exp(1KbBO)
  KbRB = exp(1KbRB)

  ## Regional blood flows
  CO = (187.00*WT^0.81)*60/1000;          # Cardiac output (L/h) from White et al (1968)
  QHT = 4.0 *CO/100;
  QBR = 12.0*CO/100;
  QMU = 17.0*CO/100;
  QAD = 5.0 *CO/100;
  QSK = 5.0 *CO/100;
  QSP = 3.0 *CO/100;
  QPA = 1.0 *CO/100;
  QLI = 25.5*CO/100;
  QST = 1.0 *CO/100;
  QGU = 14.0*CO/100;
  QHA = QLI - (QSP + QPA + QST + QGU); # Hepatic artery blood flow
  QBO = 5.0 *CO/100;
  QKI = 19.0*CO/100;
  QRB = CO - (QHT + QBR + QMU + QAD + QSK + QLI + QBO + QKI);
  QLU = QHT + QBR + QMU + QAD + QSK + QLI + QBO + QKI + QRB;

  ## Organs' volumes = organs' weights / organs' density
  VLU = (0.76 *WT/100)/1.051;
```

```

VHT = (0.47 *WT/100)/1.030;
VBR = (2.00 *WT/100)/1.036;
VMU = (40.00*WT/100)/1.041;
VAD = (21.42*WT/100)/0.916;
VSK = (3.71 *WT/100)/1.116;
VSP = (0.26 *WT/100)/1.054;
VPA = (0.14 *WT/100)/1.045;
VLI = (2.57 *WT/100)/1.040;
VST = (0.21 *WT/100)/1.050;
VGU = (1.44 *WT/100)/1.043;
VBO = (14.29*WT/100)/1.990;
VKI = (0.44 *WT/100)/1.050;
VAB = (2.81 *WT/100)/1.040;
VVB = (5.62 *WT/100)/1.040;
VRB = (3.86 *WT/100)/1.040;

## Fixed parameters
BP = 0.61;      # Blood:plasma partition coefficient
fup = 0.028;    # Fraction unbound in plasma
fub = fup/BP;   # Fraction unbound in blood

KbLU = exp(0.8334);
KbHT = exp(1.1205);
KbSK = exp(-.5238);
KbSP = exp(0.3224);
KbPA = exp(0.3224);
KbLI = exp(1.7604);
KbST = exp(0.3224);
KbGU = exp(1.2026);
KbKI = exp(1.3171);

##-----
S15 = VVB*BP/1000;
C15 = Venous_Blood/S15

##-----
d/dt(Lungs) = QLU*(Venous_Blood/VVB - Lungs/KbLU/VLU);
d/dt(Heart) = QHT*(Arterial_Blood/VAB - Heart/KbHT/VHT);
d/dt(Brain) = QBR*(Arterial_Blood/VAB - Brain/KbBR/VBR);
d/dt(Muscles) = QMU*(Arterial_Blood/VAB - Muscles/KbMU/VMU);
d/dt(Adipose) = QAD*(Arterial_Blood/VAB - Adipose/KbAD/VAD);
d/dt(Skin) = QSK*(Arterial_Blood/VAB - Skin/KbSK/VSK);
d/dt(Spleen) = QSP*(Arterial_Blood/VAB - Spleen/KbSP/VSP);
d/dt(Pancreas) = QPA*(Arterial_Blood/VAB - Pancreas/KbPA/VPA);
d/dt(Liver) = QHA*Arterial_Blood/VAB + QSP*Spleen/KbSP/VSP + QPA*Pancreas/KbPA/VPA

```

```

d/dt(Stomach) = QST*(Arterial_Blood/VAB - Stomach/KbST/VST);
d/dt(Gut) = QGU*(Arterial_Blood/VAB - Gut/KbGU/VGU);
d/dt(Bones) = QBO*(Arterial_Blood/VAB - Bones/KbBO/VBO);
d/dt(Kidneys) = QKI*(Arterial_Blood/VAB - Kidneys/KbKI/VKI);
d/dt(Arterial_Blood) = QLU*(Lungs/KbLU/VLU - Arterial_Blood/VAB);
d/dt(Venous_Blood) = QHT*Heart/KbHT/VHT + QBR*Brain/KbBR/VBR + QMU*Muscles/KbMU/VMU + QAD*Adi
d/dt(Rest_of_Body) = QRB*(Arterial_Blood/VAB - Rest_of_Body/KbRB/VRB);
})

```

You can see this change in the simple printout

```
pbpk2
```

```

#> RxODE 1.0.0-0 model named rx_dfc43b162c4ff916310e6ca1def028ac model (ready).
#> x$state: Venous_Blood, Skin, Lungs, Heart, Brain, Muscles, Adipose, Spleen, Pancreas, Liver, S
#> x$params: lKbBR, lKbMU, lKbAD, lCLint, eta.LCLint, lKbBO, lKbRB, WT, BP, fup
#> x$lhs: KbBR, KbMU, KbAD, CLint, KbBO, KbRB, CO, QHT, QBR, QMU, QAD, QSK, QSP, QPA, QLI, QST, C

```

The first two compartments are `Venous_Blood` followed by `Skin`.

### 5.4.3 Appending compartments to the model with `cmt()`

You can also append “compartments” to the model. Because of the ODE solving internals, you cannot add fake compartments to the model until after all the differential equations are defined.

For example this is legal:

```

ode.1c.ka <- RxODE({
  C2 = center/V;
  d / dt(depot) = -KA * depot
  d/dt(center) = KA * depot - CL*C2
  cmt(eff);
})
print(ode.1c.ka)

```

```

#> RxODE 1.0.0-0 model named rx_de6db2c40ddb8e5bf666a1a942c0c10a model (ready).
#> $state: depot, center
#> $stateExtra: eff
#> $params: V, KA, CL
#> $lhs: C2

```

But compartments defined before all the differential equations is not supported;  
So the model below:

```
ode.1c.ka <- RxODE({  
  cmt(eff);  
  C2 = center/V;  
  d / dt(depot) = -KA * depot  
  d/dt(center) = KA * depot - CL*C2  
})
```

will give an error:

```
Error in rxModelVars_(obj) :  
  Evaluation error: Compartment 'eff' needs differential equations defined.
```