# Reanalysis of 03-Zecca

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## Reference

Zecca, E., Brunelli, C., Centurioni, F., Manzoni, A., Pigni, A., & Caraceni, A. (2017). Fentanyl Sublingual Tablets Versus Subcutaneous Morphine for the Management of Severe Cancer Pain Episodes in Patients Receiving Opioid Treatment: A Double-Blind, Randomized, Noninferiority Trial. *Journal of Clinical Oncology*, 35(7), 759–765. https://doi.org/10.1200/JCO.2016.69.9504

## Notes from reading methods section

- Dependent variable: Pain intensity (PI) (average across follow-ups, AVP\_30)
- Independent variable: treatment group
  - Fentanyl sublingual tablets FST (n=57, 1 from 58 was excluded)

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- Subcutaneous morphine SCM (n=56)
- Covariate: baseline PI
- Design: 1-way ANCOVA with group as IV and baseline PI as covariate

## Reading data

Data is loaded, reshaped if necessary, and factors are specified.

```
PATH = file.path(path.expand("~"), "Data", "ancova") # ancova project folder

data = read_excel(file.path(PATH, "dataPrimaryStudies", "03-Zecca", "03-Zecca.xls"))

data = as.data.frame(data)

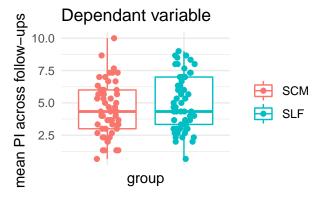
data$tratt = as.factor(data$tratt)
```

## Descriptives

#### Dependent variable

Number of samples and mean (SD) in levels of the independent variables.

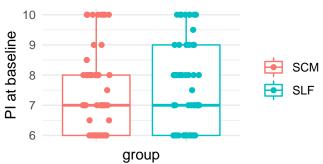
```
tab.dv = array(NA, dim=c(2,3))
tab.dv[,1] = levels(data$tratt)
tab.dv[,2] = summary(data$tratt)
tab.dv[,3] = tapply(data$pain_mea_30, data$tratt,
                  function (x) sprintf("\%0.2f(\%0.2f)", mean(x), sd(x)))
colnames(tab.dv) = c("group", "n", "mean (SD)")
print(tab.dv)
##
                   mean (SD)
        group n
## [1,] "SCM" "56" "4.48 (2.03)"
## [2,] "SLF" "57" "4.97 (2.12)"
ggplot(data, aes(y=pain_mea_30, x=tratt, color=tratt)) +
  geom boxplot() +
  geom_point(position = position_jitter(width = 0.15, height = 0)) +
  theme_minimal() +
  theme(axis.text.x = element_blank(), legend.title = element_blank()) +
  xlab("group") + ylab("mean PI across follow-ups ") + ggtitle("Dependent variable")
```



## Covariate(s)

```
tab.cv = array(NA, dim=c(2,3))
tab.cv[,1] = levels(data$tratt)
tab.cv[,2] = summary(data$tratt)
tab.cv[,3] = tapply(data$pain_mea_bas, data$tratt,
                  function (x) sprintf(\%0.2f(\%0.2f)\%, mean(x), sd(x))
colnames(tab.cv) = c("group", "n", "mean (SD)")
print(tab.cv)
##
        group n
                   mean (SD)
## [1,] "SCM" "56" "7.54 (1.39)"
## [2,] "SLF" "57" "7.53 (1.45)"
ggplot(data, aes(y=pain_mea_bas, x=tratt, color=tratt)) +
  geom_boxplot() +
  geom_point(position = position_jitter(width = 0.15, height = 0)) +
 theme_minimal() +
  theme(axis.text.x = element_blank(), legend.title = element_blank()) +
  xlab("group") + ylab("PI at baseline") + ggtitle("Covarate")
```

#### Covarate



## Main analysis ANCOVA

```
# Orthogonal contrasts
contrasts(data$tratt) = contr.helmert(2)
fit.ancova = aov(pain_mea_30 ~ pain_mea_bas + tratt, data = data)
result = Anova(fit.ancova, type=3) # Type III
print(result)
## Anova Table (Type III tests)
## Response: pain_mea_30
                Sum Sq Df F value
##
                                      Pr(>F)
## (Intercept)
                24.426
                         1 9.9081 0.002118 **
## pain_mea_bas 207.658
                         1 84.2329 2.989e-15 ***
## tratt
                 6.914
                         1 2.8047 0.096830 .
## Residuals
               271.182 110
## ---
## Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1
```

The paper used ANCOVA to to a non-inferiority analysis. We calculate ANCOVA adjusted means and 95%-CI.

```
n = summary(data$tratt)
means.adj = effect("tratt", fit.ancova, se=T)
MD = means.adj$fit[1] - means.adj$fit[2]
# variance assumed unequal
SE = sqrt(means.adj$se[1]^2 + means.adj$se[2]^2)
#ci95 = c(MD - 1.96*SE, MD + 1.96*SE)
# SE based on t-distribution because n1 and n2 < 60
myt = qt(.975, df= n[1] + n[2] - 2)
ci95 = c(MD - myt*SE, MD + myt*SE)

sprintf("%.2f (%.2f, %.2f)", MD, ci95[1], ci95[2])
## [1] "-0.49 (-1.08, 0.09)"</pre>
```

## Comparing ANCOVA in original study with reanalysis

#### Independent variable

```
tab.IV = rbind(stats.orig.IV, stats.rep.IV)
rownames(tab.IV) = c("original Study", "reanalysis")
print(t(tab.IV))
           original Study reanalysis
## Fvalue NA
                          "2.80"
                          " 1"
## df1
           NA
                          "110"
## df2
           NA
## pvalue NA
                          "0.097"
                          "-0.49"
## MD
           "-0.49"
## lowerCI "-1.1"
                          "-1.08"
## upperCI "0.09"
                          "0.09"
```

#### Covariate

```
tab.CV = rbind(stats.orig.CV, stats.rep.CV)
rownames(tab.CV) = c("original Study", "reanalysis")
print(t(tab.CV))

## original Study reanalysis
## Fvalue NA "84.23"
```

```
## Fvalue NA
                           "84.23"
                           " 1"
## df1
           NA
                          "110"
## df2
           NA
## pvalue NA
                          "< 0.0001"
## MD
           NA
                          NA
## lowerCI NA
                          NA
## upperCI NA
                          NA
```

## Assumptions

#### 1. Homogeneity of variance

- ANOVA/ANCOVA is fairly robust in terms of the error rate when sample sizes are equal.
- When groups with larger sample sizes have larger variances than the groups with smaller sample sizes, the resulting F-ratio tends to be conservative. That is, it's more likely to produce a non-significant result when a genuine difference does exist in the population.
- Conversely, when the groups with larger sample sizes have smaller variances than the groups with smaller samples sizes, the resulting F-ratio tends to be liberal and can inflate the false positive rate.

```
tapply(data$pain_mea_30, data$tratt, sd)

## SCM SLF

## 2.030992 2.121189

leveneTest(pain_mea_30 ~ tratt, data = data)

## Levene's Test for Homogeneity of Variance (center = median)

## proup 1 0.3764 0.5408

## 111
```

#### 2. Independence between covariate and IV

When the covariate and the experimental effect (independent variable) are not independent the treatment effect is obscured, spurious treatment effects can arise and the interpretation of the ANCOVA is seriously compromised.

We test whether our groups differ on the CV. If the groups do not significantly differ then is appropriate to use the covariate.

### 3. Homogeneity of regression slopes

```
fit.hrs = aov(pain_mea_30 ~ pain_mea_bas*tratt, data = data)
Anova(fit.hrs, type=3)

## Anova Table (Type III tests)
##
## Response: pain_mea_30
## Sum Sq Df F value Pr(>F)
```

```
## (Intercept)
                       23.374
                                 1 9.5251
                                             0.00257 **
## pain_mea_bas
                      204.174
                                 1 83.2032 4.304e-15 ***
## tratt
                         1.988
                                    0.8100
                                             0.37011
                        3.704
                                    1.5096
                                             0.22185
## pain_mea_bas:tratt
                                 1
## Residuals
                      267.477 109
##
## Signif. codes: 0 '***' 0.001 '**' 0.05 '.' 0.1 ' ' 1
ggplot(data, aes(y=pain_mea_30, x=pain_mea_bas, color=tratt, shape=tratt)) +
  geom_point() +
  geom_smooth(formula = y ~ x,method=lm, se=FALSE, fullrange=TRUE) +
  theme_minimal() +
  theme(legend.title = element_blank()) +
  xlab("pain at baseline") + ylab("pain follow-up")
   10.0
pain follow-up
    7.5
                                           SCM
    5.0
                                           SLF
```

### Notes

2.5

6

- Non-inferiority intervention study, ANCOVA is used to calculate adjusted means for the two groups (corrected for baseline pain)
- Main finding partly reproduced, lower bound of the 95%-CI was wrong, probably a typo.
- Our analysis was consistent with SAS output from authors

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pain at baseline

• All assumptions met

Data was analyzed according to recommendations by Field, Miles, & Field (2012).

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