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Conclusion 0000

# Unblinded sample-size reassessment in time-to-event clinical trials

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#### Outline

#### Example

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## Lung cancer trial (Schäfer and Müller, 2001)

- Patients randomized to "Radiotherapy + Chemotherapy" (E) or "Chemotherapy" (C)
- Median survival on C pprox 14 months
- Anticipated survival on E pprox 20 months
- Sample size: 255 events ( $\alpha = 0.025$ ,  $\beta = 0.2$ )
- Exponential model ... this could be achieved with 40 months recruitment and 20 months min follow-up.

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#### 40 months into the trial...

- (a) patient recruitment was much slower than expected
  - only 136 patients had been randomized
- (b) the hazard rate had been over-estimated in the planning
  - only 56 events had been observed

#### Recommendation of Schäfer and Müller:

"abandon the trial because there [is] no chance of achieving the planned sample size within a reasonable time"



## Counterproposal of study group

- Look at the data to see if there is a larger treatment effect than originally anticipated.
- If so, reduce the initially planned sample size (required number of events).
- Larger the observed treatment effect  $\rightarrow$  earlier the study ends.

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#### A closely related scenario Proschan & Hunsburger (1995); Irle & Schäfer (2012)

- Look at data to see if there is a smaller than anticipated treatment effect.
- If so, increase the sample size (required number of events) to give a better chance of achieving a statistically significant result.

Standard analysis will not control the type I error rate...



## Adaptive design with immediate responses



E.g., under  $H_0$ ,

$$rac{1}{\sqrt{2}} \Phi^{-1} \left\{ 1 - p_1(X_1^{ ext{int}}) 
ight\} + rac{1}{\sqrt{2}} \Phi^{-1} \left\{ 1 - p_2(Y) 
ight\} \sim \mathcal{N}(0,1)$$





$$\frac{1}{\sqrt{2}} \Phi^{-1} \left\{ 1 - p_1(X_1^{\mathsf{int}}) \right\} + \frac{1}{\sqrt{2}} \Phi^{-1} \left\{ 1 - p_2(Y) \right\} \stackrel{?}{\sim} \mathcal{N}(0,1)$$

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#### When is this valid?

- ✓ Interim decision strategy based solely on (primary endpoint) treatment effect estimate.
- Interim decisions are based on partial information from patients who are yet to provide full primary endpoint response
   e.g. second-stage sample size is chosen on basis of progression-free survival when primary endpoint is overall survival.





$$\frac{1}{\sqrt{2}}\Phi^{-1}\left\{1-p_1(X_1)\right\}+\frac{1}{\sqrt{2}}\Phi^{-1}\left\{1-p_2(Y)\right\}\sim\mathcal{N}(0,1)$$

e.g., Liu & Pledger (2005) – Gaussian responses Schmidli, Bretz & Racine-Poon (2007) – Binary responses Adaptive methods

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## Extra problem with time-to-event endpoint? Jenkins, Stone & Jennison (2011); Irle & Schäfer (2012)



- Must pre-specify end of follow-up of first-stage patients,  $T^{end}$ , in definition of  $p_1$ .
- Otherwise, p<sub>1</sub>(X<sub>1</sub>) <sup>×</sup>∼ U[0, 1] under H<sub>0</sub>, and type I error may be inflated.



#### Some survival times are ignored

- Final test decision only depends on a subset of the recorded survival times; part of the observed data is ignored.
- Particularly damaging if long-term survival is of most concern (it is the survival times of earliest recruited patients that is ignored).
- Therefore, we (Magirr et al., 2016) investigated the effect of naïvely incorporating this illegitimate data into the final test statistic...

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## Adaptive log-rank test

"Correct" adaptive test statistic

$$Z^{\text{CORRECT}} = w_1 L_1(T^{\text{end}}) + w_2 \Phi^{-1}(1-p_2)$$

"Naïve" adaptive test statistic

$$Z^{\mathsf{NAIVE}} = w_1 L_1(T^*) + w_2 \Phi^{-1}(1-p_2)$$

- L<sub>1</sub>(t) is the log-rank statistic based on Stage 1 patients, followed up until calendar time t.
- $w_i$  are explicitly (Jenkins et al.) or implicitly (Irle & Schäfer) fixed weights with  $w_1^2 + w_2^2 = 1$ .
- $T^{end}$  is the (implicitly) fixed end of first-stage follow up.
- *T*<sup>\*</sup> is the time of final analysis (dependent on interim decisions).

Example	Adaptive methods	Ignored data	Choice of weights	Level- $\alpha$ test	Conclusion
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#### Worst-case assumption

- The null distribution of  $Z^{\text{CORRECT}}$  is  $\mathcal{N}(0,1)$ .
- The null distribution of Z<sup>NAIVE</sup> is completely unknown.
- However, we can look at the stochastic process

$$Z(t)=w_1L_1(t)+w_2\Phi^{-1}(1-p_2),\qquad t\in [\mathcal{T}^{\mathsf{end}},\mathcal{T}^{\mathsf{max}}].$$

Worst-case: the interim data (PFS, early endpoints, etc) can be used to predict exactly when  $L_1(t)$  reaches its maximum.



## Upper bound on type I error

An upper bound can be found assuming second-stage design is engineered such that  $T^*$  coincides with arg max  $L_1(t)$ :

$$\max \alpha = P_{H_0} \left\{ \max_{t \ge T^{end}} w_1 L_1(t) + w_2 \Phi^{-1}(1-p_2) > 1.96 \right\}$$

$$= \cdot \cdot$$

$$\approx \int_{0}^{1} P_{H_{0}} \left[ \max_{u=u_{1}}^{1} B(u) > \sqrt{u} \frac{\{1.96 + w_{2} \Phi^{-1}(x)\}}{w_{1}} \right] \, \mathrm{d}x,$$

with  $u_1 = \{ \# \text{ stage 1 events at } T^{\text{end}} \} / \{ \# \text{ stage 1 events at } T^{\text{max}} \}$ 





Figure : Worst case type I error for various choices of weights and information fractions.

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$$T^{\text{end}} = \min \{t : \# \text{ stage } 1 \text{ events } = d_1\}$$

- w<sub>1</sub> is fixed in advance.
- E.g., w<sub>1</sub><sup>2</sup> = d<sub>1</sub>/(d<sub>1</sub> + d
  <sub>2</sub>), where d
  <sub>2</sub> is the anticipated number of stage 2 events at time T<sup>end</sup>.





• 
$$T^{\text{end}} = \min \{t : \text{ total } \# \text{ events } = d\}$$
 and

$$w_1^2 = rac{\# \text{ stage 1 events at time } T^{\text{end}}}{\text{total } \# \text{ events at time } T^{\text{end}}}.$$



The advantage of the Irle & Schäfer choice of weights is that if the trial concludes as planned after observing d events, then the adaptive test statistic is the same as the standard logrank test statistic (efficient).

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Additionally, the timing of the interim analysis need not be pre-specified.

The disadvantage is that it is not possible to change the recruitment rate following the interim analysis.



#### A comment on $u_1$

As well as the weight  $w_1$ , the extent of the maximum type I error rate also depends on  $u_1$ , which is

$$u_1 = \left\{ \# \text{ stage 1 events at } T^{end} \right\} / \left\{ \# \text{ stage 1 events at } T^{max} 
ight\}$$
  
 $\approx \left\{ \# \text{ stage 1 events at } T^{end} \right\} / \left\{ \# \text{ patients recruited by interim} \right\}.$ 

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So, roughly speaking:

Faster recruitment  $\rightarrow$  lower  $u_1 \rightarrow$  higher max  $\alpha$ .



Figure : Expected total number of events as a function of time based on exponential survival with hazard rates  $\lambda_C = 0.05$  and  $\lambda_E = 0.035$ . Slow recruitment: 8 patients per month for a maximum of 60 months; max  $\alpha = 0.035$ . Fast recruitment: 50 patients per month for a maximum of 18 months; max  $\alpha = 0.045$ . Vertical lines are at  $T^{\text{int}}$ ,  $T^{\text{end}}$  and  $T^{\text{max}}$ .

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#### Guaranteed level- $\alpha$ test

Simply increase the cut-off value  $k^*$  such that  $P_{H_0} \{ \max_{t \ge T_1} Z(t) \ge k^* \} = \alpha.$ 

Table : Cutoff values for corrected level-0.025 test.

						$u_1$				
		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9
	0.1	2.29	2.25	2.21	2.19	2.16	2.13	2.11	2.08	2.04
	0.2	2.41	2.35	2.31	2.27	2.23	2.20	2.16	2.12	2.07
	0.3	2.50	2.43	2.38	2.34	2.30	2.25	2.21	2.16	2.10
	0.4	2.58	2.50	2.44	2.39	2.34	2.30	2.25	2.19	2.12
$W_1$	0.5	2.64	2.56	2.49	2.44	2.38	2.33	2.27	2.21	2.14
	0.6	2.70	2.60	2.53	2.47	2.42	2.36	2.30	2.23	2.15
	0.7	2.74	2.64	2.57	2.51	2.45	2.39	2.33	2.26	2.17
	0.8	2.79	2.68	2.60	2.54	2.48	2.41	2.35	2.28	2.18
	0.9	2.83	2.72	2.64	2.57	2.50	2.43	2.37	2.29	2.19



#### Power of the guaranteed level- $\alpha$ test

When we use  $Z^{\text{NAIVE}}$  in place of  $Z^{\text{CORRECT}}$  our statistic in increased by

$$Z(T^*) - Z(T^{end}) = w_1 \left\{ L_1(T^*) - L_1(T^{end}) \right\}$$

and the  $\alpha$ -level cut-off value is increased by

$$k^* - \Phi^{-1}(1 - \alpha).$$

The relative power of the guaranteed level- $\alpha$  test (compared to the "correct" adaptive test) depends on which of these differences is larger...



Choice of weights

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Conclusion 0000



Figure : Difference between the noncentrality parameters of the adaptive test statistics  $Z(T^*)$  and  $Z(T^{end})$  as a function of the time extension  $T^* - T^{end} \in [0, T^{max} - T^{end}]$ . Horizontal lines are drawn at  $k^* - \Phi^{-1}(0.975)$ , where  $k^*$  denotes the cut-off value of the alternative level- $\alpha$  test.

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## Unblinded SSR: methods trade-off

	Type I	Informed interim	All survival	Relative
	control	decisions	times in test	power
"Independent increments"	✓	×	$\checkmark$	$\checkmark$
"Correct" adaptive	<ul> <li>✓</li> </ul>	$\checkmark$	×	$\checkmark$
"Naïve" adaptive	×	$\checkmark$	$\checkmark$	$\checkmark$
"Naïve" + $k^*$	<ul> <li>✓</li> </ul>	$\checkmark$	$\checkmark$	×



- Magirr, D., Jaki, T., König, F., and Posch, M. (2016) Sample Size Reassessment and Hypothesis Testing in Adaptive Survival Trials *PLoS ONE* 11(2).
- Schäfer, H., & Müller, H. H. (2001). Modification of the sample size and the schedule of interim analyses in survival trials based on data inspections. *Statistics in medicine*, 20(24), 3741-3751.
- Irle, S., & Schäfer, H. (2012). Interim Design Modifications in Time-to-Event Studies. *Journal of the American Statistical Association*, 107(497), 341-348.
- Liu, Q., & Pledger, G. W. (2005). Phase 2 and 3 combination designs to accelerate drug development. *Journal of the American Statistical Association*, 100(470).

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Example	Adaptive methods	lgnored data	Choice of weights	Level- $\alpha$ test	Conclusion		
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References							

- Schmidli, H., Bretz, F., & Racine-Poon, A. (2007). Bayesian predictive power for interim adaptation in seamless phase II/III trials where the endpoint is survival up to some specified timepoint. *Statistics in medicine*, 26(27), 4925-4938.
- Jenkins, M., Stone, A., & Jennison, C. (2011). An adaptive seamless phase II/III design for oncology trials with subpopulation selection using correlated survival endpoints. *Pharmaceutical statistics*, 10(4), 347-356.
- Proschan, M.A. & Hunsberger, S.A. (1995). Designed extension of studies based on conditional power. *Biometrics*, 51(4), 1315-1324.
- Mehta, C., Schäfer, H., Daniel, H., & Irle, S. (2014). Biomarker driven population enrichment for adaptive oncology trials with time to event endpoints. *Statistics in Medicine*. 33(26), 4515-4531.

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