# A web application for conducting the continual reassessment method

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## **Dose-finding Setting**

**Initial Safety Trials** 

- Discrete set of dose levels  $d_1, \ldots, d_k$
- Objective is to recommend a dose for further testing for efficacy in Phase II
- The highest dose with an "acceptable" rate of dose-limiting toxicity (DLT; yes/no) is the maximum tolerated dose (MTD)
- Probability of DLT,  $R(d_1) < R(d_2) < \cdots < R(d_k)$
- Ultimate goal is to locate the MTD, defined as the dose level with DLT rate closest to a pre-specified target DLT rate θ; i.e. (20%, 25%, 30%, etc.)

### Continual Reassessment Method (CRM)

O'Quigley, Pepe, and Fisher (Biometrics, 1990)

- Sequentially updates statistical model to obtain estimates of DLT probabilities at each dose
- Allocates next patient cohort to the dose with estimated DLT rate closest to the target rate θ
- After *n* patients, MTD is defined as the recommended dose level for patient *n* + 1
- Abundance of articles in statistical literature on superior performance of CRM over 3+3<sup>1</sup>
- Despite poor operating characteristics, 3+3 used > 90.0% of published phase I oncology trials<sup>2</sup>

<sup>&</sup>lt;sup>1</sup> lasonos A, O'Quigley J (2014). *JCO* **32**: 2505-11.

<sup>&</sup>lt;sup>2</sup>Paoletti et al. (2015). Ann Oncol 26: 1808–12.

### Reasons For Infrequent Use of CRM<sup>1</sup>

- 1. "Black-box" mentality from reviewers/clinicians
  - Poor understanding of how it works
- 2. Sensitivity to choice of design specifications
  - Working dose-toxicity model
  - Prior distributions
- 3. Computationally burdensome
  - Requires regular interaction between clinical and statistical team

<sup>1</sup>Cheung YK. *Dose-finding by the continual reassessment method*; CRC Press: New York, 2011.

### **Recommended Bayesian CRM Specifications**

**Good Operating Characteristics** 

<sup>1</sup>Functional form of dose-toxicity model

 $R(d_i) = \Pr(\text{DLT at dose } d_i) \approx \alpha_i^{\exp(a)}$ 

- ▶ <sup>2</sup>Initial guesses of DLT probabilities (skeleton)  $\alpha_i$ 
  - Algorithm for generating skeletons with reasonable spacing between adjacent values; i.e.
     α<sub>i</sub> = {0.10, 0.20, 0.30, 0.40, 0.50}
- <sup>3</sup>Prior distribution on model parameter a
  - *N*(0, 1.34) yields good operating characteristics in many practical situations.

<sup>1</sup> Paoletti X, Kramar A (2009). Stat Med 28: 3012–3028.

<sup>&</sup>lt;sup>2</sup>Lee SM, Cheung YK (2009). Clin Trials 6: 227–38.

<sup>&</sup>lt;sup>3</sup>O'Quigley J, Shen LZ (1996). *Biometrics* **52**: 673–684.

### Motivation Bayesian CRM Web Tool

- R packages requires some programming knowledge
- Current CRM software requires user to make a lot of design specification choices
  - Poor choices = poor design operating characteristics
- Lack of available software with default practical recommendations
- Goal: provide accessible software tools to be utilized at both the design stage and for direct protocol implementation with simple recommendations for design specifications.

https://uvatrapps.shinyapps.io/crmb/

Bayesian Continual Reassessment Method for Phase I Clinical Trials Simulation Implementation

Web Application for simulating operating characteristics of the Bayesian CRM Nolan A. Wages and Gina R. Petroni Division of Translational Research & Applied Statistics, University of Virginia; nwages@virginia.edu

1. Enter an assumed set of true DLT probabilities, separated by commas. Note: The length of this set should be equal to the number of

#### True DLT probability at each dose level

0.04,0.11,0.25,0.40,0.55

2. Enter the target DLT rate.

#### Target DLT rate

0.25

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Simulates operating characteristics

Simulation Implementation

 Computes the recommended dose level for the next patient based on accumulated data

Simulation Implementation

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Simulation Input 1–2

 Enter an assumed set of true DLT probabilities, separated by commas. Note: The length of this set should be equal to the number of possible study dose levels

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### True DLT probability at each dose level

0.01, 0.05, 0.12, 0.25, 0.40

2. Enter the target DLT rate

#### **Target DLT rate**

0.25

Simulation Input 3–5

3. Enter the cohort size required before the next model-based update. Cohort size may be 1, 2, or 3 patients.

#### **Cohort size**

4. Enter the maximum sample size for the study. This number should be a multiple of the cohort size entered above.

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#### Maximum number of patients

24

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5. Enter the number of simulations. A minimum of 1000 is recommended.

# Number of simulated trials 1000

Simulation Input 6–7

 Enter the index of the starting dose level. Note: Index of lowest dose level is always 1. If the design allows for 'minus' dose levels (i.e. -2, -1, etc.), then the index of the starting dose should account for these lower levels (i.e. if -1 dose level allowed, starting dose is 2.)

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#### Index of starting dose level

1

7. Set the seed of the random number generator.

Random seed

580

A Run simulation study

Simulation Output

Skeleton of working model:	0.08	0.16	0.25	0.35	0.46	
True DLT probability:	0.01	0.05	0.12	0.25	0.40	
MTD selection percentage:	0.00	1.40	22.9	52.8	22.9	
Average number of DLTs:	0.00	0.10	0.70	2.1	2.2	
Average number of patients:	1.50	2.30	6.00	8.50	5.70	
Accuracy index:	0.5353					
Percent stopped for safety:	0					

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### Accuracy Index

► For a sample size of *n*, accuracy index of Cheung (2011)

$$m{A}_n = m{1} - k imes rac{\sum_{i=1}^k |m{R}(m{d}_i) - heta| \, {\sf Pr}({\sf selecting \ dose \ }i)}{\sum_{i=1}^k |m{R}(m{d}_i) - heta|},$$

is a weighted average summary of the distribution of MTD recommendation.

- Its maximum value is 1 with larger values (close to 1) indicating that the method possesses high accuracy
- In the previous scenario, the value of A<sub>n</sub> for an optimal benchmark (O'Quigley et al., 2002) was 0.6314. https://uvatrapps.shinyapps.io/nonparbnch/

Implementation Input 2–4

 Enter number of observed DLTs at each dose level. If none have been observed or a dose level has not yet been tried, enter '0'. Note: The length of this set should be equal to the number of possible study dose levels.

#### Number of observed DLTs at each dose level

0, 0, 0, 0, 0

3. Enter the number of patients evaluated for DLT at each dose level. If a dose level has not yet been tried, enter '0'. **Note:** The length of this set should be equal to the number of possible study dose levels.

#### Number of patients evaluated for DLT at each dose level

1, 0, 0, 0, 0

4. Enter the most recent dose level administered in the study. Get updated recommended dose level.

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#### Current dose level

A Get updated recommended dose level

Implementation Output

Skeleton of working model:	0.08	0.16	0.25	0.35	0.46
Number of DLTs:	0	0	0	0	0
Number of patients:	1	0	0	0	0
Estimated DLT probabilities:	0.12	0.17	0.23	0.30	0.37
Target DLT rate:	0.25				
Recommended dose level:	2				

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Updated Data

2. Enter number of observed DLTs at each dose level. If none have been observed or a dose level has not yet been tried, enter '0'. **Note:** The length of this set should be equal to the number of possible study dose levels.

#### Number of observed DLTs at each dose level

0, 0, 0, 0, 0

3. Enter the number of patients evaluated for DLT at each dose level. If a dose level has not yet been tried, enter '0'. **Note:** The length of this set should be equal to the number of possible study dose levels.

#### Number of patients evaluated for DLT at each dose level

 ${\bf 1}, {\bf 1}, {\bf 0}, {\bf 0}, {\bf 0}$ 

4. Enter the most recent dose level administered in the study. Get updated recommended dose level.

Current dose level

2
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Updated Output

Skeleton of working model:	0.08	0.16	0.25	0.35	0.46
Number of DLTs:	0	0	0	0	0
Number of patients:	1	1	0	0	0
Estimated DLT probabilities:	0.08	0.12	0.18	0.24	0.31
Target DLT rate:	0.25				
Recommended dose level:	3				

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### Notes

https://uvatrapps.shinyapps.io/crmb/

- Utilizes a set of default design specifications based on practical recommendations from literature
- These specifications produce robust operating characteristics.
  - Contains the type of simulation information that aid clinicians and reviewers in understanding operating characteristics for the accuracy and safety of the CRM
- The bottom of the web page contains detailed notes about the design specifications, including the skipping restriction and safety stopping rule.

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• For input in a protocol statistical section.

### Conclusions

https://uvatrapps.shinyapps.io/crmb/

- The web tool provides a mechanism for conducting the Bayesian CRM in a timely and reproducible fashion, requiring no programming knowledge.
- Free to access and use on any device with an internet browser.
  - Can be used on a smart phone.
- We hope this leads to broader implementation of model-based designs and will facilitate more efficient collaborations within study teams.

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