# Sample size determination in clinical trials

#### with multiple co-primary endpoints



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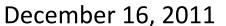
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#### Outline

- Background and objectives
- Statistical settings
- Derivation of power formula
- Behavior of sample sizes
- Conclusion

### Background

- Clinical trials often employ two or more primary endpoints.
  - A major concern is whether or not clinical trials should achieve statistical significance on all of the multiple primary endpoints (i.e., co-primary endpoints).
- Statistical Principles for Clinical Trials ICH (1998)
- Multiple Endpoint Expert Team (PhRMA) listed 20 diseases where regulatory agencies have required co-primary endpoints.
  Offen et al. (2007)

## Common solutions for the multiplicity

- Composite variable ICH (1998)
  - This approach addresses the multiplicity problem without requiring adjustment to multiplicity.
  - A clinically meaningful and validated variable is not always available.
  - Interpretation of the variable is not easy.
- Assuming the independency among endpoints and increasing the power for each endpoint
  - The power is simply defined. Eaton and Muirhead (2006)
  - The power would be under-evaluated. (The sample size is over-sized.)

## Existing approaches for power and sample size determination

#### **Continuous (Normal)**

Xiong et al. (2005)

Sozu et al. (2006, 2011)

Eaton, Muirhead (2006)

Sugimoto et al. (2011)

**IBC 2010** 

(2010.12.6)

Sozu et al.

(submitted)

#### Binary

Song (2009)

Sozu et al. (2010, 2011)

Hamasaki et al.

(submitted)

MCP 2011 (2011.8.31)

MCP 2011 (2011.8.31)

Hamasaki et al.

(submitted)

Time-to-event



**Ordinal** 

#### Objective

We discuss the power and sample size determination for superiority comparative clinical trials with multiple co-primary endpoints (for achieving statistical significance for all of the endpoints).

Continuous (Normal)

Cont. and Binary

**Binary** 

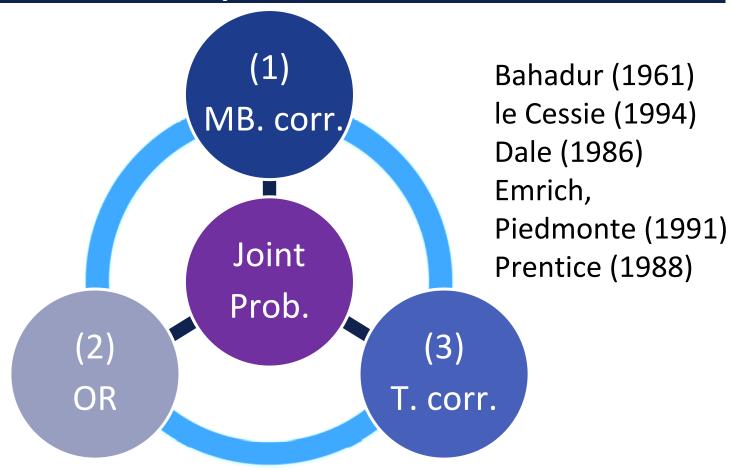
### Common steps of our research

- Define the response variables and association measures (correlations) among them
- Calculate the correlation coefficients among the test statistics to derive a power formula
- Evaluate the behaviors of sample sizes

### Association measures among endpoints

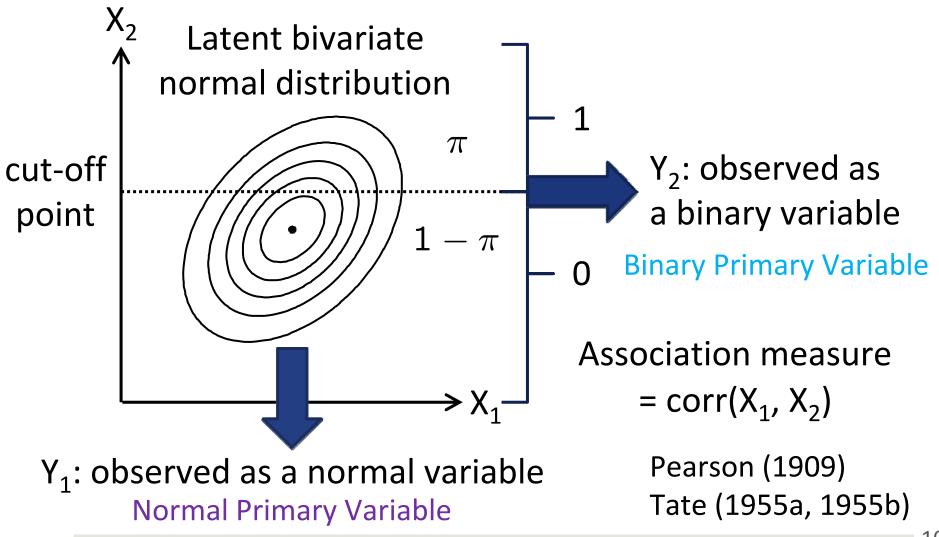
Scale	Distribution	Association measure(s)			
Cont. (Normal)	Multivariate Normal (MN)	Correlation coefficient (r)			
Binary	Multivariate Bernoulli (MB)	<ul><li>(1) r of MB dist. (MB. corr.)</li><li>(2) Odd ratio (OR)</li><li>(3) r of a latent MN dist.</li><li>(Tetrachoric corr.)</li></ul>			
Cont. and Binary	MN (latent distribution)	r of a latent MN dist. (Biserial corr.)			

## Relationships among association measures for binary variables



A joint probability can be estimated if the individual data of endpoints are available.

## Biserial model for mixed cont. and binary variables

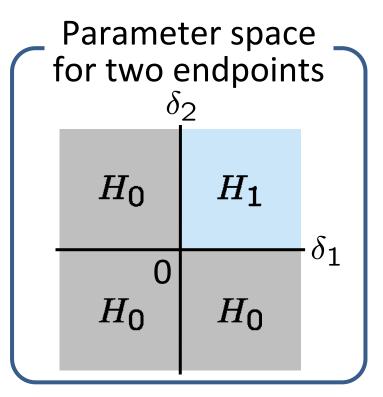


## Hypothesis testing

$$(k=1,\ldots,K)$$

- lacksquare  $\delta_k > 0$  means an improvement
- $H_0: \delta_k \leq 0$  for at lest one k( $\iff \max \delta_k < 0$ )
- $H_1: \delta_k > 0$  for all k( $\iff \min \delta_k > 0$ )

**Binary Primary Variable** 



## Testing methods

- Normal Primary Variable
  - (1) Z-test: Known variance Xiong et al. (2005)
  - (2) T-test: Unknown variance Sozu et al. (2006, 2011)
- Binary Primary Variable
  - (1)(2) Chi-square test without/with cc
  - (3)(4) Arcsine transformation without/with cc
  - (5) Fisher's exact test (cc: continuity correction)
  - (6) Test based on log-transformed relative risks

(1-5) Sozu et al. (2010) (6) Hamasaki et al. (submitted)

## Power formula: Asymptotic normal test (except for T-test)

- Overall power =  $1 \beta = \Pr\left(\bigcap_{k=1}^{K} \{Z_k > z_{\alpha}\}\right)$ 
  - lacksquare  $Z_k$ : Test statistic
  - $z_{\alpha}$ : Critical value ( $\alpha$ : Significance level)
- lacksquare Transform  $Z_k$  into the standardized statistics  $Z_k^*$  .
  - $(Z_1^*,\ldots,Z_K^*)^{\mathsf{T}} \sim N_K(\mathbf{0},\mathbf{\Sigma})^{\mathsf{T}}$
  - $\Sigma$ : diagonal = 1, off diagonal is given by a function of the association measure of the response variables.
- The power can be calculated from the CDF of  $N_K(\mathbf{0}, \mathbf{\Sigma}).$ Sozu et al. (2010, 2011)

#### Power formula: T-test

- - $t_{\alpha}$ : Critical value
- Calculate the power using a Monte Carlo integration
  - Generate Wishart random numbers for variance-covariance matrix
  - Calculate the conditional power
  - Repeat the above steps and calculate the mean of the conditional power Sozu et al. (2006, 2011)

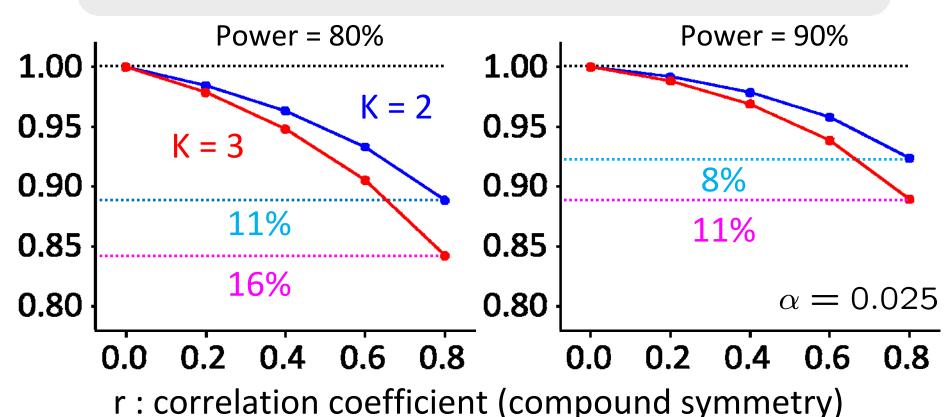
#### Power formula: Fisher's exact test

- Overall power =  $1 \beta = \Pr\left(\bigcap_{k=1}^K \{P_k < \alpha\}\right)$   $P_k : \text{one-sided p-value}$
- Calculate the power using a Monte Carlo integration.
  - Generate random numbers for the response variables from the assumed distribution

Sozu et al. (2010, 2011)

## Behavior of sample sizes for $\delta_1 = \delta_2 (= \delta_3)$ Normal Primary Variables: Z-test

Decrease in sample size =  $\frac{\text{sample size at each r}}{\text{sample size at r}} = \frac{\text{sample size at each r}}{\text{sample size at r}} = \frac{\text{sample size at each r}}{\text{sample size at r}} = 0.0$ 



## Behavior of sample sizes Sozu et al. (2006, 2011) for Normal Primary Variables

- lacktriangle The sample size  $\searrow$  the correlation  $\nearrow$ 
  - when the effect sizes are approximately equal among endpoints
- The decrease in SS is determined by the following four design parameters:
  - (1) Significance level of alpha  $(\alpha)$
  - (2) Target power  $(1 \beta)$

Sugimoto et al. (2011)

- (3) Effect size ratios of endpoints
- (4) Correlations among endpoints
- The sample size (SS) based on T-test (unknown variance) + 1  $\simeq$  the SS based on Z-test (known variance).

## Behavior of sample sizes for other Primary Variables

- Binary Primary Variables: Sozu et al. (2010, 2011)
  - The features of the testing methods are similar to the case of single endpoint (K=1).
    - e.g. The Arcsine transformation with CC provides sample sizes approximately equal to those obtained by Fisher's exact test.
- Mixed Normal and Binary Variables:
  - The decrease in the sample size is relatively small as compared to the case of Normal Primary Variable.

## Convenient formula for sample size

Sample size formula for Normal Primary Variables

$$n = \frac{(C_K + z_\alpha)^2}{\kappa_p \cdot \min(\delta_k)^2} \xrightarrow{\text{Single endpoints (K=1)}} \frac{(z_\beta + z_\alpha)^2}{\kappa_p \cdot \delta_1^2}$$

- lacksquare C<sub>K</sub> is the function of the four design parameters
  - A Value can be obtained from the numerical table.
- $\kappa_p = p/(1+p), \ p = n_C/n_T$ 
  - lacksquare  $n_T, n_C$ : The number of subjects of each group
- A required sample can be calculated without using a statistical software.
  Sugimoto et al. (2011)

### An numerical example: K = 2

$$\gamma_1 = \delta_1/\delta_2 = 0.5/0.4 = 1.25$$

- $\rho_{12} = 0.5$  (Correlation between two endpoints)
- $\alpha = 0.025$
- $\beta = 0.2$



$$n = \frac{(C_2 + z_\alpha)^2}{\kappa_p \cdot \delta_2^2} = \frac{(0.925 + 1.96)^2}{(1/2) \cdot 0.4^2} = 104.04 \rightarrow 105$$

.....

$$n_T = n_C \to p = 1 \to \kappa_p = p/(1+p) = 1/2$$

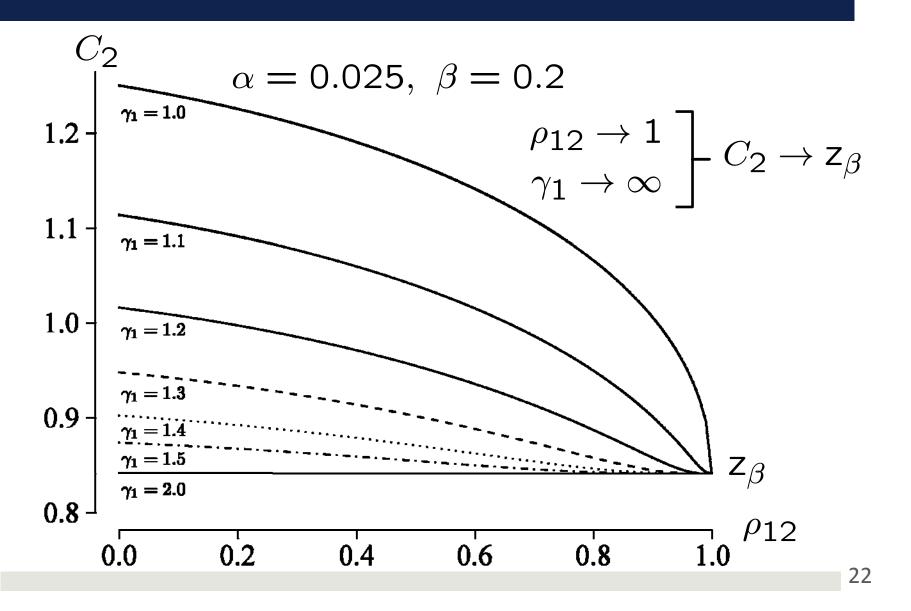


## Example of numerical table for $C_2$

$$K = 2, \ \alpha = 0.025, \ \beta = 0.2$$

	$ ho_{12}$							
$\gamma_1$	0.0	0.2	0.3	0.5	0.7	0.8	0.95	
1.00	1.250	1.226	1.210	1.168	1.109	1.066	0.961	
1.02	1.219	1.195	1.179	1.138	1.079	1.038	0.934	
				•				
1.25	0.979	0.962	0.952	0.925	0.890	0.870	0.843	
	•			•				
2.00	0.842	0.842	0.842	0.842	0.842	0.842	0.842	

## Curve of $C_2$



#### Conclusions

- We introduced the method of power and sample size calculations for multiple co-primary endpoints for achieving statistical significance for all of the endpoints.
- It is important to consider associations among endpoints into sample size calculation when
  - the endpoints are (positively) correlated and
  - the effect sizes (i.e., the corresponding individual powers) are approximately equal among the endpoints.

### Thank you very much for your attention

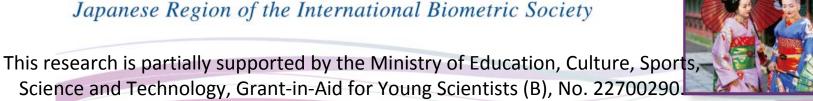
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- Bahadur RR. A representation of the joint distribution of responses to *n* dichotomous items. In *Studies in Item Analysis and Prediction, Vol. VI, Stanford Mathematical Studies in the Social Sciences*, Solomon H (ed.). Stanford University Press: Stanford, CA, 1961; 158-168.
- Bartlett MS. The use of transformations. *Biometrics* 1947; **3**: 39-52.
- Bloch DA, Lai TL, Su Z, Tubert-Bitter P. A combined superiority and non-inferiority approach to multiple endpoints in clinical trials. *Statistics in Medicine* 2007; **26**: 1193-1207.
- Breedveld FC, Weisman MH, Kavanaugh AF, Cohen SB, Pavelka K, van Vollenhoven R, Sharp J, Perez JL, Spencer-Green GT. The PREMIER study: A multicenter, randomized, double-blind clinical trial of combination therapy with adalimumab plus methotrexate versus methotrexate alone or adalimumab alone in patients with early, aggressive rheumatoid arthritis who had not had previous methotrexate treatment. *Arthritis & Rheumatism* 2006; **51**, 26-37.
- Capizzi T, Zhang J. Testing the hypothesis that matters for multiple primary endpoints. *Drug Information Journal* 1996; **30**: 949-956.
- Casagrande JT, Pike MC, Smith PG. An improved approximate formula for calculating sample sizes for comparing two binomial distributions. *Biometrics* 1978; **34**:483-486.
- Chow SC, Shao J, Wang H. Sample Size Calculations in Clinical Research (2nd~edn). Chapman & Hall/CRC, Boca Raton, FL, 2007.

- Chuang-Stein C, Stryszak P, Dmitrienko A, Offen W. Challenge of multiple co-primary endpoints: A new approach. *Statistics in Medicine* 2007; **26**:1181-1192.
- Committee for Medicinal Products for Human Use (CHMP). *Guideline on Medicinal Products* for the Treatment of Alzheimer's Disease and other Dementias (CPMP/EWP/553/95). EMEA: London, 2008.
- Committee for Proprietary Medicinal Products (CPMP). *Points to Consider on Multiplicity Issues in Clinical Trials* (CPMP/EWP/908/99). EMEA: London, 2002.
- le Cessie S, van Houwelingen JC. Logistic regression for correlated binary data. *Applied Statistics* 1994; **43**: 95-108.
- Chow SC, Shao J, Wang H. *Sample Size Calculations in Clinical Research* (2nd edn). Chapman and Hall/CRC: Boca Raton, FL, 2007.
- Dale JR. Global cross-ratio models for bivariate, discrete, ordered responses. *Biometrics* 1986;
   42: 909-917.
- Eaton ML, Muirhead RJ. On a multiple endpoints testing problem. *Journal of Statistical Planning and Inference* 2007; **137**: 3416-3429.
- Emrich LJ, Piedmonte MR. A method for generating high-dimensional multivariate binary variates. *The American Statistician* 1991; **45**: 302-304.

- Food and Drug Administration. *Daft Guidance for Industry. Irritable Bowel Syndrome*: Clinical Evaluation of Products for Treatment. Center for Drug Evaluation and Research, Food and Drug Administration, Rockville, MD, March 2010.
- Genz A. Numerical computation of multivariate normal probabilities. *Journal of Computational and Graphical Statistics* 1992; **1**: 141-150.
- Ho TW, Ferrari MD, Dodick DW, Galet V, Kost J, Fan X, Leibensperger H, Froman S, Assaid C, Lines C, Koppen H, Winner PK. Efficiency and tolerability of MK-0974 (telcagepant) a new oral antagonist of calcitonin gene-related peptide receptor, compared with Zolmitriptan for acute migraine: a randomised, placebo-controlled, parallel-treatment trial. *The Lancet* 2008; **37**: 2115-2123.
- Hung HMJ, Wang SJ. Some controversial multiple testing problems in regulatory applications. Journal of Biopharmaceutical Statistics 2009; **19**: 1-11.
- International Conference on Harmonization (ICH) of Technical Requirements for Regulations of Pharmaceuticals for Human use. ICH Tripartite Guideline E-9 Documents, Statistical Principles for Clinical Trials, 5 February 1998.
- Johnson ME. Multivariate Statistical Simulation. New York: John Wiley & Sons, 1987.

- Johnson NL, Kotz S. Distributions in Statistics: Continuous Multivariate Distributions. New York: John Wiley & Sons, 1972.
- Julious SA. Designing clinical trials with uncertain estimates of variability. *Pharmaceutical Statistics* 2004; 3: 261-268.
- Julious SA. Sample Sizes for Clinical Trials. Boca Raton, FL: Chapman & Hall, 2009.
- Kordzakhia G, Siddiqui O, Huque MF. Method of balanced adjustment in testing co-primary endpoints. *Statistics in Medicine* 2010; **29**: 2055-2066.
- Lev J. The point biserial coefficient of correlation. *The Annals of Mathematical Statistics* 1949; 20: 125-126.
- Machin D, Campbell M, Tan SB, Tan SH. Sample Size Tables for Clinical Studies. 3rd ed. Chichester, UK: Wily-Blackwell, 2009.
- Miwa A, Hayter J, Kuriki S. The evaluation of general non-centred orthant probabilities. *Journal of the Royal Statistical Society, Series B* 2003; **65**: 223-234.
- Molenberghs G, Geys H, Buyse M. Evaluation of surrogate endpoints in randomized experiments with mixed discrete and continuous outcomes. *Statistics in Medicine* 2001; **20**, 3023-3038.

- Offen W, Chuang-Stein C, Dmitrienko A, Littman G, Maca J, Meyerson L, Muirhead R, Stryszak P, Boddy A, Chen K, Copley-Merriman K, Dere W, Givens S, Hall D, Henry D, Jackson JD, Krishen A, Liu T, Ryder S, Sankoh AJ, Wang J, Yeh CH. Multiple co-primary endpoints: medical and statistical solutions. *Drug Information Journal* 2007; **41**: 31--46.
- Patel HI. Comparison of treatments in a combination therapy trial. *Journal of Biopharmaceutical Statistics* 1991; **1**: 171-183.
- Pearson K. Mathematical contributions to the theory of evolution. VII. On the correlation of characters not quantitatively measurable. *Philosophical Transactions of the Royal Society, Series A* 1900; **195**: 1-47.
- Pearson K. On a new method for determining the correlation between a measured character A and a character B. *Biometrika* 1909; **7**: 96-105.
- Peskind ER, Potkin SG, Pomara N, Ott BR, Graham SM, Olin JT, McDonald S. Memantine treatment in mild to moderate Alzheimer disease: A 24-week randomized, controlled trial. *American Journal of Geriatric Psychiatry* 2006; **14**: 704–715.
- Phillips A, Ebbutt A, France L, Morgan D. The International conference on harmonization guideline 'Statistical Principles for Clinical Trials': Issue in applying the guideline in practice. *Drug Information Journal* 2000; **34**: 337-348.

- Plackett RL. A class of bivariate distributions. Journal of the American Statistical Association 1965; 60: 516-522.
- Pocock SJ. Clinical trials with multiple outcomes: a statistical perspective on their design, analysis and interpretation. Controlled Clinical Trials 1997; 18: 530-545.
- Pong A, Shein-Chung C. Statistical/practical issues in clinical trials. Drug Information Journal 1997; 31: 1167-1174.
- Prentice RL. Correlated binary regression with covariates specific to each binary observation. Biometrics 1988; 44: 1033-1048.
- Rögers SL, Farlow MR, Doody RS, Mohs R, Friedhoff LT, The Donepezil Study Group. A 24-week, double-blind, placebo-controlled trial of donepezil in patients with Alzheimer's disease. Neurology 1998; 50: 136-145.
- Rosler M, Anand R, Cicin-Sain A, Gauthier S, Agid Y, Dal-Bianco P, Stahelin HB, Hartman R, Gharabawi M. Efficacy and safety of rivastigmine in patients with Alzheimer's disease: International randomised controlled trial. British Medical Journal 1999; 318: 633-640.

- Rudnick MR, Davidson C, Laskey W, Stafford JL, Sherwin PF. VALOR Trial Investigators. Nephrotoxicity of iodixanol versus ioversol in patients with chronic kidney disease: The Visipaque Angiography/Interventions with Laboratory Outcomes in Renal Insufficiency (VALOR) Trial. American Heart Journal 2008; 156: 776-782.
- Sahai H, Khurshid A. Formulae and tables for the determination of sample sizes and power in clinical trials for testing differences in proportions for the two-sample design: a review. Statistics in Medicine 1996; 15: 1-21.
- Sankoh AJ, D'Agostino RB, Huque MF. Efficacy endpoint selection and multiplicity adjustment method in clinical trials with inherent multiple endpoint issues. Statistics in Medicine 2003; 22: 3133-3150.
- SAS Institute, Inc., SAS Online Doc 9.1.3. SAS Institute, Inc.: Cary, NC, 2006.
- Song JM. Sample size for simultaneous testing of rate differences in non-inferiority trials with multiple endpoints. Computational Statistics & Data Analysis 2009; 53: 1201-1207.
- Sozu T, Kanou T, Hamada C, Yoshimura I. Power and sample size calculations in clinical trials with multiple primary variables. Japanese Journal of Biometrics 2006; 27: 83-96.

- Sozu T, Sugimoto T, Hamasaki T. Sample size determination in clinical trials with multiple coprimary binary endpoints. Statistics in Medicine 2010; 29: 2169-2179.
- Sugimoto T, Sozu T, Hamasaki T. A convenient formula for sample size calculations in clinical trials with multiple co-primary continuous endpoints. Pharmaceutical Statistics, to appear.
- Tariot PN, Solomon PR, Morris JC, Kershaw P, Lilienfeld S, Ding C, The Galantamine USA Study Group. A 5-month, randomized, placebo-controlled trial of galantamine in AD. Neurology 2000; 54: 2269-2276.
- Tate RF. Correlation between a discrete and a continuous variable. Point-biserial correlation. The Annals of Mathematical Statistics 1954; 25: 603-607.
- Tate RF. The theory of correlation between two continuous variable when one is dichotomized. Biometrika 1955a. 42: 205-216.
- Tate RF. Applications of correlation models for biserial data. Journal of the American Statistical Association 1955b. 50: 1078-1095.
- Ury HK. Continuity-corrected approximations to sample size or power when comparing two proportions: Chi-squared or arc sine? The Statistician 1981; 30: 199-203.
- Walters DE. In defence of the arc sine approximation. The Statistician 1979; 28: 219-222.

- Winblad B, Kilander L, Eriksson S, Minthon L, Batsman S, Wetterholmf AL, Jansson-Blixt C, Haglund A. Donepezil in patients with severe Alzheimer's disease: double-blind, parallel-group, placebo-controlled study. The Lancet 2006; 367: 1057-1065.
- Yates F. Contingency tables involving small numbers and the 2 test. Journal of the Royal Statistical Society, Supplement 1934; 1: 217-235.
- Xiong C, Yu K, Gao F, Yan Y, Zhang Z. Power and sample size for clinical trials when efficacy is required in multiple endpoints: application to an Alzheimer's treatment trial. Clinical Trials 2005; 2: 387-393.

## Backup

### Why multiple endpoints are required?

- (1) Lack of a consensus on a single most important variable from the medical perspective
- (2) No clear aetiology of diseases
- (3) A disease condition is characterized in multidimensional ways

Pocock (1997)

Pong and Shein-Chung (1997)

Sankoh et al. (2003)

Chuang-Stein et al. (2007)

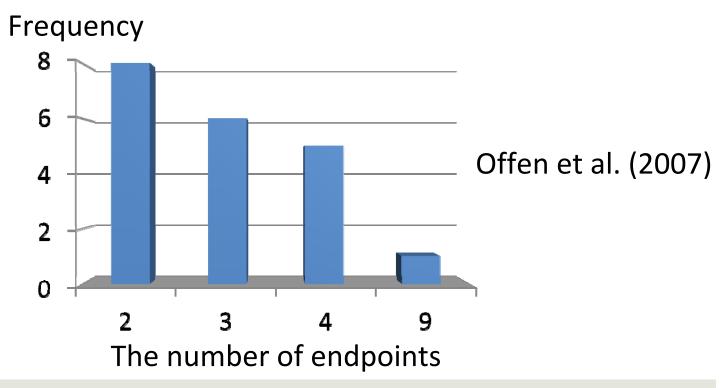
## Statistical Principles for Clinical Trials

- 2.2.2 Primary and Secondary Variables
  - There should generally be only one primary variable.
- 2.2.5 Multiple Primary Variables
  - It may sometimes be desirable to use more than one primary variable, each of which (or a subset of which) could be sufficient to cover the range of effects of the therapies.

ICH (1998)

### Examples of co-primary endpoints

Multiple Endpoint Expert Team (PhRMA) listed 20 diseases where regulatory agencies have required coprimary endpoints.



### Example of a clinical trial

- A randomized, parallel-treatment, placebocontrolled, double-blind trial
- Acute migraine
- Five co-primary endpoints are considered.
  - (1) pain freedom
  - (2) pain relief
  - (3) phonophobia
  - (4) photophobia
  - (5) nausea

Ho et al. (2008)

### Example of guidance

- Irritable Bowel Syndrome
- Primary endpoint

FDA (2010)

- (1) Abdominal pain (11-points: 0 to 10)
- (2) IBS-C (Constipation): stool frequency
- (2) IBS-D (Diarrhea): stool consistency
  - The Bristol stool Form Scale (seven levels)



### Rösler et al. (1999; BMJ)

#### Statistical methods

The study sample population of about 200 in each group was planned to enable achievement of 90% power with  $\alpha = 0.05$  for detecting at least a 3.0 point improvement on the Alzheimer's disease assessment scale and an increase from 15-30% among patients scoring <4 on the clinician impression of change scale.

### Three possible clinical scenarios

Showing significance for

Sankoh et al. (2003)

- (1) all primary variables
  - co-primary endpoints

Offen et al. (2007)

- reverse multiplicity problem
- (2) majority of the primary variables (The constitution of the majority is defined in the protocol)
- (3) one or more of the primary variables
- alternative primary endpoints
  Offen et al. (2007)

# Feature of three association measures

	Pros	Cons				
B. corr	<ul><li>Parameter of the assumed distribution</li></ul>	<ul><li>Restricted range</li></ul>				
OR	<ul> <li>No restricted range from 0 to infinity</li> <li>A direct extension to a global cross-ratio</li> </ul>	<ul> <li>A scale depends strongly on response probabilities</li> </ul>				
L. corr	<ul><li>No restricted range from -1 to 1</li></ul>	<ul> <li>Iterative calculations         are necessary to specify         the value from a value         of other measure</li> </ul>				

### Assumptions for response variables

- Biserial model
  - NPV (X) is observed as X (X = X)
  - BPV (Y) is obtained by a dichotomized of X (X -> Y)
- Point-biserial model

Pearson (1903)

- NPV (X) is distributed as a mixed normal distribution
- BPV (Y) is distributed as a Bernoulli distribution

### Standardized test statistics

$$1 - \beta = P\left(\bigcap_{k=1}^{K} \{Z_k > z_\alpha\}\right) \simeq P\left(\bigcap_{k=1}^{K} \{Z_k^* > c_k^*\}\right)$$

$$Z_{k}^{*} = \begin{cases} \frac{\bar{Y}_{Tk} - \bar{Y}_{Ck} - \delta_{k}}{\sigma_{k} \sqrt{\frac{1 + \kappa}{\kappa n}}}, & k \leq k_{m} \\ \frac{p_{Tk} - p_{Ck} - \delta_{k}}{\sqrt{\frac{\kappa \pi_{Tk} \theta_{Tk} + \pi_{Ck} \theta_{Ck}}{\kappa n}}}, & k > k_{m}, \end{cases}$$

$$c_{k}^{*} = \begin{cases} z_{\alpha} - \frac{\delta_{k}}{\sigma_{k}} \sqrt{\frac{\kappa n}{1 + \kappa}}, & k \leq k_{m} \\ \frac{1}{\sqrt{\kappa \pi_{Tk} \theta_{Tk} + \pi_{Ck} \theta_{Ck}}} \left\{ \sqrt{\frac{(\pi_{Tk} + \kappa \pi_{Ck})(\theta_{Tk} + \kappa \theta_{Ck})}{1 + \kappa}} z_{\alpha} - \sqrt{\kappa n} \delta_{k} \right\}, & k > k_{m}. \end{cases}$$

## Correlation between standardized test statistics

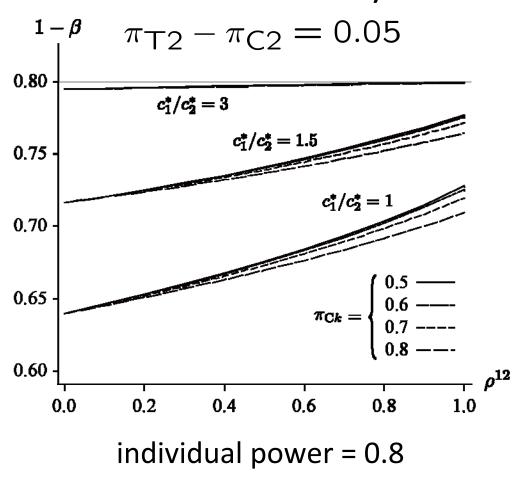
 $\gamma^{kk'} = \begin{cases} &\text{two continuous variables } (k, k' \leq k_m): \\ &\frac{\kappa \operatorname{Corr}(Y_{\operatorname{T}jk}, Y_{\operatorname{T}jk'}) + \operatorname{Corr}(Y_{\operatorname{C}jk}, Y_{\operatorname{C}jk'})}{1 + \kappa}, \\ &\text{continuous and binary variables } (k \leq k_m, \text{ and } k' > k_m): \\ &\frac{\kappa \operatorname{Corr}(Y_{\operatorname{T}jk}, Y_{\operatorname{T}jk'}) \sqrt{\pi_{\operatorname{T}k'}\theta_{\operatorname{T}k'}} + \operatorname{Corr}(Y_{\operatorname{C}jk}, Y_{\operatorname{C}jk'}) \sqrt{\pi_{\operatorname{C}k'}\theta_{\operatorname{C}k'}}}{\sqrt{1 + \kappa}\sqrt{\kappa\pi_{\operatorname{T}k'}\theta_{\operatorname{T}k'}} + \pi_{\operatorname{C}k'}\theta_{\operatorname{C}k'}}}, \\ &\text{two binary variables } (k, k' > k_m): \\ &\frac{\kappa \operatorname{Corr}(Y_{\operatorname{T}jk}, Y_{\operatorname{T}jk'}) \sqrt{\pi_{\operatorname{T}k}\theta_{\operatorname{T}k}\pi_{\operatorname{T}k'}\theta_{\operatorname{T}k'}} + \operatorname{Corr}(Y_{\operatorname{C}jk}, Y_{\operatorname{C}jk'}) \sqrt{\pi_{\operatorname{C}k}\theta_{\operatorname{C}k}\pi_{\operatorname{C}k'}\theta_{\operatorname{C}k'}}}}{\sqrt{\kappa\pi_{\operatorname{T}k}\theta_{\operatorname{T}k}} + \pi_{\operatorname{C}k}\theta_{\operatorname{C}k}}\sqrt{\kappa\pi_{\operatorname{T}k'}\theta_{\operatorname{T}k'}} + \pi_{\operatorname{C}k'}\theta_{\operatorname{C}k'}}} \end{cases}$ 

### Sample size calculation

- Specify the value of parameters.
  - NPV: mean  $\mu_{ik}$  and variance  $\sigma_k^2$
  - lacksquare BPV: success probability  $\pi_{ik}$
- Specify the value of  $\rho_{kk'} = \text{corr}(X_{ijk}, X_{ijk'})$ . (Consider equal sample sizes:  $n_1 = n_2 = n$ )
- $lue{}$  Choose a starting value of n and calculate the power.
- $lue{}$  Repeat the above steps by gradually increasing n .
  - End the operation when the calculated power exceeds the desired  $1-\beta$ , and select n as the minimum value of sample size.

### Behavior of overall power (mixed)

one continuous and one binary variable (K=2)



### Behaviors of sample sizes

		Proportions						
$c_1^*/c_2^*$	$\delta_1^*$	$(\pi_{\mathrm{T2}} \; \pi_{\mathrm{C2}})$	0.0	Correla 0.3	0.5	0.8	$\mathrm{E}_1$	$\mathrm{E}_2$
1	0.100	(0.55 0.50)	2055 (80.1)	2016 (79.9)	1980 (80.0)	1904 (80.0)	1565	1565
	0.103	$(0.65 \ 0.60)$	1931 (80.0)	1895 (80.1)	1862 (80.1)	1793 (80.0)	1471	1471
	0.112	$(0.75 \ 0.70)$	1643 (80.1)	1614 (80.1)	1588 (80.0)	1534 (80.0)	1251	1251
	0.132	$(0.85 \ 0.80)$	1189 (80.0)	1171 (80.1)	1154 (80.1)	1122 (80.0)	906	906
	0.201	(0.60 0.50)	509 (79.8)	499 (80.3)	490 (80.9)	472 (80.2)	388	388
	0.210	$(0.70 \ 0.60)$	468 (80.1)	459 (80.0)	451 (80.0)	435 (80.1)	356	356
	0.231	$(0.80 \ 0.70)$	385 (80.1)	379 (80.1)	373 (80.2)	361 (80.2)	294	294
	0.281	$(0.90 \ 0.80)$	262 (80.7)	258 (80.6)	254 (80.5)	248 (80.4)	199	199
1.5	0.115	(0.55 0.50)	1819 (79.8)	1789 (80.0)	1760 (79.8)	1702 (79.7)	1183	1565
	0.119	$(0.65 \ 0.60)$	1710 (80.0)	1682 (80.1)	1656 (80.1)	1603 (80.1)	1112	1471
	0.129	$(0.75 \ 0.70)$	1454 (80.0)	1432 (80.1)	1411 (80.1)	1370 (80.0)	946	1251
	0.151	$(0.85 \ 0.80)$	1053 (80.1)	1038 (80.0)	1025 (80.1)	1000 (80.2)	685	906
	0.232	(0.60 0.50)	451 (79.7)	443 (79.9)	436 (80.4)	422 (79.8)	293	388
	0.242	$(0.70 \ 0.60)$	414 (80.0)	407 (80.1)	401 (80.0)	389 (80.1)	270	356
	0.266	$(0.80 \ 0.70)$	341 (80.2)	336 (80.0)	331 (80.1)	322 (80.2)	222	294
	0.323	$(0.90 \ 0.80)$	232 (80.6)	229 (80.7)	226 (80.7)	221 (80.7)	151	99

### Behaviors of sample sizes (cont.)

3	0.160	$(0.55 \ 0.50)$	1583 (79.7)	1578 (80.1)	1574 (80.4)	1568 (80.3)	611	1565
	0.165	$(0.65 \ 0.60)$	1487 (80.1)	1483 (80.2)	1479 (80.1)	1474 (80.1)	574	1471
	0.179	$(0.75 \ 0.70)$	1265 (80.1)	1262 (80.1)	1259 (80.1)	1254 (80.0)	489	1251
	0.211	$(0.85 \ 0.80)$	916 (80.1)	914 (80.1)	912 (80.2)	909 (80.2)	354	906
	0.322	(0.60 0.50)	392 (79.6)	391 (79.6)	390 (79.6)	388 (79.5)	152	388
	0.336	$(0.70 \ 0.60)$	360 (80.0)	359 (80.2)	358 (80.1)	357 (80.0)	139	356
	0.370	$(0.80 \ 0.70)$	297 (80.3)	296 (80.3)	295 (80.2)	294 (80.2)	115	294
	0.450	$(0.90 \ 0.80)$	202 (80.7)	201 (80.6)	201 (80.6)	200 (80.9)	78	199

### Summary of the results

- The behaviors of sample sizes are in agreement with the results in the continuous case.
- $\blacksquare$   $\pi_{ik}$  is not close to 1
  - $\blacksquare$  AS = AN << ASc = Fi = ANc
- $\blacksquare$   $\pi_{ik}$  is close to 1
  - $\blacksquare$  AS < AN << ASc = Fi < ANc
- The behaviors of achieved sample sizes for K=3 are similar to those for K=2.
- The empirical power attains a pre-specified power.
  - The performance of ASc and Fi is better.

### An illustration: PREMIER study

- Early aggressive rheumatoid arthritis
- ACR50
  - The percentage of patients in whom an ACR50 response was achieved
- mTSS
  - The mean change from baseline in the modified total Sharp score.
- Adalimumab + Methotrexate v.s. Methotrexate

Breedveld (2006)

### An illustration: PREMIER study

Sample sizes per group with  $\alpha = 0.025, 1 - \beta = 0.8$ 

m	TSS	ACR50	Correlation $\rho^{12}$						
$\delta_1$	$\sigma_1$	$(\pi_{\mathrm{T2}} \; \pi_{\mathrm{C2}})$	0.0	0.3	0.5	0.8	$\mathrm{E}_1$	$\mathrm{E}_2$	$c_{1}^{*}/c_{2}^{*}$
4.4	19.0	(0.59 0.46)	346	340	334	323	294	231	0.72
4.4	20.0	$(0.59 \ 0.46)$	369	363	358	347	326	231	0.63
4.4	21.0	$(0.59 \ 0.46)$	394	389	384	374	359	231	0.56
4.4	22.0	$(0.59 \ 0.46)$	422	417	413	404	394	231	0.50

 $E_1$ ,  $E_2$ : Sample size separately calculated for each endpoint so that the individual power is at least 0.8.

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### Joint density function of test statistics

