

# Historical borrowing for clinical trial design

# Disclaimer

The views expressed here are my own and not necessarily that of Johnson & Johnson and its subsidiaries.

# Clinical trial design

## Consider the following use case:

- Planning a clinical trial
- Reduce placebo sample size and use a **power prior** to achieve sufficient power

# Example scenario (hypothetical)

There is a desire to decrease placebo sample size by 10 patients, however this will negatively impact the power of the study

Original design		
	Drug A	Placebo
Sample size	30	30
Assumed change from baseline in disease activity score	-3.0 (1.5)	-2.0 (1.5)
Type I error	5%	
Power to detect difference of 1.0	81.7%	

Proposed design		
	Drug A	Placebo
Sample size	30	20
Assumed change from baseline in disease activity score	-3.0 (1.5)	-2.0 (1.5)
Type I error	5%	
Power to detect difference of 1.0	73.6%	

Historical data in a comparable population	
	Placebo
Sample size	100
Reported change from baseline in disease activity score	-1.5 (1.5)

## Questions to address at the design phase:

- What is the **potential** difference in response rate between historical control and current control results?
- How should we specify alpha?
- **Given these moving parts, how to quantify the operating characteristics of a trial?**

# Operating characteristics

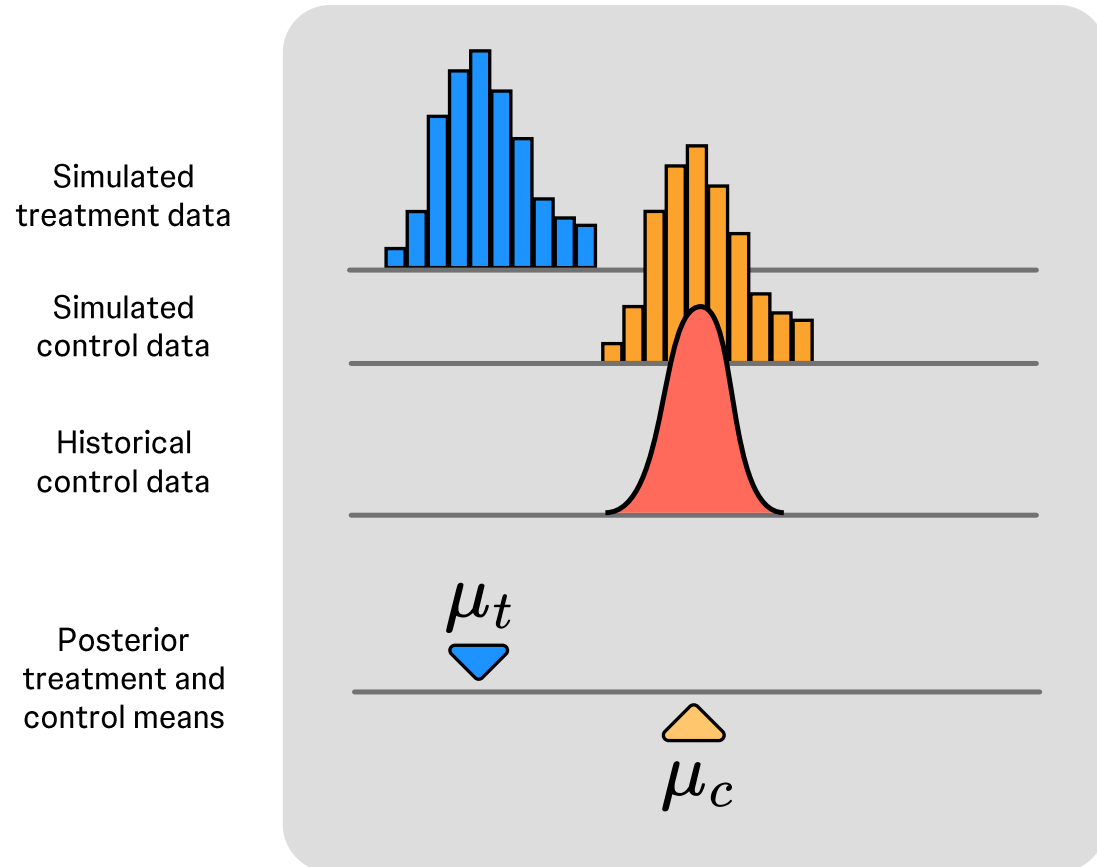
To understand feasibility of borrowing at the design phase, we can define a framework to assess operating characteristics of the trial:

1. Set up scenarios for potential difference between historical data (known) and where the current trial will land (unknown)
2. See how alpha responds in these scenarios with different specifications
  - Fixed power prior - Alpha is chosen as a fixed value, regardless of discrepancy
  - Empirical Bayes power prior - Alpha is inversely proportional to the discrepancy through an explicit function
  - Many others as well...
3. Quantify **Bayesian power and type I error** under these scenarios

# Statistical power with a power prior

Probability of correctly rejecting the null hypothesis

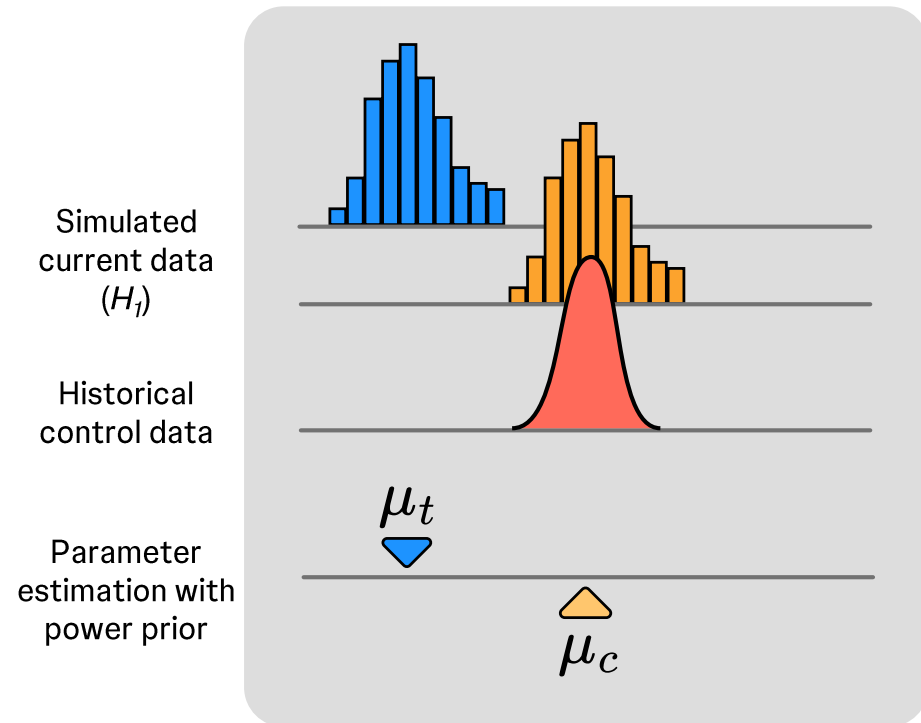
For each iteration:



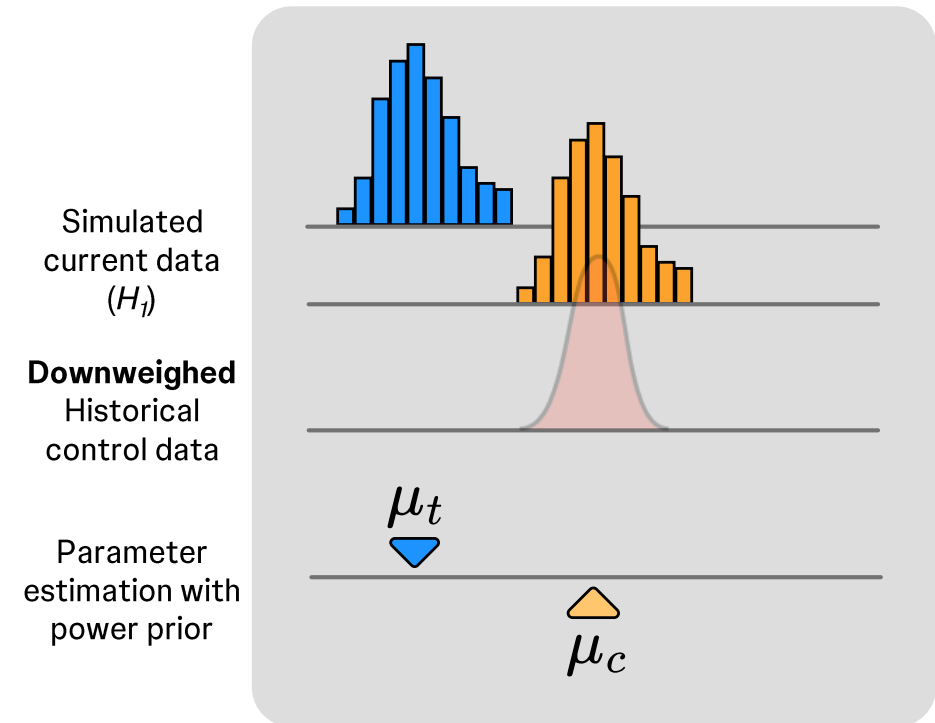
- Generate current trial data consistent with alternative hypothesis
- Incorporate historical trial data (control)
- Estimate parameters using Bayesian power prior model
- Accept or reject null hypothesis using threshold criteria ( $P > 0.95$ )

**Power estimated as the proportion of iterations where null hypothesis is correctly rejected**

# Alignment between historical and current control data

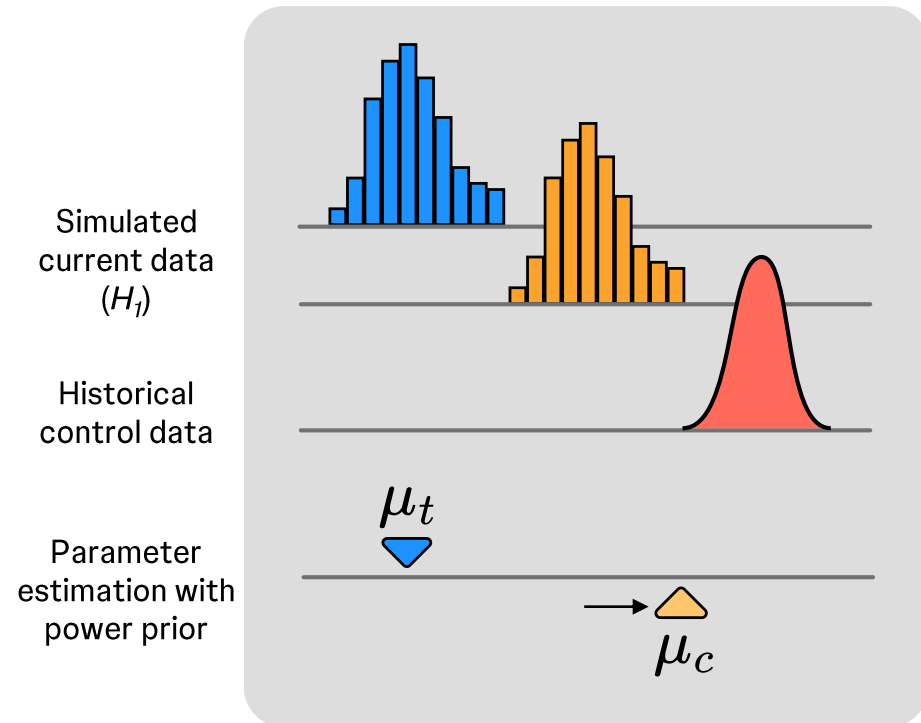


**High alpha:** Upweight aligned historical data for substantial gain in power

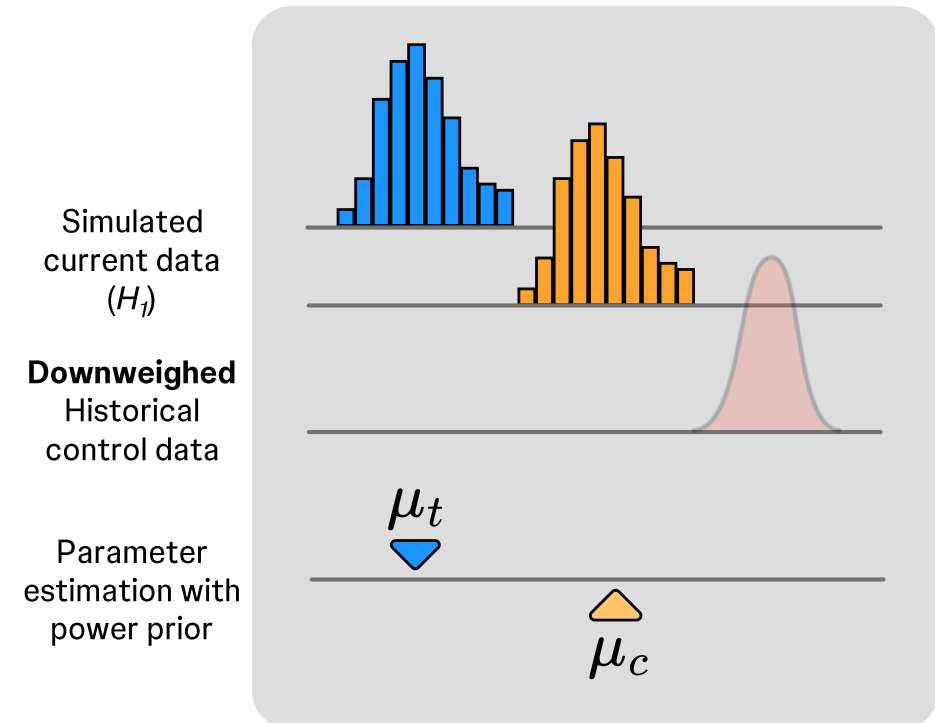


**Low alpha:** Downweigh aligned historical data for modest gain in power

# Discrepancy between historical and current data control data



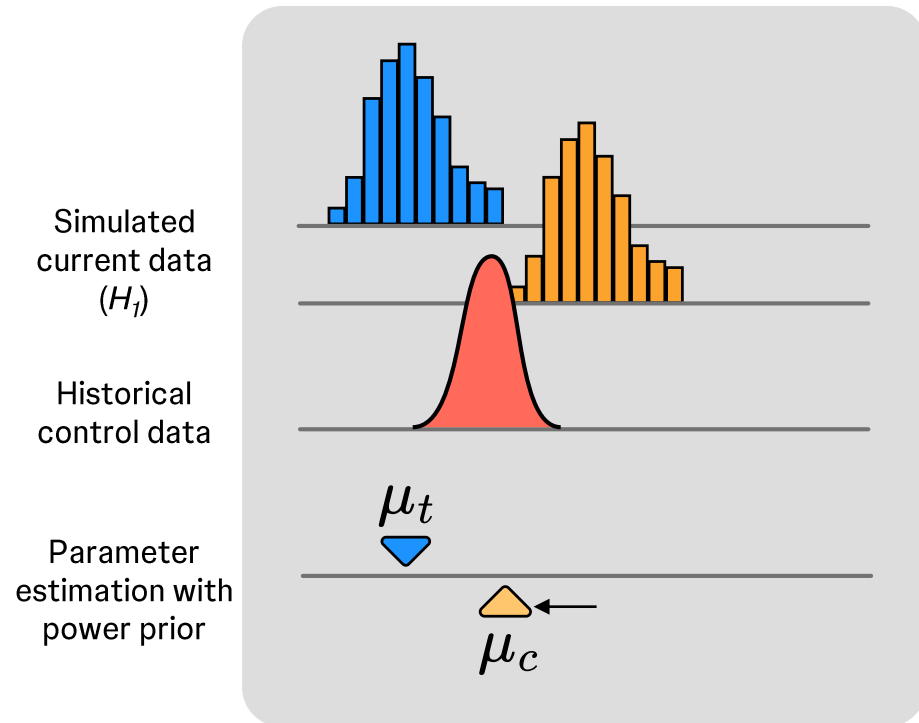
**High alpha:** Upweight discrepant historical data will result in substantial gain in power



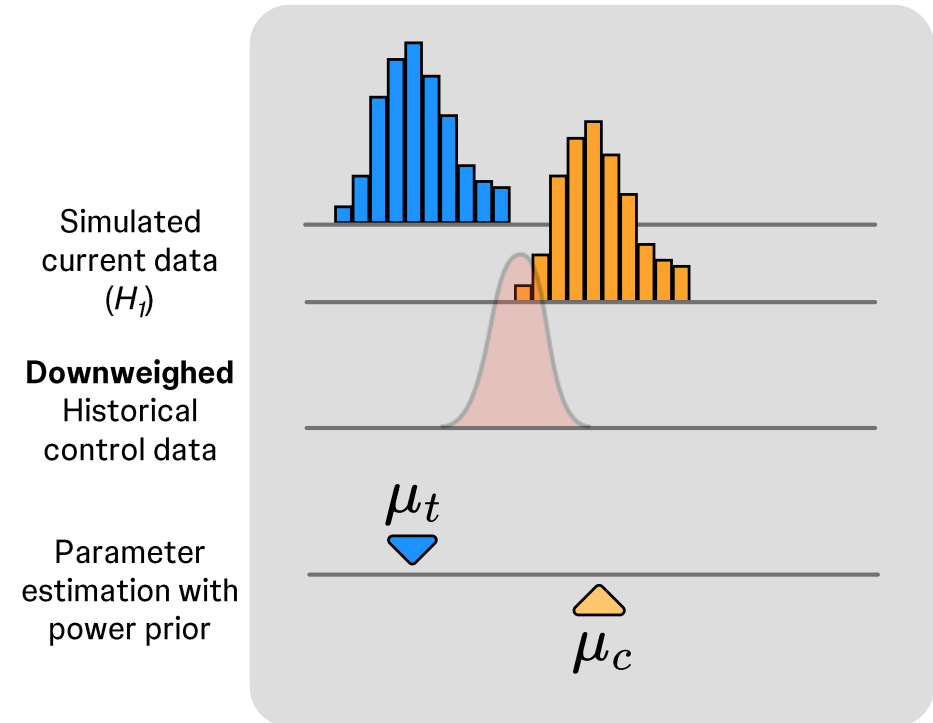
**Low alpha:** In this case, downweighing would mitigate the increase in power



# Discrepancy between historical and current data control data



**High alpha:** Upweight discrepant historical data will reduce power

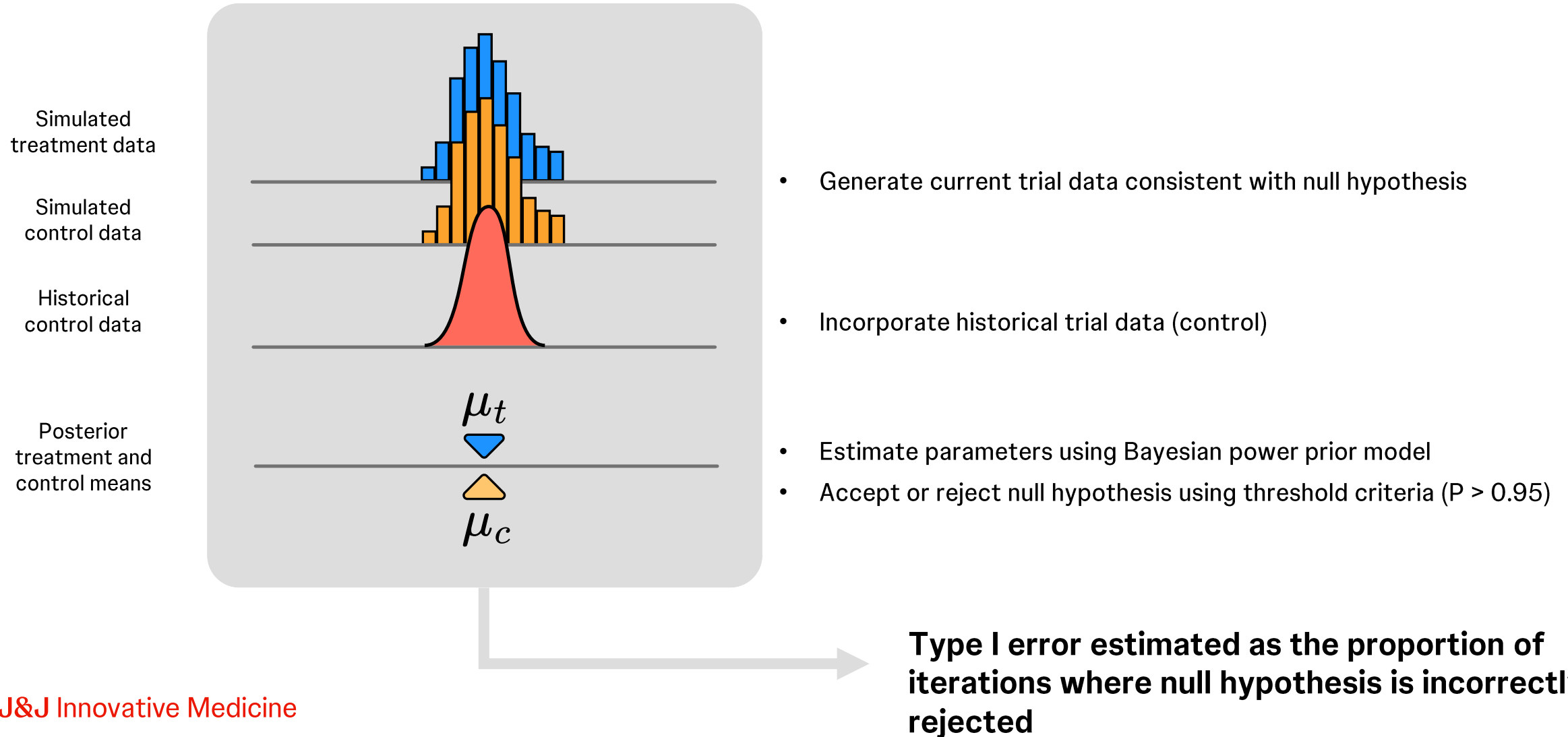


**Low alpha:** In this case, downweighting would mitigate the reduction in power

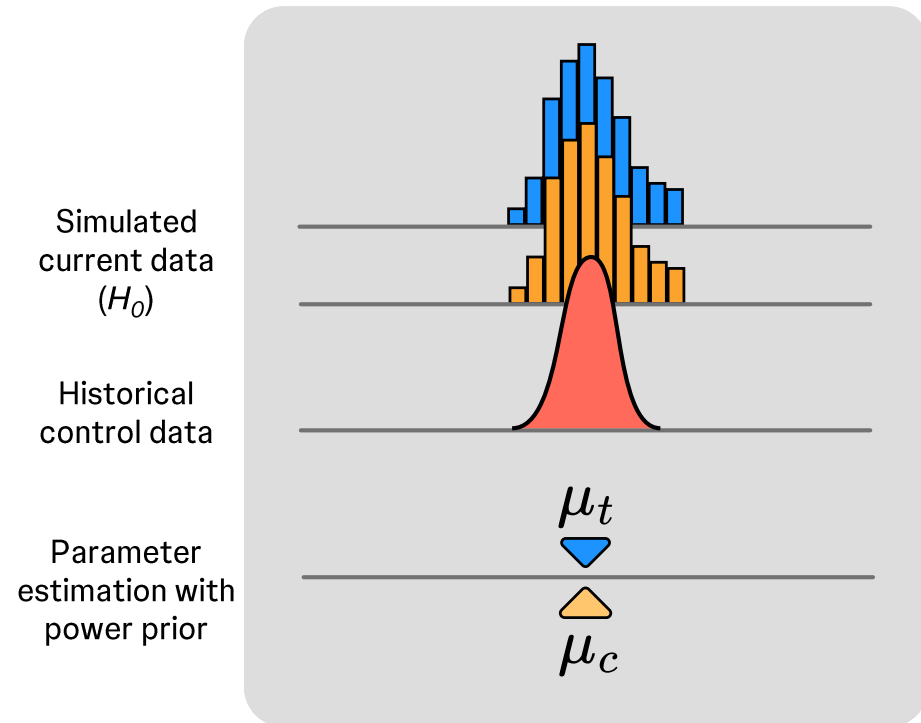
# Type I error with a power prior

Probability of incorrectly rejecting the null hypothesis

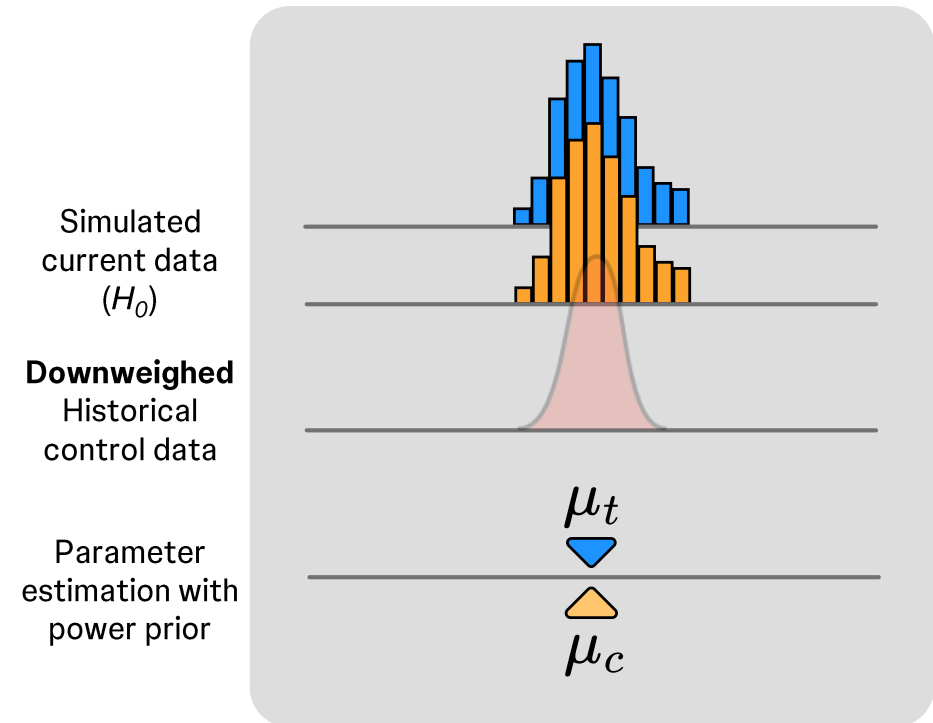
For each iteration:



# Alignment between historical and current control data

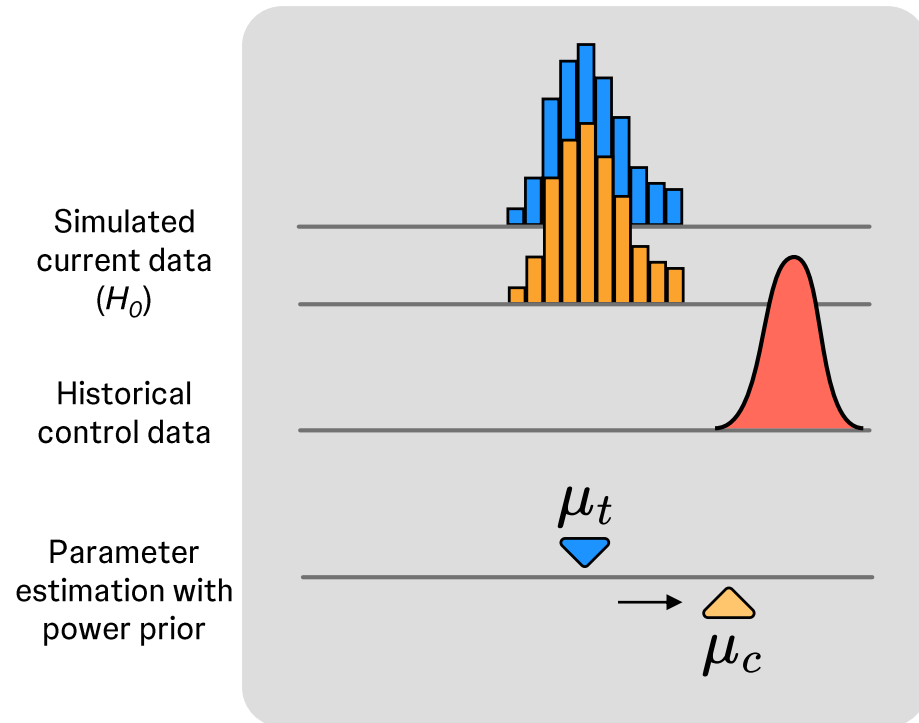


**High alpha:** Upweight discrepant historical data will result in reduction in type I error

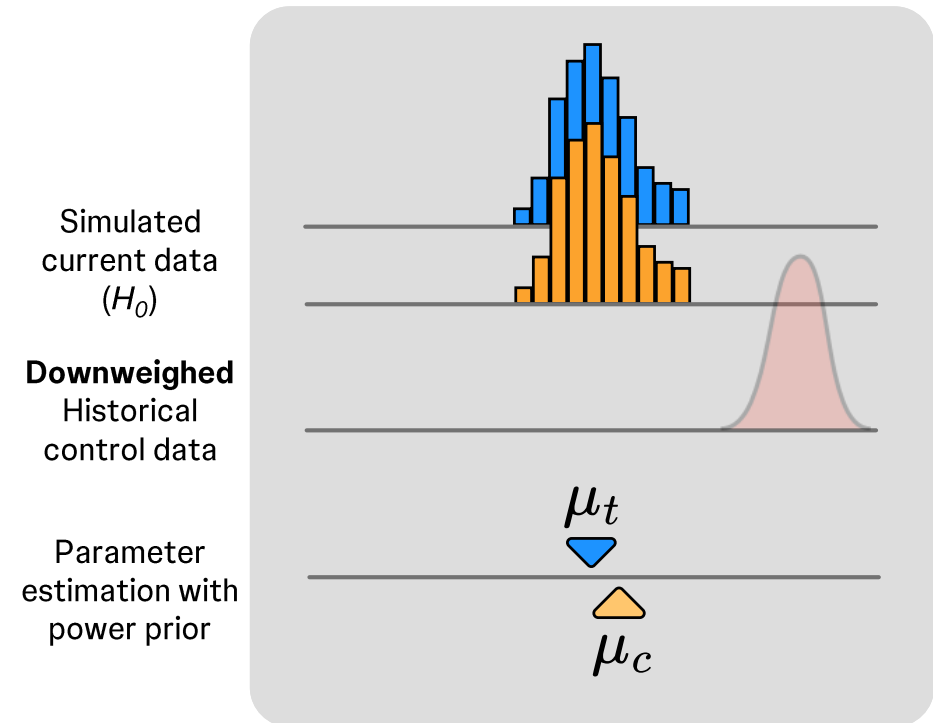


**Low alpha:** In this case, downweighing would results in a modest reduction in type I error

# Discrepancy between historical and current data



**High alpha:** Upweight discrepant historical data will increase type I error



**Low alpha:** In this case, downweighing would mitigate the increase in type I error

# Example scenario (hypothetical)

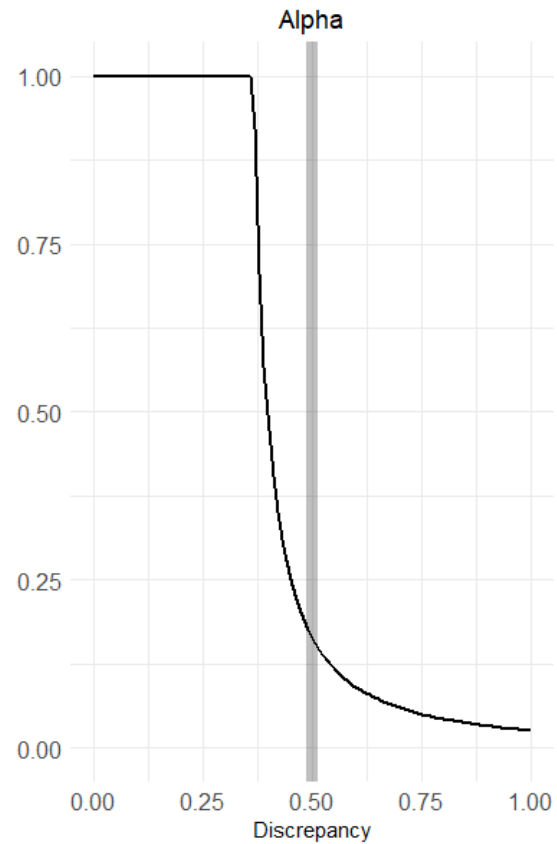
Original operating characteristics		
Arm	Drug A	Placebo
Sample size	<b>30</b>	<b>30</b>
Assumed change from baseline in disease activity score	-3.0 (1.5)	-2.0 (1.5)
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Proposed operating characteristics		
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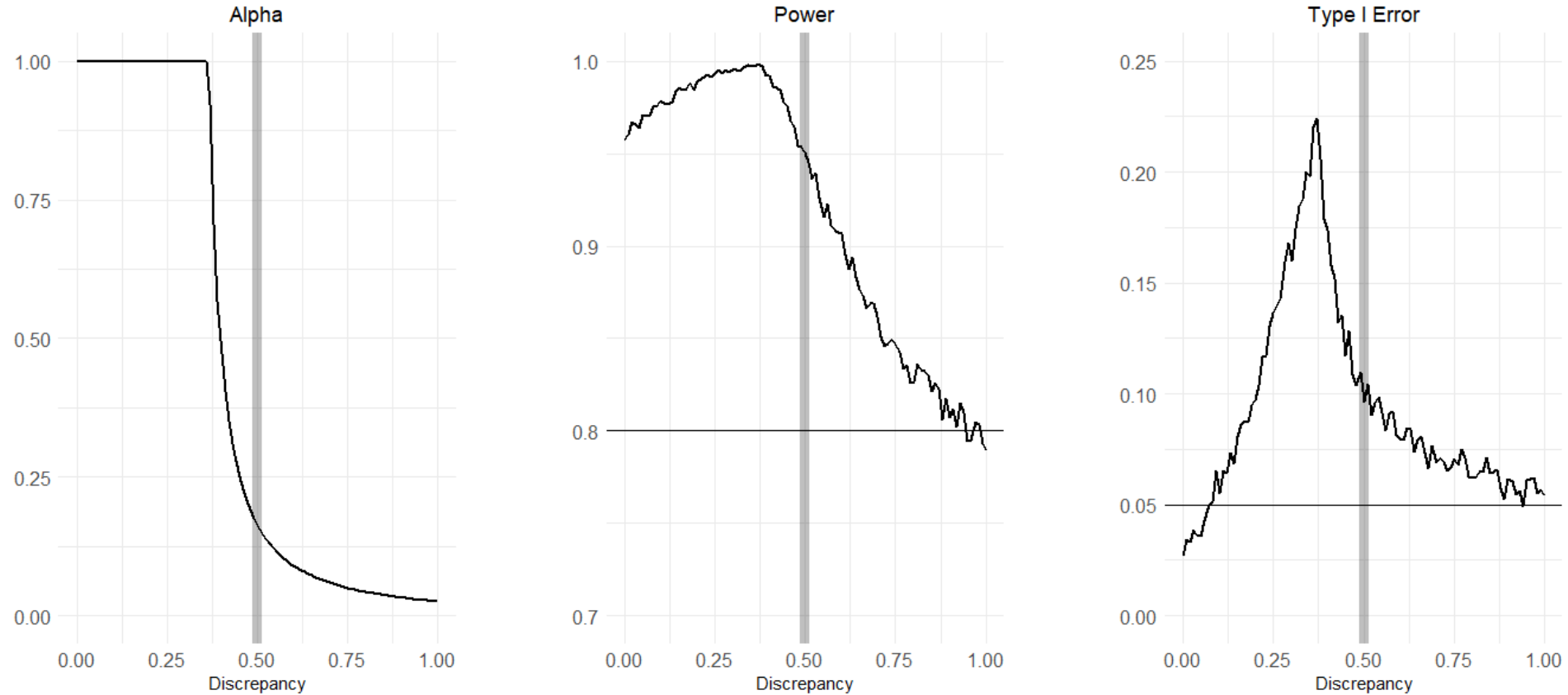
Historical data	
Arm	Placebo
Sample size	<b>100</b>
Assumed change from baseline in disease activity score	-1.5 (1.5)

- Scenarios: Current placebo ranges from -1.5 (discrepancy = 0) to -2.5 (discrepancy = 1)
- Use **Empirical Bayes** to define alpha
  - *Alpha is inversely proportional to the discrepancy through an explicit function*
- Quantify Bayesian type I error and power

# Empirical Bayes power prior, applied to our example



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Given the initial trial assumptions, the Empirical Bayes power prior specified a “cliff” in the behavior of delta. This will lead to full borrowing of discrepant data and an inflation in type I error in some scenarios.

# Key Learnings

## **Why use historical borrowing?**

- Reduce sample size at design phase and use borrowing to achieve sufficient power

## **Communicate benefits/risk**

- Given all the moving parts, what is the appropriate way to specify a power prior?
- Framework to assess operating characteristics over plausible scenarios
- Identify problematic scenarios