2503 '99 MAY -4 AS:47

STATISTICAL CONSIDERATION

Utility of Multivariate Failure Time Analysis Method - An approach for Alcohol Treatment Clinical Trials

Sue-Jane Wang, Ph.D. Mathematical Statistician

April 20, 1999
Drug Abuse Advisory Committee Meeting
DACCADP/DB2/OB/CDER/FDA

OUTLINE

- Statistical experience from Naltrexone NDA
- Alcohol Treatment Trials
 - Types of study population of interest
 - Outcome measure(s)
 - Applicable statistical analysis method
 - Frequency
 - Handling of dropout patients
 - Time-to-event

STATISTICAL EXPERIENCE - 1

(Naltrexone)

- Design
 - Randomized and double-blind 12-week study of Naltrexone vs. placebo in conjunction with psychotherapy
 - Volpicelli: one psychotherapy was used
 - O'Malley: two kinds of psychotherapy were used

STATISTICAL EXPERIENCE - 2

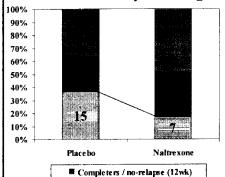
(Naltrexone)

- Outcome Measures reported by patients
 - time-to-1st-drink
 - time-to-1st-heavy-drinking-day(e.g., ≥ 5 drinks/day)
 - relapse to heavy drinking
 - complete abstinence from drinking
 - number of days on which patients drank or were drunk
 - craving for alcohol
- Lab measurements
 - · blood alcohol
 - liver enzyme levels

CLINICAL RESPONSE (Yes/No)

(Volpicelli et al., n=41 per group)

Incidence of Heavy Drinking



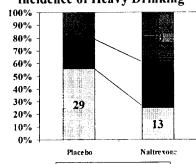
■ Dropout / no-known-relapse ■ At least 1-heavy-drinking-day

- % patients w/ \geq 1-heavy-drinking-day 17% (N) vs. 37% (P), p=0.05 (X^2)
- % dropout, no-known-relapse 34% (N) vs. 27% (P)
- % patients completed, no-relapse49% (N) vs. 37% (P), p=0.37
- From Dr. Permutt's review(11/23/94)

CLINICAL RESPONSE (Yes/No)

(O'Malley et al., n=52 /per group)

Incidence of Heavy Drinking

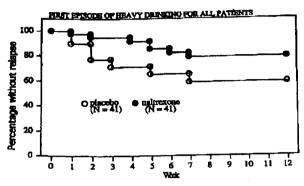


■ Completers / no-relapse (12wk) ■ Dropout / no-known-relapse □ At least 1-heavy-drinking-day

- % patients w/ ≥ 1-heavy-drinking-day
 25% (N) vs. 56% (P), p=0.0025
- % dropout, no-known-relapse 37% (N) vs. 25% (P)
- % patients completed, no-relapse 38% (N) vs. 19% (P), p=0.05
- From Dr. Permutt's review(11/23/94)

TIME TO FIRST-EVENT

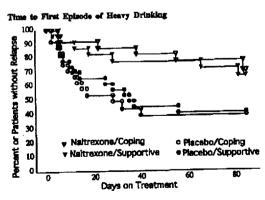
(Volpicelli et al., n=41/per group)



Time-to-first-episode-of-heavy-drinking
*Log-Rank Test, p-value = 0.04
*proportional-hazard model, p-val slightly above 0.05

TIME TO FIRST-EVENT

(O'Malley et al., n=52/per group)



*Log-Rank Test, p=0.001 *proportional-hazard model, p=0.001

STATISTICAL METHODS USED

(Naltrexone)

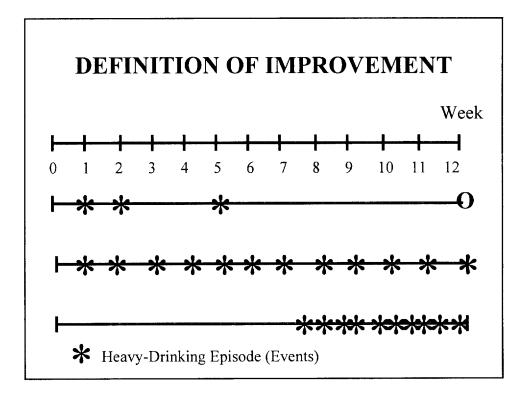
- Log-rank test and Cox-regression analysis for time-to-first-event outcomes
 - time-to-first-drink
 - time-to-first-heavy-drinking-day
- Chi-square test or Fisher's Exact test for Clinical Response (Yes/No) data
 - % of patients w/ at least one heavy-drinking-day
 - % of patients completed the trial w/o relapse
 - % of patients completed the trial and abstinence

ALCOHOL TREATMENT TRIALS

- Study population of interest ???
 - alcoholics
 - nearly alcoholics
 - excessive alcohol users
- Minimize Dropout Rate
 - scheduled visits (schema)
 - retrieved-dropout

ALCOHOL TREATMENT TRIALS

- Treatment effect of primary interest
 - Time-to-first-event and gap-times between events
 - Time-to-all-heavy-drinking-days
 - Quantitative outcome
 - Number of heavy drinking days
 - Number of low-risk drinking days (<=2 drinks/day for male and <=1 drink/day for female)
 - · Binary outcome
 - % of patients having >=1 heavy drinking days
 - % of patients with low-risk drinking



CONVENTIONAL ANALYSIS METHOD

- Time-to-first event
 - main objective
 - application area
 - treatment may be very effective
 - mortality (time-to-death)
- When treatment effect cannot be distinguished based on time-to-first event

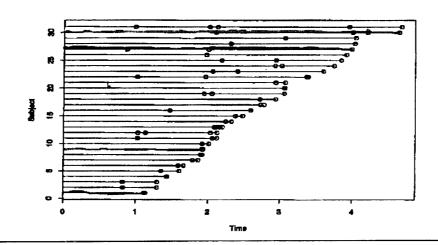
ALTERNATIVE STATISTICAL APPROACH

- Time-to-recurrent-event analysis method can incorporate gap times between heavy-drinking-days and takes into account
 - time-to-each-heavy-drinking-day
 - · time-to-overall-heavy-drinking-day
 - increased gap-time between events and/or decreased frequency of events

/

MULTIPLE FAILURE TIMES

(Therneau, 1996)



RECURRENT EVENTS

- Cardiovascular trial
 - # of infarctions occurring over time in same patient
- chemotherapeutic trial
 - repeated infections reported by cancer patients
- asthma clinical trial
 - multiple asthma attacks in a patient
- seizure study
 - recurrent seizures in a patient during trial period

EXAMPLE - 1

- Time-to-first-event show treatment difference
- Time-to-recurrent-event strengthen the evaluation of treatment effect

EXAMPLE - 2

- Time-to-first-event fail to show treatment difference
- Time-to-recurrent-events show treatment difference
 - (Barai and Teoh, 1997) repeated infections in the growth factor studies (patients with high grade malignant non-Hodgkin's lymphoma)

ANALYSIS METHODS FOR TIME-TO-RECURRENT-EVENT

- References
 - AG model (1982, Annals of Stat)
 - recurrent infection in bladder cancer patients, etc.
 - PWP total/gap time model (1981, Biometrika)
 - Infection incidence in bone marrow transplant recipients, etc.
 - Marginal Model of WLW (1989, JASA)
 - AIDS clinical trial, etc.
- Software available
 - MULCOX (Fortran); Splus; SAS

ALCOHOL TREATMENT TRIALS

- A More Defined Study Population ?
- Outcome Measure(s) of Primary Interest ?
 - Time to first heavy drinking
 - · Time to all heavy drinking days
 - % patients abstinence during the 12-week
 - Number of heavy drinking days
 - Number of low-risk drinking days
- Time-to-recurrent-event-analysis-method?