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Bayesian Interim Monitoring for Faster Decision-Making in Early Oncology Trials

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Disclosure

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- Chang-Heok Soh and Victoria Chang are employees of AbbVie Inc.

Agenda of Presentation

- Interim analysis (IA) in Phase 1-2 oncology studies
- Decision-making at IA based on predictive probability of success
 - Is there sufficient confidence at IA in the outcome at final analysis to make decision early (though may still continue trial)?
 - Focus today: Phase 1 expansion cohorts or Phase 2 single-arm trials with binary efficacy endpoint (eg ORR, CBR)
 - Method extends to other endpoints and randomized trials
- Operating characteristics via simulations

Interim Analysis of Efficacy in Clinical Trials

- Efficacy IA is any analysis intended to evaluate efficacy prior to formal completion of a trial
- Some motivations for IA:
 - Ethical imperative to avoid treating patients with ineffective or inferior therapies
 - Efficient allocation of resources
 - Faster decision-making for drug development

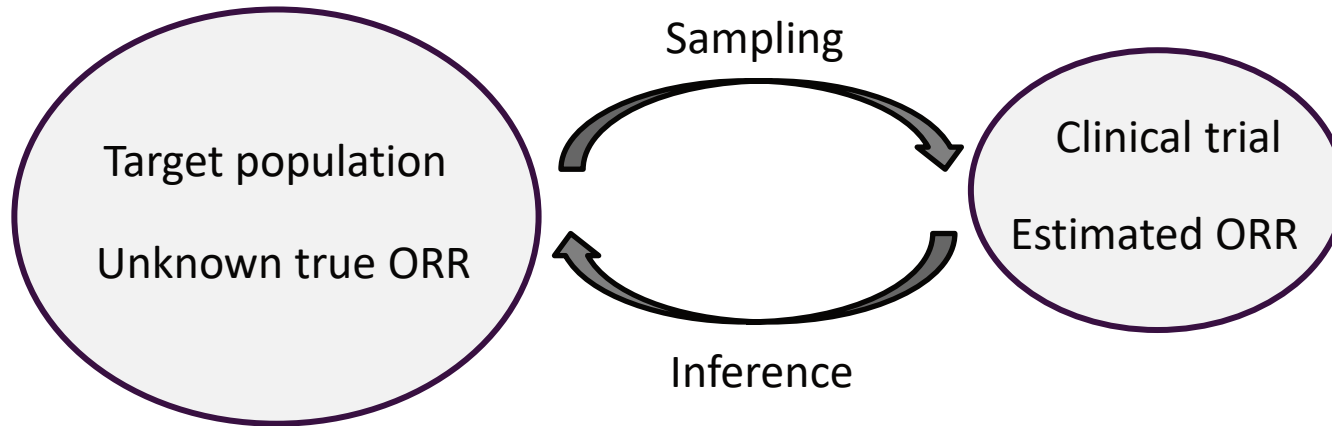
Interim Analysis of Efficacy in Phase 1-2 Oncology Studies

- May want to continue study in case of initial weak efficacy signals (unless unethical to continue)
 - Fuller understanding of drug's effect may require info on patient population, PK/PD, biomarkers, safety, etc, especially in signal-seeking Ph 1
 - Initial weak efficacy signals may lead to potentially enriched populations or other protocol changes

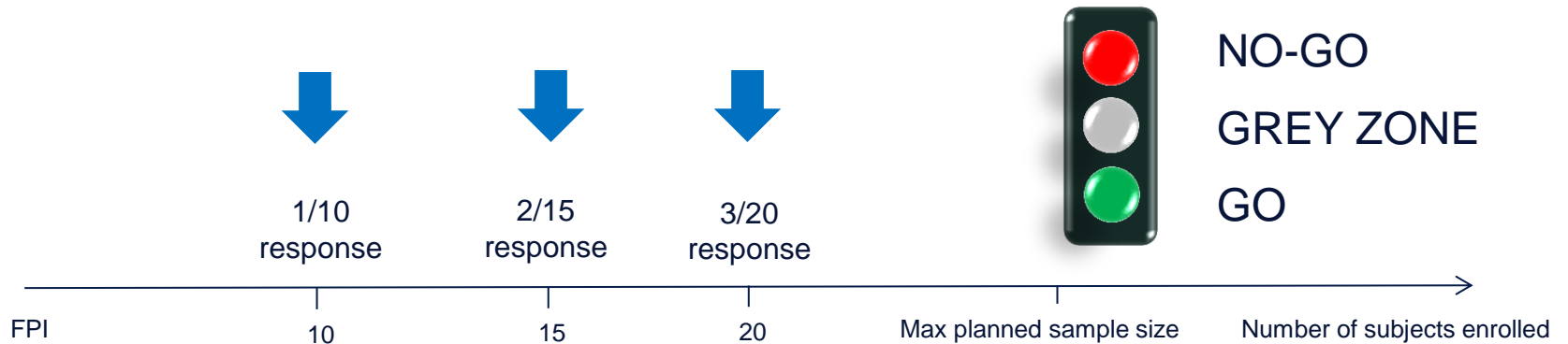
Interim Analysis of Efficacy in Phase 1-2 Oncology Studies

- Typically want to continue the trial even if early data drives early GO decision:
 - Collect more info on safety data, dosing schedules, biomarkers and efficacy
 - Identify appropriate populations
 - Data to inform possibility for treatment combination
- But early evidence of efficacy could accelerate development, e.g.
 - Start additional expansion arms, extend current study into Phase 1/2, or initiate planning of additional trial at-risk
 - Trigger decision to increase manufacturing spending

Decision-Making at Interim Analyses



Earlier and/or real-time monitoring



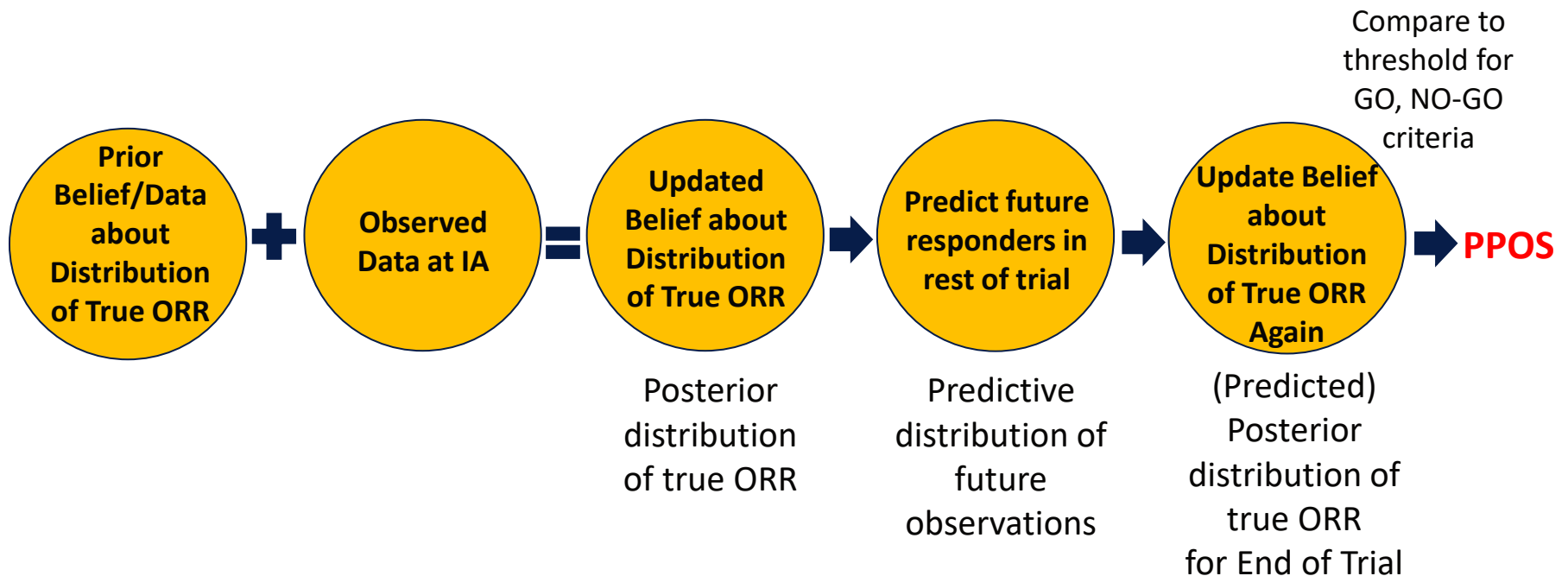
Interim Analyses: Is the trial very likely to show evidence supporting entering NO-GO, grey or GO zone at the end of the trial?

Bayesian Interim Analyses (IA) for Faster Decision-Making

- Decision-making at IA based on predictive probability of success
 - Is there sufficient confidence at IA in the outcome at final analysis to make decision early (though may still continue trial)?
- Bayesian approach:
 - Allows flexibility in IA timing and uses data to-date for decision-making
 - Allows continuous monitoring of efficacy signals
 - Enables faster decision-making for drug development

Decision-Making at IA Using **Predictive Probability of Success (PPOS)**

- Definition: The probability of achieving a successful result at a future analysis, given current interim data
- Based on Bayesian framework and can incorporate prior belief or historical information



Hypothetical Example:

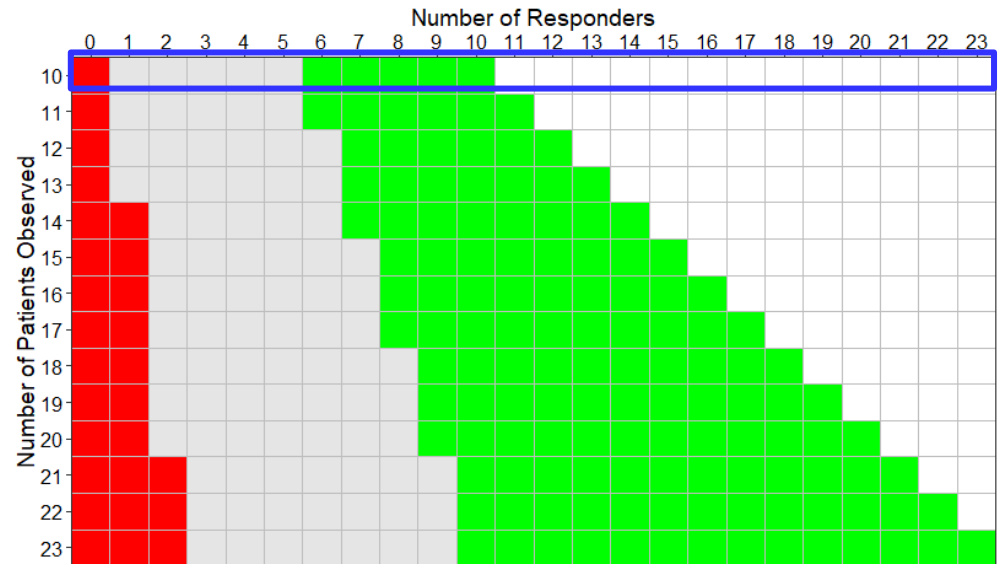


- 13 more patients for rest of Ph 1, need 2 more responders to enter grey zone, 9 more responders for GO-zone
- **Based on current data and predicted future data**
 - Predictive prob that final decision is GO= $\Pr(\geq 9 \text{ responses in } 13 \text{ more pts}) = 0.1\%$
 - Predictive prob that final decision is NO-GO= $\Pr(0-1 \text{ response in } 13 \text{ more pts}) = 63\%$
 - Predictive prob that final decision is GREY = **37%**
- Should we make early GO or early NO-GO decision?

Hypothetical Example:

- If team specifies confidence thresholds for early No-GO and early GO, e.g.
 - Early NO-GO if predictive prob/confidence that final outcome is NO-GO $\geq 80\%$
(the higher the bar, the harder to trigger early NO-GO)
 - Early GO if predictive prob/confidence that final outcome is GO $\geq 80\%$
(the higher the bar, the harder to trigger early GO)

| Observed ORR | Predictive prob for NO-GO (%) | Predictive prob for GO (%) |
|--------------|-------------------------------|----------------------------|
| 0/10 | 98 | 0.001 |
| 1/10 | 63 | 0.1 |
| 2/10 | 15 | 2 |
| 3/10 | 0 | 13 |
| 4/10 | 0 | 40 |
| 5/10 | 0 | 73 |
| 6/10 | 0 | 93 |
| $\geq 7/10$ | 0 | >99 |



Operating Characteristics

Hypothetical Phase 1

Design assumptions for simulations:

- Planned sample size of 23
- Min / Base TPP = 15% / 30%
- IA at n=10, 15 or continue to 23
- At end of Ph 1
 - NO-GO if $\Pr(\text{true ORR} < \text{min TPP given final data}) > 80\%$
 - GO if $\Pr(\text{true ORR} \geq \text{base TPP given final data}) \geq 80\%$
- At any IA,
 - Early NO-GO if predictive prob/confidence in final outcome being NO-GO given IA data > 80%
 - Early GO if predictive prob/confidence in final outcome being GO given IA data > 80%

Operating Characteristics

Hypothetical Phase 1

| True ORR | At max sample size (n=23) | | | With IA at n=10, 15 | | | | % Concordance between IA and final analysis |
|----------|---------------------------|--------------------------|------------------------|---------------------|------------------|---------------------------------|------------------------------|---|
| | % Final decision is NO-GO | % Final decision is GREY | % Final decision is GO | Avg N | % Early Decision | % Early decision is early NO-GO | % Early decision is early GO | |
| 10% | 59.2 | 40.8 | <0.01 | 16.6 | 57.9 | 57.8 | <0.01 | 80.6 |
| 15% | 30.9 | 69.0 | 0.1 | 19.2 | 35.5 | 35.3 | 0.2 | 81.4 |
| 20% | 13.3 | 85.9 | 0.8 | 20.8 | 20.6 | 19.7 | 0.9 | 85.7 |
| 30% | 1.5 | 86.3 | 12.2 | 21.7 | 11.9 | 4.8 | 7.1 | 86.4 |

Considerations for Implementation

- Real-time monitoring requires good real-time data cleaning and efficient operational coordination with sites to get the data in-house
- Operating characteristics should be assessed under different assumptions as part of design evaluation

THANK YOU