An ethical non-parametric design for selecting arms in a multi-arm clinical trial

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We would like to

- make a reliable recommendation (high statistical power)
- maximize the proportion of the population on the superior arm

"Earn vs Learn" trade-off



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Challenges:

• Unethical (low number of treated patients)



Current approaches

- Fixed randomization
- Randomized play the winner
- Current belief (maximum point estimate)
- Optimal multi-arm bandit (MAB) and the dynamic programming



Back to information measures

The Shannon information (entropy)

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In the example above,

$$h(\operatorname{arm} 1) = h(\operatorname{arm} 2).$$

This information does not reflect our specific interest in the superior arm

It shows the amount of information needed to answer the question What is the success probability?



Weighted information

Consider a two-fold experiment:

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A: The weighted Shannon information

$$h_{\phi}(f) = -\int_{\mathbb{R}} \frac{\phi(z)f(z)\mathrm{log}f(z)\mathrm{d}z}{\mathrm{d}z}.$$



Weight Function

The Beta-form weight function

$$\phi_n(p) = \Lambda(\gamma, x, n) p^{\gamma \sqrt{n}} (1-p)^{(1-\gamma)\sqrt{n}}.$$
(1)





Methods

- Model probability of success with a Beta distribution
- $\bullet \ \alpha$ is the true probability of success
- γ is the target probability (for instance, $\gamma = 0.999$)

Theorem

Let $h(f_n)$ and $h^{\phi_n}(f_n)$ be the standard and weighted differential entropies. Then,

$$\lim_{n\to\infty}\left(\left[h^{\phi_n}(f_n)-h(f_n)\right]-\frac{1}{2}\left(\frac{(\alpha-\gamma)^2}{\alpha(1-\alpha)}\right)n^{2\kappa-1}+\omega\right)=0$$



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Design

$$\hat{\delta}_{n_j}^{(\kappa)} = rac{(\hat{p}_{n_j}-\gamma)^2}{\hat{p}_{n_j}(1-\hat{p}_{n_j})}n_j^{2\kappa-1}$$

Arm selection algorithm:

- Start from $\hat{\delta}_{\beta_i}^{(\kappa)}$, $i = 1, \dots, m$
- **2** Observed n_i and x_i outcomes for the arm A_i , i = 1, ..., m
- Arm A_j is selected if it satisfies

$$\hat{\delta}_{n_j}^{(\kappa)} = \inf_{i=1,\dots,m} \hat{\delta}_{n_i}^{(\kappa)}.$$

Seperat 2-3 until the total number of patients is reached.

Note: Randomize in case of tie.

Illustration. Two arms trial

Consider the trial with m = 2 arms ($\alpha_1 = 0.5$ and $\alpha_2 = 0.7$), n = 75 patients

Prior :
$$\hat{p} = (0.99, 0.99); \quad \beta = (2, 2)$$

Alternative: Constrained rand. dynamic programming (Williamson et.al, 2016)



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Numerical study

We consider two trials with m = 4 treatments (Villar et.al, 2015) Trial 1: $N_1 = 423$, $p = [0.3, 0.3, 0.3, 0.5]^T$ Trial 2: $N_2 = 80$, $p = [0.3, 0.4, 0.5, 0.6]^T$.

Hypothesis $H_0: p_0 \ge p_i$ for i = 1, 2, 3

with the family-wise error rate calculated at $p_0 = \ldots = p_3 = 0.3$

Prior :
$$\hat{p} = (0.99, 0.99, 0.99, 0.99); \quad \beta = (5, 2, 2, 2)$$

We study:

- the type-I error rate (α)
- statistical power (1η)
- expected number of successes (ENS)

Comparators:

- MAB approach based on the Gittins index
- Fixed randomization



Mathad	$H_0: p_0 = p_1 = p_2 = p_3 = 0.3$			$H_1: p_0 = p_1 = p_2 = 0.3, p_3 = 0.5$			
Method	α	$p^*(s.e)$	ENS(s.e.)	$(1 - \eta)$	p*(s.e.)	ENS (s.e.)	
MAB	0.05	0.25 (0.18)	126.7 (9.4)	0.43	0.83 (0.10)	198.3 (13.7)	
WE ($\kappa = 0.55$)	0.05	0.22 (0.20)	126.9 (9.4)	0.55	0.83 (0.18)	197.1 (17.8)	



Method	H_0 :	$p_0 = p_1 = p_2 =$	$p_3 = 0.3$	$H_1: p_0 = p_1 = p_2 = 0.3$			$3, p_3 = 0.5$
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FR	0.05	0.25 (0.02)	126.9 (9.4)		0.82	0.25 (0.02)	147.9 (9.6)
WE ($\kappa = 0.65$)	0.05	0.23 (0.13)	126.9 (9.4)		0.87	0.74 (0.10)	189.3 (13.7)



Trial 1

Method	H_0 :	$p_0 = p_1 = p_2 =$	$p_3 = 0.3$	$H_1: p_0 = p_1 = p_2 = 0.3, p_3 = 0.5$			
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Wethou	α	$p^*(s.e)$	ENS(s.e.)	$(1 - \eta)$	p*(s.e.)	ENS (s.e.)		
MAB	0.00	0.25 (0.13)	24.0 (4.10)	0.00	0.49 (0.21)	41.6 (5.4)		
WE ($\kappa = 0.55$)	0.01	0.20 (0.15)	24.0 (4.10)	0.11	0.50 (0.27)	40.7 (5.9)		



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FR	0.05	0.25 (0.04)	24.0 (4.10)		0.50	0.25 (0.04)	36.0 (4.3)		
WE ($\kappa = 0.65$)	0.05	0.24 (0.07)	24.0 (4.05)		0.52	0.47 (0.21)	40.2 (4.8)		

Conclusion

- Simple, intuitively clear, can be computed by non-statisticians
- \bullet Penalty parameter κ reflects the trade-off between ENS and Power
- Performs better than currently used approaches

	MAB	FR
Power	higher	same
ENS	same	higher

- Can be applied to any trial with the target $\gamma \in (0,1)$
- Theoretical result: the design is consistent
- The criterion can be generalized for multinomial outcomes

