



DISCUSSION

Randomization- vs Model-based Inference

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Outline

- Model- vs Randomization-based Inference
- A lady tasting tea
- Simple vs Stratified Randomization
- Covariate adjustment using auxiliary covariates
- An example: A skin cancer prevention trial
- Conclusion



Statistical Properties of Randomization in Clinical Trials

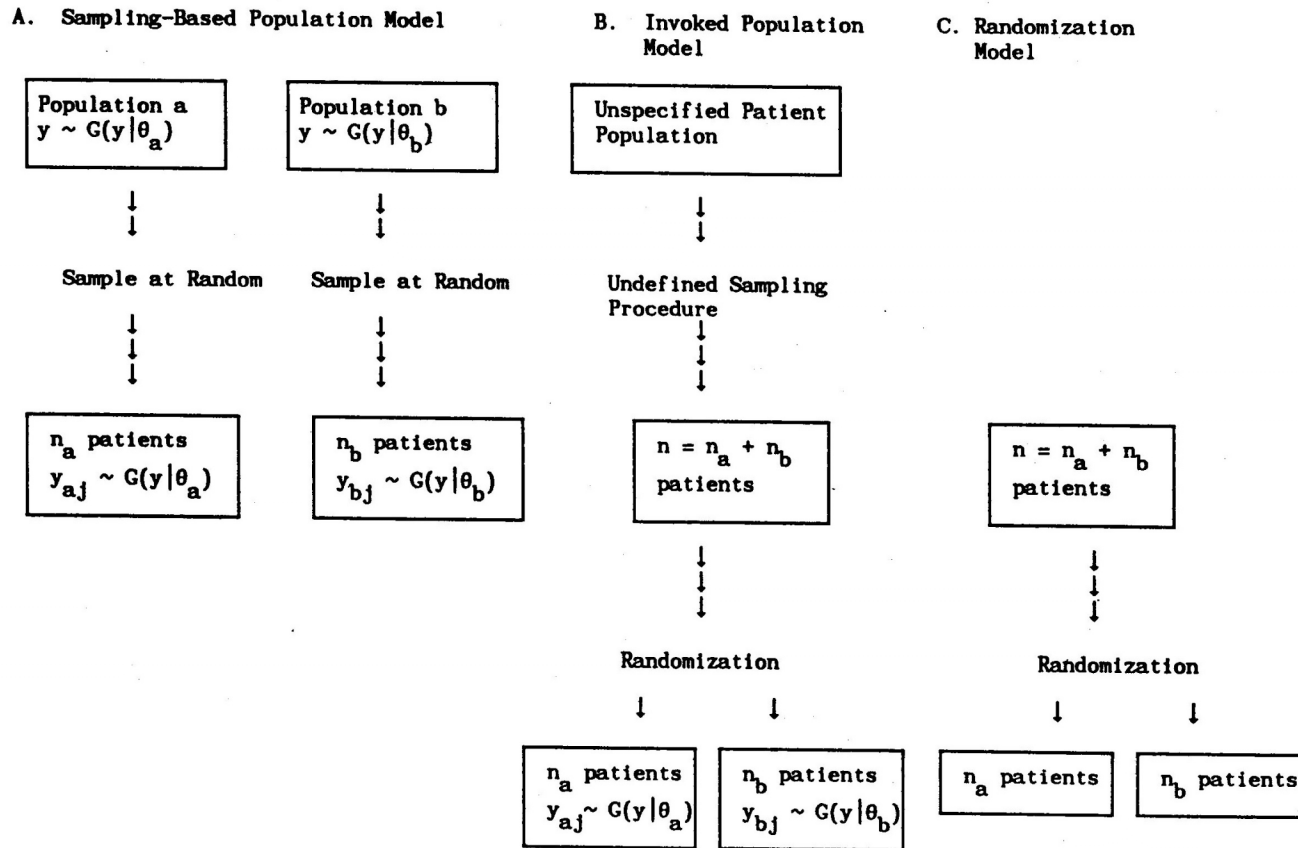


Figure 2 Population sampling models, the patient selection process, and the randomization model for a clinical trial.

Lachin: *Control Clin Trials* 1988;9:289-311.



Model-based Inference

- Not affected by treatment allocation scheme
 - Begg, Kalish: *Biometrics* 1984
- “Essentially, all models are wrong, but some are useful.”
 - George E. P. Box
- **Assumption:** No unmeasured covariates



Randomization-based Inference

- The use of randomization provides a basis for an assumption-free statistical test of the equality of treatments
- Such tests were originally proposed by Fisher and are known as randomization or permutation tests
- With sample sizes n_a and n_b , the conditional reference set Ω_c consists of ${}_n C_{n_a}$ possible combinations of n_a patients on treatment a out of n patients



A Lady Tasting Tea (1)

- Fisher: *The Design of Experiments* 1935.
- A lady declares that by tasting a cup of tea made with milk she can discriminate whether the milk or the tea infusion was first added to the cup
- Test H_0 : No faculty of discrimination
- The experiment
 - Mix 8 cups of tea, 4 in one way and 4 in the other, prepared otherwise the same
 - Present them to the lady for judgement in a **random** order
- 70 ways of choosing a group of 4 objects out of 8



A Lady Tasting Tea (2)

- A test of significance
 - With 4 correct, $p=1/70=0.014$ (<0.05)
 - With 3 correct and 1 wrong, $p=(1+16)/70=0.243$
- How would you conclude?
- The randomization formed the physical basis of the validity of the test
- The sensitivity of the experiment depends on the number of cups prepared



Simple vs Stratified Randomization (1)

- Basic Benefits of Randomization
 - Eliminate assignment bias
 - **Tend** to produce comparable groups
 - Produce valid statistical tests
- Grizzle: *Control Clin Trials* 1982;3:365-8.
 - **The Lumpers**
 - Simple randomization
 - Adjusted analysis by ANCOVA
 - **The Splitters**
 - Stratified randomization
 - Stratified analysis



Simple vs Stratified Randomization (2)

- Is the efficiency reduced by chance imbalance in simple randomization?
 - Yes for small sample trials
 - Covariate adjustment may improve the efficiency
 - How to do it properly?
- Is the administrative burden worth the added complexity in stratified randomization?
 - More importantly, stratification itself can lead to loss in efficiency



Covariate Adjustment Using Auxiliary Covariates (1)

- Y, Z, X : Outcome, treatment, auxiliary covariates
- Unbiased estimating function $m(Y, Z; \theta)$
- With Augmentation

$$m^*(Y, X, Z; \theta) = m(Y, Z; \theta) - (Z - \pi) a(X)$$

where $\pi = E(Z)$

- Elegant semiparametric theory
- Key assumptions
 - $Z \perp X$, independent
 - Covariate-adaptive randomization does not work!
 - No unmeasured covariates?



Covariate Adjustment Using Auxiliary Covariates (2)

- PURSUIT trial as reported in Zhang *et al.* Biometrics 2008
- 5,710 pts and 35 baseline auxiliary covariates
- Relative efficiency of $1.06 = (0.073/0.071)^2$
 - Unadjusted estimate of the log odds ratio
 - $\beta_2 = -0.174$ (0.073)
 - Adjusted estimate
 - $\beta_2 = -0.163$ (0.071)
- How about the bias?
 - Unadjusted estimate of the log odds ratio
 - $Z_{\text{unadj}} = -2.38$ and $p_{\text{unadj}} = 0.0171$
 - Adjusted estimate
 - $Z_{\text{adj}} = -2.30$ and $p_{\text{adj}} = 0.0217 > p_{\text{unadj}}$!



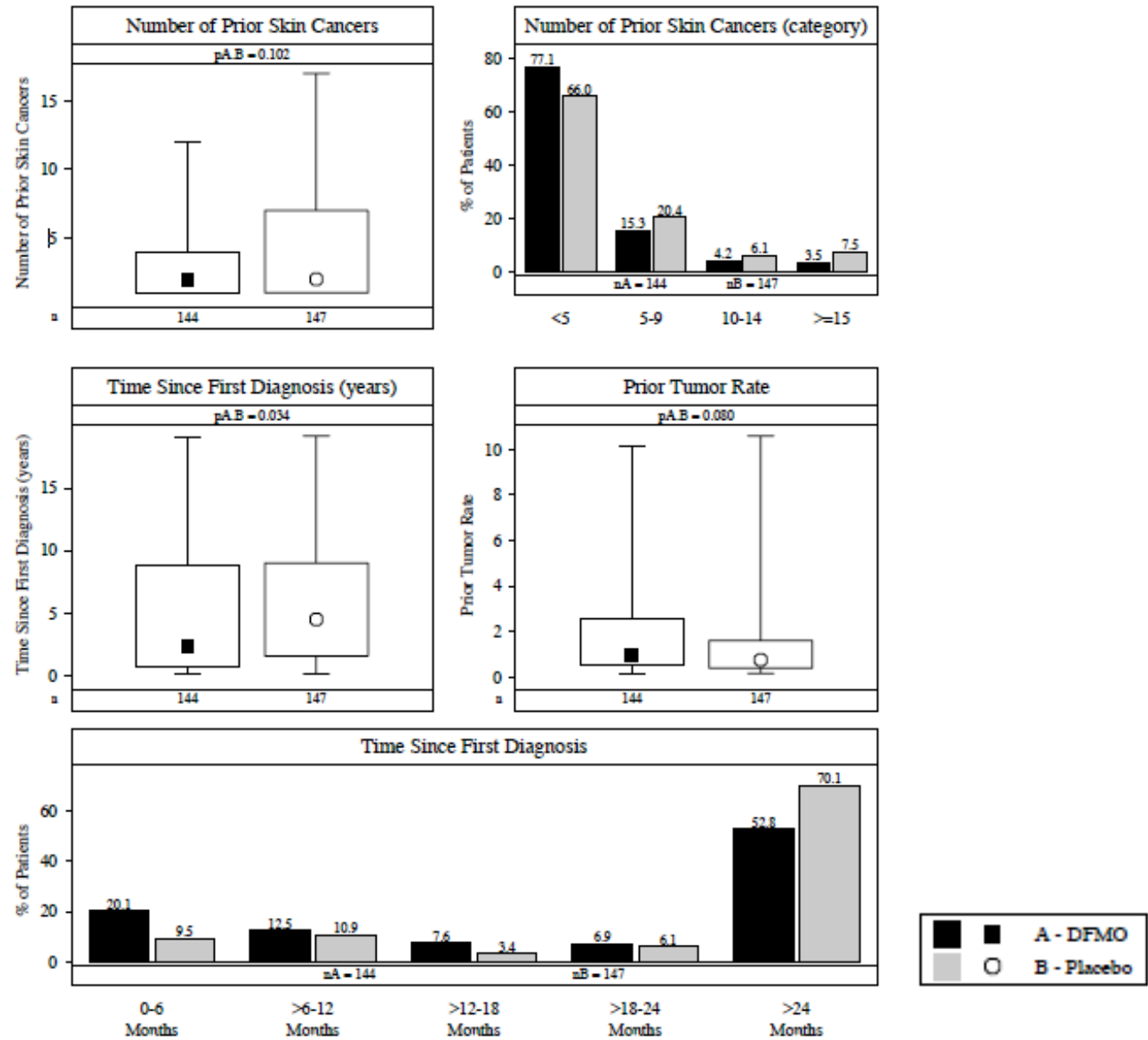
A Skin Cancer Prevention Trial

UWCCC C09737

- Patients with prior history of nonmelanomatous skin cancer
- Simple randomization after a run-in period
- DFMO vs placebo daily for an average of four years
- 90% power to detect a 35% reduction in new skin cancer from 0.65 new cancer/yr at a two-sided 0.05 test
- 291 pts randomized
- Unadjusted vs adjusted analysis



Skin Cancer History





Poisson Regression Models for Adjusted Analysis (1)

Model P1:

$$\log(\text{mean}) = \text{intercept} + \log(\text{years on study}) + \beta[\text{DFMO indicator}]$$

Model P2:

$$\log(\text{mean}) = \text{intercept} + \log(\text{years on study}) + \beta[\text{DFMO indicator}] + \gamma[\log(\# \text{ of prior cancers})]$$

Model P3:

$$\log(\text{mean}) = \text{intercept} + \log(\text{years on study}) + \beta[\text{DFMO indicator}] + \gamma[\text{categorized } \# \text{ of prior cancers}]$$

Model P4:

$$\log(\text{mean}) = \text{intercept} + \log(\text{years on study}) + \beta[\text{DFMO indicator}] + \gamma[\log(\text{prior tumor rate})]$$

Model P5:

$$\log(\text{mean}) = \text{intercept} + \log(\text{years on study}) + \beta[\text{DFMO indicator}] + \gamma[\log(\text{prior tumor rate})] + \delta[\text{age}]$$



Poisson Regression Models for Adjusted Analysis (2)

Table 7: Poisson Regression Results

Poisson Model	Statistic	Parameter			Overdispersion Parameter
		β	γ	δ	
<i>P1</i>	Value	-0.325			4.58
	SE	0.174			
	Exp	0.722			
	P-value	0.062			
<i>P2</i>	Value	-0.092	0.806		2.76
	SE	0.137	0.067		
	Exp	0.912	2.238		
	P-value	0.501	<0.001		
<i>P3</i>	Value	-0.178	0.776		3.30
	SE	0.149	0.087		
	Exp	0.837	2.173		
	P-value	0.231	<0.001		
<i>P4</i>	Value	-0.353	0.178		4.12
	SE	0.165	0.066		
	Exp	0.703	1.195		
	P-value	0.033	0.007		
<i>P5</i>	Value	-0.373	0.201	0.019	4.00
	SE	0.163	0.066	0.008	
	Exp	0.689	1.223	1.019	
	P-value	0.022	0.002	0.016	



Dilemma

- Different models lead to different results
- Specific models oftentimes not decided upon at the design stage
 - If you know the true model, you wouldn't be doing experiment in the first place
 - In this case we don't know which way of summarizing the prior cancer burden is appropriate
 - Leading to dilemma as to what to report
- Potential for data dredging is real!!!



Conclusion

- Some imbalance is a fact of life, especially for small studies
- Covariate adjustment
 - Damned if you do and damned if you don't?
 - Potential for misuse
 - Present both unadjusted and adjusted analyses
- Covariate adjustment using auxiliary covariates
 - Elegant theoretically
 - Very promising practically
 - Avoid problems of data dredging by **decoupling evaluation of treatment from regression modeling**