

CHAMP STUDY SIMULATIONS: PICK THE WINNER

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Outline

- Introduction
- Design
- Endpoints
- “Pick the Winner” Simulation
- Results

CHAMP Study: Introduction

- CHAMP = Childhood and Adolescent Migraine Prevention Study
 - PI's: Dr. Andrew Hershey and Dr. Scott Powers
- Global objective: to determine the optimal treatment for the prevention of migraines in children and adolescents
- First trial of it's kind in this study population



CHAMP
STUDY

CHAMP Study: Design

- Phase III intent-to-treat, 3-arm, multi-center, randomized, double-blind, placebo controlled safety and efficacy study
- 675 subjects, 8 to 17 years old
- 2:2:1 Randomization
 - Stratified by age and headache frequency
- 2 drugs: Amitriptyline and Topiramate
- 3 trials in 1
 - Amitriptyline vs. placebo
 - Topiramate vs. placebo
 - Amitriptyline vs. Topiramate

CHAMP Study: Endpoints

- Primary endpoint: 50% reduction in migraine frequency per month
 - Powered to detect 20% improvement for each treatment vs. placebo
 - 15% difference in comparative effectiveness portion
- Secondary endpoint: migraine-related disability (PedMIDAS)
- Tertiary endpoint: tolerability
 - Treatment groups differ on occurrence of SAEs
 - Have a drop-out rate greater than 35% or worse than other therapy

CHAMP Study: Endpoints Cont.

- Primary endpoint assessed using logistic regression model
 - Estimate log-odds of primary endpoint success for each treatment group
 - Adjusted for stratification variables
 - Age and headache frequency at baseline
- Three pair-wise treatment comparisons:
 - AMI vs. PBO
 - AMI vs. TPM
 - TPM vs. PBO
- Bonferroni corrected significance level of $0.017 = (0.05/3)$

“Pick the Winner”

- 3 Tiered approach
- 4 Possible practice recommendations:
 - AMI because it is superior to PBO and TPM on primary outcome
 - TPM because it is superior to PBO and AMI on primary outcome
 - Both are possible first choice and ‘tie-breaker’ is secondary outcome
 - If no difference in secondary outcome, go to tertiary outcome
 - Neither as first choice if neither are superior to placebo

Simulation Study

- Designed to assess the likelihood of picking the “correct” winning treatment
- Actual “power” can be thought of as making a correct decision using decision algorithm
- Uses 1st tier of decision algorithm

Simulation Study

- Steps:
 - Determine plausible range of values for true response rate for each treatment
 - PBO + Response Rates: 40%, 45%, 50%, 55%
 - AMI + Response Rates: 50%, 60%, 70%, 80%
 - TPM + Response Rates: 50%, 70%, 85%, 95%
 - $4 \times 4 \times 4 = 64$ conditions
 - For each condition, one of the 4 possible decisions was reached
 - 10,000 replications for each condition

Simulation Results

| Probability of picking "correct" winner | >80% | 50%-80% | <50% |
|---|------|---------|------|
| Number of conditions | 57 | 4 | 3 |

Notable Results

- Condition 33: 50% PBO, 50% AMI, 50% TPM
 - Provides assurance that decision algorithm maintains type 1 error level at or below 0.05

| Individual Trials | | | | Decision | | | | | “Power” |
|--------------------|--------------------|--------------------|------------------|------------|------------|------|------|-------------------------|-----------------------------------|
| Power: AMI vs. PBO | Power: TPM vs. PBO | Power: AMI vs. TPM | “Correct” Winner | AMI Better | TPM Better | Both | None | Prob. of Picking Winner | Prob. of Picking “Correct” Winner |
| 0.7% | 0.9% | 1.7% | None | 1.4% | 1.4% | 0.2% | 97% | 3% | 97% |

Notable Results

- Condition 43: 50% PBO, 70% AMI, 85% TPM
 - Used to choose sample size for each primary hypothesis
 - Study would have ~100% “power” to correctly select TPM

| Individual Trials | | | Decision | | | | “Power” | | |
|--------------------------|--------------------------|--------------------------|---------------------|---------------|---------------|------|---------|-------------------------------|---|
| Power: AMI vs. PBO | Power: TPM vs. PBO | Power: AMI vs. TPM | “Correct” Winner | AMI Better | TPM Better | Both | None | Prob. of Picking Winner | Prob. of Picking “Correct” Winner |
| 89% | >99% | 94% | TPM | 0% | 93.6% | 6.4% | 0% | 100% | 100% |

Notable Results

- Condition 38 : 50% PBO, 60% AMI, 70% TPM
 - Demonstrates ~ 91% “power” to select TPM when difference between response rates is 10%, compared to 44% power in head to head comparison

| Individual Trials | | | Decision | | | | | “Power” | |
|--------------------|--------------------|--------------------|------------------|------------|------------|-------|------|-------------------------|-----------------------------------|
| Power: AMI vs. PBO | Power: TPM vs. PBO | Power: AMI vs. TPM | “Correct” Winner | AMI Better | TPM Better | Both | None | Prob. of Picking Winner | Prob. of Picking “Correct” Winner |
| 26% | 89% | 44% | TPM | 0.1% | 70.5% | 20.4% | 9% | 91% | 91% |

Results Cont.

- 4 Conditions with 50-80% “power”
 - Condition 21: 45% PBO, 60% AMI, 50% TPM
 - Correctly selects AMI 70% of the time
 - Condition 27: 50% PBO, 60% AMI, 50% TPM
 - Correctly selects AMI 51% of the time
 - Condition 54: 55% PBO, 60% AMI, 70% TPM
 - Correctly selects TPM 74% of the time
 - Condition 58: 55% PBO, 70% AMI, 70% TPM
 - Correctly selects both 76% of the time
- All show improvement over individual comparisons
 - Power for individual comparisons between 0.8% and 64%

Results Cont.

- 3 Conditions with <50% “power”
 - Condition 1: 40% PBO, 50% AMI, 50% TPM
 - 37% probability of selecting a winner
 - Condition 17: 45% PBO, 50% AMI, 50% TPM
 - 11% probability of selecting any winner
 - Condition 53: 55% PBO, 60% AMI, 50% TPM
 - Probability of correctly selecting AMI is 43%
- Small treatment differences
- Benefits in these situation over individual trials
 - Power for individual comparisons between 1.5% and 41%

Conclusion

- Combined 3 in 1 approach provides benefits above and beyond what can be achieved with separate hypotheses
- Clear ‘winner’ in over 90% of conditions
- Power to determine ‘winner’ was greater when results examined together as opposed to separate trials
- Confidence in using this *a priori* decision algorithm to inform clinicians
- Only considers tier 1 in decision algorithm

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Questions?

References

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