

# STATISTICAL MODELING AND APPLICATIONS OF PARTICLE SWARM OPTIMIZATION

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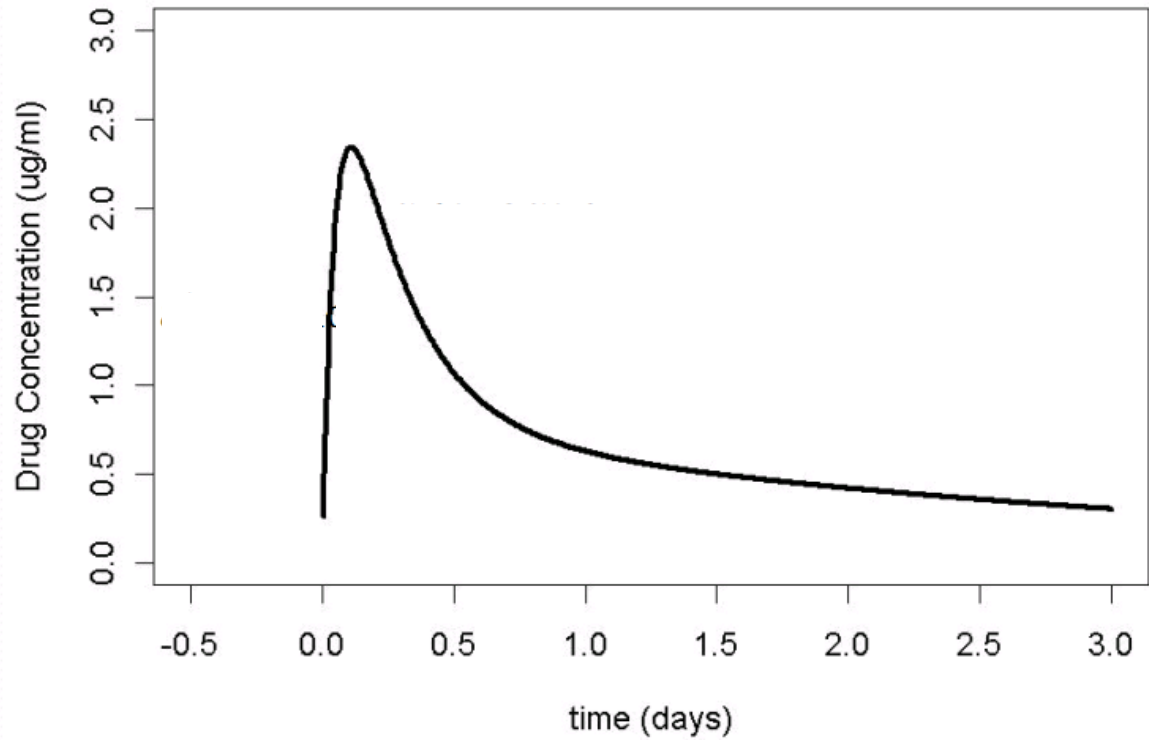
# Outline

- Pharmacokinetics (PK) analysis
  - Global optimization
  - Identifiability
- Two-stage single-arm phase 2 clinical trial designs
  - Simon's two-stage and Lin and Shih's adaptive designs
  - Adaptive designs with three target response rates

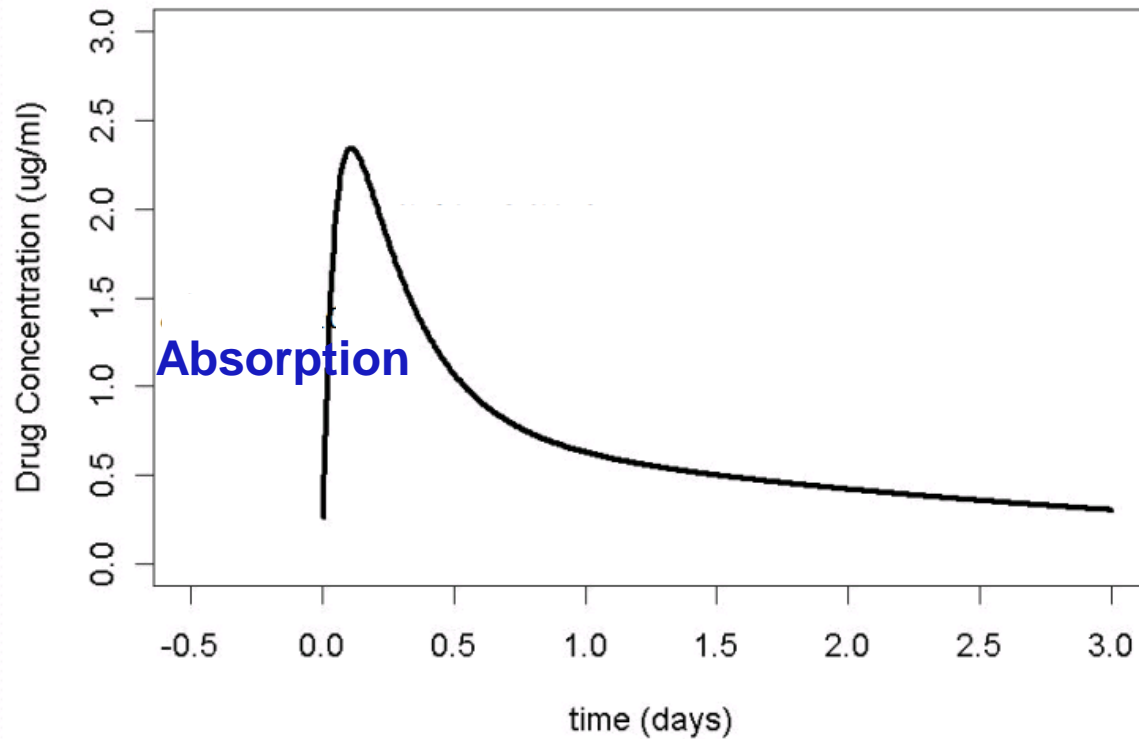
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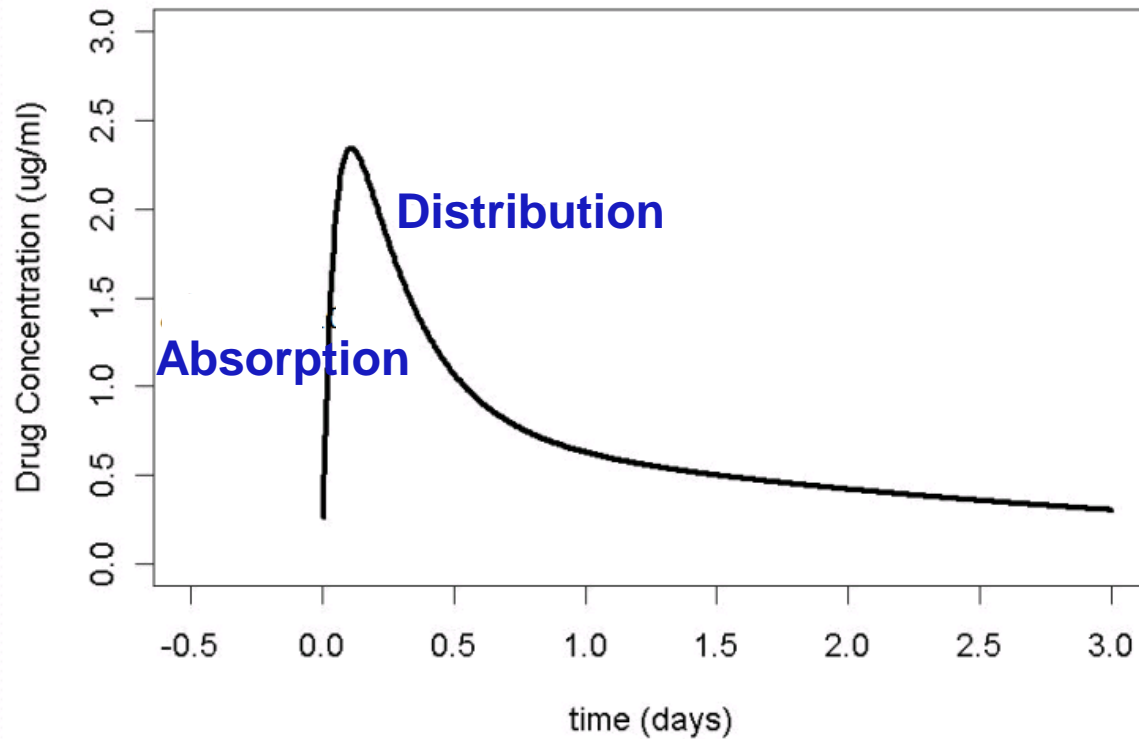
# Pharmacokinetics (PK)



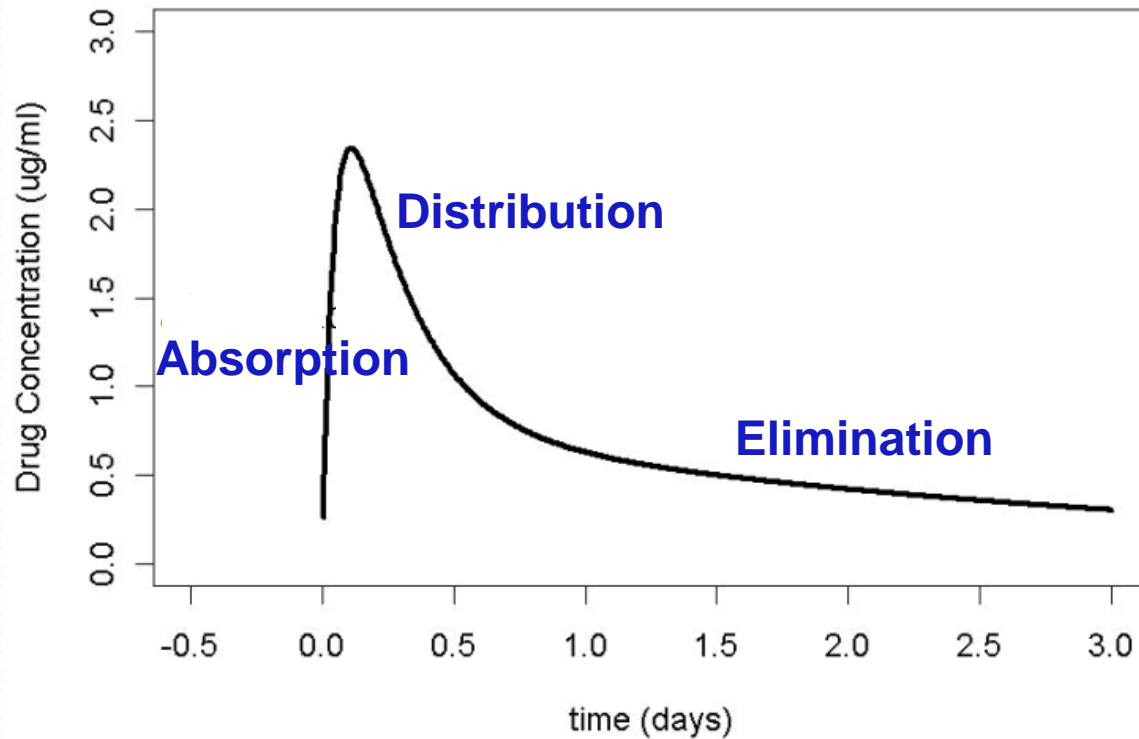
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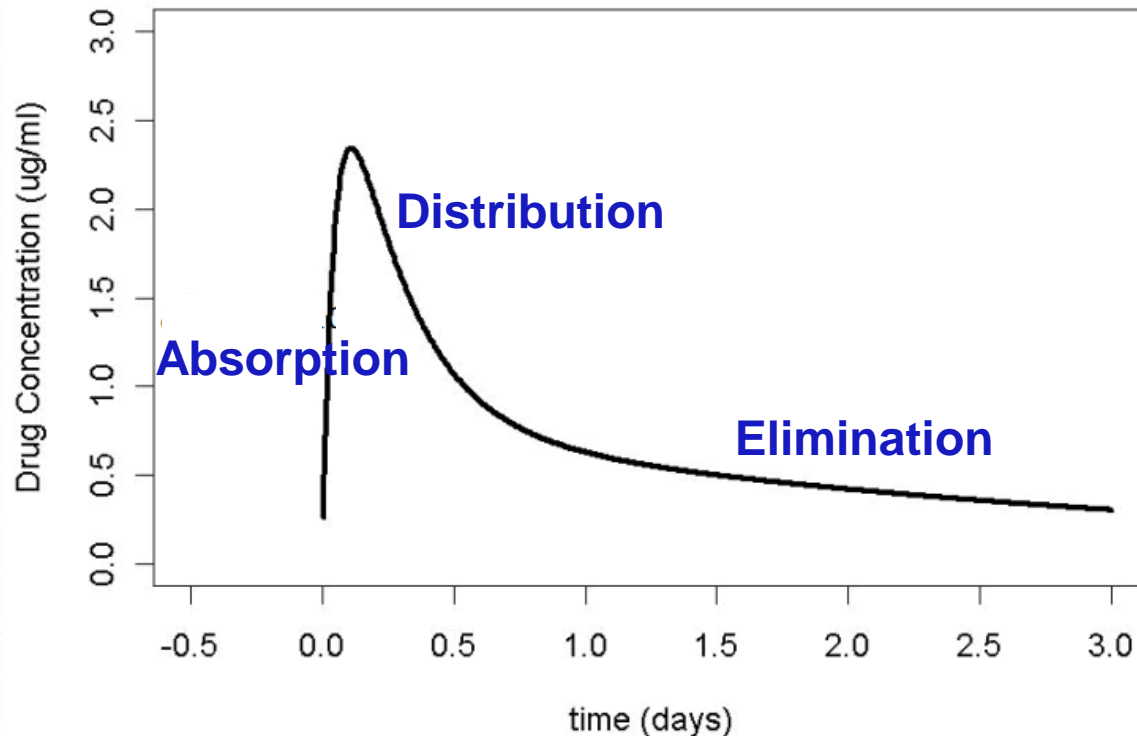
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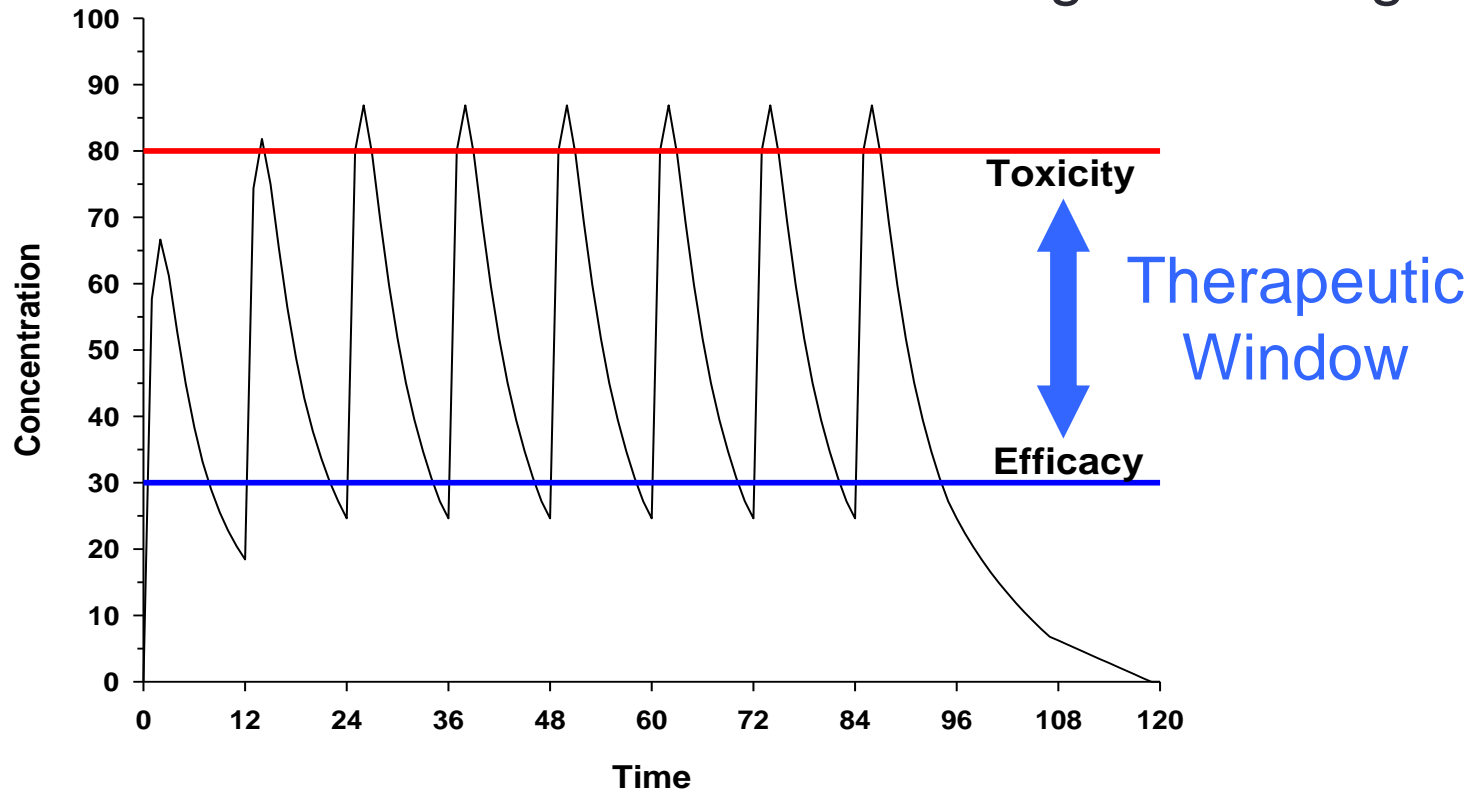
Pharmacokinetic (PK) analysis is to estimate the rates of the absorption, the distribution and the elimination (metabolism and excretion) over time of a drug and its metabolites



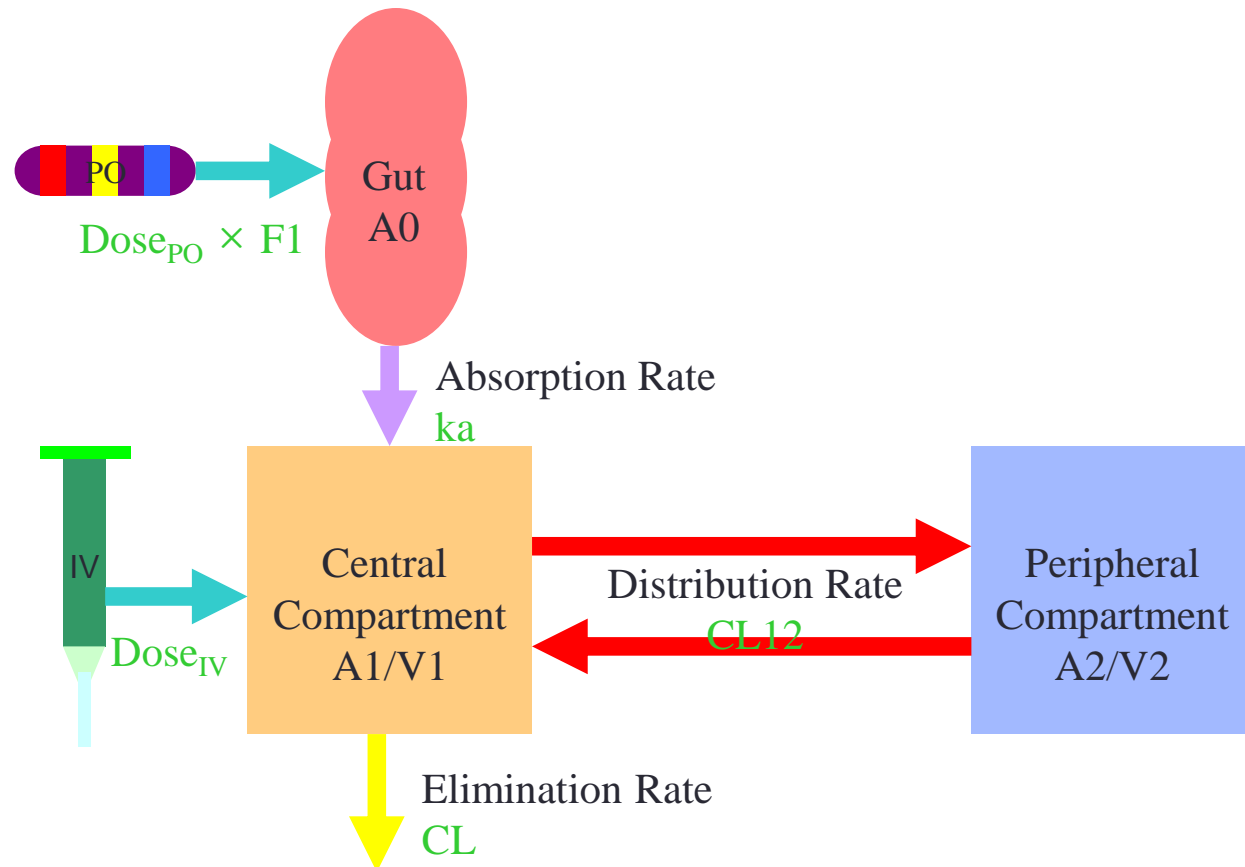
# Pharmacokinetics (PK) Goal: Therapeutic Optimization

- Achieve concentration profile attaining Efficacy and avoiding Toxicity

How much? How often? How long?: dose regimen

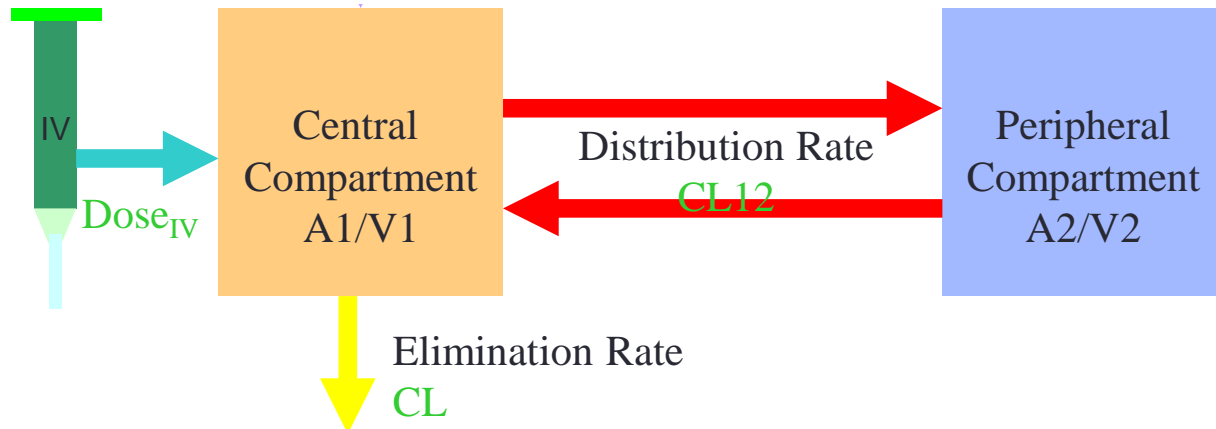


# Pharmacokinetics (PK) Study : Two-Compartment Model



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- IV model



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$$\frac{dA_1}{dt} = -CL \times \frac{A_1}{V_1} + CL_{12} \times \left( \frac{A_2}{V_2} - \frac{A_1}{V_1} \right)$$

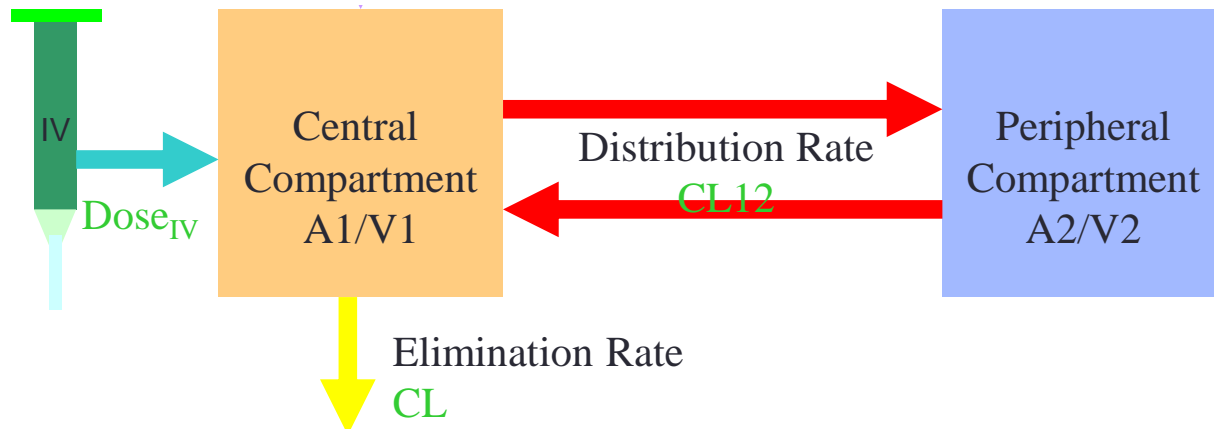
$$\frac{dA_2}{dt} = CL_{12} \times \left( -\frac{A_2}{V_2} + \frac{A_1}{V_1} \right)$$

$$[A_1(t), A_2(t)]|_{t=0} = (Dose, 0)$$

$A_1$ : Amount of drug in central compartment  
 $A_2$ : Amount of drug in peripheral compartment

$V_1$ : Volume of distribution in the central compartment  
 $V_2$ : Volume of distribution in the peripheral compartment

CL: Clearance  
 $CL_{12}$ : Distribution rate constant



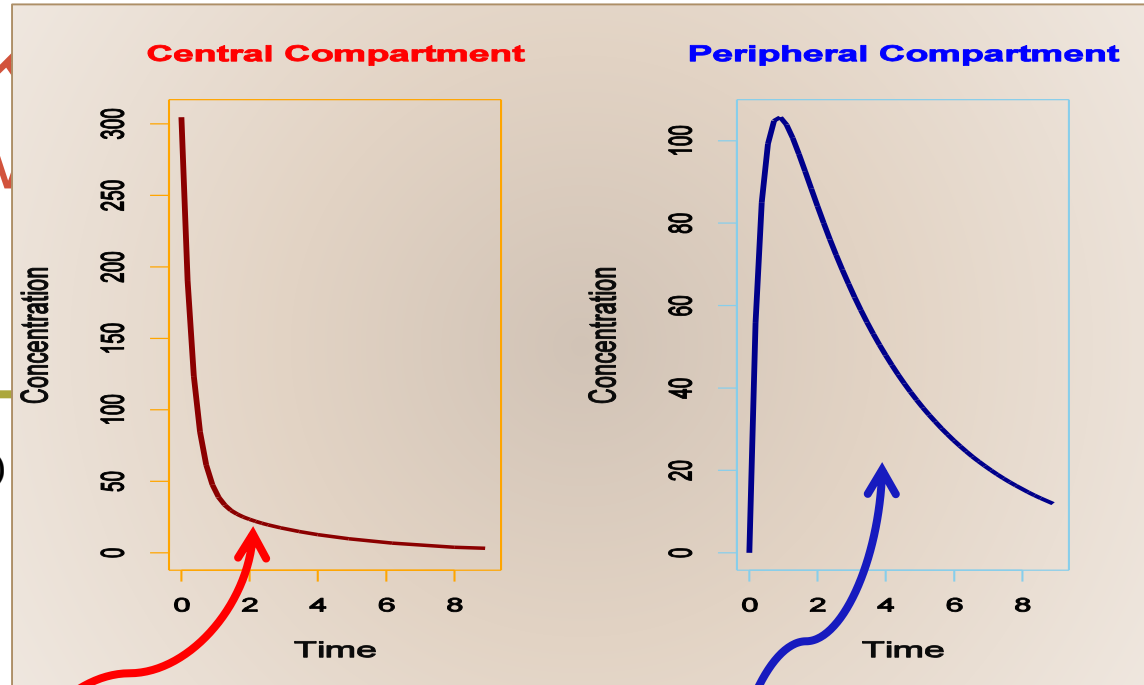
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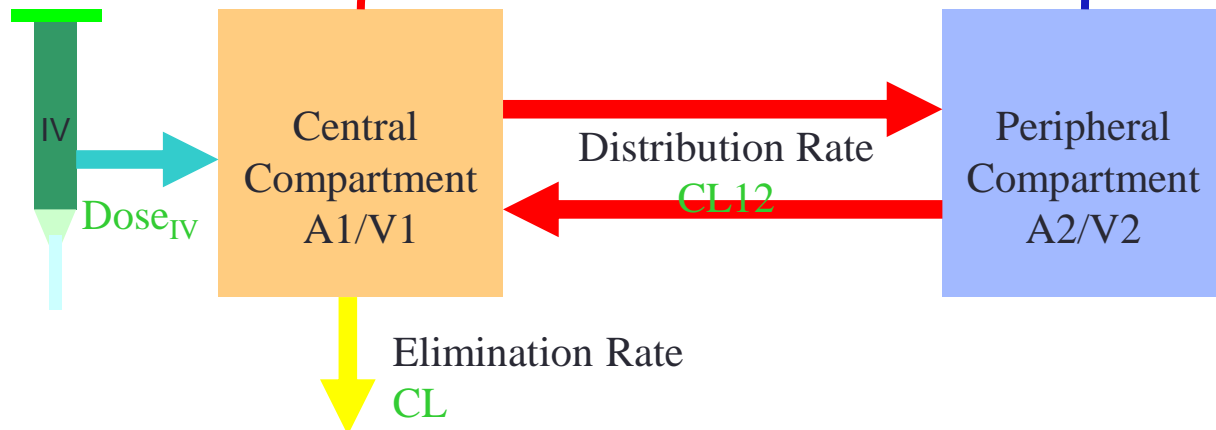
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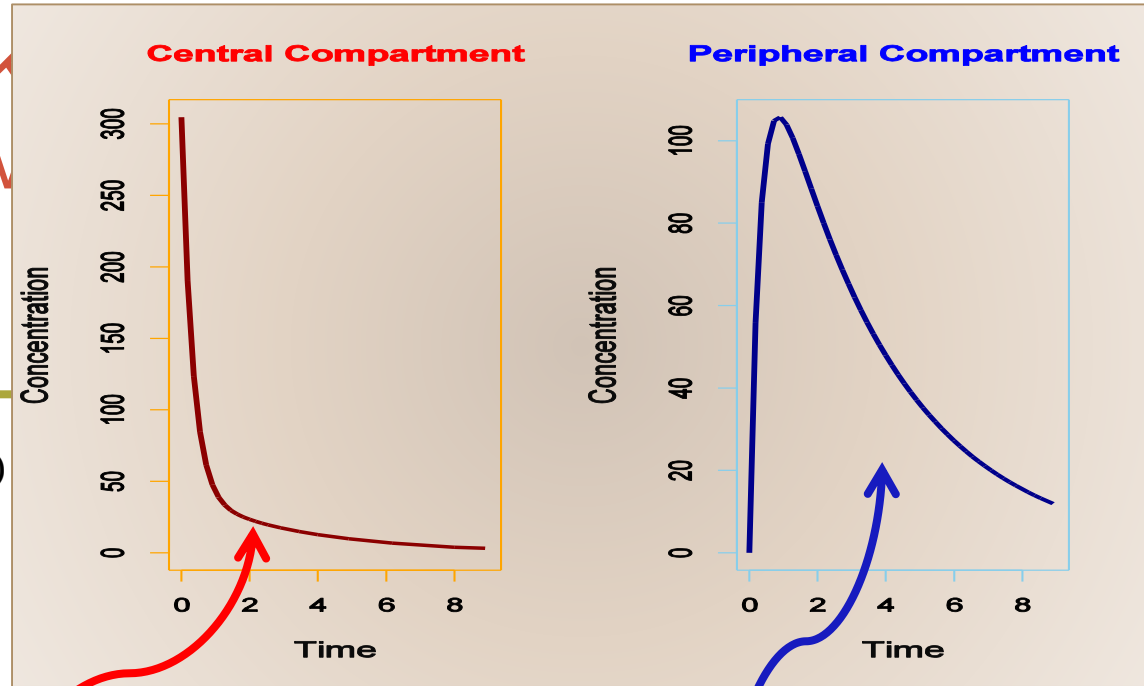
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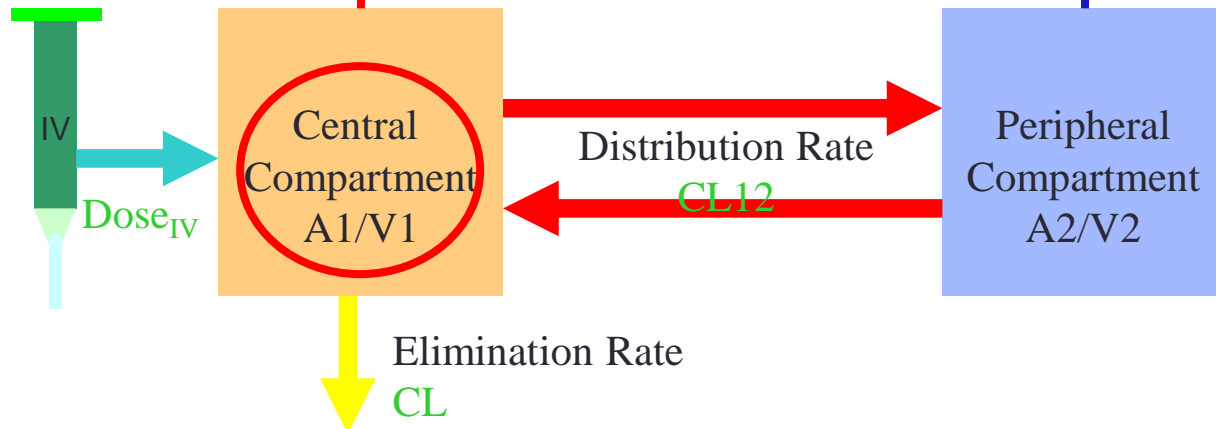
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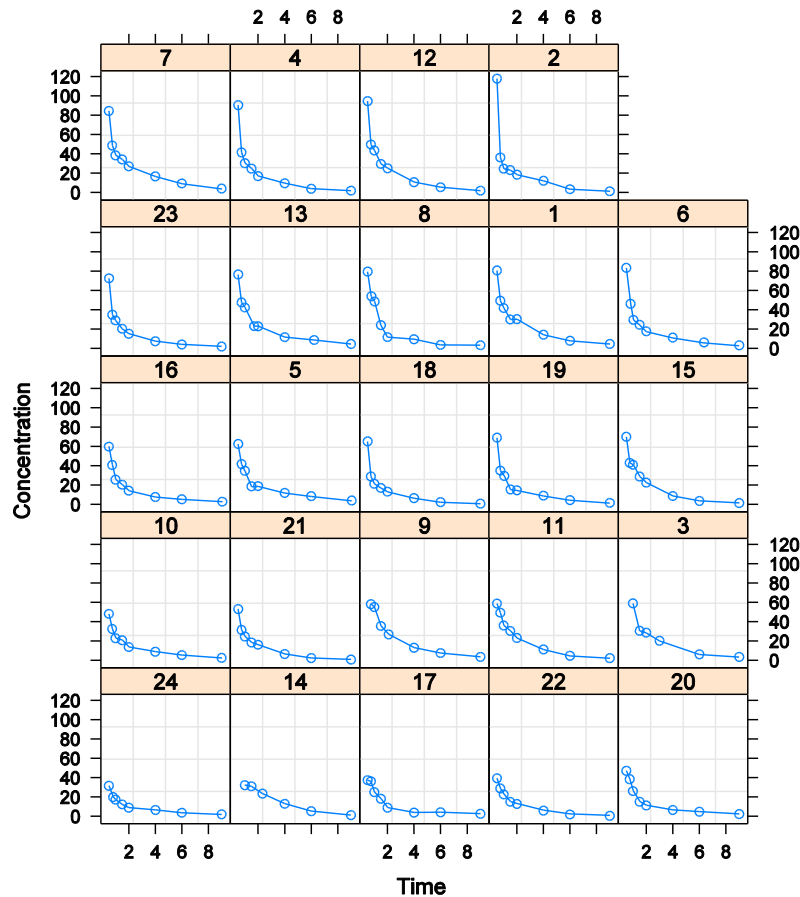
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# Midazolam (MDZ) data: IV infusion



CYP3A is responsible for 60% of drugs' metabolism

CYP3A Substrates → standard CYP3A probe drug

24 volunteers, 18 to 55 years of age, received single dose of 2.74~4.80 mg MDZ intravenously (IV) and Blood samples were collected at 0.5, 0.75, 1, 1.5, 2, 4, 6, and 9 hours after IV MDZ dosing.

## Mixed-Effects Model

- Provide a powerful and flexible tool for the analysis of balanced and unbalanced grouped data.
- A mixture of fixed and random factors
  - Fixed-effect (Population-level): the effects of the levels to one another
  - Random-effect (Subject-level): a random sample from a population of effects



# Parameter estimation

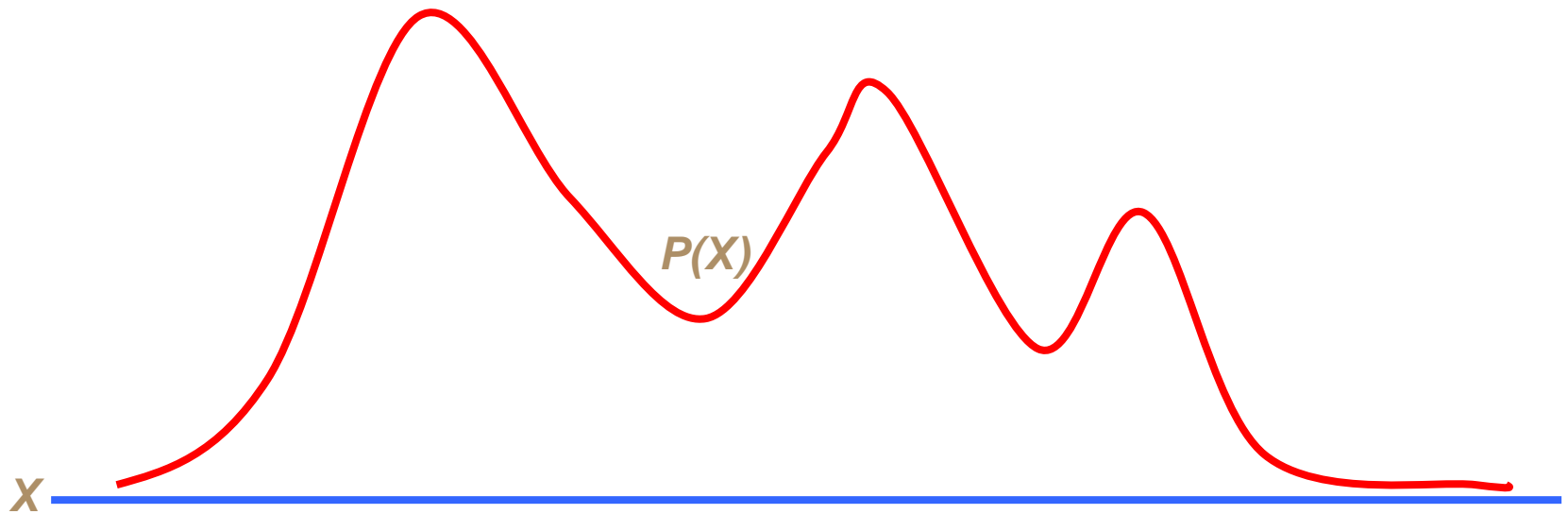
- Estimation: EM-like Algorithms and Monte Carlo-based Algorithms
- EM Algorithm →
  - It can guarantee only up to local optima
  - Approximation needed if either E-step or M-step is intractable (no closed form available)
    - PK/PD models have the nonlinear differential equations
  - It gives us point estimates
- Monte Carlo Algorithm
  - It can guarantee global optima theoretically
  - It can deal with nonlinear functions
  - It can estimate the distribution of parameters (Bayesian approach)

## Monte Carlo

- Given: a domain  $X$  and a distribution  $p(x)$

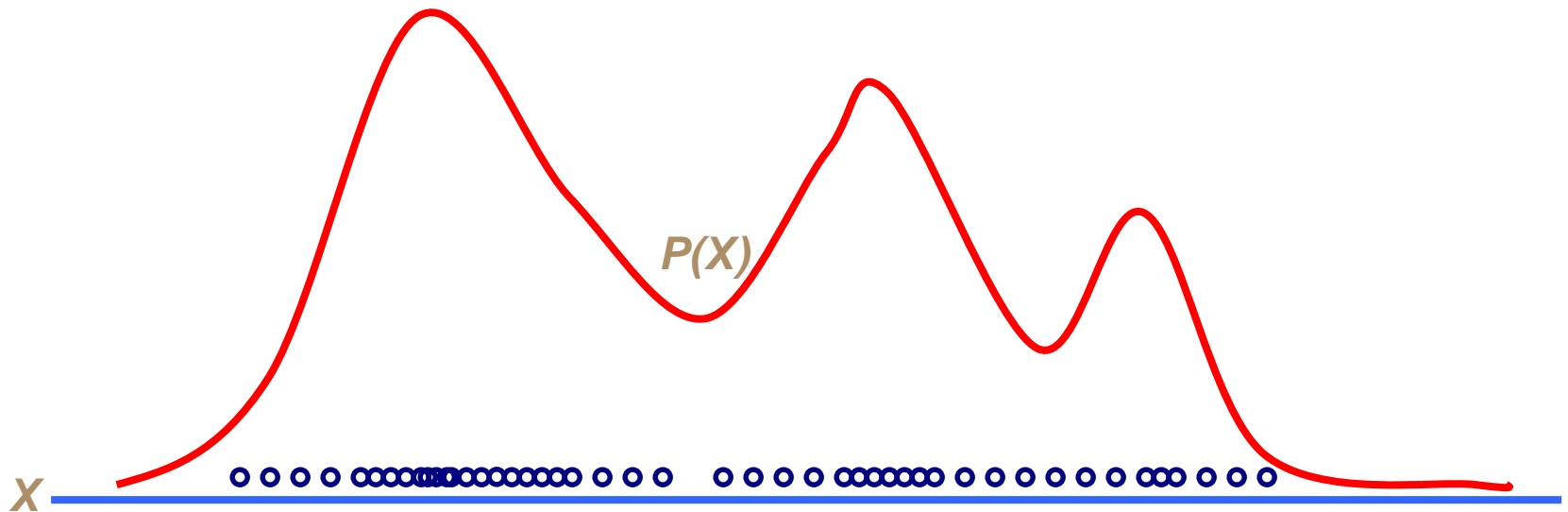
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- Given: a domain  $X$  and a distribution  $p(x)$
- Draw a set of  $N$  samples independently



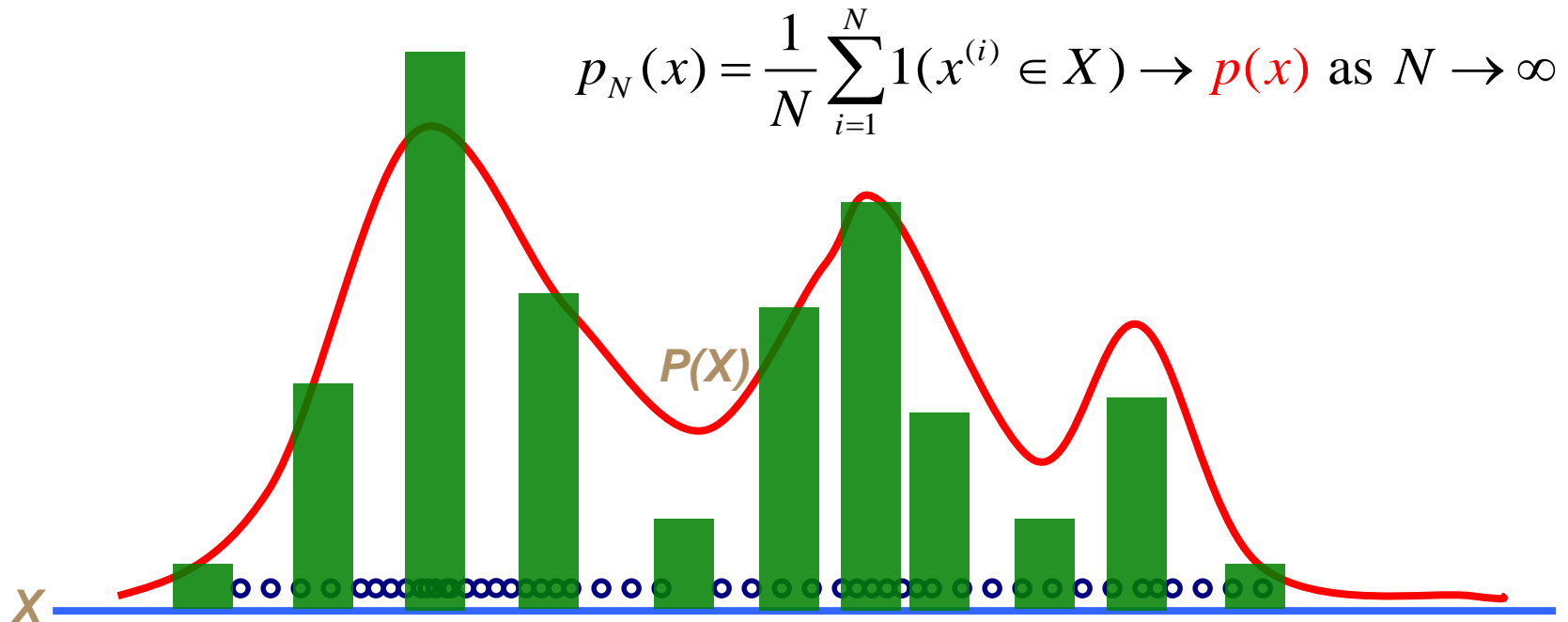
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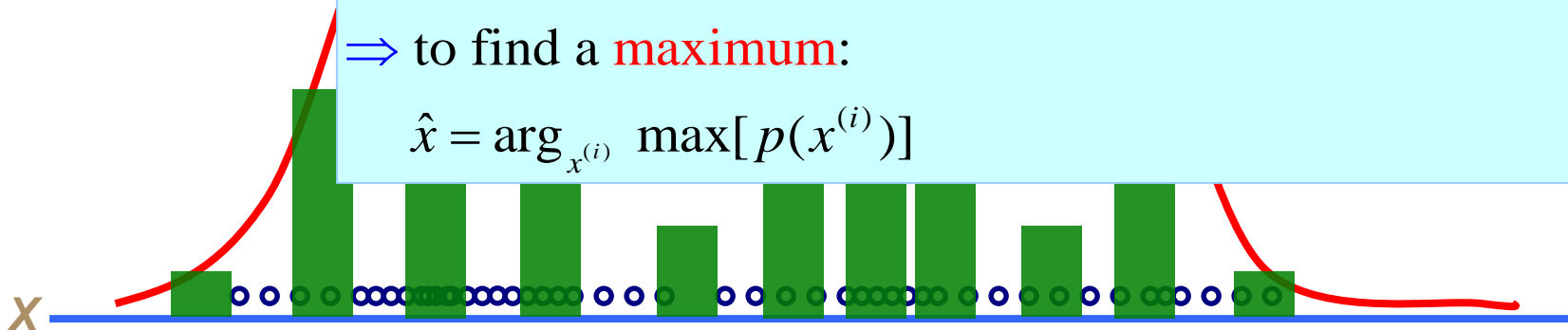
These samples can be used

⇒ to compute **expectations**:

$$E_N(f) = \frac{1}{N} \sum_{i=1}^N f(x^{(i)}) \xrightarrow{N \rightarrow \infty} E(f) = \int f(x) p(x) dx$$

⇒ to find a **maximum**:

$$\hat{x} = \arg_{x^{(i)}} \max[p(x^{(i)})]$$



# Monte Carlo-based Algorithms

- Non-Markovian Methods

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  - Rejection Sampling (Smith and Gelfand, 1992)
  - Ratio-of-uniforms method (Wakefield et al., 1994)
  - ...

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- Markovian Methods
  - Gibbs Sampling (Geman and Geman 1984)
  - Markov Chain Monte Carlo (MCMC) (Metropolis et al., 1953; Hastings, 1970)
    - Random-walk Metropolis (Roberts, 1995)
    - Independence Metropolis-Hasting (Roberts, 1995)
    - Reversible jump MCMC (Green, 1995)
    - ...

## Non-Markovian Method

[Rejection Sampling]

$\pi(x)$ : **intractable** target density

$\pi(x) \propto f(x)$

Find a **tractable envelope**  $h(x)$  s.t.  $f(x) \leq c \cdot h(x)$

*Repeat*{

    (\*) *Repeat*{

$y \sim h(\cdot)$

$u \sim U(0,1)$

$$\alpha = \frac{f(y)}{c \cdot h(y)}$$

$$x^{(t+1)} = \begin{cases} y & \text{if } u \leq \alpha \\ \text{go to (*)} & \text{if } u > \alpha \end{cases}$$

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$t \leftarrow t+1$  }

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It is not easy to find a tractable envelope function.

It causes to have much expensive computation times

$\alpha$  does not depend on the previous sample

# Markovian Method

[MCMC]

$\pi(x)$ : **intractable** target density

$$\pi(x) \propto f(x)$$

Find a **tractable proposal**  $q(\cdot | x^{(t)})$

*Initialize*  $x^{(0)}$

*Repeat*{

$$y \sim q(\cdot | x^{(t)})$$

$$u \sim U(0,1)$$

$$\alpha = \min \left( 1, \frac{f(y)q(x^{(t)} | y)}{f(x^{(t)})q(y | x^{(t)})} \right)$$

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It is not difficult to find a tractable proposal function, e.g., multivariate normal distribution

$\alpha$  depends on the previous sample

# Nonlinear Mixed-Effects Model

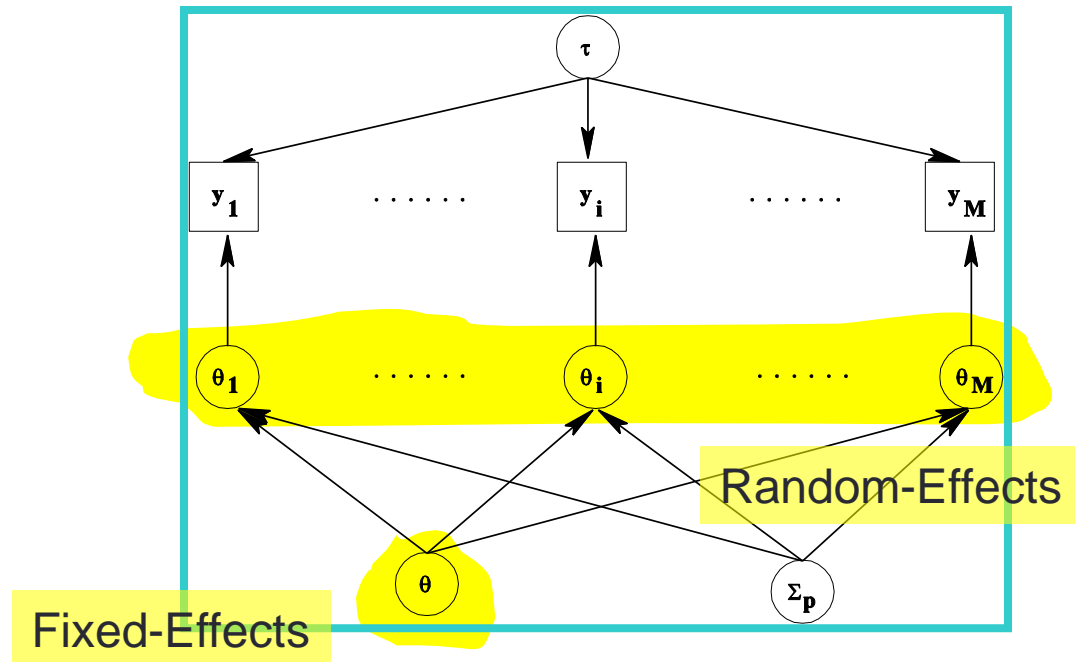
- The first - stage model:

$$[\log y_{ij} \mid \theta_i, \tau^{-1}, t_{ij}] \sim \mathbf{N}(\log f(\theta_i, t_{ij}), \tau^{-1}), \quad i = 1, \dots, M; j = 1, \dots, n_i$$

where  $f(\theta_i, t_{ij})$  is a nonlinear function

- The second - stage model :

$$[\theta_i \mid \theta, \Sigma_p] \sim \mathbf{MVN}(\theta, \Sigma_p)$$



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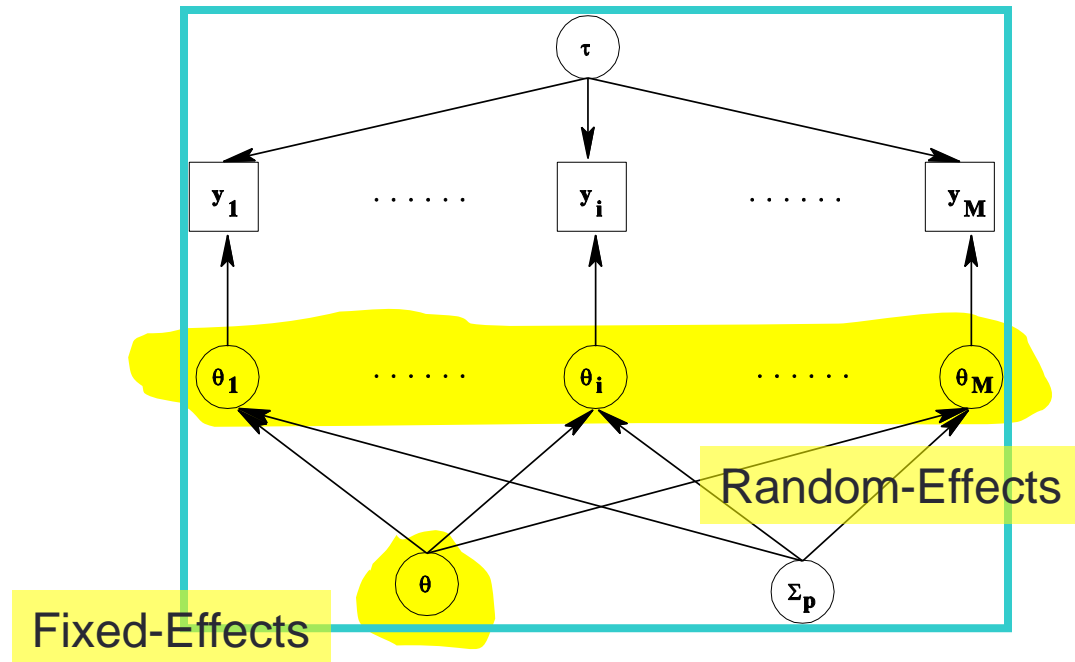
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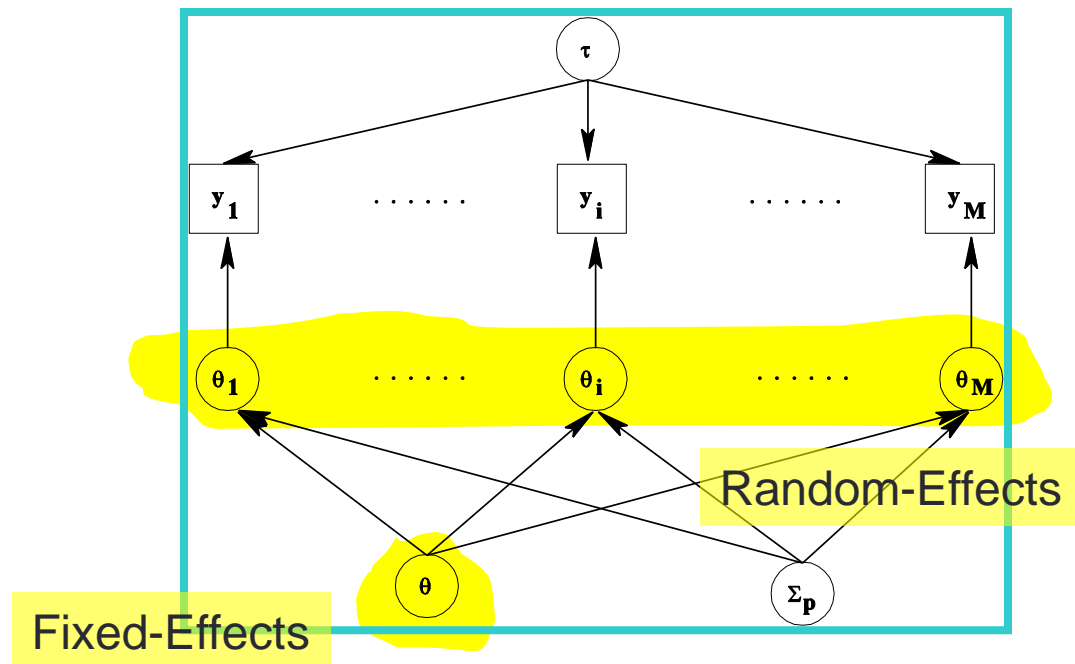
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Historic data  
Distribution of each parameter



# (Bayesian MCMC) Nonlinear Mixed-Effects Model

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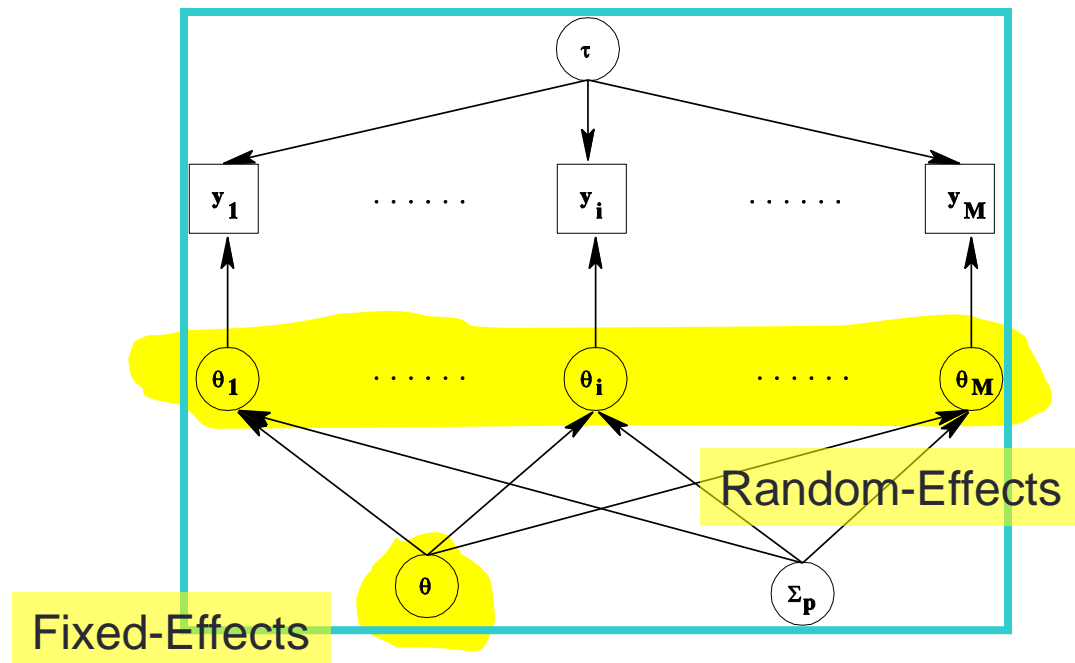
$$[\theta_i \mid \theta, \Sigma_p] \sim \mathbf{MVN}(\theta, \Sigma_p)$$

- The third - stage model :

$$[\tau] \sim Ga\left(\frac{\nu_0}{2}, \frac{\tau_0 \nu_0}{2}\right)$$

$$[\theta] \sim \mathbf{MVN}(\mathbf{c}, \mathbf{C}_p)$$

$$[\Sigma_p^{-1}] \sim W(\rho, [\rho \mathbf{R}_p]^{-1})$$



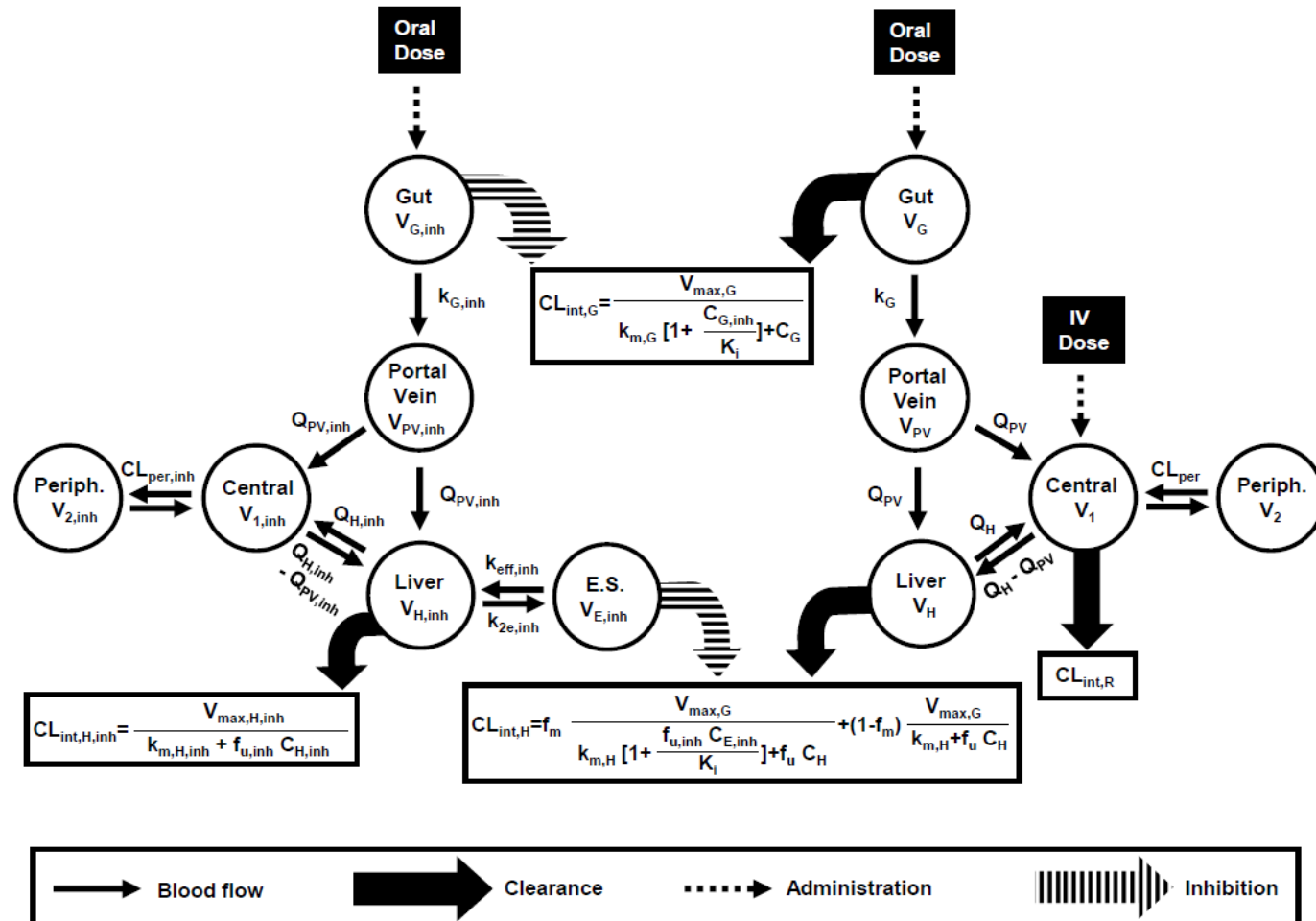
# Physiologically based PK drug interaction model

Ketoconazole

Inhibitor (KTZ)

Substrate (MDZ)

Midazolam



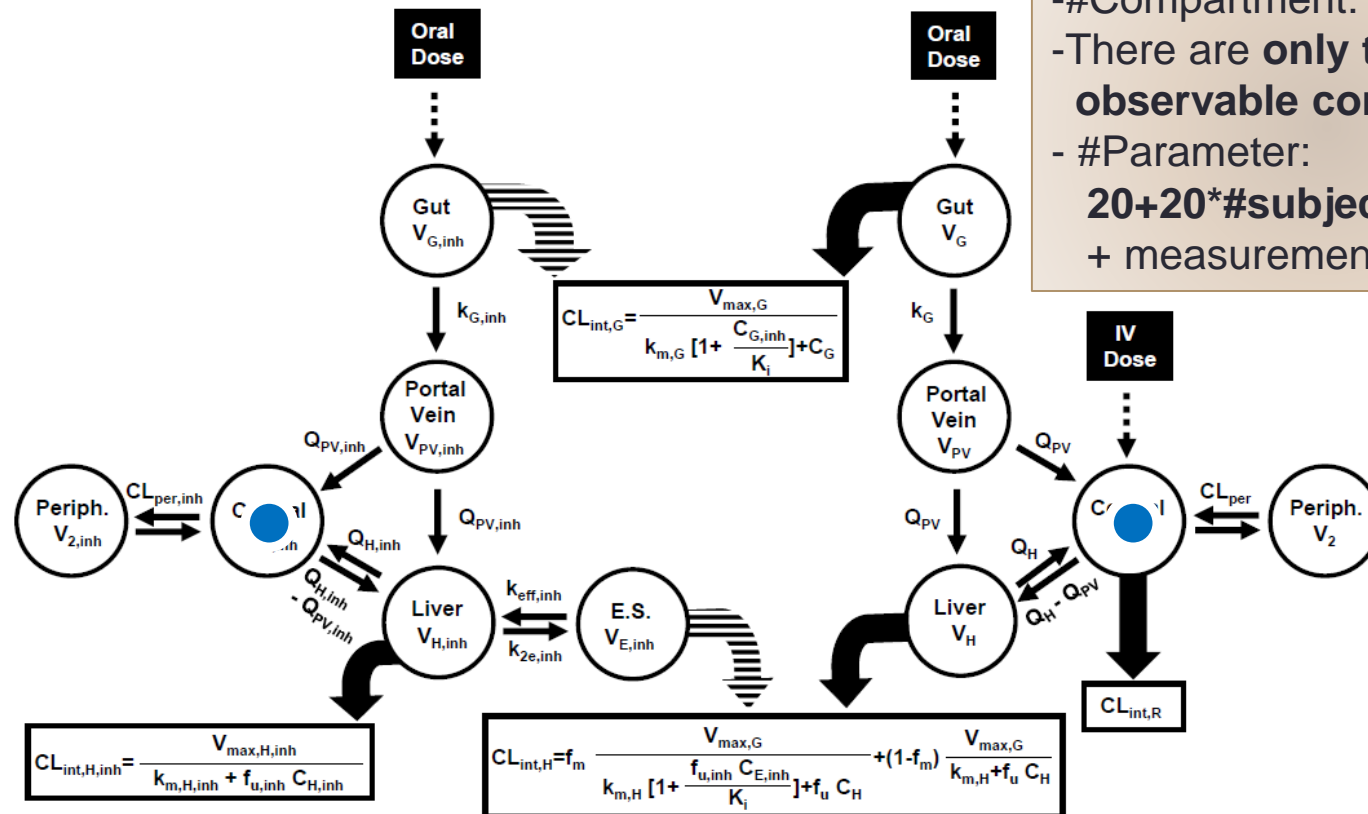
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-#Compartment: 11  
 -There are **only two observable compartments**  
 - #Parameter:  
**20+20\*#subject**  
 + measurement error

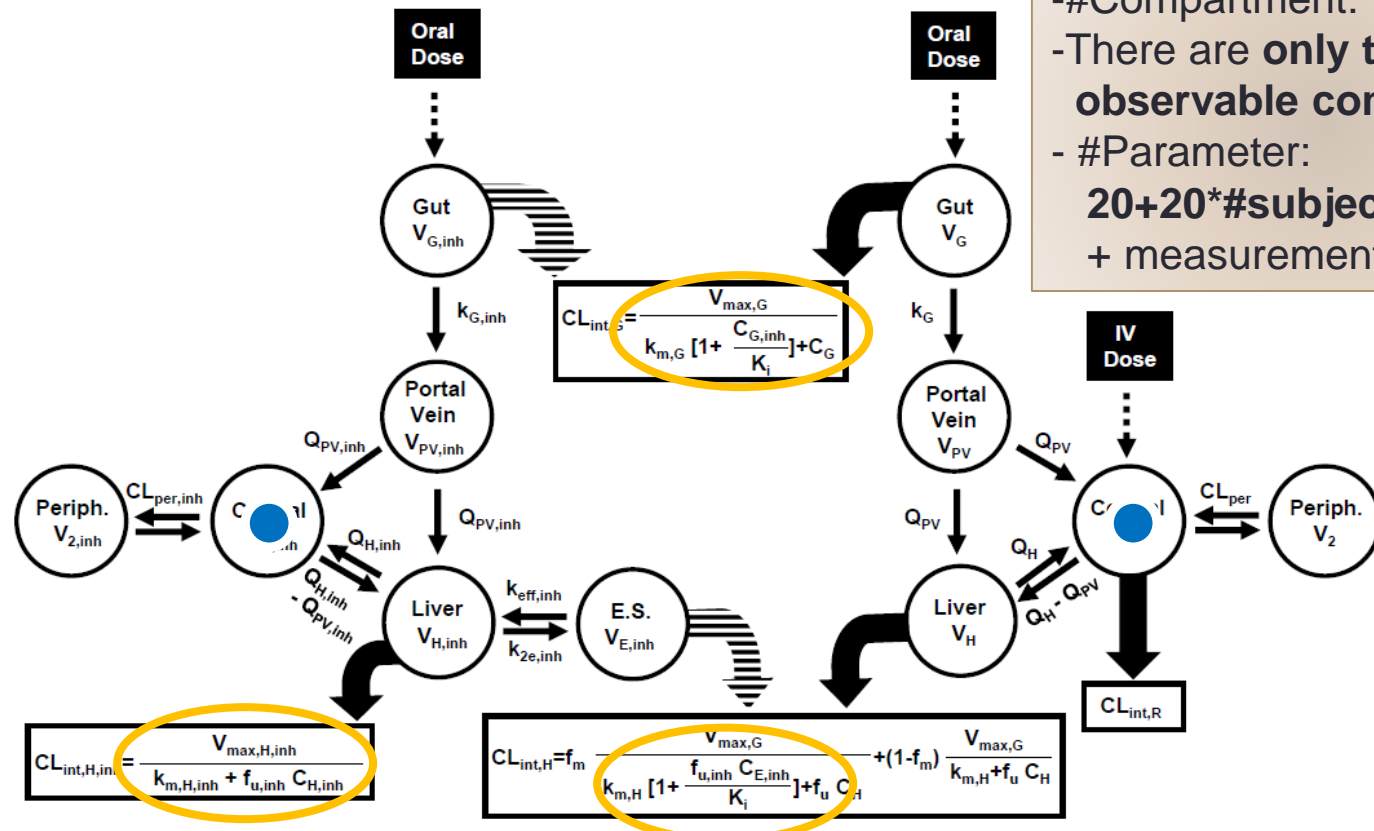
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-Numerous uncertain parameters (multidimensional problem) and Identifiability problem

## Practical Issues for Bayesian MCMC

- Global optima or local optima?
  - High-dimensionality makes it difficult to reach global optima
- The speed of convergence is slow
  - Proposal function (variance-covariance matrix)
  - Starting points (initial values)
- High correlation due to unidentifiable parameters (identifiability)
  - Michaelis-Menten kinetics equation

## Three challenges of PK analysis

- Global Optimization: global maximum of the likelihood
  - What is an efficient approach to finding global optima?
- Convergence Rate: the speed of convergence
  - How to improve the speed of convergence?
- (Statistical) Identifiability of PK models
  - What can we do with the statistically unidentifiable parameters?

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## An Efficient Global Search Algorithm

- NONMEM (Beal and Sheiner, 1980)
  - The most popular approaches to a population pharmacokinetics/pharmacodynamics (PK/PD) analysis for nonlinear mixed-effects models
  - Local optimization using a Broyden-Fletcher-Goldfarb-Shanno (BFGS) quasi-Newton algorithm
- A global search algorithm for nonlinear mixed-effects models to meet the challenges of the local optimization in NONMEM

# Nonlinear mixed-effects models

- First-stage

$$\log y_{ij} = \log f(\phi_i, t_{ij}) + \epsilon_{ij}; i = 1, \dots, N; j = 1, \dots, n_i \quad (1)$$

- $N$ : the number of subjects
- $n_i$ : the number of observations from the  $i$ th subject
- $y_{ij}$ : the drug concentration at time  $t_{ij}$
- $f$ : a nonlinear function of a subject-specific parameter vector  $\phi_i$

- Second-stage

$$\phi_i = A_i \beta + B_i b_i$$

- $A_i$  and  $B_i$ : known design matrices for fixed-effects  $\beta$  and random-effects  $b_i$

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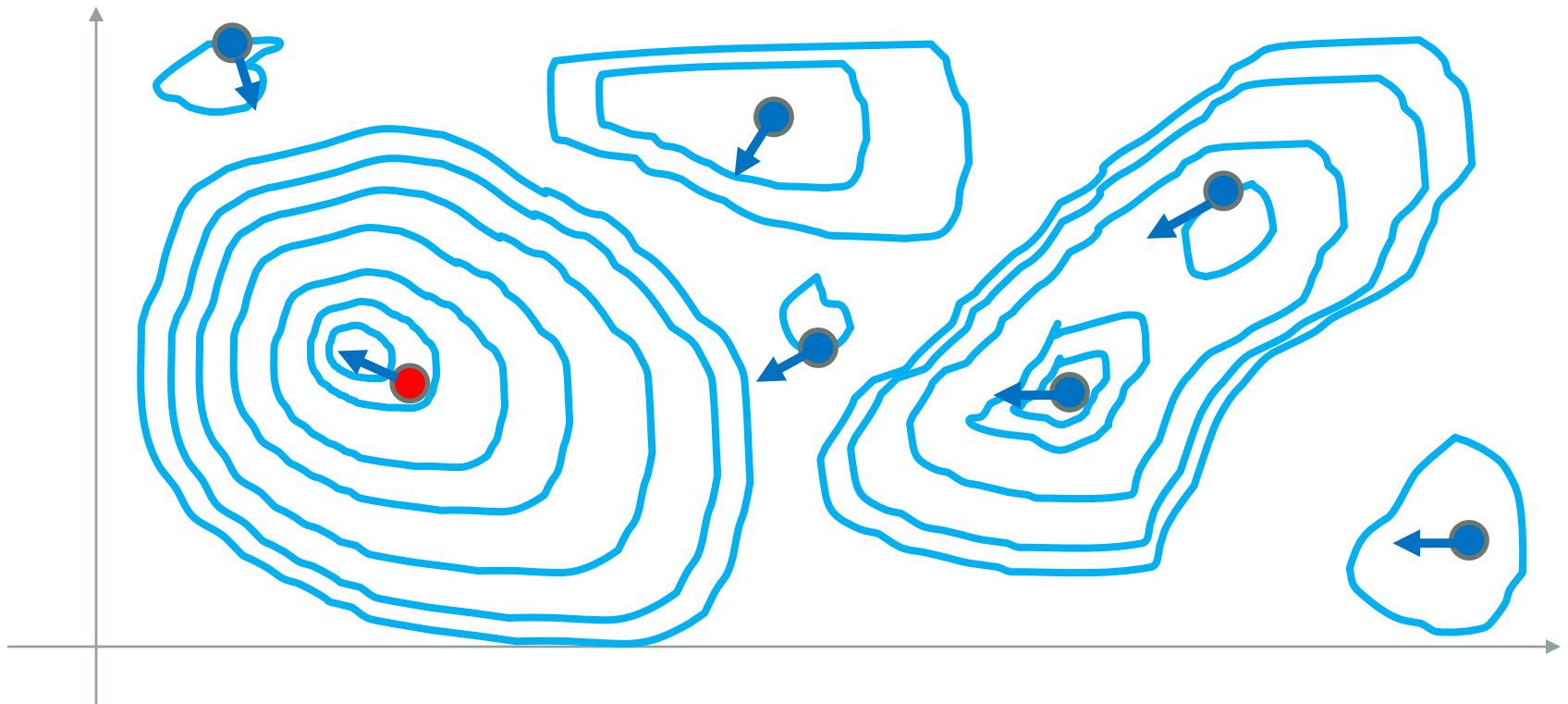
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Laplacian estimation method  
 First-order estimation method  
 First-order conditional estimation methods

# Particle Swarm Optimization (PSO)

$$\hat{\beta} = \mathit{argmax}[l(\beta; Y, X)]$$

- global best
- local best



# Particle Swarm Optimization (PSO)

- $k$ -th iteration

$$v_{k+1}^p = w_k v_k^p + c_1 r_1 (x_{lbest}^p - x_k^p) + c_2 r_2 (x_{gbest} - x_k^p) \quad (4)$$

$$x_{k+1}^p = x_k^p + v_{k+1}^p \quad (5)$$

- $p = 1, \dots, P$ ;  $P$ : the population size
- $x_{lbest}^p$  and  $x_{gbest}$ : local best and global best, respectively
- $v_{k+1}^p$ : the velocity
- $w_k$ : inertia weight

$$w_k = w_{max} - \frac{k}{K} (w_{max} - w_{min})$$

- $c_1, c_2$ : cognitive and social coefficient, respectively
- $r_1, r_2$ : two random sequences in  $[0, 1]$
- $K$ : total number iteration number

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It requires expensive computation time



# PSO-based mixed-effects modeling

- High-dimensional parameter space
  - Parameters to estimate
    - $\beta$ : fixed-effects
    - $\sigma^2$ : measurement error (variance-covariance matrix)
    - $\Psi$ : inter-individual variance-covariance matrix
    - $b_i$ : random-effects
  - E.g.: 5 fixed-effects, 5 random-effects, 10 subjects  $\Rightarrow 5 + 5 \times 10 = 50$  without variance estimation
- Expensive computation
- Slow speed of convergence

# PSO-based mixed-effects modeling

- Hybrid approach
  - NONMEM + PSO
    - NONMEM: exploitation by a local optimization
    - PSO: exploration by a global optimization

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**Reduce the population size**

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- Hybrid approach
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    - NONMEM: exploitation by a local optimization
    - PSO: exploration by a global optimization
  - Sacrifice random-effects
    - Random-effects by NONMEM
    - Fixed-effects and others by NONMEM+PSO

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**Reduce the PSO parameter space**

# PSO-based mixed-effects modeling

- Hybrid approach

- NONMEM + PSO

- NONMEM: exploitation by a local optimization
    - PSO: exploration by a global optimization

**Reduce the population size**

- Sacrifice random-effects

- Random-effects by NONMEM
  - Fixed-effects and others by NONMEM+PSO

**Reduce the PSO parameter space**

- Multivariate population

- Grid population using univariate uniform distribution
  - Random-grid population using multivariate uniform distribution

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**Increase the population diversity**

# Nonlinear mixed-effects models

- First-stage

$$\log y_{ij} = \log f(\phi_i, t_{ij}) + \epsilon_{ij}; i = 1, \dots, N; j = 1, \dots, n_i$$

- $N$ : the number of subjects
- $n_i$ : the number of observations from the  $i$ th subject
- $y_{ij}$ : the drug concentration at time  $t_{ij}$
- $f$ : a nonlinear function of a subject-specific parameter vector  $\phi_i$
- $\epsilon_{ij} \sim N(0, \sigma^2)$

- Second-stage

$$\phi_i = A_i \beta + B_i b_i$$

- $A_i$  and  $B_i$ : known design matrices for fixed-effects  $\beta$  and random-effects  $b_i$
- $b_i \sim N(0, \Psi)$

Global + Local  
Optimization

Local Optimization



# Convergence of PSO+NONMEM

- First-order stability analysis (expected value)
  - Trelea (2003)
  - The expected value of the position of each particle converges to its equilibrium

$$\frac{c_1 x_{lbest} + c_2 x_{gbest}}{c_1 + c_2}$$

*iff*

$$w < 1, c = \frac{c_1 + c_2}{2} > 0, 2w - c + 2 > 0$$

- PSO+NONMEM:  $w \in [0.4, 0.9], c_1 = c_2 = 2 \rightarrow 2 \cdot 0.4 - 2 + 2 > 0$

# Convergence of PSO+NONMEM

- Second-order stability analysis (variance)
  - Jiang et al. (2007); Poli (2009); Poli et al. (2007)
  - The variance of the position of each particle converges to zero

*iff*

$$\frac{c_1 + c_2}{2} < \frac{12(w^2 - 1)}{5w - 7}$$

- PSO+NONMEM:  $w \downarrow 0.4, c_1 = c_2 = 2 \rightarrow 2 < 2.016$

## Subject-specific parameter estimation: local or global?

*Theorem 1. Let us consider a linear mixed-effect model, i.e.*

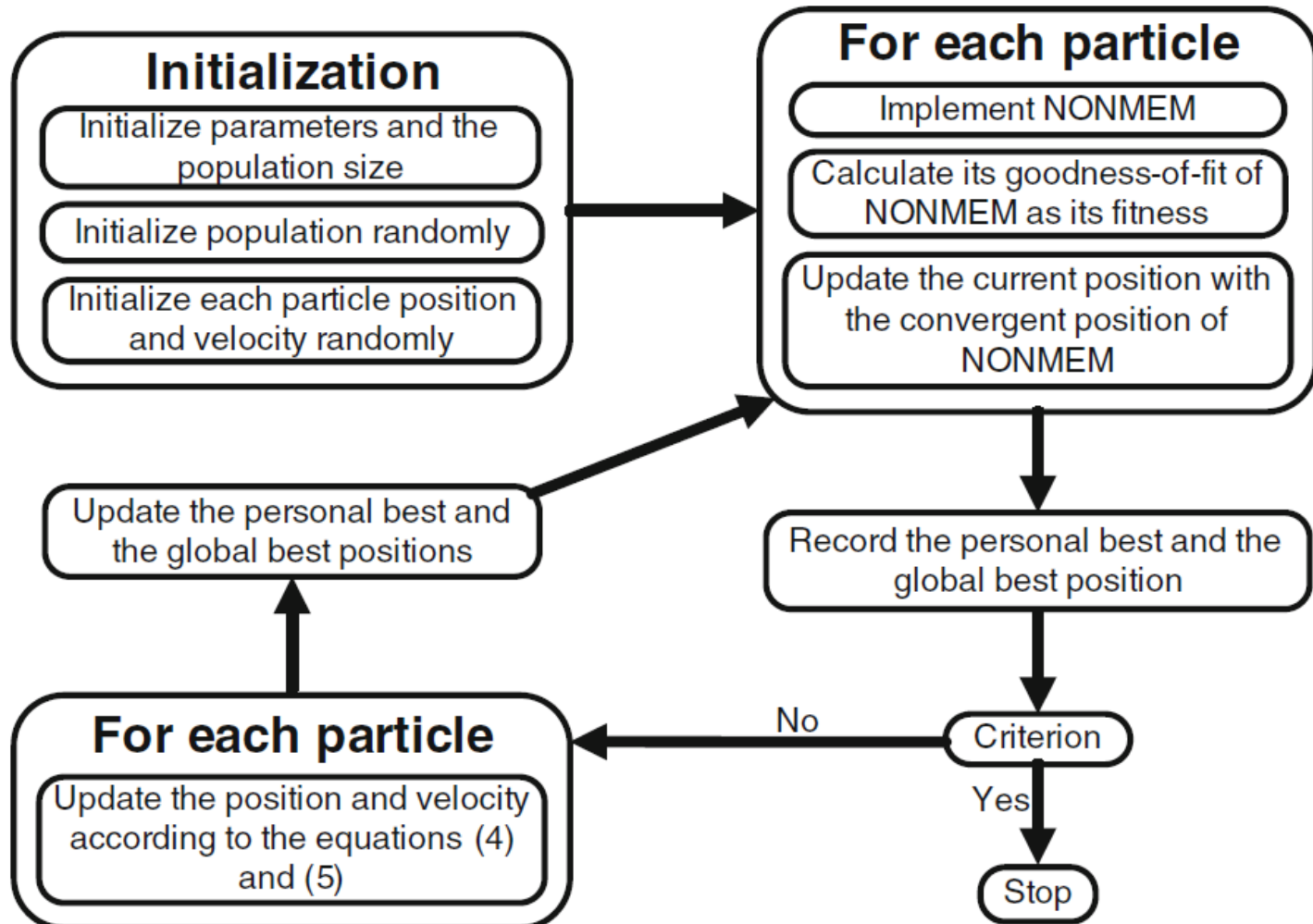
$$f(\phi_i, t_{ij}) = A_i\beta + B_ib_i$$

*in (1). If the parameters  $\beta$ ,  $\sigma^2$ , and  $\Psi$  converge to their global optima,  $\hat{\beta}$ ,  $\hat{\sigma}^2$ , and  $\hat{\Psi}$ , and  $\hat{b}_i$  is a local optimum of the individual random-effect  $b_i$ , then  $\hat{b}_i$  is its global optimum, given the  $i$ th observation  $y_i$ ,  $\hat{\beta}$ ,  $\hat{\sigma}^2$ , and  $\hat{\Psi}$ .*

## Subject-specific parameter estimation: local or global?

*Theorem 2. Let us consider a nonlinear mixed-effect model, i.e.,  $f(\cdot)$  is nonlinear in (1). Suppose the parameters  $\beta$ ,  $\sigma^2$ , and  $\Psi$  converge to their global optima,  $\hat{\beta}$ ,  $\widehat{\sigma^2}$ , and  $\widehat{\Psi}$ , and  $\hat{b}_i$  is a local optimum of the individual random-effect  $b_i$ . If  $f(\cdot)$  is either concave and nonincreasing in  $b_i$  or convex and nondecreasing in  $b_i$ , then  $\hat{b}_i$  is its global optimum, given the  $i$ th observation  $y_i$ ,  $\hat{\beta}$ ,  $\widehat{\sigma^2}$ , and  $\widehat{\Psi}$ .*

# The flowchart of the proposed P-NONMEM



## Simulation studies

### PK example

$$\begin{cases} \frac{dA1(t)}{dt} = -\frac{Qh \cdot fu \cdot \frac{Vmax}{Km + \frac{A1(t)}{V1}}}{Qh + fu \cdot \frac{Vmax}{Km + \frac{A1(t)}{V1}}} \cdot \frac{A1(t)}{V1} + CL12 \cdot \left( -\frac{A1(t)}{V1} + \frac{A2(t)}{V2} \right) \\ \frac{dA2(t)}{dt} = CL12 \cdot \left( -\frac{A1(t)}{V1} + \frac{A2(t)}{V2} \right) \end{cases}$$

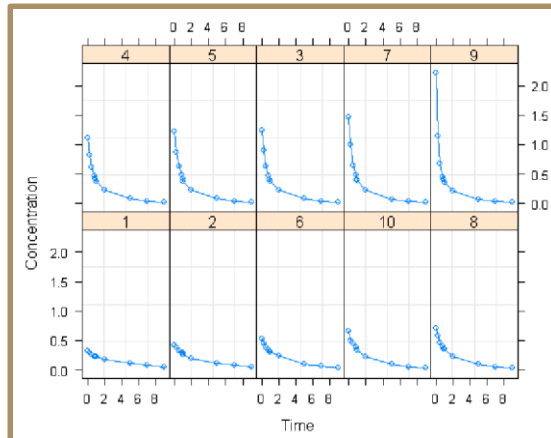
$$f(\Phi_i, t_{ij}) = \frac{A1(t)}{V1}$$

$$\Phi_i = A_i \beta + B_i b_i = A_i \beta + b_i$$

$$\beta = (\log V1, \log V2, \log Vmax, \log Km)'$$

$$b_i = (V1_i)$$

$$A_i = \begin{bmatrix} 1 & 0 & 0 & 0 \\ 0 & 1 & 0 & 0 \\ 0 & 0 & 1 & 0 \\ 0 & 0 & 0 & 1 \end{bmatrix}$$



### PD example

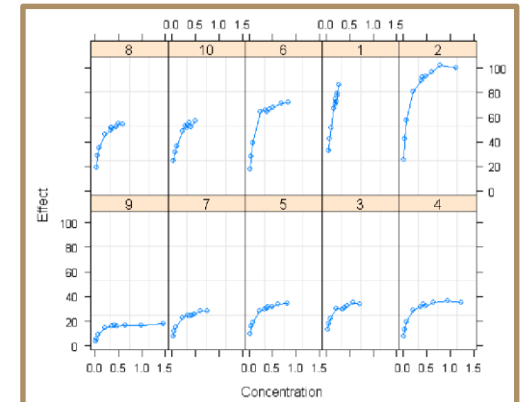
$$f(\Phi_i, x_{ij}) = \frac{Emax \cdot x_{ij}}{C50 + x_{ij}}$$

$$\Phi_i = A_i \beta + B_i b_i = A_i \beta + b_i$$

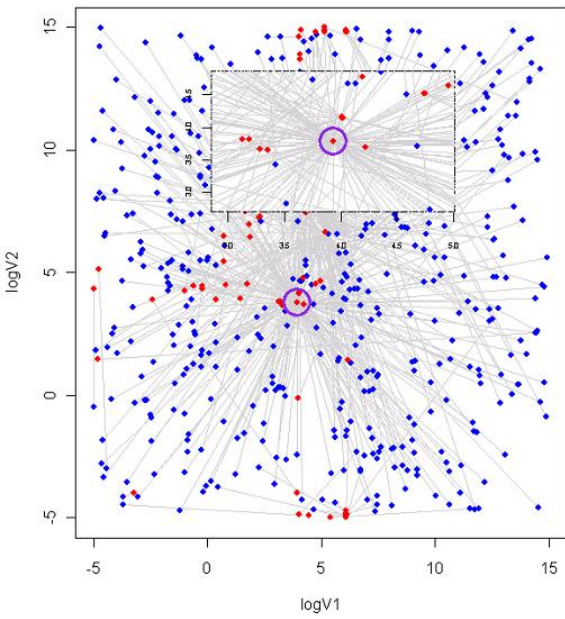
$$\beta = (\log Emax, \log C50)'$$

$$b_i = (Emax_i, C50_i)$$

$$A_i = \begin{bmatrix} 1 & 0 \\ 0 & 1 \end{bmatrix}$$

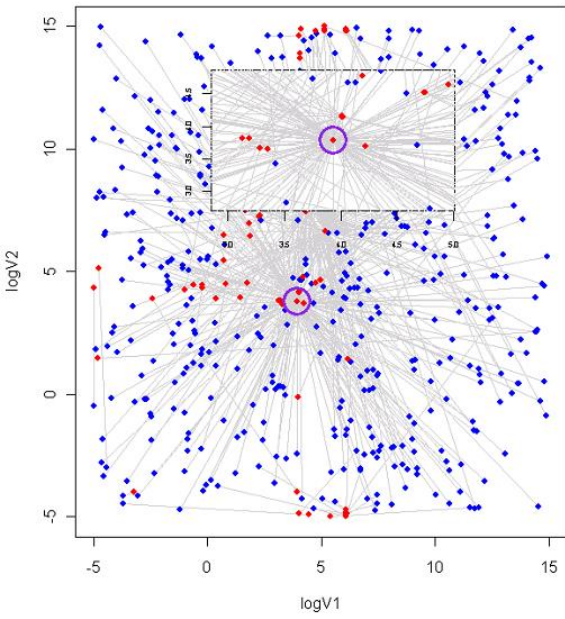


After 1-th iteration

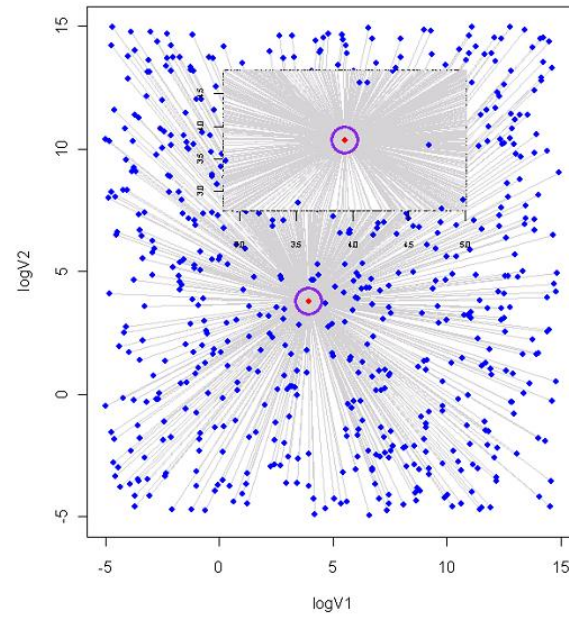


PK example  
 $P=729 (=3^6)$

After 1-th iteration



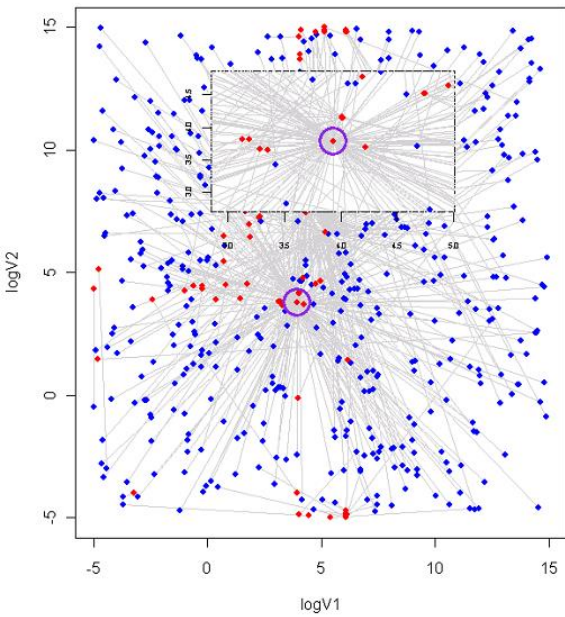
After 50-th iteration



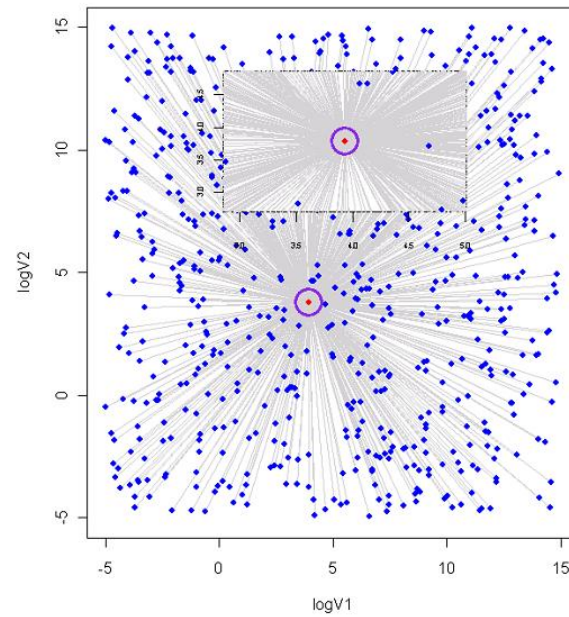
PK example  
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After 1-th iteration



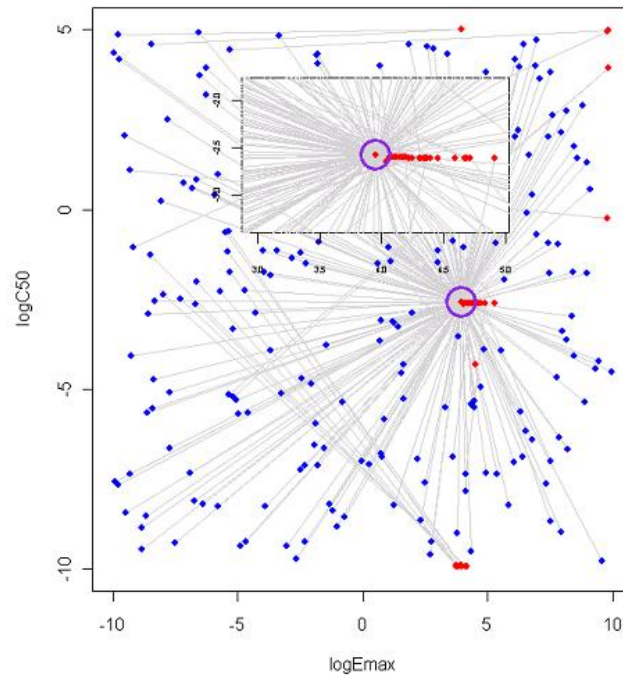
After 50-th iteration



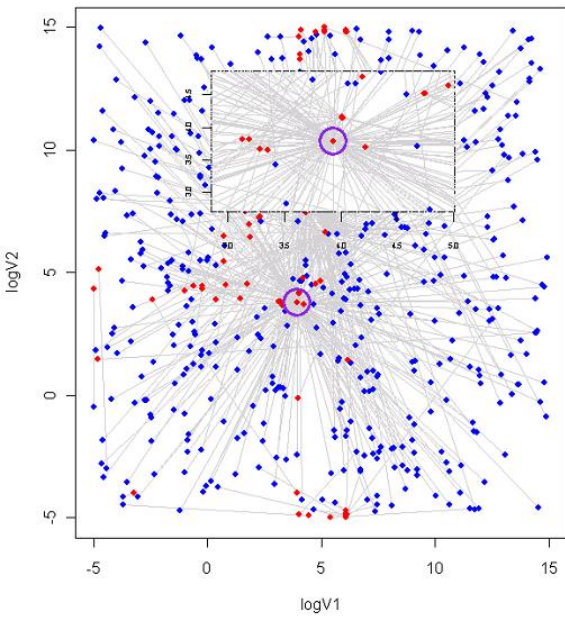
PK example  
 $P=729 (=3^6)$

PD example  
 $P=243 (=3^5)$

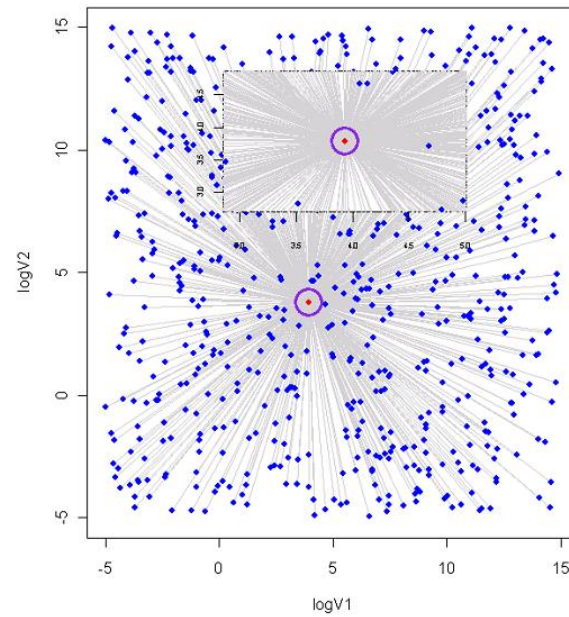
After 1-th iteration



After 1-th iteration



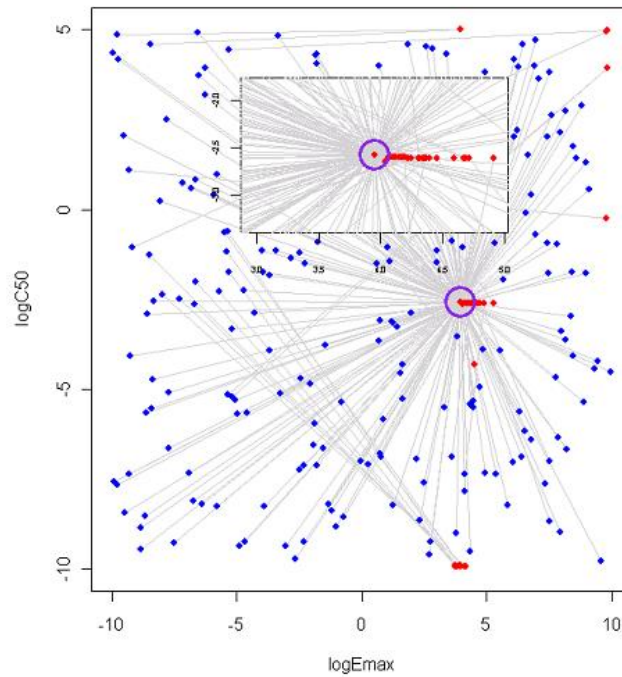
After 50-th iteration



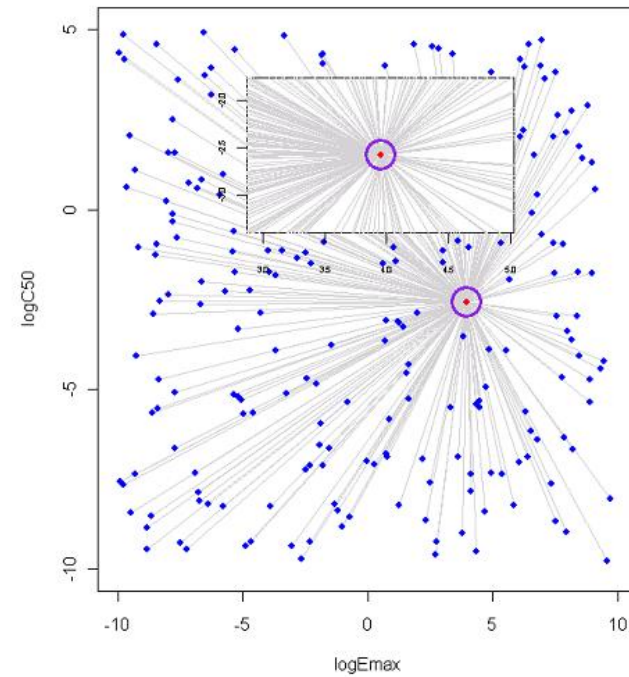
PK example  
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After 1-th iteration

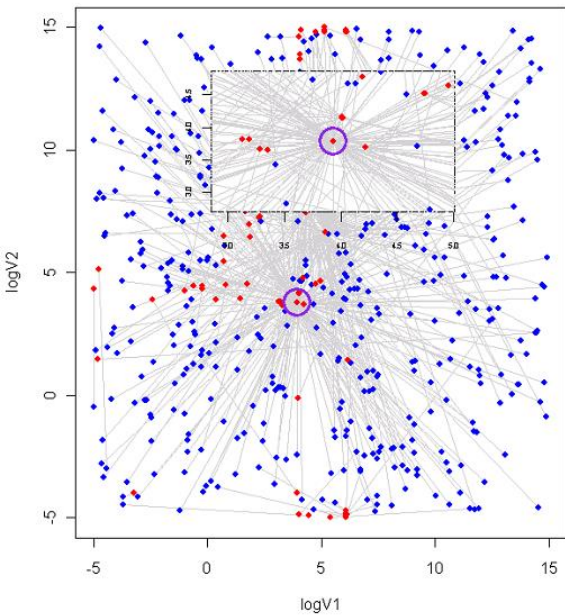


After 20-th iteration

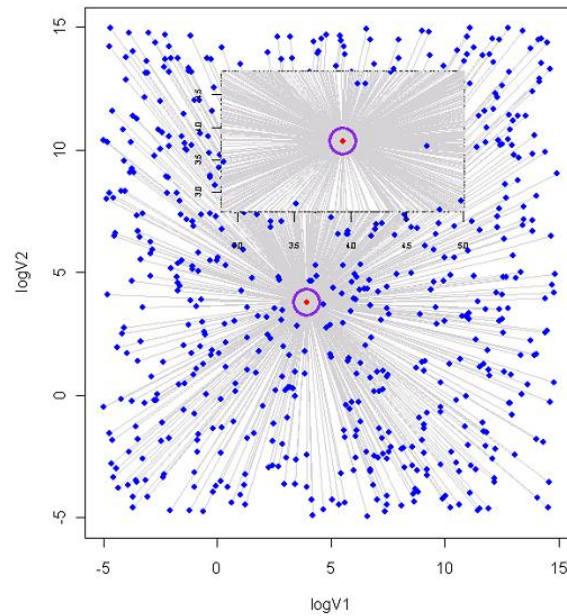




After 1-th iteration



After 50-th iteration



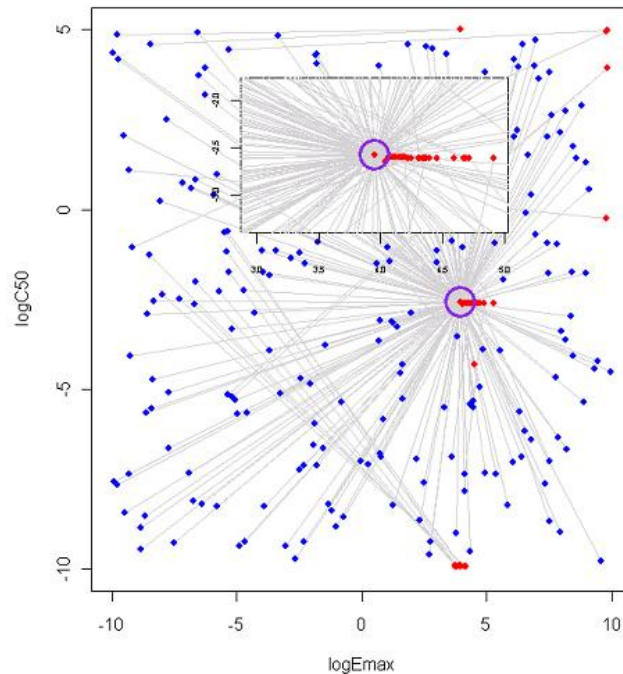
PK example  
 $P=729 (=3^6)$

$$10^6 \gg 3^6$$

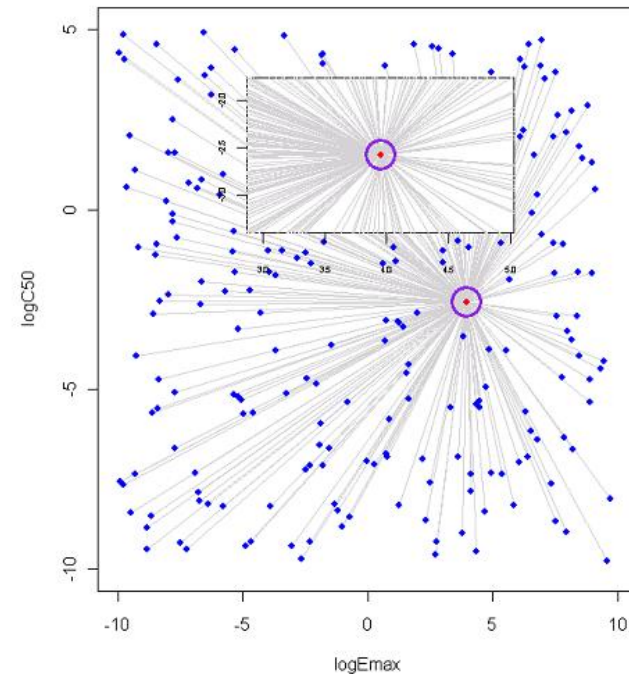
$$10^5 \gg 3^5$$

PD example  
 $P=243 (=3^5)$

After 1-th iteration

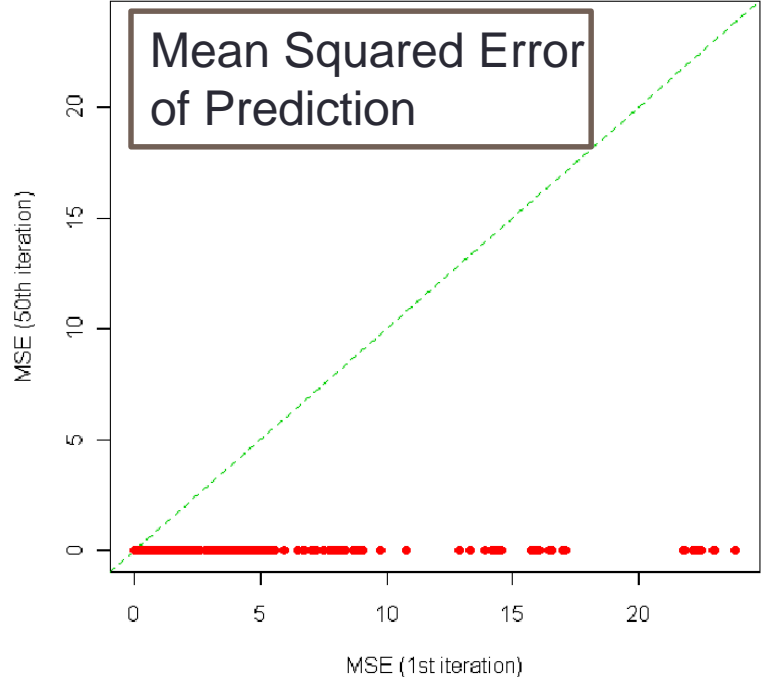


After 20-th iteration

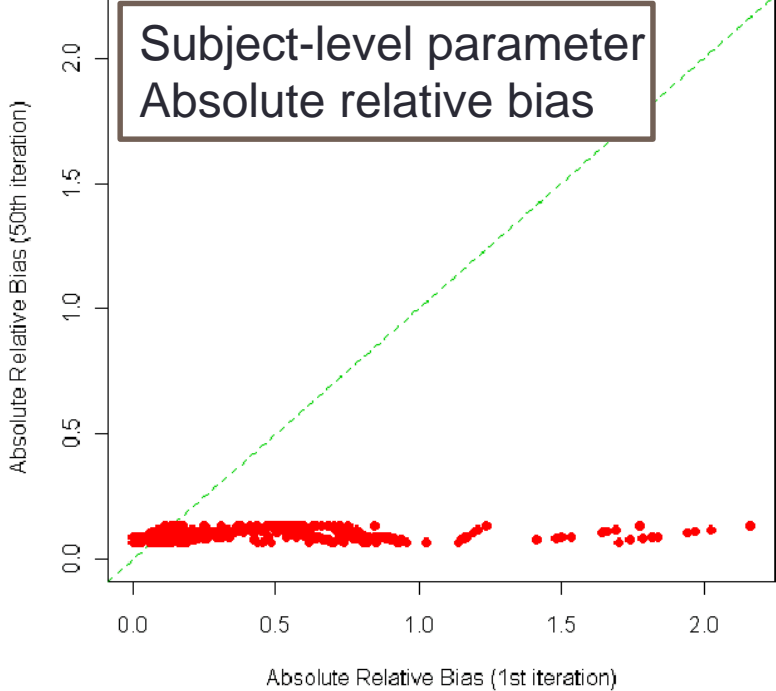


**PK example**  
 **$P=729 (=3^6)$**

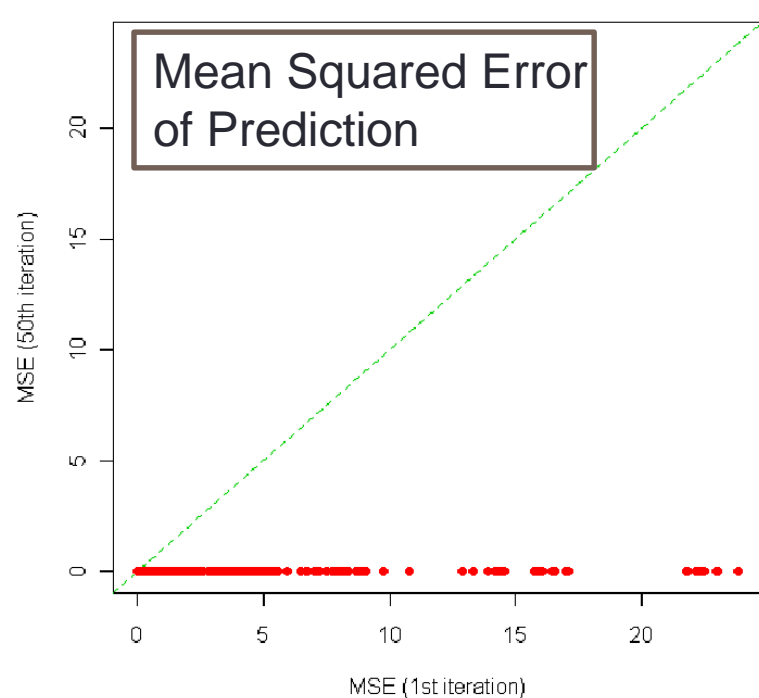
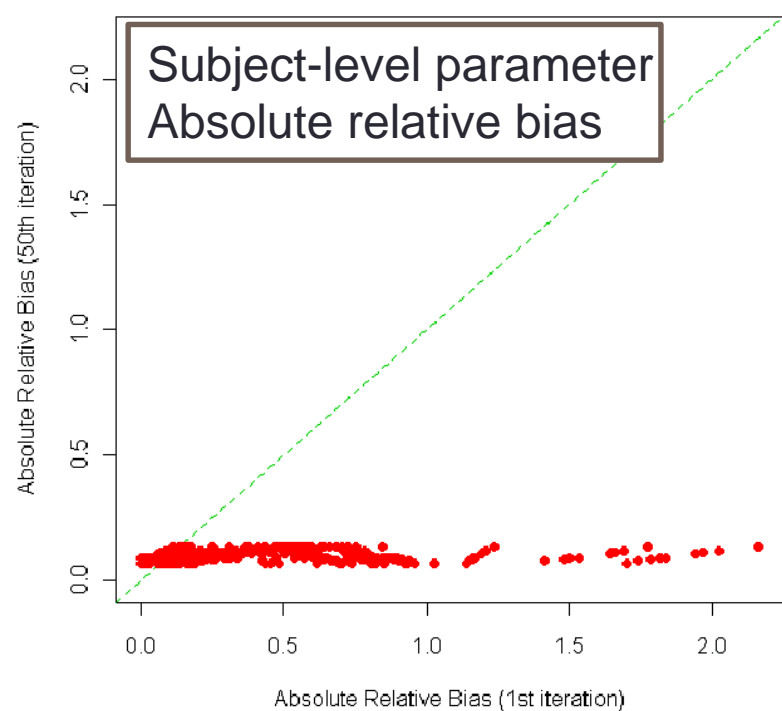
Mean Squared Error of Prediction



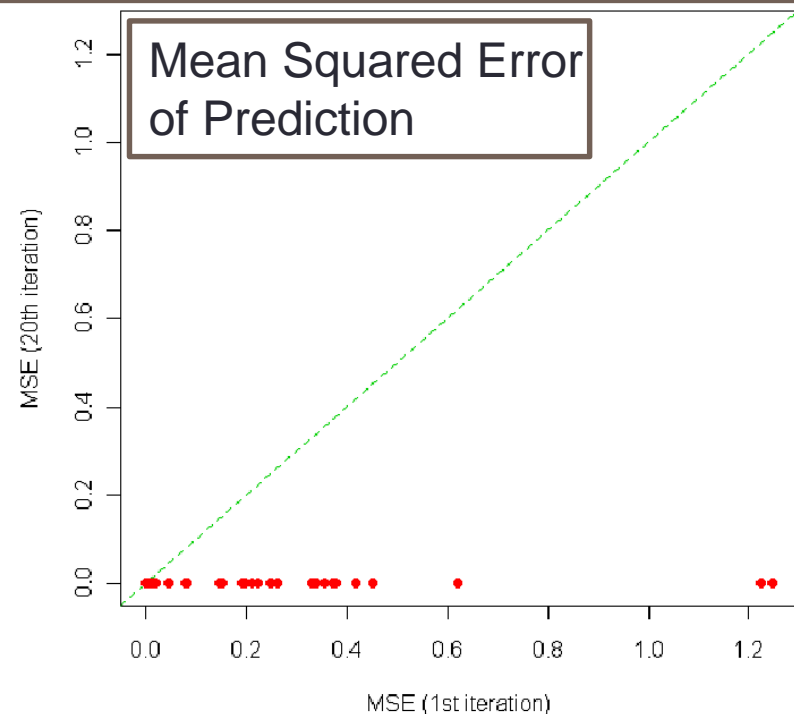
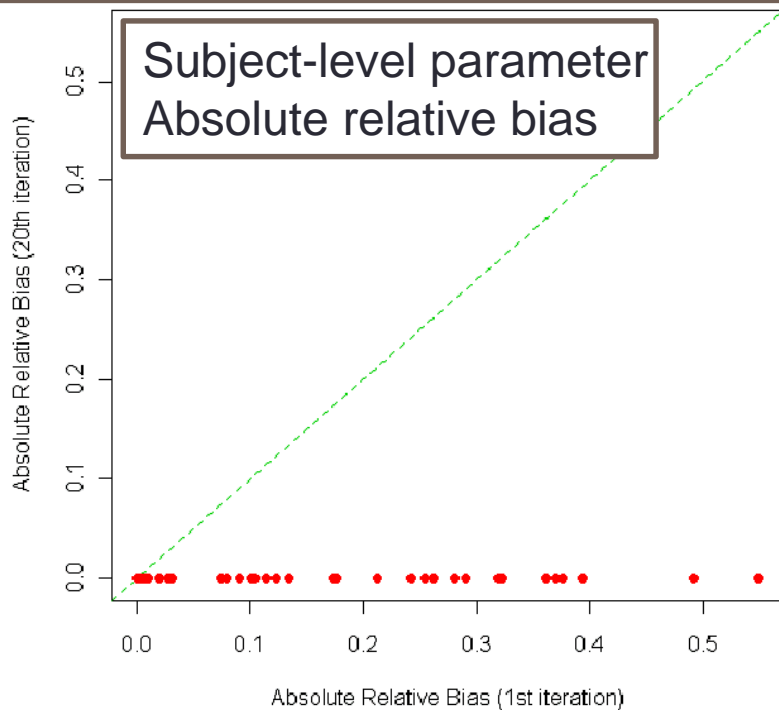
Subject-level parameter Absolute relative bias



**PK example**  
 **$P=729 (=3^6)$**



**PD example**  
 **$P=243 (=3^5)$**



## Summary

- The proposed P-NONMEM is not sensitive to initial value selection.
- Even when the initial values are far away from their global optimal, P-NONMEM almost guarantees the global optimization.
- P-NONMEM guarantees the global optimization for fixed effect and variance parameters.
- Under certain regularity conditions, it also leads to global optimization for random effects

# Outline

- Pharmacokinetics (PK) analysis
  - Global optimization
  - Identifiability
- Two-stage single-arm phase 2 clinical trial designs
  - Simon's two-stage and Lin and Shih's adaptive designs
  - Adaptive designs with three target response rates

## Mathematical Identifiability

- For PK models the corresponding equations are

$$(1) \quad \left\{ \begin{array}{l} \dot{\mathbf{x}}(t) = \mathbf{f}(\mathbf{x}(t), \mathbf{B}(\theta)\mathbf{u}(t), \theta, t), \quad \mathbf{x}(0) = \mathbf{x}_0 \\ \mathbf{y}(t) = \mathbf{G}(\mathbf{x}(t), \mathbf{B}(\theta)\mathbf{u}(t), \theta, t) \end{array} \right.$$

$\mathbf{x}(t)$ : the state variables  
 $\mathbf{x}(0)$ : the initial conditions  
 $\mathbf{u}(t)$ : the input to the system  
 $\mathbf{B}(\theta)$ : the matrices depending on  $\theta$   
 $\mathbf{y}(t)$ : observations

- A single parameter  $\theta$  of Equation (1) is **globally identifiable** if there exists a unique solution for  $\theta$
- A parameter with countable or uncountable number of solutions is **locally identifiable or unidentifiable**



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- A single parameter  $\theta$  of Equation (1) is **globally identifiable** if there exists a unique solution for  $\theta$ .

Given a model formation and **noise-free (perfect)** data  
 Which parameters of the model are identifiable?

- A parameter  $\theta$  is **locally identifiable or unidentifiable** if there are multiple solutions for  $\theta$  of

# Statistical Identifiability

$$\dot{\mathbf{x}}(t) = \mathbf{f}(\mathbf{x}(t), \mathbf{B}(\theta)\mathbf{u}(t), \theta, t), \quad \mathbf{x}(0) = \mathbf{x}_0$$

$$\mathbf{y}(t) = \mathbf{G}(\mathbf{x}(t), \mathbf{B}(\theta)\mathbf{u}(t), \theta, t) + \boldsymbol{\varepsilon}(t)$$

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Given (a perfect model structure and) experimental (noise) data  
Is it possible to uniquely and accurately estimate the parameters?

# Statistical Identifiability

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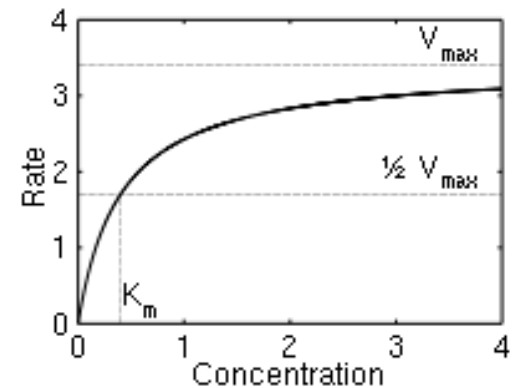
$\mathbf{y}(t)$ : observations

Given (a perfect model structure and) experimental (noise) data  
Is it possible to uniquely and accurately estimate the parameters?

- Estimates of the statistical identifiability are highly depending on the quality of the data

## Michaelis-Menten (MM) Kinetics

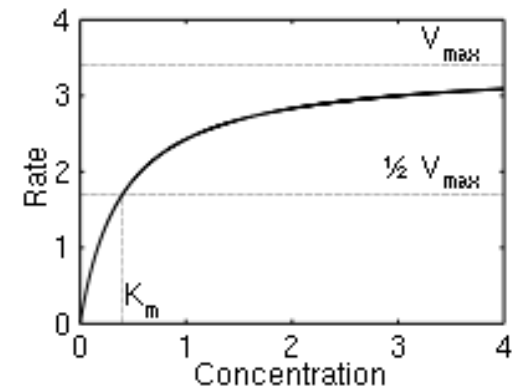
- MM Kinetics Equation: 
$$V(t) = \frac{dC(t)}{dt} = \frac{V_{max} \cdot C(t)}{K_m + C(t)}$$
- **$V(t)$** : the overall velocity of the reaction
- **$V_{max}$** : the maximum velocity
- **$K_m$** : MM constant
- **$C(t)$** : the concentration



from wikipedia

## Michaelis-Menten (MM) Kinetics

- MM Kinetics Equation:  $V(t) = \frac{dC(t)}{dt} = \frac{V_{max} \cdot C(t)}{K_m + C(t)}$
- **$V(t)$** : the overall velocity of the reaction
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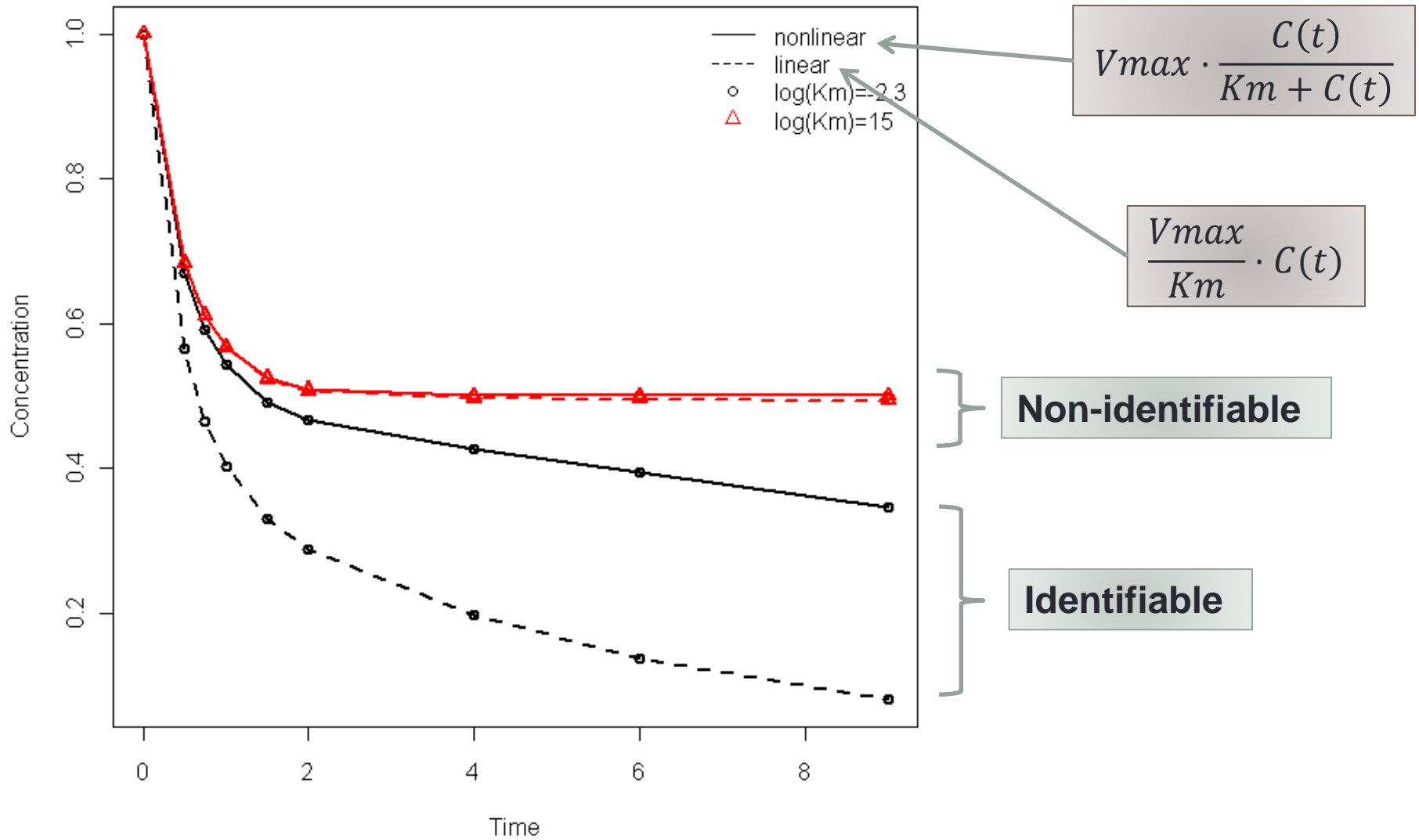


$$V(t) = \frac{V_{max} \cdot C(t)}{K_m + C(t)} \approx \frac{V_{max} \cdot C(t)}{K_m} \text{ if } C(t) \ll K_m.$$

from wikipedia

$$V(t) = \frac{V_{max} \cdot C(t)}{K_m + C(t)} \approx V_{max} \text{ if } C(t) \gg K_m.$$

# Pharmacokinetics (PK) analysis



# What's the matter?

- Derivative-based optimization
  - Singularity
  - NONMEM uses derivative-based optimizations
- Bayesian approach
  - No theoretical concern for both mathematical and statistical identifiability
    - No singularity issue due to priors (Lindley, 1971)
  - Poor convergence of MCMC (Poirier, 1998; Gelfand and Sahu, 1999; Eberly and Carlin, 2000)



# What's new?

- NONMEM is replaced with a derivative-free local optimization
- Convergence criteria
  - The local best-quartile method
  - The global best-variance method
  - The local best-quartile-variance method

# The local best-quartile method

- Suppose  $\theta^k$  is the  $S \times p$  matrix of the population (local best) of size  $S$  and the  $p$  parameters at  $k$ th iteration, i.e.,

$$\theta^k = \begin{bmatrix} \theta_{11}^k & \cdots & \theta_{1p}^k \\ \vdots & \ddots & \vdots \\ \theta_{S1}^k & \cdots & \theta_{Sp}^k \end{bmatrix},$$

where  $\theta_{ij}^k$  is the local best of  $i$ th particle of  $j$ th parameter at  $k$ th iteration,  $1 \leq i \leq S$ ,  $1 \leq j \leq p$ .

- The difference between the first and third quartiles for each parameter is calculated based on  $\hat{\theta}^k$ , i.e.,

$$d_j^k = |Q_1^{kj} - Q_3^{kj}|, \text{ where } j = 1, \dots, p,$$

obtaining the maximum difference of all the parameters as the following

$$d^k = \max_{j=1,2,\dots,p} d_j^k.$$

- The  $p \times p$  correlation matrix of  $\theta^k$ , i.e.,

$$\Omega^k = \begin{bmatrix} 1 & \cdots & \omega_{1p} \\ \vdots & \ddots & \vdots \\ \omega_{p1} & \cdots & 1 \end{bmatrix}$$

- Its maximum and minimum eigenvalues,  $\lambda_{max}^k$  and  $\lambda_{min}^k$ , are estimated to calculate the ratio of two eigenvalues,  $\rho^k = \left| \frac{\lambda_{min}^k}{\lambda_{max}^k} \right|$ .
- If at least one parameter has  $d_j^k = 0$ , then the eigenvalues cannot be obtained, so we will assign zero to  $\rho^k$  in this case.

# The global best-variance method

- Suppose  $\psi^k$  is the  $k \times p$  matrix consisting of the global best for each parameter up to  $k$ th iteration,

$$\psi^k = \begin{bmatrix} \psi_1^1 & \cdots & \psi_p^1 \\ \vdots & \ddots & \vdots \\ \psi_1^k & \cdots & \psi_p^k \end{bmatrix},$$

where  $\psi_j^i$  is the global best of  $j$ th parameter at  $i$ th iteration and  $l^k$  is the vector of the loglikelihood of each global best of size  $k$  such as  $l^k = (l^1, l^2, \dots, l^k)$ . Then the reduced matrix is obtained based on the user-defined window size,  $w$ .

$$\psi_w^k = \begin{bmatrix} \psi_1^{k-w+1} & \cdots & \psi_p^{k-w+1} \\ \vdots & \ddots & \vdots \\ \psi_1^k & \cdots & \psi_p^k \end{bmatrix},$$

where  $k \geq w > 0$ , and the reduced loglikelihood vector is  $l_w^k = (l^{k-w+1}, l^{k-w+2}, \dots, l^k)$ .

- $SD(\psi_w^k) = \max_{j=1, \dots, p} SD_w(\psi_j^k);$
- $SD(l_w^k) = \sqrt{Var(l^{k-w+1}, l^{k-w+2}, \dots, l^k)},$

$$\text{where } SD_w(\psi_j^k) = \sqrt{Var(\psi_j^{k-w+1}, \psi_j^{k-w+2}, \dots, \psi_j^k)}.$$

# The local-quartile-variance method

- $SD(d_w^k) = \sqrt{\text{Var}(d^{k-w+1}, d^{k-w+2}, \dots, d^k)}$ ;
- $SD(\rho_w^k) = \sqrt{\text{Var}(\rho^{k-w+1}, \rho^{k-w+2}, \dots, \rho^k)}$ .

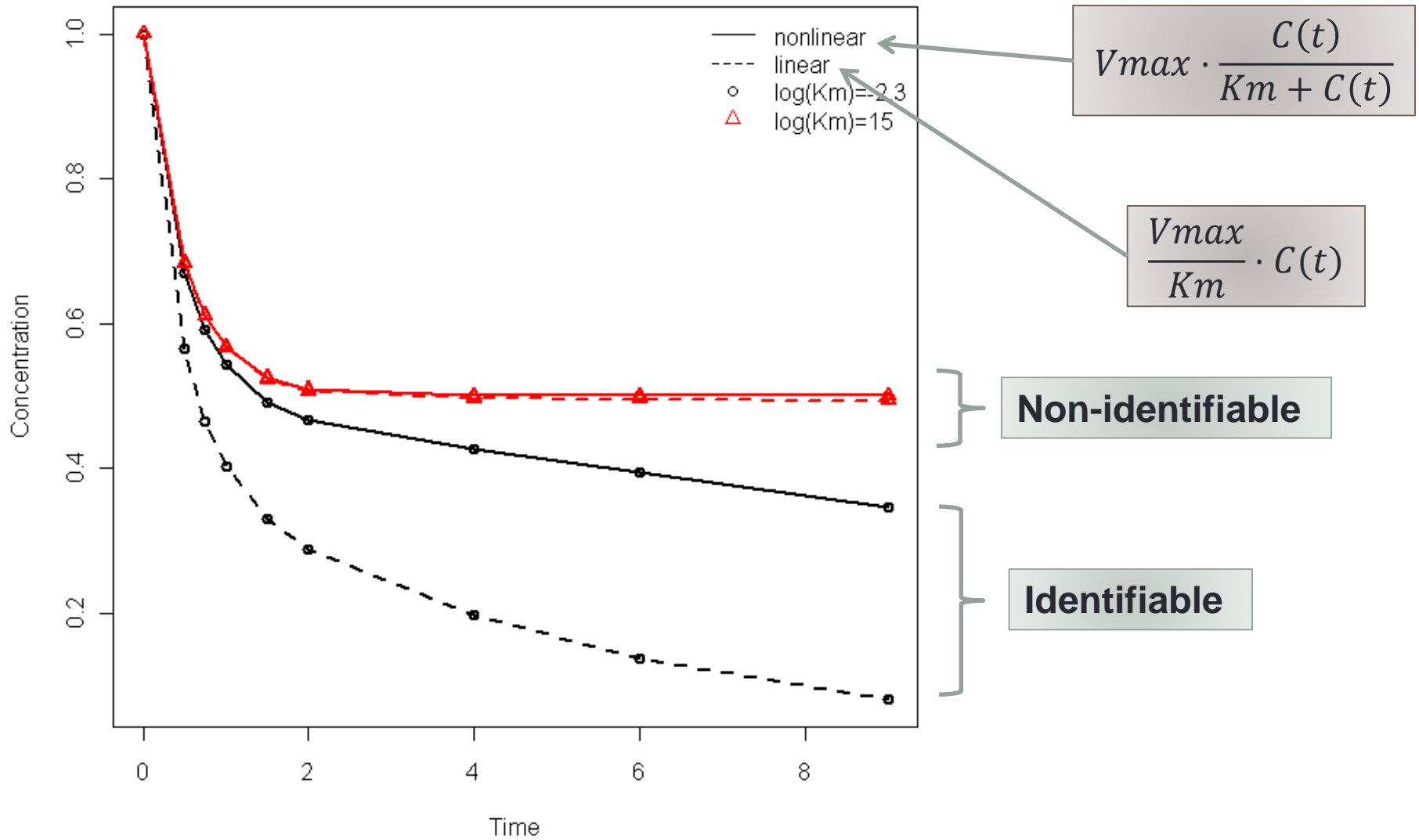
# Convergence diagnostics

*If  $SD(\rho_w^k)$  is less than equal to the user-defined cutoff value ( $\alpha$ ) with the window size of  $w$ , LPSO will be considered as converged to a global optimum. Furthermore, if  $d^k$  is greater than the user-defined cutoff value ( $\beta$ ), the model is considered as non-identifiable, where  $k$  is the number of iterations to converge which is identified by  $SD(\rho_w^k)$ . The general guideline for  $\alpha$  and  $\beta$  is 0.001 and one, respectively.*

# Simulation

- The constants of PSO
  - $(c_1, c_2, w_{max}, w_{min}, K) = (2, 2, 0.9, 0.3, 5000)$
  - #particles of each parameter: 10 for PSO and 5 for LPSO.
  - The parameter boundaries =  $(-20, 20)$ .
  - The true values are  $\theta^{true} = (0, -2.3)$  for the identifiable case and  $(0, 15)$  for non-identifiable case.
- For both PSO and LPSO, the same seed number was used to generate the initial population.

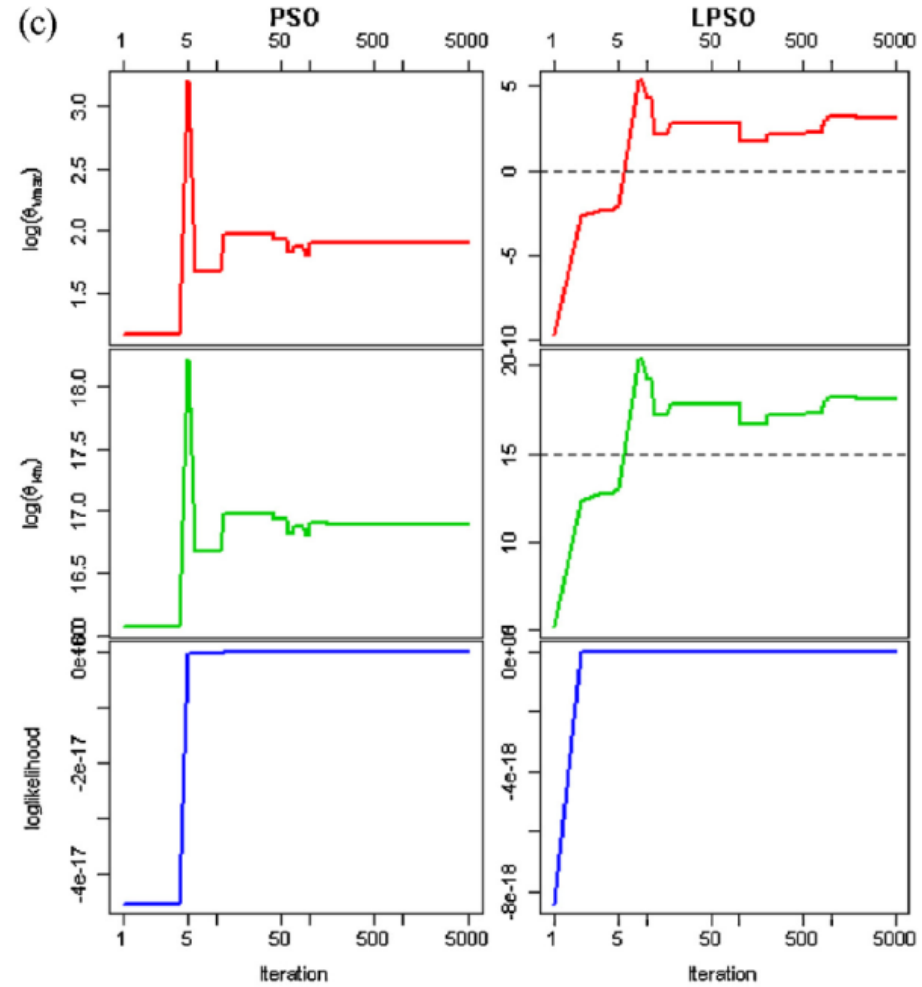
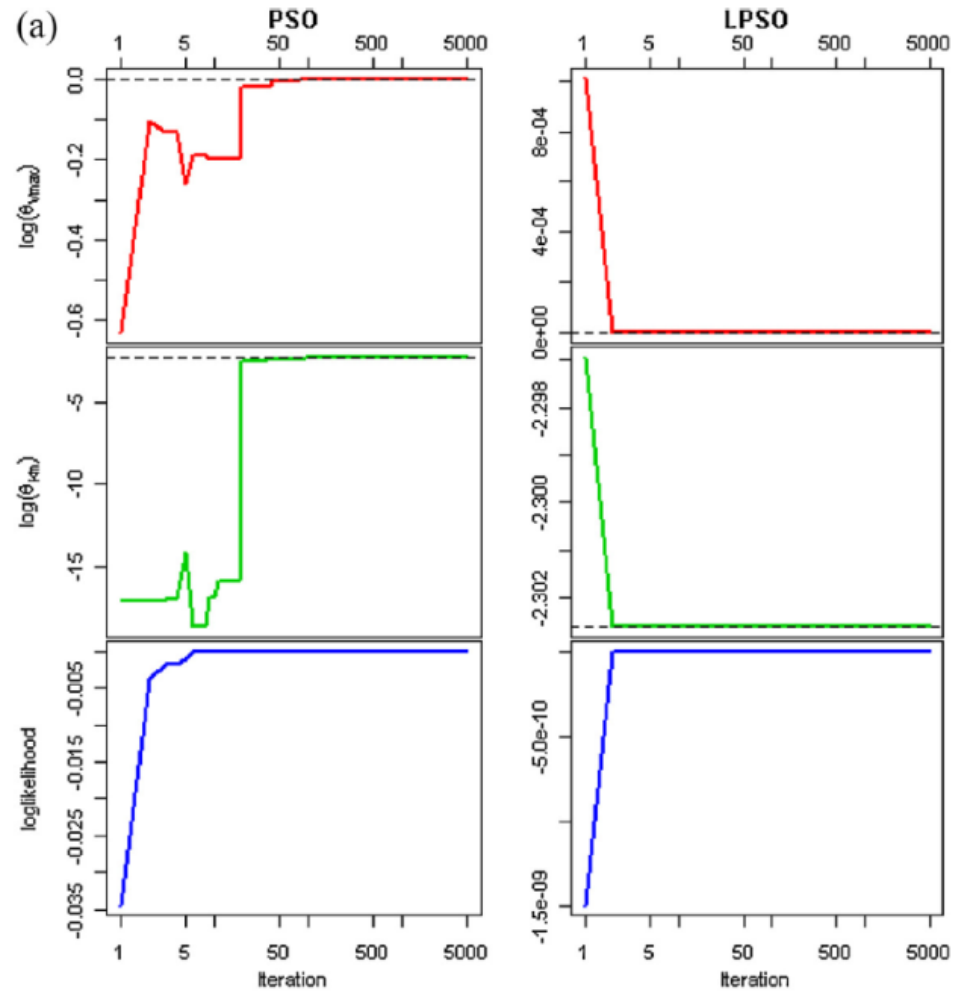
# Pharmacokinetics (PK) analysis



# Pharmacokinetics (PK) analysis

Identifiable

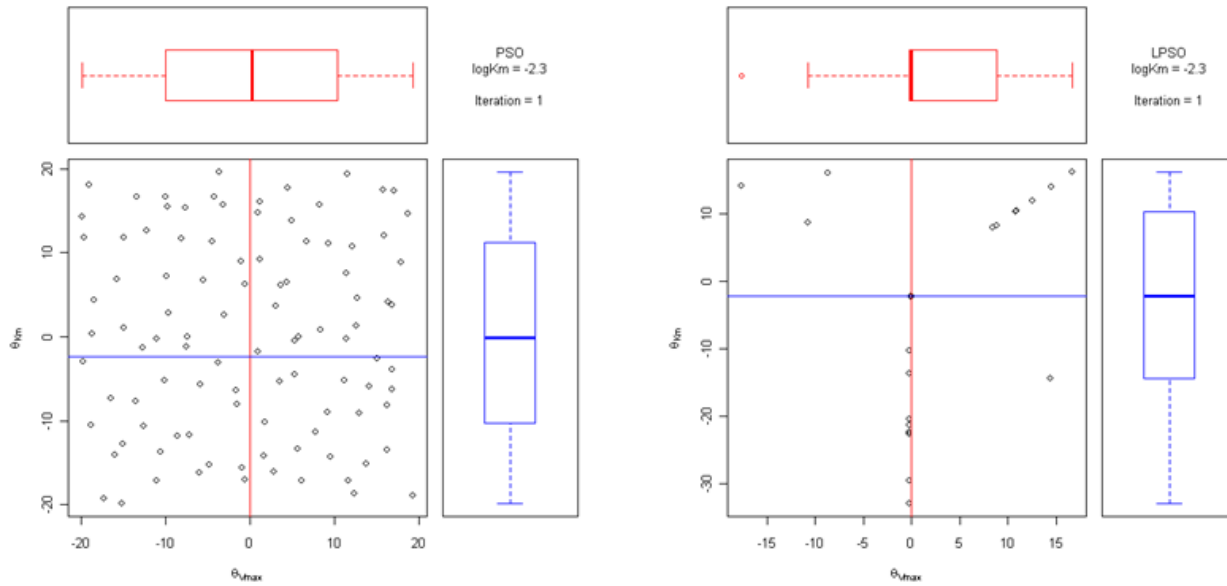
Non-identifiable





(a) After 1<sup>st</sup> iteration

Identifiable



Non-identifiable

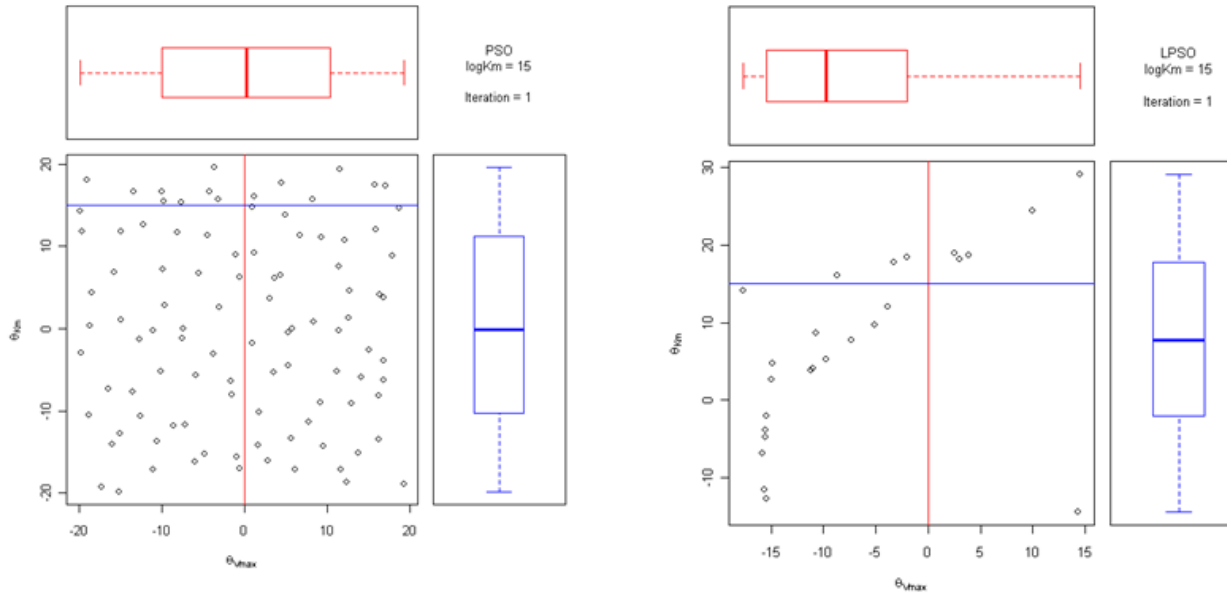
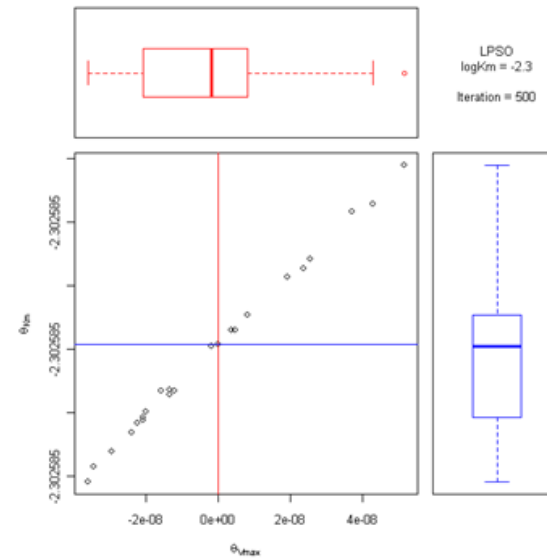
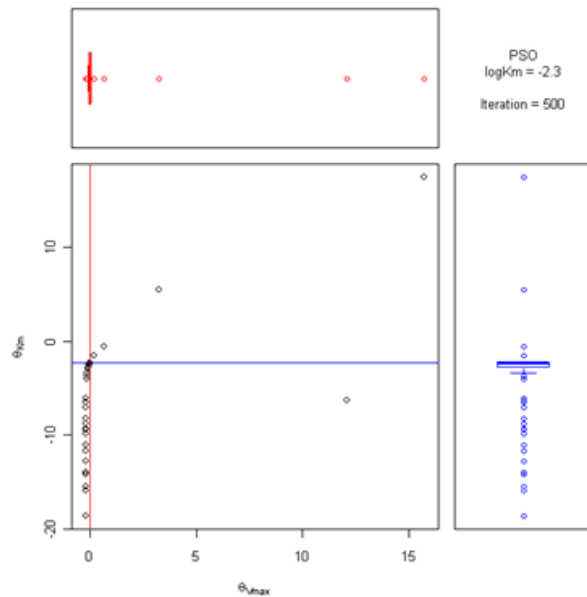


Fig. 4 – The scatter-box plots between  $\log V_{\max}$  and  $\log K_m$  for PSO and LPSO. The plots in the left and right columns are for PSO and LPSO, respectively, and the first and second rows are for identifiable and non-identifiable cases. The solid lines in the plot indicate the true values for each parameter.

(b) After 500<sup>th</sup> iteration

Identifiable



Non-identifiable

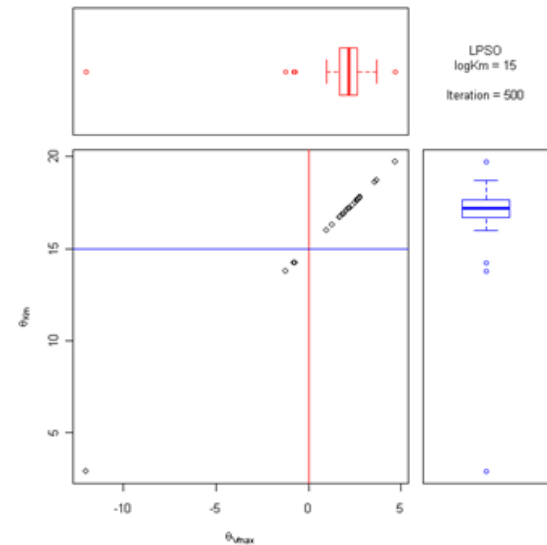
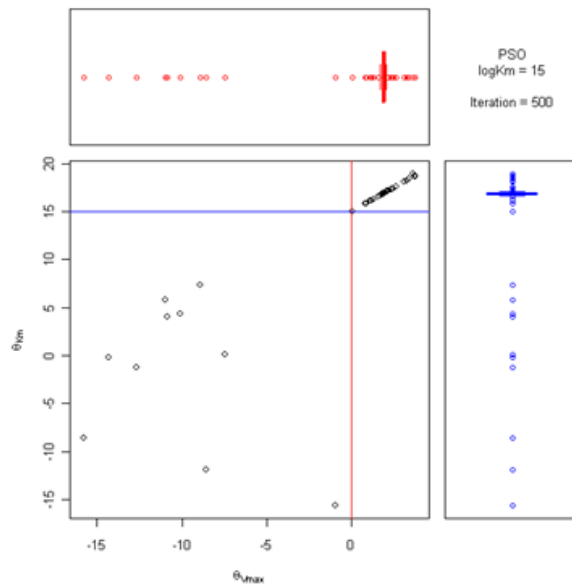
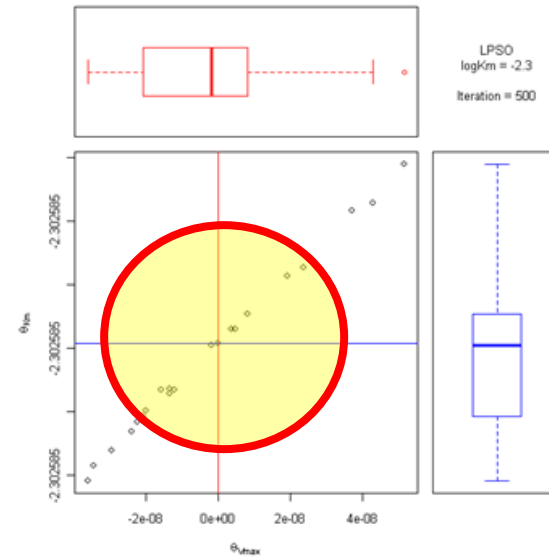
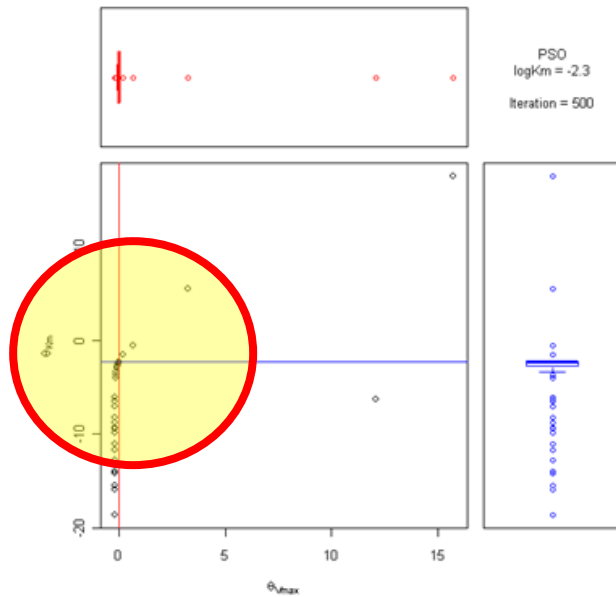


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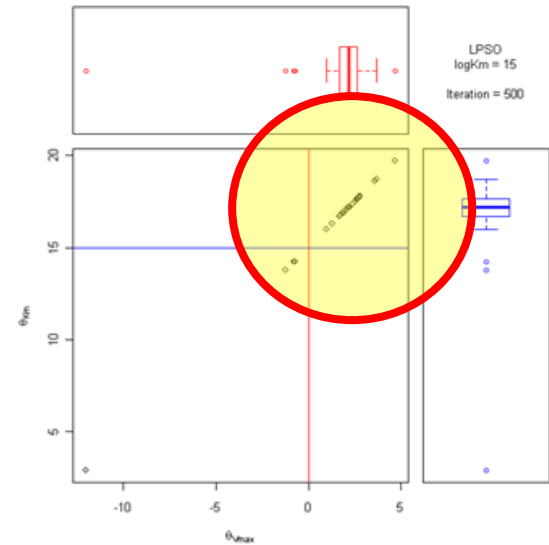
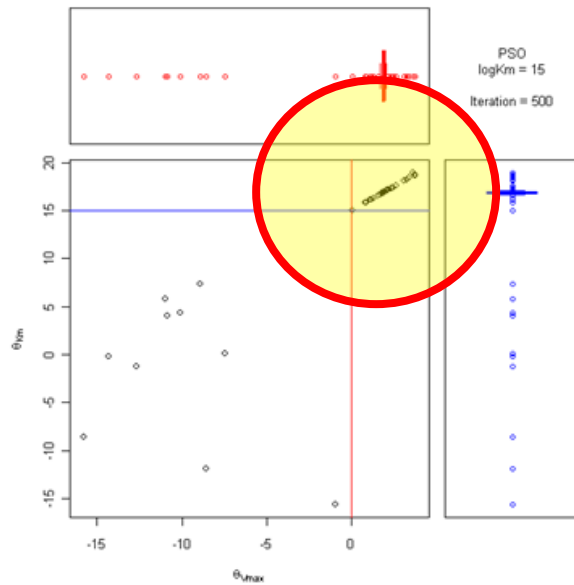


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(c) After 5000<sup>th</sup> iteration

Identifiable

Non-identifiable

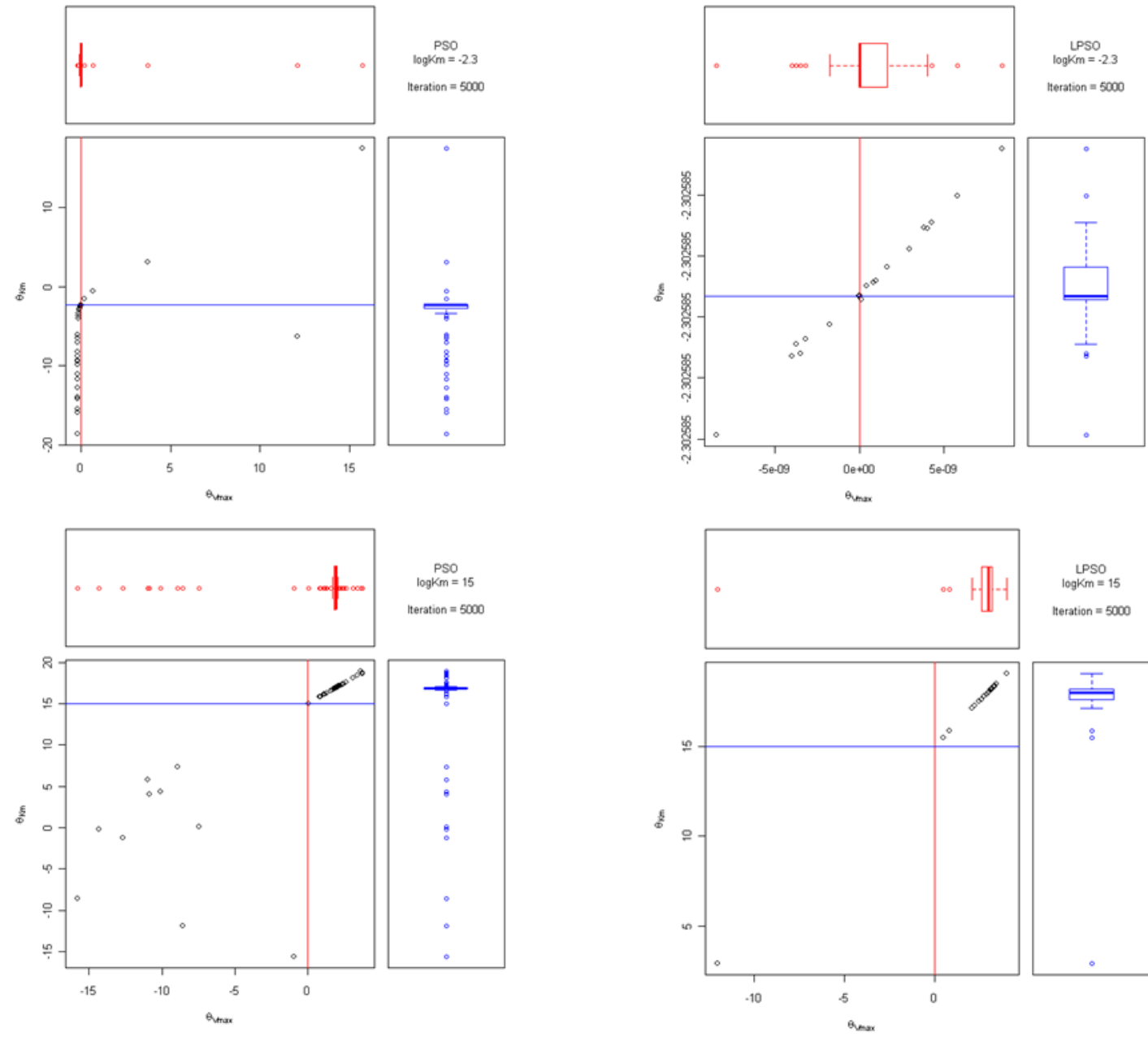
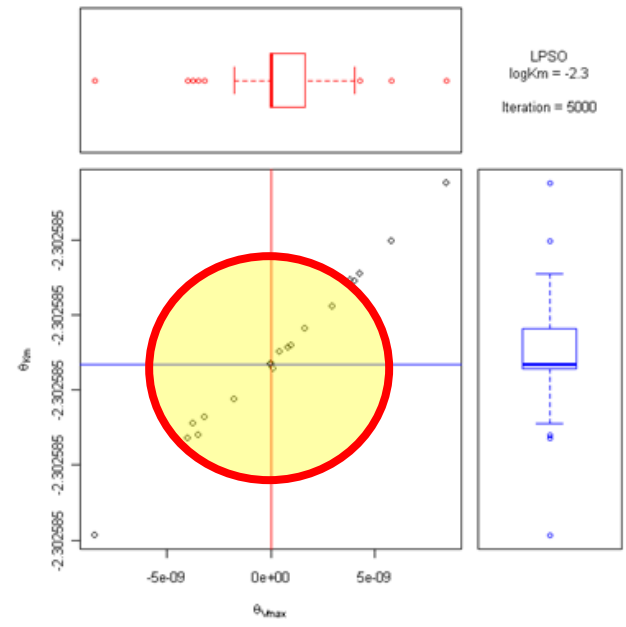
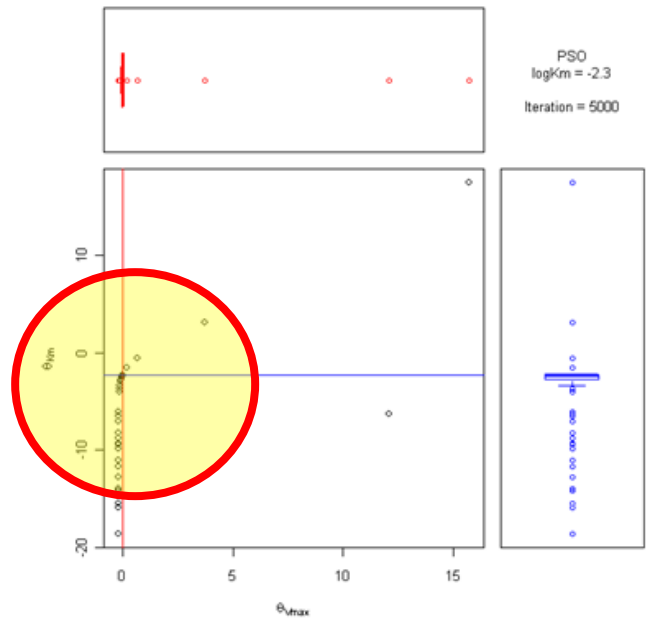


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(c) After 5000<sup>th</sup> iteration

Identifiable



Non-identifiable

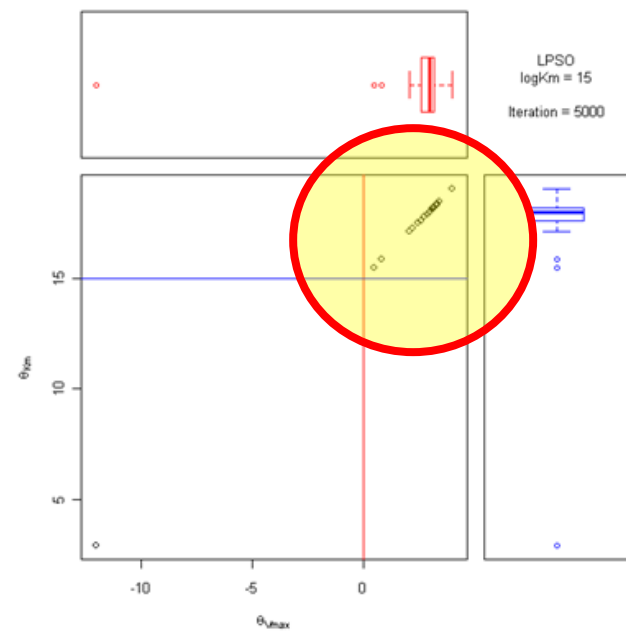
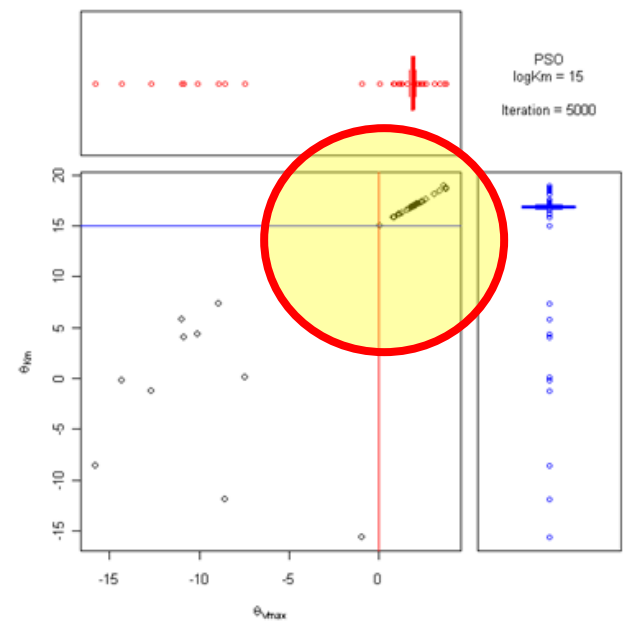


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# Summary

- A novel version of PSO is proposed with enhancing the convergence of the local best using a derivative-free local optimization algorithm, which is called LPSO.
- LPSO converges to a global optimum much faster than PSO does.
- Since PSO is a derivative-free algorithm and a derivative-free local optimization is combined, the proposed LPSO becomes a derivative-free global optimization algorithm so that LPSO can be applied to the parameter estimation regardless of the identifiability.
- Several convergence diagnostic measures are proposed and evaluated through both the simulation studies and clinical PK data analysis.

# Outline

- Pharmacokinetics (PK) analysis
  - Global optimization
  - Identifiability
- Two-stage single-arm phase 2 clinical trial designs
  - Simon's two-stage and Lin and Shih's adaptive designs
  - Adaptive designs with three target response rates

# Outline

- Pharmacokinetics (PK) analysis
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# Two-stage single-arm phase 2 clinical trial design

Drug is accepted for marketing

Phase I  
Safety

Phase II  
Activity

Phase III  
Evaluation

Phase IV  
Long-term monitor

Phase	No. of Patients	Length of Phase	Goal	Success rate
1	Small (20-100)	Short (several months)	-Dose finding trials -Safety, dosages (Maximum tolerated dose (MTD)), efficacy	70%
2	Small (30-500)	Short (several months to 2 years)	-Screening trials -Effectiveness and short-term safety	33%
3	Large (500-3000)	Longer (1-4 years)	-Safety and effectiveness	25-30%
4	Huge (>3000)	Long-long (>20 years)	-post-marketing monitor -long-term safety and rare adverse effects	70-90%

# Phase II Trials

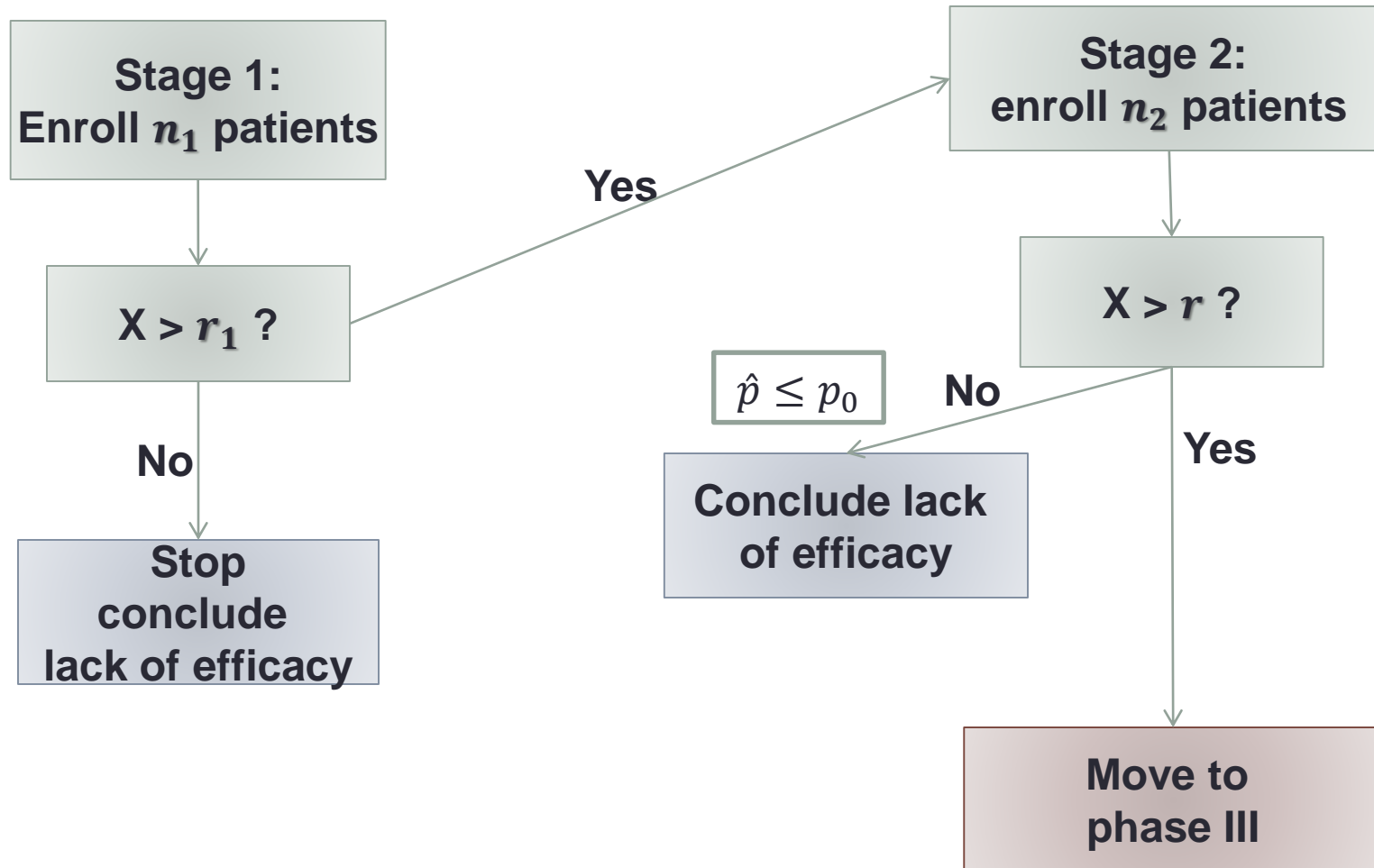
- Provide initial assessment of efficacy or ‘clinical activity’
  - Screen out ineffective drugs
  - Identify promising new drugs for further evaluation
- Further define safety and toxicity
- Minimize cost of the trial
  - Minimize number of patients exposed to an ineffective treatment
  - Enroll as few patients as “necessary” to show benefit or failure

# Phase II study

- Single-arm phase II study (Phase IIA)
  - Response rate is often used as its primary end point
  - Small number of patients enrolled
  - Reliance on historical controls for an estimation of expected response rate
  - Gehan's design (1961); Simon's two-stage designs (1989); predictive probability design (2008), etc.
- Randomized phase II trial (Phase IIB)
  - Simon et al's ranking and selection randomized design (1985); randomized discontinuation design (2002); Bayesian adaptive designs, etc.

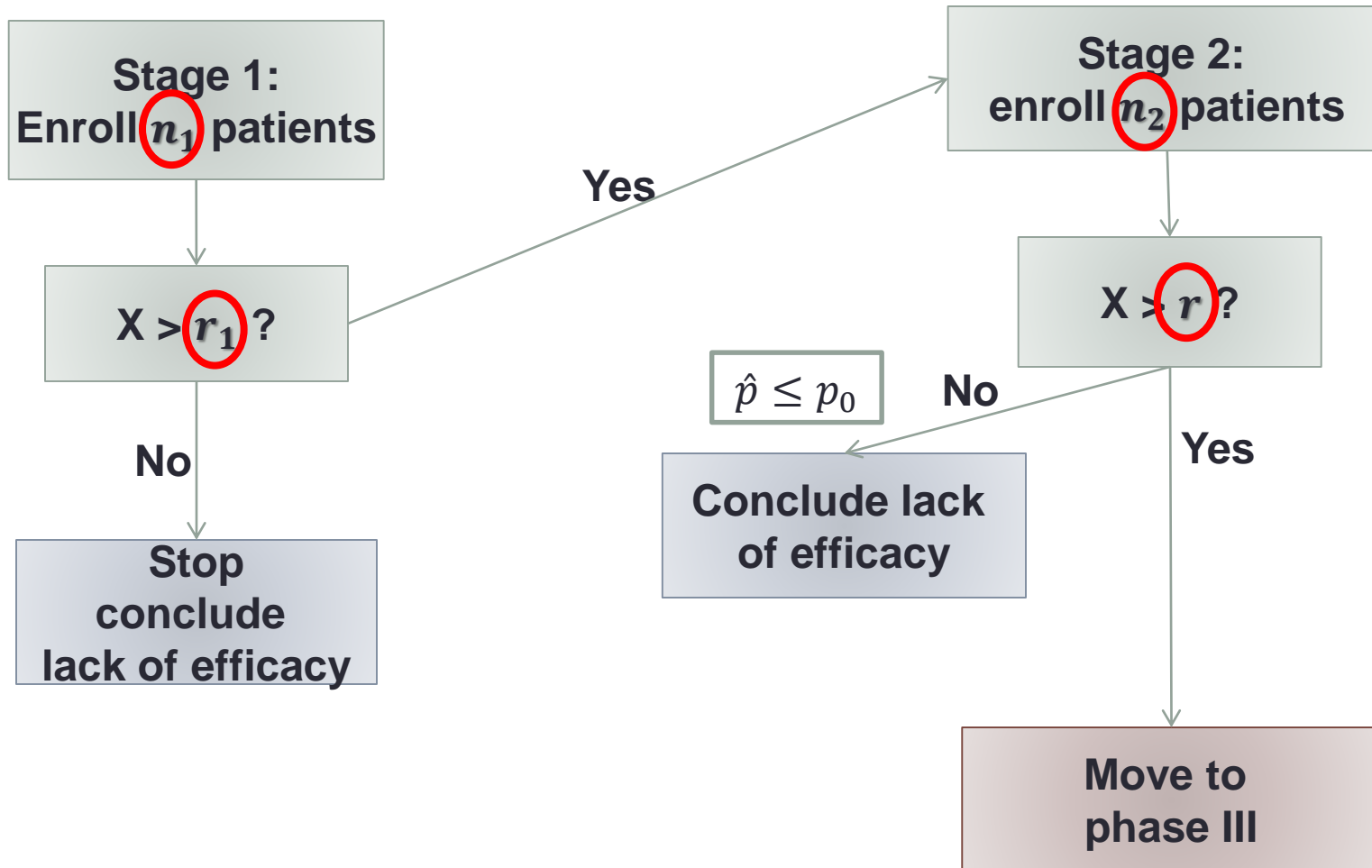
# Simon's Two-Stage Designs

- $X$ : the number of responders



# Simon's Two-Stage Designs

- $X$ : the number of responders



# Simon's Two-Stage Designs

- $H_0: p \leq p_0$  vs.  $H_1: p \geq p_1$ , where  $p_0 < p_1$ 
  - $b(x, m, p)$  and  $B(x, m, p)$ : the pmf and cdf for  $x \sim \text{Bin}(m, p)$
  - $G(r_1, n_1, r, n, p)$ : the prob of failing to reject  $H_0$

$$= B(r_1, n_1, p) + \sum_{x=r_1+1}^{\min(r, n_1)} b(x, n_1, p) B(r-x, n_2, p)$$

, where  $n = n_1 + n_2$

- $E(N|p) = n_1 + (1 - B(r_1, n_1, p))n_2$ : the expected sample size
- Greedy search (look for all cases) given  $\alpha, \beta$ 
  - $G(r_1, n_1, r, n, p_0) \geq 1 - \alpha$ ;  $G(r_1, n_1, r, n, p_1) \leq \beta$
  - Optimum design (min  $EN_0$ )
  - Minimax design (min {max $N$ })

# Adaptive Two-Stage Designs

- Allow the sample size at the second stage to depend on the results at the first stage
  - Lin and Shih (2004)
  - Banerjee and Tsiatis (2006)

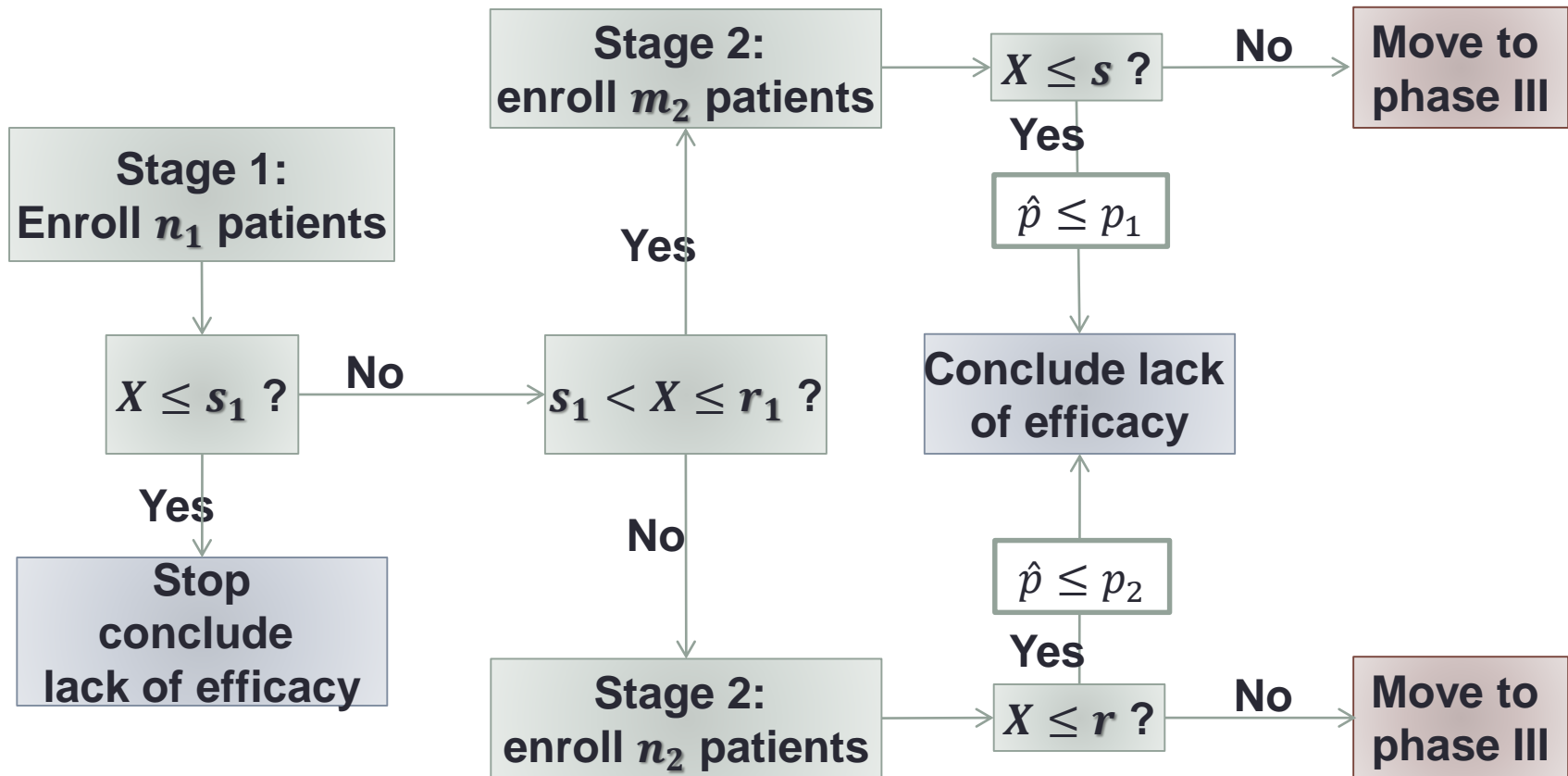
## Lin and Shih (2004)

- $p_0$ : the maximum uninteresting response rate
- $p_1, p_2$ : two choices of the target response rates, where  $p_0 < p_1 < p_2$
- $n_1$  patients will be enrolled to the first stage
- #(patients) for the second stage will depend on the number of observed responses in the first stage



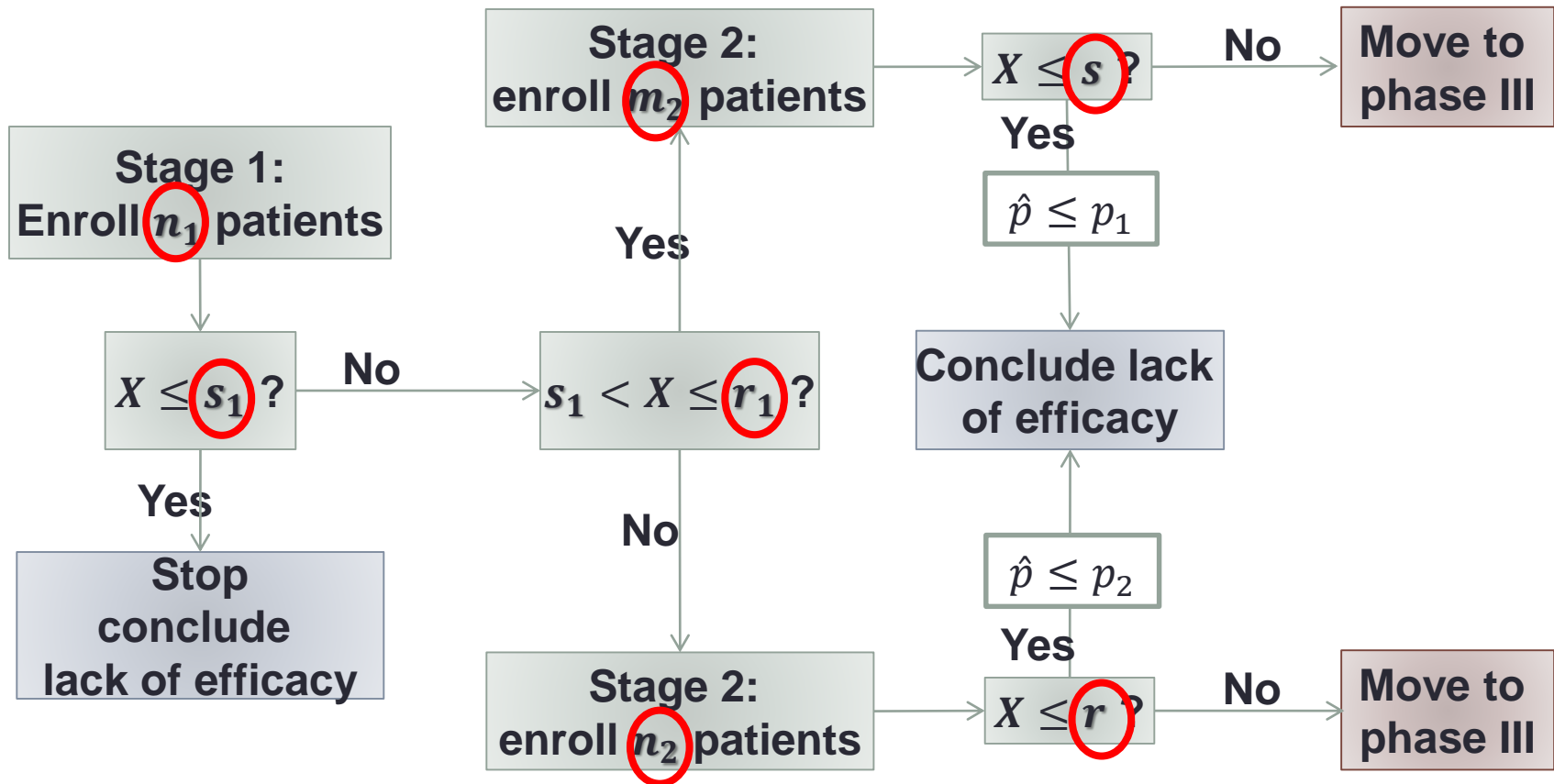
# Lin and Shih (2004)

- $X$ : the number of observed responders



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# Lin and Shih (2004)

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  - $b(x, m, p)$  and  $B(x, m, p)$ : the pmf and cdf for  $x \sim \text{Bin}(m, p)$
  - $G(s_1, r_1, n_1, s, m, r, n, p)$ : the prob of failing to reject  $H_0$

$$\begin{aligned}
 &= B(s_1, n_1, p) + \sum_{x=s_1+1}^{\min(r_1, s)} b(x, n_1, p) B(s-x, m_2, p) \\
 &+ \sum_{x=r_1+1}^{\min(r, n_1)} b(x, n_1, p) B(r-x, n_2, p)
 \end{aligned}$$

, where  $m = m_1 + m_2$ ;  $n = n_1 + n_2$

- $E(N|p) = n_1 + \{(B(r_1, n_1, p) - B(s_1, n_1, p))m_2 + (1 - B(r_1, n_1, p))n_2\}$ : the expected sample size
- Greedy search (look for all cases) given  $\alpha, \beta_1, \beta_2$ 
  - $G(s_1, r_1, n_1, s, m, r, n, p_0) \geq 1 - \alpha$
  - $G(s_1, r_1, n_1, s, m, r, n, p_1) \leq \beta_1$
  - $G(s_1, r_1, n_1, s, m, r, n, p_2) \leq \beta_2$

# Optimality criteria

- $O1: \min\{EN_0\}$
- $O2: \min\left\{\max_i EN_i\right\}$
- $O3: \min\{\max(n, m)\}$  and  $\min\{EN_0\}$
- $O4: \min\{\max(n, m)\}$  and  $\min\left\{\max_i EN_i\right\}$

# Motivation

- A single arm two-stage phase II trial to see the effect of head and neck cancer (HNC) on the incidence of obstructive sleep apnea (OSA).
- The maximum incidence rate of snoring and sleep apnea on healthy patients is **16.5% (i.e.,  $p_0 = 0.165$ )**.
- Neither historical nor preliminary data available, except that the incidence rate of OSA will be higher in HNC patients.
- An empirical range of the target response rates, from **24.38% to 39.00%**.
- Simon's two-stage design (80% power and 5% level) → the required sample sizes range from **30 to 197**
- Due to wide range of the target response rates, **Lin and Shih's approach will not be able to cover the great uncertainty.**

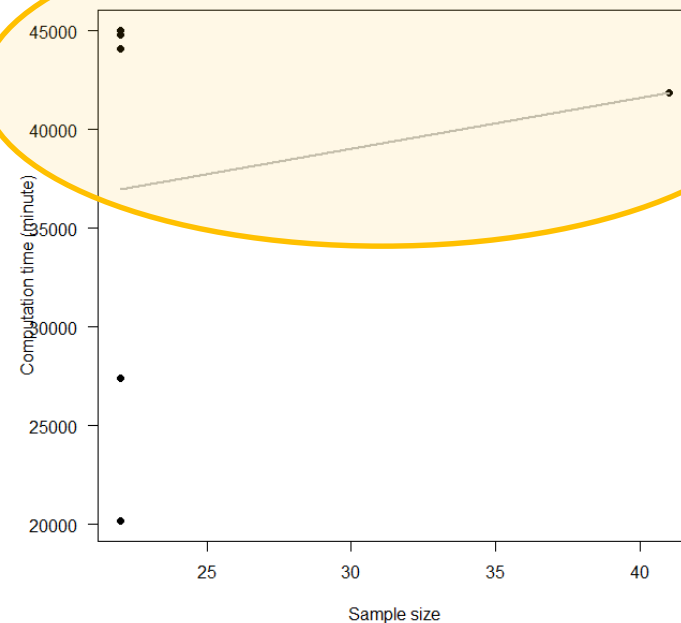
## Extension to three choices?

- “We do not extend the selection to more than two prefixed possible response rates mainly **due to the complexity in the numerical solutions**, and also because it is **usually adequate** for practitioners to contemplate between two (high./low) choices of  $p_*$ .”-Lin and Shih (2004)

# Extension to three choices?

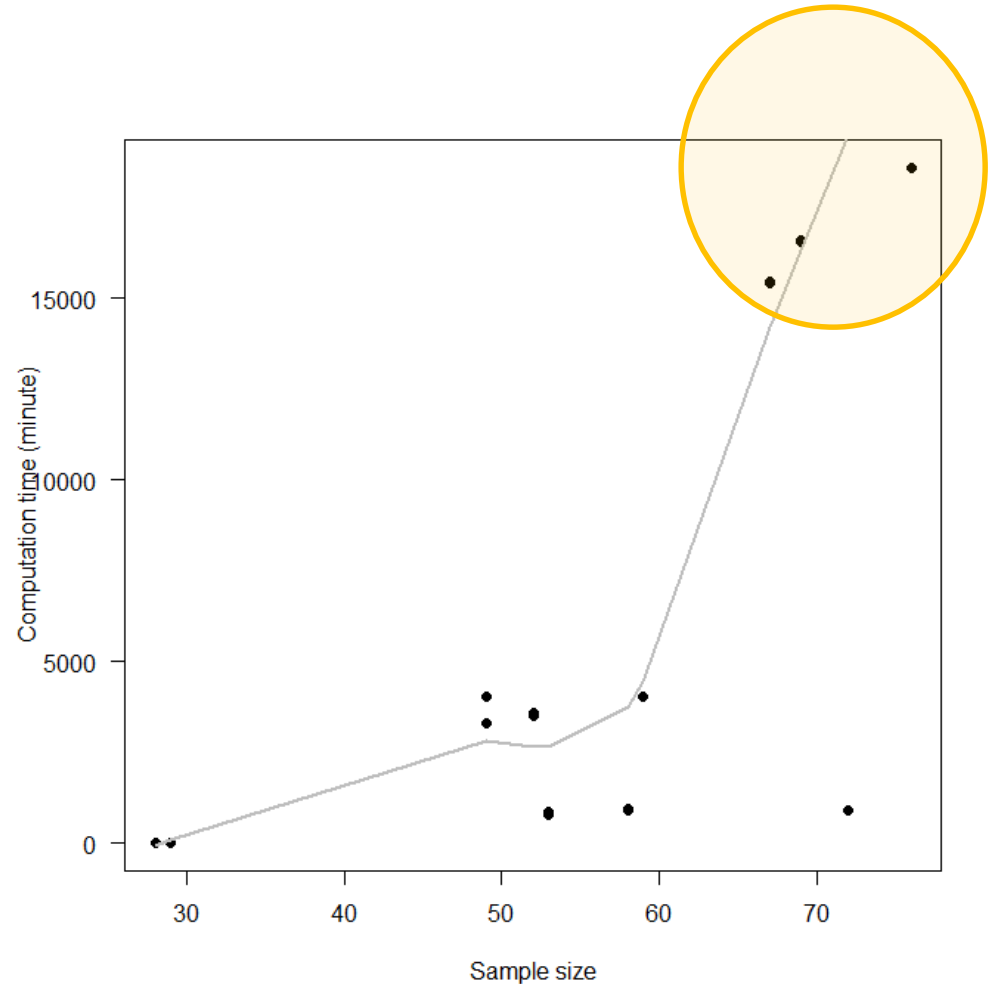
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Lin and Shih (2004)



# Sample size vs. Computation time

Simon's two-stage





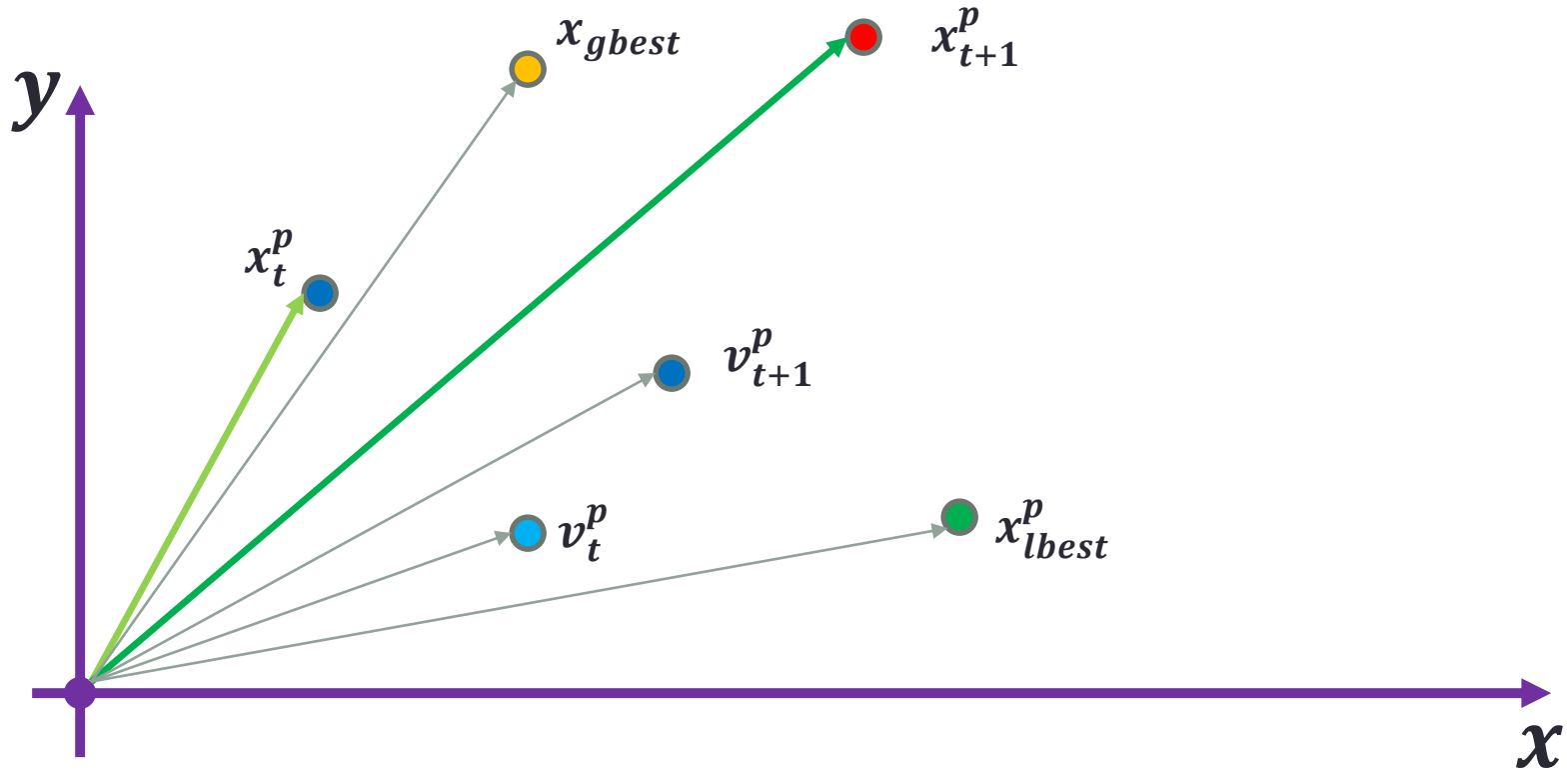
# How to reduce the computational burden?

- Nonlinear
- No closed form solution
- Not differentiable

## Particle Swarm Optimization (PSO)

$$v_{k+1}^p = w_k v_k^p + c_1 r_1 (x_{lbest}^p - x_k^p) + c_2 r_2 (x_{gbest} - x_k^p)$$

$$x_{k+1}^p = x_k^p + v_{k+1}^p$$



# Discrete Particle Swarm Optimization (DPSO)

- $k$ -th iteration

$$v_{k+1}^p = w_k v_k^p + c_1 r_1 (x_{lbest}^p - x_k^p) + c_2 r_2 (x_{gbest} - x_k^p)$$

$$x_{k+1}^p = x_k^p + v_{k+1}^p$$

- $p = 1, \dots, P$ ;  $P$ : the population size
- $x_{lbest}^p$  and  $x_{gbest}$ : local best and global best, respectively
- $v_{k+1}^p$ : the velocity
- $w_k$ : inertia weight

$$w_k = \mathit{round} \left( w_{max} - \frac{k}{K} (w_{max} - w_{min}) \right)$$

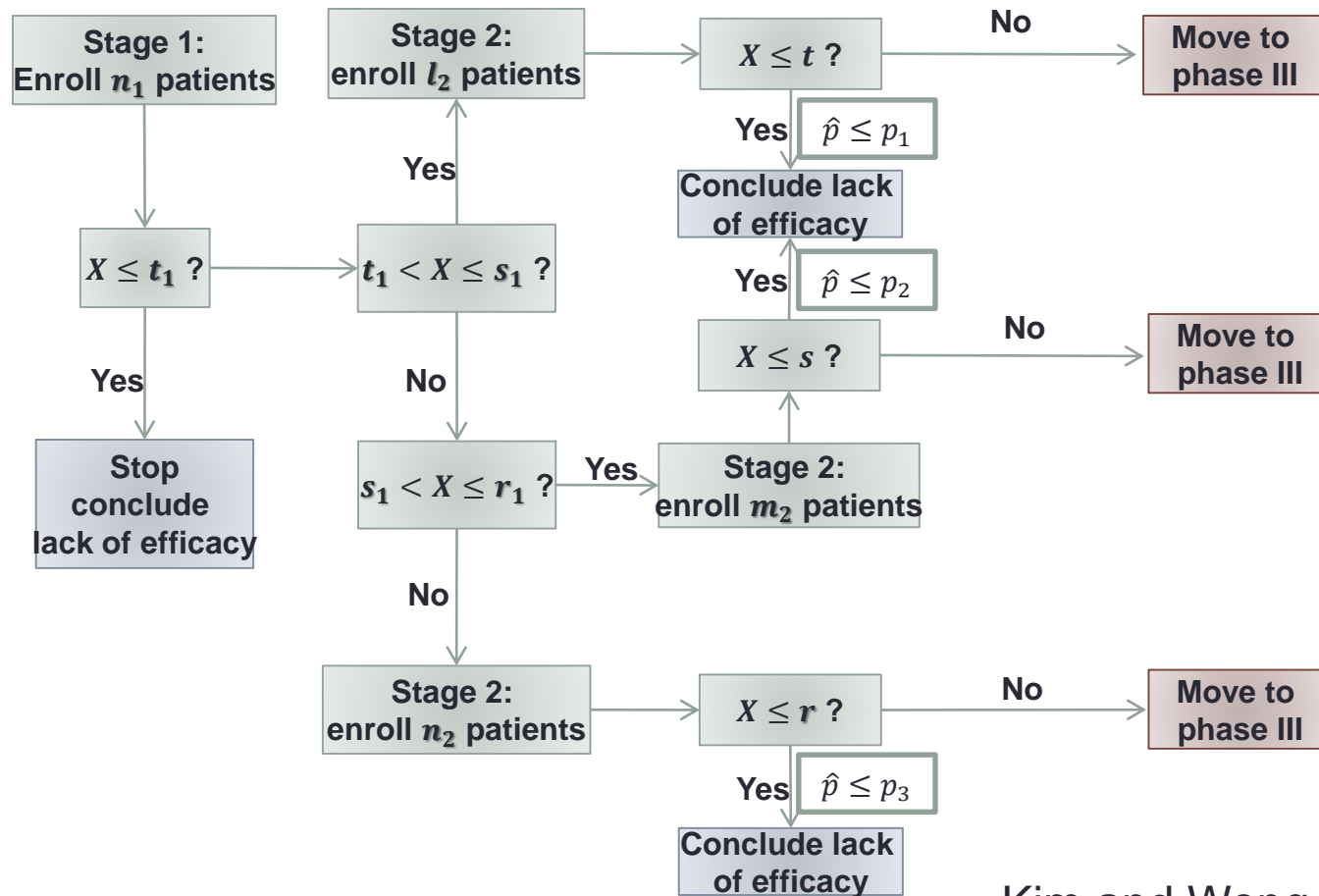
- $r_1 c_1, r_2 c_2$ : two random sequences in  $\{0, 1, 2, \dots, n\}$ ;  $n = c_1$  or  $c_2$
- $K$ : total number of iterations

# Outline

- Pharmacokinetics (PK) analysis
  - Global optimization
  - Identifiability
- Two-stage single-arm phase 2 clinical trial designs
  - Simon's two-stage and Lin and Shih's adaptive designs
  - Adaptive designs with three target response rates

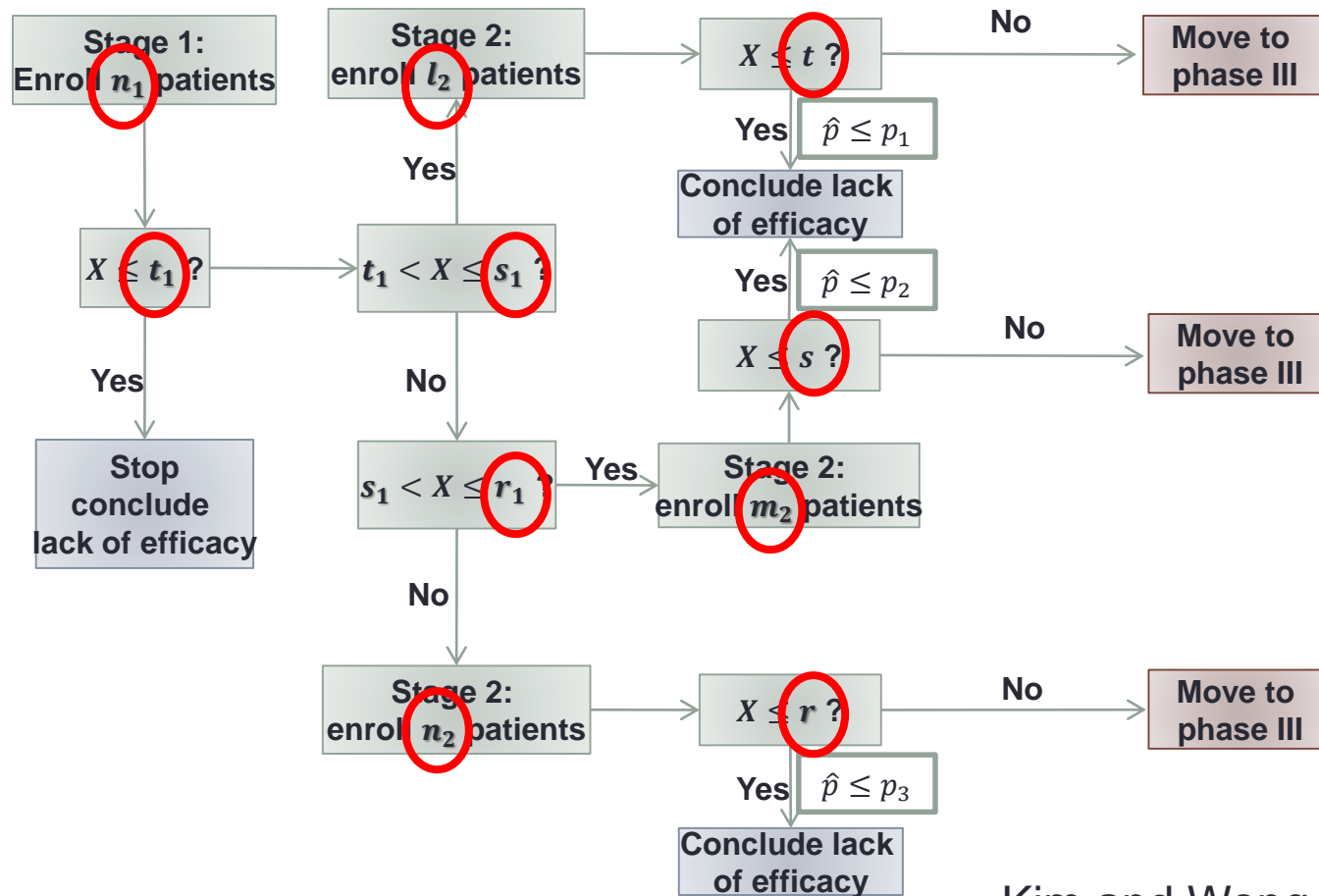
# Extension of Lin and Shih (2004)

- $X$ : the number of observed responders



# Extension of Lin and Shih (2004)

- $X$ : the number of observed responders



# Extension of Lin and Shih (2004)

- $H_0: p \leq p_0$  vs.  $H_1: p \geq p_1$  or  $H_1: p \geq p_2$  or  $H_1: p \geq p_3$ , where  $p_0 < p_1 < p_2 < p_3$ 
  - $b(x, m, p)$  and  $B(x, m, p)$ : the pmf and cdf for  $x \sim \text{Bin}(m, p)$
  - $G(s_1, r_1, n_1, s, m, r, n, p)$ : the prob of failing to reject  $H_0$

$$\begin{aligned}
 &= B(t_1, n_1, p) + \sum_{x=t_1+1}^{\min(s_1, t)} b(x, n_1, p) B(t-x, l_2, p) \\
 &+ \sum_{x=s_1+1}^{\min(r_1, s)} b(x, n_1, p) B(s-x, m_2, p) + \sum_{x=r_1+1}^{\min(r, n_1)} b(x, n_1, p) B(r-x, n_2, p)
 \end{aligned}$$

, where  $l = l_1 + l_2$ ;  $m = m_1 + m_2$ ;  $n = n_1 + n_2$

- $E(N|p) = n_1 + \{(B(s_1, n_1, p) - B(t_1, n_1, p))l_2 + (B(r_1, n_1, p) - B(s_1, n_1, p))m_2 + (1 - B(r_1, n_1, p))n_2\}$ : the expected sample size
- Greedy search (look for all cases) given  $\alpha, \beta_1, \beta_2, \beta_3$ 
  - $G(s_1, r_1, n_1, s, m, r, n, p_0) \geq 1 - \alpha$
  - $G(s_1, r_1, n_1, s, m, r, n, p_1) \leq \beta_1$
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# Optimality criteria

- $O1: \min\{EN_0\}$
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- $O3: \min\{\max(l, n, m)\}$  and  $\min\{EN_0\}$
- $O4: \min\{\max(l, n, m)\}$  and  $\min\left\{\max_i EN_i\right\}$



# Finding initial values

- G-DPSO
  - Within this smaller domain, we searched for an appropriate set of initial values using the same strategy as the greedy search did for the rest of the parameters.
- D-DPSO
  - Use when the number of target responses is two or more.
  - Find the initial set of values using an optimal set of values decided by the case with the one less number of target response.

# Two-stage single-arm phase 2 clinical trial designs

**Table I.** Various adaptive two-stage optimal designs with one target response when  $\alpha = 0.05$  and  $\beta = 0.20$ .

$p_0$	$p_1$	Optimal criteria	Method	$s_1/n_1$	$s/n$	$1 - \alpha$	$\beta$	$E(N p_0)$	$E(N p_1)$
0.05	0.20	C1	GS	0/10	3/29	0.953	0.199	17.624	26.960
			G-DPSO	0/10	3/29	0.953	0.199	17.624	26.960
		C2	GS	0/11	3/28	0.956	0.199	18.330	26.540
			G-DPSO	0/11	3/28	0.956	0.199	18.330	26.540
		C3	GS	0/11	3/28	0.956	0.199	18.330	26.540
			G-DPSO	0/11	3/28	0.956	0.199	18.330	26.540
		C4	GS	0/11	3/28	0.956	0.199	18.330	26.540
			G-DPSO	0/11	3/28	0.956	0.199	18.330	26.540
0.20	0.35	C1	GS	5/22	19/72	0.951	0.200	35.368	63.855
			G-DPSO	5/22	19/72	0.951	0.200	35.368	63.855
		C2	GS	3/21	15/53	0.950	0.200	41.148	51.941
			G-DPSO	3/21	15/53	0.950	0.200	41.148	51.941
		C3	GS	6/31	15/53	0.950	0.198	40.436	51.983
			G-DPSO	6/31	15/53	0.950	0.198	40.436	51.983
		C4	GS	3/21	15/53	0.950	0.200	41.148	51.941
			G-DPSO	3/21	15/53	0.950	0.200	41.148	51.941
0.55	0.70	C1	GS	15/26	48/76	0.952	0.195	42.021	69.735
			G-DPSO	15/26	48/76	0.952	0.195	42.021	69.735
		C2	GS	20/35	43/67	0.953	0.200	45.802	64.662
			G-DPSO <sup>a</sup>	20/35	43/67	0.953	0.200	45.802	64.662
		C3	GS	20/35	43/67	0.953	0.200	45.802	64.662
			G-DPSO	20/35	43/67	0.953	0.200	45.802	64.662
		C4	GS	20/35	43/67	0.953	0.200	45.802	64.662
			G-DPSO <sup>b</sup>	20/35	43/67	0.953	0.200	45.802	64.662

a,b: The number of particles was increased from 10 to 20 and the population size was increased from 10,000 to 70,000.

# Two-stage single-arm phase 2 clinical trial designs

**Table I.** Various adaptive two-stage optimal designs with one target response when  $\alpha = 0.05$  and  $\beta = 0.20$ .

$p_0$	$p_1$	Optimal criteria	Method	$s_1/n_1$	$s/n$	$1 - \alpha$	$\beta$	$E(N p_0)$	$E(N p_1)$
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			G-DPSO	3/21	15/53	0.950	0.200	41.148	51.941
0.55	0.70	C1	GS	15/26	48/76	0.952	0.195	42.021	69.735
			G-DPSO	15/26	48/76	0.952	0.195	42.021	69.735
		C2	GS	20/35	43/67	0.953	0.200	45.802	64.662
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a,b: The number of particles was increased from 10 to 20 and the population size was increased from 10,000 to 70,000.

## Two-stage single-arm phase 2 clinical trial designs

**Table S1.** Computation time corresponding to **Table 1**; Various adaptive 2-stage optimal designs with one target response when  $\alpha = 0.05$  and  $\beta = 0.20$ .

$p_0$	$p_1$	Optimal criteria	Method	Computation time (minute)
0.05	0.20	C1	GS	0.09
			G-DPSO	2.51
		C2	GS	0.1
			G-DPSO	2.32
		C3	GS	0.09
			G-DPSO	2.35
		C4	GS	0.09
			G-DPSO	2.39
0.20	0.35	C1	GS	15.15
			G-DPSO	2.87
		C2	GS	14.25
			G-DPSO	2.66
		C3	GS	13.04
			G-DPSO	2.59
		C4	GS	13.43
			G-DPSO	2.72
0.55	0.70	C1	GS	310.23
			G-DPSO	3.44
		C2	GS	258.06
			G-DPSO	9.28
		C3	GS	256.76
			G-DPSO	2.93
		C4	GS	257.66
			G-DPSO	9.40

## Two-stage single-arm phase 2 clinical trial designs

**Table S1.** Computation time corresponding to **Table 1**; Various adaptive 2-stage optimal designs with one target response when  $\alpha = 0.05$  and  $\beta = 0.20$ .

$p_0$	$p_1$	Optimal criteria	Method	Computation time (minute)
0.05	0.20	C1	GS	0.09
			G-DPSO	2.51
		C2	GS	0.1
			G-DPSO	2.32
		C3	GS	0.09
			G-DPSO	2.35
		C4	GS	0.09
			G-DPSO	2.39
0.20	0.35	C1	GS	15.15
			G-DPSO	2.87
		C2	GS	14.25
			G-DPSO	2.66
		C3	GS	13.04
			G-DPSO	2.59
		C4	GS	13.43
			G-DPSO	2.72
0.55	0.70	C1	GS	310.23
			G-DPSO	3.44
		C2	GS	258.06
			G-DPSO	9.28
		C3	GS	256.76
			G-DPSO	2.93
		C4	GS	257.66
			G-DPSO	9.40

**Table 2.** Various adaptive two-stage optimal designs with two target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$  and  $\beta_2 = 0.10$ .

$p_0$	$p_1$	$p_2$	Optimal criteria	Method	$s_1/r_1/n_1$	$s/m$	$r/n$	$1-\alpha$	$\beta_1$	$\beta_2$	$E(N p_0)$	$E(N p_1)$	$E(N p_2)$
0.05	0.20	0.25	C1	GS	0/1/9	3/30	4/41	0.957	0.199	0.094	17.548	33.383	36.119
				G-DPSO	0/1/10	3/28	3/31	0.953	0.199	0.088	17.481	27.940	29.254
				D-DPSO	0/1/8	4/41	3/36	0.952	0.200	0.107	18.821	32.980	34.532
			C2	GS	0/2/16	3/29	3/22	0.955	0.199	0.082	22.978	24.097	23.249
				G-DPSO	0/2/14	3/29	3/21	0.954	0.200	0.084	21.444	23.925	22.982
				D-DPSO	0/2/14	3/29	3/21	0.954	0.200	0.084	21.444	23.925	22.982
			C3	GS	0/4/9	4/41	5/22	0.960	0.174	0.084	20.831	36.333	37.668
				G-DPSO	0/5/11	3/28	6/25	0.956	0.199	0.083	18.330	26.505	27.179
				D-DPSO	0/5/11	3/28	6/25	0.956	0.199	0.083	18.330	26.505	27.179
			C4	GS	0/2/16	3/29	3/22	0.955	0.199	0.082	22.978	24.097	23.249
				G-DPSO	0/2/15	3/28	3/23	0.957	0.197	0.078	21.796	24.533	24.007
				D-DPSO	0/2/15	3/28	3/23	0.957	0.197	0.078	21.796	24.533	24.007
0.20	0.35	0.40	C1	G-DPSO	4/9/20	17/62	10/36	0.952	0.199	0.069	35.487	53.869	53.499
				D-DPSO	5/10/22	19/72	11/36	0.951	0.199	0.078	35.311	60.004	60.179
			C2	G-DPSO	8/12/37	16/57	13/41	0.950	0.196	0.059	42.913	46.949	44.252
				D-DPSO	5/10/29	16/56	11/36	0.951	0.196	0.055	43.094	46.415	42.638
			C3	G-DPSO	6/11/27	16/58	13/43	0.950	0.200	0.063	35.833	51.406	50.886
				D-DPSO	3/10/21	15/53	11/36	0.950	0.200	0.058	41.131	50.629	49.683
			C4	G-DPSO	8/12/38	16/56	13/43	0.952	0.200	0.057	43.830	47.337	45.224
				D-DPSO	3/10/21	15/53	11/36	0.950	0.200	0.058	41.131	50.629	49.683
0.55	0.70	0.75	C1	G-DPSO	15/20/26	48/76	27/39	0.951	0.200	0.053	41.807	63.720	61.521
				D-DPSO	15/20/26	48/76	27/39	0.951	0.200	0.053	41.807	63.720	61.521
			C2	G-DPSO	24/28/41	47/73	30/45	0.951	0.194	0.039	48.872	55.463	50.268
				D-DPSO	11/17/24	45/70	30/45	0.951	0.199	0.043	57.956	59.756	54.718
			C3	G-DPSO	13/20/25	43/67	25/42	0.951	0.194	0.038	47.730	62.880	61.206
				D-DPSO	14/20/26	43/67	23/39	0.950	0.199	0.041	45.163	59.975	56.926
			C4	G-DPSO	25/30/44	44/68	32/49	0.950	0.197	0.037	51.862	56.540	52.457
				D-DPSO	10/16/21	43/67	28/41	0.950	0.200	0.044	51.907	60.628	57.152

**Table S2.** Computation time corresponding to **Table 2**; Various adaptive 2-stage optimal designs with two target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$  and  $\beta_2 = 0.10$ .

$p_0$	$p_1$	$p_2$	Optimal criteria	Method	Computation time (minute)			
0.05	0.20	0.25	C1	GS	697.41			
				G-DPSO	3.49			
				D-DPSO	5.07			
			C2	GS	335.84			
				G-DPSO	3.49			
				D-DPSO	4.89			
			C3	GS	456.9			
				G-DPSO	3.48			
				D-DPSO	4.95			
			C4	GS	734.74			
				G-DPSO	3.4			
				D-DPSO	4.92			
0.20	0.35	0.40	C1	G-DPSO	10.6			
				D-DPSO	5.86			
			C2	G-DPSO	10.24			
				D-DPSO	5.54			
			C3	G-DPSO	11.44			
				D-DPSO	5.6			
			C4	G-DPSO	11.07			
				D-DPSO	5.58			
			0.55	0.70	0.75	C1	G-DPSO	147.31
							D-DPSO	5.89
						C2	G-DPSO	131.2
							D-DPSO	5.64
C3	G-DPSO	197.07						
	D-DPSO	5.86						
C4	G-DPSO	193.18						
	D-DPSO	5.68						



**Table S2.** Computation time corresponding to **Table 2**; Various adaptive 2-stage optimal designs with two target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$  and  $\beta_2 = 0.10$ .

$p_0$	$p_1$	$p_2$	Optimal criteria	Method	Computation time (minute)			
0.05	0.20	0.25	C1	GS	697.41			
				G-DPSO	3.49			
				D-DPSO	5.07			
			C2	GS	335.84			
				G-DPSO	3.49			
				D-DPSO	4.89			
			C3	GS	456.9			
				G-DPSO	3.48			
				D-DPSO	4.95			
			C4	GS	734.74			
				G-DPSO	3.4			
				D-DPSO	4.92			
0.20	0.35	0.40	C1	G-DPSO	10.6			
				D-DPSO	5.86			
			C2	G-DPSO	10.24			
				D-DPSO	5.54			
			C3	G-DPSO	11.44			
				D-DPSO	5.6			
			C4	G-DPSO	11.07			
				D-DPSO	5.58			
			0.55	0.70	0.75	C1	G-DPSO	147.31
							D-DPSO	5.89
						C2	G-DPSO	131.2
							D-DPSO	5.64
C3	G-DPSO	197.07						
	D-DPSO	5.86						
C4	G-DPSO	193.18						
	D-DPSO	5.68						



# Two-stage single-arm phase 2 clinical trial designs

**Table 3.** Various adaptive two-stage optimal designs with three target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$ ,  $\beta_2 = 0.10$ , and  $\beta_3 = 0.05$ .

$p_0$	$p_1$	$p_2$	$p_3$	Optimal criteria	Method	$s_1/r_1/q_1/n_1$	$s/l$	$r/m$	$q/n$	$1-\alpha$	$\beta_1$	$\beta_2$	$\beta_3$	$E(N p_0)$	$E(N p_1)$	$E(N p_2)$	$E(N p_3)$
0.05	0.20	0.25	0.30	C1	G-DPSO	0/1/4/10	3/28	3/31	5/28	0.953	0.200	0.088	0.037	17.481	27.841	29.020	29.593
					D-DPSO	0/1/2/9	4/36	3/34	3/31	0.959	0.199	0.093	0.044	18.816	30.463	31.375	31.691
				C2	G-DPSO	0/1/2/13	3/31	3/28	3/20	0.951	0.200	0.088	0.036	21.158	23.725	22.613	21.636
					D-DPSO	0/1/2/14	4/36	3/33	3/19	0.952	0.198	0.094	0.043	24.391	24.899	22.847	21.245
				C3	G-DPSO	0/2/5/11	3/28	3/28	6/21	0.956	0.200	0.084	0.033	18.330	26.458	27.042	27.116
					D-DPSO	0/3/4/11	3/29	5/29	5/22	0.953	0.198	0.085	0.034	18.761	27.101	27.437	27.172
				C4	G-DPSO	0/1/2/15	3/28	3/27	3/24	0.958	0.198	0.077	0.026	21.698	24.904	24.615	24.354
					D-DPSO	0/1/2/14	4/32	3/30	3/22	0.960	0.198	0.079	0.028	22.675	25.189	24.130	23.260
0.20	0.35	0.40	0.45	C1	G-DPSO	5/9/10/24	17/61	10/36	11/32	0.952	0.200	0.064	0.017	36.401	48.570	45.349	40.823
					D-DPSO	5/11/13/22	19/72	12/36	14/32	0.951	0.200	0.078	0.028	35.355	62.126	63.957	61.554
				C2	G-DPSO	5/9/10/29	17/60	13/44	11/34	0.951	0.197	0.061	0.015	44.649	45.199	40.615	37.117
					D-DPSO	3/6/8/19	19/67	11/38	9/31	0.950	0.194	0.060	0.016	43.149	47.817	43.504	39.094
				C3	G-DPSO	4/9/13/22	16/57	10/39	16/36	0.951	0.196	0.059	0.014	37.889	50.724	49.244	46.353
					D-DPSO	3/8/9/17	17/62	12/36	11/28	0.951	0.197	0.070	0.024	37.230	54.484	54.003	50.929
				C4	G-DPSO	5/9/10/26	16/57	13/44	11/34	0.950	0.197	0.059	0.013	38.717	46.656	43.284	39.542
					D-DPSO	4/8/11/24	18/64	11/36	12/28	0.952	0.193	0.068	0.026	44.584	48.279	42.940	37.622
0.55	0.70	0.75	0.80	C1	G-DPSO	15/20/21/26	48/76	29/43	23/31	0.951	0.199	0.052	0.010	41.812	63.491	60.658	51.947
					D-DPSO	10/15/16/19	46/72	23/39	18/29	0.951	0.198	0.047	0.008	44.911	62.696	60.681	54.260
				C2	G-DPSO	17/22/23/32	47/73	32/48	24/35	0.950	0.195	0.041	0.005	51.994	54.810	46.623	39.493
					D-DPSO	8/13/14/17	46/72	27/39	21/31	0.951	0.195	0.048	0.009	52.800	62.503	58.360	51.268
				C3	G-DPSO	15/20/21/27	46/72	27/41	24/35	0.951	0.192	0.041	0.005	44.743	59.648	54.638	46.497
					D-DPSO	12/17/18/22	47/74	26/39	24/32	0.950	0.197	0.054	0.014	44.314	63.001	60.007	52.356
				C4	G-DPSO	17/22/23/32	47/73	32/48	24/35	0.950	0.195	0.041	0.005	51.994	54.810	46.623	39.493
					D-DPSO	7/12/14/16	45/70	26/39	19/31	0.951	0.200	0.044	0.006	55.302	60.783	56.534	50.252

# Two-stage single-arm phase 2 clinical trial designs

**Table 3.** Various adaptive two-stage optimal designs with three target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$ ,  $\beta_2 = 0.10$ , and  $\beta_3 = 0.05$ .

$p_0$	$p_1$	$p_2$	$p_3$	Optimal criteria	Method	$s_1/r_1/q_1/n_1$	$s/l$	$r/m$	$q/n$	$1-\alpha$	$\beta_1$	$\beta_2$	$\beta_3$	$E(N p_0)$	$E(N p_1)$	$E(N p_2)$	$E(N p_3)$
0.05	0.20	0.25	0.30	C1	G-DPSO	0/1/4/10	3/28	3/31	5/28	0.953	0.200	0.088	0.037	17.481	27.841	29.020	29.593
					D-DPSO	0/1/2/9	4/36	3/34	3/31	0.959	0.199	0.093	0.044	18.816	30.463	31.375	31.691
				C2	G-DPSO	0/1/2/13	3/31	3/28	3/20	0.951	0.200	0.088	0.036	21.158	23.725	22.613	21.636
					D-DPSO	0/1/2/14	4/36	3/33	3/19	0.952	0.198	0.094	0.043	24.391	24.899	22.847	21.245
				C3	G-DPSO	0/2/5/11	3/28	3/28	6/21	0.956	0.200	0.084	0.033	18.330	26.458	27.042	27.116
					D-DPSO	0/3/4/11	3/29	5/29	5/22	0.953	0.198	0.085	0.034	18.761	27.101	27.437	27.172
				C4	G-DPSO	0/1/2/15	3/28	3/27	3/24	0.958	0.198	0.077	0.026	21.698	24.904	24.615	24.354
					D-DPSO	0/1/2/14	4/32	3/30	3/22	0.960	0.198	0.079	0.028	22.675	25.189	24.130	23.260
0.20	0.35	0.40	0.45	C1	G-DPSO	5/9/10/24	17/61	10/36	11/32	0.952	0.200	0.064	0.017	36.401	48.570	45.349	40.823
					D-DPSO	5/11/13/22	19/72	12/36	14/32	0.951	0.200	0.078	0.028	35.355	62.126	63.957	61.554
				C2	G-DPSO	5/9/10/29	17/60	13/44	11/34	0.951	0.197	0.061	0.015	44.649	45.199	40.615	37.117
					D-DPSO	3/6/8/19	19/67	11/38	9/31	0.950	0.194	0.060	0.016	43.149	47.817	43.504	39.094
				C3	G-DPSO	4/9/13/22	16/57	10/39	16/36	0.951	0.196	0.059	0.014	37.889	50.724	49.244	46.353
					D-DPSO	3/8/9/17	17/62	12/36	11/28	0.951	0.197	0.070	0.024	37.230	54.484	54.003	50.929
				C4	G-DPSO	5/9/10/26	16/57	13/44	11/34	0.950	0.197	0.059	0.013	38.717	46.656	43.284	39.542
					D-DPSO	4/8/11/24	18/64	11/36	12/28	0.952	0.193	0.068	0.026	44.584	48.279	42.940	37.622
0.55	0.70	0.75	0.80	C1	G-DPSO	5/20/21/26	48/76	29/43	23/31	0.951	0.199	0.052	0.010	41.812	63.491	60.658	51.947
					D-DPSO	0/15/16/19	46/72	23/39	18/29	0.951	0.198	0.047	0.008	44.911	62.696	60.681	54.260
				C2	G-DPSO	7/22/23/32	47/73	32/48	24/35	0.950	0.195	0.041	0.005	51.994	54.810	46.623	39.493
					D-DPSO	8/13/14/17	46/72	27/39	21/31	0.951	0.195	0.048	0.009	52.800	62.503	58.360	51.268
				C3	G-DPSO	5/20/21/27	46/72	27/41	24/35	0.951	0.192	0.041	0.005	44.743	59.648	54.638	46.497
					D-DPSO	2/17/18/22	47/74	26/39	24/32	0.950	0.197	0.054	0.014	44.314	63.001	60.007	52.356
				C4	G-DPSO	7/22/23/32	47/73	32/48	24/35	0.950	0.195	0.041	0.005	51.994	54.810	46.623	39.493
					D-DPSO	7/12/14/16	45/70	26/39	19/31	0.951	0.200	0.044	0.006	55.302	60.783	56.534	50.252

## Two-stage single-arm phase 2 clinical trial designs

**Table S3.** Computation time corresponding **Table 3**; Various adaptive 2-stage optimal designs with three target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$ ,  $\beta_2 = 0.10$ , and  $\beta_3 = 0.05$ .

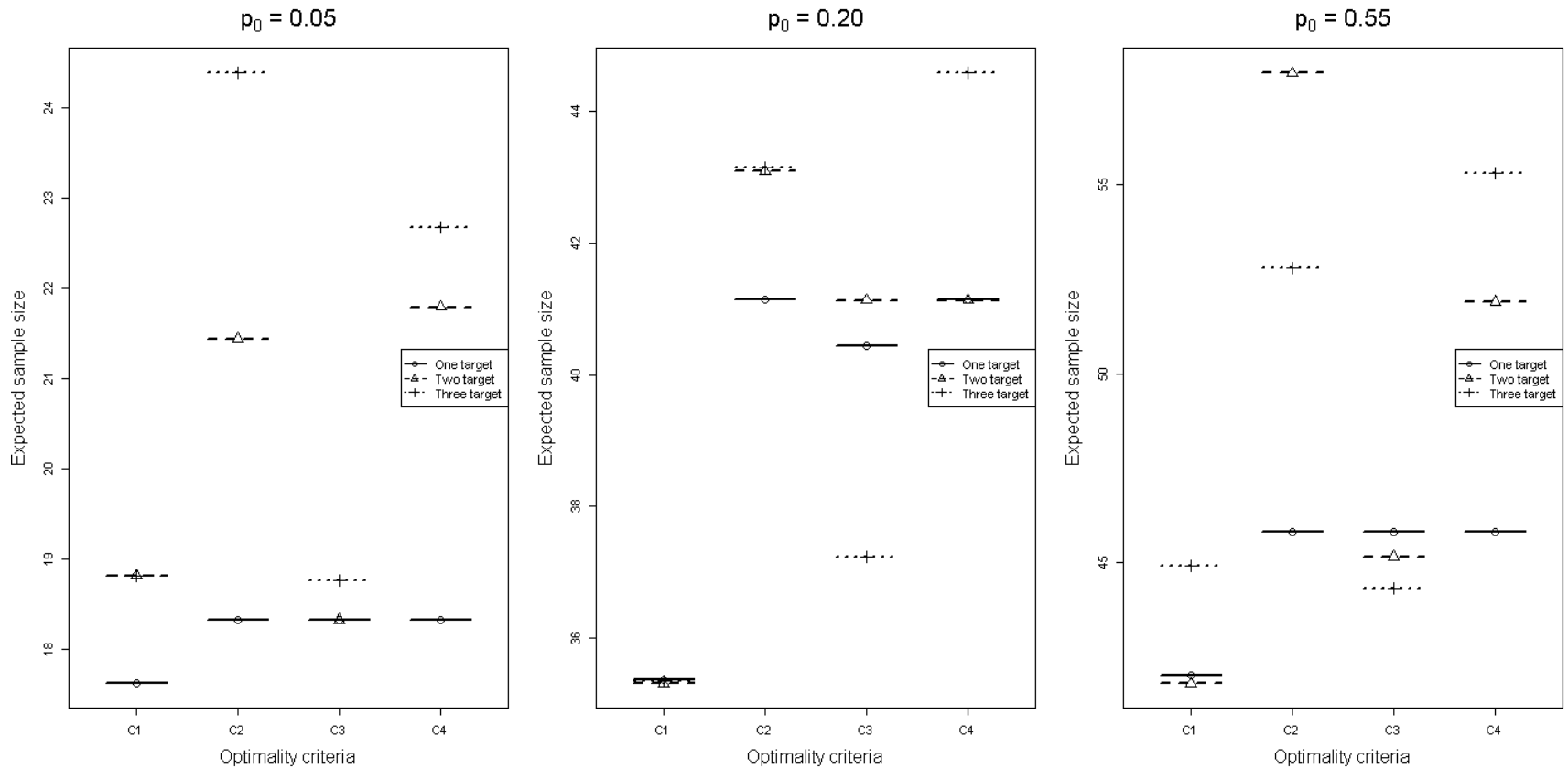
$P_0$	$P_1$	$P_2$	$P_3$	Optimal criteria	Method	Computation time (minute)
0.05	0.20	0.25	0.30	C1	G-DPSO	5.49
					D-DPSO	5.75
				C2	G-DPSO	5.32
					D-DPSO	5.64
				C3	G-DPSO	5.42
					D-DPSO	5.69
				C4	G-DPSO	5.3
					D-DPSO	5.66
0.20	0.35	0.40	0.45	C1	G-DPSO	1592.3
					D-DPSO	6.42
				C2	G-DPSO	1581.77
					D-DPSO	6.32
				C3	G-DPSO	1602.55
					D-DPSO	6.33
				C4	G-DPSO	1584.49
					D-DPSO	6.34
0.55	0.70	0.75	0.80	C1	G-DPSO	41962.35
					D-DPSO	6.49
				C2	G-DPSO	41384.16
					D-DPSO	6.39
				C3	G-DPSO	41835.97
					D-DPSO	6.45
				C4	G-DPSO	41498.29
					D-DPSO	6.38

## Two-stage single-arm phase 2 clinical trial designs

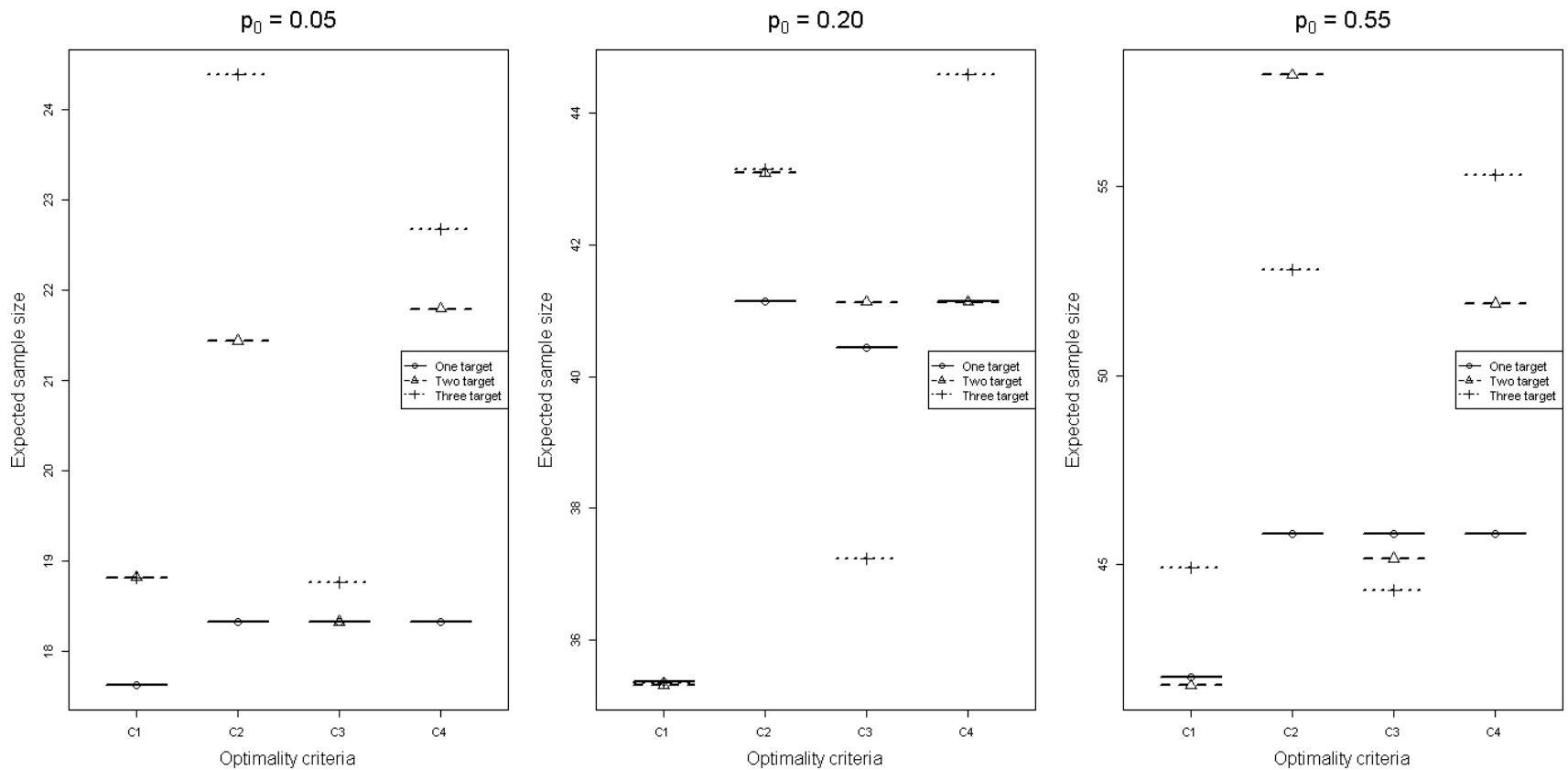
**Table S3.** Computation time corresponding **Table 3**; Various adaptive 2-stage optimal designs with three target responses when  $\alpha = 0.05$ ,  $\beta_1 = 0.20$ ,  $\beta_2 = 0.10$ , and  $\beta_3 = 0.05$ .

$P_0$	$P_1$	$P_2$	$P_3$	Optimal criteria	Method	Computation time (minute)
0.05	0.20	0.25	0.30	C1	G-DPSO	5.49
					D-DPSO	5.75
				C2	G-DPSO	5.32
					D-DPSO	5.64
				C3	G-DPSO	5.42
					D-DPSO	5.69
				C4	G-DPSO	5.3
					D-DPSO	5.66
0.20	0.35	0.40	0.45	C1	G-DPSO	1592.3
					D-DPSO	6.42
				C2	G-DPSO	1581.77
					D-DPSO	6.32
				C3	G-DPSO	1602.55
					D-DPSO	6.33
				C4	G-DPSO	1584.49
					D-DPSO	6.34
0.55	0.70	0.75	0.80	C1	G-DPSO	41962.35
					D-DPSO	6.49
				C2	G-DPSO	41384.16
					D-DPSO	6.39
				C3	G-DPSO	41835.97
					D-DPSO	6.45
				C4	G-DPSO	41498.29
					D-DPSO	6.38

**Figure 2.** Expected sample sizes under the null hypothesis for the 4 criteria C1–C4 with 1, 2 or 3 target alternatives estimated by D–DPSO for 3 scenarios (from left to right): (i)  $p_0 = 0.05, p_1 = 0.20, p_2 = 0.25, p_3 = 0.30$ , (ii)  $p_0 = 0.20, p_1 = 0.35, p_2 = 0.40, p_3 = 0.45$ , and (iii)  $p_0 = 0.55, p_1 = 0.70, p_2 = 0.75, p_3 = 0.80$ . Error rates were set at  $\alpha = 0.05, \beta_1 = 0.20, \beta_2 = 0.10$  and  $\beta_3 = 0.05$



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There is **no clear winner** that consistently requires the smallest expected sample sizes

# Motivation

- A single arm two-stage phase II trial to see the effect of head and neck cancer (HNC) on the incidence of obstructive sleep apnea (OSA).
- The maximum incidence rate of snoring and sleep apnea on healthy patients is **16.5% (i.e.,  $p_0 = 0.165$ )**.
- Neither historical nor preliminary data available, except that the incidence rate of OSA will be higher in HNC patients.
- An empirical range of the target response rates, from **24.38% to 39.00%**.
- Simon's two-stage design (80% power and 5% level) → the required sample sizes range from **30 to 197**
- Due to wide range of the target response rates, Lin and Shih's approach will not be able to cover the great uncertainty.

# Obstructive sleep apnea (OSA)

- To assess the effect of HNC on the incidence of OSA compared to healthy patients.
- $p_0 = 16.50\%$ ,  $p_1 = \mathbf{24.38\%}$ ,  $p_2 = 31.69\%$ ,  $p_3 = \mathbf{39.00\%}$
- $\beta_1 = 0.20$ ,  $\beta_2 = 0.15$ ,  $\beta_3 = 0.10$

Optimality criteria	$s_1/r_1/q_1/n_1$	$s/l$	$r/m$	$q/n$	$E(N p_0)$	$E(N p_1)$	$E(N p_2)$	$E(N p_3)$
OSA								
C1	2/8/9/21	39/188	13/55	10/39	136.92	167.28	157.91	124.73
C2 and C4	1/11/12/25	34/161	20/72	13/36	152.07	158.99	154.07	135.42
C3	1/8/9/17	37/177	12/58	10/35	144.40	166.73	167.70	153.87



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It can cover the wide variation of the total sample size (35~188)

## Phase II study: BREAK-2

- A multicenter, international, single-arm, phase II study (BREAK-2) was carried out to assess the overall response rate of dabrafenib from patients with BRAFV 600E mutationpositive metastatic melanoma (Ascierto et al. (2013)).
- The null hypothesis was set at  $p_0 = 0.25$  and the alternative hypothesis was set at  $p_1 = 0.40$ . The trial wanted to recruit at least **85** patients and the plan was to declare the treatment a success if at least 29 patients responded.
- The efficacy results show that **76** patients with BRAFV 600E mutationpositive metastatic melanoma were enrolled and 45 patients (**59%**) had a confirmed response.
- Although its parent phase I study (Falchook *et al.* (2012)) showed the same type of patients had a response rate of **50%**, this phase II study chose the response rate of **40%** as an alternative hypothesis by lowering the response rate of phase I study.
- However, based on the phase I study, it would be of benefit if the higher response rate was explored in addition to 40% because the final response rate of the phase II study was 59%.

## Two-stage single-arm phase 2 clinical trial designs

- $p_0 = 0.25$ ,  $p_1 = 0.40$ ,  $p_2 = 0.50$ , and  $p_3 = 0.55$
- $\beta_1 = 0.15$ ,  $\beta_2 = 0.10$ , and  $\beta_3 = 0.05$

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BREAK-2								
C1	4/10/11/19	26/80	14/44	12/34	51.522	72.216	65.961	58.879
C2 and C4	4/9/12/22	27/83	16/43	13/31	62.079	65.691	50.196	43.063
C3	2/7/9/13	25/77	15/44	14/39	55.526	70.032	66.463	62.186

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Optimality criteria	$s_1/r_1/q_1/n_1$	$s/l$	$r/m$	$q/n$	$E(N p_0)$	$E(N p_1)$	$E(N p_2)$	$E(N p_3)$
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- The total sample sizes at  $p_1 = 0.4$  is less than 85 (BREAK-2)
- The total sample size at  $p_3 = 0.55$  is 31~39, which is at least 46 patients less than 85 (BREAK-2)

# Summary

- A novel and effective nature-inspired stochastic population-based algorithm called discrete particle swarm optimization (DPSO) to find extended two-stage adaptive designs.
- Algorithms based on a greedy search invariably failed to find extended two-stage adaptive designs and an improved version of DPSO, called D-DPSO finds the optimum.
- When the problem is simplified to one or two target response rates, D-DPSO outperformed their peers by a wide margin.

Thank you for being patient!



# EM Algorithms

- Expectation (E) step
  - Use current parameters to estimate the missing data

$$Q(\theta) = E_{\mathbf{z}}[\log p(\mathbf{y}, \mathbf{z} | \theta) | \mathbf{y}] = \int_{-\infty}^{\infty} p(\mathbf{z} | \mathbf{y}, \theta_n) \log p(\mathbf{y}, \mathbf{z} | \theta) d\mathbf{z}$$

- Maximization (M) step
  - Use estimated missing data to perform ML/MAP parameter estimation

$$\theta_{n+1} = \arg \max_{\theta} Q(\theta)$$

- Repeat EM steps, until convergence



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## EM Algorithms: some limitations

- Its limiting position can strongly depend on its starting position
- Its speed of convergence can be slow
- It can converge to local maxima or saddle points
- Either E-step or M-step is intractable (no closed form available)
  - Pharmacokinetics/pharmacodynamics (PK/PD) models have nonlinear differential equations
- ...