



Welcome in Louvain-la-Neuve

History of Louvain-la-Neuve (Université Catholique de Louvain)

1968



1968



1970



1972



1972



1984



1985











The raise of Bayesian statistics in pharmaceutical development

How to organize the transition?

Boulanger Bruno | CSO Arlanda

EFSPI Leadership Meeting

12 July 2018

Louvain-la-Neuve

Agenda



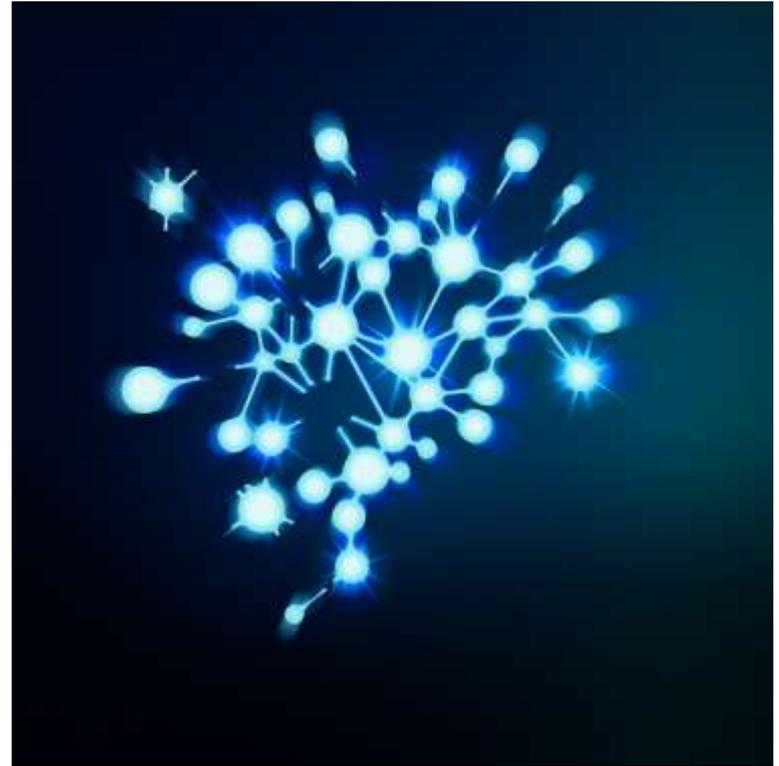
Survey

Drug Development as learning process

The reproducibility crisis

Bayesian reasoning

How to organize the transition ?

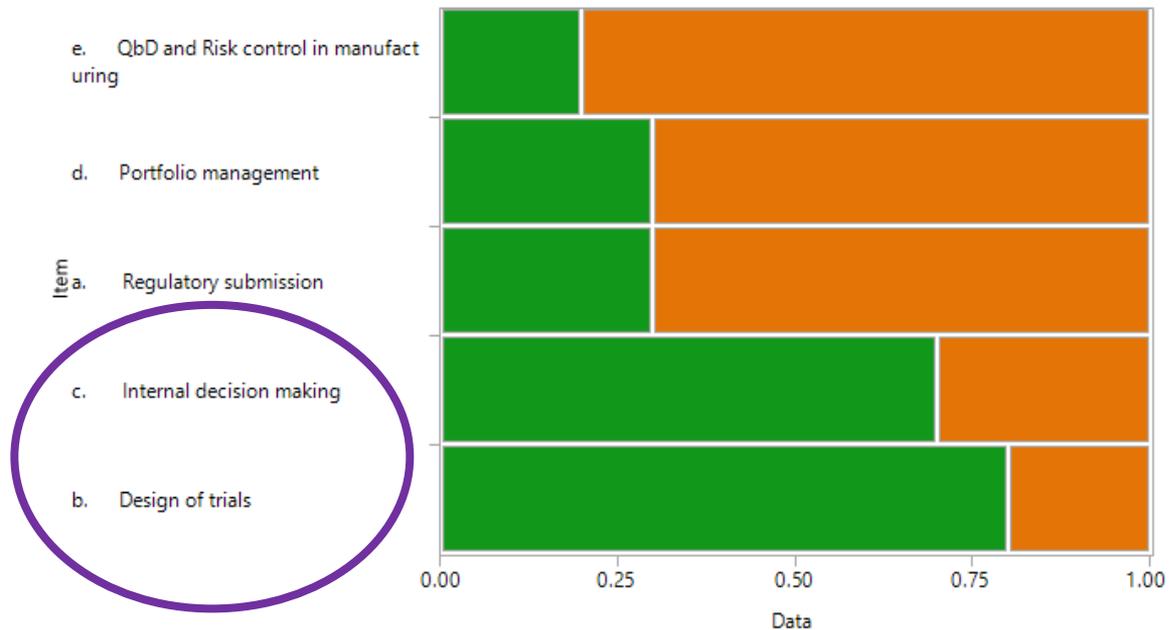


Survey about Bayesian BioStatistics

► Feedback from 11 companies

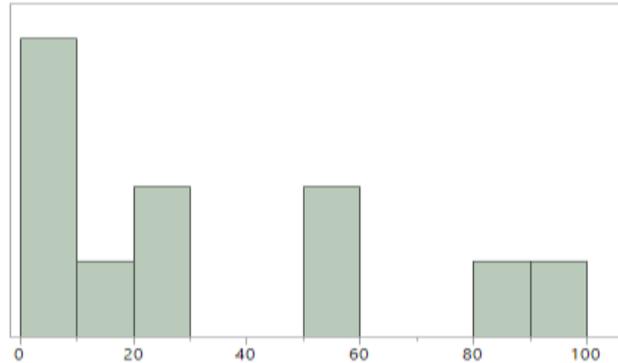
- Abbott
- Amgen
- BI
- Celgene
- ChiesiFarma
- Danone
- IQVIA
- Janssen
- Roche
- Servier
- UCB

If you apply Bayesian statistics, is it for:

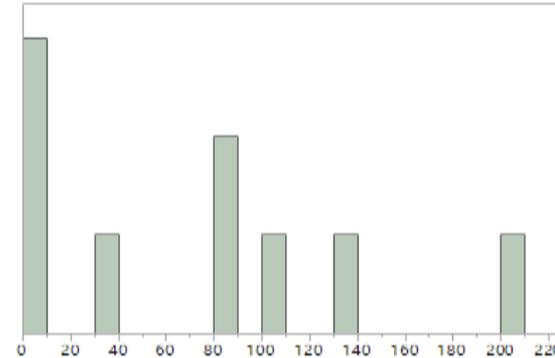


Training in Bayesian Biostatistics

▶ Percentage of trained statisticians



Number of statisticians



- ▶ Trained, aware, but maybe very little experience
- ▶ About 50% of statisticians have at least some knowledge. (334/648)
- ▶ 11 / 11 companies say they plan to train their statisticians
- ▶ 9 / 11 say they also plan to train the non-statisticians
- ▶ 3 / 11 already attended a dedicated conference in Bayesian BioStatistics

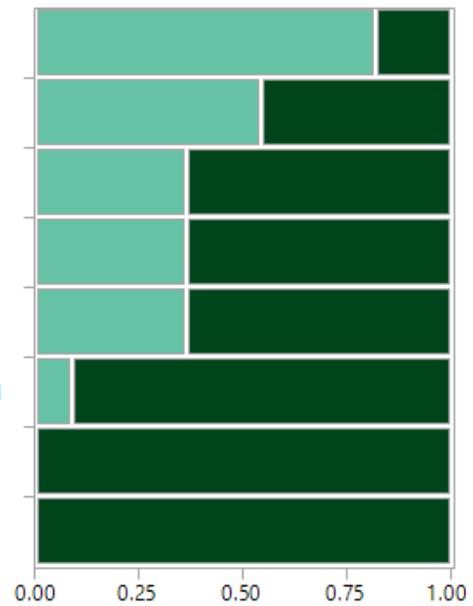
The main road blocks in use of Bayesian statistics

Sounds like a priority

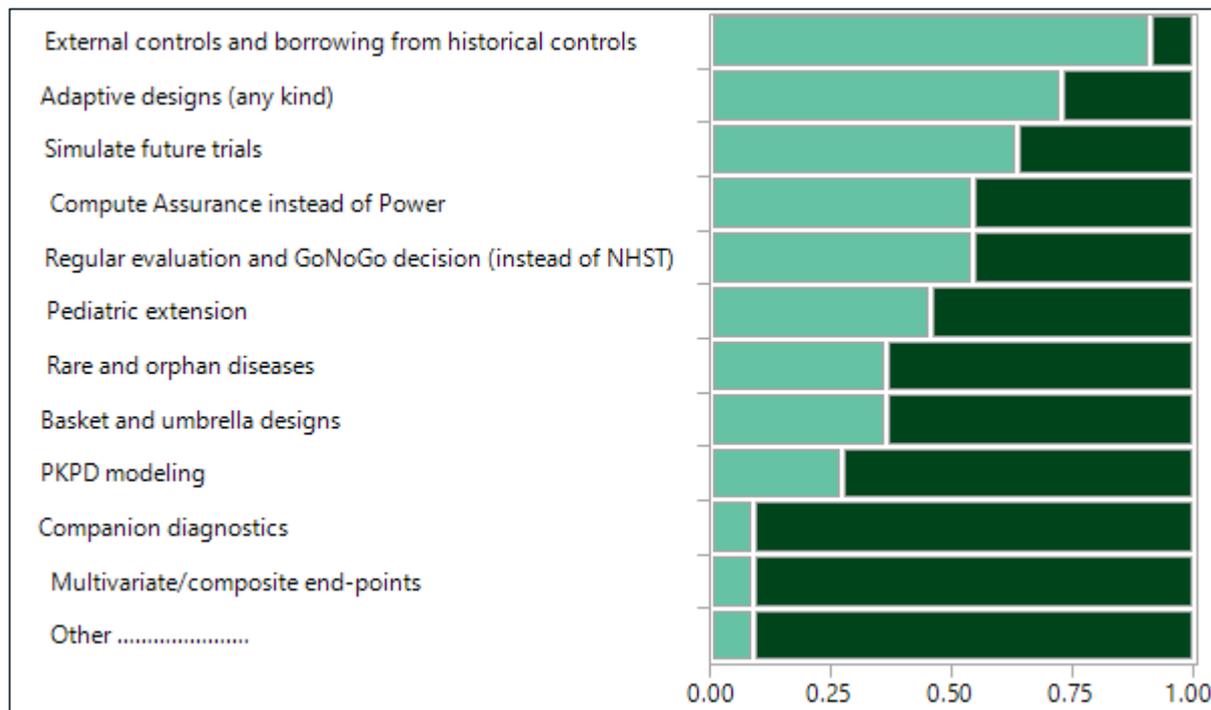
Suggests more practical and applied trainings are needed

Suggests global perception is appropriate

- The perceived acceptance by regulatory authorities
- Statisticians are not trained in applying the concepts
- The availability of programming languages /software tools
- Lack of necessary capacities / too complex
- Type I error is not controlled
- Difficulty to assess the convergence when MCMC methods are used
- It doesn't bring added value compare to NHST
- Estimates are biased

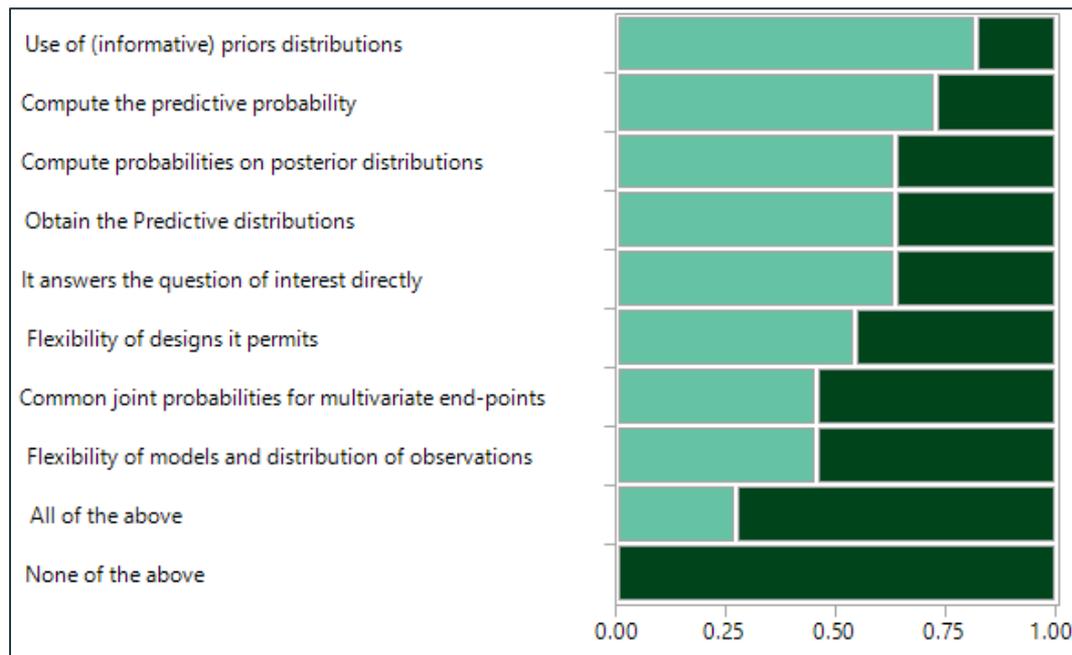


Bayesian statistics are used for



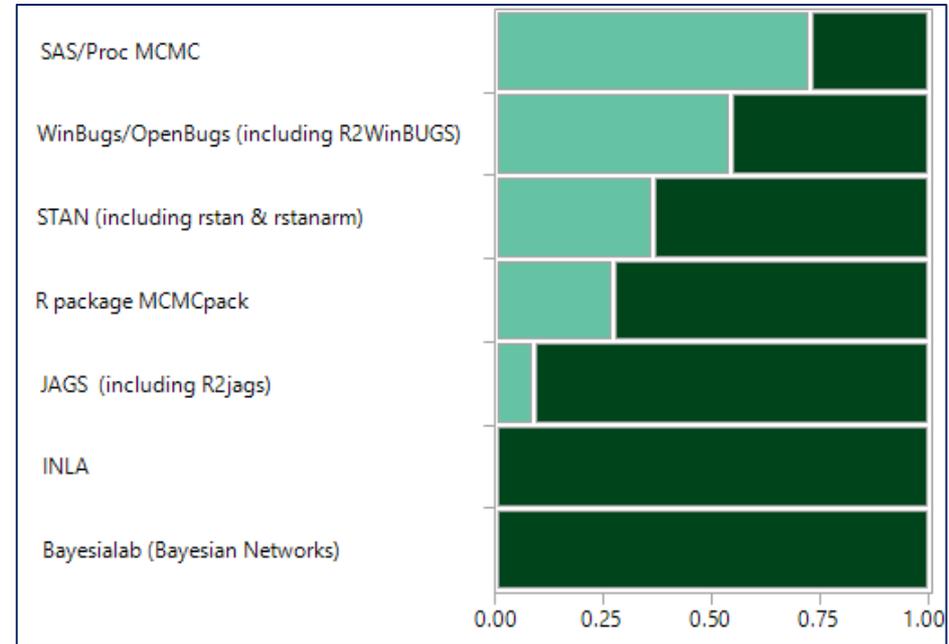
The greatest opportunities of Bayesian statistics

► The future is bright ;-)



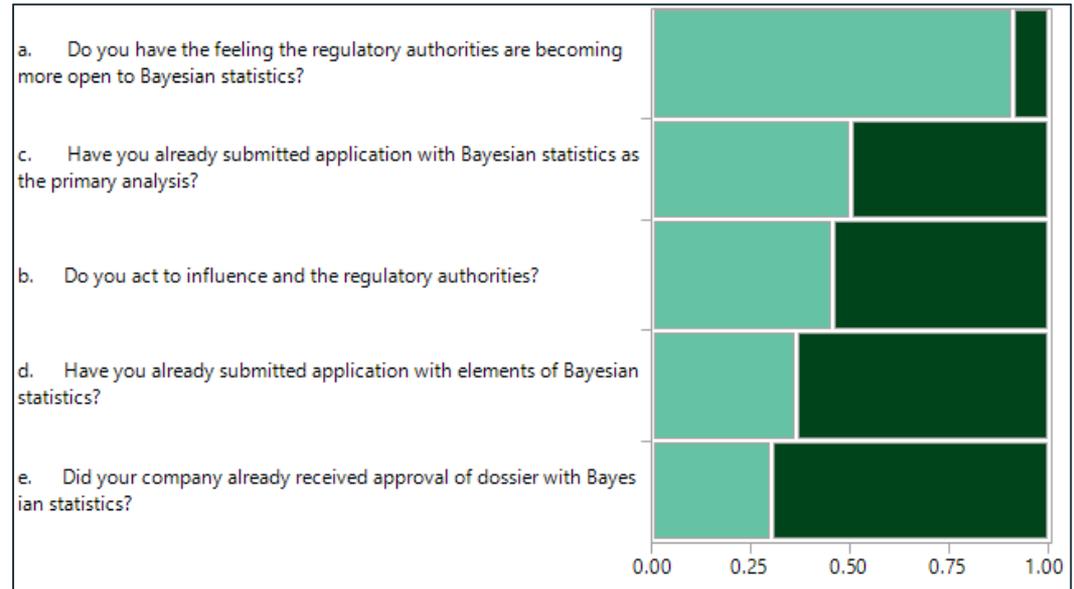
Most common Bayesian language

- ▶ WinBugs is still alive !
- ▶ SAS managed to reach first rank in few years
- ▶ STAN is already in the place

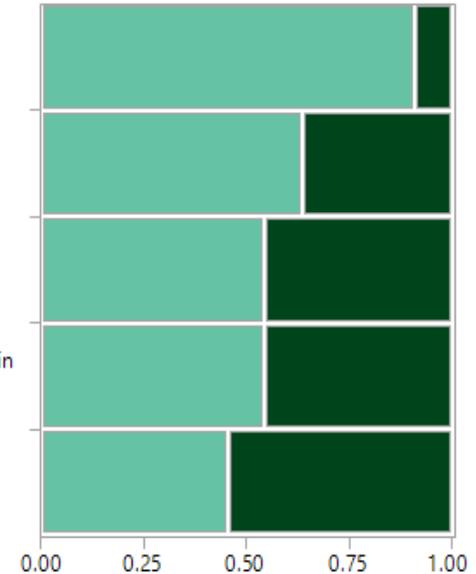
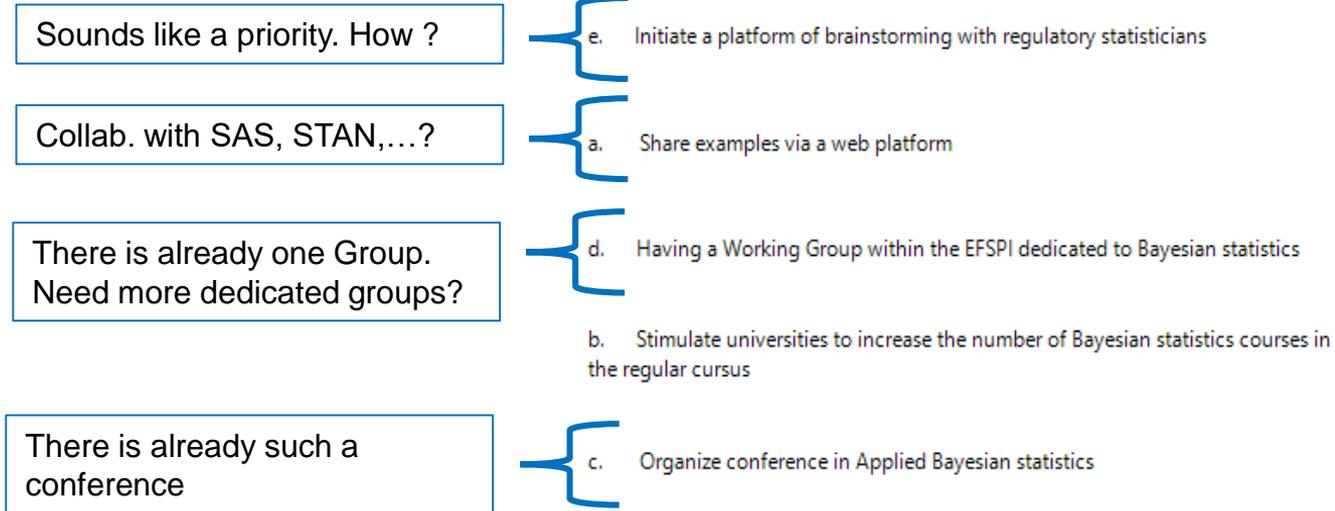


Regulatory acceptance

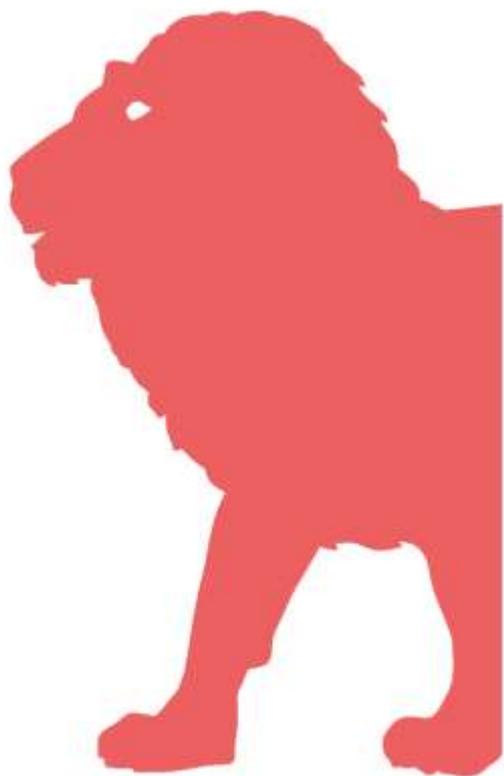
- ▶ The regulatory world is moving forward
- ▶ FDA is perceived as being ahead of EMA with that respect
- ▶ Companies keep the momentum



How to move to the next stage ?







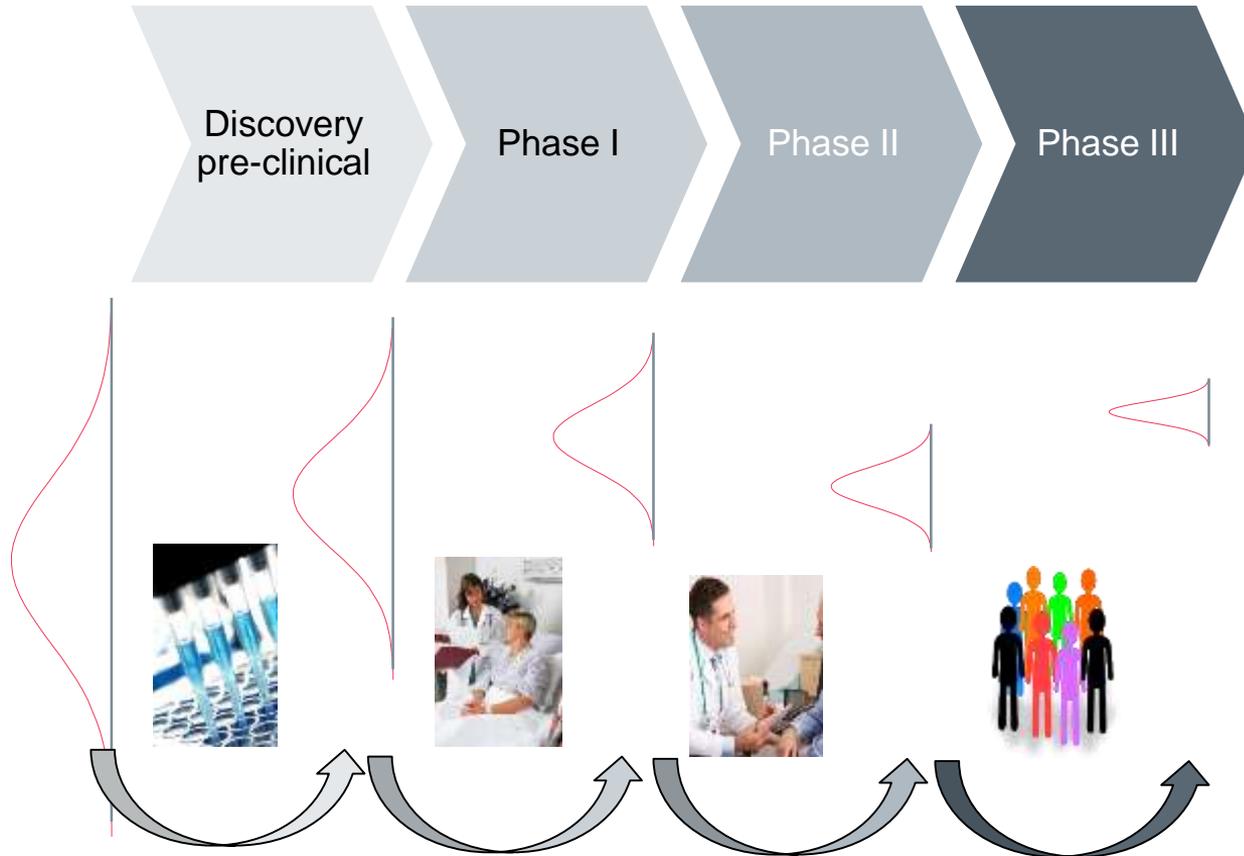
BAYES

BAYESIAN BIOSTATISTICS

LYON

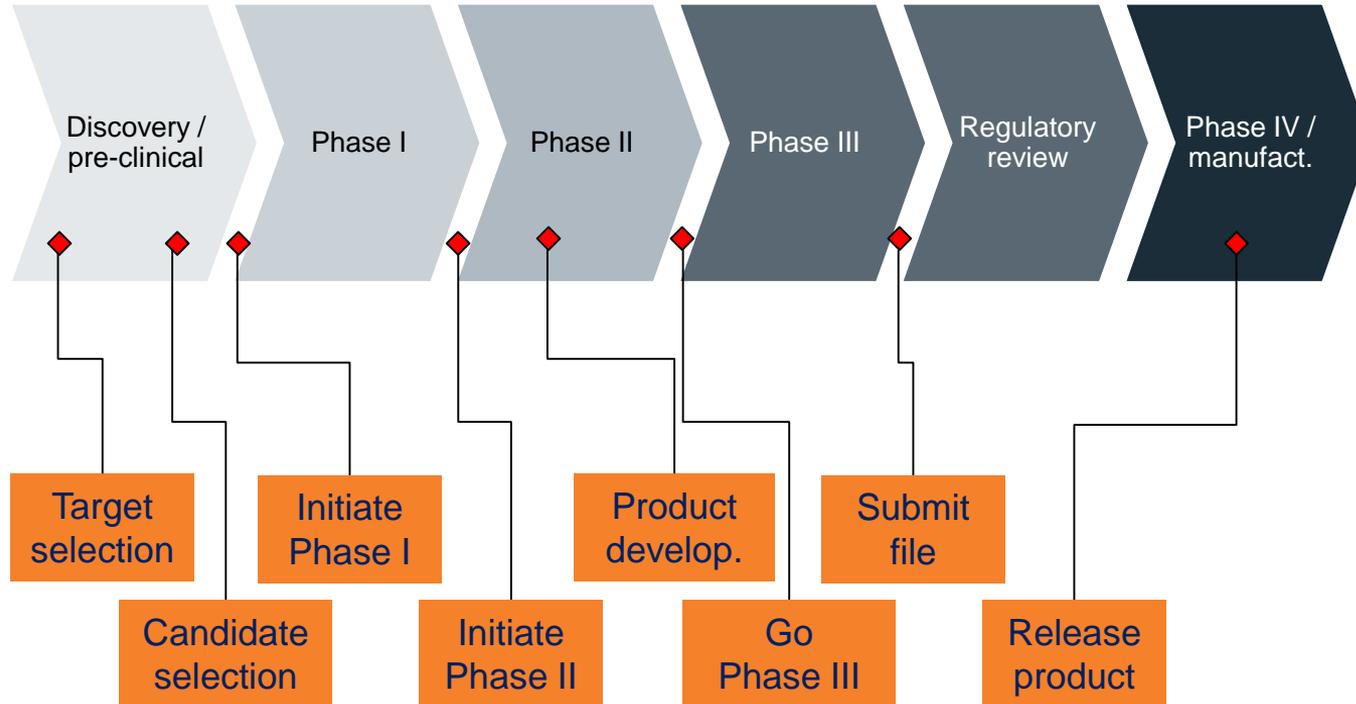
2019
21-24 MAY

Drug development is a learning process



Connecting the dots:
Bayesian inference
is a learning process

Decisions through drug development and sales



The objective: is my treatment effective ?

How to make a decision ?

A

What is the probability of obtaining the observed data, if the treatment is not effective?

B

What is the probability that the treatment is effective, given the observed data?

Two different ways to make a decision based on

A

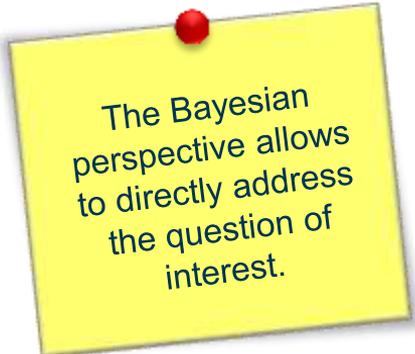
Pr(**observed data** | **treatment is not effective**)

- Better known as the **p-value** concept
- Used in the **null hypothesis** test (or decision)
- This is the likelihood of the data assuming an hypothetical explanation (e.g. the “null hypothesis”)
- **Classical statistics** perspective (Frequentist)

B

Pr(**treatment effective** | **observed data**)

- **Bayesian** perspective
- It is the probability of efficacy given the data



The Bayesian perspective allows to directly address the question of interest.

One size does not fit all....What's the question?



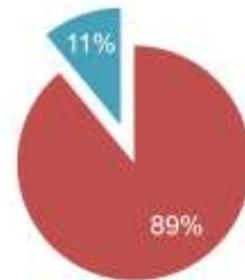
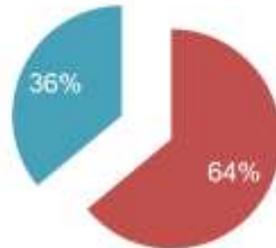


Reproducibility crisis

The “Bayer” and “Amgen” publications



Failure to replicate published pre-clinical academic results



CAMARADES: Bringing evidence to translational medicine

Nature, 2014



STATISTICAL ERRORS

P values, the 'gold standard' of statistical validity, are not as reliable as many scientists assume.

BY REGINA NUZZO

March 2016:

REPRODUCIBILITY

Statisticians issue warning on P values

Statement aims to halt missteps in the quest for certainty.

BY MONYA BAKER

Official reminder of ASA

Misuse of the P value — a common test for judging the strength of scientific evidence — is contributing to the number of research findings that cannot be reproduced, the American Statistical Association (ASA) warned on 8 March. The group has taken the unusual step of issuing principles to guide use of the P value, which it says cannot determine whether a hypothesis is true or whether results are important.

This is the first time that the 177-year-old ASA has made explicit recommendations on such a foundational matter, says executive director Ron Wasserstein. The society's members had become increasingly concerned that the P value was being misapplied, in ways that cast doubt on statistics generally, he adds.

cannot indicate the importance of a finding; for instance, a drug can have a statistically significant effect on patients' blood glucose levels without having a therapeutic effect.

Giovanni Parmigiani, a biostatistician at the Dana Farber Cancer Institute in Boston, Massachusetts, says that misunderstandings about what information a P value provides often crop up in textbooks and practice manuals. A course correction is long overdue, he adds. "Surely if this happened twenty years ago, biomedical research could be in a better place now."

FRUSTRATION ABOUNDS

Criticism of the P value is nothing new. In 2011, researchers trying to raise awareness about false positives gamed an analysis to reach a statistically significant finding: that listening to music by the Beatles makes undergraduates younger

Key statement from ASA Press Release

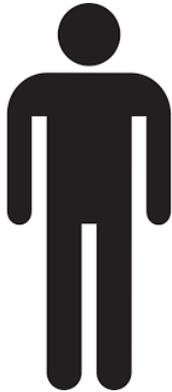
- ▶ A p-value, or statistical significance, does not measure the size of an effect or the importance of a result.
- ▶ Scientific conclusions and business or policy decisions should not be based only on whether a p-value passes a specific threshold.
- ▶ By itself, a p-value does not provide a good measure of evidence regarding a model or hypothesis.

- ▶ P-values can indicate how incompatible the data are with a specified statistical model.
- ▶ P-values do not measure the probability that the studied hypothesis is true, or the probability that the data were produced by random chance alone.
- ▶ Proper inference requires full reporting and transparency.

Bayesian reasoning

► The diagnostic test example

Cancer ? → diagnostic test → result



A problem of decision making

- ▶ The accuracy of a diagnostic test is assessed as follows:
 - Sensitivity: $\Pr(\text{positive result} \mid \text{cancer})$
 - Specificity: $\Pr(\text{negative result} \mid \text{no cancer})$

In practice:

Given that the diagnostic test result is positive, what is the probability you truly have cancer?

$$\Pr(\text{cancer} \mid \text{positive result}) = ?$$

Example

sensitivity= 86%

Breast cancer

Diagnostic test

Yes (1)

Positive (1)

prevalence= 1%

Negative (0)

100 women

No (99)

Positive (12)

specificity= 88%

Negative (87)

$$\Pr(\text{cancer} \mid \text{positive result}) = \frac{1}{12 + 1} = 0.077$$

How can that be so low?

The small proportion of errors for the large majority of women who do not have breast cancer swamps the large proportion of correct diagnoses for the few women who have it.

The probability of interest depends on the underlying prevalence of the disease.



Agresti, A. (2007). *An Introduction to Categorical Data Analysis*. Wiley, 2nd ed.

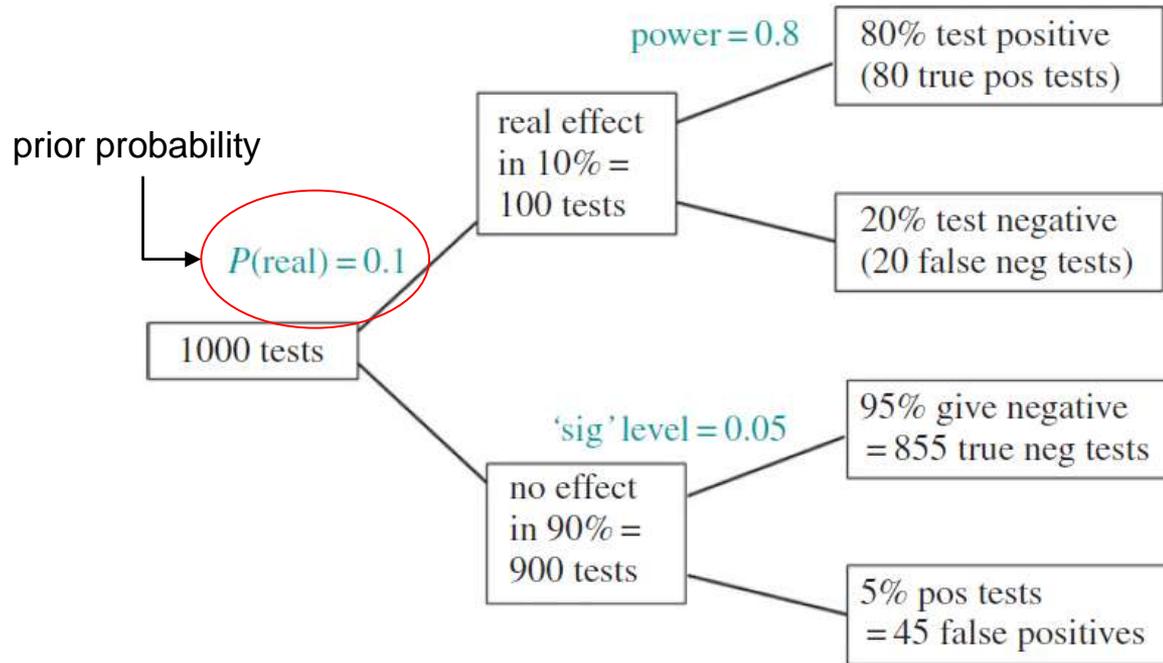
Colquhoun, D. (2014). An investigation of the false discovery rate and the misinterpretation of p -values. *R. Soc. Open sci.* 1(3): 140216

The clinical trial analogy



$$\Pr(\text{drug effective} \mid \text{data}) = ?$$

“If you use $p = 0.05$ to suggest that you have made a discovery, you will be wrong at least 30% of the time.”

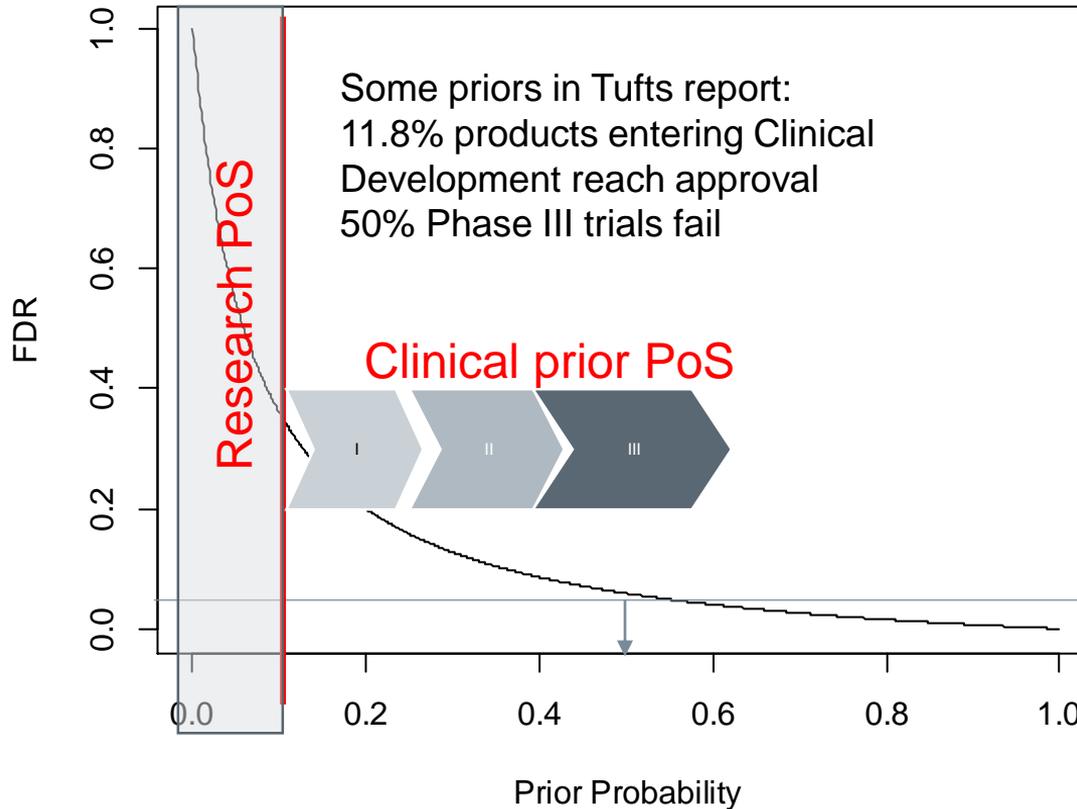


$$\Pr(\text{real effect} \mid p < 0.05) = \frac{80}{80 + 45} = 0.64$$



Colquhoun, D. (2014). An investigation of the false discovery rate and the misinterpretation of p -values. *R. Soc. Open sci.* 1(3): 140216.

False Discovery Rate for $p < 0.05$, power = 0.8 as function of Prior Probability



Some statisticians said....

- ▶ "The most important task before us in developing statistical science is to demolish the P-value culture, which has taken root to a frightening extent in many areas of both pure and applied science and technology."
Nelder, J. A. 1999. Statistics for the millennium. Statistician 48:257–269.
- ▶ “Scientific conclusions and business or policy decisions should not be based only on whether a p-value passes a specific threshold.”
Ron Wasserstein, President American Statistical Association, March 2016
- ▶ “... we recommend abandoning the null hypothesis significance testing paradigm entirely, leaving p-values as just one of many pieces of information with no privileged role in scientific publication and decision making.”
McShane, Gal, Gelman, Robert & Tackett, 21SEP2017

Meeting at JSM in 2016

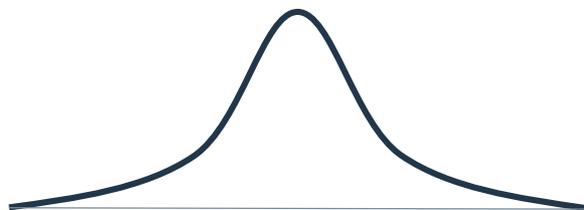
“FDA is facing difficulties to recruit statisticians trained in Bayesian statistics. Why do you (academic) continue to train all statisticians almost exclusively in Null Hypothesis Significance Testing ?”



Bayesian inference is the mechanism used to update the state of knowledge

prior information

$$p(\theta)$$



+

data information

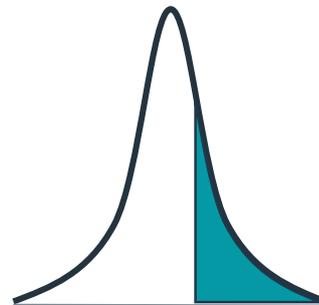
$$p(\text{data}|\theta)$$



\propto

posterior information

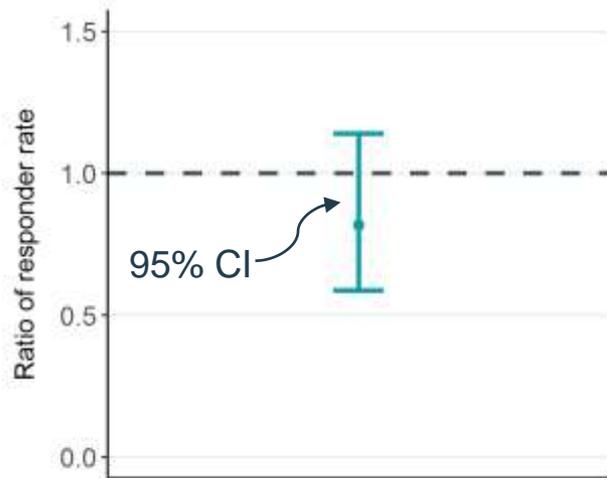
$$p(\theta|\text{data})$$



The process to arrive at a posterior distribution makes use of Bayes' formula.

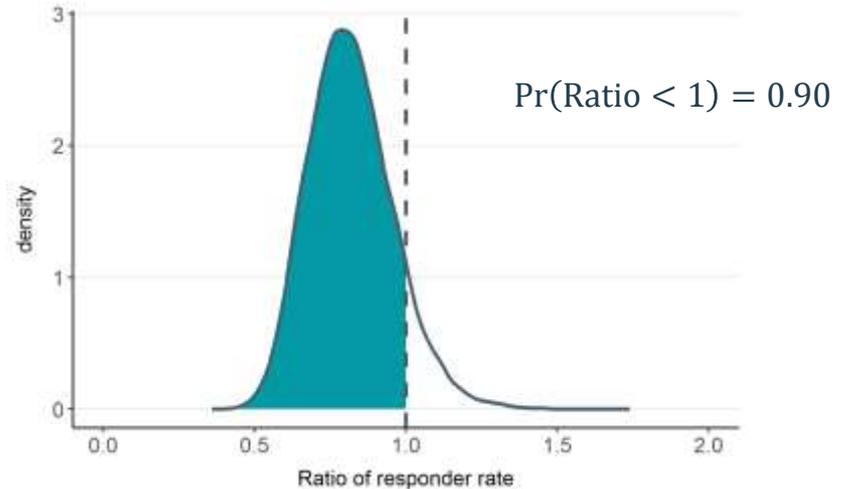
Example: Ratio of two proportions (2/2)

frequentist approach



→ With a frequentist analysis, confidence intervals are calculated using **normal approximation**.

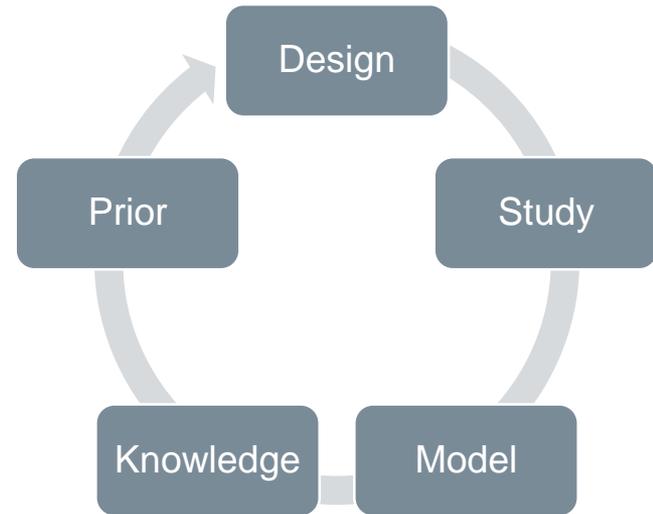
bayesian approach



→ With a Bayesian analysis, posterior distribution of the ratio is **easily obtained from a sample of the** posterior distribution of the ratio.

Statistics-Based Drug Development with Bayesian statistics

- ▶ Bayesian statistics became popular in drug development with Adaptive Designs
- ▶ Prior knowledge is used to make the trial design more effective and informative
- ▶ It's a key player in a **Statistical** Model-Based Drug Development strategy

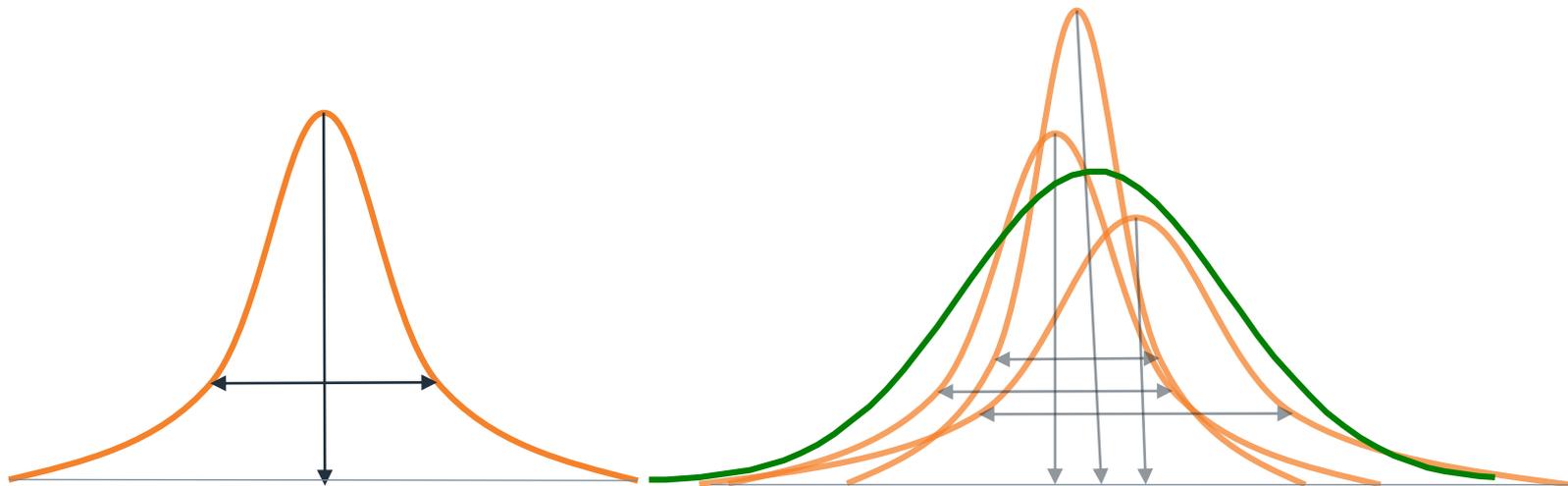


Design future trials: Simulations VS predictions

Simulations

Predictions

Predictions takes into account the uncertainty in estimating the model parameters.



Power vs assurance (1/3)

independent samples t-test ($H_0: \mu_1 = \mu_2$ vs $H_1: \mu_1 \neq \mu_2$)

frequentist approach (power)

- ▶ A power calculation takes a particular value of the effect within the range of possible values given by H_1 and poses the question: **if this particular value happens to obtain**, what is the probability of coming to the correct conclusion that there is a difference?

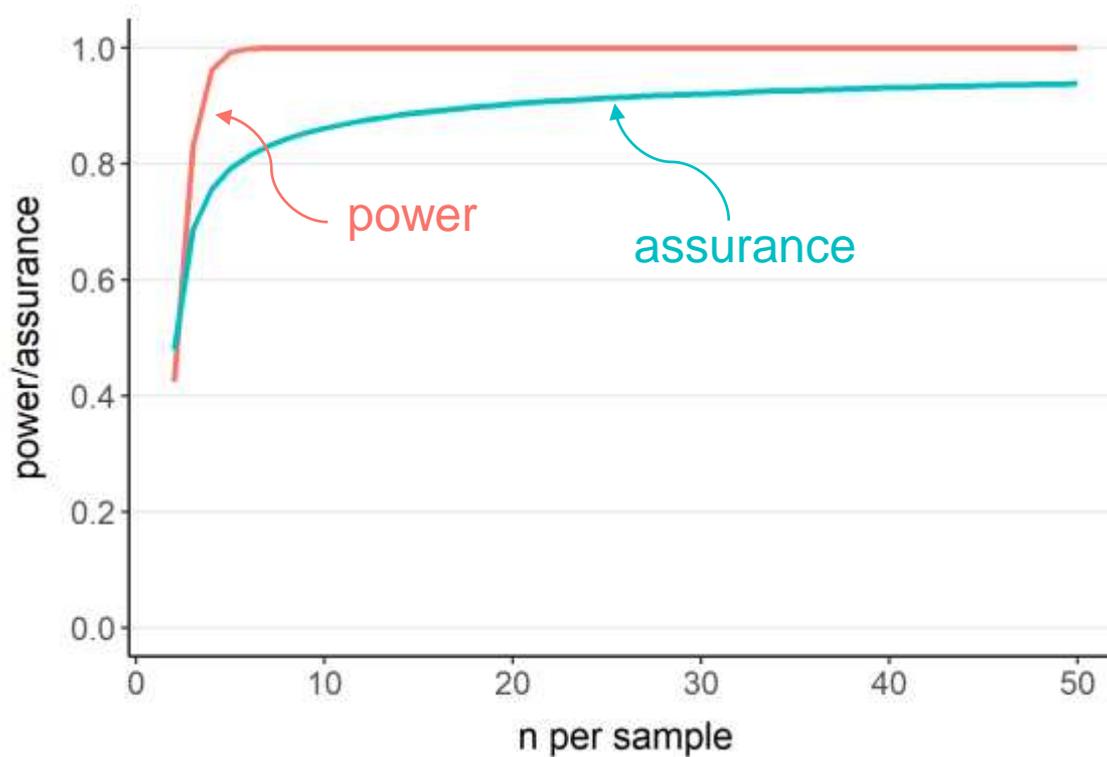
assumptions:

- ▶ $\mu_1 = 100$;
- ▶ $\mu_2 = 120$;
- ▶ $\sigma_1^2 = \sigma_2^2 = 39$


very strong priors!

Power vs assurance (3/3)

independent samples t-test ($H_0: \mu_1 = \mu_2$ vs $H_1: \mu_1 \neq \mu_2$)



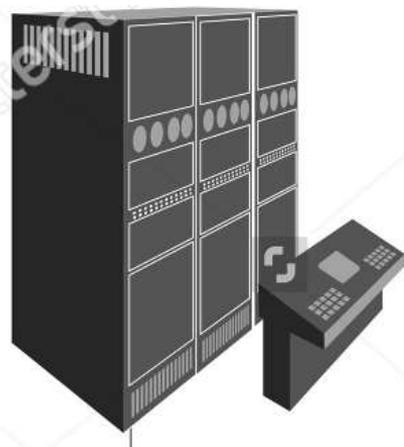
Why now and not before?



T. Bayes.

1702 - 1761

We now have computing power and more languages to apply Bayesian statistics



"WHAT'S THE USE? EVERYONE HAS HIS OWN PC FUTURE-PROBABILITY PROGRAM THESE DAYS."



1990

2000s

2010s



Stan

Regulatory point of view

- ▶ 2010 - Guidance for medical device clinical trials

**Guidance
for Industry and FDA Staff
Guidance for the Use of
Bayesian Statistics in
Medical Device Clinical Trials**

Document issued on: February 5, 2010

A BILL

To accelerate the discovery, development, and delivery of
21st century cures, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “21st Century Cures
5 Act”.

TITLE III—MODERNIZING CLINICAL TRIALS

Subtitle A—Clinical Research Modernization

Sec. 3001. Protection of human subjects in research; applicability of rules.

Sec. 3002. Use of institutional review boards for review of investigational device
exemptions.

Subtitle B—Broader Application of Bayesian Statistics and Adaptive Trial
Designs

U.S. Department of Health and Human Services

FDA U.S. FOOD & DRUG ADMINISTRATION

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Promoting the Use of Complex Innovative Designs in Clinical Trials

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On March 20th, FDA is conducting a public workshop to discuss the use of complex innovative designs (CID) in clinical trials of drugs and biological products to inform regulatory decision making.

This meeting will inform development of a guidance document as required by the 21st Century Cures Act (Cures Act) and is being conducted to meet the performance goal of convening a public workshop on CID included in the sixth authorization of the Prescription Drug User Fee Act (PDUFA VI), part of the FDA Reauthorization Act (FDARA).

PHARMALEX | © Pharmalex | Arlanda

Complex Innovative Designs

2018

- Adaptive designs that are complex, due to:
 - Adaptations on multiple factors, and/or
 - Requiring simulations to determine operating characteristics
- Other designs incorporating
 - Innovative use of external data
 - Innovative criteria for decision-making
 - Innovative collaborative efforts

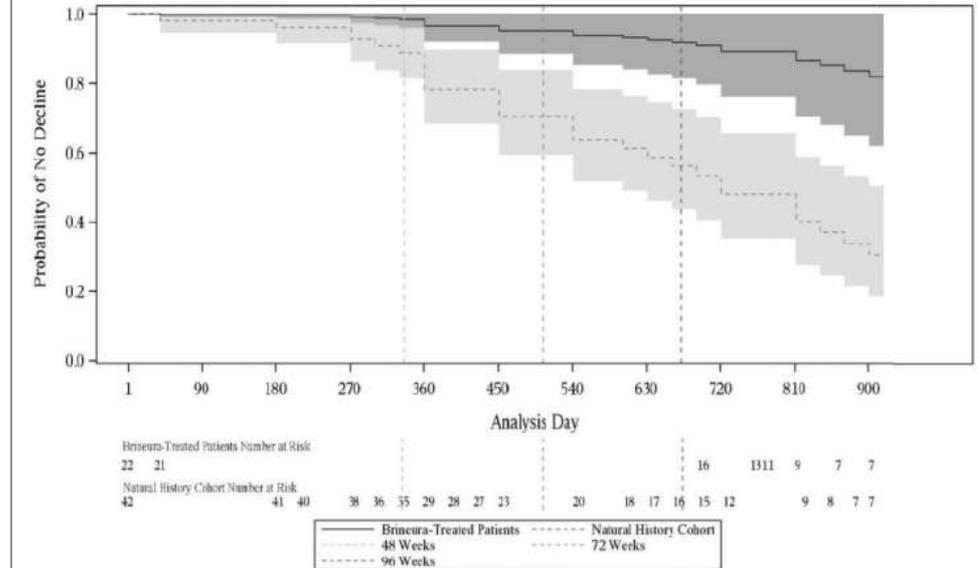
Historical control

2018

Rare Disease Example

The screenshot shows the FDA website with a news release titled "FDA approves first treatment for a form of Batten disease". The article, dated April 27, 2017, discusses the approval of Brincora for patients with a specific form of Batten disease. It mentions that the treatment is for patients 3 years of age and older with late infantile neuronal ceroid lipofuscinosis type 2 (L2NL2), also known as Biallelic progranulin-1 (PGRN1) deficiency. The text states that the FDA is committed to approving new and innovative therapies for patients with rare diseases, particularly where there are no approved treatment options.

Figure 7. Estimated Time to Unreversed (Sustained) 2-Category Decline or Unreversed Score of Zero in Motor Domain for Symptomatic Pediatric Patients in the Brincora Single-Arm Clinical Study with Extension and for Patients in a Natural History Cohort (Based on the Cox Proportional Hazards Model Adjusting for Covariates)



Bayesian Applications

2018

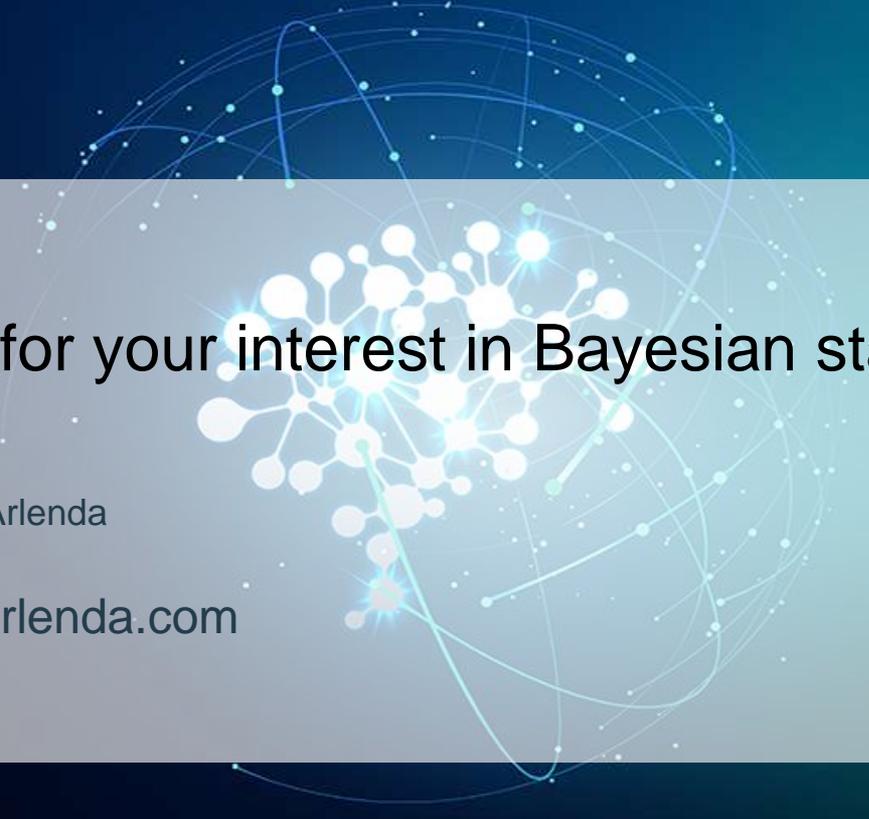
- Safety monitoring
 - Large CV risk studies that leverage control patient data from other sources via Bayesian adaptive designs
- Oncology
 - Early phase dose-finding trial designs, e.g., CRM
 - Bayesian adaptive trials that use intermediate or accelerated approval endpoints for decision-making
- Rare diseases
 - Incorporate prior information from early phase trials
 - Use information about disease progression in analytical model
 - Compute shrinkage estimators of effects in rare subsets of disease
 - Incorporate prior information from adult trials to improve efficiency of pediatric trials

Conclusions

What's Next ?

- ▶ There is a clear move for a broader use and acceptance of Bayesian statistics
- ▶ How to ensure all actors will evolve at the same pace?
 - Collaborate with Regulatory authorities seems a priority
 - Share more applied examples (vertical)
 - Extend the scope of application (horizontal)
- ▶ Actions to be taken by EFSPi
 - Already one WG ongoing
 - More focused WG ?
 - What are the priorities ?
 - How to involve EMA ?

- ▶ Your turn!



Thank you for your interest in Bayesian statistics

Boulanger Bruno | CSO Arlenda

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