

Efficient recruitment strategies in randomised controlled trials with continuous outcomes

Tibor Schuster

John B. Carlin, Katherine J. Lee

Clinical Epidemiology and Biostatistics Unit

Melbourne Children's Trial Centre



Outline

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- Variance decomposition
- Assumptions
- Efficient recruitment strategies
- Example: atopic dermatitis in infants
- Simulation study results
- Summary and conclusions



Sample size planning in RCTs



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informing



Variance decomposition

Group sample size: $n = \frac{2\sigma^2(Z_\beta + Z_{\alpha/2})^2}{\Delta^2}$

Define: Y a continuous outcome variable

T a binary treatment variable

X a categorical subgroup variable with levels $j=1, \dots, k$

$$\sigma_t^2 = \underbrace{\text{Var}(E[Y|X, T = t])}_{\text{between group variation}} + \underbrace{E(\text{Var}[Y|X, T = t])}_{\text{(expected) within group variation}}$$

between group variation (expected) within group variation

$$= \sum_{j=1}^k p_{jt} (\mu_{jt} - \mu_{.t})^2 + \sum_{j=1}^k p_{jt} \sigma_{jt}^2$$

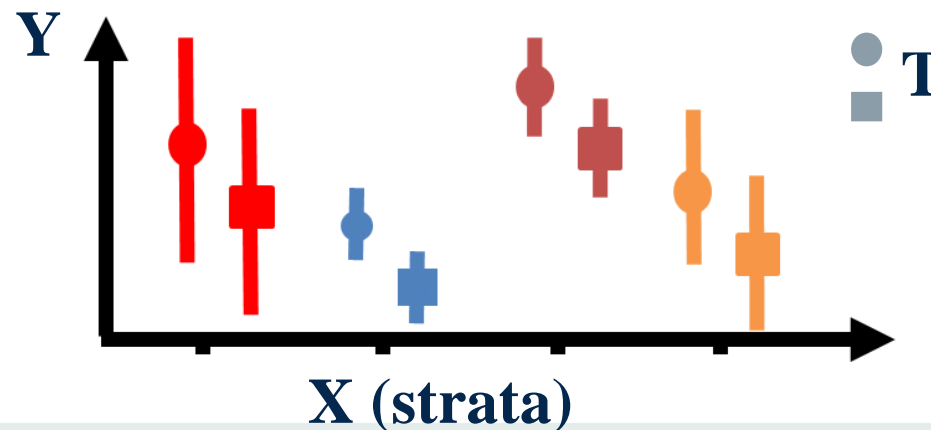
with

$$\mu_{.t} = \sum_j p_{jt} \mu_{jt} \quad p_{jt} = \Pr(X = j | T = t)$$



Assumptions

- continuous outcome Y (effect estimate: difference in means)
- X constitutes a stratification variable (predictor for Y), rand. within levels of X
- effect **homogeneity** across the k strata: $\Delta_j = \Delta$ for $j=1, \dots, k$
- variance **heterogeneity** across strata: $\sigma_i \neq \sigma_j$ for at least one strata pair $\{i, j\}$
- $p_{jt} = \Pr(X = j | T = t) = \Pr(X = j) = p_j$; $\tau_j^2(p) := (\mu_{jt} - \mu_{.t})^2$



Efficient recruitment strategies



Minimise the following function (representation of the common variance):

$$f(p_1, \dots, p_k) = \sum_{j=1}^k p_j \tau_j^2(p) + \sum_{j=1}^k p_j \sigma_j^2$$

Considering $k+1$ constraint functions:

$$g_0(p_1, \dots, p_k) = \sum_{j=1}^k p_j = 1$$

$$g_j(p_j) = 0 < l_j \leq p_j \text{ for } j = 1, \dots, k$$

l_j ensures minimum representation of $X = j$

$$\text{optimum strategy} = \operatorname{argmin} f(p_1, \dots, p_k | g_0, g_j, l_j, j = 1, \dots, k)$$

Efficient recruitment strategies



- there might exist more than one optimum solution
- variance / sample size savings may only differ marginally between a number of strategies
- some recruitment strategies are preferred / easier to follow than others
- the function arguments are strata sample proportions: depending on the total sample size, over precision is point less

Ideally:

- overview of all possible recruitment strategies:
selection of most efficient and best feasible alternatives



Good news:

- number of strata k commonly small
- if we use discrete scale for p_j (e.g. 0.1, 0.2, ..., 0.9), prob. dist. constraint $\sum p_j = 1$ reduces number of possibilities e.g. 36 for $k=3$, 80 for $k=4$ and 126 for $k=5$

Example data: atopic dermatitis

Grueber et al. *Allergy* 2007; 62 (11) : 1270-1276.

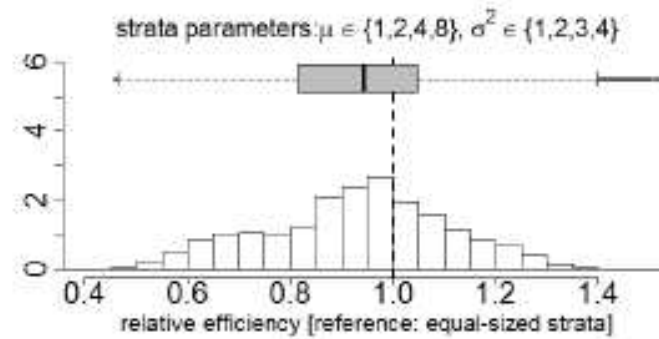
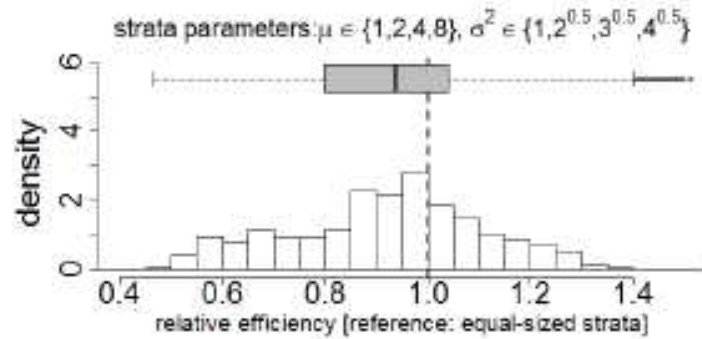
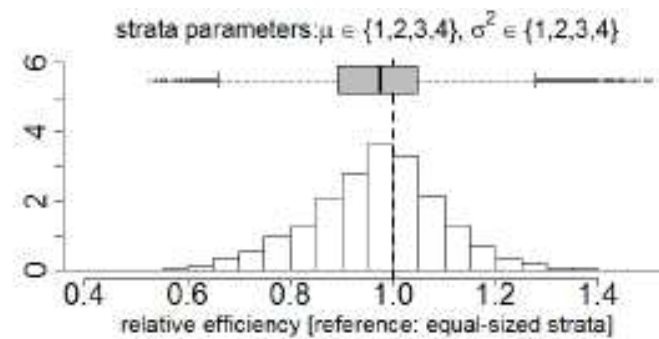
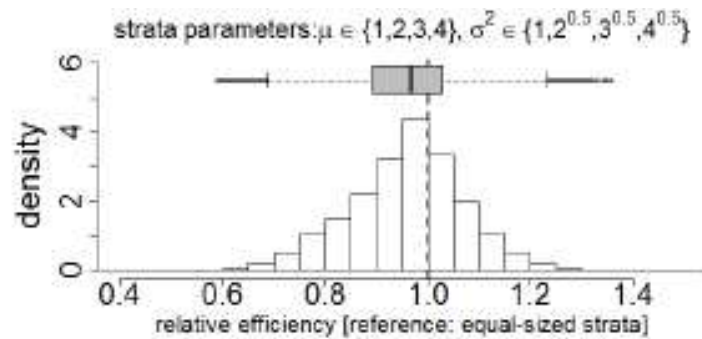


| Stratum no. (j) | | Estimated group means (standard deviations) in the four study strata |
|-----------------|---|--|
| 1 | Baseline SCORAD index \leq 25 & no use of rescue medication | 15 (1.5) |
| 2 | Baseline SCORAD index \leq 25 & use of rescue medication | 20 (3) |
| 3 | Baseline SCORAD index $>$ 25 & no use of rescue medication | 29 (3) |
| 4 | Baseline SCORAD index $>$ 25 & use of rescue medication | 36 (4) |
| | Total | 25 (9) |

standard sample size calculation

$\sigma=9$; $\Delta =5$;
 $\alpha=0.05$; $\beta=0.20$
 $\rightarrow n_{\text{group}}= 52$

Simulation study results



Summary and conclusion



- strata representation matters
- given effect homogeneity assumption (**scale dependent!**) strata allocation can be efficiently chosen: maximising precision of the effect estimate / minimising sample size
- outcome statistics (not only effect estimates) should be reported for stratification factor levels



Thank You