

**Design evaluation and optimisation in  
multi-response nonlinear mixed effect models  
with cost functions:  
Application to the pharmacokinetics of zidovudine  
and its active metabolite**

**Caroline Bazzoli, Sylvie Retout, France Mentré**

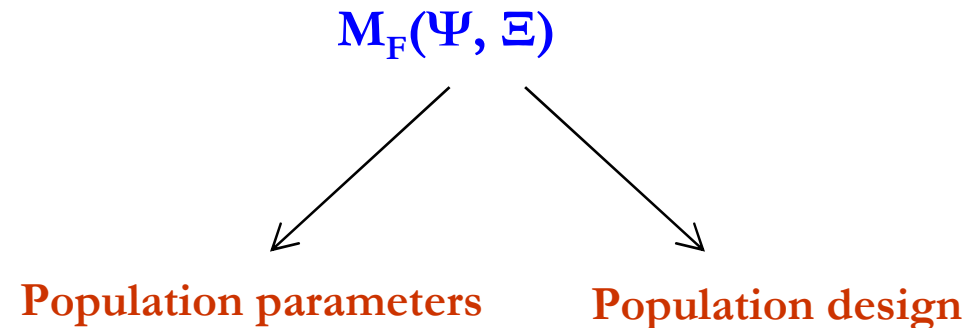
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# Design in nonlinear mixed effects models (NLMEM)

- Importance of the choice of the design
  - Influence the precision of parameter estimation
  - Few samples per patient → informative samples
- Balance
  - Number of patients / number of samples per patient
  - Allocation in time
- Important task for pharmacologists
  - To evaluate and compare different designs
  - And /or to optimise a design
    - Clinical constraints
    - Total number of sampling times
    - ...

# Approach for design evaluation and optimisation (1)

- Fisher information matrix :



- No analytical expression of  $M_F$  for NLMEM
  - **Single response model**
    - Linearisation of the model using a first order Taylor expansion around the expectation of the random effects<sup>1</sup>
    - Good properties of this approach shown by simulation<sup>2</sup>

1. Mentré F, Mallet A, Baccar D. *Biometrika*, 1997  
2. Retout S, Mentré F, Bruno R. *Statistics in Medicine*, 2002

## Approach for design evaluation and optimisation (2)

- Extension of  $M_F$  for multiple response model<sup>1, 2</sup>
  - Same method as for a single response model
  - Complete matrix :

$$M_F(\Psi, \Xi) \cong \begin{bmatrix} M_F(\beta, \Xi) & \mathbf{C} \\ \mathbf{C} & M_F(\Omega, \sigma, \Xi) \end{bmatrix}$$

—  $\beta$  fixed effects,  $\Omega$  variance of random effects,  $\sigma$  parameters of error model

- Implementation in different softwares<sup>3</sup>
  - Only one in R: PFIM<sup>4</sup>

1. Hooker A, Vicini P, *The American Association of Pharmaceutical Scientists Journal*, 2005  
2. Gueorguieva I et al. *Journal of Pharmacokinetics and Pharmacodynamics*, 2006  
3. Mentré F et al. 16th Population Approach Group in Europe, 2007 (Abstr 1179)

4. [www.pfim.biostat.fr](http://www.pfim.biostat.fr)

# Approach for design evaluation and optimisation (2)

- Extension of  $M_F$  for multiple responses<sup>1,2</sup>
  - Same method as for a single response model
  - Block diagonal matrix :
    - Assumption of independence between the variance of the observations and the fixed effects

$$M_F(\Psi, \Xi) \cong \begin{bmatrix} M_F(\beta, \Xi) & 0 \\ 0 & M_F(\Omega, \sigma, \Xi) \end{bmatrix}$$

- $\beta$  fixed effects,  $\Omega$  variance of random effects,  $\sigma$  parameters of error model

- Implementation in different softwares<sup>3</sup>
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1. Hooker A, Vicini P, *The American Association of Pharmaceutical Scientists Journal*, 2005  
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# Objectives

- ❶ Evaluation of the expression of the Fisher information matrix for multiple response models
- ❷ Design optimisation with cost functions
- ❸ PFIM extensions
- ❹ Application to the joint pharmacokinetic modelling of zidovudine and its active metabolite

# I. Evaluation of the Fisher information matrix for multiple response models

# Evaluation by simulation (1)

## ● PK model

$$f_{PK}(\theta_{PK}, \xi_{PK}) = \frac{Dose}{V} \times \exp\left(-\frac{Cl}{V} \times \xi_{PK}\right)$$

- $\theta_{PK}$  : Cl et V
- **Proportional error model**

## ● PD model

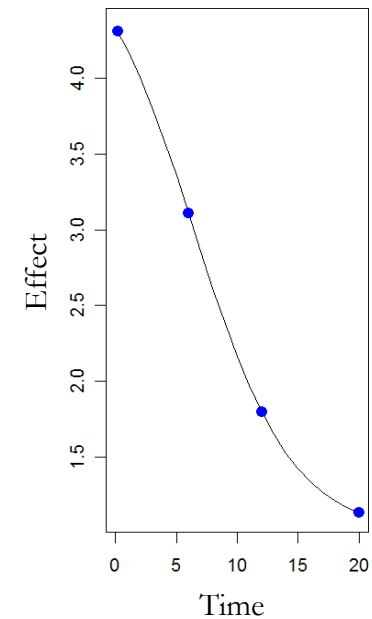
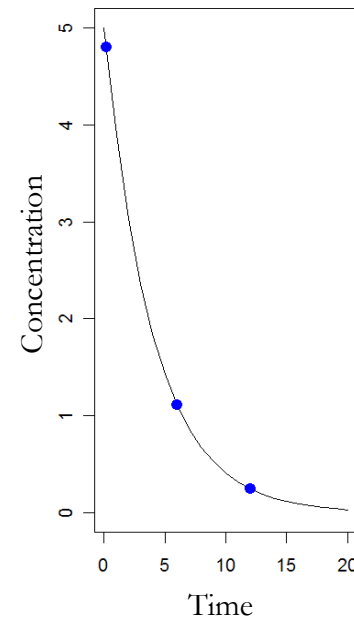
$$f_{PD}(\theta_{PK}, \theta_{PD}, \xi_{PD}) = E_0 + \frac{E_{max} \times f_{PK}(\theta_{PK}, \xi_{PD})}{C_{50} + f_{PK}(\theta_{PK}, \xi_{PD})}$$

- $\theta_{PD}$  :  $E_0$ ,  $E_{max}$  et  $C_{50}$
- **Additive error model**

## ● Population design

- $\xi_{PK} = \{0.166, 6, 12\}$
- $\xi_{PD} = \{0.166, 6, 12, 20\}$
- $N = 100$

$$\Xi = \{[(\xi_{PK}, \xi_{PD}), N]\}$$





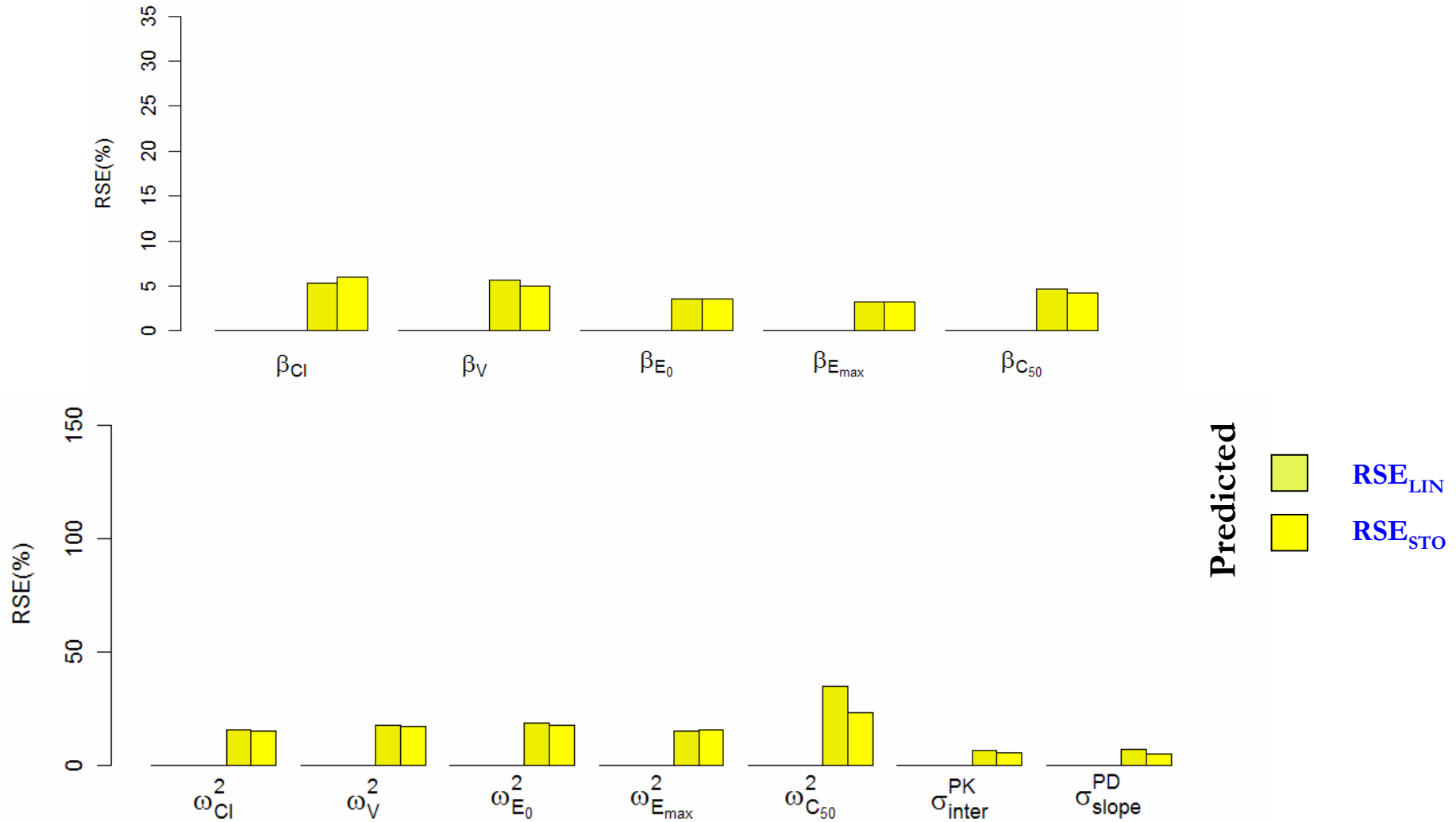
## Evaluation by simulation (2)

- Evaluation of the standard errors (SE) predicted by linearisation
  - Computation of the relative SE :  $RSE_{LIN}$
- SE predicted by a stochastic approach<sup>1,2</sup> → without linearisation
  - Simulation of one data set with 10000 individuals
  - Estimation with the SAEM algorithm (MONOLIX)<sup>3,4</sup>
    - $M_F$  observed on the data set of 10000 individuals → Louis method<sup>5</sup>
  - Rescale of the RSE for 100 individuals :  $RSE_{STO}$

1. Retout S, Comets E, Samson A, Mentré F, *Statistics in Medicine*, 2007  
2. Samson A, Lavielle M, Mentré F. *Statistics in Medicine*, 200  
3. Khun E, Lavielle M. *Computational Statistics and Data Analysis*, 2005

4. <http://www.monolix.org>  
5. Louis TA. *Journal of the Royal Statistical Society*, 1982

# Results - Predicted RSE (%)



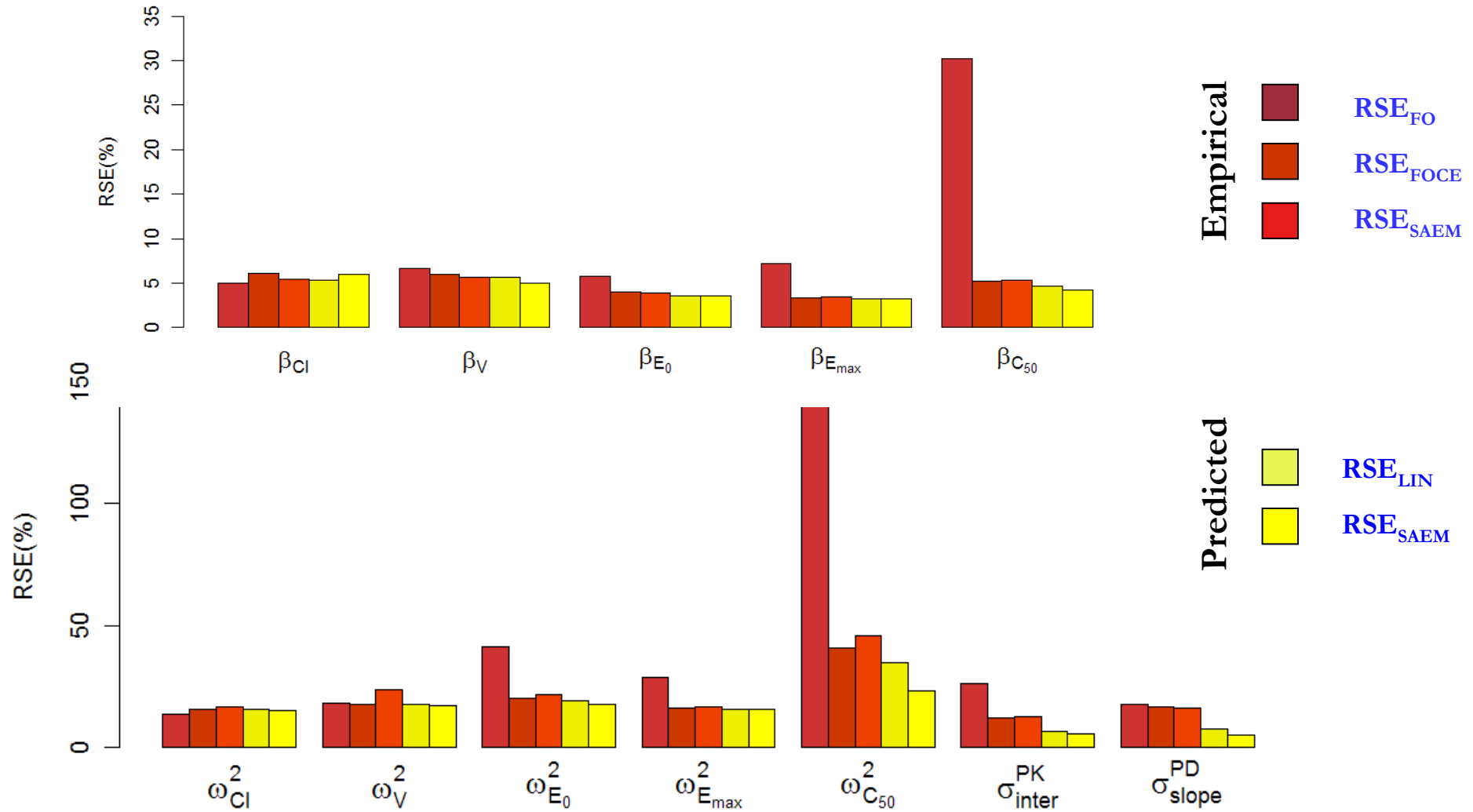
## Evaluation by simulation (2)

- Evaluation of the standard errors (SE) predicted par linearisation
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  - Simulation of one data set with 10000 individuals
  - Estimation with the SAEM algorithm (MONOLIX)<sup>3, 4</sup>
    - $M_F$  observed on the data set of 10000 individuals → Louis method<sup>5</sup>
  - Rescale of the RSE for 100 individuals :  $RSE_{STO}$
- Empirical RSE by an extensive simulation
  - Simulation of 1000 data sets of 100 individuals
  - Estimation of the population parameters
    - FO and FOCE (NONMEM V) →  $RSE_{FO}$  and  $RSE_{FOCE}$
    - SAEM (MONOLIX V2.1)<sup>3,4</sup> →  $RSE_{SAEM}$
  - Standard deviation of the parameter estimates

1. Retout S, Comets E, Samson A, Mentré F, *Statistics in Medicine*, 2007  
2. Samson A, Lavielle M, Mentré F. *Statistics in Medicine*, 200  
3. Khun E, Lavielle M. *Computational Statistics and Data Analysis*, 2005

4. <http://www.monolix.org>  
5. Louis TA. *Journal of the Royal Statistical Society*, 1982

# Results – Predicted and empirical RSE (%)



→ Bazzoli C, Retout S, Mentré F. *Statistics in Medicine*. 2009

## II. Design optimisation with cost functions

# Design optimisation

- Maximisation of  $M_F$ 
  - **D-optimality** : maximisation of  $\det(M_F)$
- Population design  $\Xi$ 
  - $N$  individuals
  - $Q$  groups with  $N_Q$  patients with a same elementary design  $\xi_q$

$$\Xi = \{[\xi_1, N_1]; [\xi_2, N_2]; \dots; [\xi_Q, N_Q]\}$$

- Optimisation based on the design theory
  - **Optimisation of the structure (statistical designs)**
    - $\alpha_q = \frac{N_q}{N}$
    - $\xi_q$
  - **Determination of  $Q, \alpha_q, \xi_q$**

# Cost function

- Elementary design  $\xi_q$  associated to the cost  $C(\xi_q)^{1,2}$
- Usual “cost function”
  - **Number of sampling times**

$$C(\xi_q) = n_q$$

- Other more complex cost functions
  - **Cost of an intracellular concentration assay**
  - **Cost of the addition of a new patient in the study**

# Optimisation algorithm

- Constraint
  - Total cost :  $C_{tot}$
  - Possible sampling times

$$C_{tot} = N \sum_{i=1}^Q \alpha_q C(\xi_q)$$

$$M_F(\Psi, \Xi) = N \sum_{q=1}^Q \alpha_q M_F(\Psi, \xi_q) = C_{tot} \sum_{q=1}^Q w_q \frac{M_F(\Psi, \xi_q)}{C(\xi_q)}$$

—  $w_q$  proportion of total cost attributed to the elementary design  $\xi_q$

- Fedorov-Wynn algorithm <sup>1, 2, 3</sup>
  - Specific to the optimisation of statistical designs
    - Optimisation of both proportions  $w_q$  and elementary designs  $\xi_q$
    - Deduction of the number of subject with  $N_q = w_q \frac{C_{tot}}{C(\xi_q)}$  and  $Q$
  - Convergence to D-optimal design

→ Retout S, Comets E, Bazzoli C, Mentré F. *Communications in Statistics*. 2009

1. Fedorov V.V. *Theory of optimal experiments*. 1972  
2. Wynn H.P. *Results in construction of D-optimum experimental designs*. 1972  
3. Mentré F, Mallet A, Baccar D. *Biometrika*. 1997



## III. PFIM extensions

Single response model  
**Multiple response models**

Analytical form  
**Library of PK models**  
**Differential equation system**

Simplex algorithm  
**Fedorov-Wynn algorithm**  
 $(C(\xi_q) = n_q)$

**PFIM 3.0**



Inter-subject variability

- April 2008, Copyright © PFIM3.0 - *Caroline Bazzoli, Sylvie Retout, Emmanuelle Comets, France Mentré* - Université Paris Diderot- INSERM

→ Bazzoli C, Retout S, Mentré F. *Computer Methods and Programs in Biomedicine*. 2009

Single response model  
Multiple response models

Analytical form  
Library of PK models  
Differential equation system  
**Library of PD models**

Simplex algorithm  
Fedorov-Wynn algorithm  
 $(C(\xi_q) = n_q)$

**PFIM 3.2**



Inter-subject variability  
**Inter-occasion variability<sup>1</sup>**

**Discrete covariates<sup>1</sup>**  
**Power of the Wald test<sup>1,2</sup>**  
**Number of subjects needed**  
Comparison / equivalence tests

⇒ **Availability of both versions**

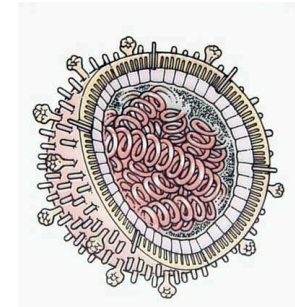
- January 2010. Copyright © PFIM3.2 - *Caroline Bazzoli, Thu Thuy Nguyen, Anne Dubois, Sylvie Retout, Emmanuelle Comets, France Mentré* - Université Paris Diderot-INSERM [www.pfim.biostat.fr](http://www.pfim.biostat.fr)

1. Retout S, Comets E, Samson A, Mentré F. *Statistics in Medicine*, 2007  
2. Nguyen TT, Bazzoli C, Mentré F. *American Conference on Pharmacometrics*. 2009

# **IV. Application to the joint pharmacokinetic modelling of zidovudine and its active metabolite**

# AZT & AZT-TP

- Zidovudine or azidothymidine (ZDV or AZT)
  - Antiretroviral drug
  - Nucleoside analog
- Recommended by WHO as part of the treatment of HIV infection<sup>1</sup>
- Metabolism AZT in AZT-TP in the cell<sup>2</sup>
  - Active metabolite AZT-TP
    - Determinant of the toxicity and the efficacy of AZT
    - Complex and costly assay performed in few laboratories<sup>3-4</sup>



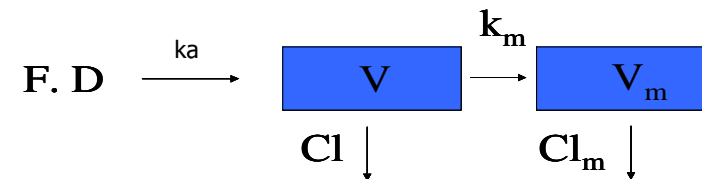
1. WHO Guidelines, <http://www.who.int/hiv/pub/arv/advice/en/>, 2009  
2. Bazzoli et al. *Clinical Pharmacokinetics*, 2010  
3. Becher F. et al. *Journal of Mass Spectrometry*, 2001

4. Pruvost A. et al. *Journal of Mass Spectrometry*, 2002

# Joint PK model of AZT and AZT-TP

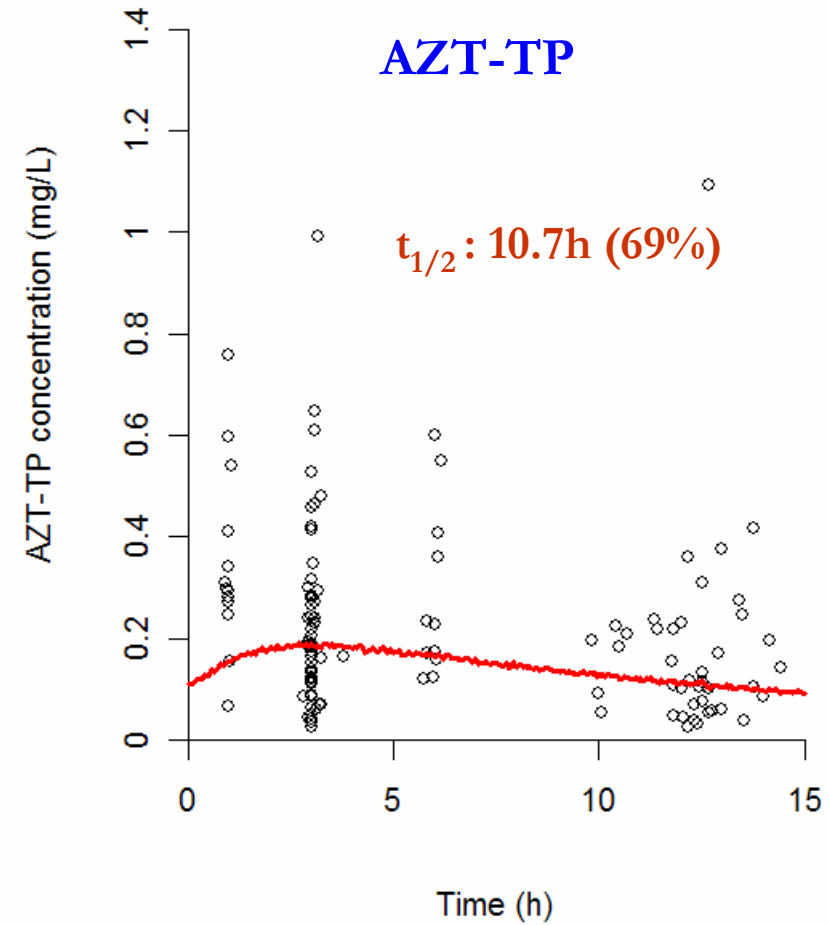
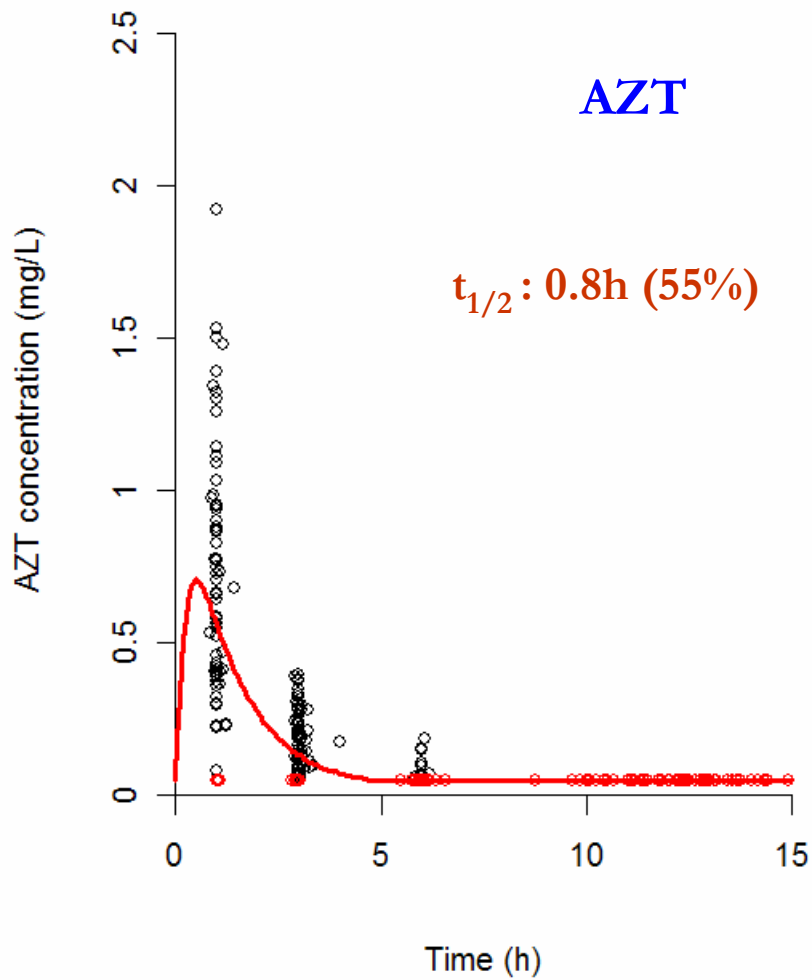
- Data : clinical trial COPHAR2-ANRS 111<sup>1</sup>
  - 73 patients with AZT concentrations after 2 weeks of treatment
    - Dose of 300 mg twice daily
    - Sampling times at 1, 3, 6 and 12 h after administration
  - 62 patients with AZT-TP intracellular concentrations
    - Sampling times at 1, 3, 6 and 12 h after administration : 11 patients
    - Sampling times at 3 and 12 h after administration : 51 patients

- Model



- Identifiable population parameters
  - AZT :  $k_a$ ,  $Cl/F$  et  $V/F$
  - AZT-TP :  $Cl_m/(Fk_m)$  et  $V_m/(Fk_m)$
- Estimation with the SAEM algorithm (MONOLIX V2.4<sup>2</sup>)

# Observed data - Population curve<sup>1</sup>



○ Data under LOQ taken into account in the estimation step

1. Bazzoli C et al. 10th International Workshop on Clinical Pharmacology of HIV Therapy, April 15-17, 2009, Amsterdam, The Netherlands. (Poster)

# Design optimisation : AZT / AZT-TP

- Use of the previous joint PK model
- Initial design
  - ◆ 50 patients with sampling times at 1, 3, 6 et 12 h for AZT et AZT-TP
- Design optimisation for both responses with PFIM
  - ◆ Total cost = 400
  - ◆ Usual « cost function » (= number of samples)
    - Identical sampling times  $\Rightarrow \text{Opt}_{\text{iden}}$
    - Different sampling times  $\Rightarrow \text{Opt}_{\text{diff}}$



## Results – Number of samples

	Sampling times		Proportion of subjects by group (%)	Total number of subjects	Total number of samples		Criterion $(\det(\mathbf{M}_F)^{1/\dim(\Psi)})$
	AZT	AZT-TP			AZT	AZT-TP	
<b>Initial</b>	1, 3, 6, 12	1, 3, 6, 12	100	50	200	200	1.17
<b>Opt<sub>iden</sub></b>	0.5, 1, 3, 12	0.5, 1, 3, 12	100	50	200	200	1.96
<b>Opt<sub>diff</sub></b>	0.5, 1, 3	3, 12	100	80	240	160	2.52

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- Design optimisation for both responses with PFIM
  - ◆ Total cost = 400
  - ◆ Usual « cost function » (= number of samples)
    - Identical sampling times  $\Rightarrow \text{Opt}_{\text{iden}}$
    - Different sampling times  $\Rightarrow \text{Opt}_{\text{diff}}$
  - ◆ Other cost functions (different sampling times)
    - Cost of an intracellular concentration analysis  $\Rightarrow \text{Opt}_{\text{diff\_intra}}$ 
      - $C_{\text{diff\_intra}}(\xi_q) = n_q^{\text{AZT}} + n_q^{\text{AZT-TP}} \times 10$
    - Cost of the addition of a new patient in the study  $\Rightarrow \text{Opt}_{\text{diff\_patient}}$ 
      - $C_{\text{diff\_patient}}(\xi_q) = n_q^{\text{AZT}} + n_q^{\text{AZT-TP}} + 8$

## Results – Cost functions

	Sampling times		Proportion of subjects by group (%)	Total number of subject	Total number of samples	
	AZT	AZT-TP			AZT	AZT-TP
<b>Opt<sub>diff</sub></b>	0.5, 1, 3	3, 12	100	80	240	160
<b>Opt<sub>diff_intra</sub></b>	0.5, 1, 3, 4	12	45.8	24	96	31
	0.5, 1, 1.5, 3	3, 12	29.2			
	0.5, 1, 1.5, 3	3	20.8			
	0.5, 1, 3, 4	3	4.2			
<b>Opt<sub>diff_patient</sub></b>	0.5, 1, 3, 4	2, 3, 12	57.6	26	104	89
	0.5, 1, 1.5, 3	2, 3, 4, 12	42.4			

⇒ Design structure → reflection of the imposed penalties

⇒ Difficulty to compare designs → different cost functions

# Conclusion

- Relevance of the extension of the Fisher information matrix for NLMEM with multiple responses
  - **First order linearisation of the model**
- Development of a powerful tool to determine informative population designs
  - **Extension of the Fedorov-Wynn algorithm**
    - Multiple response models
    - Introduction of cost functions
- Implementation in new extensions of PFIM
  - [www.pfim.biostat.fr](http://www.pfim.biostat.fr)
  - **Complex cost functions → working version**
- Illustration on plasma and intracellular pharmacokinetics of an antiretroviral drug
  - **First joint population analysis of zidovudine and its active metabolite**
  - **Derivation of efficient designs according to clinical and technical constraints**

**Thank you for your attention**