



Getting started with **Optimal Design** for NLME model

Zinnia Parra-Guillen & Iñaki F Troconiz



PHARMACOMETRICS AND
SYSTEMS PHARMACOLOGY
UNIVERSITY OF NAVARRA



Universidad
de Navarra

Present the challenges & questions that newbies face when getting started into the field of optimal design

My Background

- Pharmacist by training
- PhD in Pharmacometrics in 2013:
 - PKPD modelling of therapeutic proteins in preclinical stages
- 2 years postdoc
 - Pharmacometric models to foster a rational use of oncological drugs
 - Education & Training working group at DDMoRe
- Ongoing project with a Pharma Industry:
 - Goal: Explore how modelling and optimal design can improve preclinical experiments of xenograft mice for anticancer treatment

Where do I start?

- No regular courses available
- There is a distribution list, but not online searchable
- Available books, but not specific to nlme
 - “Optimal Design for non linear response models” Federov & Leonov
- Learning relies on :
 - Existing publications,
 - UserGuides and examples
 - Presentations from PODE meetings
 - Supports from colleagues working on Optimal Design

Some general concepts...

- Optimal balance between the design variables (e.g. sample size, sampling times...) with respect to certain statistical criterion
- Relies on the FIM to describe the informativeness of a design:
 - the inverse of the FIM is the lower bound of the variance-covariance matrix of any unbiased estimators of parameters (Cramer-Rao inequality)
- Minimising the variance (maximising the FIM) corresponds to maximising the information
- Prior information regarding the model and the parameters is needed

- Recent publication comparing implemented features and reproducibility of results¹

Feature	Software				
	PFIM	PkStaMp	PopDes	PopED	POPT
Language	R	Matlab	Matlab	Matlab FreeMat	Matlab FreeMat
Available on website	✓		✓	✓	✓
Library of PKPD models	✓	✓	✓	✓	✓
User-defined models	✓	✓	✓	✓	✓
Multiresponse models	✓	✓	✓	✓	✓
Designs differ across responses	✓	✓	✓	✓	✓
ODE models	✓	✓	✓	✓	✓
Full FIM	✓	✓	✓	✓	-
Full covariance matrix for Ω	-	✓	✓	✓	-
Full covariance matrix for Σ	-	-	✓	✓	-
IOV	✓	-	✓	✓	-
Discrete covariates/power	✓/✓	-	✓/✓	✓/✓	✓/✓

- PopED and PFIM available for R

¹ Nyberg *et al.* BJCP (2014)



Time to get started!

- PFIM:
 - Structural model definition in an independent R file
 - Pre-defined input file where parameters, design and task features are defined

- PopED
 - No pre-defined template
 - Set of functions for the structural model, the parameters and variability model, and the residual error function
 - PopED database calling above functions, specifying parameter value and including design information
 - Tasks are package functions

- PFIM and PopED implement the model as an R function suitable for the solver R package ‘deSolve’.
- Model code similar, but not directly interchangeable:
- Different ways of encoding dosing
 - POPED:
 - the dose, dose time, dose interval can be considered covariates
 - easily manipulated
 - PFIM:
 - Large library of PK models
 - Dose can be easily modified when using analytical solutions
 - dose interval and dose time are defined as function arguments

Model implementation



```
formED<-function(t,y,p){
  ...
  n <- t%%tau

  multiple_oral <- function(ka,k10,V,dose,n,tau,t){
    if (n<tdose_start){return(0)}
    if(n>=tdose_start & n<=tdose_end){return((dose/V)*(ka/(ka-k10))*(exp(-
k10*(t-n*tau))-exp(-ka*(t-n*tau))) +multiple_oral(ka,k10,V,dose,n-1,tau,t))}
    if (n>tdose_end){return(multiple_oral(ka,k10,V,dose,n-1,tau,t))}
  }

  C1 <-multiple_oral(ka,k10,V,dose=dose1,n,tau,t)

  w <- y[1]+y[2]+y[3]+y[4]

  yd1 <- (KP*y[1]/(1+((KP/KL)*w)^psi)^(psi^-1)) -KD*C1*y[1]
  yd2 <- EDRUG1*y[1]-KTR*y[2]
  yd3 <- KTR*(y[2]-y[3])
  yd4 <- KTR*(y[3]-y[4])

  return(list(c(yd1,yd2,yd3,yd4),c(w)))}
}
```

Model implementation

```
formED<-function(t,y,p){
  ...
  C1 <-multiple_oral(ka,k10,V,dose=dose1,n,tau,t)
  C2 <- multiple_oral(ka,k10,V,dose=dose2,n,tau,t)

  w1 <- y[1]+y[2]+y[3]+y[4]
  w2 <- y[5]+y[6]+y[7]+y[8]
  w <- w1 + w2

  yd1 <- (KP*y[1]/(1+((KP/KL)*w1)^psi)^(psi^-1)) -KD*C1*y[1]
  yd2 <- EDRUG1*y[1]-KTR*y[2]
  yd3 <- KTR*(y[2]-y[3])
  yd4 <- KTR*(y[3]-y[4])

  yd5 <- (KP*y[5]/(1+((KP/KL)*w2)^psi)^(psi^-1)) -KD*C2*y[1]
  yd6 <- EDRUG1*y[5]-KTR*y[6]
  yd7 <- KTR*(y[6]-y[7])
  yd8 <- KTR*(y[7]-y[8])

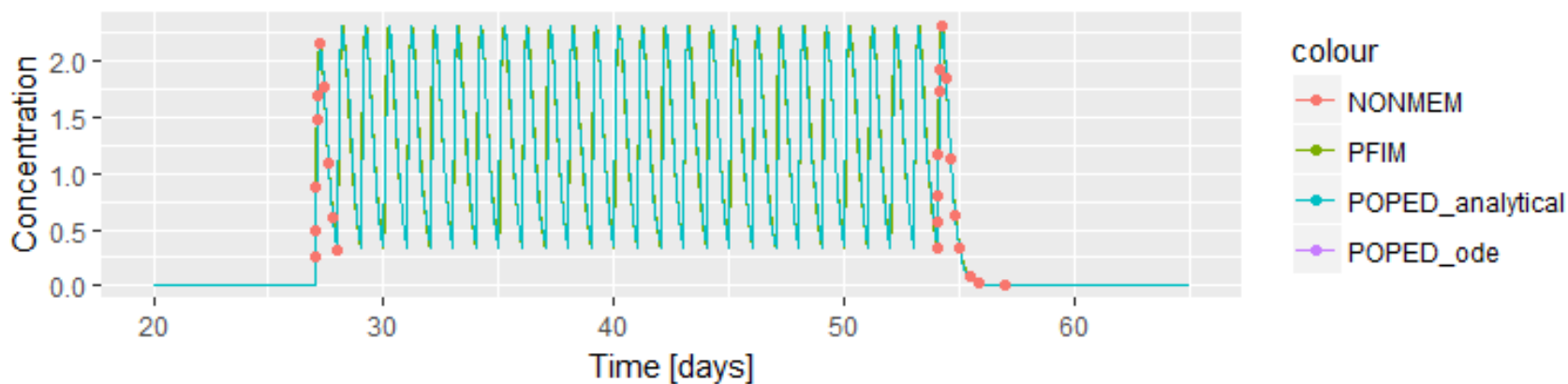
  return(list(c(yd1,yd2,yd3,yd4,yd5,yd6,yd7,yd8),c(w)))}
}
```

Model implementation

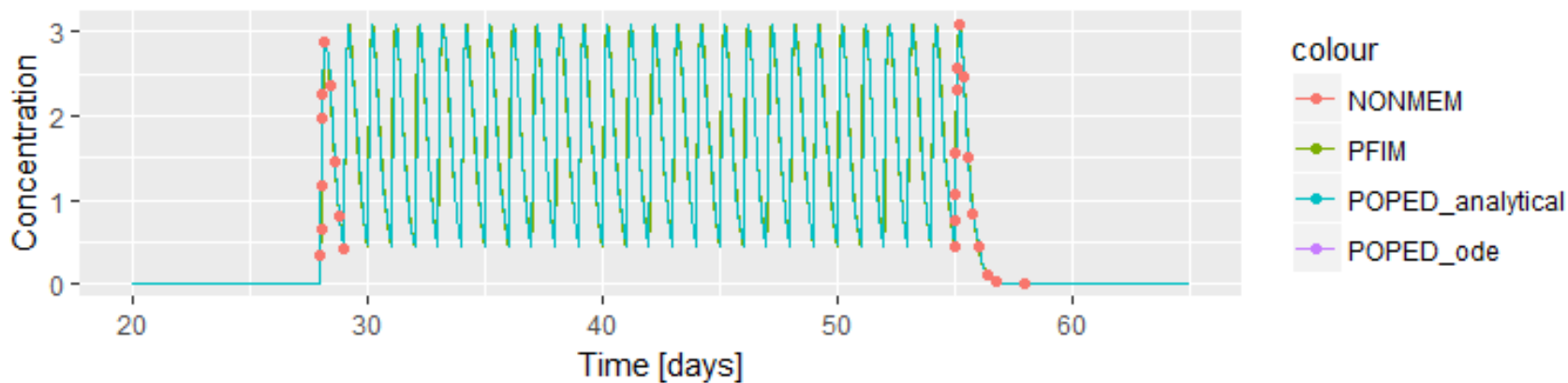


Validation

Dose 75 mg/kg



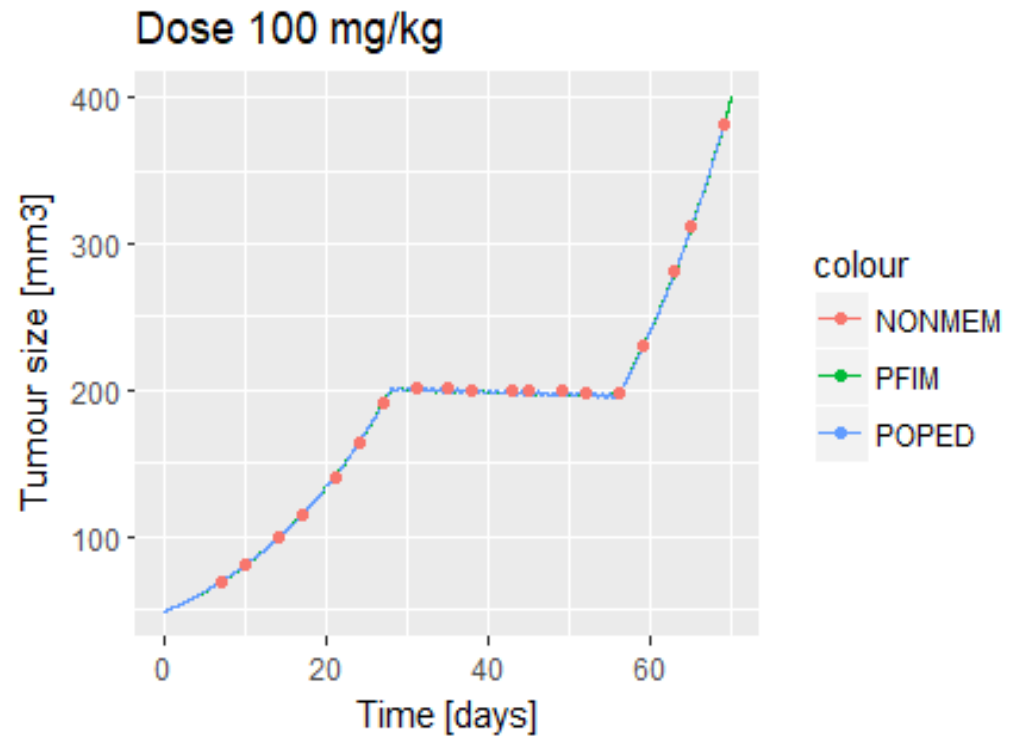
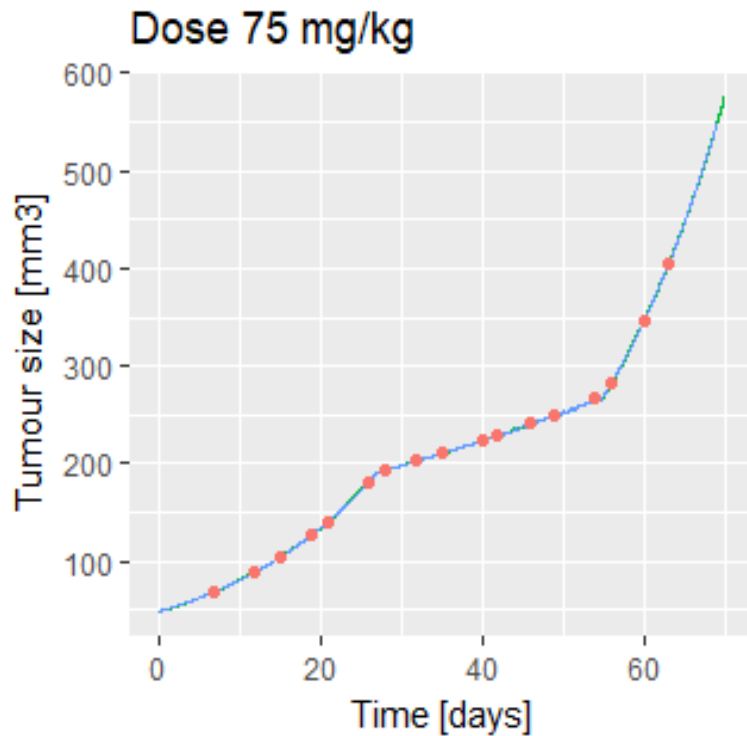
Dose 100 mg/kg



Model implementation



Validation



Design evaluation

- ❖ Based on the computation of the FIM to retrieve RSE
- ❖ Two expressions of the FIM
 - Full FIM
 - Block diagonal FIM
- ❖ Block showed a better performance

Parameter	Block diagonal FIM	Full FIM	Simulations	
	PFIM/PkStaMp/PopDes/PopED/POPT	PFIM/PkStaMp/PopDes/PopED	NONMEM	MONOLIX
β_{ka}	13.9	4.8	13.6	13.8
$\beta_{CL/F}$	4.7	3.6	4.9	4.8
β_{VF}	2.8	2.6	2.7	2.8
ω_{ka}^2	25.8	26.5	26.6	28.1
$\omega_{CL/F}^2$	25.6	26.3	26.1	26.6
ω_{VF}^2	30.3	30.9	32.4	30.8
σ^2	11.2	12.4	10.9	11.0

From Nyberg *et al.* BJCP (2014)



Can be foreseen situations where this is not the case?

- ❖ No analytical expression for the FIM
- ❖ Different approximations available:
 - FO / FOCE / FOCEI / FOI

Parameter	Block diagonal FIM	Full FIM	Simulations	
	PFIM/PkStaMp/PopDes/PopED/POPT	PFIM/PkStaMp/PopDes/PopED	NONMEM	MONOLIX
β_{ka}	13.9	4.8	13.6	13.8
$\beta_{CL/F}$	4.7	3.6	4.9	4.8
$\beta_{V/F}$	2.8	2.6	2.7	2.8
ω_{ka}^2	25.8	26.5	26.6	28.1
$\omega_{CL/F}^2$	25.6	26.3	26.1	26.6
$\omega_{V/F}^2$	30.3	30.9	32.4	30.8
σ^2	11.2	12.4	10.9	11.0

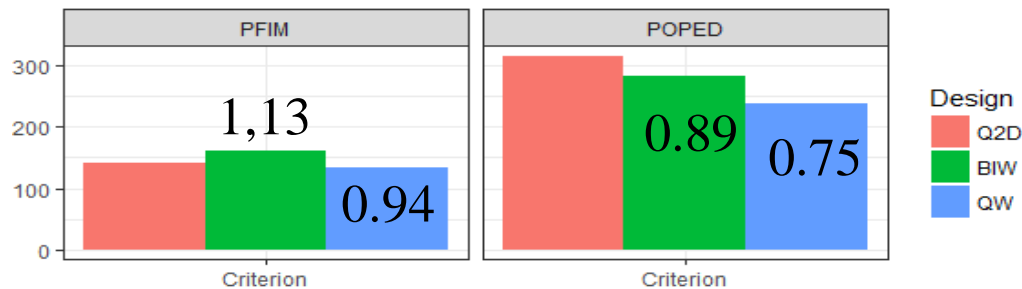
From Nyberg *et al.* BJCP (2014)



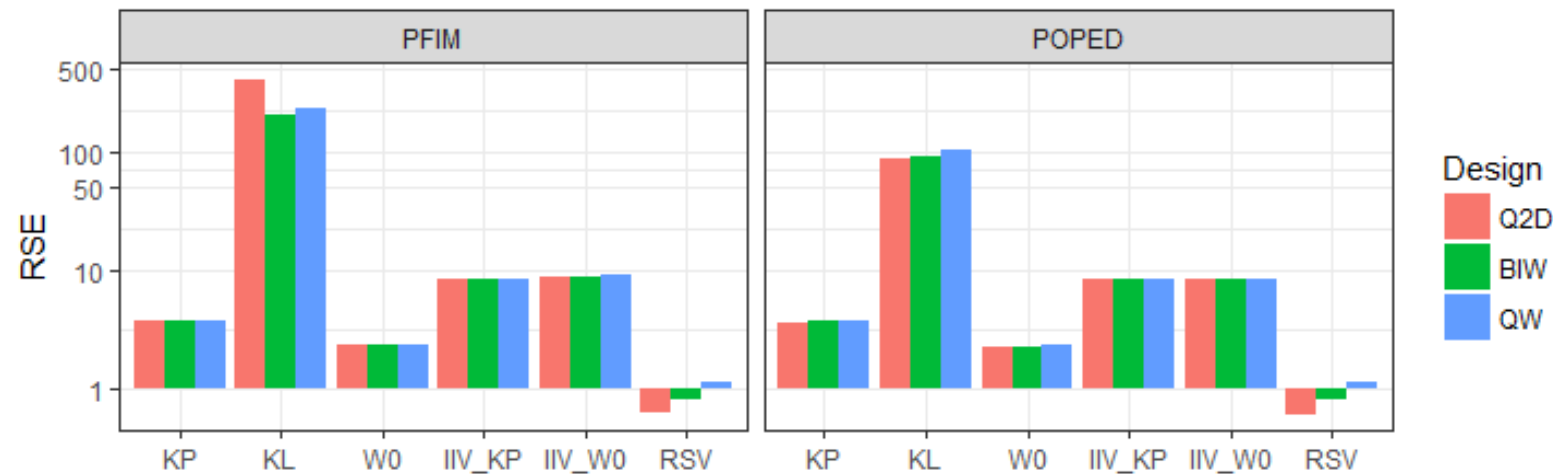
When shall we use the other approximation methods?

Design evaluation: interpreting the results

- Expected RSE
- Criterion: $|\text{FIM}|^{1/\dim(\varphi)}$
- Efficacy criterion: $\text{Criterion}_{\text{REF}}/\text{Criterion}_{\text{NEW}}$



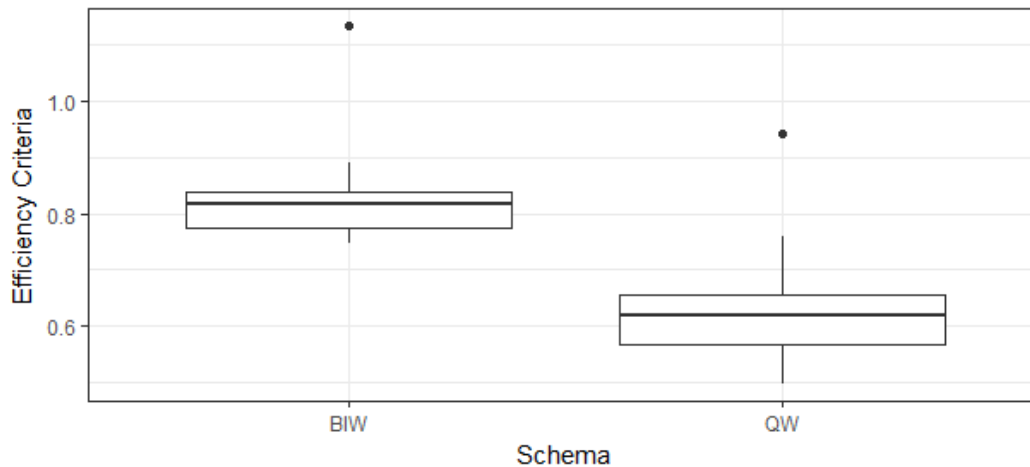
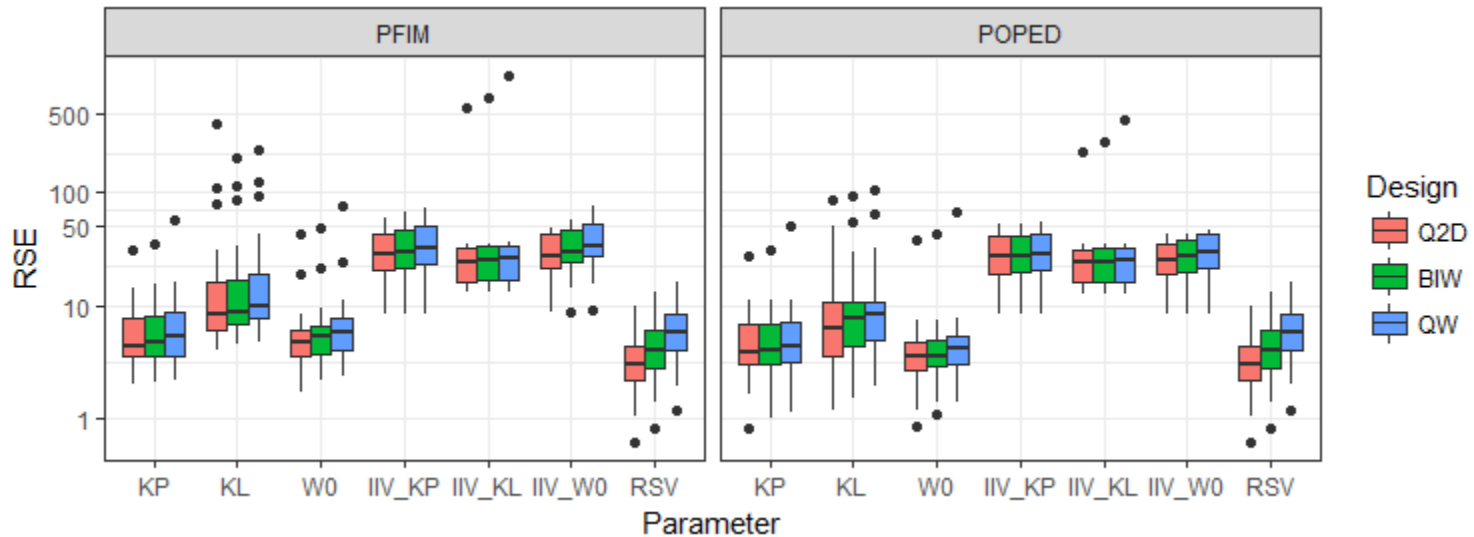
Is there a generalised/
statistical cut
off ?



Design evaluation: interpreting the results



❖ Example:



- Goal is to minimise the variance (i.e maximise the information)
- Different optimality criteria based on the information matrix are available
 - D-Optimality criteria frequently used:
 - maximise the determinant of the FIM



When shall we use other optimality criteria?

- Different algorithms implemented:
 - PopED:
 - Adaptive Random Search
 - Line Search
 - L-BFGS-B
 - Gene search
 - PFIM:
 - Simplex: fix designs
 - Fedorov - Wynn: - Optimise statistical designs

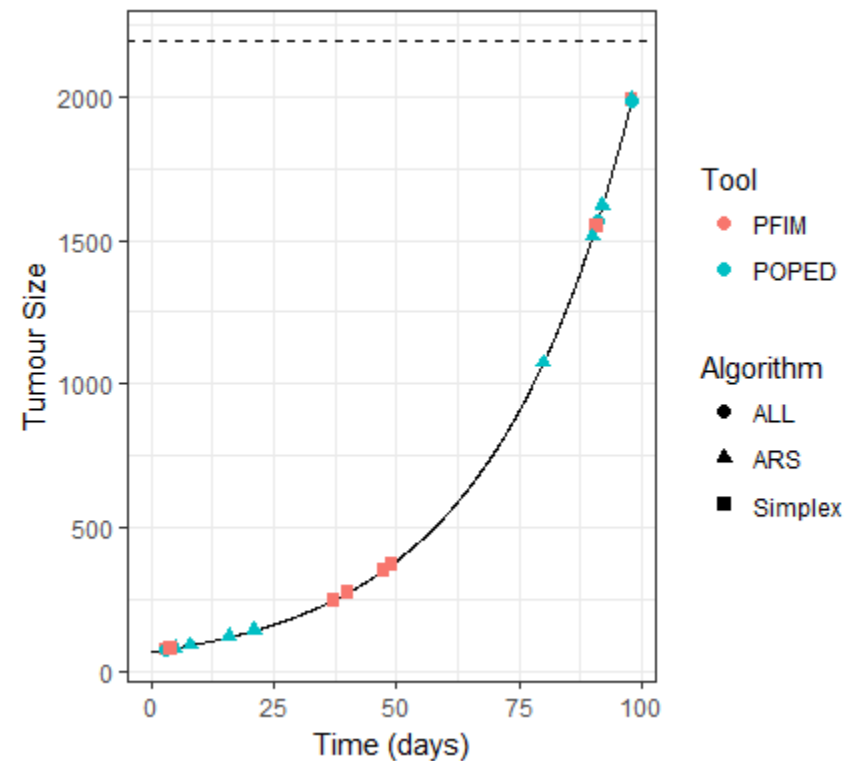
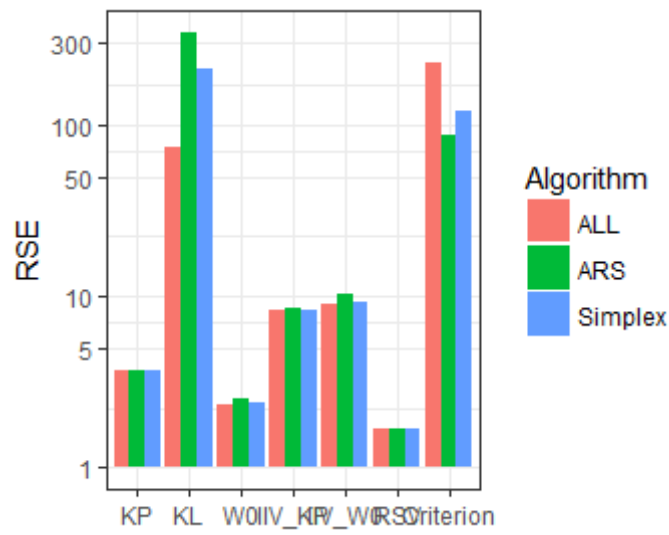
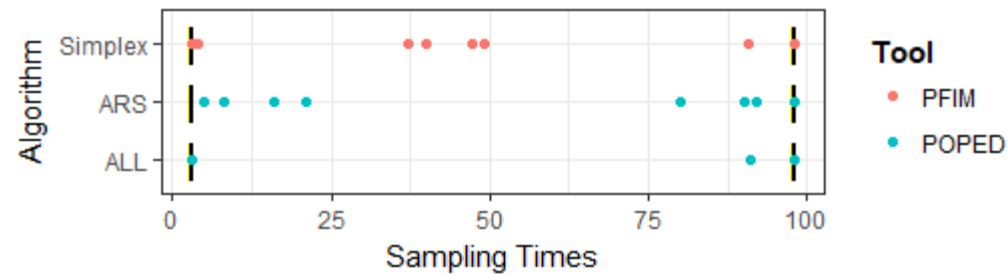


Is there any rule regarding when to select which?

Optimisation: results evaluation

An example using the Simeoni Model:

Optimise only sampling times for unperturbed growth ($n=8$)
Sampling time window: 3-98 days



- There is a growing interest in incorporating Optimal Design on our regular M&S workflows
- Getting started in Optimal Design is not easy
- PODE workshop provides a great platform to share and learn, but can get too technical for newbies
- Inclusion of model code and input information as appendix in publications would be extremely helpful
- Didactic material and courses tailored for pharmacometricians are required

- Mentré F. et al. *Biometrika* (1997) 84: 429-442
- Retout S. et al. *Comp Meth Programs Biomed* (2001) 65:141-151
- Foracchia et al. *Comp Meth Programs Biomed* (2004) 74:29-46
- Bazzoli et al. *Comp Meth Programs Biomed* (2010) 98:55-65
- Nyberg et al. *British J. Clin Pharmacol* (2014) 79:6-17
- Lestini G et al. *AAPS* (2016) 18:1-11
- [PFIM UserGuide 4.0](#)
- PFIM Example
- PopED R package [documentation](#)
- [PopED Introduction vignette](#)

