

Network Meta-Analysis using Individual Participant Data When do benefits arise?

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IMI GETREAL







Background

Network meta-analysis

Synthesize results from studies that compare multiple competing interventions for the same condition









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Background

- Network meta-analysis (NMA) often based on aggregate data (AD)
- Concerns regarding validity of indirect comparisons
- About 1/8 of AD-NMA suffer from network inconsistency
- Heterogeneity may also degrade usefulness of NMA
- NMA framework used for inclusion non-randomized studies

What can we gain by obtaining Individual Participant Data (IPD)?





Background

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Network meta-analysis of 18 anti-depressant trials

CASE STUDY



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- Score ranges between 0 (no depression) and 54 (severe depression)







SCENARIO 1







Scenario 1: no access to IPD

- Aim
 - Investigate the relative change in HAMD score between TeCA and TCA after 6 weeks
 - Explore heterogeneity & network inconsistency
- Common methods for meta-analysis of aggregate data
 - Pairwise meta-analysis
 - Network meta-analysis
 - Network meta-regression (Tx: baseline HAMD score)







Problem: drop-out

Available response data



Generate aggregate data according to:

- Complete case analysis (CCA)
- Last observation carried forward (LOCF)
- Multivariate linear regression (MVR)



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IPD available for all trials

SCENARIO 2







Option 2: Standard one-stage pairwise meta-analysis (PMA)

$$H_{ijk6} \sim \mathcal{N}(\mu_{ijk}, \sigma_{i6}^2)$$
$$\mu_{ijk6} = \begin{cases} \alpha_i & :j = b\\ \alpha_i + \delta_i & :j \neq b\\ \delta_i \sim \mathcal{N}(d_{t_ib_i}, \tau_{t_ib_i}^2) \end{cases}$$

Missing HAMD responses are considered ignorable!





Option 2: Standard one-stage network meta-analysis (NMA)

$$H_{ijk6} \sim \mathcal{N}(\mu_{ijk}, \sigma_{i6}^2)$$
Consistency equations
$$\mu_{ijk6} = \begin{cases} \alpha_i & :j = b \\ \alpha_i + \delta_i & :j \neq b \end{cases}$$

$$\delta_i \sim \mathcal{N}(d_{t_i} - d_{b_i}, \tau^2) \quad \text{with} \quad d_1 = 0$$

Missing HAMD responses are considered ignorable!





Option 3: Adjust for confounders/prognostic factors (NMA-PF)

$$H_{ijk6} \sim \mathcal{N}(\mu_{ijk}, \sigma_{i6}^2)$$

$$\mu_{ijk6} = \begin{cases} \alpha_i + \gamma_i x_{ijk} & :j = b \\ \alpha_i + \gamma_i x_{ijk} + \delta_i & :j \neq b \\ \delta_i \sim \mathcal{N}(d_{t_i} - d_{b_i}, \tau^2) & \text{with} \quad d_1 = 0 \end{cases}$$

Missing HAMD responses are considered ignorable!





Option 4: Adjust for effect modifiers (NMA-TX)

$$H_{ijk6} \sim \mathcal{N}(\mu_{ijk}, \sigma_{i6}^2)$$

$$\mu_{ijk6} = \begin{cases} \alpha_i + \gamma_i x_{ijk} & :j = b \\ \alpha_i + \gamma_i x_{ijk} + \theta_i x_{ijk} + \delta_i & :j \neq b \\ \delta_i \sim \mathcal{N}(d_{t_i} - d_{b_i}, \tau^2) & \text{with} \quad d_1 = 0 \end{cases}$$

Notes:

- Missing HAMD responses are considered ignorable
- Ideally θ_i should ideally be separated to distinguish between within- and across-trial interaction





Option 5: Multivariate network meta-analysis (MNMA)

 $\begin{pmatrix} \vdots \\ \vdots \\ H_{\text{M}} \end{pmatrix} \sim \text{MVN}\left(\begin{pmatrix} \mu \eta k_1 \\ \vdots \\ \mu \eta k_1 \end{pmatrix}, R_i \right)$ $\begin{pmatrix} \mu_{ijk1} \\ \vdots \\ \mu_{ijk6} \end{pmatrix} = \begin{cases} \begin{pmatrix} \vdots \\ \alpha_{i6} \end{pmatrix} & : j = b \\ \begin{pmatrix} \alpha_{i1} \\ \vdots \end{pmatrix} + \begin{pmatrix} \delta_{i1} \\ \vdots \end{pmatrix} & : j \neq b \end{cases}$ Auto-regressive heterogeneity matrix Model distribution of $\begin{pmatrix} \delta_{i1} \\ \vdots \\ \delta_{i6} \end{pmatrix} \sim \text{MVN}\left(\begin{pmatrix} d_{t_i1} - d_{b_i1} \\ \vdots \\ d_{t_i6} - d_{b_i6} \end{pmatrix}, \begin{pmatrix} \tau_1^2 & \zeta \tau_1 \tau_2 & \dots & \zeta^5 \tau_1 \tau_6 \\ \zeta \tau_2 \tau_1 & \tau_2^2 & \dots & \zeta^4 \tau_2 \tau_6 \\ \vdots & \ddots & \\ \zeta^5 \tau_5 \tau_5 \tau_5 & \zeta^4 \tau_5 \tau_6 & \tau^2 \end{pmatrix} \right)$ within-study covariance matrices to allow imputation of studies with incomplete follow- $R_i \sim \text{Wishart}^{-1}(\nu, \Lambda)$



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Conclusions

- AD-NMA leads to excessive network inconsistency and/or heterogeneity
- IPD-NMA models achieved higher precision
- IPD-NMA models achieved improved consistency and less heterogeneity
 - By modelling longitudinal outcomes with informative drop-out
 - By allowing for participant-level treatment-covariate interaction

Our findings confirm the recommendations from the literature, and indicate that access to IPD may be helpful to improve the validity and usefulness of summary estimates of relative treatment effect.





Recommendations

Prioritization of IPD retrieval

- Presence of network inconsistency
- Presence of heterogeneity
- Publications with inappropriate summary statistics







Overview of statistical methods & source code

An overview of methods for network meta-analysis using individual participant data: when do benefits arise?

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