

# Novartis: Challenging to Accelerate Oncology New Drug Development

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# Bayesian Clinical Trials in Novartis Oncology

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- Phase 1 study

- To estimate the maximum tolerated dose (MTD)
- Global (1998-): > 60 trials, Japan (2008-): 6 trials

- Phase 2 study

- Early stopping by futility
- >50 trials

- For Novartis oncology P1 studies, Bayesian trials are the global standard!

# Outline

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- Why do we conduct Bayesian Phase I Trials?
- How do we conduct Bayesian Phase I Trials?
- What benefits can Bayesian Design bring us to?

# Challenges and Design Requirements in Oncology Phase I Trials

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## Phase I Trial Challenges

## Design Requirements

High toxicity potential: **safety first**  
Most responses occur **80%-120% of MTD**

**Avoid subtherapeutic** doses while **controlling overdosing**

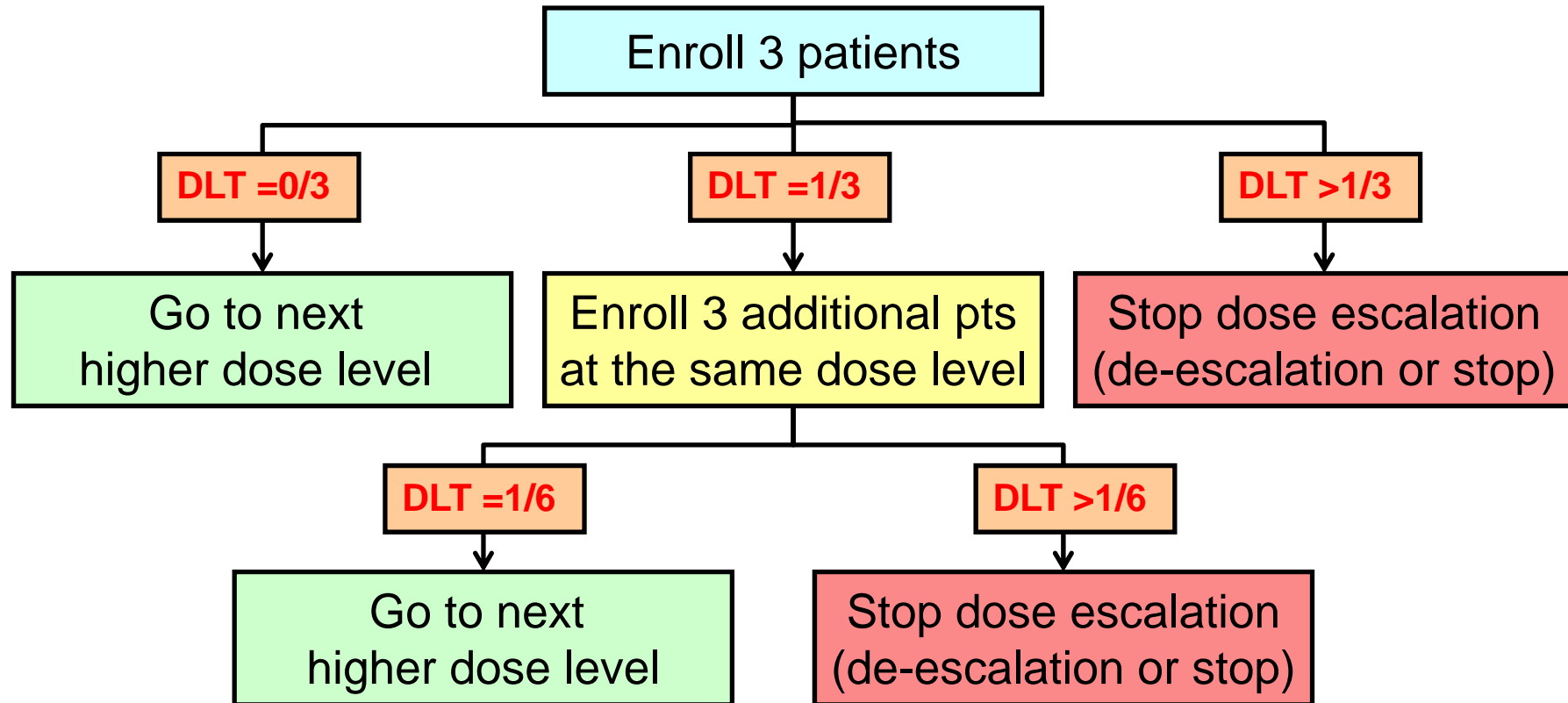
Primary objective: **determine MTD**

Estimate MTD **accurately**

Make **adequate** decisions in **timely** fashion

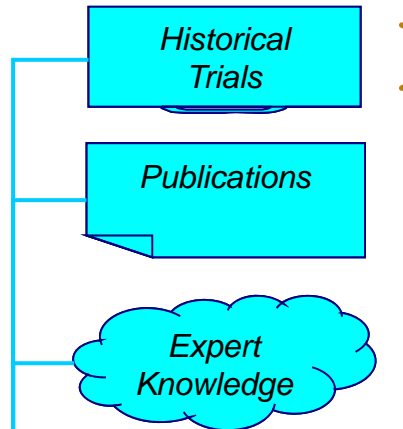
Utilize available information **efficiently**

# Traditional 3+3 Design



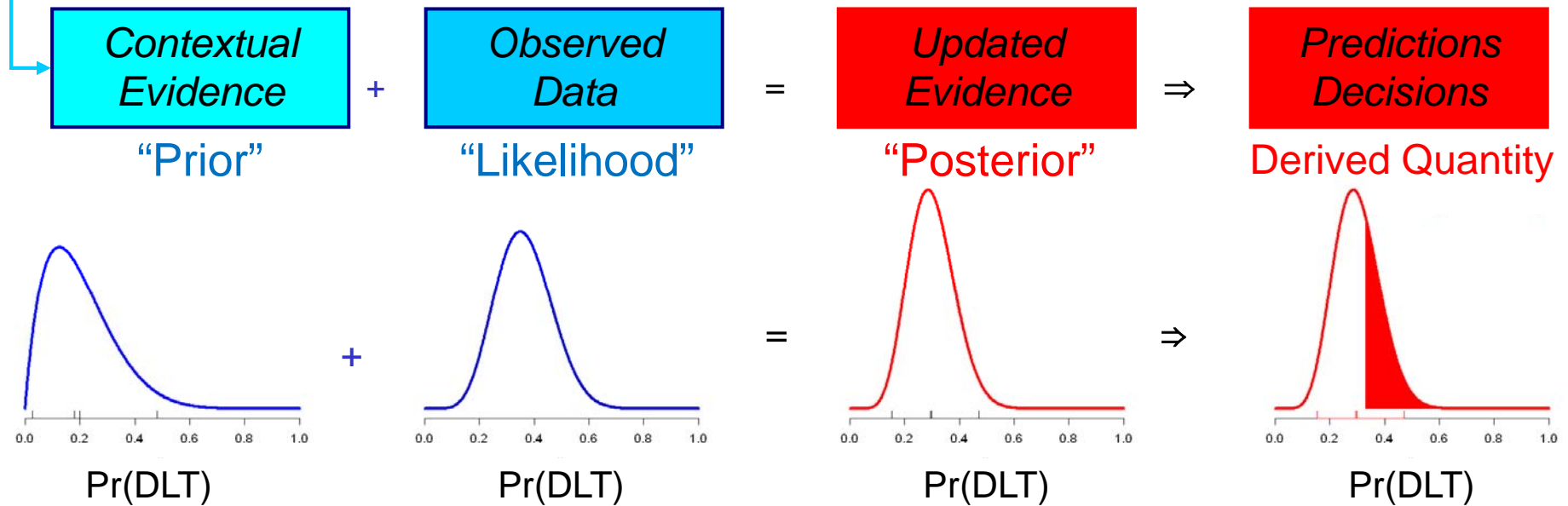
To determine the next dose, only **the number of DLT at the current cohort** is used.

# Bayesian Statistics



## Advantages

- Different sources of information are combined probabilistically
- Accurate prediction can be obtained by putting together our historical knowledge and ongoing trial data



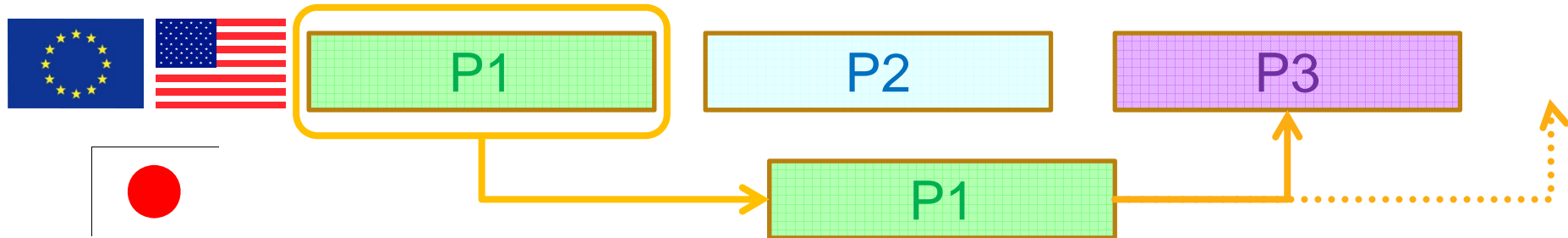
## 3+3 Design vs Bayesian Design

	3+3 Design	Bayesian Design
Usability	Easy - algorithm	More complex - model
Available information	<ul style="list-style-type: none"> <li>• The number of DLT at current cohort</li> </ul>	<ul style="list-style-type: none"> <li>• Prior information</li> <li>• Ongoing trial data</li> </ul>
Flexibility	Not flexible <ul style="list-style-type: none"> <li>▪ fixed cohort size at 3</li> <li>▪ fixed doses</li> </ul>	Flexible <ul style="list-style-type: none"> <li>▪ adjustable cohort size</li> <li>▪ unplanned doses</li> </ul>
Accuracy of MTD estimation	Lower	Higher
Inference for true DLT rates	<ul style="list-style-type: none"> <li>• Observed DLT rates</li> </ul>	<ul style="list-style-type: none"> <li>• Estimate DLT rates at each doses</li> <li>• Risks of DLT occurrence at each doses</li> </ul>

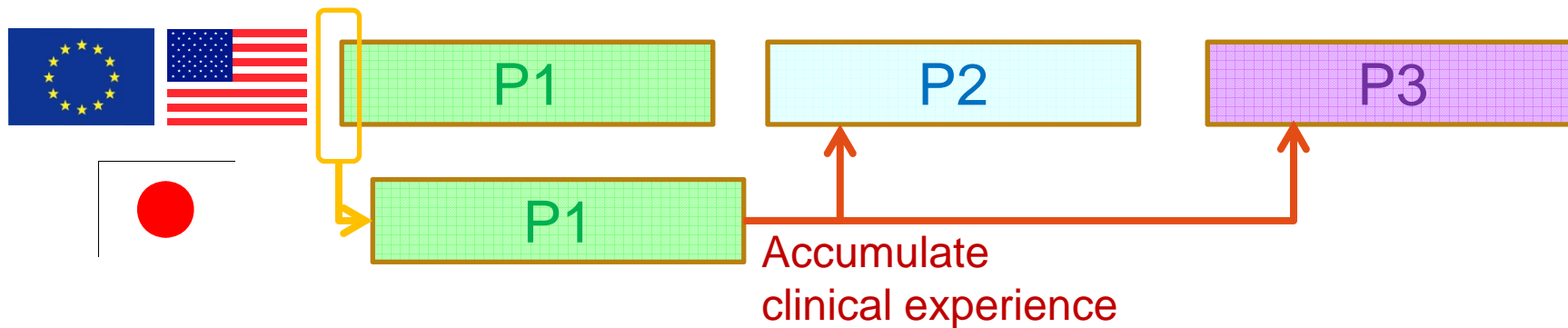
Bayesian Design can solve Challenges in Oncology Phase I Trials!

# Challenge in Japan Development

## <Delayed-Start Development>



## <Simultaneous Development>





# Outline

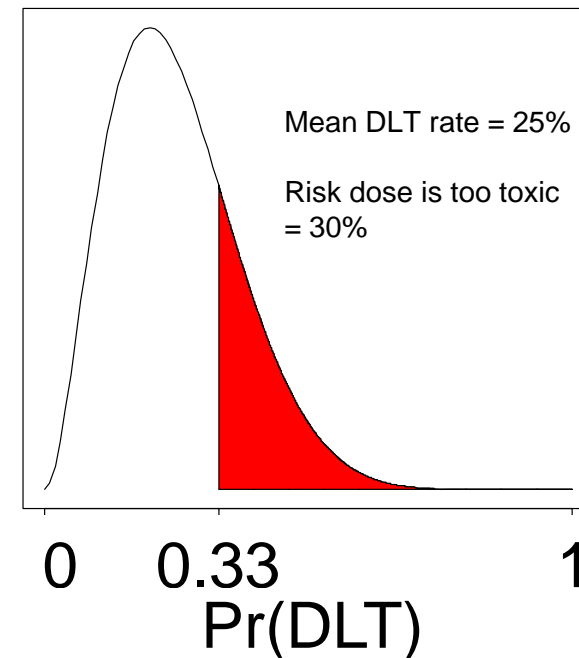
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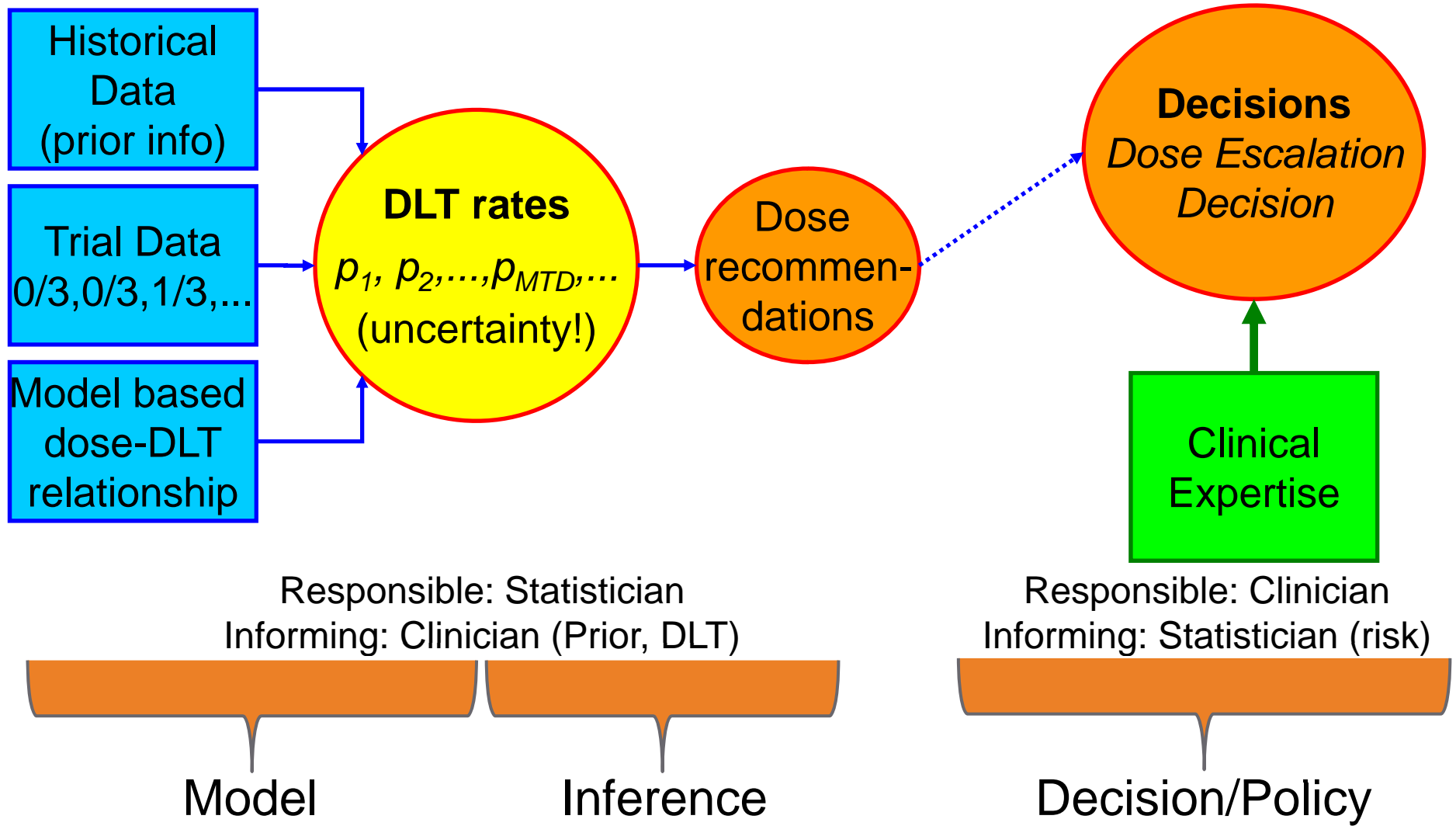
# Novartis Bayesian Approach to Oncology Phase I Trials

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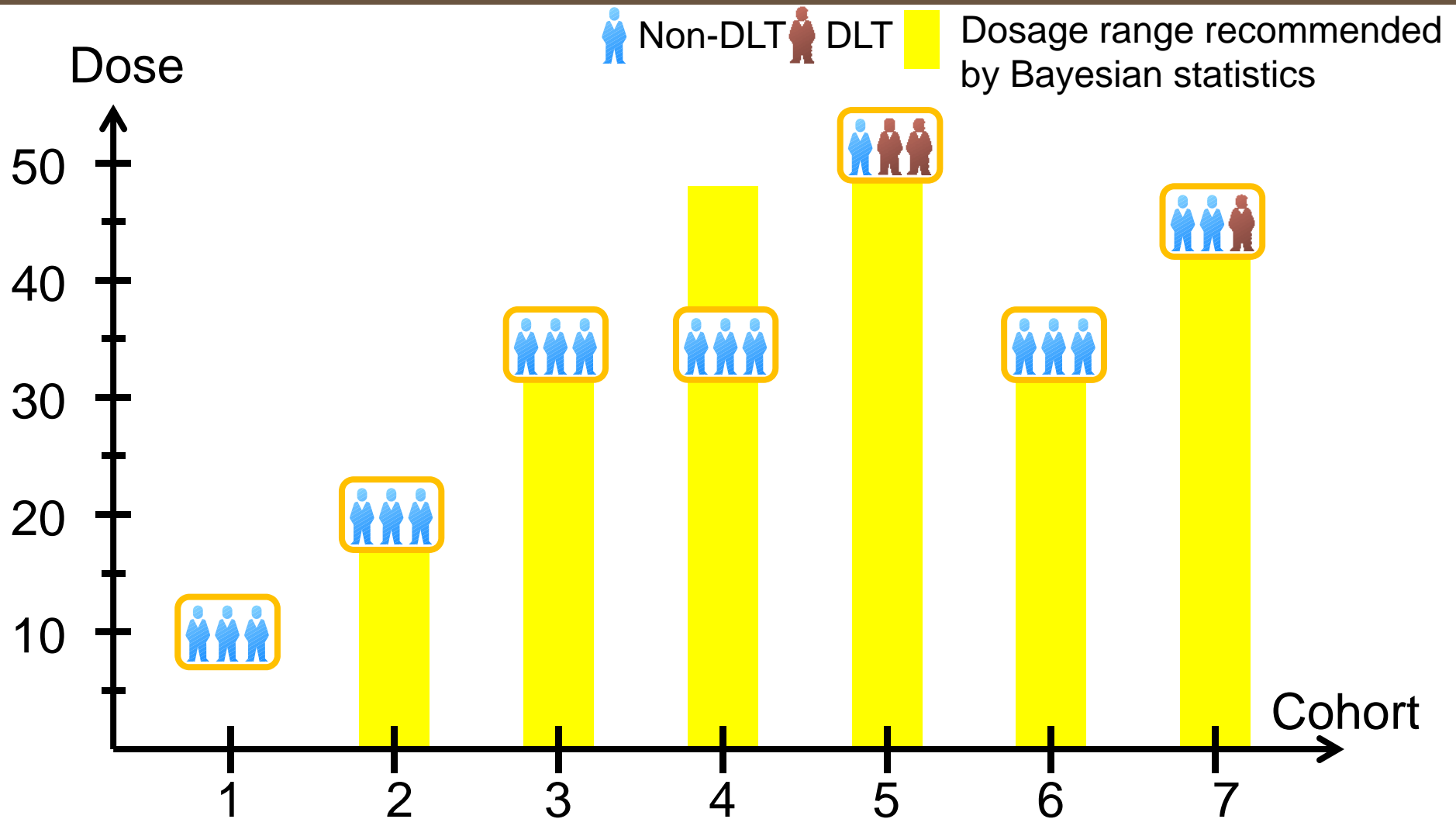
- Assume dose-toxicity model
- Update probability of DLT rate at each dose by incorporating prior information (pre-clinical, human) and observed data into model
- Assess the risk of that the true DLT rate at each dose exceeds 33%, given all of our prior information and observed data



# Clinically driven, statistically supported decisions



# Example of Dose Escalation/De-escalation in Bayesian Oncology Phase I Trials



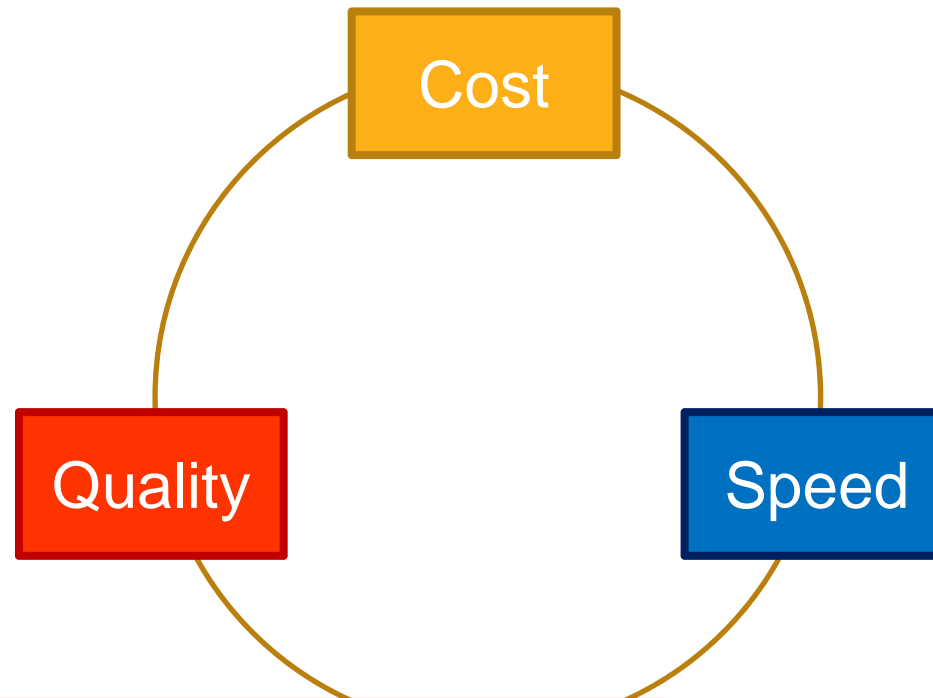
# Outline

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# Benefits of Bayesian Oncology Phase I Trials

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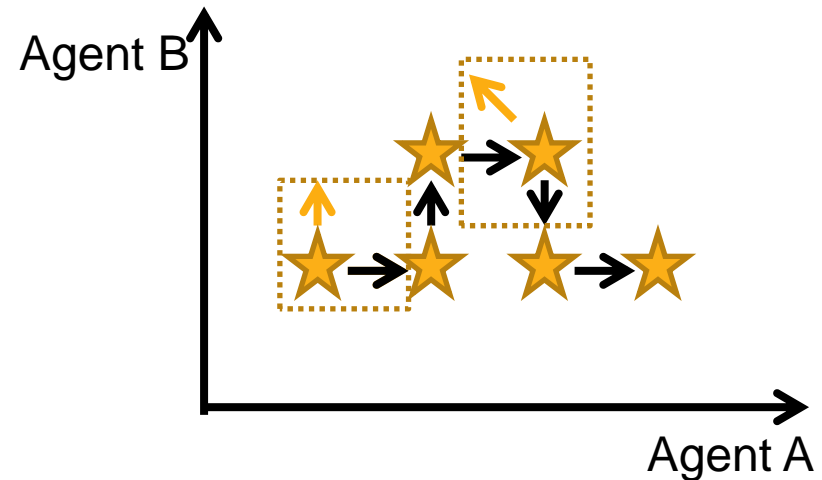


Accurately estimate MTD

- ❑ Utilize all relevant information
- ❑ Select next dose clinically
- ❑ Little-affected by DLT occurred by chance

# New Challenges

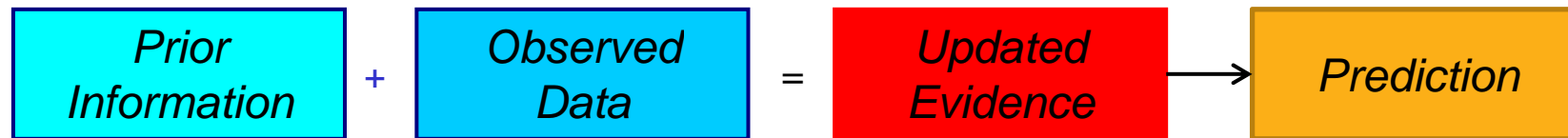
- Combination phase I study
  - Incorporate each historical SINGLE agent data into prior
  - Allow flexible dose escalation decisions clinically (dosage/agent)



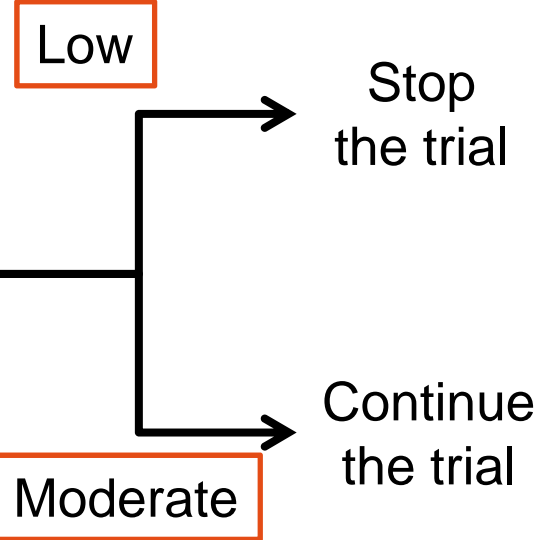
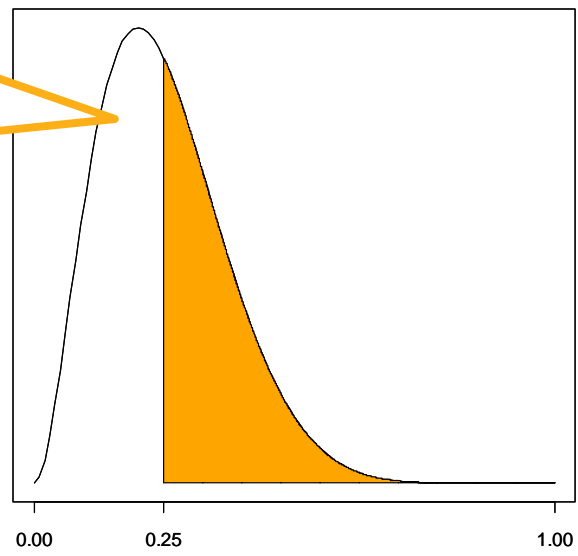
- Global/Asian phase I study
  - Estimate Global/Asian MTD considering the ethnic sensitivity in one trial

# Example of Novartis Bayesian Approach to Oncology phase II Trials

Endpoint: ORR  
Objective: to observe an ORR  $\geq 25\%$



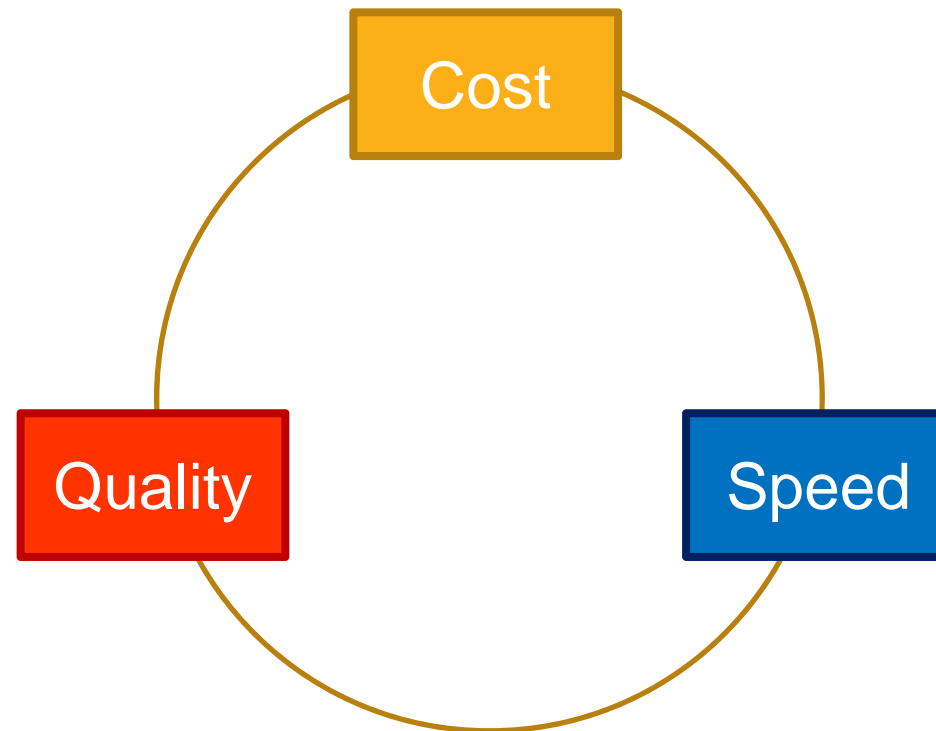
Predict the “**probability of success**” at the end of the study  
 $\Pr(\text{Final ORR} \geq 25\% | \text{data})$





# Expectation to Bayesian Trial Designs

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Bayesian study design can maximize the quality of the new drug development!

# Acknowledgement

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