Pharmaceutical Statistics

Practical and Clinical Applications

Sanford Bolton

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College of Pharmacy and Allied Health Professions St. John's University Jamaica, New York To my dear Phyllis always present, always sensitive, always inspirational

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Preface

This book is intended to serve as a practical reference or as an introductory statistical text for students and scientists in pharmacy, pharmaceutical research, and pharmaceutically related industries. This book may thus appeal to scientists in the clinical sciences, physicians engaged in clinical studies, medical students, and researchers in pharmaceutical and cosmetic formulation. I would hope that this book would stimulate the introduction of formal courses in statistics within colleges of pharmacy at both the undergraduate and graduate levels. In particular, it should be immediately useful as a reference and text for scientists in the pharmaceutical industry.

This is not a work on theoretical statistics. For the most part, theory is avoided so that the reader can concentrate his or her energies on applications. Real-life examples are presented with direct application to areas such as quality control, analytical development, biological testing and assay, clinical testing, consumer testing, and pharmaceutical development. I do not mean to imply that theory is not important, but there are many excellent books dealing with statistical theory, and none which are addressed specifically to practical pharmaceutical problems. I hope that this will be a first step in filling that gap.

Most of Chap. 1 through 9, and Chaps. 11 and 15 can be used for an introductory college level course. More or less may be included, depending on the background of the students. The remaining chapters cover specialized topics, and are often more advanced. These chapters are for interested readers and may be used as a reference. Those sections and chapters which cover material of a more advanced nature are designated by a double asterisk (**). Every effort has been made to present these ideas as simply as possible.

No previous statistical education or extensive mathematical background is required. All that is needed is effort and an ability to perform arithmetical calculations (adding, subtracting, multiplying,

dividing, etc.). The use of a pocket calculator or a home computer is highly recommended.

The exercises are an integral part of the book; most of them are meant to give the student practice with the material presented herein. Some exercises, also identified by double asterisks, make use of the material presented, but also attempt to bring forth ideas not explicitly or completely presented in the text. These more difficult exercises should expand the scope of the book.

I would like to thank those who helped make this work possible. In particular, thanks go to Guy Cohen, who carefully reviewed and critiqued my first draft; to Bharati Sanghvi and Mohan Sondhi, who reviewed parts of this book and gave me many helpful suggestions; to the anonymous reviewers whose comments were taken to heart; and to those students who discovered many little ways to improve the book. Peter Cipolla deserves special mention in this regard. A debt of gratitude is owed to Dr. John Fertig, my first mentor, who has always encouraged me in my efforts as a statistician. And to my young artist friend, Lisa Mahmarian, a well-deserved thank-you for the fine illustrations that so charmingly enhance the text.

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Introduction

Statistical techniques have been widely used in many diverse areas of scientific investigation. Although the need for statistical input in the pharmaceutical sciences has always been evident, 20 or 30 years ago its absence posed no immediate or tangible problems. There was no review process to criticize possible poor design or possible lack of optimality. The consumer or the "marketplace" was the final judge of product development. Also, to assign a cost/benefit parameter in terms of dollars to the "abstract" contribution of statistics and statisticians to pharmaceutical development is a difficult concept.

Before proceeding, a few words are needed to describe what is meant by "statistics" in the context of this book. Statistics mean different things to different people. Some persons visualize a statistician as a type of accountant—a caretaker and manipulator of figures. Others think of statisticians as spending their time compiling tables of numbers—as actuaries. Still others view statistics as a way of helping to make decisions, creating order out of a chaos of numbers, often a savior of otherwise uninterpretable data. Actually, all of these concepts contain some truth. Statistics encompass a wide range of endeavors and applications. We will restrict our presentation to a limited view of this field, concentrating on topics which find particular application to pharmaceutical research. These topics include estimation and decision making, and testing of hypotheses. Also, we will describe frequently used statistical experimental designs. Another somewhat advanced topic which will be introduced is formulation optimization.

The statistical process depends on the degree to which uncertainty follows laws of probability. We call the uncertainty "variability." When a new drug is said to be proven superior to previous treatments, based on a series of clinical studies, we have our "fingers crossed." What is meant by "proven" is really based on a belief. The "belief" is not founded on intuition, but is based on objective statistical criteria, which are based on probability. Thus, when we say that the new drug

is more effective than previous treatments, we are really saying that the new drug is "most probably" more effective. The drug development process consists of many separate steps, which eventually lead to the use of the drug in many patients in many clinical locations. The slow and methodical development of new drug entities in today's consumer-oriented environment ensures that the probability is very high that the final product is safe and effective. The process of making predictions based on observations of a small portion of the population (a sample) and applied to a larger population is known as statistical inference. It is this aspect of statistics which will concern us to a great extent.

Statistical applications have gradually become integrated in diverse areas of the great "diversity" of the drug development process. Pharmaceutical research, in its broadest sense, provides one of the most fertile areas for statistical research and applications. The development of drugs is eventually dependent on their safety and effectiveness in living material, particularly in humans. The incredible variability of human response, including the well-known placebo effect, makes the use of statistical input a necessity when assessing drug efficacy and safety in the present scientific environment. Applications of statistical methods are now routinely found not only in clinical studies, but also in the endeavors of pre-clinical, quality control, and pharmaceutical development laboratories, as previously noted. The scientific personnel in these areas are those who now confront and use statistical techniques every day in the pharmaceutical industry.

To precisely identify the reasons for the relatively recent surge and popularity of statistics in the drug development process, as well as to account for the respect which it now commands, is difficult. One could easily pinpoint one major impetus, the close connection between industry and government, particularly the FDA. The FDA now has a wellestablished statistical group which has made its voice heard loud and clear. No longer are "testimonials" sufficient to get a drug to market. Results from clinical trials, quality control, and pre-clinical studies are usually statistically designed, analyzed, and documented, as evidence of good scientific practice.

With regard to clinical studies, Dr. S. Dubey of the FDA has discussed the statistical documentation for protocols, which include the design, the "hypothesis" to be tested and the patient sample size [1]. He notes that "quantitative" measurements should be used whenever possible and that less objective measurements deserve to be clearly specified. Dr. Dubey states that design factors should be accounted for, and pooling of data from different sources justified, particularly when combining data from multiclinic studies. Statistical methods to be used in data analysis should be documented and clearly presented, and should include a statement of the assumptions necessary for the validity of the analysis. A power analysis, useful for determining sample size, is also

desirable. Finally, he emphasizes the use of summary tables and graphs as an aid in explaining and presenting the experimental results. This attests to the FDA's concern for the quality of data and analysis in FDA submissions.

Although the need for a lucid presentation of data may seem self-evident and, perhaps, not such a great challenge, it is a crucial part of transmitting the message culled from any experiment to a third party. How to best present summaries and "pictures" of the data which clearly relay the intended message is not always immediately apparent. FDA statisticians have made some recommendations in this respect. They also understand the importance and challenges of presenting well thought out, clear data displays [2].

The proper statistical analysis is dependent on study design as well as the nature of the data. The statistical methodology should be clearly documented for clinical studies according to Dr. R. O'Neill of the FDA [3]. He notes, for example, that averaging data may obscure both individual results and time trends, often very relevant to experimental conclusions. He also emphasizes that the statistical model, assumptions, and calculations be clearly presented as part of the statistical documentation of clinical studies. Statistical contributions to protocol design and data analysis will be presented in the discussion of clinical trials in this book.

The above recommendations by FDA statisticians are noted here, not only because such procedures represent good scientific practice (generally accepted by scientists everywhere, including those in the pharmaceutical industry), but to highlight the increased awareness of statistical input into scientific experimentation, particularly where considerable variability exists.

Statistical applications have always been recognized as crucial to quality control procedures, tests, specifications, and definitions. Also in recent years, the application and need for statistical procedures in pre-clinical experiments has been much publicized and researched. Some more far-seeing pharmaceutical companies have been applying statistical methods in these areas for many years. More recent regulatory stimulation as well as increased exposure of the drug development process to the scrutiny of outside public and government interest groups, have stimulated the growth of statistical applications in these areas. Statistics often substantiate, in a quantitative way, the "gut" feeling of the scientist, lending objective documentation to sometimes intuitive insight of experimental results.

Pharmaceutical development and technology is another area which is receiving more attention for statistical applications. In addition to being useful as aids to the decision-making process, statistically derived optimization designs are now being used to find the "best" combination of ingredients with respect to some formulation attribute. Hence, statistics now pervade almost all areas of drug development.

One concept which deserves mention can be thought of, in a sense, as the ethical aspect of statistics. Most of us, especially statisticians, are tired of the cliché concerning the three kinds of lies: "lies, damn lies, and statistics." However, one cannot deny that there are many ways of looking at data. It is not uncommon to find experts disagreeing on the best way to analyze or interpret a set of experimental data. Often, there is no one correct method. Judgment and experience are essential ingredients of the analysis. It would be disturbing, however, if disagreement on the approach or interpretation resulted in disparate and conflicting conclusions. Fortunately, when alternate methods are sound, this is rarely the case. The misuse of statistics, which consists in part of (a) coming to a firm conclusion with poor data due to design or observational flaws, or (b) selecting only the data which proves a pre-determined hypothesis, is to be condemned. The statistician is a scientist, and as is the case with all scientists, integrity is key to success, both inward and outward. Data maneuvering or falsification will satisfy only very immediate and temporary objectives.

This book is an attempt to acquaint the student and pharmaceutical scientist—from clinical monitor, to the analytical chemist, to all members of the pharmaceutical research community—with some basic concepts and analyses. The approach is strictly heuristic, and is by no means a systematic theoretical approach. Most examples of problems and data analysis which arise in practice are not simple, often having unexpected wrinkles which invalidate the hoped-for simple analysis and interpretation promised by the elegant experimental design. Most of the time, professional statisticians should be consulted before proceeding with an analysis or publishing the results and conclusion of a study.

To summarize, the aim of this book is to educate the medical and pharmaceutically oriented scientist in statistical usage. If those who read and learn from this book are able to understand and intelligently incorporate some of these statistical ideas into their experimental toolbags, this objective will have been achieved.

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Contents

Preface iii Introduction xi

1.	Basic Definitions and Concepts		
	1.1	Variables and Variation	1
	1.2	Frequency Distributions and Cumulative Frequency	
		Distributions	5
	1.3	Sample and Population	11
	1.4	Measures Describing the Center of Data	
		Distributions	13
	1.5	Measurement of the Spread of Data	16
	1.6	Coding	22
	1.7	Precision, Accuracy, and Bias	24
	1.8	The Question of Significant Figures	27
		Key Terms	29
		Exercises	29
		References	30
2.	Data	Graphics	32
	2.1	Introduction	32
	2.2	The Histogram	33
	2.3	Construction and Labeling of Graphs	35
	2.4	Scatter Plots (Correlation Diagrams)	43
	2.5	Semilog Plots	43
	2.6	Other Graphical Procedures	45
		Key Terms	47
		Exercises	47
		References	49

vi / Contents

3.	Intr	oduction to Probability	50	
	3.1 3.2 3.3 3.4 3.5	Introduction Some Basic Probability: Discrete Events Probability Distributions (Discrete Distributions) Continuous Data Distributions Common Probability Distributions Key Terms Exercises	50 51 56 60 62 66	
4.	The Normal and Binomial Probability Distributions			
	4.1 4.2 4.3 4.4		68 69 80 82 90 91	
5.	Sampling			
	5.1 5.2 5.3 5.4	Random Sampling	93 95 99 103 103 104	
6.	Stat Test	istical Inference: Estimation and Hypothesis ing	105	
	6.1 6.2 6.3	The province of the province o	106 113 152 156 157	
7.	Sample Size and Power			
	$7.1 \\ 7.2$	Introduction Determination of Sample Size for Simple Comparative Experiments for Normally Distributed Variables	165 165	

	7.3 7.4 7.5	Determination of Sample Sizes for Binomial Tests Determination of Sample Size to Obtain a Confidence Interval of Specified Width Power Key Terms Exercises References	170 172 174 178 179 180
		ar Regression and Correlation	181
8.			182
	8.1	Introduction Analysis of Standard Curves in Drug Analysis:	102
	8.2	Application of Linear Regression	187
	8.3	Assumptions in Linear Regression	188
	8.4	Estimate of the Variance: Variance of Sample	
	•••	Estimates of the Parameters	190
	8.5	A Drug Stability Study: A Second Example of	
		the Application of Linear Regression	193
	8.6	Confidence Intervals in Regression Analysis	198
	8.7	Correlation	$\begin{array}{c} 202 \\ 211 \end{array}$
	8.8	Comparison of Variances in Related Samples	213
		Key Terms Exercises	213
		References	216
9.	Ana	lysis of Variance	218
	9.1	One-Way Analysis of Variance	218
	9.2		
	0.2	Comparisons in ANOVA	226
	9.3	A Further Example of One-Way Analysis of	
		Variance: Unequal Sample Sizes and the Fixed	
		and Random Models	234
	9.4		236 252
		Key Terms Exercises	253
		References	256
		References	200
10.	Fact	orial Designs**	258
	10.1		258
	10.2		
		the Advantages of Factorial Designs	263
	10.3		266
	10 4	tions and Notation A Worked Example of a Factorial Experiment	269
	10.4	A worked Example of a ractorial Experiment	203

viii / Contents

	10.5	General Comments Key Terms Exercises References	277 277 278 279
11.	Trans	sformations and Outliers	281
	11.1 11.2	Transformations Outliers Key Terms Exercises References	282 294 299 299 300
12.	12.1 12.2 12.3 12.4 12.5 12.6	Introduction Some Principles of Experimental Design Parallel Design Crossover Designs and Bioavailability/Bioequivalence Studies Repeated Measures (Split-Plot) Designs** Multiclinic Studies Key Terms Exercises References	301 302 305 311 322 330 332 332 333
13.	Quality Control		
	13.1 13.2 13.3	Introduction Control Charts Acceptance Sampling and Operating Characteristic Curves Statistical Procedures in Assay Development Key Terms Exercises References	334 335 349 353 361 361 363
14.	Consumer Testing 36		
	14.1 14.2 14.3	Introduction Product Comparisons Discrimination Tests: The Triangle Test Key Terms Exercises References	364 365 379 384 384 385

15. Nonparametric Methods	387
15.1 Data Characteristics and an Introduction to	
Nonparametric Procedures	387
15.2 Sign Test	391
15.3 Wilcoxon Signed Rank Test	394
15.4 Wilcoxon Rank Sum Test (Test for Differences	
of Two Independent Groups)	396
15.5 Kruskal-Wallis Test (One-Way ANOVA)	399
15.6 Friedman Test (Two-Way Analysis of Variance) 15.7 Runs Test for Randomness	402
15.8 Contingency Tables	403 406
Key Terms	416
Exercises	417
References	419
16. Optimization Techniques**	421
	721
16.1 Introduction	421
16.2 Optimization Using Factorial Designs	422
16.3 Composite Designs to Estimate Curvature 16.4 The Simplex Lattice	435
16.4 The Simplex Lattice Key Terms	441 450
Exercises	450
References	450
	102
Appendix I: Some Properties of the Variance	453
I.1 Pooling Variances	453
I.2 Components of Variance	454
I.3 Variance of Linear Combinations of Independent	
Variables	455
Reference	456
Appendix II: Comparison of Two Dose-Response Lines:	
Determination of Relative Potency	457
Reference	463
Appendix III: The Grizzle Analysis for Cross-Over Designs	464
References	467
200202 022000	407
Appendix IV: Multiple Regression	468
References	474