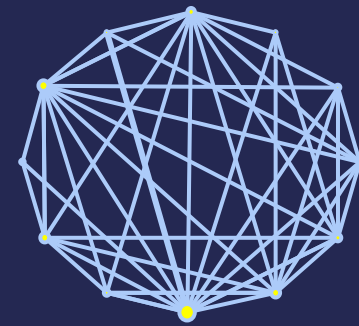


# Hierarchical network meta-analysis models accounting for variability in nodes by treatment, dosage-category and single dosage



Areti Angeliki Veroniki, MSc, PhD

C. Del Giovane, E. Blondal, K. Thavorn, B. Hutton, S. E. Straus, A. C. Tricco

*Prepared for: The 23<sup>rd</sup> Cochrane Colloquium*

**October 5, 2015**



E-mail: [VeronikiA@smh.ca](mailto:VeronikiA@smh.ca)

Knowledge Translation Program,  
Li Ka Shing Knowledge Institute,  
St. Michael's Hospital,  
Toronto, Canada



St. Michael's  
Inspired Care.  
Inspiring Science.

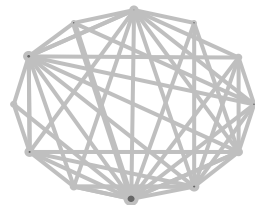




I have no actual or potential conflict of interest in relation to this presentation

I am funded by the Banting Postdoctoral Fellowship Program from the Canadian Institutes of Health Research (CIHR)

This study is funded in part by Drug Safety and Effectiveness Network – CIHR



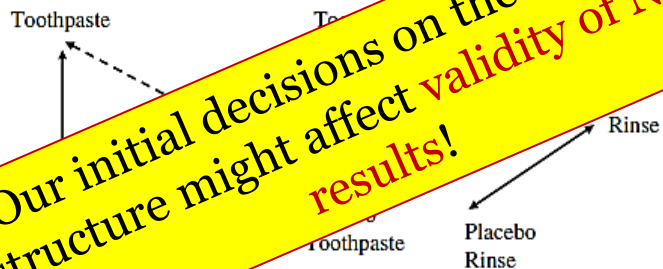


# Common Dilemma in NMA...



Combining placebo-controlled trials to learn about toothpaste vs. rinse may yield **erroneous results**

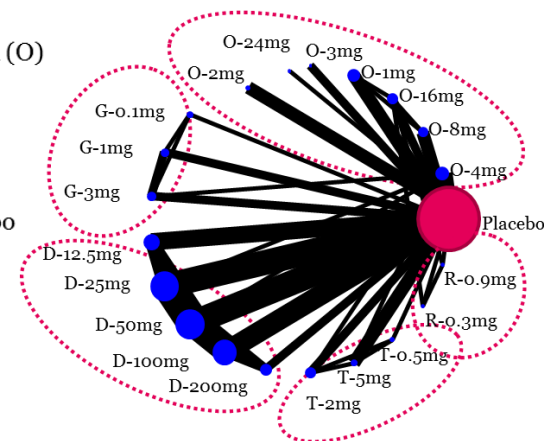
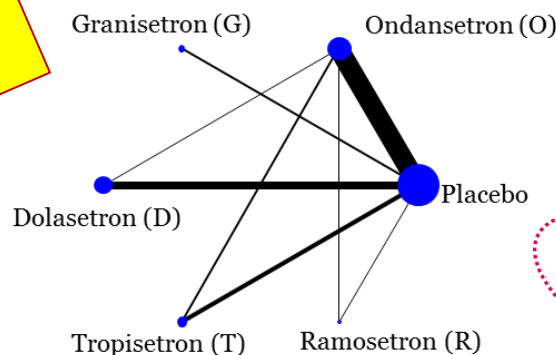
**Our initial decisions on the network structure might affect validity of NMA results!**



Violation of a network assumption because of placebo treatments.

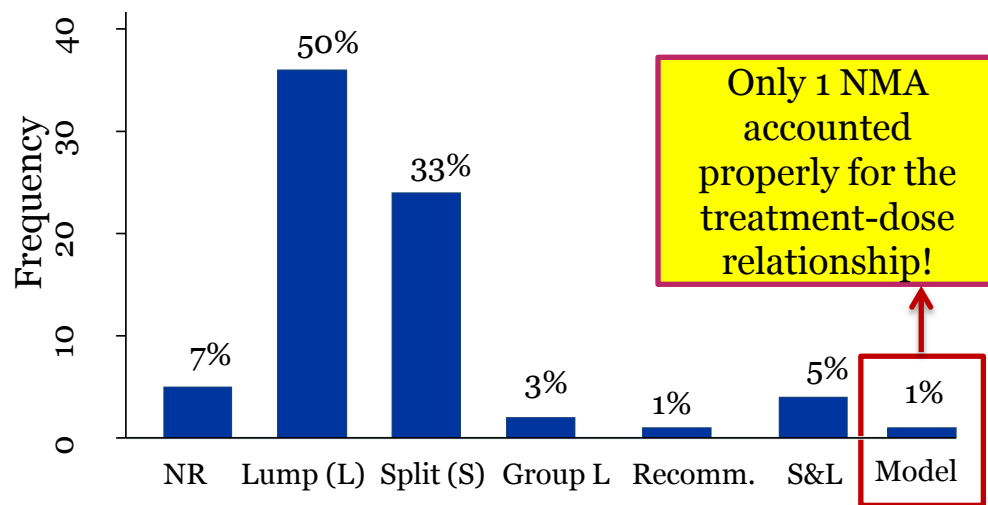
Salanti et al JCE 2009

## Lumping or splitting nodes?



## How do NMA authors deal with treatment doses?

74 (40%) of 185 NMAs published until the end of 2012 included different treatment doses in the network.



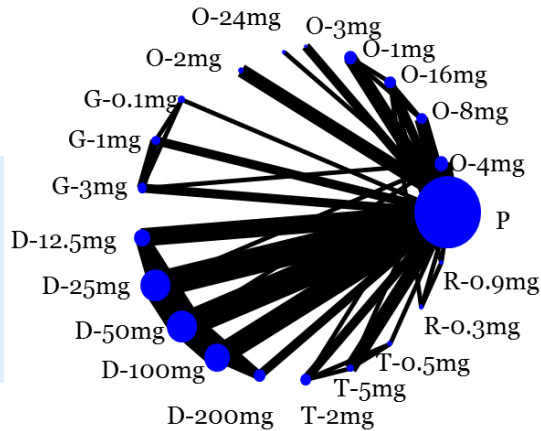


# Modeling dose-effects in NMA

## Independent dose-effects

*All dose-effects are unrelated*

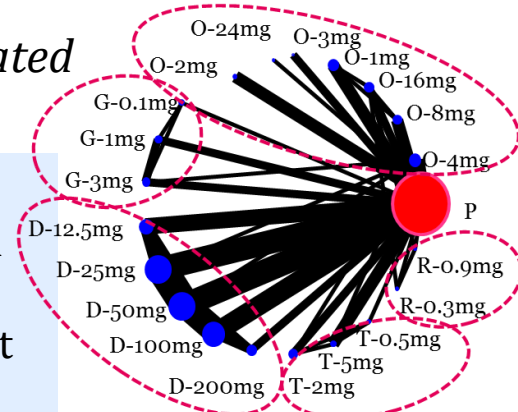
a) within-study and b) between-study variance between doses



## Random dose-effects

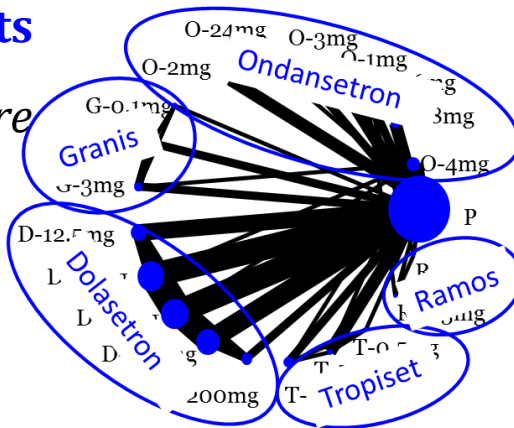
*Dose-effects are related and exchangeable*

a) within-study, b) between-study within dose, and c) between-dose within-treatment variance



## Fixed dose-effects

*All dose-effects are assumed equal within the same treatment*

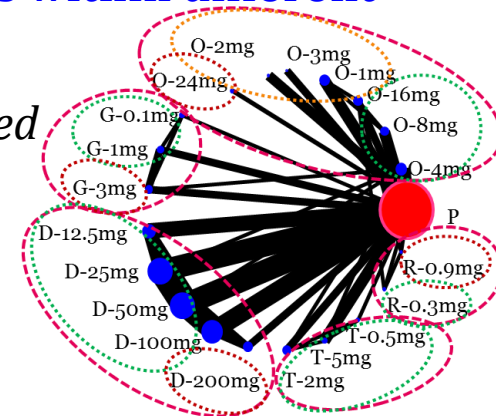


a) within-study and b) between-study variance within dose

## Random dose-effects within different dose categories

*Dose-effects are related and exchangeable accounting for the dose-category they belong to*

a) within-study, b) between-study within dose, c) between-dose within-dose-category, and d) between-dose-category within-treatment variance



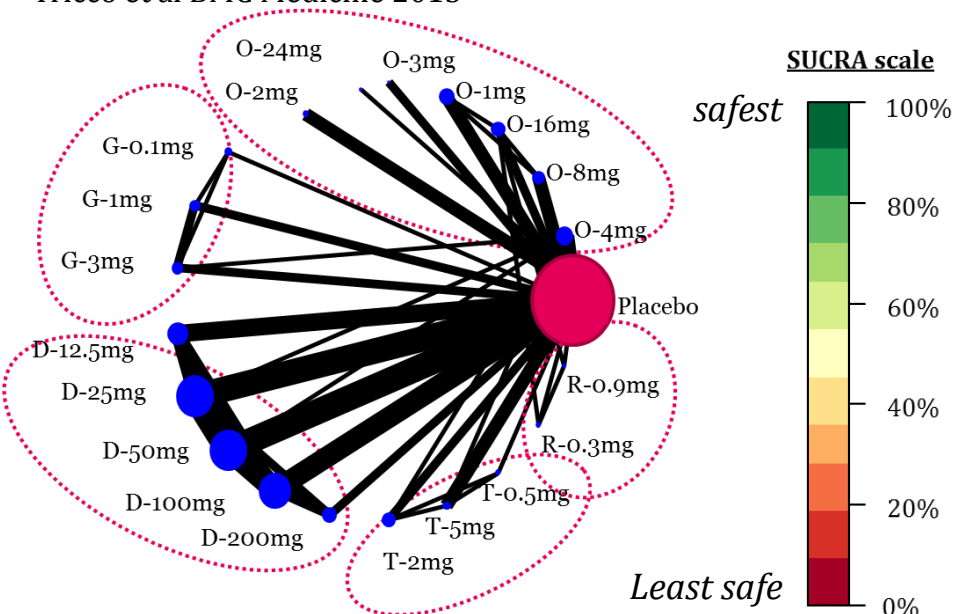


# Illustrative example - Dataset

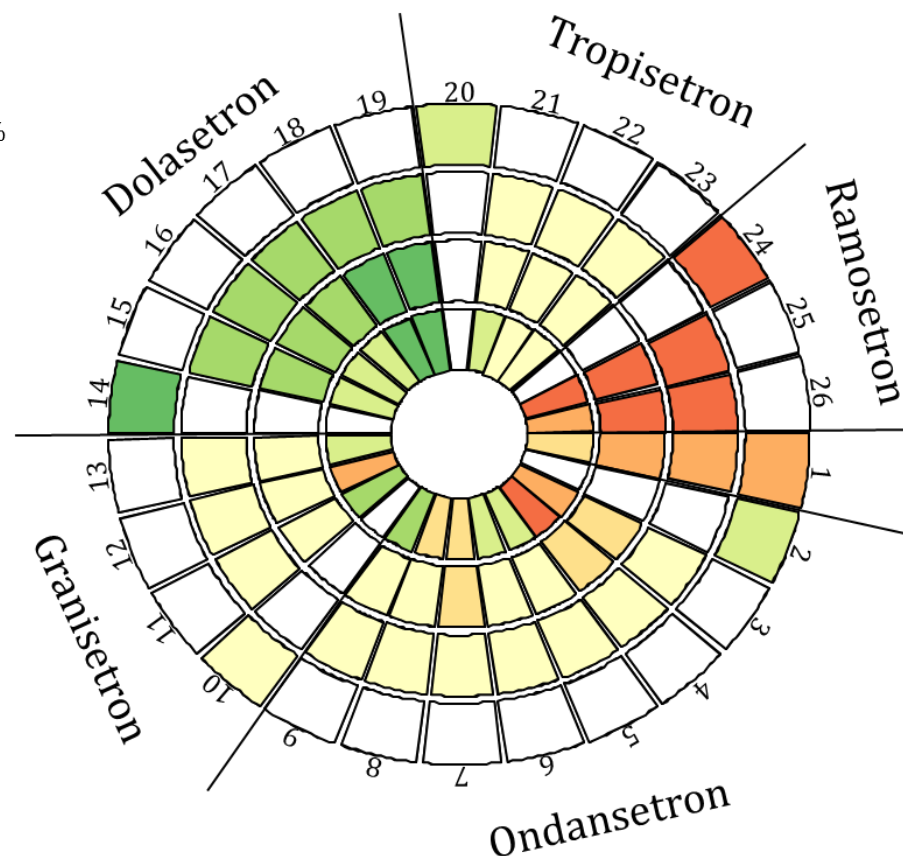


**Arrhythmia – 5HT3 surgery: 27 studies, 8871 patients, 6 treatments, 21 doses**

Tricco et al BMC Medicine 2015



- |                               |                               |
|-------------------------------|-------------------------------|
| <b>1 : Placebo</b>            | <b>14 : Dolasetron-Fixed</b>  |
| <b>2 : Ondansetron-Fixed</b>  | 15 : Dolasetron-12.5mg        |
| 3 : Ondansetron-1mg           | 16 : Dolasetron-25mg          |
| 4 : Ondansetron-2mg           | 17 : Dolasetron-50mg          |
| 5 : Ondansetron-3mg           | 18 : Dolasetron-100mg         |
| 6 : Ondansetron-4mg           | 19 : Dolasetron-200mg         |
| 7 : Ondansetron-8mg           | <b>20 : Tropisetron-Fixed</b> |
| 8 : Ondansetron-16mg          | 21 : Tropisetron-0.5mg        |
| 9 : Ondansetron-24mg          | 22 : Tropisetron-2mg          |
| <b>10 : Granisetron-Fixed</b> | 23 : Tropisetron-5mg          |
| 11 : Granisetron-0.1mg        | <b>24 : Ramosetron-Fixed</b>  |
| 12 : Granisetron-1mg          | 25 : Ramosetron-0.3mg         |
| 13 : Granisetron-3mg          | 26 : Ramosetron-0.9mg         |



**Circles from outside in refer to:**

- A: Fixed Effects model
- B: Random Effects (with dose consistency)
- C: Random Effects (no dose consistency)
- D: Independent Effects



# Summary

- ❑ Different approaches used to classify treatments in a network may result in **important variations** in interpretations drawn from NMA
- ❑ Modelling dose-effects in NMA and accounting for the intervention-dose relationship:
  - Adds to **borrow strength** in estimating dose-effects within treatment classes
  - Overcomes problems with **sparse data** in the treatment networks
  - Can **incorporate studies** that compare the **same treatment at different doses**
  - Allows the **identification** of not only the best treatment in a network, but also the **most effective dose**
  - **Increases power** compared to carrying out several independent subgroup analyses, lumping or extreme splitting approaches
  - Provides additional insight on **heterogeneity, inconsistency, intervention ranking**, and hence **decision-making**

