Putting It All Together: Protocol Development and Thought Exercises

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4th MURIA - June 19, 2018





Learning Objectives

- To understand the reasons to develop a protocol prior to study conduct
- To gain familiarity with the essential elements of a protocol
- To utilize the concepts taught in the course to develop a research study

Protocol Development

Why Plan a Research Project?

- Avoid unanticipated problems:
- Improper assignment of subjects to treatments
 Improper randomization
- Unexpected variability among subject characteristics:
 - · Need for baseline control of confounders
- Unrealistic schedule for study completion
 - · Need for pilot component
- Inadequate or no data management:
 - Poorly designed case report forms
 - No plan for database creation / management

Planning for the Study

- · Consider reviewing study plan via:
 - Medical literature (Has study been done?)
 - Research mentor
 - Colleagues familiar with the research area
 - Research facilitators (Study coordinator)
 - Statistical consultant
 - Colleagues (Is protocol clear?)

Protocol Development Sequence

- 1. Formulate specific aim(s) and hypotheses
- 2. Identify appropriate study setting
- 3. Determine subject eligibility, exclusion criteria
- 4. Decide upon appropriate study design
- 5. Determine data variables needed
- 6. Estimate sample size needed
- 7. Anticipate limitations -> try to mitigate these
- 8. Write research proposal for review

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Step 1. Formulate Specific Aims

- · Important and relevant question:
 - Your experience in the field
 - Interaction with peers, mentor
 - Knowledge of the medical literature
- Begin with the question:
 - "What is the question?"
- Address feasibility
 - Methods, databases
 - ______
 - Time, resources, funding

Step 1: Formulate Specific Aims

- What do you really want to do? → Objective
- · Write out Specific Aims of project
 - For each aim, formulate hypothesis
- · Considerations:
 - Feasibility: continuous assessment
 - Review feedback from:
 - Mentor
 - · Other researchers, colleagues
 - · Self (sleep on it!)

Step 1: Determine Hypotheses

- Hypothesis: prediction of how variables will be associated in statistical analyses
- · Can be stated in 2 forms:
 - Null hypothesis (H₀):
 - · No difference between 2 study groups
 - Alternative hypothesis (H_a):
 - There is a difference between two groups

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Step 2. Identify Study Setting

- What is best study setting to test hypothesis?
 - Allows aim to be definitively answered
 - Permits all data variables to be collected
 - Feasible
- Examples:
 - Databases
 - Clinic settings

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Step 3. Study Subjects

- Determine eligibility criteria for subjects:
 - Who are subjects of interest?
 - "What is the target population?"
 - Target population = Persons to which study results are to be generalized
- · Determine exclusion criteria:
 - Why should certain subjects be excluded?
 - Ethics
 - Safety
 - · Avoid biases, confounding

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Step 4. Choose Study Design

Descriptive Studies

Case reports

Case series

Analysis of secular trends

Analytic Studies

- · Case-control
- Retrospective cohort
- · Prospective cohort
- Experimental

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Step 5. Determine Data Variables

- Identify variables needed to answer Specific Aim:
 - Exposure: drug treatment, risk factor, disease
 - Main study outcome(s)
 - · Appropriate and valid (surrogate vs. clinical)
 - · Systematic bias in assessments
 - Cost to measure → feasibility
 - · Impact of choice on sample size, analyses
 - Potential confounding variables

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Step 6. Estimate Sample Size

- How many subjects needed to detect difference in outcomes between groups?
- · Depends on:
 - Size of the difference (e.g., RR, OR)
 - Type 1 error rate (typically 0.05)
 - Power you seek to detect difference (usually 80%)
 - Ratio of controls:cases or unexposed:exposed
 - Event rate in controls
- · Consider biostatistical assistance to calculate
- Sample size programs available

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Step 7: Anticipate Limitations

- · All studies have limitations
 - Are results still valid despite these?
- Recognize potential limitations
- · Discuss how to mitigate limitations
 - Adjust study design to reduce bias
 - Control for confounders in analyses

Common Study Limitations

- Bias:
 - Systematic difference between groups that leads to over-/under-estimation of measure of association
- Confounding:
 - Knowledge of the disease and pathogenesis is invaluable in anticipating confounding
 - Can be controlled for for in analyses
- · Generalizability: representativeness
- Sample size

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Step 8. Write Protocol

- Now write your study protocol!
- Iteration of protocol takes time
- May require many drafts

7 Rules of a Good Protocol

- 1. Clearly identify your Specific Aims
 - Can have sub-aims or secondary objectives
- 2. Clearly describe study significance / rationale
 - Why are you doing the study?
 - What do you hope to demonstrate?
 - Why is study important (clinically, biologically, public health significance)?
- 3. Design study to achieve primary objective
 - Study procedures, study design, statistical analysis

7 Rules of a Good Protocol

- 4. Ensure consistency from section to section
- 5. Describe all study details / analyses clearly:
 - Give clear directions for each step of the protocol
 - Consider the relationship of one procedure on another
 - Develop a flow sheet for study day or week
- State how the data will be handled and analyzed
- 6. Carefully consider conditions of evaluations:
 - Avoid unnecessary measures (e.g., how often do blood sample need to to taken?)

7 Rules of a Good Protocol

- 7. Ensure patient safety:
 - For novel compounds, does the toxicology in animals cover the dose and duration in humans?
 - Has the route of dosing been studied in animals?
 - How will subject's safety be evaluated, by whom, how often?
 - How will severe/serious events be evaluated?
 - Define AEs and SAEs and their reporting requirements
 - How will the study be monitored?

Putting It All Together Thought Exercise

Thought Exercise

- You wish to evaluate the risk of acute liver injury assoc. with oral azole antifungals
 - Concern that ketoconazole may be esp. hepatotoxic
- Questions:
 - What study design would you use?
 - What outcomes should be evaluated?
 - What data source to use to answer the aim?
 - What potential effect modifiers, confounders to collect?