



Improving Power in a Pragmatic RCT Pilot Trial: A Historical Borrowing Approach

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Overview

To improve statistical power in a pragmatic RCT pilot trial with small sample size, we implemented historical borrowing using data from a previous, similar RCT, and multiple imputation to retain observations with missing values.

Background

- Meals on Wheels (MOW) programs are home meal delivery services that address food insecurity among older adults.
- Weekly or biweekly drop-shipped frozen meals have been introduced for cost savings compared to traditional volunteer/employee daily delivered meals, but there is some evidence of worse health outcomes.
- A pragmatic RCT pilot trial was conducted to assess effect of meal delivery type on nursing home and inpatient usage.
- Pilot trials typically have small sample size and therefore lack power, and we attempt to address this issue by borrowing from historical data.

Methods

- MOW enrollment data was linked to Medicare records using Bayesian Estimation of Bipartite Matchings to obtain covariate and outcome data
 - 16 subjects not definitively linked, so we apply multiple imputation (MI) for the possible matches
- To incorporate historical data, we implement the power prior for static borrowing which takes the form $\pi(\theta|D, D_0, a_0) \propto L(\theta|D)L(\theta|D_0)^{a_0}\pi_0(\theta)$
- We also implement data-adaptive weighting (DAW) via the “on-trial” score, a combination of the power prior and propensity score methods for dynamic borrowing $\pi(\theta|D, D_0^*, \hat{\gamma}^*) \propto L(\theta|D)L(\theta|D_0^*)^{\hat{\gamma}^*}\pi_0(\theta)$
- For time until nursing home and time until inpatient, we fit a Weibull model, impute survival times, and estimate hazard ratios using a Cox PH model.
- For proportion of study time as an inpatient or in a nursing home, we fit a Beta regression model, impute potential outcomes $Y(1)$ and $Y(0)$, and estimate the ATE $E[Y(1)-Y(0)]$.

Results

Figure 1. ATE estimates of daily delivered meals compared to frozen drop-shipped meals on proportion of time spent as an inpatient or in a nursing home, total follow-up of 180 days.

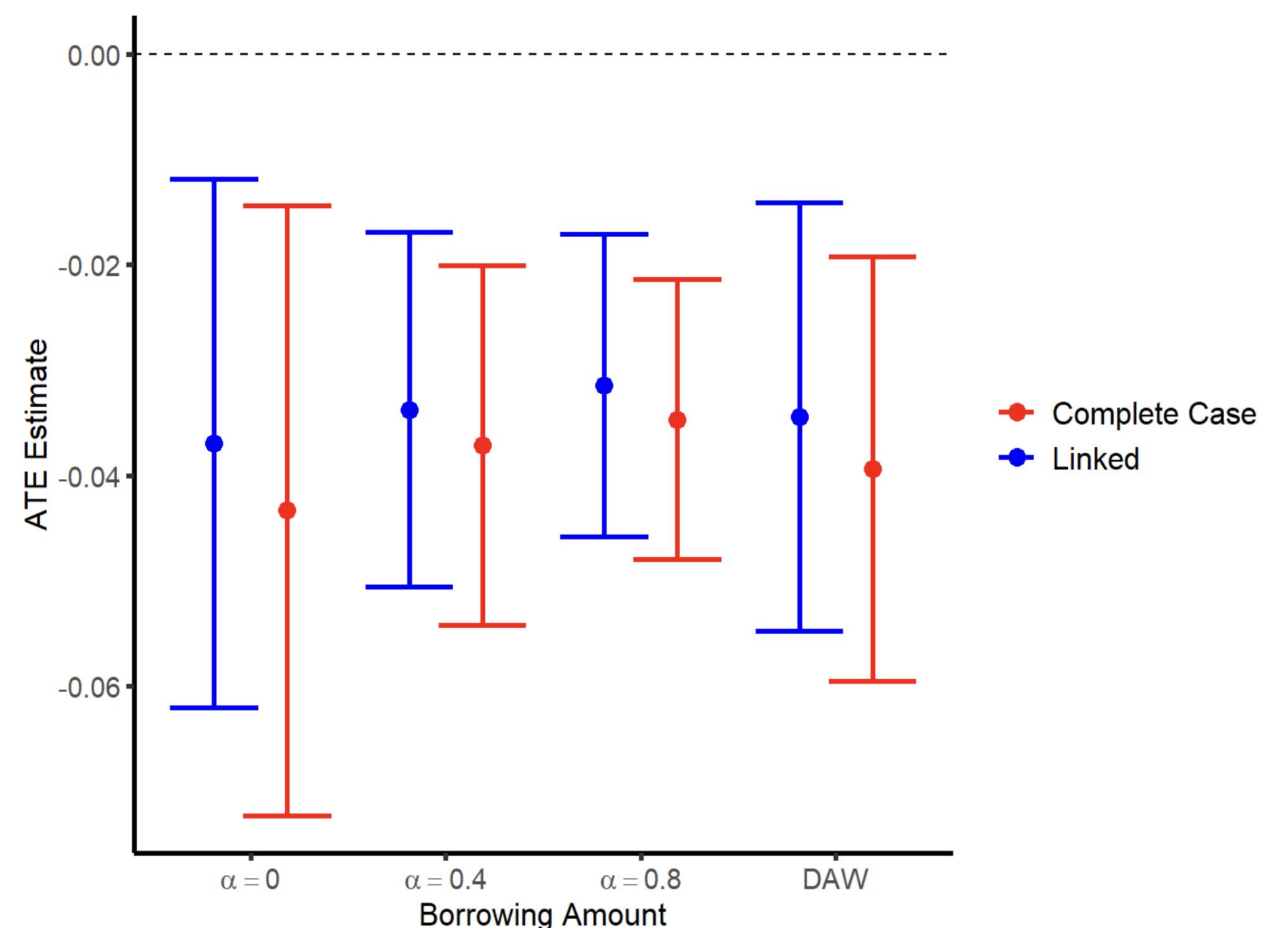
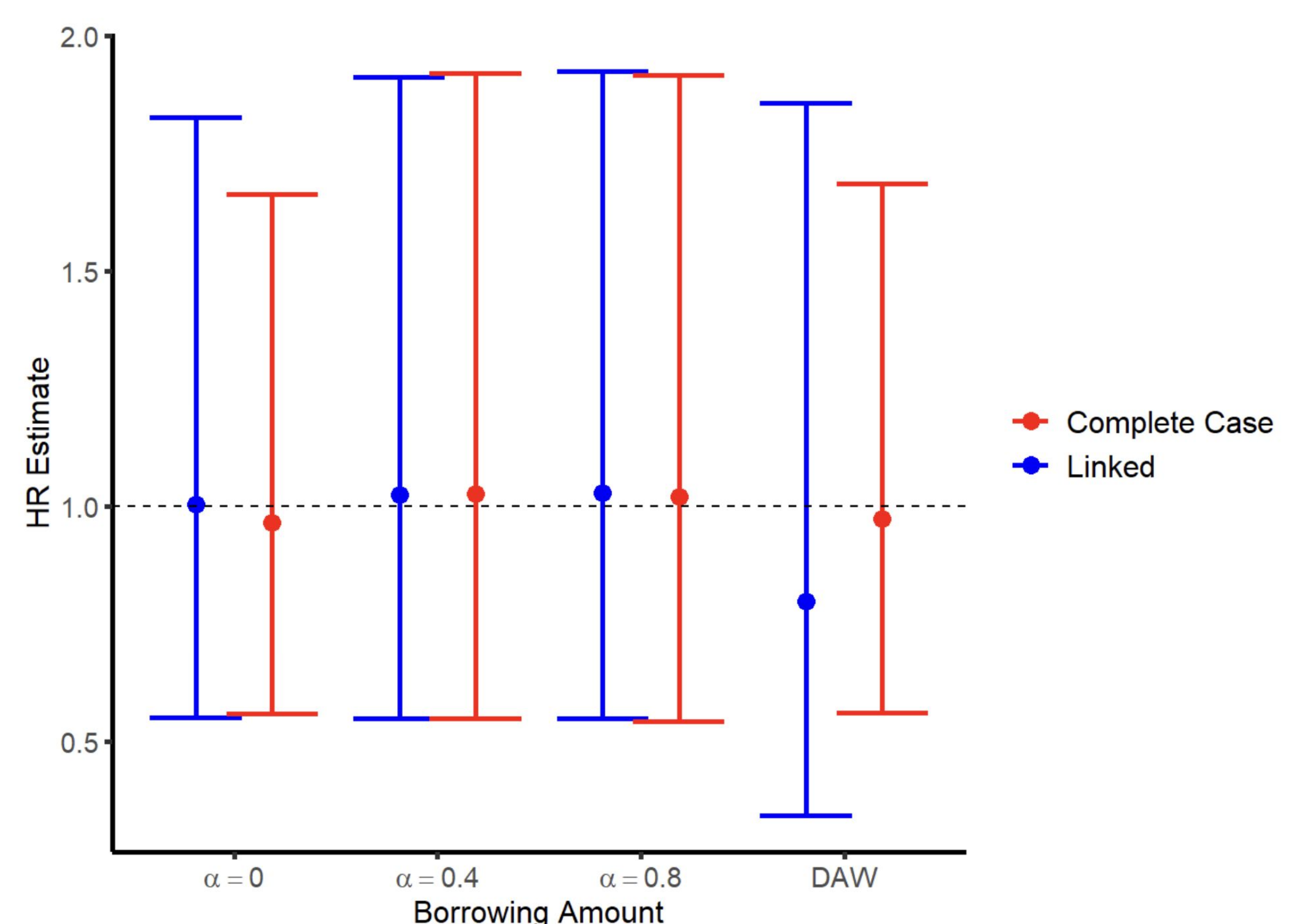


Figure 2. HR estimates of inpatient placement for daily delivered meals vs frozen shipped meals



Conclusion

- No significant difference in hazard for daily delivered meals vs frozen shipped meals; hazard ratios close to 1.
- ATE shows proportion of study time spent as an inpatient or in a nursing home is significantly less when receiving daily delivered meals vs frozen meals.
- For Beta regression, increasing borrowing reduces variance and increases power, MI with possible links has tighter intervals than complete case analysis.
- No improvement in power as borrowing increases or when using MI for possible links for survival outcomes, likely due to larger variance from two-stage MI

Key References

1. Kali S Thomas, David M Dosa, Alison Fisher, Emily Gadbois, Jill Harrison, Michelle Hilgeman, Emily A Largent, Julie Lima, Katie McAuliff, Ellen McCreedy, et al. Home-delivered meals for people with dementia: Which model delays nursing home placement?-protocol for a feasibility pilot. *Contemporary clinical trials*, 121:106897, 2022.
2. Joseph G Ibrahim, Ming-Hui Chen, Yeongjin Gwon, and Fang Chen. The power prior: theory and applications. *Statistics in medicine*, 34(28):3724–3749, 2015.
3. Joanna Harton, Brian Segal, Ronac Mamtani, Nandita Mitra, and Rebecca A Hubbard. Combining real-world and randomized control trial data using data-adaptive weighting via the on-trial score. *Statistics in Biopharmaceutical Research*, 15(2):408–420, 2023.