

Model-Based Meta-Analysis in Ankylosing Spondylitis: A Quantitative Comparison of Biologics and Small Targeted Molecules

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If not stated otherwise, all data are presented as mean (SD). The primary endpoint was the proportion of patients achieving ASAS20 response at 20 weeks. Secondary endpoints included the proportion of patients achieving ASDAI, ASFI, and ACR20 response at 20 weeks. The analysis was conducted using a Bayesian model-based meta-analysis approach. The results showed that biologics were significantly more effective than small targeted molecules in achieving ASAS20 response at 20 weeks. The odds ratio for biologics versus small targeted molecules was 2.34 (95% CrI 1.52–3.84). The results also showed that biologics were significantly more effective than small targeted molecules in achieving ASDAI, ASFI, and ACR20 response at 20 weeks. The odds ratios for biologics versus small targeted molecules were 1.87 (95% CrI 1.12–3.11), 1.56 (95% CrI 0.98–2.47), and 1.45 (95% CrI 0.91–2.29), respectively. The analysis was limited by the small number of studies included in the meta-analysis. Further studies are needed to confirm these findings.

Ankylosing spondylitis (AS) is a chronic inflammatory disease of the spine and sacroiliac joints. The primary goal of treatment is to reduce pain and improve physical function. Biologics and small targeted molecules are two classes of drugs used in the treatment of AS. This study compared the efficacy of biologics and small targeted molecules in achieving ASAS20 response at 20 weeks. The results showed that biologics were significantly more effective than small targeted molecules in achieving ASAS20 response at 20 weeks. The odds ratio for biologics versus small targeted molecules was 2.34 (95% CrI 1.52–3.84). The results also showed that biologics were significantly more effective than small targeted molecules in achieving ASDAI, ASFI, and ACR20 response at 20 weeks. The odds ratios for biologics versus small targeted molecules were 1.87 (95% CrI 1.12–3.11), 1.56 (95% CrI 0.98–2.47), and 1.45 (95% CrI 0.91–2.29), respectively. The analysis was limited by the small number of studies included in the meta-analysis. Further studies are needed to confirm these findings.

os² t² i² s² i² i² r² m² o² t² s² t² m² s² o² s² r² v² ,²
t² i² r² i² t² i² v² i² i² i² i² y² r² m² i² s² u² s² T² o² m² o²
r² o² p² r² v² i² o² u² s² m² t² y² s² r² t² t² r² i² y² o² u² s² i² o²
t² s² i² - p² o² i² t² t² y² i² o² t² i² o² u² t² t² y² r²
t² m² p² o² i² o² u² t² o² m² s² t² y² r² o² m² j² z² o² t² o² t² r² i² s² r² -
p² o² r² t² , t² u² s² i² o² t² i² q² u² i² z² t² o² t² t² .
L² o² i² u² i² m² o² - s² m² t² y² s² i² s² i² s² x² t² s² i² o² o²
t² i² i² o² m² t² y² s² i² s² .¹⁰ B² y² o² m² p² s² s² i² o² i² u² i² t²
r² o² m² t² i² t² r² u² r² , i² t² s² t² v² u² i² o² t² t² u²
r² i² o² o² r² u² i² o² o² u² p² r² o² v² i² u² r² t² s² s² s² n² t² o²
t² r² u² r² s² o² s² , o² s² q² u² t² y² m² o² r² v² i² o² m² p² r² i² s² o²
m² i² v² v² i² v² o² t² t² t² t² i² o² m² t² y² s² .¹¹ T² r² o² r² , j² t² o² o² r² m² o² r² i² o² r² -
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m² s² u² r² y² t² r² p² o² i² o² m² o² y² r² p² o² r² t² i² t² i² i² -

Table 1 Summary of available information for each drug in the analysisD_r T_ra,

Table 3. I t t o s t i n t s p r i t k
 or ru i o t p r o v t m o i t s t i t
 i i r t h t o s t o s t o r i r a t m i s t i o
 r o u t s i t o u r v i l r o u t s (s . , p . o . i . v .) s . t i v .
 o i r f m (i . v . s .)^{17,18} s o m i t o s a t i v .
 i . v . s . i . v . s . p . o . s . s . u s t t o r p . o .
 r f m r o o f m i t o r s p r i t y s i s .

I o s t o t A S A S 2 0 m o , r f m i r i a t
 t o t r p s t t . M o r o v r t f s p o s o p o l -
 i j i 5 m i o t r y m u r o n a t o t r o s o p o i j i .
 T o s t o r u s y i . v . m i s t a t o r o u t s (E T ₅₀ = 0.8% ,
 E T ₉₀ = 2.8%) s s i i i t y s t r t r u s y s . r o u t s
 (E T ₅₀ = 2.1% s E T ₉₀ = 7.0% s ; **Table 3**).

A n o t o w r t s i v s i t , o y t p r t o
 m a p i t s i u s o w r t . T s f m a t o w r t
 p r m t r v u o - 0.72 (-1.50, 0.05) i i t s t t m p -
 i t f r m o r i y o s s r t r f m p r o v m t i B A S D A I
 t m p i t e

T p r m t r s o t a B A S D A I m o w r u s o s i m u -
 t p o j u s t r o n s i i B A S D A I s o r s
 t 12, s s u n i y p i t w i t 75% m p i t e
(Figure 2b). S i m i l r o t r s u t o t a A S A S 2 0 m o , T N F i -
 i i o r s s i t m o s t i v t t I i x i m 5 m /
 0, 2, 6, q r s u t i t r t s t r o o r t
 (-2.46; C I = -2.80 o -2.11) i B A S D A I t 12, o s y
 s . o f m u m (-2.11; C I = -2.41 o -1.82) (s t t i v s t
 i t i . v . o f m u m i o r p o r t B A S D A I s o r s). I L - 6 i i i -
 o r s (s r i u m i o i i z u m i) i o t s i i i t y f m p r o v t
 B A S D A I s o r s i t 95% C I r o s s i u .

ΔBASFI model

T o r m u o f u t i Δ B A S F I s s r i s s :
 F o r r o i z u m p o ,

$$\Delta B A S F I = \max_{drug} \tag{4}$$

F o r o t r r u s

$$\Delta B A S F I = \max_{drug} \cdot (1 - e^{-general \cdot time}) \tag{5}$$

T i t p r m t r s i s t a **Table 3.** T o s t o r u s
 (k i) s s t o t s m v u x p t r o i z u m p o s
 i x i i t f m n i t t i m t o m x i m u m T
 m j o r i y o r u s x p t r o i z u m p o , i v E T ₅₀ t
 2.3% s E T ₉₀ t 7.7% s

T j u s i o o o s r f m f m p t o t r p t i o t
 s i i i t y f m p r o v t m o . T t o i . v . o f m u m
 s o t o s f m t s p r t y s o y o p o i w s
 v i o r t Δ B A S F I m o . H s v t i t o u i o o
 s p r t E m x p r m t r o r s . o f m u m r f m o 50 m
 q f m p r o v t m o s i i i t y , i i t t t t r i -
 m s r t i t f m p r o v m t o B A S F I t
 s . o f m u m r f m o 100 m q f m i . v . o f m u m .

T p r t o m t e t s s o i u s o w r t .
 T s t a t o w r t p r m t r v u o - 1.60 (-2.54, -0.66)
 m s t t m a t f m o r i y o s s r t r f m p r o v -
 m t i B A S F I t m p i t e

T s i m u l a t i o n o f t h e c o r r e l a t i o n Δ B A S F I s s u m i n g u p t h e e f f e c t 7 5 % m i s s i s s i n F i g u r e 2 c . I n v e s t i g a t i o n s i n u n i t r a r s s o m i s t r o u t s t r s p o s i B A S F I s m o t e m (- 1 . 9 0 ; C I = - 2 . 1 1 t o - 1 . 6 8) , o s y i x i m 5 . m / 0 , 2 , 6 , q (- 1 . 8 2 ; C I = - 2 . 1 6 t o - 1 . 5 0) . A p r m i s t p o s i i i t y i n p r o v t B A S F I s o r s (- 1 . 4 6 ; C I = - 2 . 2 5 t o - 0 . 6 4) i t i r 9 5 % C I .

Residual correlation

A t r m p r i p m o i t u o r r s s i v p r o s s o o r l (A R 1) s u s o u t o r r s i u o r r i o o r t A S A S 2 0 m o , t Δ B A S D A I m o , t Δ B A S F I m o .

Model evaluation

T i o s i p o s o r t t r m o s i o t s s o v i o u s m i s s p i i t o (F i g u r e S 1) . T m o - i t t i m - o u r s p o s o r p r s t i v r i s o r t r m o s i r s s i F i g u r e s 1 , 3 , a n d 4 , r s p i v y . T m o - i t t i m - o u r s p o s o r i t o t i s o u i F i g u r e S 2 .

DISCUSSION

O u r m t a l y s i s p r o v i q u i t t i v m t o o r t i y o n p r i s o r o s s 1 0 r u s . T r i r t p o i e r

t i t i s i y s i s . O i s i r y p o i t (A S A S 2 0) t o r o i o u s p o i s (Δ B A S D A I Δ B A S F I) s s i t r s p o s o t m t (u i o , p i o i s s s i t i m m i o) , i n p r o y m t i i s i s i v i y (i u , p i , s i j s s) p y s i u i o (t i i y o p r o m o p w i t i v i j s o i y i v i) . T t r i z i o o t r r p o i e s t v u i o o t r i s o r u i m p t t u s p r o v i o n p r s i v u r s t i o p r u i i y . T p y s i s i p i e o u o o s i r v o l t m e p i o t i r p r i o i s . G r y , t i y e i s s i m i r r o s s t p r m - s u r s i t - T N F t m e w r t m o s t i v t m t s i i x i m (5 . m / 0 , 2 , 6 , q) i v o m u n i p r o v i t i s t r s p o s . T s t i y s o s r v i I L - 6 i i o r s . T s r s u e r s u p p o r t y i o o p s u y , ¹⁹ o n p r i a t i y o i i x i m t r a p t t o p r v i o u s m t y s s ^{5,7} i w i t i r i i y o i i x i m w s t t . H s v r t r w r s i s o m i i s i t r o r r o s s t t r p o i e p r m i s t i r j t B A S F I t i B A S D A I A S A S 2 0 , w r l s r o i u n i p o r s i j B A S F I . O u r o i u i m o - i s m b y s i s t s i m i o o r u o s t G r y , i y m s u r y A S A S 2 0

ΔBASDAI
ΔBASFI. T is m y su s t t t ASAS20, i ry ou t
on, o s o t provi o i uous m sur s o s o s
ΔBASDAI ΔBASFI.²⁰ I t y so at t ASAS20 is s s fi -
m t r or, i t is sy o i v i s or t m. Ov l, t
m m i t t i m t o m x i m ASAS20 r s p o s r t or m os t
ru si i t s t t t i s i o m i i t v o m t o AS
t t m s ou s o s or t r s m i ur t o o t
ASAS20 r s p o s r t.
D os r m i or m t o w s s o ou t or i t is
m t

Figure 2 Ranking of treatments by placebo-corrected median response rate for ASAS20 (a), median change in BASDAI (), and median change in BASFI () at week 12 (from high to low). Point estimates and 95% intervals were predicted from model simulation (N = 10,000), assuming a typical trial of 75% male patients with mean baseline BASFI value of 5.4. Dashed lines represent simulated placebo effect. For treatments with multiple regimens, only dosage regimens that had a different efficacy at week 12 are listed separately. ASAS20, $\geq 20\%$ improvement in the Assessment of SpondyloArthritis International Society criteria; BASDAI, Bath Ankylosing Spondylitis Disease Activity Index; BASFI, Bath

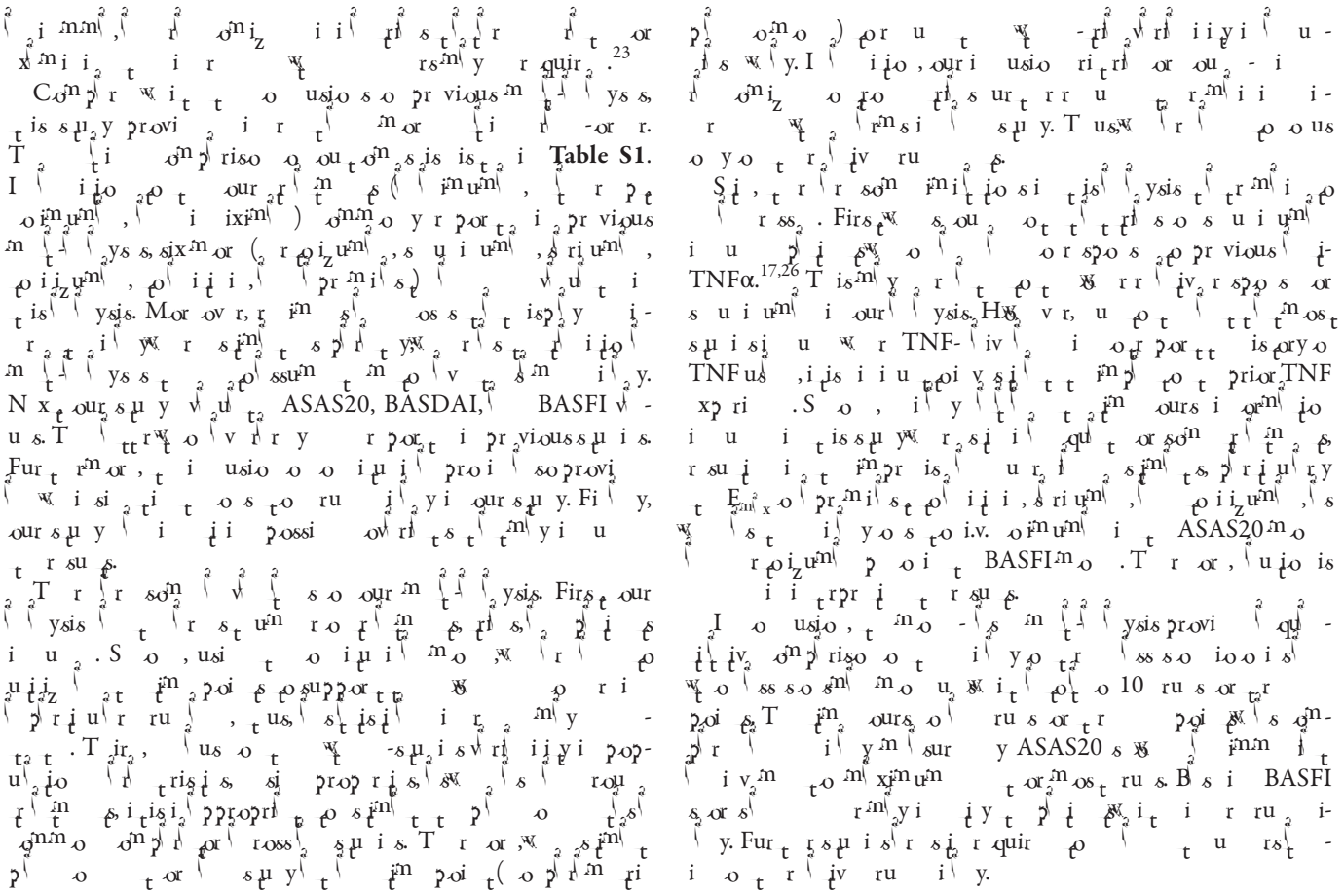


Table 3 Final parameter estimates of ΔBASDAI and ΔBASFI model

Entity	Dose	Route (μg/kg)	Estimate	95% CI
ΔBASDAI	E_{max}			
	Adalimumab	s.c. (40 mg q2w)	-1.65	(-1.92, -1.38)
	Certolizumab pegol	s.c. (400 mg q4w)	-1.66	(-2.03, -1.28)
		s.c. (200 mg q2w)		
	Etanercept	s.c. (50 mg q.w.)	-2.05	(-2.36, -1.74)
	Etanercept	s.c. (25, 50 mg biw)	-1.73	(-2.01, -1.44)
Golimumab	s.c. (50, 100 mg q4w)	-2.13	(-2.43, -1.84)	

Figure 3 Model fitted time-

METHODS

Database development

A system is required to store and manage the data from the clinical trials. The database was developed using PostgreSQL, a powerful open source object-relational database system. The database was designed to store patient information, including demographic data, clinical history, and laboratory results. The database was developed using PostgreSQL 10.15.2, and the schema was designed to support the analysis of clinical trial data.

A list of the variables used in the model is as follows:

Demographic variables: Age, Sex, Race, Ethnicity, Education, Income, Insurance, etc.

Treatment variables: ASAS20, ASAS40, ASAS5/6, BASDAI, BASDAI50, BASFI, BASFI50, etc.

Response variables: Pain, Stiffness, Swelling, Tenderness, Fatigue, etc.

Treatment response variables: ASAS20, ASAS40 (≥ 40% improvement in ASAS), ASAS5/6 (≥ 20% improvement in 5 of 6 ASAS), BASDAI, BASDAI50 (improvement ≥ 50% in BASDAI), BASFI, BASFI50 (improvement ≥ 50% in BASFI), etc.

The model was fitted to the data using the following equation:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \dots + \beta_n X_n + \epsilon$$

where Y is the response variable, X₁, X₂, ..., X_n are the predictor variables, β₀, β₁, β₂, ..., β_n are the regression coefficients, and ε is the error term. The model was fitted using the following software: R, Python, etc.

Model development

The model was developed using the following steps: 1) Data collection and cleaning, 2) Exploratory data analysis, 3) Model selection, 4) Model fitting, 5) Model validation, 6) Model interpretation.

ASAS20 model

$$ASAS20 \sim \text{binomial} \left(n, p \right) \quad (6)$$

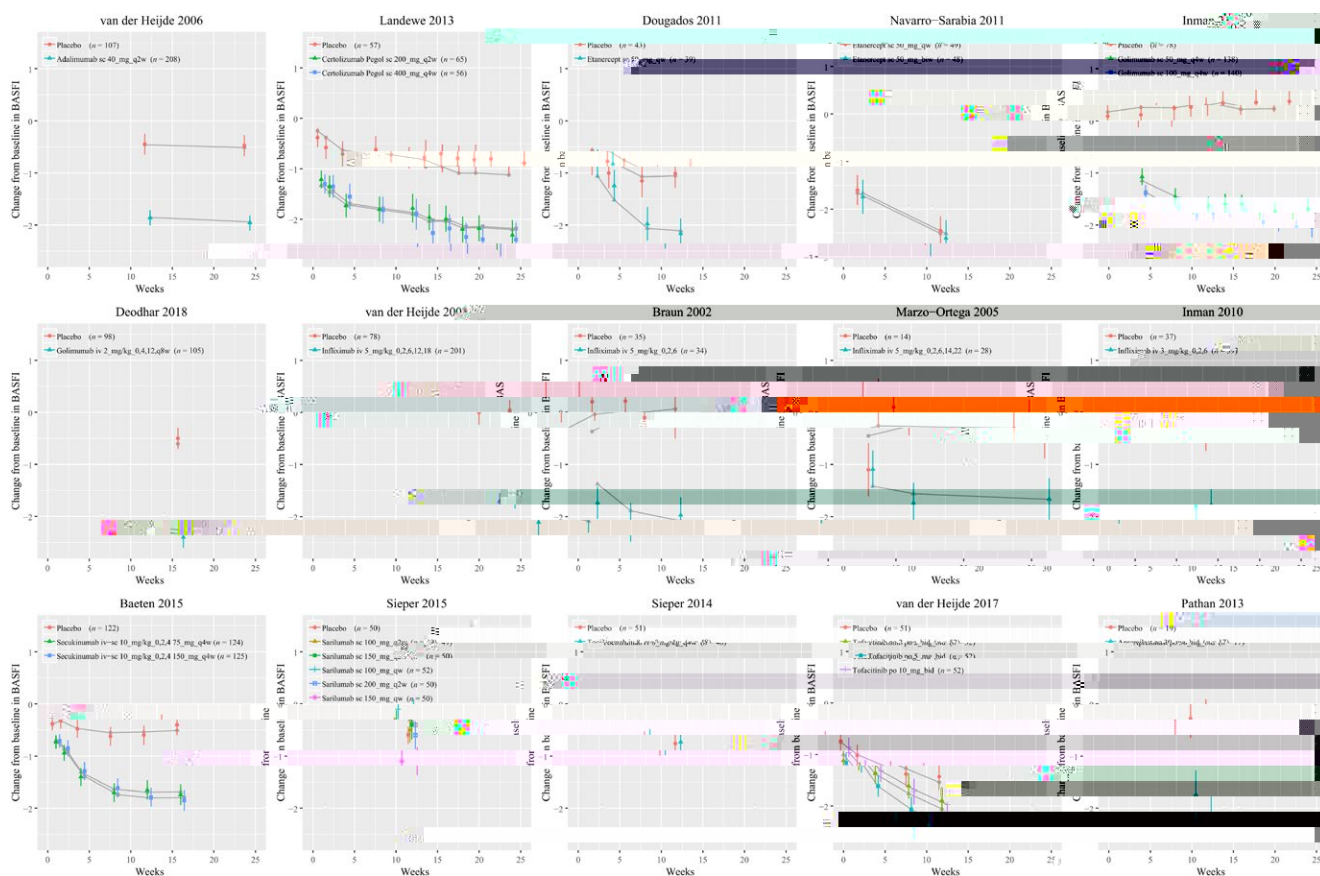


Figure 4 Model fitted time-course plots of change from baseline in BASFI for representative trials. Color symbols and vertical bars are observed mean and standard error of time points; gray symbols and lines are the fitted values. BASFI, Bath Ankylosing Spondylitis Functional Index; q2w, once every 2 weeks; q4w, once every 4 weeks. [Colour figure can be viewed at wileyonlinelibrary.com]

$$(ASAS20) = (0 + drug) \quad (7)$$

$$drug = (drug, dose, time, \theta) \quad (8)$$

$N_{ASAS20,ijt}$ is the number of patients in the i th treatment group, j th dose, and t th time point. $ASAS20_{ijt}$ is the ASAS20 score for the i th treatment group, j th dose, and t th time point. $P(ASAS20)_{ijt}$ is the probability of observing an ASAS20 score of $ASAS20_{ijt}$ for the i th treatment group, j th dose, and t th time point. E_{ru} is the expected value of the ASAS20 score for the r th treatment group and u th dose. E_{ru} is calculated as $E_{ru} = \sum_{i=1}^N P(ASAS20)_{ijt} \cdot ASAS20_{ijt}$. E_{ru} is the expected value of the ASAS20 score for the r th treatment group and u th dose. E_{ru} is calculated as $E_{ru} = \sum_{i=1}^N P(ASAS20)_{ijt} \cdot ASAS20_{ijt}$.

$$drug = \max_{drug} \cdot (1 - e^{-time}) \quad (9)$$

\max_{drug} is the maximum change from baseline in BASFI for the drug. $time$ is the time in weeks. $drug$ is the change from baseline in BASFI for the drug. $drug$ is calculated as $drug = \max_{drug} \cdot (1 - e^{-time})$.

For the i th treatment group, j th dose, and t th time point, the observed mean and standard error of the ASAS20 score are $ASAS20_{ijt}$ and $SE_{ASAS20,ijt}$, respectively. The fitted values and standard errors of the fitted values are $\hat{ASAS20}_{ijt}$ and $SE_{\hat{ASAS20},ijt}$, respectively. The weight of the fitted values is $Weight = \sqrt{(1 - SE_{\hat{ASAS20},ijt}^2 / SE_{ASAS20,ijt}^2)}$.

$$Weight = \sqrt{(1 - SE_{\hat{ASAS20},ijt}^2 / SE_{ASAS20,ijt}^2)} \quad (10)$$

ΔBASDAI and ΔBASFI model

$\Delta BASDAI$ and $\Delta BASFI$ are the change from baseline in BASDAI and BASFI, respectively. $ASAS20_{ijt}$ is the ASAS20 score for the i th treatment group, j th dose, and t th time point.

$$\Delta Y = 0 + drug \quad (11)$$

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Y_{it} is ΔBASDAI or ΔBASFI value at time point t for individual i. E_{0it} is the expected value of Y_{it} at time point t for individual i. T is the total number of time points. N is the total number of individuals.

Covariate model

B_{it} is the vector of covariates for individual i at time point t. B_{it} includes age, sex, duration of disease, BASDAI, BASFI, and CRP. β is the vector of regression coefficients. ε_{it} is the error term. Eq. 13 is the model equation.

A χ^2 test was used to compare the distribution of the residuals. Diagnostic plots were generated for the ASAS20, ΔBASDAI, and ΔBASFI model. The model was fitted using the R package nlme. The significance level was set at 0.05. The total number of individuals was 10,000. The number of time points was 12 (years of follow-up). The mean age was 2.5 years (97.5% CI). The standard deviation was 1.1453. The R-squared value was 0.31–0.137.

SUPPORTING INFORMATION

Supplementary information accompanies this paper on the *Clinical Pharmacology & Therapeutics* website (www.cpt-journal.com).

Figure S1. The diagnostic plots for the ASAS20, ΔBASDAI, and ΔBASFI model.

Figure S2. Model fitted time-course plots of ASAS20, ΔBASDAI, and ΔBASFI value for additional trials included. Color symbols and vertical bars are observed mean and SE of time points; gray symbols and lines are the fitted values.

Table S1. Comparison of our study and previous meta-analyses.

Data S1. Dataset for ASAS20, BASDAI, and BASFI model.

See also Materials S1. References and information for all studies included in the model-based meta-analysis; code for ASAS20, BASDAI, and BASFI model.

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CONFLICT OF INTEREST

The authors declared no competing interests for this work.

AUTHOR CONTRIBUTIONS

L.Z., Y.W., X.F., J.L., and X.W. wrote the article. L.Z., C.Y., and Y.W. designed the research. L.Z., C.Y., and Y.W. analyzed the data.

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