WEDNESDAY 11 JUNE | Wembley Stadium

TIME	SESSION/LOCATION					
08:00 - 09:45	Registration					
00.00 00.10	Box 3004					
09:00 - 09:45	Urgent Meeting - Medical Statistician					
00.00	Apprenticeship Scheme Updates					
	Great Hall	Wembley Suite	Pitch View East	The Arc		
09:45 - 10:45	TED	Successful Use of Bayesian	Al / Machine Learning	Rare diseases and special		
	Chair: <i>Maria Efstathiou</i>	Dynamic Borrowing Methods in Regulatory Settings (0051)	Chair: Julia Saperia	populations Chair: Sue Todd		
	A multi-arm multi-stage design for	Chair: Nicola Scott	Predicting the probability of clinical			
	trials with no control arm and all		trials success from Al-based	Data sharing for rare diseases in		
	pairwise testing (T001) - Peter	Session kindly sponsored by Pfizer	approaches using multimodal data	INVENTS: Going Beyond		
	Greenstreet		(O032) - Nils Ternes	Conventional RCTs for Rare and		
		DC		Paediatric Diseases – the Roche		
	The Role of Response Adaptive Randomization in Non-inferiority	₹ Pfizer	Enhancing Treatment Effect Estimation in Clinical Trials using	perspective (O022) - <i>Markus Elz</i> e		
	Oncology Trials (T011) - <i>Maria</i>	The GSK Biostatistics team has	Machine Learning: A Within-Study	Statistical Challenges in Health		
	Vittoria Chiaruttini	successfully used Bayesian Dynamic	Prognostic Score Approach (O038) -	Technology Assessment (HTA) for		
		Borrowing (BDB) in a commercial	Antigoni Elefsinioti	Rare Diseases (O042) - Samadhan		
	(Sample) size matters! –	setting, which allows for the re-use of	3	Ghubade		
	demonstrating sample size	external data, synthesising new and	Application of causal inference to			
	calculations across software (T004) -	existing data to increase efficiency	identify determinants of seizure	Randomization-based Inference for		
	Agnieszka Tomczyk and Lyn	whilst maintaining rigorous standards	reduction and quality of life in	MCP-Mod (O037) - Lukas Pin		
	Taylor	for regulatory decision making.	patients with Lennox-Gastaut			
		3 ,	syndrome (LGS), Dravet syndrome			
	Frequentists United: A Safe Space	The judging panel was impressed by	(DS), and tuberous sclerosis			
	for Embracing Bayes (T003) - Patrik	the culmination of years of work	complex (TSC) treated with			
	Atkinson	invested in this project – starting with	cannabidiol (CBD) (O048) - Teresa			
		the development and publication of	Greco			
	Biostatistical Challenges in Medical	innovative methodology, followed by				
	Device Clinical Trials - newly	diligent efforts to communicate this				
	founded Special Interest Group	methodology to regulators and				
	Medical Devices (T012) - Michael	stakeholders. The acceptance of				
	Mader	Bayesian approaches by regulators				
		is a big step forward, widely				
		acknowledged within the industry				
		and beyond.				
		The award presentation took place at				
		the PSI annual conference in				
		Amsterdam, where Nicky Best and				
		Andrea Callegaro collected the				
		award on behalf of the Biostatistics				
İ		team.				

		Nicky Best, Andrea Callegaro,			
		Dawn Edwards and Jodie			
		Crawford			
10:45 – 11:00	Changeover	The second secon	I management of the control of the c		
11.00	Great Hall	Wembley Suite	Pitch View East	The Arc	
11:00 – 12:30	Marginal Estimands and Estimation with Covariate Adjustment for TTE Endpoints (O014) Chair: Sarwar Mozumder Session Introduction - David Wright and Sarwar Mozumder Marginal hazard ratios and covariate adjustment — A causal inference perspective - Rhian Daniel Efficiency of nonparametric superiority tests based on restricted mean survival time versus the logrank test under proportional hazards - Dominic Magirr Covariate adjustment in time-to-event data: single and doubly-robust methods - Sanne Roels Ensuring covariate adjustment methods for TTE outcomes are fit for	Patient preference studies Chair: Conny Berlin Published patient preference studies can influence the choice of endpoints in clinical trials: An example from Atopic Dermatitis (O018) – Byron Jones Assessing the Readiness of the Patient Preference Study Landscape for Meta-Analyses and Benefit Transfers: Do We Always Need a New Preference Study (O021) - Michael Bui Enhancing Generalizability in Patient Preference Studies: Addressing Sample Skewness in the associated Covariate Distribution (O020) - Divya Mohan Patient Preferences in Clinical Trials, Challenges and Opportunities	Advances in pediatric extrapolation (O015) Chair: Ian Wadsworth Introduction of the session objectives and presenters - Ian Wadsworth Expert elicitation for pre-specification of priors in pediatric extrapolation studies: from one-parameter to multi-parameter scenarios - Christian Stock Developing Treatments for Rare Pediatric Diseases Using Bayesian Extrapolation - Björn Bornkamp CH E11A and Beyond - ongoing regulatory initiatives - Andrew Thomson	Future-proofing healthcare beyond today for tomorrow's medicines with advancement in benefit-risk assessments (BRA) (O009) Chair: Marco Boeri This session is a joint effort of the EFSPI/PSI Benefit-Risk ESIG. The speakers will emphasize recent developments in BRA methodologies for medicinal products. What does the CIOMS WG XII Benefit-Risk Assessment Report say? - Shahrul Mt-Isa Innovative trial designs and effect size estimation - bias, de-biasing, and when is it considered to be important - Ursula Garczarek Implementing innovative safety evaluation methods: Overcoming	
12:30 – 13:30	methods for TTE outcomes are fit for use - <i>Tim Morris</i> Discussion Panel: Thoughts from A Regulator's Perspective – What are the Expectations? Armin Koch, David Wright, Rhian Daniel, Dominic Magirr, Sanne Roels and Tim Morris SIGS at the Bar: Come meet the SIGS AIMS SIG, openstatsware SIG, L&L SIGS			evaluation methods: Overcoming challenges and sharing successes - <i>Naomi Givens</i> Methodological aspects and practical application of a drug quantitative benefit-risk assessment: a case study - <i>Pavel Mozgunov</i> Shahrul Mt-Isa, Ursula Garczarek Naomi Givens and Pavel Mozgunov	
12:30 – 13:30	Lunch in Bobby Moore Room				
72.00	Great Hall	Wembley Suite	Pitch View East	The Arc	

13:30 – 14:30	Leadership TED Chair: Kate Taylor How to be wrong (T006) - Simon Cleall Stepping into leadership: How will I manage? (T002) - Catherine Dixon Enhancing Cross-functional Partnership in Early Oncology Clinical Development: A Practical Guide for Biostatisticians (T008) - Laura Barker Trust actually: Building teams that love to work together (T007) - Zainab Walsh Building High-Performing Teams: Leadership Strategies for Navigating Change and Driving Growth(T010) - Aga Rasinska Trust: The Backbone of Leadership (T005) - Alun Bedding	Use of external data to improve clinical trials Chair: Jyoti Soni Steps in using healthcare systems data as outcome data in clinical trials (O024) - Sharon Love Why Accurate Time to response prediction matters? (O026) - Donia Skanji Survival of the Fittest: Digitising Survival Data for Enhanced Decision-Making in Clinical Trials (O044) - James Sykes and Nelson Kinnersley	Estimands: Methods, theory and case studies Chair: Tobias Muetze Sample size calculation for estimands and the impact of intercurrent events on power (O039) - Thomas Drury How Do Meta-Analyses Handle Treatment Switching? A Systematic Review (O041) - Rebecca Metcalfe Determining the non-inferiority margin in light of the ICH E9(R1) estimand framework (O034) - Sunita Rehal	Bayesian Dynamic Borrowing Chair: Julia Saperia Unexpected results and challenges when using mixture priors for Bayesian borrowing (O031) - Darren Scott Non-monotonic power in Bayesian dynamic borrowing: insights and practical remedies (O035) - Gianmarco Caruso Biased borrowing or borrowing bias? Leveraging Bayesian borrowing and quantitative bias analysis for robust comparative effectiveness insights (O049) - Grace Hsu
14:30 – 15:00	Refreshment Break in Bobby Moore R Great Hall	oom		
15:00 – 16:00	EU HTA: readying ourselves for the road to 2025 and beyond (PL4) Communicating Statistics and Uncertainty – The Case of Health Technology Assessment The famous physicist Richard Feynman once said that it's more interesting to live with uncertainty than to live with answers that might be wrong. While this piece of wisdom is relevant for all statisticians, it is particularly acute in the new reality of EU HTA Joint Clinical Assessment. Here, statisticians must communicate statistical evidence and its inherent uncertainties while addressing HTA questions across 27 member states through a comprehensive evidence dossier. The resulting dossier and assessment report – and all of it's multitude of statistical analyses - will be highly public documents that will be used by multiple stakeholders to seek clear answers to their needs from their perspectives – but clouded by inherent uncertainty. How do we communicate in a way that reflects the needs of these different stakeholder groups, and the different lenses they will use to view the results. In this session, we will look at the perspectives of these stakeholders we can call the 6P's – Preparers (Drug Developers); aPprovers (regulators); Payor/HTA agencies; Provider (medical professionals); and Patients and the Public audience.			

This frames an HTA variant of our profession's universal communication challenge: how do we inclusively and effectively communicate statistics to many stakeholders at once? In this session, following a brief introduction to current information submissions requirements in HTA systems, a science journalist and an HTA statistician will present their perspectives on this question, followed by a plenary discussion of how to communicate about statistics in a way that can

help build the trustworthiness of HTA systems.

	Join us for this introduction to a dialogue on how to convey the complexity of the work that pharmaceutical statisticians in industry do to the multitudes of stakeholders who need to understand our work!	
	Lara Wolfson, Maricarmen Climént, Nicholas Latimer and Anders Gorst-Rasmussen	
16:00 – 16:15	Closing Remarks	
	David Wright, PSI Board of Directors Chair	