# **Interpreting Heterogeneity in Meta Analyses of Clinical Trials**

# Steven A. Julious University of Sheffield





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# Introduction

- Outline how to investigate heterogeneity
- Give statistical test
- Highlight graphical methods
- Use worked examples throughout

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# **Assessing Statistical Assumptions**

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3

## **Statistical Tests**

• The test of homogeneity of the treatment effect across studies is based on the statistic

$$Q = \sum_{i=1}^{k} \left(\hat{\theta}_i - \hat{\theta}\right)^2 w_i$$

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### The Residuals from a Meta Analysis

• The weighted residuals from fitting a fixed-effects meta-analysis are given by

$$q_i = (\hat{\theta}_i - \hat{\theta}) \sqrt{w_i}$$

• Under the standard fixed-effects meta-analysis the standardised weighted residuals are

$$q_i' = \frac{(\hat{\theta}_i - \hat{\theta})\sqrt{w_i}}{\sqrt{1 - w_i / \sum_{i=1}^k w_i}}$$

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5

# **Assessing the Residuals**

- The standardised residuals should follow a standard Normal distribution
- Under the standard random-effects meta-analysis the weighted residuals and standardised weighted residuals would be calculated from same equations by replacing  $W_i$  and  $\hat{\theta}$  with  $W_i^*$  and  $\hat{\theta}^*$

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### **Assessing the Residuals**

• A Normal probability plot of the  $q_i$  or  $q_i'$  may be used to check the distributional assumptions of the meta-analysis model

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7

# Multi-Centre Trials v Meta Analysis

- A multi-centre trial may be analysed in the same way as a meta-analysis
  - That is by treating centres as studies.
- Multi-centre trials can be analysed using an overall model which includes the terms centre and treatment.
- Homogeneity of treatment effects across centres can be undertaken by fitting a treatment by centre interaction to obtain an estimate of treatment effect with its variance for each centre.
- The standardised residual can be calculated replacing the w's with the inverse of the variance.

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# Worked Example Paroxetine in Adults

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9

# Meta analysis of 23 Paroxetine Trials Shely 1 Shely 2 Shely 3 Shely 9 Shely 9

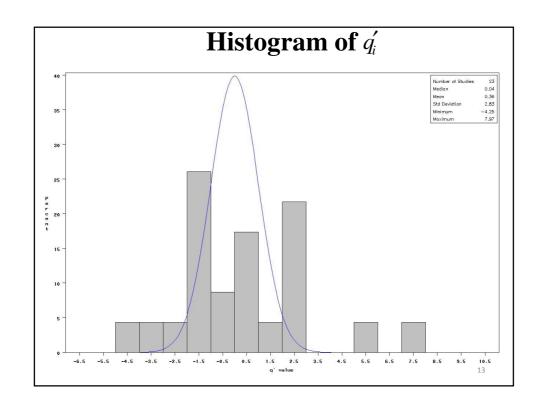
### **Paroxetine Trials**

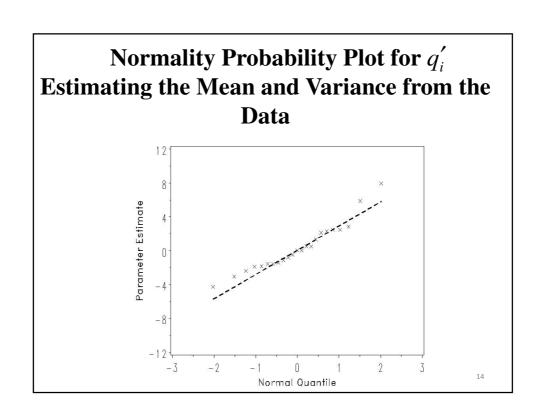
- The treatment effect is measured by the difference in mean HAMD between Paroxetine and placebo.
- There seems to be some evidence of heterogeneity in treatment effect though most of the heterogeneity seems to be in the smaller trials
- The fixed effect meta-analysis gave an overall mean difference of 2.91 with a 95% confidence interval of (2.66 to 3.17).
  - The test of homogeneity gives a P-value of <0.001 (chi-squared of 170.23 on 22 degrees of freedom).
- The overall mean difference from the random effects metaanalysis is 3.36 with 95% confidence interval of (2.59 to 4.12)

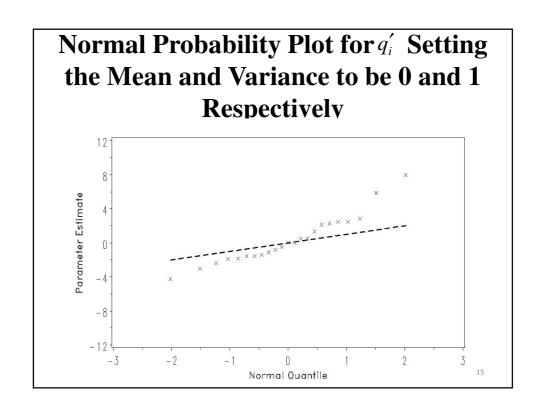
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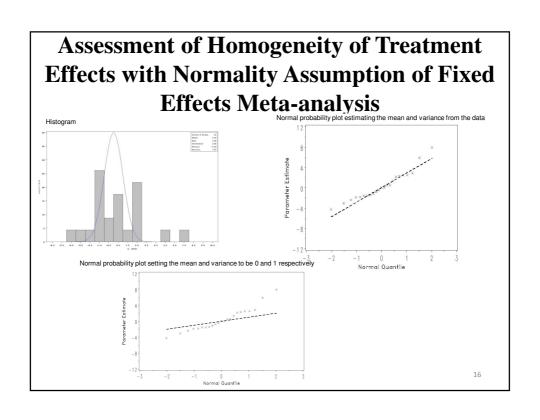
### **Fixed Effects**

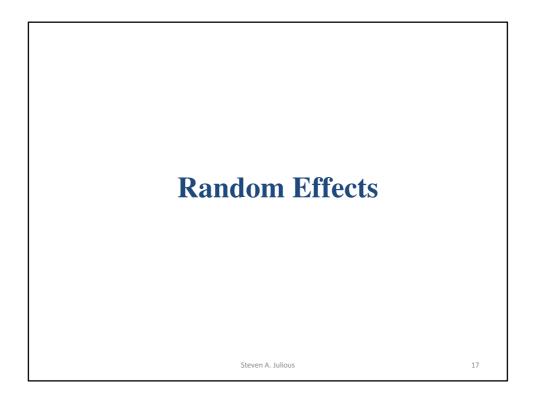
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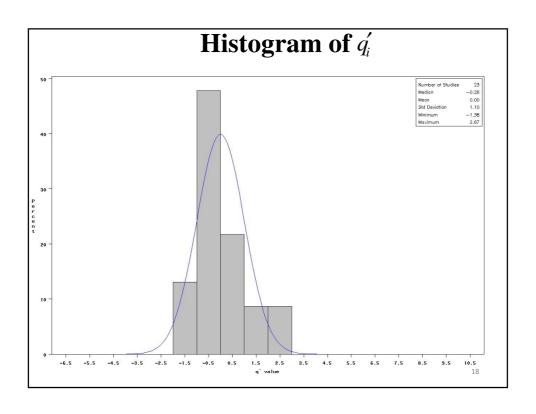


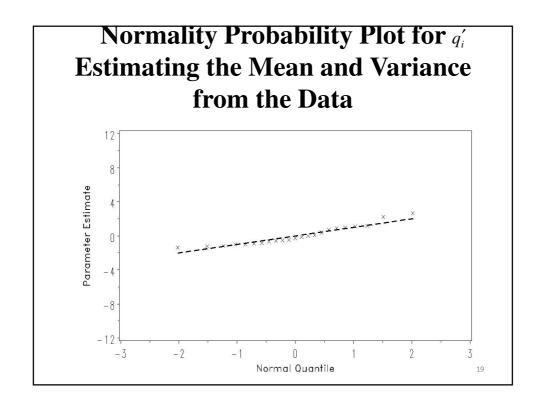


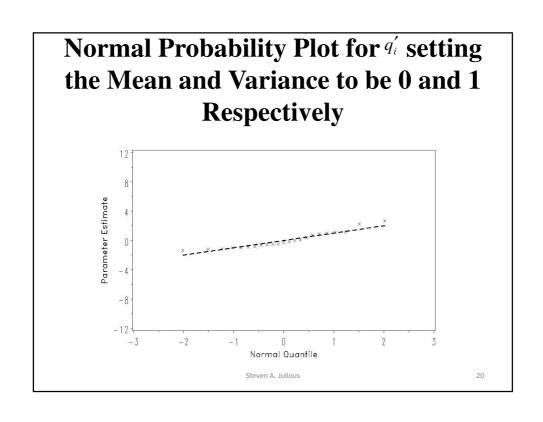


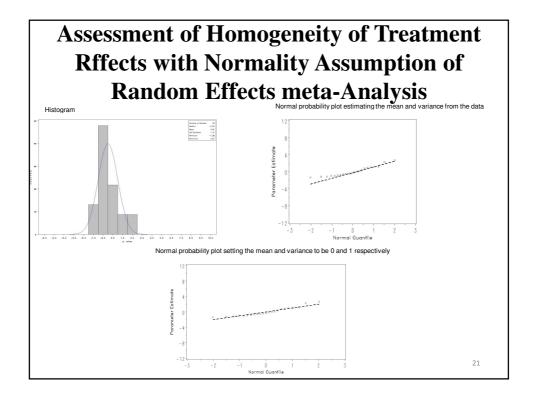












### **Summary of Results so Far**

- There seems to be deviation from the assumptions for a fixed effects meta analysis although the data do seem to take a Normal form
- The assumptions seem to hold better for a random effects meta analysis
- If a fixed effects analysis was the primary analysis then the results would need to be interpreted with care
- The diagnostics so far although easy to produce in most statistics packages but have limitations
- Could an assessment of outliers better be made?

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# Confidence Bands for the Normal Probability Plots

- Confidence bands for the Normal probability plots can be constructed to assist in interpretation
- For the Normal probability line confidence bands can be calculate
  - Using Normal approximation (using the Friendly macro)
  - Using simulation
- For the observed data a confidence band can be calculated
  - Using bootstrapping

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23

## **Simulation Envelopes**

- 1. Simulate a value for the estimated treatment effect from study i from a  $N(0, w_i^{-1})$ , for i = 1, ..., k.
- 2. Perform the fixed-effects meta-analysis and calculate the  $q_i'$
- 3. Order the  $q'_i$  from smallest to largest
- 4. Repeat 1. to 3. a number of times, for example 1,000
- 5. For each i, calculate the 2.5<sup>th</sup> and 97.5 percentile of the 1,000 values, to give the 95% lower and upper bounds for all points

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### **Bootstrapping**

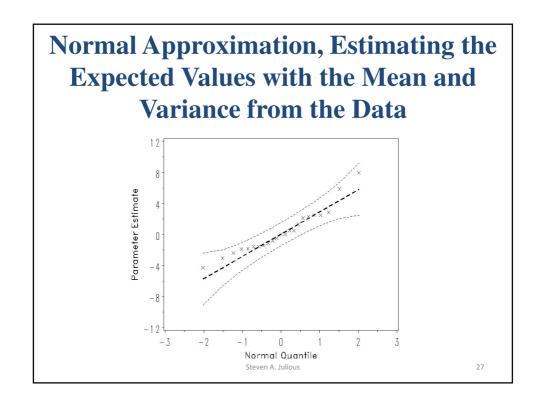
- 1. From the observed data pairs  $(\theta_i, w_i^{-1})$ , i = 1,...,k, take a random sample with replacement of size k
- 2. Perform the fixed-effects meta-analysis and calculate the  $q_i^{\prime}$
- 3. Order the  $q'_i$  from smallest to largest
- 4. Repeat 1. to 3. a number of times, for example 1,000.
- 5. For each i, calculate the 2.5th and 97.5 percentile of the 1,000 values, to give the 95% lower and upper bounds for all points

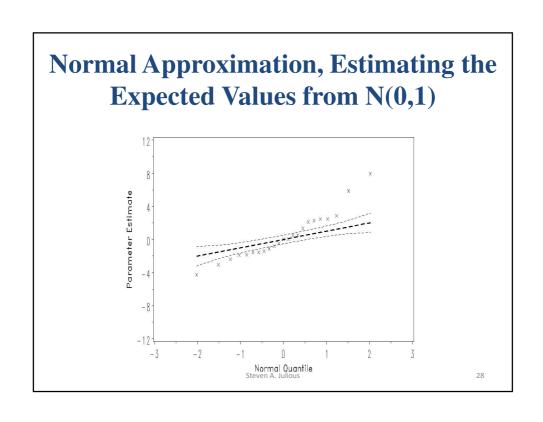
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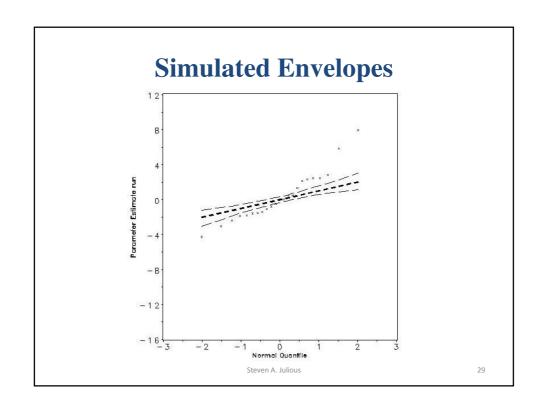
25

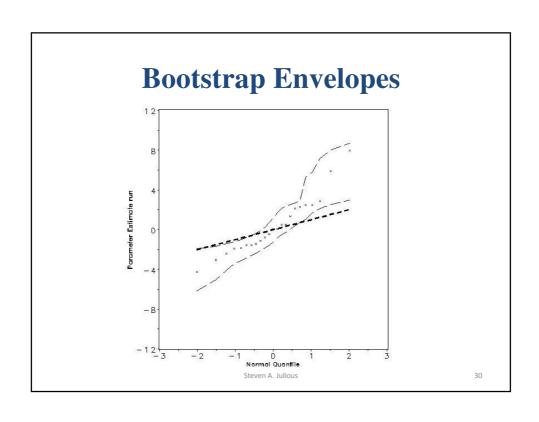
### **Fixed Effects**

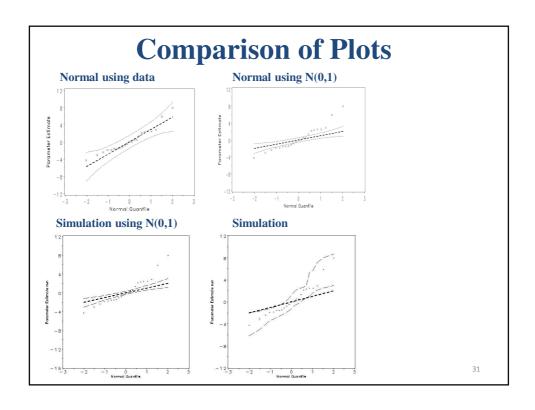
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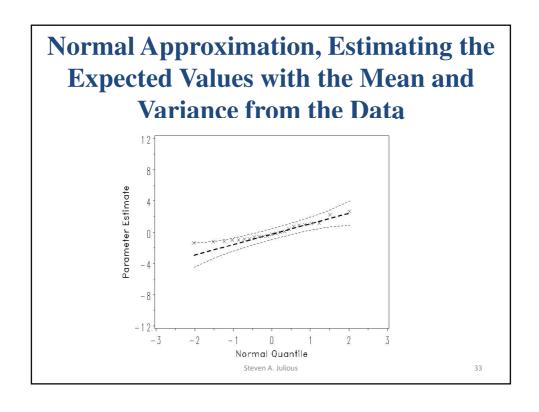


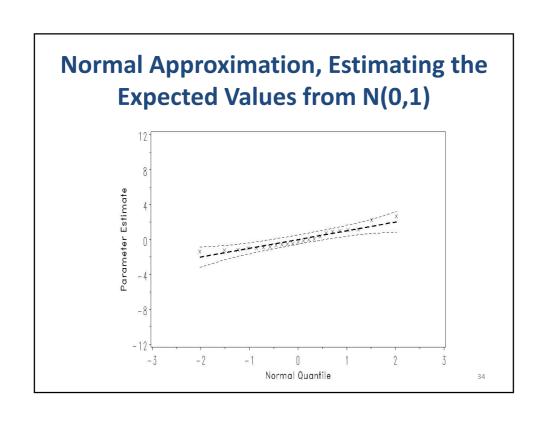


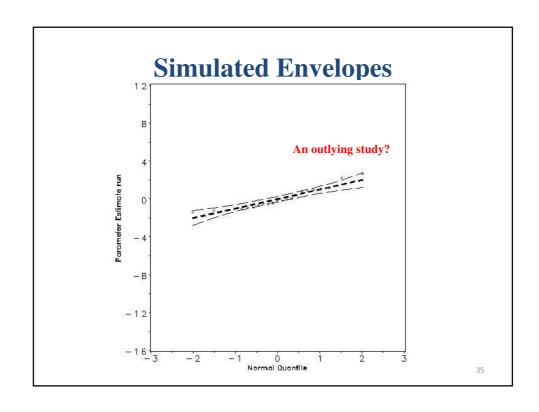


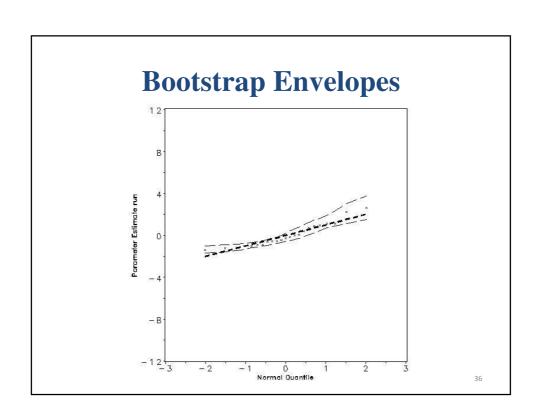


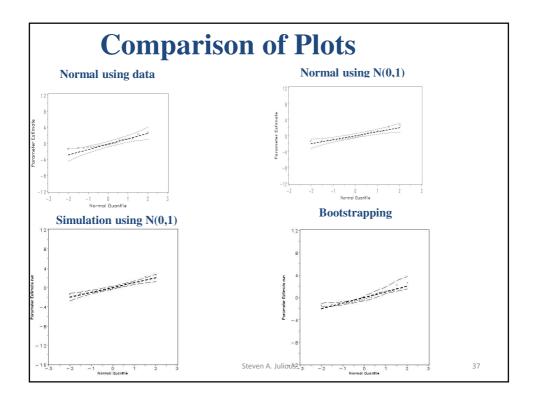
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# **Summary of Results so Far (Again)**

- The additional analyses confirm the original analysis
- The bands are wider at the extremes of the range
- For this example bootstrapping has wide bands at one end
- Allows for an assessment of outliers

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# What if the Treatment Effects Differ Study to Study?

- Find explanation
  - Investigate baseline imbalances
  - Look at subgroups
- Are there any possible explanations?

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39

# **Summary of Meta Analysis**

- Gave overview of how to investigate heterogeneity in a meta analysis
- Recommended not to rely on statistical tests to assess heterogeneity
- Described graphical approaches to assess heterogeneity

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