
Determining clinical meaningful change of clinical and non-clinical outcomes: how can it be achieved?

Sophie Tezenas du Montcel


Which outcomes to consider?

- Clinical outcome assessment (21st Century Cures Act-FDA)
 - Measurement of a patient's symptoms, overall mental state, or the effects of a disease or condition on how the patient functions
 - Includes a patient-reported outcome
- Non clinical outcome
 - Biomarker
 - Digital measures of Health
 - ...

What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

- Need to be meaningful for patients



Meaningful
Aspect of
Health (MAH)


Aspect of a disease that a patient

- does not want to become worse
- wants to improve
- wants to prevent

What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

- Need to be meaningful for patients



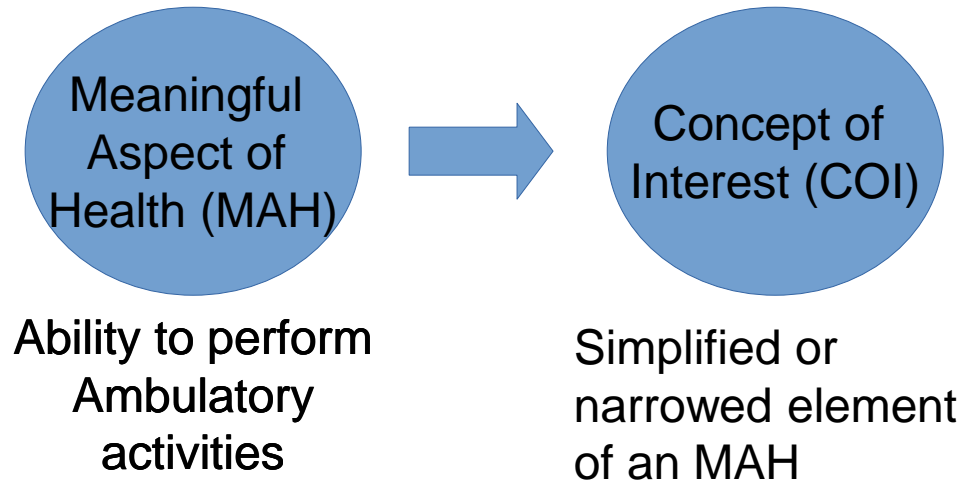
Meaningful
Aspect of
Health (MAH)

Ability to perform
Ambulatory
activities

What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

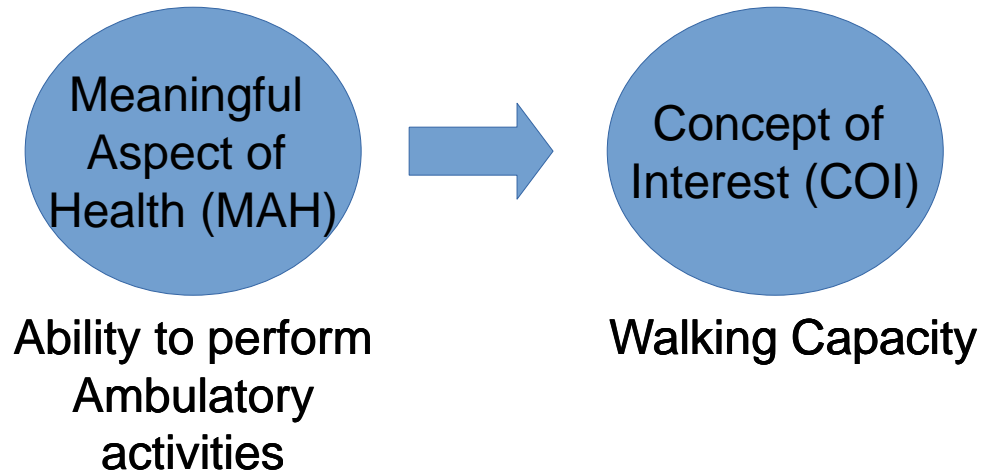
- Need to be meaningful for patients



What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

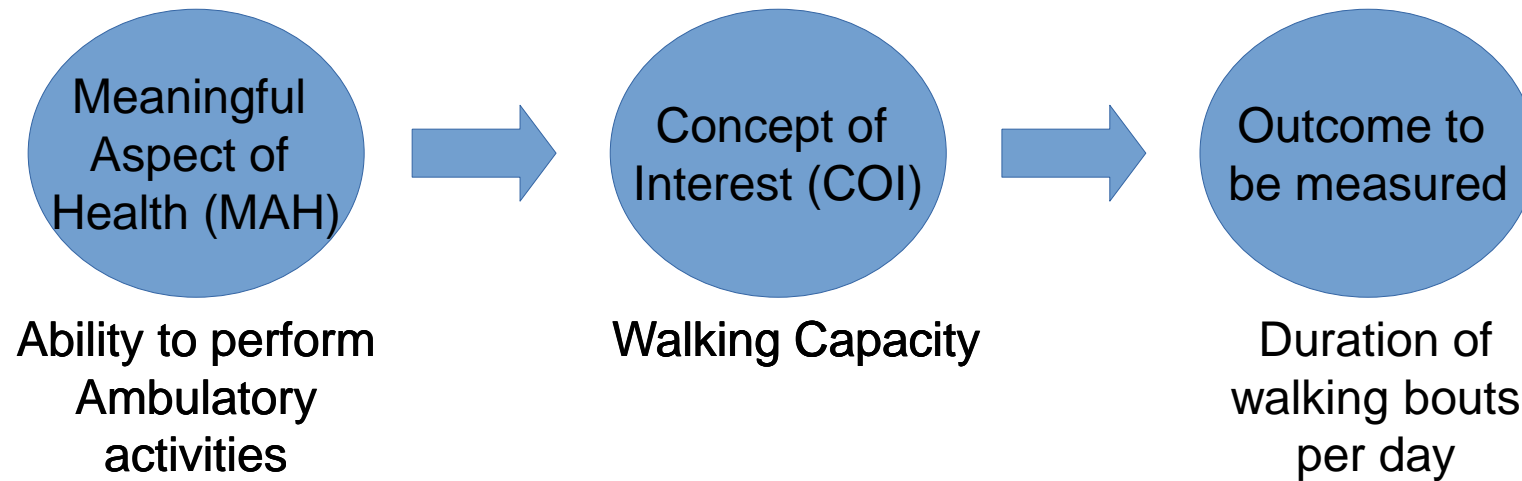
- Need to be meaningful for patients



What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

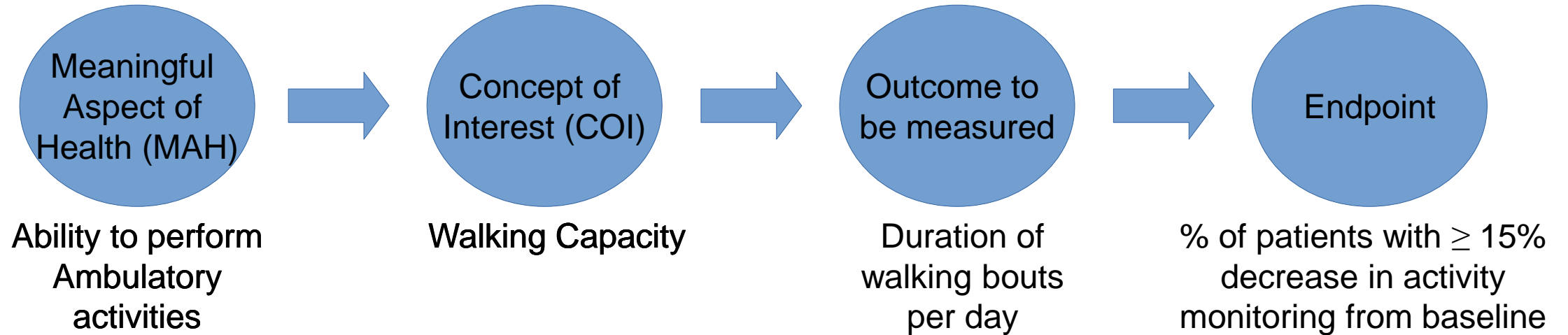
- Need to be meaningful for patients



What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

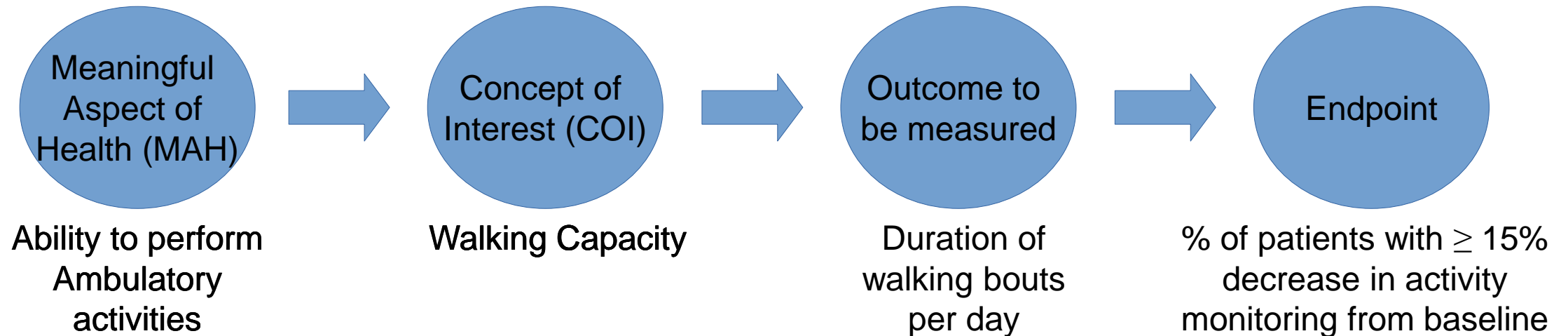
- Need to be meaningful for patients



What is a clinically useful instrument?

Manta et al, *Digit Biomark* 2020

- Need to be meaningful for patients



- Must have demonstrate psychometric properties
 - Validity: degree to which evidence supports the performance of an instrument result for its intended purpose
 - Reliability: how reproducible is the measure?
 - Responsiveness to change
 - Statistical significant change
 - Definition of a minimal change in score considered relevant: Minimal Clinically Important Difference (MCID)

How to define the Minimal Clinically Important Difference (MCID)?

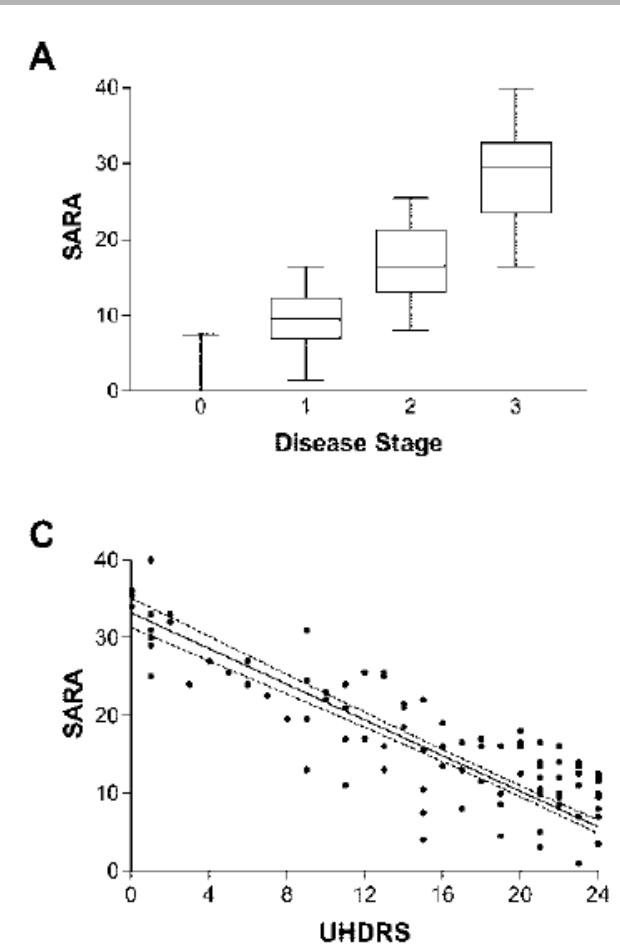
- Anchor-based methods
 - Examine the relationship between a measure with another measure of clinical change (the anchor)
 - Anchor can be derived from clinical outcomes or Patient-Reported Outcomes
- Distribution-based methods
 - Use statistical properties of the distribution of outcomes scores
- Opinion-based methods
 - Based on Delphi methods: consensus between experts

Crosby et al, *J Clin Epidemiol* 2003

Anchor-based methods – Type: Cross-sectional

Schmitz-Hübsch et al, *Neurology* 2006

Method	Instrument evaluated in relation to:	Advantages	Disadvantages
Comparison to disease-related criteria	Disease severity or diagnosis	<p>Disease Staging</p> <p>Disease groups (genotype)</p>	<ul style="list-style-type: none"> • May not be representative • Groups may be variable
Comparison to non disease-related criteria	Impact of life events	<ul style="list-style-type: none"> • Easy to obtain <p>Stressful event external basis for interpretation</p>	<ul style="list-style-type: none"> • May not be representative • Groups may be variable • Relationship may be unclear
Preference ratings	Pairwise comparisons of health states	All health states are compared	<ul style="list-style-type: none"> • May not be representative • Hypothetical • Time consuming
Comparison to known population(s)	Functional or dysfunctional populations	Uses normative information	<ul style="list-style-type: none"> • Normative information may not be available • Amount of change needed not specified



Crosby et al, *J Clin Epidemiol* 2003

Anchor-based methods – Type: Longitudinal

Method	Instrument evaluated in relation	Advantages	Disadvantages		
	Schmitz-Hübsch et al, <i>Neurology</i> 2010				
Global ratings of change	Patients clinicians of impro	Standardized response mean			
			Whole sample (n = 171)	PGI: Worse (n = 120)	PGI: Stable (n = 43)
Prognosis of future events	Those experie not exper some fut	SARA	Converters	0.59	0.21
		INAS	0.26	0.33	0.17
Changes in disease related outcome	Changes outcome		outcome measure	precision	
			<ul style="list-style-type: none"> Known psychometric properties 	<ul style="list-style-type: none"> Assumes strong Instrument – outcome correlation 	

Crosby et al, *J Clin Epidemiol* 2003

Distribution-based methods

Method	Calculation	Advantages	Disadvantages									
Paired t-statistic	Difference/SE mean change	None	Increases with sample size									
Growth curve analysis	Slope/SE slope	<ul style="list-style-type: none"> Not limited to pre-test and post-test scores Uses all of the available data 	<ul style="list-style-type: none"> Increases with sample size Requires large sample sizes Assumes data missing at random 									
Effect size (ES)	Difference/Pre-test SD	<ul style="list-style-type: none"> Standardized units Benchmarks for in Chan et al, <i>Mvt Disord</i> 2011 Independent of sample size 	<ul style="list-style-type: none"> Decreases with increased baseline variability of response among samples 									
Standardized response mean (SRM)	Difference/SD of change	<ul style="list-style-type: none"> Standardized units Independent of sample size Based on variability of change 	<table border="1"> <thead> <tr> <th>Scale</th> <th>Effect size</th> <th>Standardized response mean</th> </tr> </thead> <tbody> <tr> <td>CCFS</td> <td>0.117</td> <td>0.320</td> </tr> <tr> <td>SARA</td> <td>0.140</td> <td>0.411</td> </tr> </tbody> </table>	Scale	Effect size	Standardized response mean	CCFS	0.117	0.320	SARA	0.140	0.411
Scale	Effect size	Standardized response mean										
CCFS	0.117	0.320										
SARA	0.140	0.411										

SD: standard deviation
SE: standard error

Crosby et al, *J Clin Epidemiol* 2003

Distribution-based methods

Method	Instrument evaluated in relation to:	Advantages	Disadvantages
Responsiveness statistic	Difference/SD of change in a stable group	<ul style="list-style-type: none"> Standardized units More conservative than effect size Independent of sample size Takes into account spurious change due to measurement error 	Data on stable subjects frequently not available
Standard error of measurement (SEM)	$\frac{ES}{\sqrt{1-r}}$ where r = reliability measure	<ul style="list-style-type: none"> Relatively stable across populations Takes into account the precision of the measure Cutoffs based on confidence intervals 	Assumes measurement error to be constant across the range of possible scores
Reliable change index	$\frac{\text{difference}}{\sqrt{2(SEM)^2}}$	<ul style="list-style-type: none"> Relatively stable across populations Takes into account precision of measure Cut-offs based on confidence intervals 	Assumes measurement error to be constant across the range of possible scores

SD: standard deviation
SE: standard error

Crosby et al, *J Clin Epidemiol* 2003

Conclusions

- Define Meaningful Aspect of Health (MAH) and Concept of Interest (COI) of the outcome to be sure that it is related to a patient meaningful aspect
- Define the Minimal Clinical Important Change (MCID) to be able to interpret changes
- Use combined Anchor and distribution methods