

Context-Dependent Assessment of QSP Models: *industry perspective & a proposed approach*

ASCPT 2019 - QSP preconference

Saroja Ramanujan

IQ-CPLG-QSP assessment subteam: Jason Chan, Christina Friedrich, Craig Thalhauser

A Flexible Approach for QSP Model Assessment

Rationale for “Assessment Approach”

- Need ways to *assess confidence* in model predictions and appropriate interpretation/use
- Need a *common approach* to support broad applicability and consistent use and interpretation

But this must also be:

- *Consistent* with and synthesized from existing best practices in QSP
- *Customizable* to the diversity of applications of interest (“context”) & modeling approaches

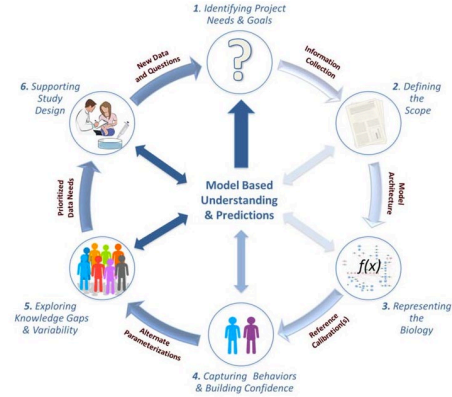
Subgroup of IQ consortium CPLG-QSP reviewed/discussed past models, guidances, etc to distill an overarching *flexible approach for context-dependent assessment of QSP models*

- *invited perspective piece submitted to CPT-PSP special issue*

Build on Current Guidances & Best Practices

Workflow Stages

1. Identifying goals
2. Defining scope
3. Representing biology
4. Capturing behaviors
5. Exploring variability
6. Supporting studies



Qualification Criteria

- **Relevance**
- **Uncertainty**
- **Variability**
- **Data**

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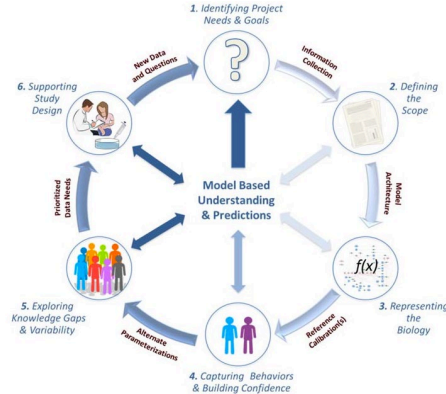
¹Gadkar et al, 2016, CPTPSP

²Friedrich, 2016, CPTP-PSP

Different “Areas” of QSP Models Require Assessment

Workflow Stages

1. Identifying goals
2. Defining scope
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¹Gadkar et al, 2016, CPTPSP
²Friedrich, 2016, CPTP-PSP

Assessment Areas



Biology
(1-2)

- Are the biological mechanisms, hypotheses, and data relevant to the question at hand considered?
- Are the assumptions and hypotheses plausible and appropriate?
- Are alternate hypotheses considered?

Implementation
(3)

- Are the model structure and parameter ranges appropriate for the question at hand?
- Was there technical QA/QC of the implementation and testing of the model structure?
- Can the model capture the appropriate range of behaviors?

Simulation
(4-5)

- Does the model exhibit appropriate behaviors and sensitivities to parameters or perturbations?
- Does the model reproduce “calibration/training” data?
- Can the model predict behaviors or data it was not calibrated against (validation/testing)?

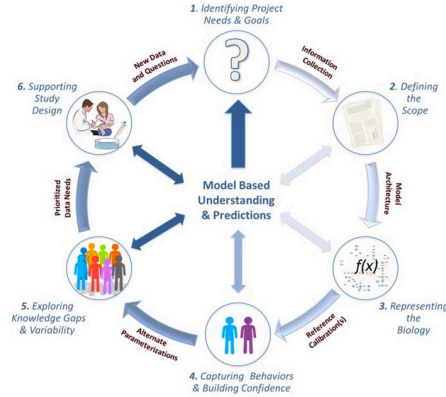
Robustness
(5-6)

- Has the robustness of the predictions to potential biological uncertainty and variability been explored?

Different “Areas” of QSP Models Require Assessment

Workflow Stages

1. Identifying goals
2. Defining scope
3. Representing biology
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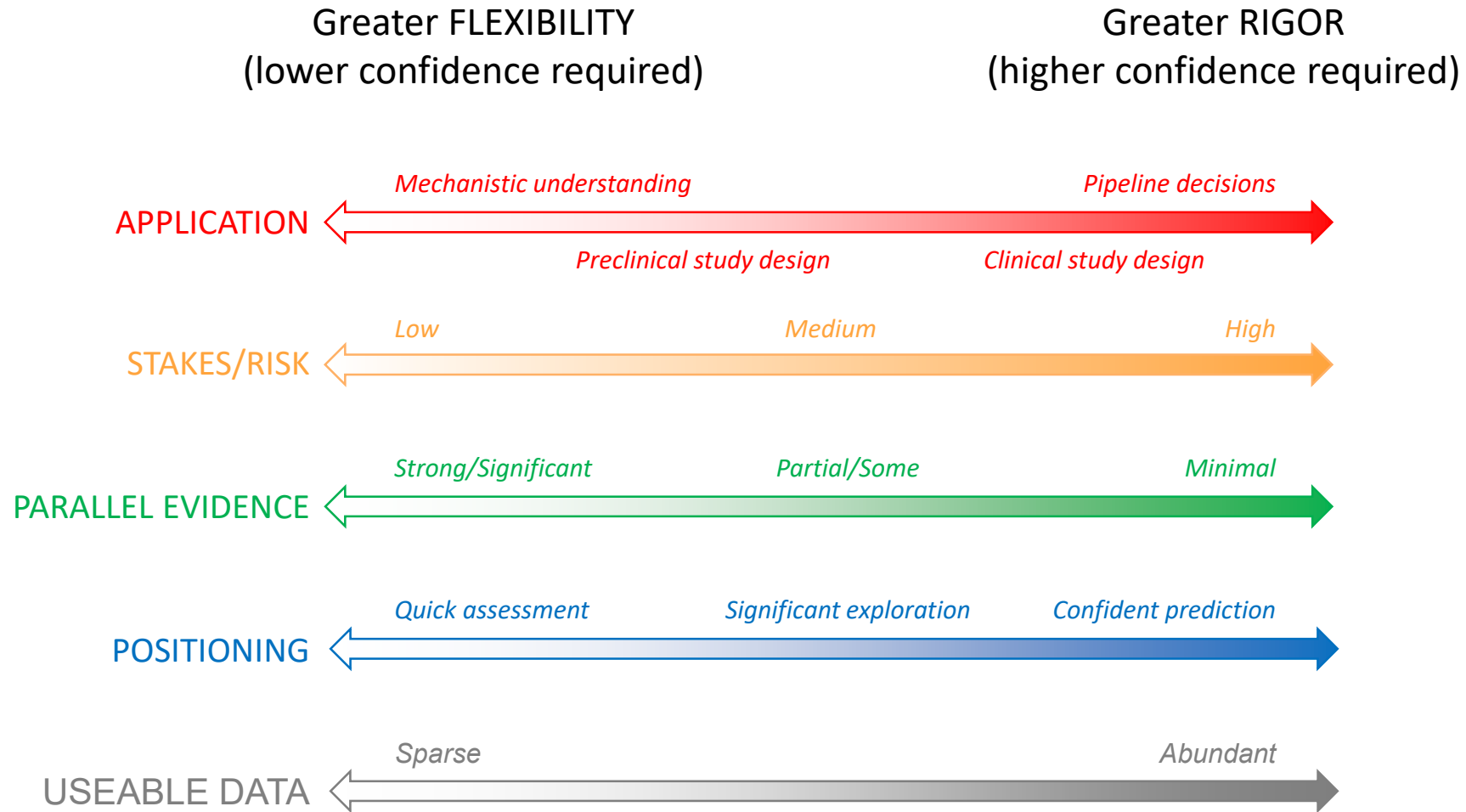
Qualification Criteria

- **Relevance**
- **Uncertainty**
- **Variability**
- **Data**

Assessment Areas

Biology (1-2)	Biological relevance & plausibility
	Main hypotheses & assumptions
	Alternate hypotheses
Implementation (3)	Technical QA/QC
	Model structure & parameter ranges
	Sensitivities and behaviors
Simulation (4-5)	Reproduction of behaviors (calibration/training)
	Prediction of behaviors (validation/testing)
Robustness (5-6)	Predictions, variability and uncertainty

Assessment MUST Be Context-Dependent

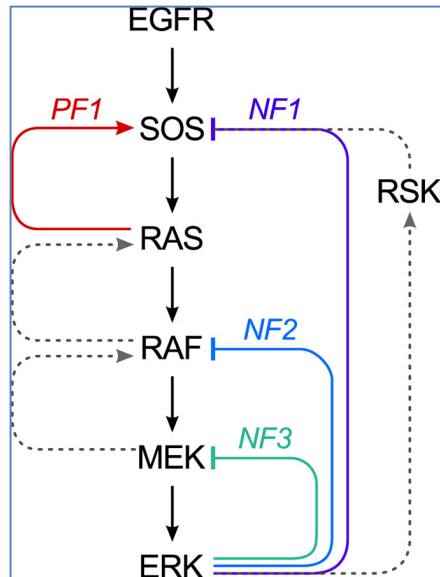


Assessment of Model Biology & Implementation

	Focus	Assessments
BIOLOGY (1-2)	Relevance & plausibility	<ul style="list-style-type: none"> • Appropriate goal/questions • Biological rationale and justification • Literature evidence • Biology/therapeutic area expert endorsement
	Main hypotheses, assumptions	
	Alternate hypotheses	
	Focus	Assessments
IMPLEMENTATION (3-4)	Technical QA/QC	<ul style="list-style-type: none"> • Appropriate modeling formalism • Appropriate representation of biology • Correct implementation: scripts to test equations, parameters, units • Appropriate and stable numerical approach
	Model structure & parameter ranges	<ul style="list-style-type: none"> • Dynamical features • Potential range of behaviors/outputs • Relevant range of parameters/inputs
	Sensitivities and behaviors	<ul style="list-style-type: none"> • Targeted/specific sensitivity • Local sensitivities (Local SA) • Global sensitivities (Global SA) • Qualitative phenotypes • Literature support, expert input on results

MAPK: Different questions require different implementations

Signaling feedbacks and complex dynamics of MAPK



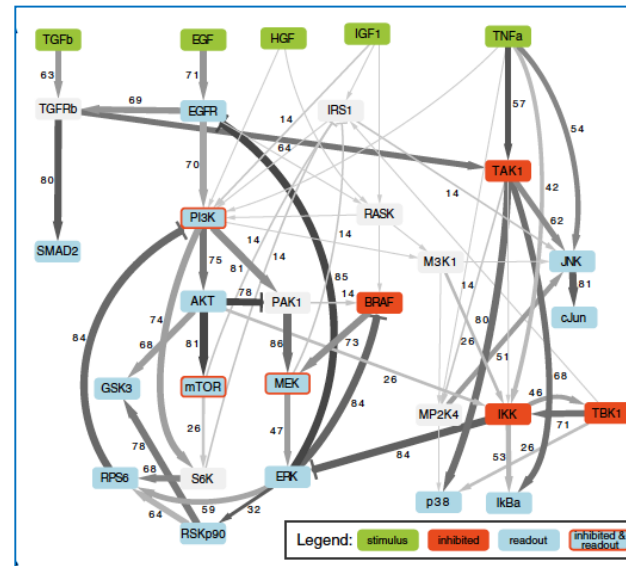
Kochańczyk et al 2017, Sci Reports

Focus: dynamical behaviors

Formulation:

- ODE for feedback dynamics
- Markov chain w stochastic for noise
- PDE for spatiotemporal exploration

Pathways influencing drug resistance in CRC



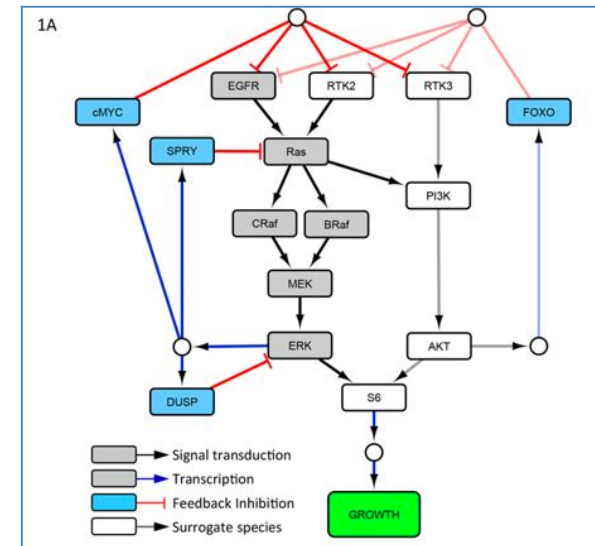
Eduati et al 2017, Cancer Res

Focus: pathways leading to resistance

Formulation:

- Logic-ODE for signaling
- elastic-net model connects to growth

Clinical MAPK targeting/rebound in BRAFmut CRC



Kirouac et al 2017, NPJ Sys Bio & App

Focus: clinical response & resistance

Formulation:

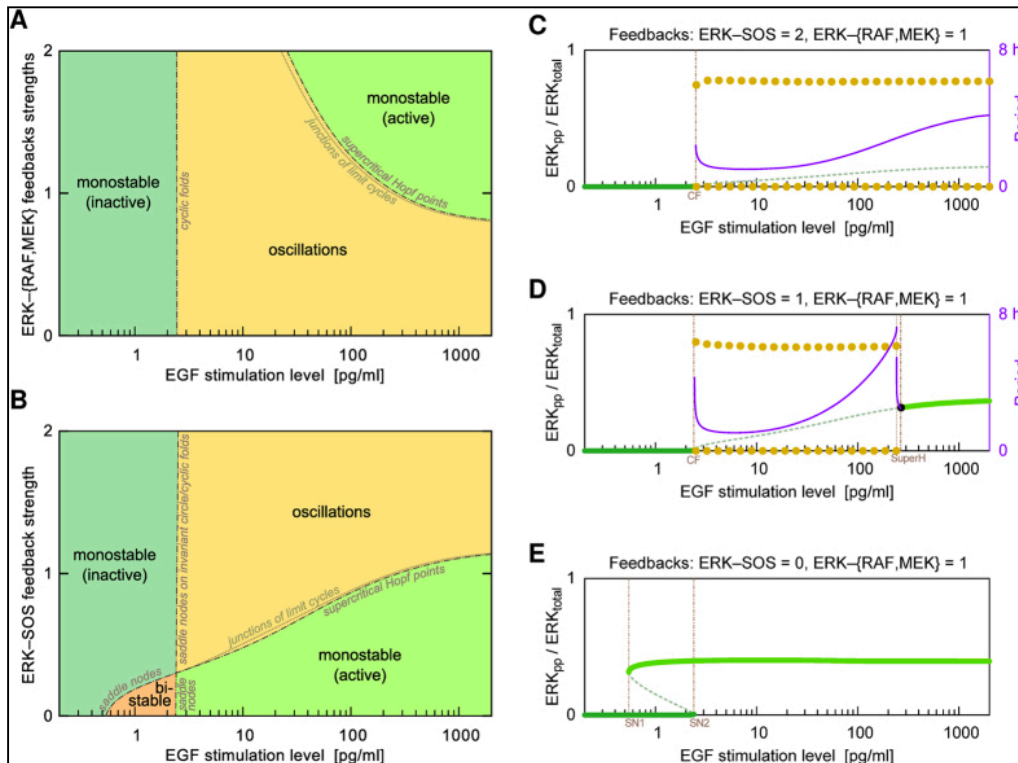
- Algebraic + ODE for signaling;
- ODE for growth

Model & Parameter analyses probe range of behaviors

- *Dynamical and/or equilibria analysis*: to assess dynamical behaviors
- *Parameter sensitivity*: to assess feasible “outcomes” and dependencies
- *Topology and network analysis*: to identify “hubs”, modularity, connectivity, redundancies, etc
- *Model reduction*: to simplify model structure

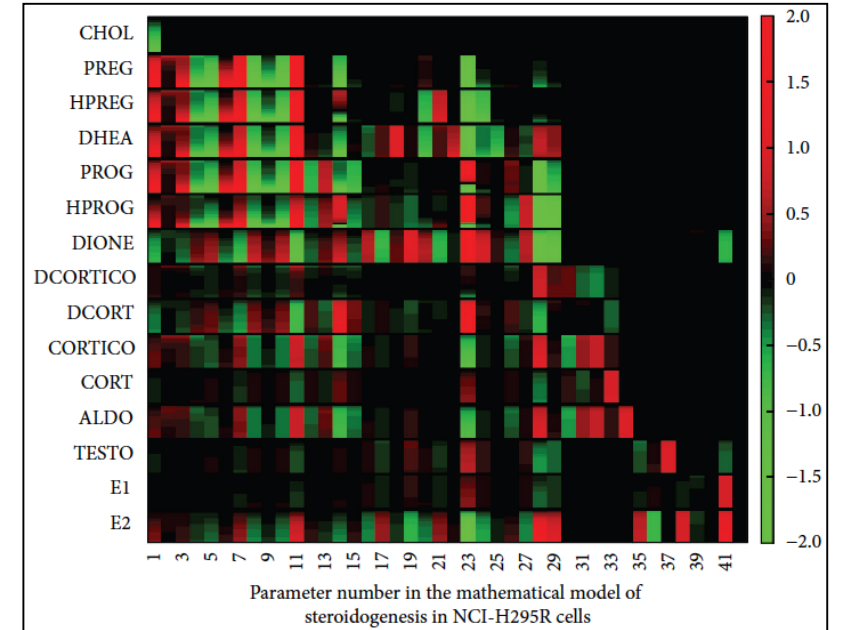
Dynamical analysis

Kochańczyk et al, Sci Reports 2017



Sensitivity analysis

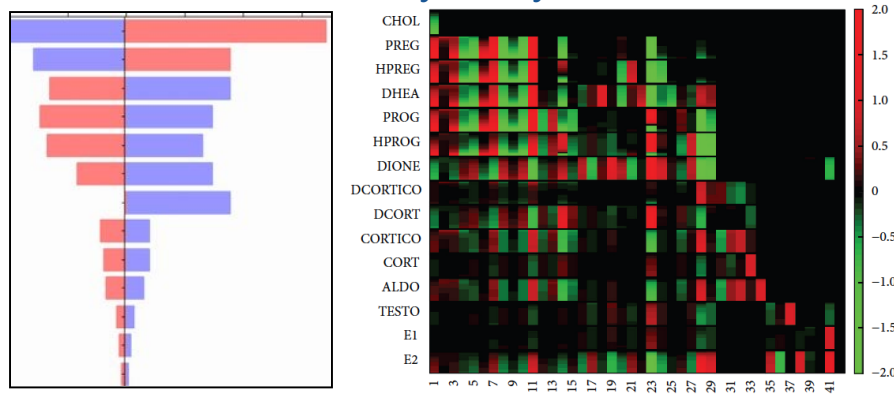
Saito et al J Tox 2016



Assessment of Model Simulation

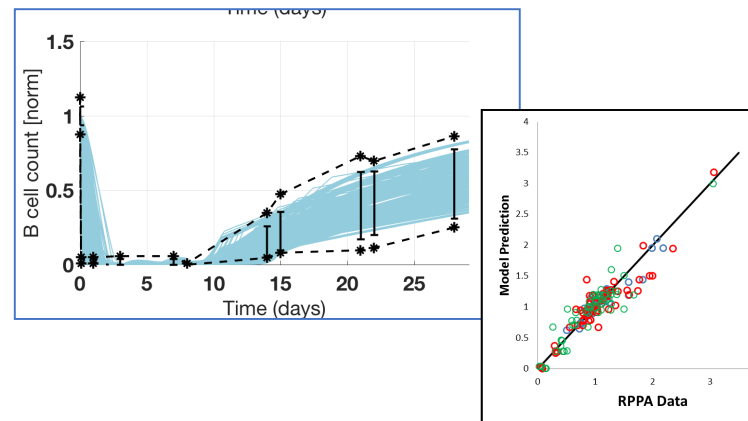
	Assessment Focus	Specific Assessments
SIMULATIONS (4-5)	Sensitivities and behaviors	<ul style="list-style-type: none"> Targeted/specific sensitivity Local sensitivities (Local SA) Global sensitivities (Global SA) Qualitative phenotypes Literature support, expert input on results
	Reproduction of behaviors (calibration/training)	<ul style="list-style-type: none"> Qualitative or quantitative comparison to calibration data (subsystem or system level)
	Prediction of behaviors (validation/testing)	<ul style="list-style-type: none"> Qualitative or quantitative comparison to validation data (subsystem or system level)

Sensitivity analysis

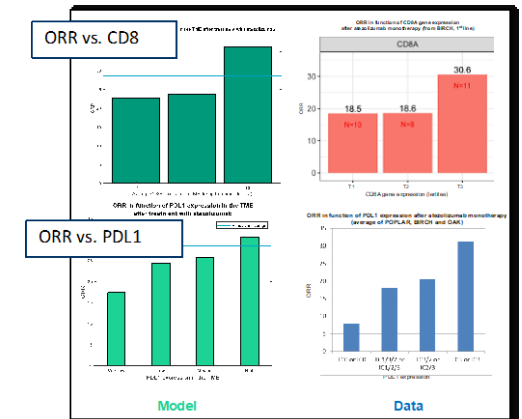


Saito et al, J Tox 2016

Calibration



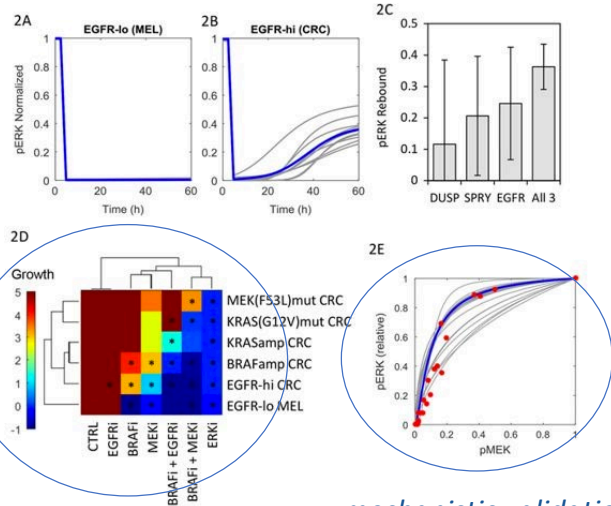
Validation



Lemaire, ASCPT 2019

Sensitivity, calibration, validation test fidelity to data/knowledge

In vitro signaling & growth

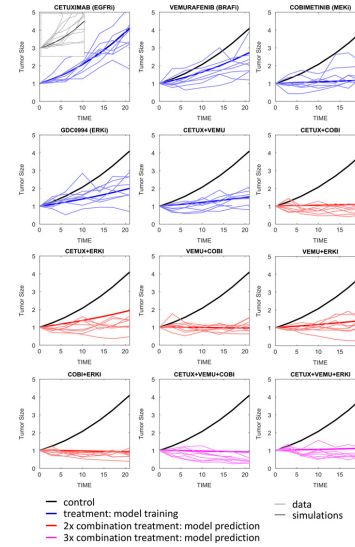


Sensitivity, calibration, validation

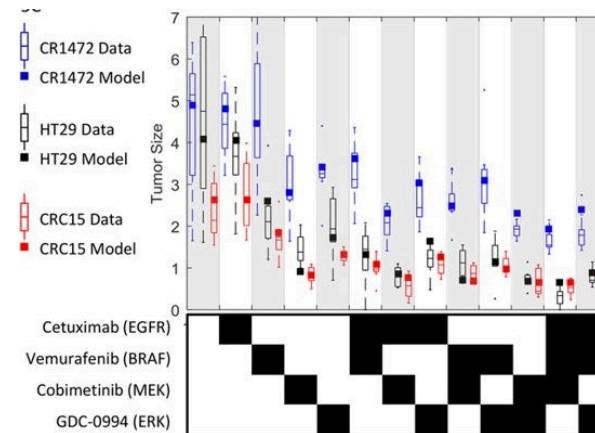
mechanistic validation

In vivo growth

calibration & validation of kinetics

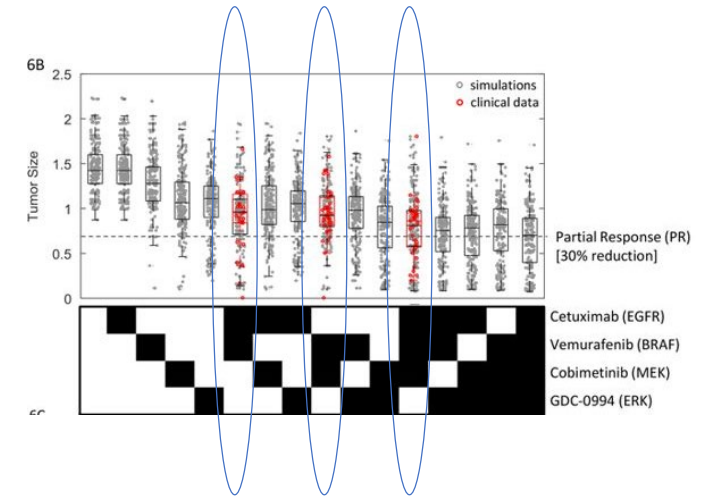


parameter exploration & preclinical variability

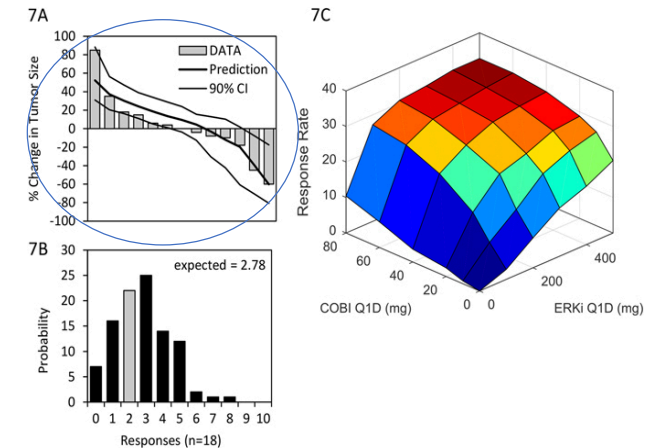


Clinical tumor response

parameter exploration & clinical calibration



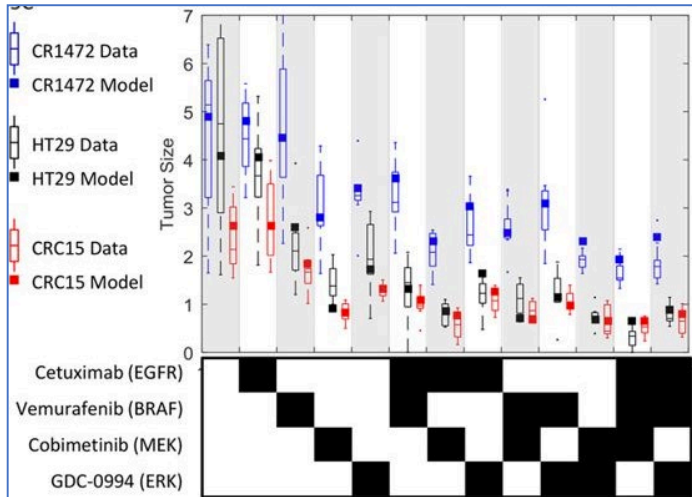
Clinical validation



Assessment of Robustness of Predictions

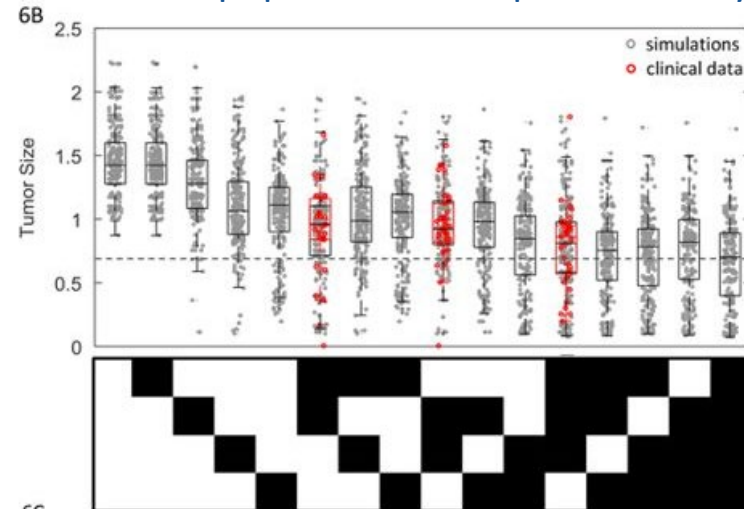
	Assessment Focus	Specific Assessments
ROBUSTNESS (5-6)	Predictions, variability, and uncertainty	<ul style="list-style-type: none"> Comparison of input/output range, distribution, etc. with data Results with alternate parameterizations or structures

Virtual subjects for alternate phenotypes

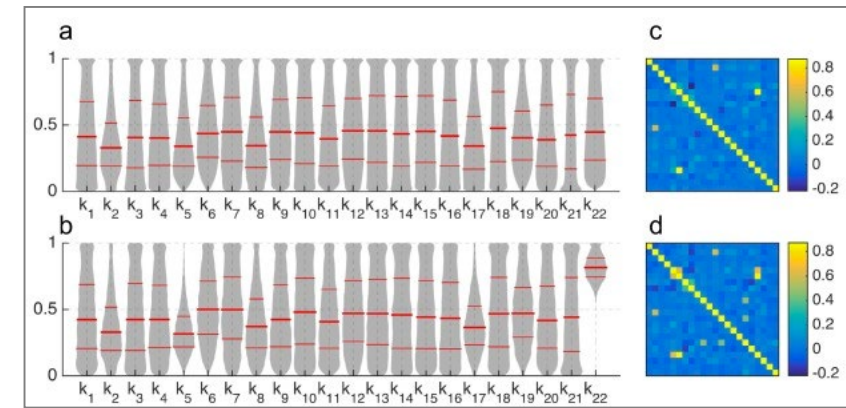


Kirouac et al 2017, NPJ Sys Bio & App

Virtual populations: output variability



Virtual populations: Input variability



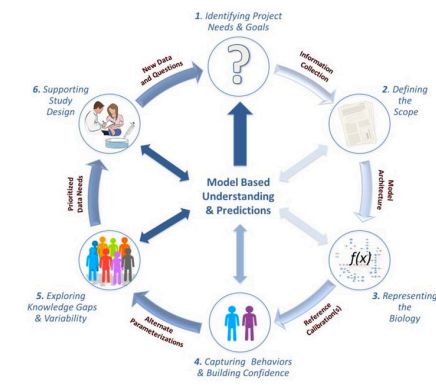
Allen et al, 2016, CPT-PSP

ASSESSMENT AREA <i>(workflow stage)</i>	ASSESSMENT APPROACH		
	Assessment Focus <i>(colored by MQM criteria)</i>	Specific Assessments	Reporting
BIOLOGY <i>(1-2)</i>	Relevance & plausibility	<ul style="list-style-type: none"> • Appropriate goal/questions • Biological rationale and justification • Literature evidence • Biology/therapeutic area expert endorsement 	<ul style="list-style-type: none"> • Documentation • Model schematic
	Main hypotheses, assumptions		
	Alternate hypotheses		
IMPLEMENTATION <i>(3-4)</i>	Technical QA/QC	<ul style="list-style-type: none"> • Appropriate modeling formalism • Appropriate representation of biology • Correct implementation: scripts to test equations, parameters, units • Appropriate and stable numerical approach 	<ul style="list-style-type: none"> • Documentation • Detailed model diagram • Model equations • Variable list (definitions, units, constraints) • Parameter list (definitions, units, ranges, refs.) • Test scripts & results • Model file (executable)
	Model structure & parameter ranges	<ul style="list-style-type: none"> • Dynamical features • Potential range of behaviors/outputs • Relevant range of parameters/inputs 	<ul style="list-style-type: none"> • Graphical results • Documentation/lists
	Sensitivities and behaviors	<ul style="list-style-type: none"> • Targeted/specific sensitivity • Local sensitivities (Local SA) • Global sensitivities (Global SA) • Qualitative phenotypes • Literature support, expert input on results 	<ul style="list-style-type: none"> • Documentation of approach & interpretation • Tornado plots, heat maps, or similar • List of critical sensitivities & how they are explored for predictions • Example simulation plots
SIMULATIONS <i>(4-5)</i>	Reproduction of behaviors <i>(calibration/training)</i>	<ul style="list-style-type: none"> • Qualitative or quantitative comparison to calibration data (subsystem or system level) 	<ul style="list-style-type: none"> • List of calibration experiments • Plots comparing simulation vs data (eg VPCs) • Criteria metrics if used
	Prediction of behaviors <i>(validation/testing)</i>	<ul style="list-style-type: none"> • Qualitative or quantitative comparison to validation data (subsystem or system level) 	<ul style="list-style-type: none"> • List of validation experiments • Plots comparing simulation vs data (eg VPCs) • Criteria metrics if used
ROBUSTNESS <i>(5-6)</i>	Predictions, variability, and uncertainty	<ul style="list-style-type: none"> • Comparison of input/output range, distribution, etc. with data • Results with alternate parameterizations or structures 	<ul style="list-style-type: none"> • Tabular or graphical comparison of simulated vs data variability • Graphs of variability in input (parameters) and outputs (typically states) • Documentation of critical uncertainties & variabilities

REPORTING: “Best Practices to Maximise Reuse of QSP Models: Recommendations of UK QSP Network”

Cucurull-Sanchez et al CPT-PSP 2019, pre-print

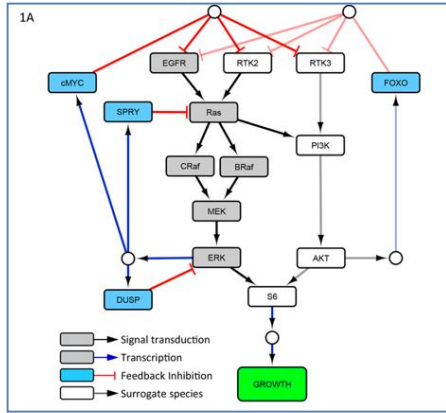
QSP Workflow Step	Recommendations		Relevant References
	Mathematical	Computational	
1. Purpose and Context of the Model	<ul style="list-style-type: none"> Ask “Do I need a model?” and “What is the purpose of the model?” Engage with stakeholders: ‘end users’ and ‘domain experts’ Formulate clearly the questions addressed, their context, expected impact of the decisions derived from the model, and rationale for the selection of QSP as modelling methodology 		[11] Peterson & Riggs (2013) [26] Timmis et al. (2017) [27] Ribbe et al. (2017) [28] Gadkar et al. (2016) [29] Friedrich (2016)
2. Model structure and modelling methodology	1. Model domain and general structure	<ul style="list-style-type: none"> Define clearly the model domain: therapeutic area, biological scale, biological/clinical system Provide a schematic representation of the model domain and general structure (e.g. Figure 2) Whenever possible, follow standard graphical notation (e.g. SBGN) 	[28] Gadkar et al. (2016) Figure 2 [34] Le Novère et al. (2009)
	2. Model formulation or algorithm	<ul style="list-style-type: none"> Provide all equations and boundary conditions (e.g. Box 1) Explain all the terms biological/pharmacological 	<ul style="list-style-type: none"> Clearly state the algorithm using pseudocode and describe any associated Box 1 [26] Timmis et al. (2017)
	3. Model solving and simulation method	<ul style="list-style-type: none"> State the method system of equations (e.g. order implemented via the MATLAB®) Provide absolute value Provide software 	Table 1 [38] Sarkans et al. (2017) [39] Marshall et al. (2016) [27] Ribbe et al. (2017) [40] Bonate et al. (2012)
	4. Code files	<ul style="list-style-type: none"> Share code and supplementary material on public online repositories Ensure code is easy to use Whenever possible 	<ul style="list-style-type: none"> Use input data from systems under experimental conditions as relevant as possible to the system being modelled Provide a detailed model parameter description, including: <ul style="list-style-type: none"> symbol/name of parameter definition parameter value (or range of values) units sources used to obtain it (literature citation, database, derivation from other parameters, experiment presented in the same report/article, in silico estimations, etc) details of how the parameter value was determined (measured directly, fitted or assumed) and whether the underlying data has any limitations (suspected errors, outliers, high variability, excluded data points, etc) Consider using a tabular format to present this information (e.g. Table 1) Consider providing actual data files along with code files (see section 2.iv) Describe in detail: <ul style="list-style-type: none"> qualitative and/or semi-quantitative knowledge obtained first-hand from stakeholders assumptions (pharmacological, physiological, disease, data, mathematical, statistical), and how they were tested Discuss potential limitations of model in the context of available input data, knowledge and assumptions
	3. Input data, knowledge and assumptions going into the model		
	4. Model verification	<ul style="list-style-type: none"> Test code for consistency: <ul style="list-style-type: none"> eliminate detected coding errors ensure solutions or limit conditions reached by the model are correct (e.g. $A + B \rightarrow C$ yields no C when A and B are set to zero) 	[41] Anderson et al. (2007) [43] Hicks et al. (2015) [63] Nestorov et al. (1999)



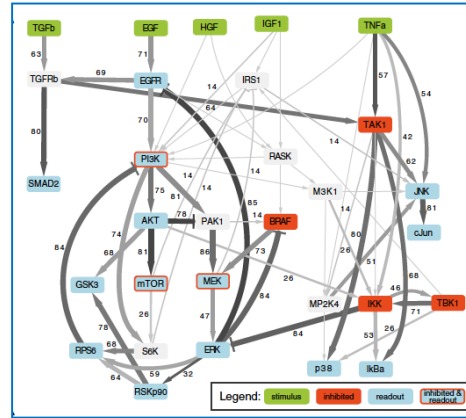
3. Model validation	<ul style="list-style-type: none"> Describe and clearly reference the data or knowledge used to validate the model, and explain its relevance to the model context Plot model simulations overlaying the corresponding experimental data onto them, with measures of potential/perceived variability (e.g. standard error bars, confidence intervals, shadows from ensemble simulations) 	[41] Anderson et al. (2007) [43] Hicks et al. (2015) [70] Lu et al. (2014) [71] Kanodia et al. (2014) [72] Ortega et al. (2013) [73] Karelina et al. (2012) [74] Peterson and Riggs (2012) [76] Agoram (2014)
6. Model results, application and impact	<ul style="list-style-type: none"> Articulate a clear answer to the questions originally posed for the model (see section 1) Provide the simulation plots and/or outcome numerical values that underpin those answers Qualify the type of knowledge acquired through the modelling exercise: a positive new discovery, a confirmation and/or a learning of a misconception. Describe the decisions that the modelling exercise enabled for the different stakeholders (user, domain expert, academic, industry, regulatory) - qualitatively and, whenever possible, quantitatively Describe the impact of the QSP modelling exercise beyond the initial stakeholders, especially if impact is societal and/or can be translated into financial figures. 	[39] Marshall et al. (2016) [77] Sheppard (2011) [11] Peterson & Riggs (2013) [75] Hendricks (2013) [78] Kansal & Trimmer (2005) [79] Milligan et al. (2013) [80] Allerheiligen (2014) [81] Bueters et al. (2013) [82] Nayak et al. (2018)

Different contexts, Different models

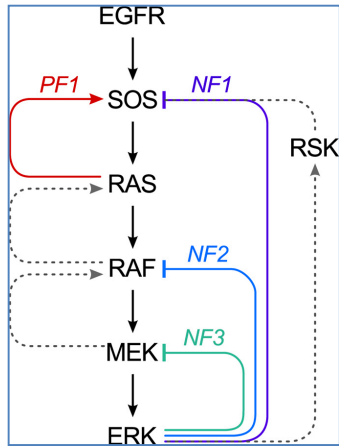
1 Clinical MAPK targeting & rebound in BRAFmut CRC



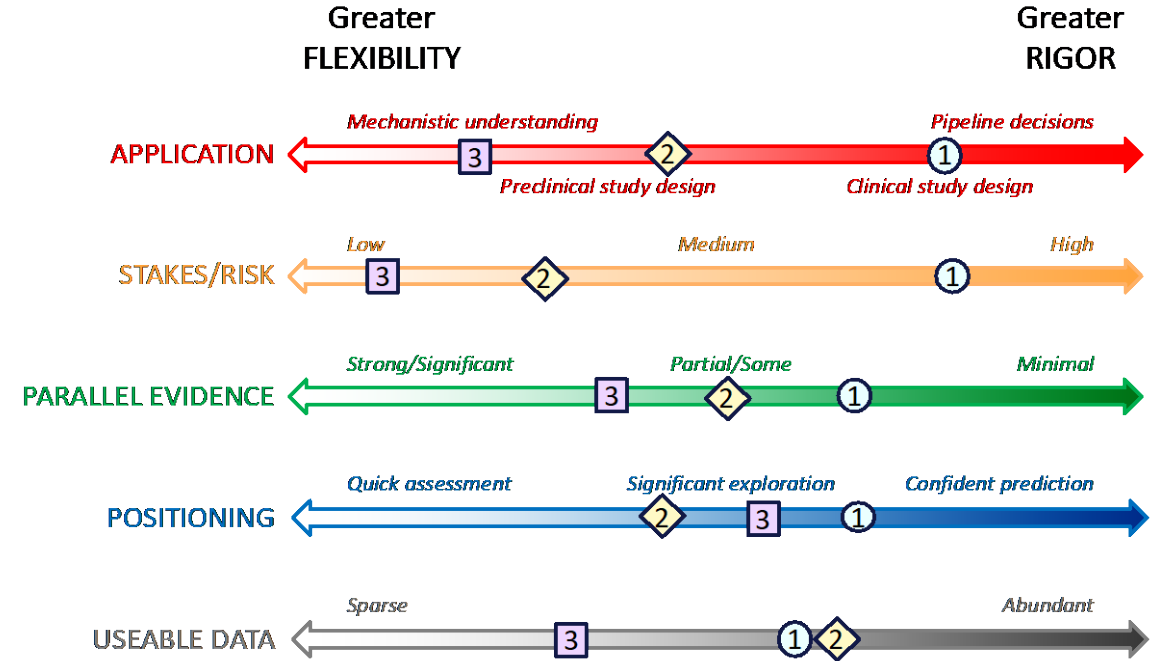
2 Pathways influencing CRC drug resistance



3 Complex dynamics of MAPK w feedbacks

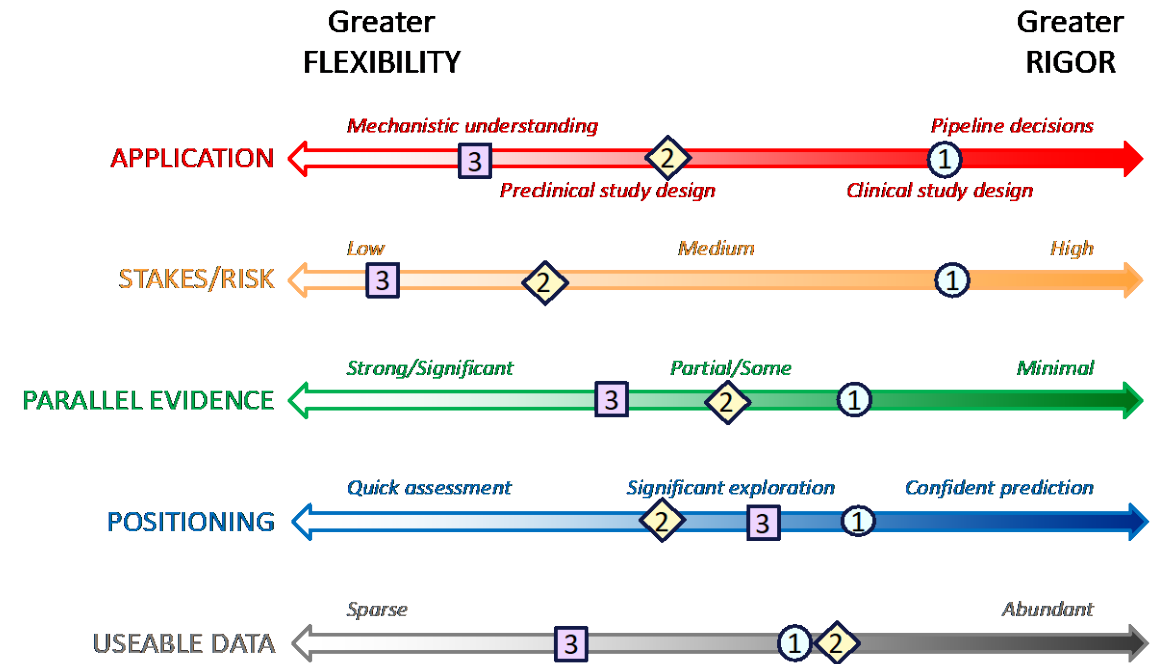


- 1: Kirouac et al 2017, NPJ Sys Bio & App
- 2: Eduati et al 2017, Cancer Res
- 3: Kochańczyk et al 2017, Sci Reports



Different contexts, Different models, Different assessment

ASSESSMENT AREA	ASSESSMENT APPROACH			
	Assessment Focus	①	②	③
BIOLOGY	Relevance & plausibility	hi	hi	hi
	Main hypotheses & assumptions	hi	hi	hi
	Alternate hypotheses	med	hi	hi
IMPLEMENTATION	Technical QA/QC	hi	hi	hi
	Model structure & parameter ranges	hi	hi	hi
SIMULATIONS	Sensitivities and behaviors	med	med	hi
	Reproduction of behaviors (calibration/training)	hi	hi	lo/med
	Prediction of behaviors (validation/testing)	hi	med	lo/med
ROBUSTNESS	Predictions, variability and uncertainty	hi	hi	med



We Need Common/Shared "Language" & Tools

- ¹Friedrich, 2016, CPTP-PSP
- ²Gadkar et al, 2016, CPT-PSP
- ³InSysBio IRT
- ⁴Cheng et al, 2017, AAPS J
- ⁵Traynard et al, 2017, CPT-PSP
- ⁶Hosseini & Feigelman, ACoP 2018
- ⁷Bilouris et al, 2015, CPT-PSP
- ⁸Allen et al, 2016, CPT-PSP

General Approaches:

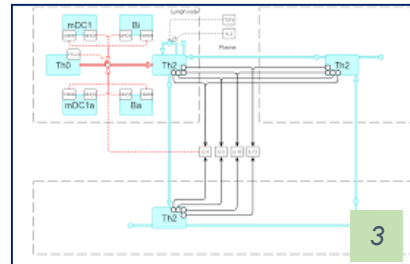
Documentation
Workflows
Reporting



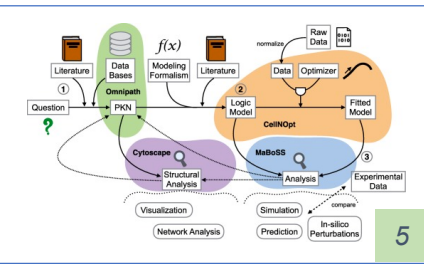
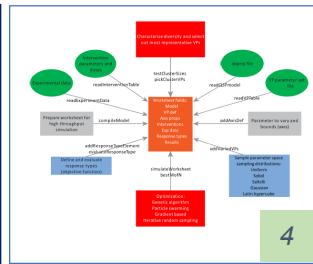
ASSESSMENT AREA	ASSESSMENT APPROACH	
	Assessment Focus	1
BIOLOGY	Relevance & plausibility	Yes
	Main hypotheses & assumptions	No
	Alternative hypotheses	mod
IMPLEMENTATION	Technical Q&QC	Yes
	Model structure & parameter ranges	No
SIMULATIONS	Sensitivities and behaviors	mod
	Reproduction of behaviors (calibration/training)	No
	Prediction of behaviors (validation/testing)	No
ROBUSTNESS	Predictions, variability and uncertainty	Yes

Templates, Tools & scripts

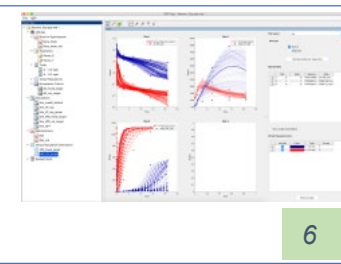
Modules & repositories
Optimization
Sensitivity analysis
QA/QC
Dynamical analysis
Model reduction analysis



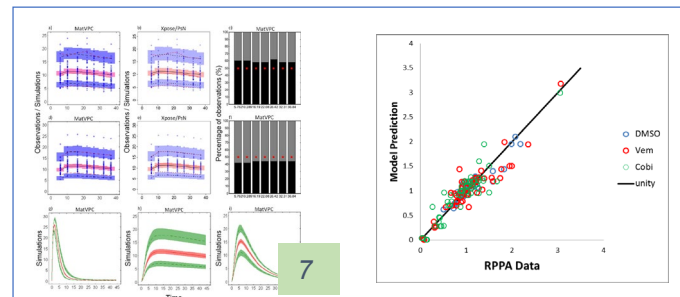
Templates & modules



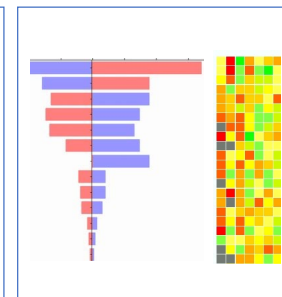
QSP toolboxes & apps



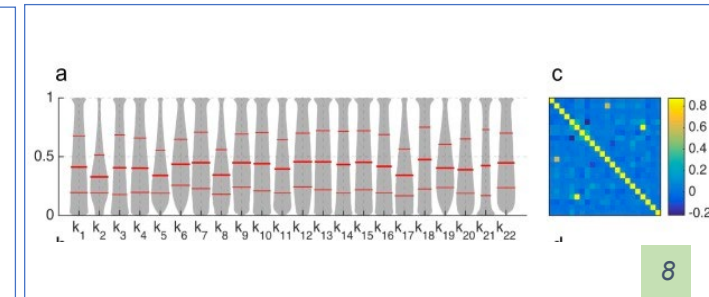
Simulation VPCs & Diagnostics



Sensitivity Analysis



Parameter variability/uncertainty



Common Metrics (?) & Visualizations

Thank you!