

# Secondary Aims Using Data Arising from a SMART

Module 5

# General Objectives

- A taste of how data from a SMART can be analyzed to address various scientific questions
  - How to frame scientific questions
  - Experimental cells to be compared
  - Resources you can use for data analysis
  - Less details, more focus on making you feel comfortable with the general approach.

# Outline

Discuss moderators analysis in the context of a SMART

Discuss the idea of “a more deeply-tailored AI”

Q-Learning

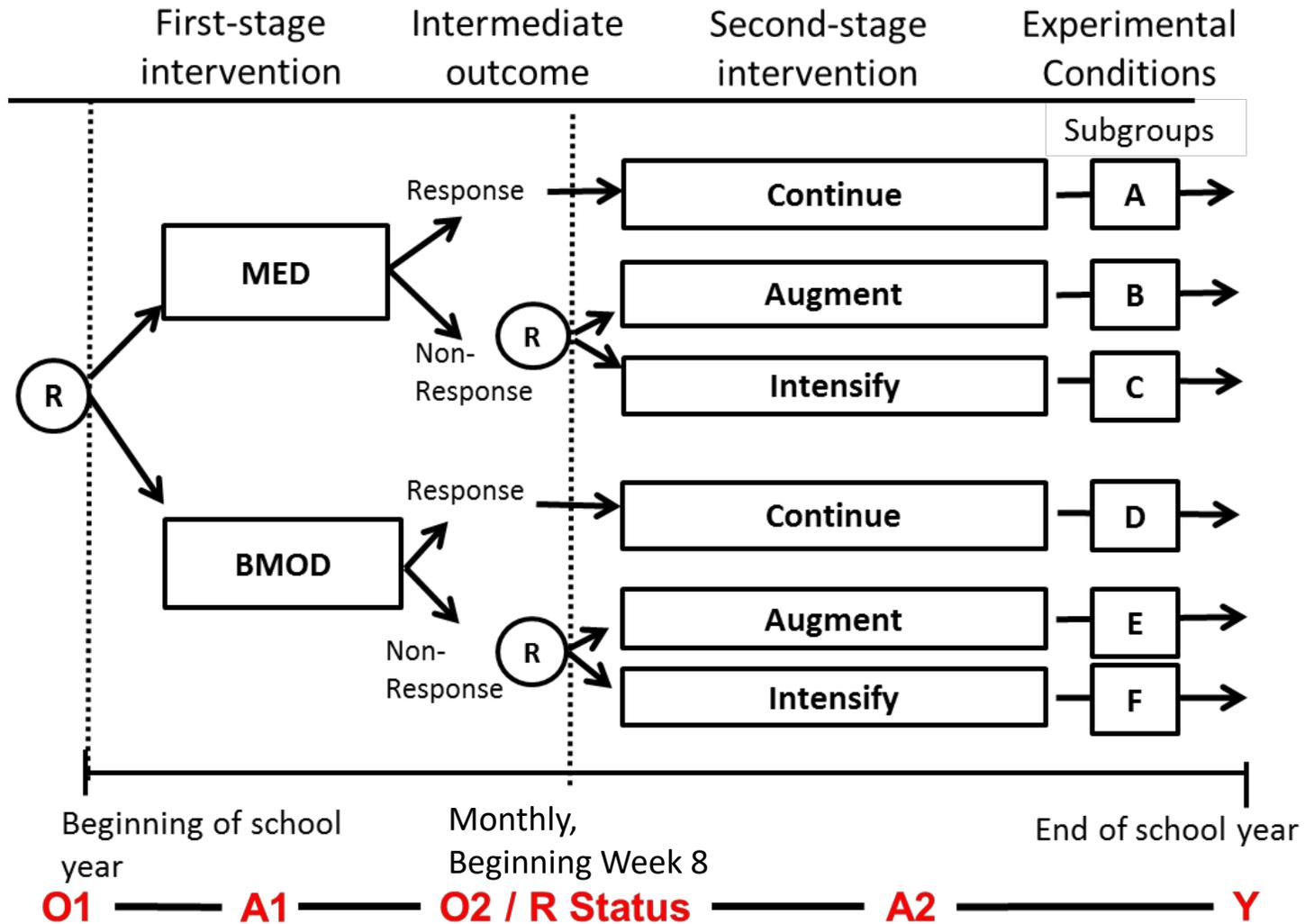
# Outline

## Discuss moderators analysis in the context of a SMART

Discuss the idea of “a more deeply-tailored AI”

Q-Learning

# Remember ADHD SMART?



# ADHD SMART

PI: Pelham

4 embedded adaptive interventions

## **AI #1:**

Start with MED;  
if non-responder AUGMENT,  
else CONTINUE

## **AI #2:**

Start with BMOD;  
if non-responder AUGMENT,  
else CONTINUE

## **AI #3:**

Start with MED;  
if non-responder INTENSIFY,  
else CONTINUE

## **AI #4:**

Start with BMOD;  
if non-responder INTENSIFY,  
else CONTINUE

# ADHD SMART

PI: Pelham

4 embedded adaptive interventions

## **AI #1:**

Start with MED;  
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## **AI #2:**

Start with BMOD;  
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else CONTINUE

## **AI #3:**

Start with MED;  
if non-responder INTENSIFY,  
else CONTINUE

## **AI #4:**

Start with BMOD;  
if non-responder INTENSIFY,  
else CONTINUE

## Moderator analyses dive deeper...

1. It may be that some participants may benefit more from starting on MED vs. starting on BMOD.

*For example:* those who have used MED in the past

2. Certain types of non-responders may also benefit more from AUGMENT vs. INTENSIFY

*For example:* those who do not adhere to initial treatment

*These analyses may suggest new tailoring variables that we should use in our AI.*

# Outline

Discuss moderators analysis in the context of a SMART

**Discuss the idea of “a more deeply-tailored AI”**

Q-Learning

# What is a more deeply-tailored AI?

In the ADHD SMART, there is only 1 tailoring variable embedded *by design* in the embedded AIs

## **AI #1:**

Start with MED;  
if **non-responder** AUGMENT,  
else CONTINUE

## **AI #2:**

Start with BMOD;  
if **non-responder** AUGMENT,  
else CONTINUE

## **AI #3:**

Start with MED;  
if **non-responder** INTENSIFY,  
else CONTINUE

## **AI #4:**

Start with BMOD;  
if **non-responder** INTENSIFY,  
else CONTINUE

# What is a more deeply-tailored AI?

A more **deeply tailored AI** is a sequence of decision rules that include tailoring variables **beyond those** embedded in the SMART *by design*.

- i.e., an AI that tailors treatment to **Response Status** **AND** additional variables

For example, I want to investigate whether to tailor based on:

- First stage MED vs. BMOD on prior receipt of medication; and
- Second stage INT vs. AUG on first-stage adherence.

## The embedded AI looked like this:

*At the beginning of school year,*

**Stage 1 = {BMOD}.**

*Then, every month,*

*beginning at week 8*

**IF response status** to Stage 1 = {NR}

**THEN** Stage 2 = {AUGMENT}.

**ELSE CONTINUE** Stage 1.

# A (hypothetical) more deeply-tailored AI might look like this:

*At the beginning of school year*

IF **medication in prior year** = {NO}

THEN stage 1 = {BMOD}.

ELSE IF **medication in prior year** = {YES}

THEN stage 1 = {MED}

*Then, every month,  
beginning at week 8*

IF **response status** to Stage 1 = {NR}

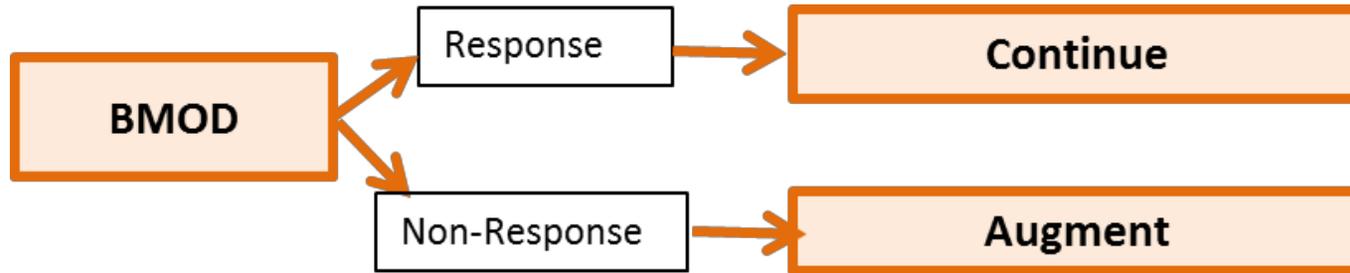
THEN IF **adherence** to stage 1 = {NO},

THEN Stage 2 = {AUGMENT}.

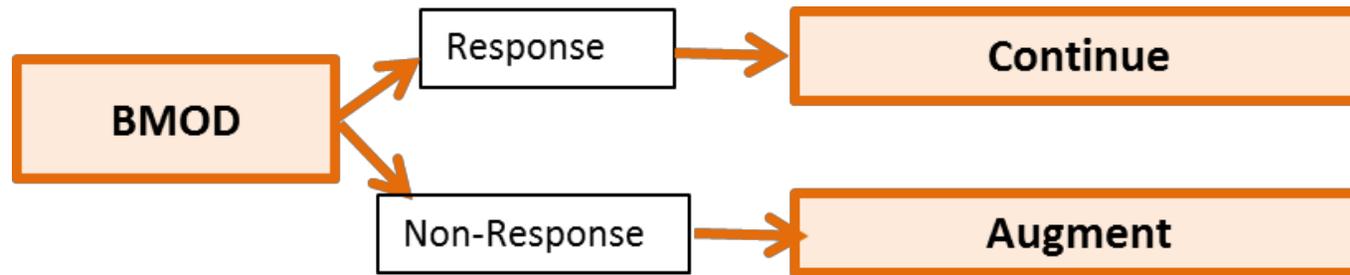
ELSE Stage 2 = {AUGMENT} or {INTENSIFY}.

ELSE CONTINUE Stage 1.

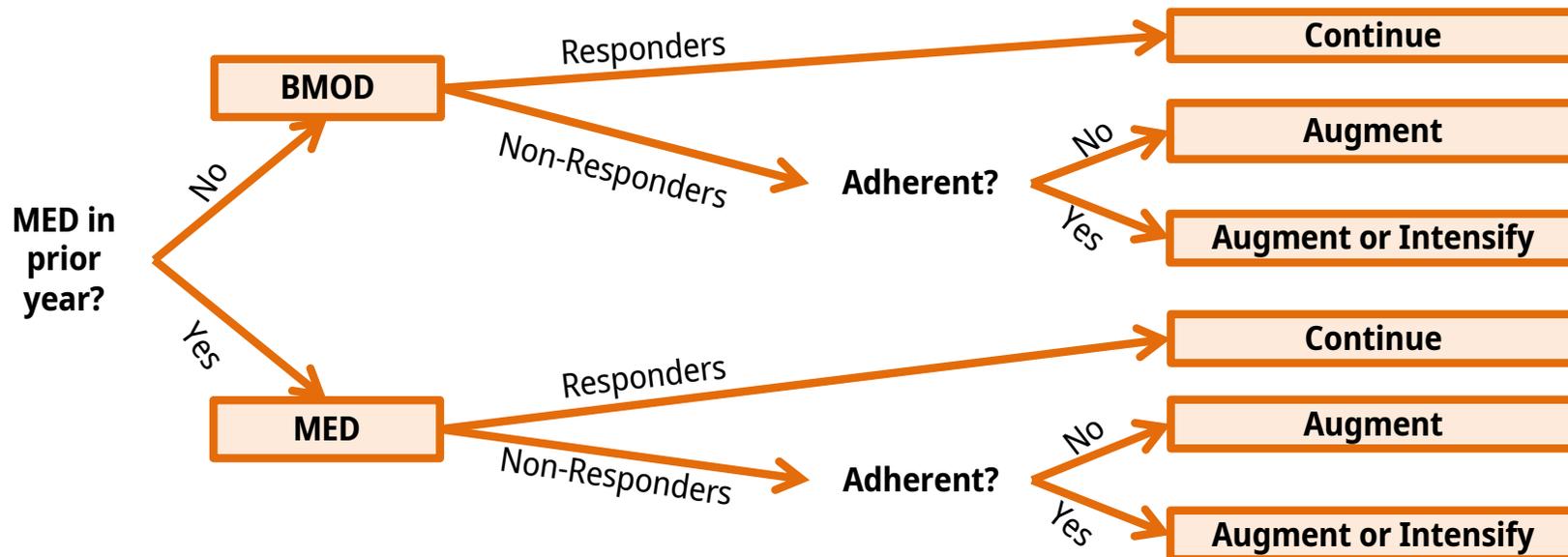
# An Embedded AI:



# An Embedded AI:



# A More Deeply-Tailored AI:



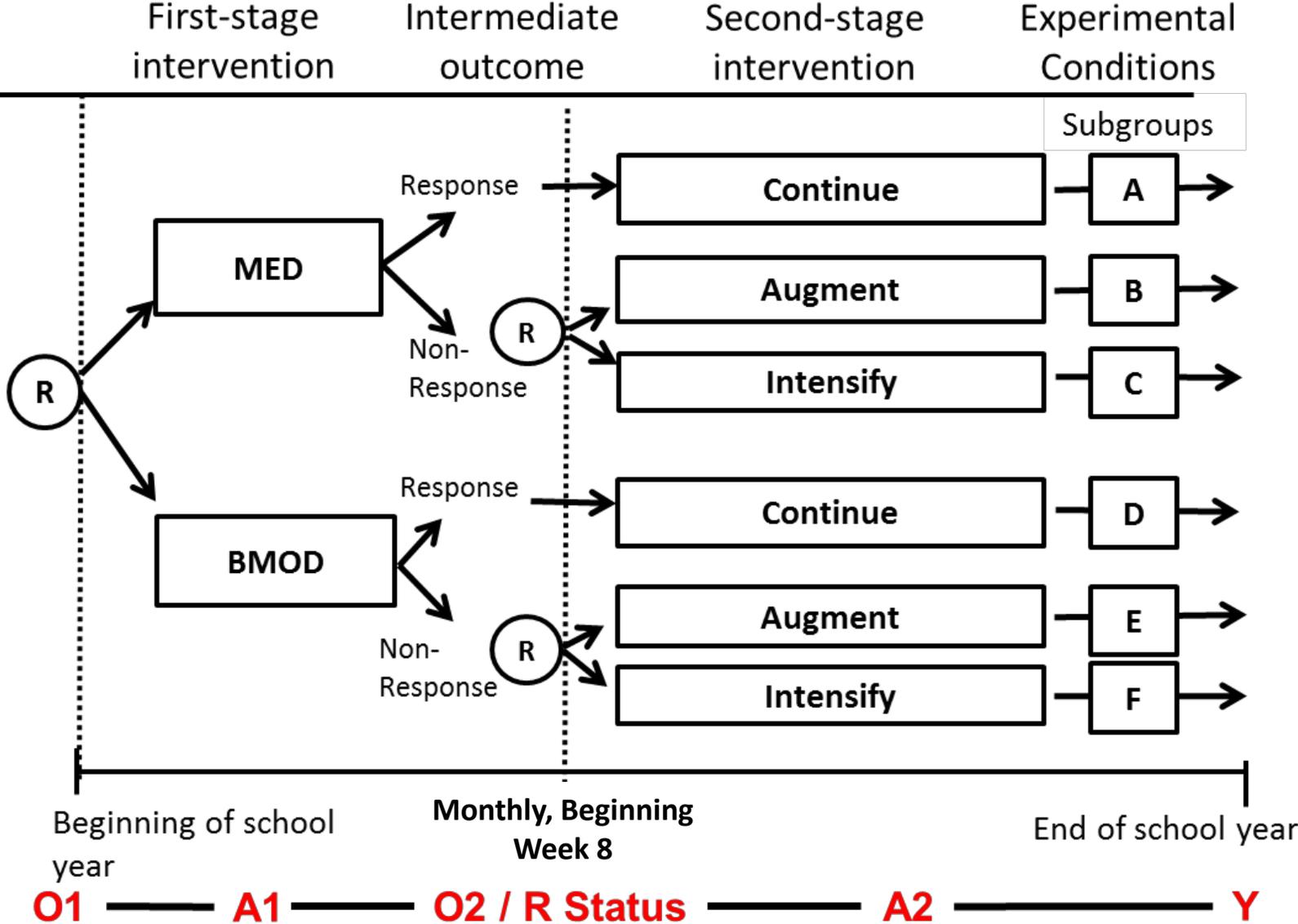
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Discuss moderators analysis in the context of a SMART

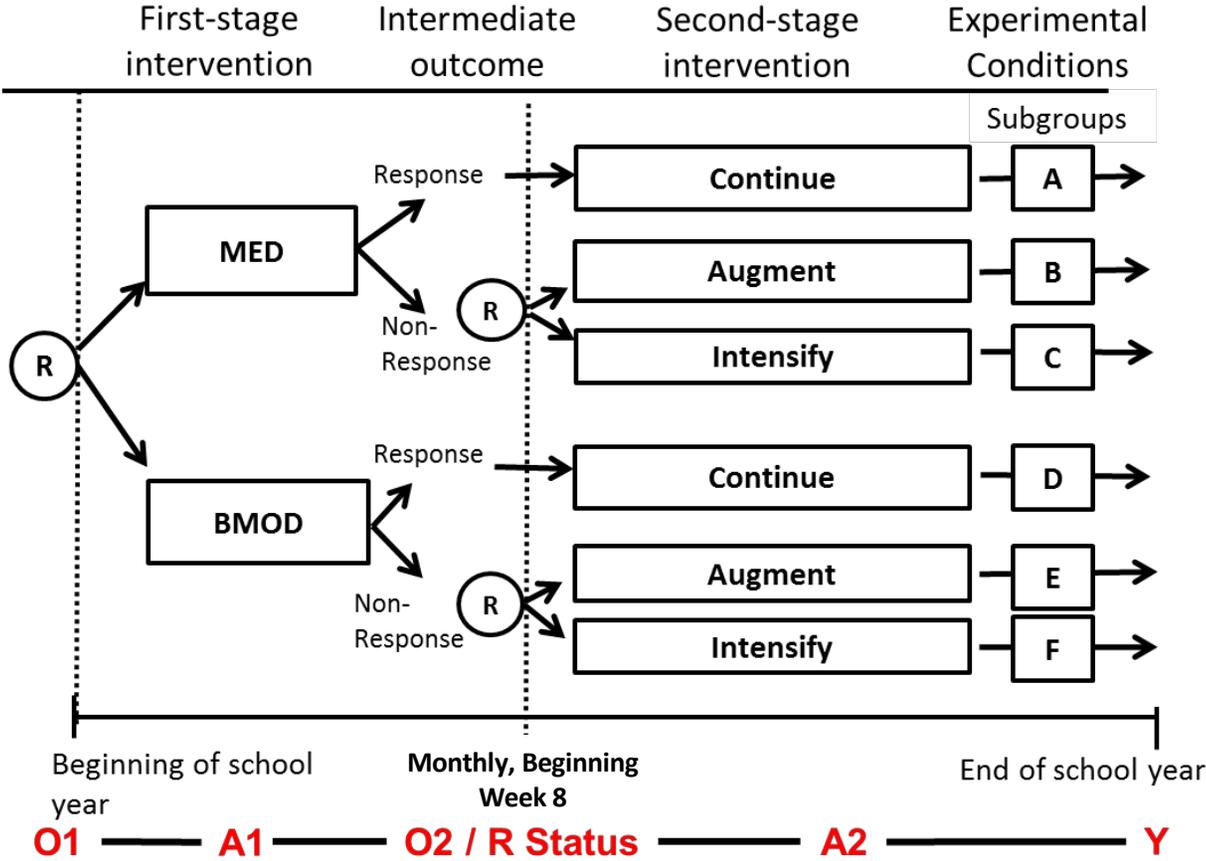
Discuss the idea of “a more deeply-tailored AI”

## Q-Learning

# Other measures collected in a SMART

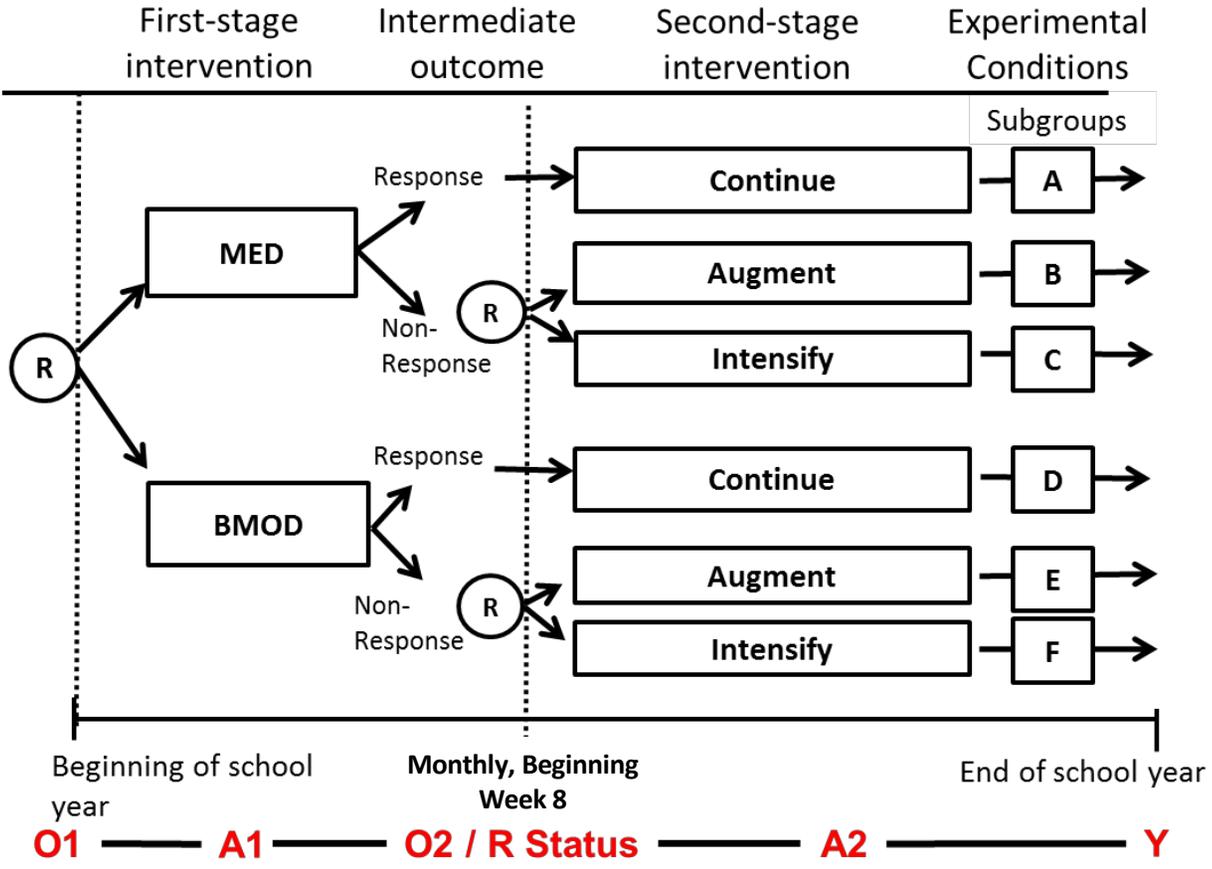


# Other measures collected in a SMART



O1 = Demographics , Med before stage 1, Baseline ADHD scores, Baseline school performance, ODD, ...

# Other measures collected in a SMART



O1 = Demographics , Med before stage 1, Baseline ADHD scores, Baseline school performance, ODD, ...

O2 = Month of non-response, adherence to stage 1, parent functioning during stage 1

## How should we use O1 and O2?

Auxiliary data from **O1** can help decide **who would benefit more from MED vs. BMOD**

- *Our example:* Medication in the prior year

Auxiliary data from **O1 and O2** can help decide **which *non-responders* would benefit more from INTENSIFY vs. AUGMENT**

- *In addition* to using information on first-stage treatment assignment
- *Our example:* Adherence to Stage One treatment

## How do we do baseline moderators analysis?

If the goal is to examine only baseline moderators,  $O_1$ , one could use a single regression:

$$E[Y | O_1, A_1, A_2] = \beta_0 + \beta_1 O_1 + \beta_2 A_1 + \beta_3 O_1 A_1 + \beta_4 A_2 + \beta_5 A_1 A_2$$

This would allow us to examine baseline  $O_1$  variables as moderators of first-stage treatment.

# Baseline and time-varying moderators analysis?

If the goal is to examine baseline and time-varying moderators, the instinct might be to do this in a single regression as follows:

$$E[Y | \mathbf{O}_1, A_1, \mathbf{O}_2, A_2] = \beta_0 + \beta_1 \mathbf{O}_1 + \beta_2 A_1 + \beta_3 \mathbf{O}_1 A_1 + \beta_4 \mathbf{O}_2 + \beta_5 A_2 + \beta_6 \mathbf{O}_2 A_2 + \beta_7 A_1 A_2$$

The hope is that this would allow us to examine baseline **O1** variables as moderators of first-stage treatment & time-varying **O2** variables as moderators of second-stage treatment.

*What's the problem with this approach?*

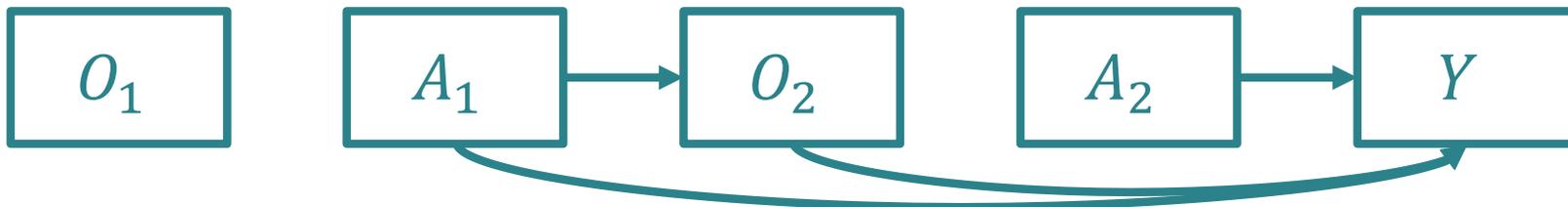
# Baseline and time-varying moderators analysis?

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**O2** happens after **A1**

- Potential mediator of relationship between A1 and Y



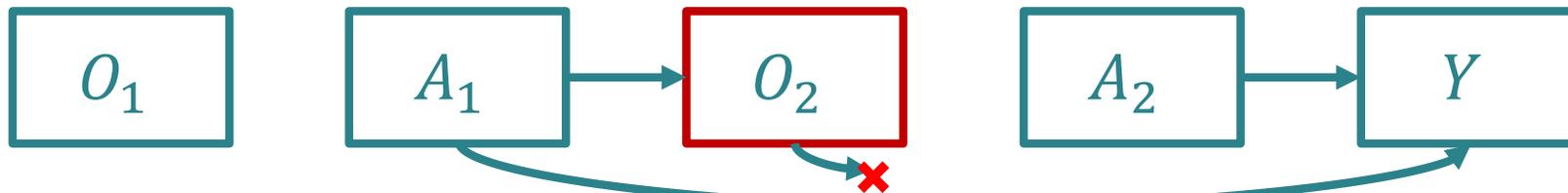
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**O2** happens after **A1**

- Potential mediator of relationship between A1 and Y
- Thus,  $(\beta_2, \beta_3)$  do not have the causal interpretation one wants
  - Because conditioning naively on O2 “cuts-off” the indirect effect of A1 on Y via O2



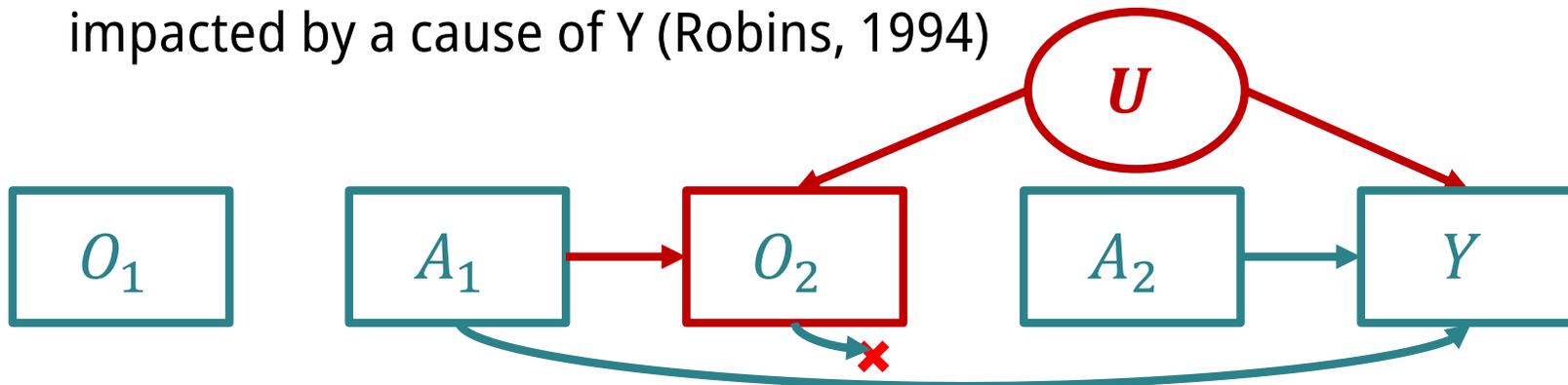
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**O2** happens after **A1**

- Collider Bias: A spurious (non-causal) correlation between A1 and Y resulting from conditioning naively on an outcome of A1 that is also impacted by a cause of Y (Robins, 1994)



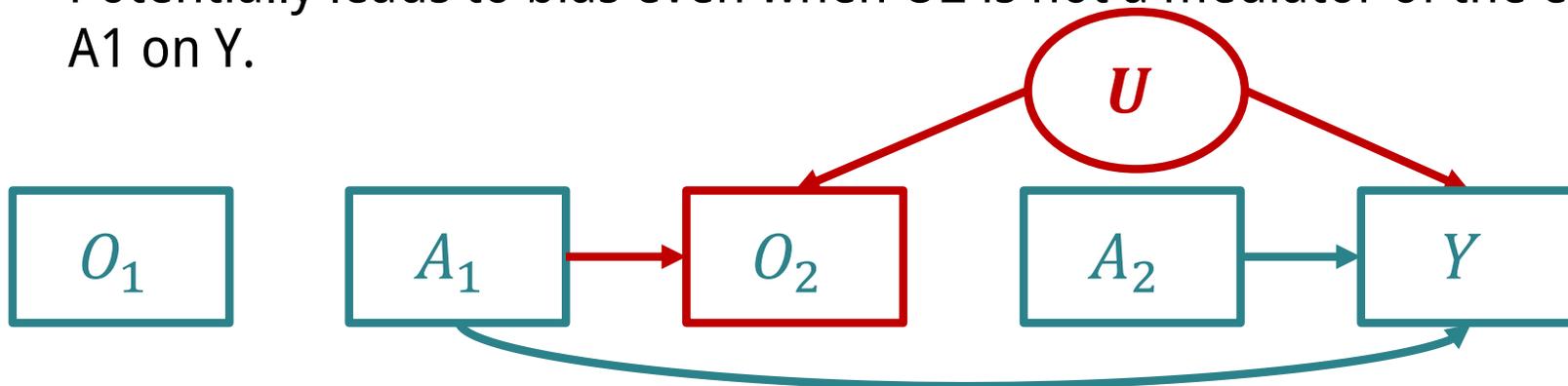
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**O2** happens after **A1**

- Collider Bias (Robins, 1994)
- Potentially leads to bias even when O2 is not a mediator of the effect of A1 on Y.



# What is Q-Learning?

- Extends regression to sequential treatments
- “Q” = “Quality”
- Hypothesis-generating

# What is Q-Learning?

The results of Q-Learning *propose an AI* with greater treatment individualization

- i.e., an AI that includes more tailoring variables than the AIs embedded in the SMART *by design*

# Q-Learning has 3 steps

## Step 1

- ***Second-Stage Regression***

- Are **O1, A1, and O2** useful in making decisions about second-stage tactics?
- (Are **O1, A1, and O2** useful in deciding which NR would benefit from Augment vs. Intensify?)

## Step 2

- ***Calculate  $\hat{Y}_i$***

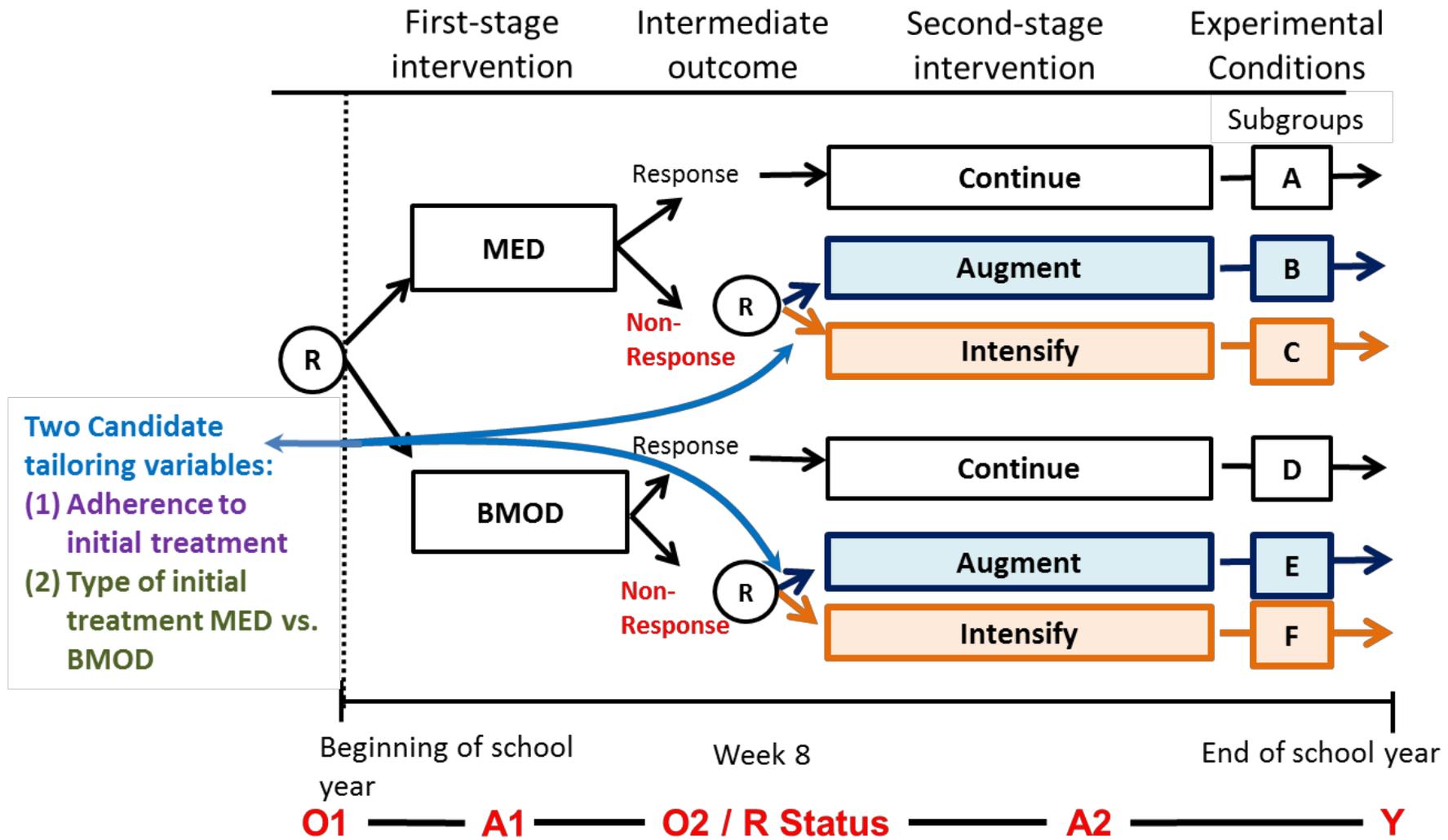
- What would the outcome be if they had received the best second-stage tactic given **O1, A1, and O2**?
- $\hat{Y}_i$  is the **estimated optimal outcome under the best second-stage tactic for non-responders**. ( $\hat{Y}_i=Y$  for responders)

## Step 3

- ***First-Stage Regression***

- Is **O1** useful in making decisions about first-stage tactics, assuming we use optimal second-stage tactic? (Use  $\hat{Y}_i$  from Step 2 as the outcome!)
- (Is **O1** useful in deciding who would benefit from MED vs. BMOD, *assuming NRs get the best second-stage treatment*?)

# Step 1: Second-stage tailoring



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In this step, we want to address 2 questions:

1. Can we use information about adherence to initial treatment to *select a tactic for non-responders*?
2. Can we use information about the initial treatment to *select a tactic for non-responders*?

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*To do this:* Fit a **moderators analysis** using data from non-responders

See next slide for details...

# Step 1: Second-stage tailoring

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1. Can we use information about adherence to initial treatment to *select a tactic for non-responders*?
2. Can we use information about the initial treatment to *select a tactic for non-responders*?

To do this: Fit a **moderated regression model** using data from non-responders

$$\begin{aligned} E[Y | O_1, A_1, O_2, A_2] \\ = \beta_0 + \beta_1 O_{11c} + \beta_2 O_{12c} + \beta_3 O_{13c} + \beta_4 O_{14c} + \beta_5 O_{12c} \\ + \beta_6 O_{21c} + \beta_7 A_1 + \beta_8 O_{22} \\ + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times O_{22}) \end{aligned}$$

## Step 1: Second-stage tailoring

$$E[Y | O_1, A_1, O_2, A_2] = \beta_0 + \dots + \beta_7 A_1 + \beta_8 \text{adherence} + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times \text{adherence})$$

**A1 = Stage 1 options: -1=MED; 1=BMOD**

**A2 = Stage 2 options: -1=ADD; 1=INTSFY**

**Adherence to Stage 1: 1=yes; 0=no**

**Y = End of year school performance**

## Step 1: Second-stage tailoring

$$E[Y | O_1, A_1, O_2, A_2] = \beta_0 + \dots + \beta_7 A_1 + \beta_8 \text{adherence} + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times \text{adherence})$$

**A1 = Stage 1 options: -1=MED; 1=BMOD**

**A2 = Stage 2 options: -1=ADD; 1=INTSFY**

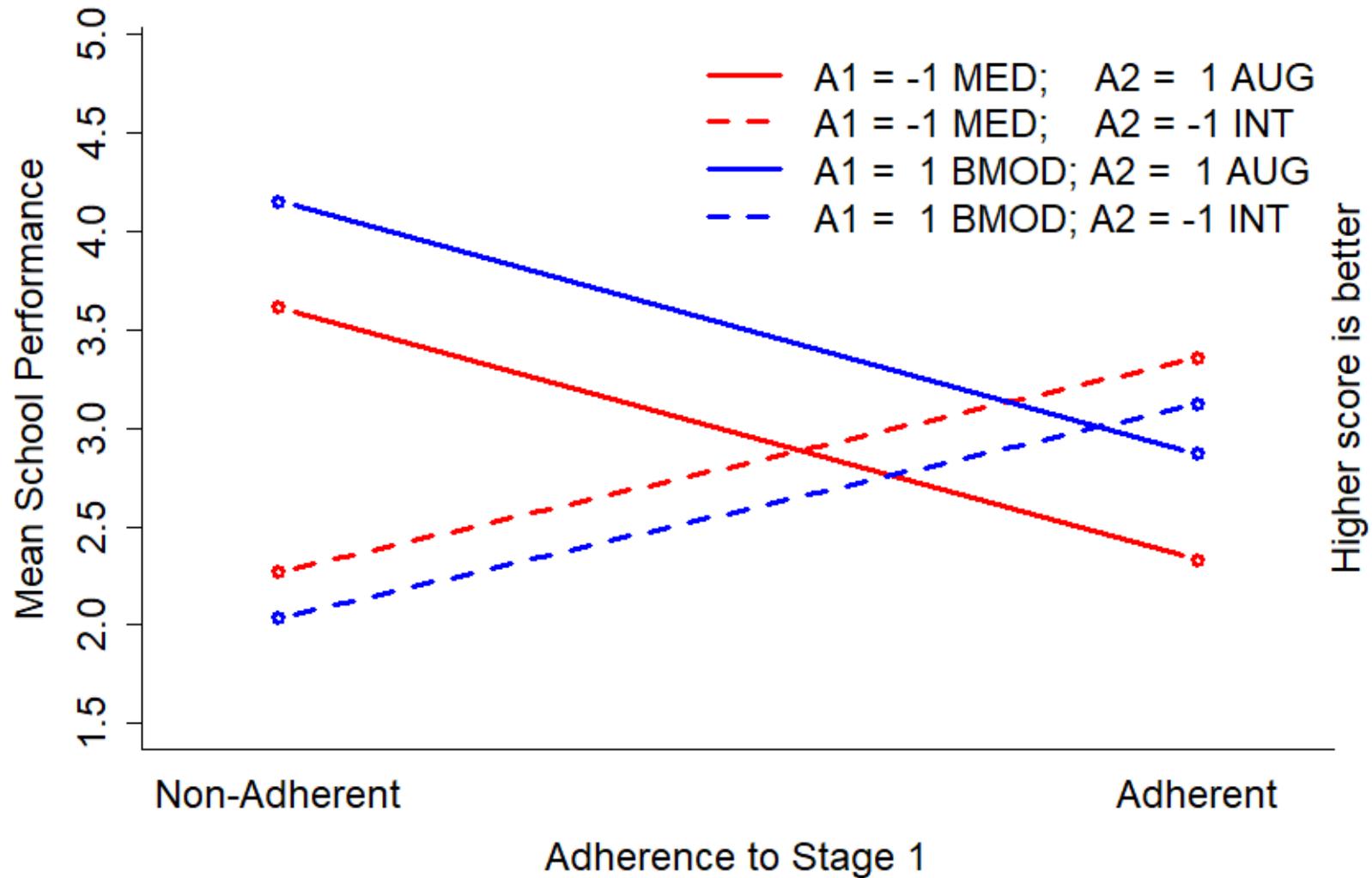
**Adherence to Stage 1: 1=yes; 0=no**

**Y = End of year school performance**

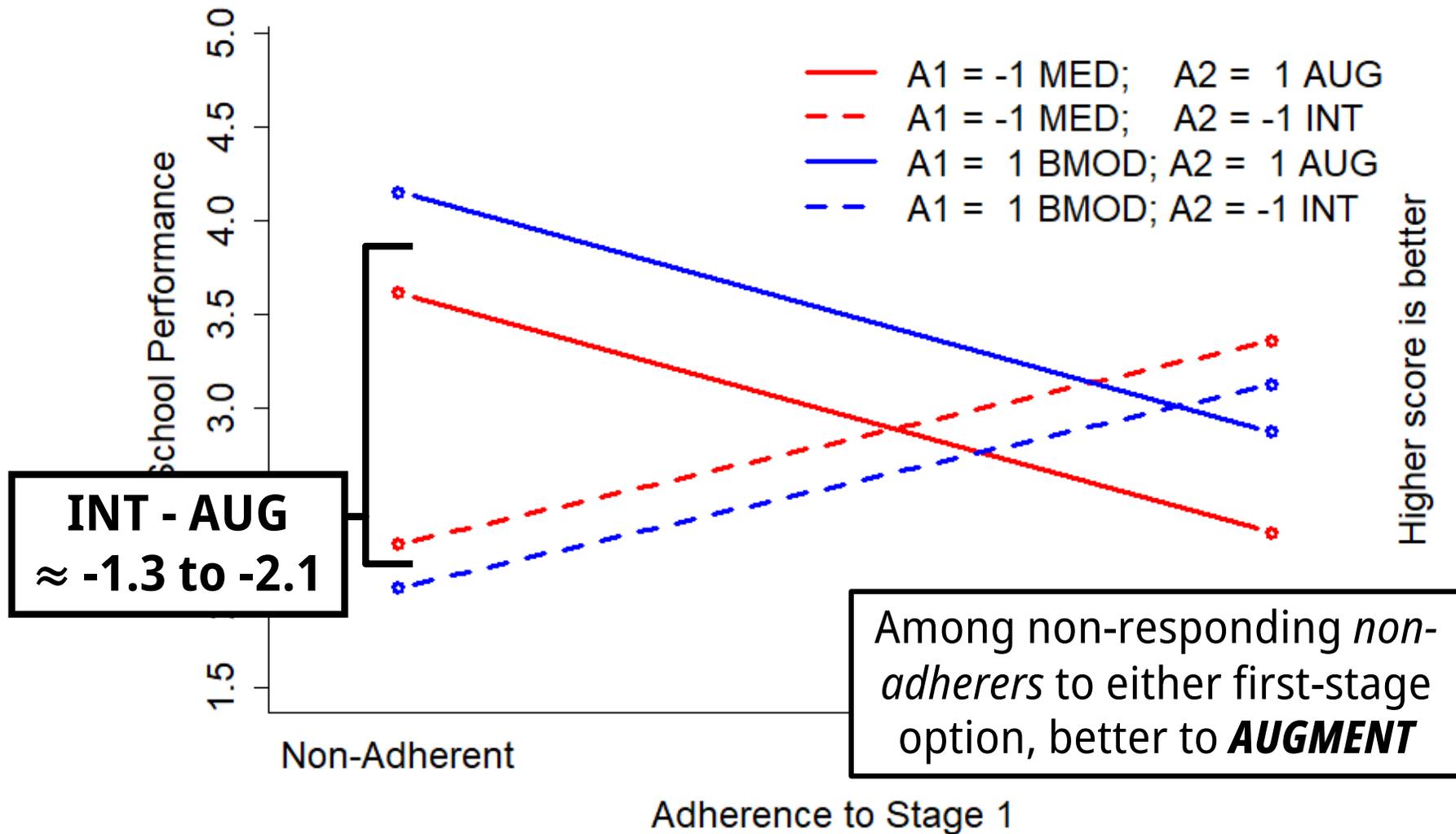
### ***This model will help us to:***

- Determine whether the best second stage tactics varies depending on the tailoring variables; and
- Identify the best second-stage tactic for each level of the tailoring variable

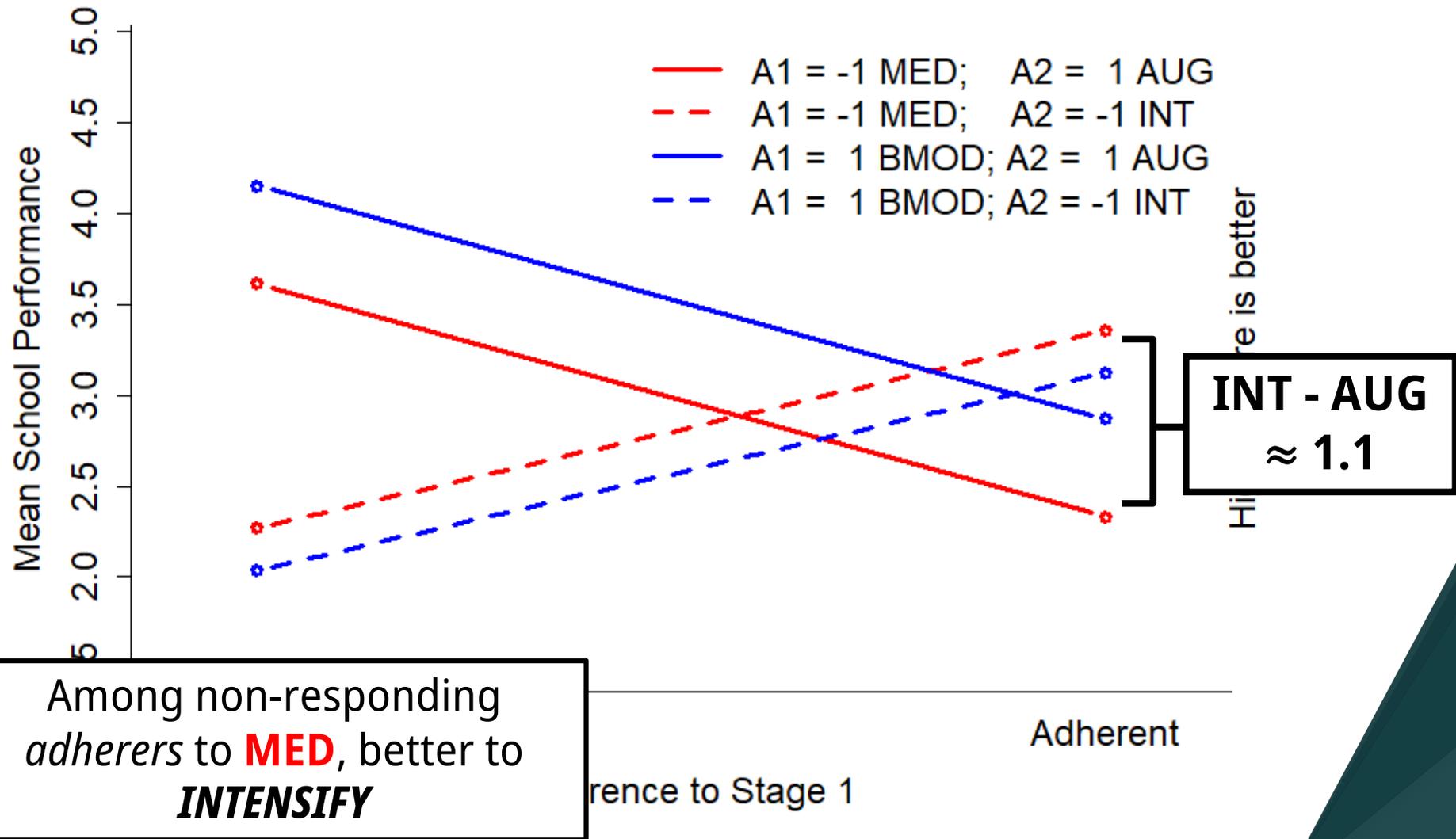
# Step 1: Second-stage tailoring



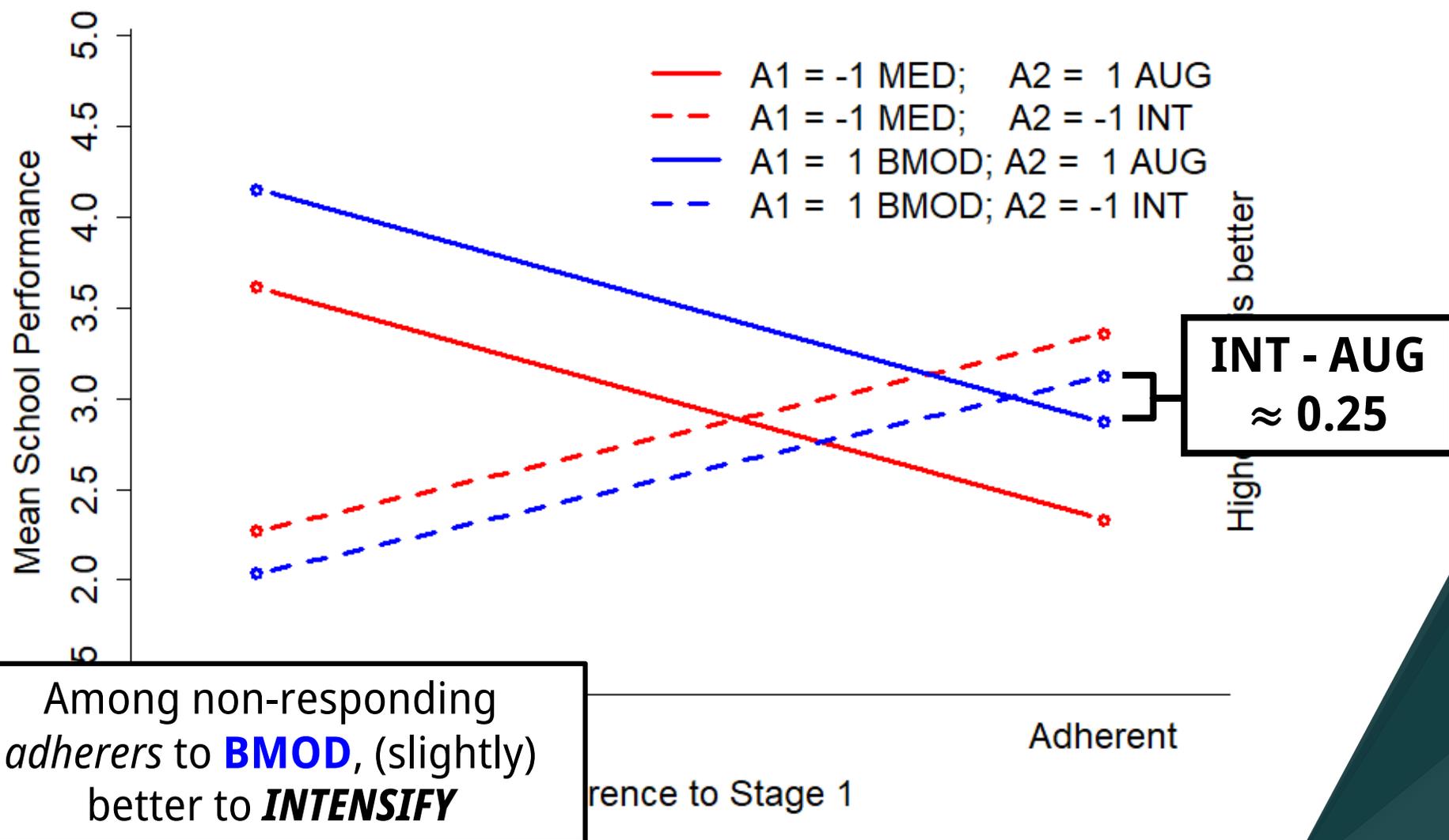
# Step 1: Second-stage tailoring



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# Step 1: Second-stage tailoring



## Step 2: Predicted outcome under the best stage 2 option

Next, we assign each non-responder the value  $\hat{Y}_i$

$\hat{Y}_i$  = The expected outcome if each non-responder received the best second-stage tactic given their initial treatment and adherence

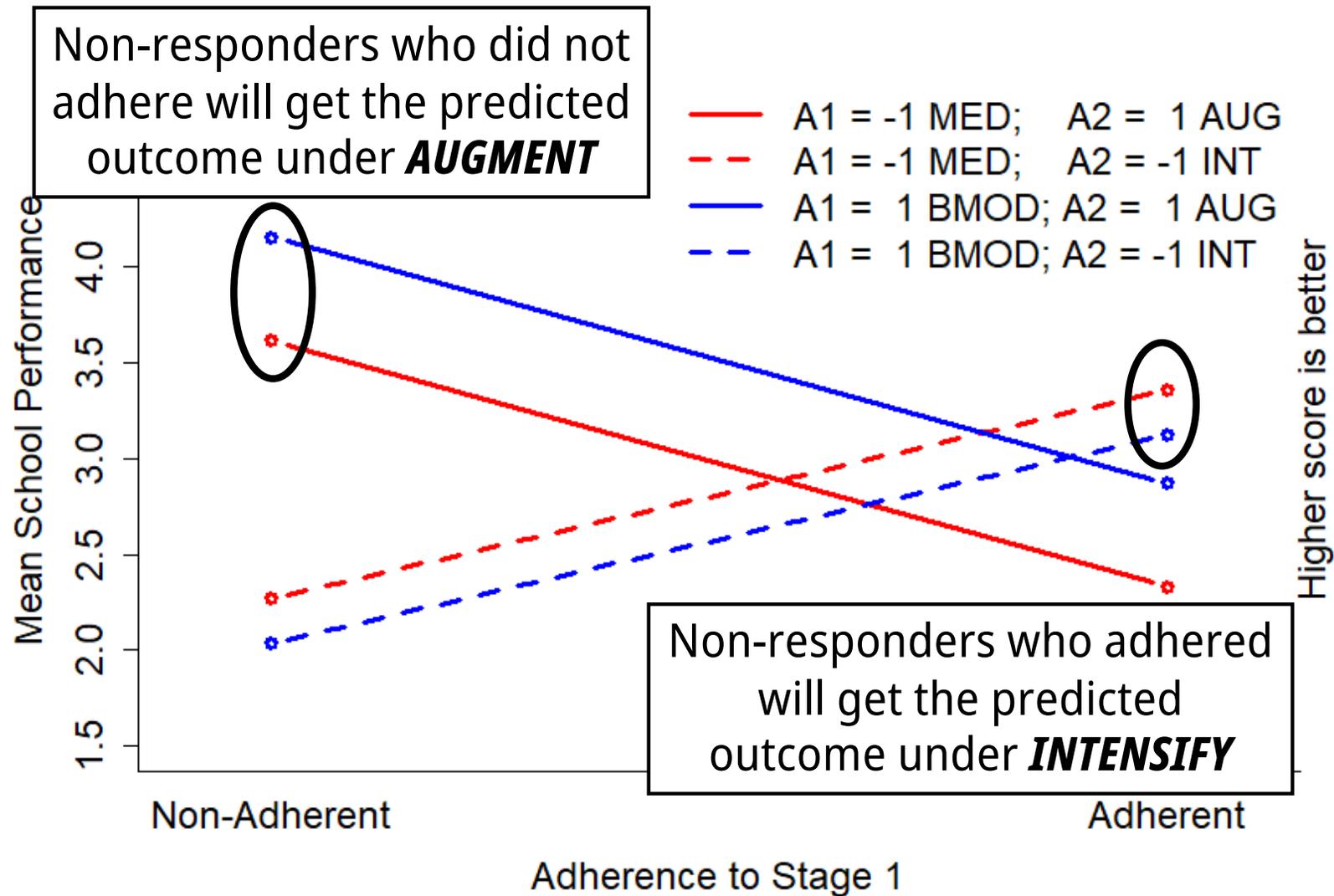
## Step 2: Predicted outcome under the best stage 2 option

Next, we assign each non-responder the value  $\hat{Y}_i$

$\hat{Y}_i$  = The expected outcome if each non-responder received **the best second-stage tactic** given their **initial treatment** and **adherence**

- We used Step 1 Regression to identify the best Stage 2 tactic for any given level of the tailoring variables.
- We use these results to estimate what the outcome for each non-responder if they received the best Stage 2 tactic, *given their observed values* on the tailoring variables
  - Given his/her observed values on the tailoring variables
- Responders?  $\hat{Y}_i = Y_i$

## Step 2: Predicted outcome under the best stage 2 option



## Step 2: Predicted outcome under the best stage 2 option

$$E[Y | O_1, A_1, O_2, A_2] = \beta_0 + \dots + \beta_7 A_1 + \beta_8 \text{adherence} \\ + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times \text{adherence})$$

**PRETEND FOR A MOMENT THAT:**

$$\beta_0 = 3, \quad \beta_6 = 0.1, \quad \beta_7 = -0.1, \quad \beta_8 = -1, \quad \beta_9 = -0.2, \quad \beta_{10} = 1.2$$

## Step 2: Predicted outcome under the best stage 2 option

$$E[Y | O_1, A_1, O_2, A_2] = \beta_0 + \dots + \beta_7 A_1 + \beta_8 \text{adherence} + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times \text{adherence})$$

### PRETEND FOR A MOMENT THAT:

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**John** was a non-responding, non-adhering (adherence=0) participant who received:  
Stage 1: MED (A1 = 1)  
Stage 2: INT (A2 = -1)  
and had mean values for all baseline variables

## Step 2: Predicted outcome under the best stage 2 option

$$E[Y | O_1, A_1, O_2, A_2] = \beta_0 + \dots + \beta_7 A_1 + \beta_8 \text{adherence} + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times \text{adherence})$$

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**John** was a non-responding, non-adhering (adherence=0) participant who received:  
Stage 1: MED ( $A_1 = 1$ )  
Stage 2: INT ( $A_2 = -1$ )  
and had mean values for all baseline variables

$$\hat{Y} = 3 + 0.1(A_1) - 0.1(\text{adherence}) - 0.1(A_2) - 0.2(A_2 \times A_1) + 1.2(A_2 \times 0)$$

$$\hat{Y}_{A_2=INT} = 3 + 0.1(1) - 0.1(0) - 0.1(1) - 0.2(1 \times 1) + 1.2(1 \times 0) = 2.8$$

John's score under INT (which he received)

$$\hat{Y}_{A_2=AUG} = 3 + 0.1(1) - 0.1(0) - 0.1(-1) - 0.2(-1 \times 1) + 1.2(-1 \times 0) = 3.4$$

John's score under AUG (which he did not receive)

## Step 2: Predicted outcome under the best stage 2 option

$$E[Y | O_1, A_1, O_2, A_2] = \beta_0 + \dots + \beta_7 A_1 + \beta_8 \text{adherence} + \beta_9 A_2 + \beta_{10} (A_2 \times A_1) + \beta_{11} (A_2 \times \text{adherence})$$

**PRETEND FOR A MOMENT THAT:**

$$\beta_0 = 3, \quad \beta_6 = 0.1, \quad \beta_7 = -0.1, \quad \beta_8 = -1, \quad \beta_9 = -0.2, \quad \beta_{10} = 1.2$$

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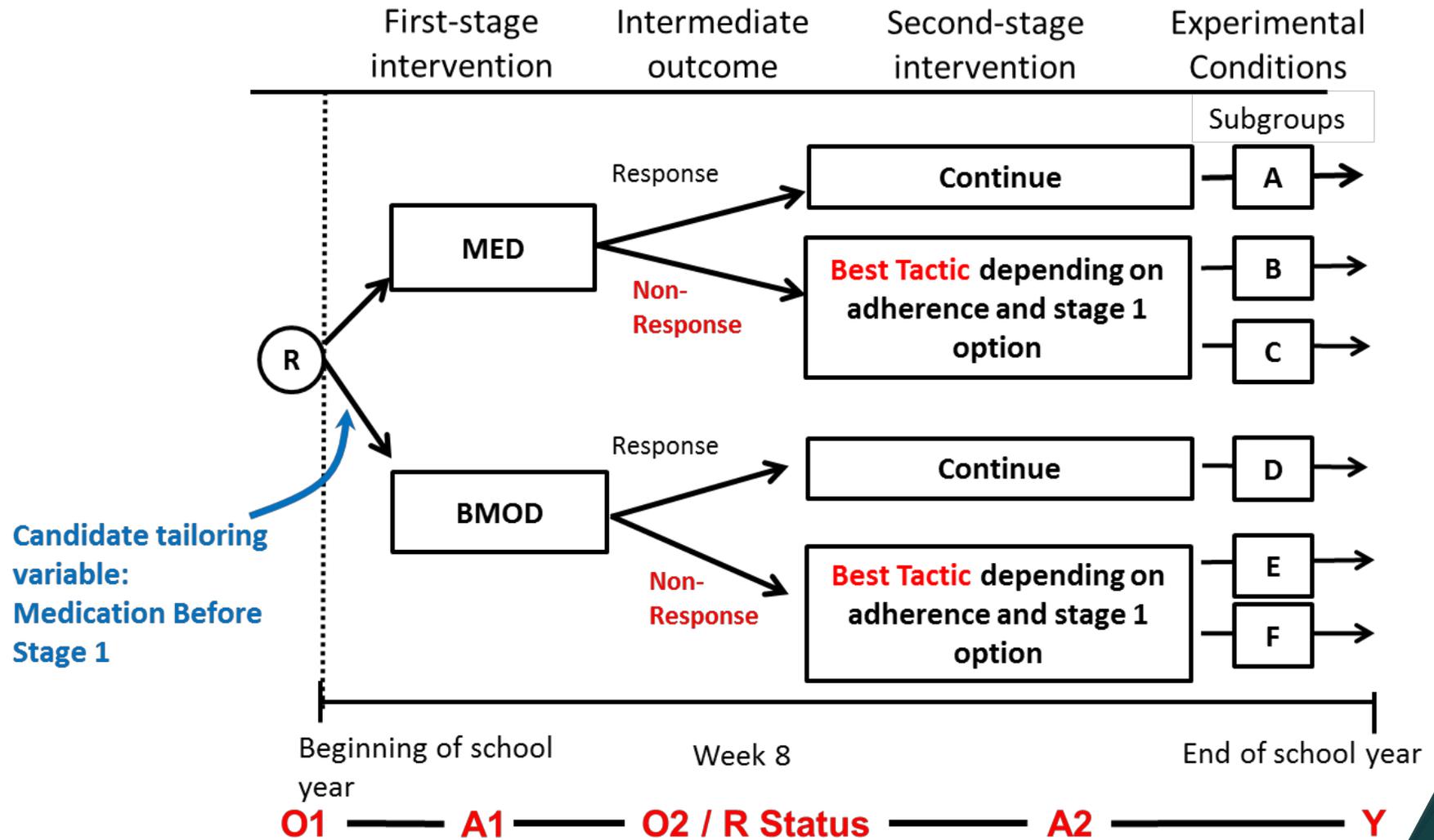
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**John's  $\hat{Y}_i$**

# Step 3: Move backwards to first-stage tailoring



## Step 3: Move backwards to first-stage tailoring

In this step, we seek to address the following question:

- Can we use information about medication in prior year to select the best first-stage option?
  - Assuming that in the future, non-responders get the best Stage 2 tactic

## Step 3: Move backwards to first-stage tailoring

In this step, we seek to address the following question:

- Can we use information about medication in prior year to select the best first-stage option?
  - Assuming that in the future, non-responders get the best Stage 2 tactic
- We do this by using  $\hat{Y}_i$  as the outcome in a regression where we explore the usefulness of prior medication for making decisions about first-stage options.

## Step 3: Move backwards to first-stage tailoring

Fit the following regression model:

$$E[\hat{Y} \mid O_1, A_1] = \beta_0 + \beta_1 O_{11c} + \beta_2 O_{12c} + \beta_3 O_{14c} \\ + \beta_4 \text{priorMed} + \beta_5 A_1 + \beta_6 (\text{priorMed} \times A_1)$$

Controlling for  
stage 2 tactic

## Step 3: Move backwards to first-stage tailoring

Fit the following regression model:

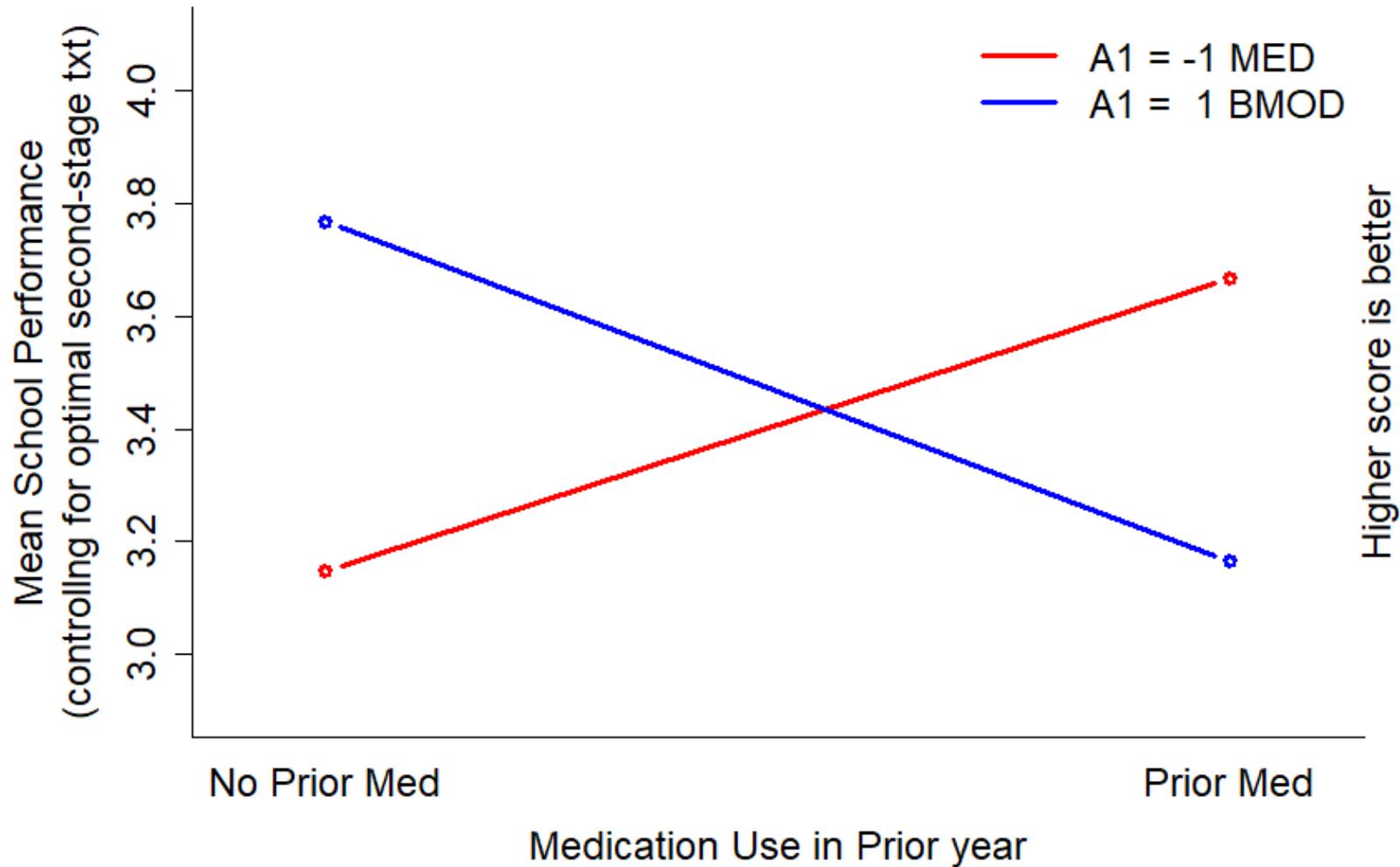
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Controlling for  
stage 2 tactic

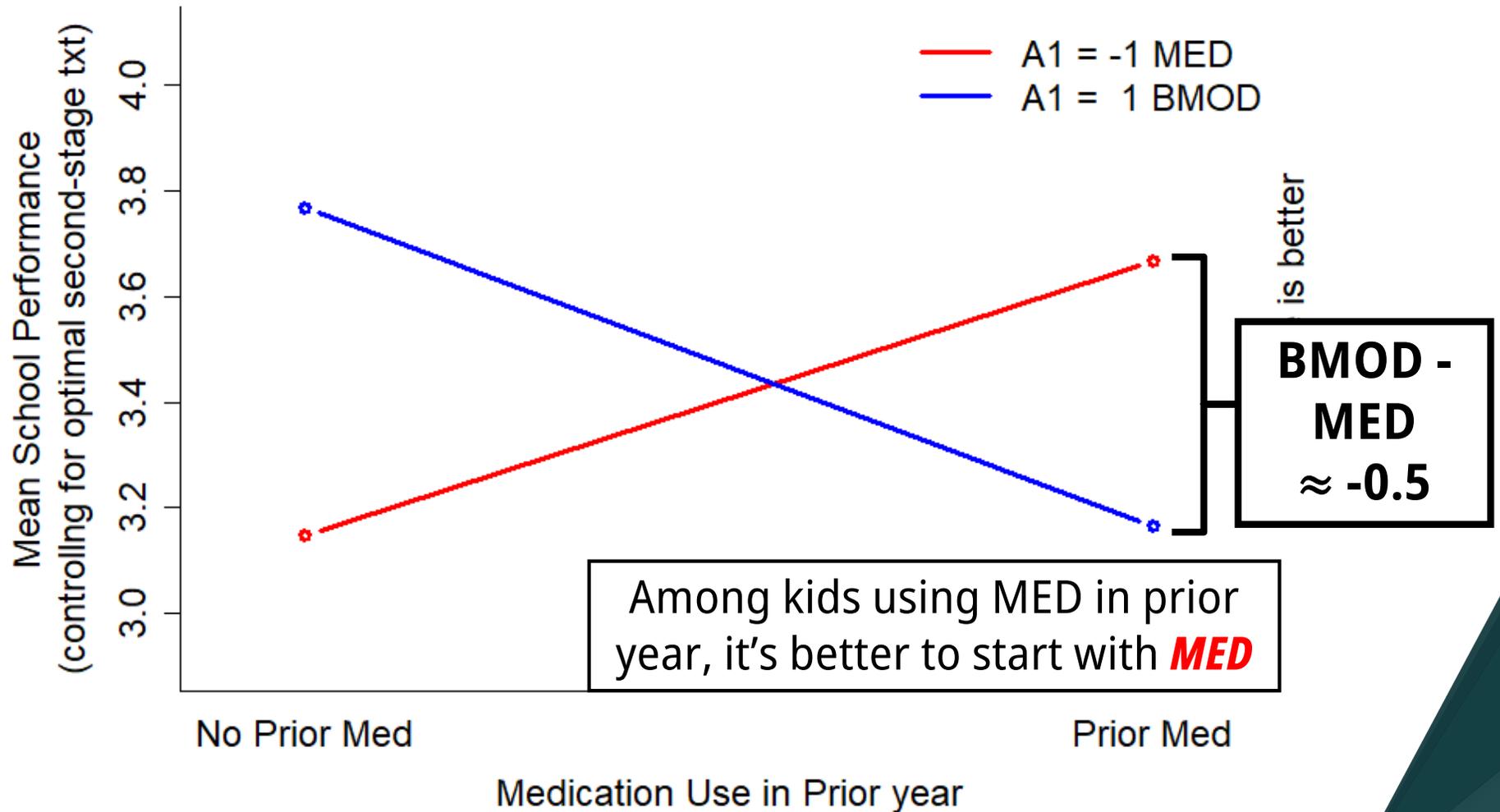
***This model will help us to:***

- a) *Determine whether* the best first stage option varies depending on whether the child received medication in prior year; and
- b) *Identify the best first stage option* for children who received med in prior year vs. those that did not.

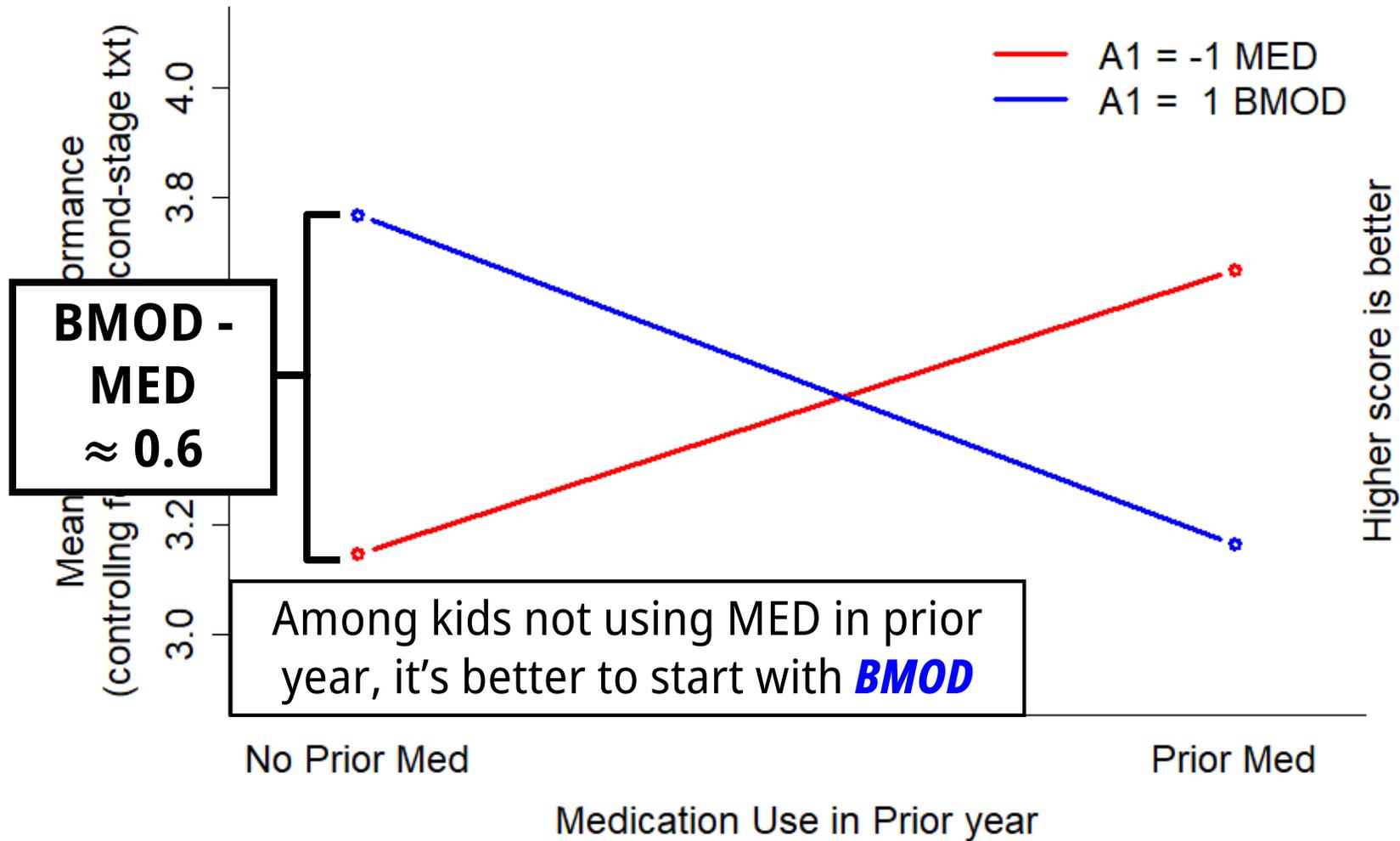
# Step 3: Move backwards to first-stage tailoring



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# Summary of Q-learning results

## Step 1

- ***Second-Stage Regression***

- Are **O1, A1, and O2** useful in making decisions about second-stage tactics?
- (Are **O1, A1, and O2** useful in deciding which NR would benefit from Augment vs. Intensify?)

## Step 2

- ***Calculate  $\hat{Y}_i$***

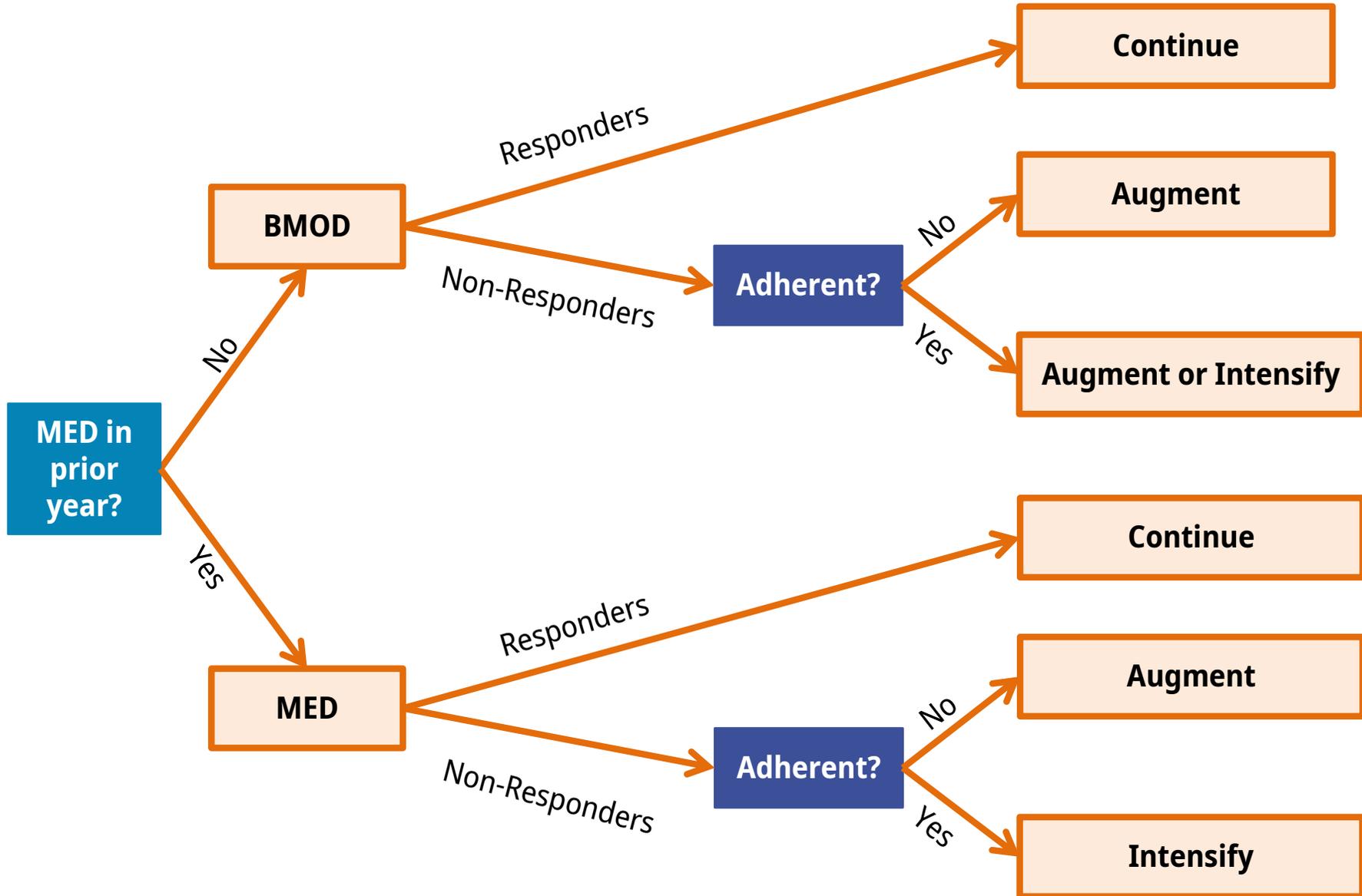
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- Is **O1** useful in making decisions about first-stage tactics, assuming we use optimal second-stage tactic? (Use  $\hat{Y}_i$  from Step 2 as the outcome!)
- (Is **O1** useful in deciding who would benefit from MED vs. BMOD, assuming NRs get the best second-stage treatment?)

# The estimated more-deeply tailored AI is



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*At the beginning of school year*

IF **medication in prior year** = {NO}

THEN stage 1 = {BMOD}.

ELSE IF **medication in prior year** = {YES}

THEN stage 1 = {MED}

*Then, every month,  
beginning at week 8...*

# The estimated more deeply-tailored AI is

*... Then, every month,  
beginning at week 8*

**IF response status** to Stage 1 = {NR}

**THEN**

**IF adherence** to MED or BMOD = {NO},  
**THEN** Stage 2 = {AUGMENT}.

**ELSE IF adherence** to MED = {YES},  
**THEN** Stage 2 = {INTENSIFY}.

**ELSE IF adherence** to BMOD = {YES},  
**THEN** Stage 2 = {AUGMENT} or {INTENSIFY}.

**ELSE IF response status** to Stage 1 = {R}

**THEN** CONTINUE Stage 1.

# Preview of SAS code for Q-learning

What you can do:

- Step 1 using regression
- Steps 2 and 3 using a SAS add-on known as PROC QLEARN

Here's a quick preview of how to use these tools.

# SAS code for Q-learning

## *Second-Stage Regression:*

$$E[Y | \dots O_2, A_2] = \beta_0 + \beta_1 O_{11c} + \beta_2 O_{12c} + \beta_3 O_{13c} + \beta_4 O_{14c} + \beta_5 O_{12c} \\ + \beta_6 O_{21c} + \beta_7 \mathbf{A}_1 + \beta_8 \mathbf{O}_{22} \\ + \beta_9 A_2 + \beta_{10} (A_2 \times \mathbf{A}_1) + \beta_{11} (A_2 \times \mathbf{O}_{22})$$

\* Use only non-responders;

```
data dat10; set dat1; if R=0; run;
```

```
proc genmod data = dat10;
```

```
  model y = o11cncr o12cncr o13cncr o14cncr o21cncr a1 o22 a2 a2*a1 a2*o22;
```

```
  * INTENSIFY vs. AUGMENT when Stage 1 = MED, by ADHERENCE status;
```

```
  estimate 'Diff: INT vs AUG for NR ADH MED' a2 2 a2*a1 -2 a2*o22 2 ;
```

```
  estimate 'Diff: INT vs AUG for NR Non-ADH MED' a2 2 a2*a1 -2 a2*o22 0 ;
```

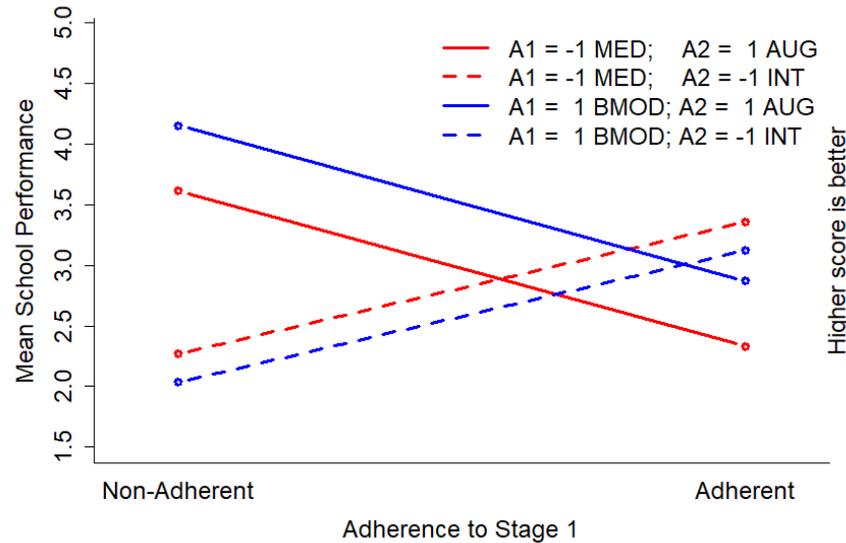
```
  * INTENSIFY vs. AUGMENT when Stage 1 = BMOD, by ADHERENCE status;
```

```
  estimate 'Diff: INT vs AUG for NR ADH BMOD' a2 2 a2*a1 2 a2*o22 2 ;
```

```
  estimate 'Diff: INT vs AUG for NR Non-ADH BMOD' a2 2 a2*a1 2 a2*o22 0 ;
```

```
run;
```

# Step 1 results of Q-learning



## Contrast Estimate Results

Label	Mean Estimate	95% Confidence Limits		Standard Error	Pr > ChiSq
		Lower	Upper		
Diff: INT vs AUG for NR ADH MED	<b>1.0240</b>	0.4131	1.6350	0.3117	<b>0.0010</b>
Diff: INT vs AUG for NR Non-ADH MED	<b>-1.3412</b>	-1.9896	-0.6927	0.3308	<b>&lt;.0001</b>
Diff: INT vs AUG for NR ADH BMOD	<b>0.2503</b>	-0.3950	0.8956	0.3292	<b>0.4471</b>
Diff: INT vs AUG for NR Non-ADH BMOD	<b>-2.1149</b>	-2.7050	-1.5248	0.3011	<b>&lt;.0001</b>

# What does PROC QLEARN provide?

1. Data set with O1, A1, R, O2, A2, Y
2. The first regression model (best Stage 2 tactic)

$$Y \sim O1, A1, O2, A2$$

*NB: Be sure to specify sub-sample for this regression  
(non-responders in ADHD SMART)*

3. The second regression model (best Stage 1 option)

$$\hat{Y} \sim O1, A1$$

# Preview of Code for PROC QLEARN

## *Model Specification*

```
PROC QLEARN <options for input> ;
  MAIN1 variables;
  TAILOR1 variables;
  MAIN2 variables;
  TAILOR2 variables;
  RESPONSE variable;
  STG1TRT variable;      *Must be coded -1/+1
  STG2TRT variable;      *Must be coded -1/+1
  STG2SAMPLE variable;  *0/1 indicator specifying sample used for Stage 2
  ALPHA value;          *Type-I error to calculate CI for Stage 1 regression
RUN;
```

### ***Regression 1 (Stage 2):***

$INT + MAIN2 + TAILOR2 + TAILOR2 * STG2TRT + STG2TRT$

### ***Regression 2 (Stage 1):***

$INT + MAIN1 + TAILOR1 + TAILOR1 * STG1TRT + STG1TRT$

# What we learned from Q-learning

*At the beginning of school year*

IF **medication in prior year** = {NO}

THEN stage 1 = {BMOD}.

ELSE IF **medication in prior year** = {YES}

THEN stage 1 = {MED}

*Then, every month,  
beginning at week 8...*

# What we learned from Q-learning

*... Then, every month,  
beginning at week 8*

IF **response status** to Stage 1 = {NR}

THEN

IF **adherence** to MED or BMOD = {NO},  
THEN Stage 2 = {AUGMENT}.

ELSE IF **adherence** to MED = {YES},  
THEN Stage 2 = {INTENSIFY}.

ELSE IF **adherence** to BMOD = {YES},  
THEN Stage 2 = {AUGMENT} or {INTENSIFY}.

ELSE IF **response status** to Stage 1 = {R}

THEN CONTINUE Stage 1.

# What we learned from Q-learning

The **mean Y**, school performance, under the more deeply tailored AI obtained via Q-learning is estimated to be **3.72**.

- Recall (BMOD, AUGMENT) was the AI with the largest mean among the 4 embedded AIs (only tailored on response)
- The value of the more deeply-tailored AI is larger than the value of the AI that started with BMOD and used AUGMENT for non-responders (mean = **3.51**)

# What we learned from Q-learning

We may want to evaluate the efficacy of this *proposed AI* versus a suitable control (e.g., usual care) with a subsequent trial (i.e., RCT)

# References

Nahum-Shani, I., Qian, M., Almirall, D., Pelham, W. E., Gnagy, B., Fabiano, G. A., ... & Murphy, S. A. (2012). Q-learning: A data analysis method for constructing adaptive interventions. *Psychological methods*, 17(4), 478.