

# When Futility Is Futile

An economic case for more pragmatism in late phase futility stopping

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16 June 2026 | PSI Conference 2026, Belfast

# Futility Analysis

- Late phase clinical trials are expensive (\$100m ++)
- Despite early-phase successes, only 59% average phase III program success rate<sup>†</sup>
- Idea: Add interim futility analysis!
  - Stop trial if low chance of success
  - Avoid part of trial cost
- But this can be anything from a free lunch to a very expensive mistake
- We argue that, for economic reasons, futility analysis should not be designed with power losses greater than 1%

# Marginal Power

- Trial planning requires **marginal operating characteristics**
  - Statistical properties of design itself
  - Explain why design decisions are made and decision criteria are set
- Futility decision criteria part of trial design, set at planning stage → need impact on marginal operating characteristics
- Futility stopping causes trial failure so reduces both marginal power and type I error
  - Marginal power: power of the designed trial (i.e. including any futility analyses)
  - Regulators require non-binding futility and fix type I error requirements (i.e. cannot increase  $\alpha$  to compensate)
- Consequences:
  - Positive: **probability of early stopping → lowered expected trial cost**
  - Negative: **reduces marginal power → reduces expected future revenues**



# The fundamental trade-off

- **Too conservative:** Low stopping chance (even under null hypothesis!)
  - **Low expected savings** – worth it?
  - **Low/no impact on marginal power**
- **Too aggressive:** High stopping chance (even under alternative hypothesis!)
  - Chance of **'false stop'**; wrongly declaring futility
  - **High cost savings** but high expected loss from **forfeiting revenue** from effective drugs
  - **Substantial impact on marginal power**; needs to be adequately represented in CTP

# When is a trial viable?

- We can put together a simple<sup>†</sup> economic model for a futility analysis
  - **Benefits:**
    - Lowered expected trial costs =  $\text{Pr}(\text{stop}) * \text{cost savings when stopping (S)}$
  - **Costs:**
    - Loss in expected revenues =  $\text{Pr}(\text{incorrect stop}) * \text{anticipated revenue if successful (R)}$
- Economic value of a futility analysis is then:
  - $\text{Pr}(\text{stop}) \cdot S - \text{Pr}(\text{incorrect stop}) \cdot R$
- For a futility analysis to add economic value:
  - $\text{Pr}(\text{stop}) \cdot S - \text{Pr}(\text{incorrect stop}) \cdot R > 0$
  - Alternatively:  $\text{Pr}(\text{incorrect stop} | \text{stop}) < \frac{S}{R}$

# S/R and Trial Costs

- Futility analysis savings often easiest to quantify relative to overall anticipated trial costs (**C**)
  - **S/C** is proportion of trial costs recoverable with a futility stop
    - Readily estimated at early trial planning stage by trial teams
    - Linked to (standardised) interim information fraction ( $\tau$ ): Earlier interim = higher **S/C**, lower  $\tau$
    - Many costs are front loaded (trial setup, site openings, patient recruitment etc), so **S/C** < **(1 -  $\tau$ )**
- Financial opportunity also can be measured relative to **C**
  - **R/C** measures attractiveness of investment if successful, often estimated & used by finance functions
    - Either available as part of trial feasibility or industry/corporate standard assumptions available
    - Require in Net Present Value terms, i.e. future revenues discounted to same timeframe as trial costs incurred
- $\frac{S/C}{R/C} = S/R$  savings from stopping as a fraction of the financial opportunity

# Statistical Model for Interim Stopping

- To evaluate stopping probabilities, adopt a statistical model with standardised times, effect sizes etc:

- Interim and final test statistic

- Assume: **bivariate Normal distribution** of interim and final test statistics
- Z scores at interim ( $Z_\tau$ ) and final analyses ( $Z$ )
- $\tau$  = information fraction at interim

- Assumptions on true treatment effect (a 'prior')

- Assume probability of **point null and point alternative hypotheses**
- Frequentist alignment: "Probability the drug does / does not work"
- **Mixture distribution with  $\pi = \Pr(H_1)$**

$$(Z_\tau, Z) \sim \pi \cdot MVN_2(\mu_{1,2}, \Sigma_\tau) + (1 - \pi) \cdot MVN_2((0,0), \Sigma_\tau)$$

- $\mu_{1,2} = (\Phi^{-1}(1 - \beta) + \Phi^{-1}(1 - \alpha)) \cdot (\sqrt{\tau}, 1)$

- $\Sigma_\tau = \begin{pmatrix} 1 & \sqrt{\tau} \\ \sqrt{\tau} & 1 \end{pmatrix}$

# Models for Stopping Probabilities

- Assume a Z-statistic boundary ('f'), stop for futility if  $Z_\tau < f$
- Stopping probabilities can then be expressed as:

- $\Pr(\text{stop}) = \pi \cdot \Phi(x - \mu_1) + (1 - \pi) \cdot \Phi(x)$

- $\Pr(\text{incorrect stop}) =$

- $$\int_{-\infty}^f \int_{\Phi^{-1}(1-\alpha)}^{\infty} \pi \cdot \varphi_2((z_\tau, z); \mu_{1,2}, \Sigma_\tau) dz dz_\tau + \int_{-\infty}^f \int_{\Phi^{-1}(1-\alpha)}^{\infty} (1 - \pi) \cdot \varphi_2((z_\tau, z); (0,0), \Sigma_\tau) dz dz_\tau$$

Loss of marginal power

Loss of type I error;  $< \alpha$

Note:  $\varphi_2(z; \mu, \Sigma)$  = PDF of a bivariate Normal distribution with means  $\mu$  and covariance  $\Sigma$

# Economic Approaches for Informing Choice of Futility Boundaries

- **Economic viability when  $Pr(stop) \cdot S - Pr(incorrect\ stop) \cdot R > 0$**

- Solve numerically  $\frac{S}{R} - \frac{Pr(incorrect\ stop)}{Pr(stop)} = 0$  to find maximum viable standardised futility boundary  $f_{max}$

- **Economic optimality when  $Pr(stop) \cdot S - Pr(incorrect\ stop) \cdot R$  is maximised**

- Solve numerically  $\frac{\delta}{\delta f} \left( \frac{S}{R} \cdot Pr(stop) - Pr(incorrect\ stop) \right) = 0$  to find economically optimal futility boundary  $f_{opt}$

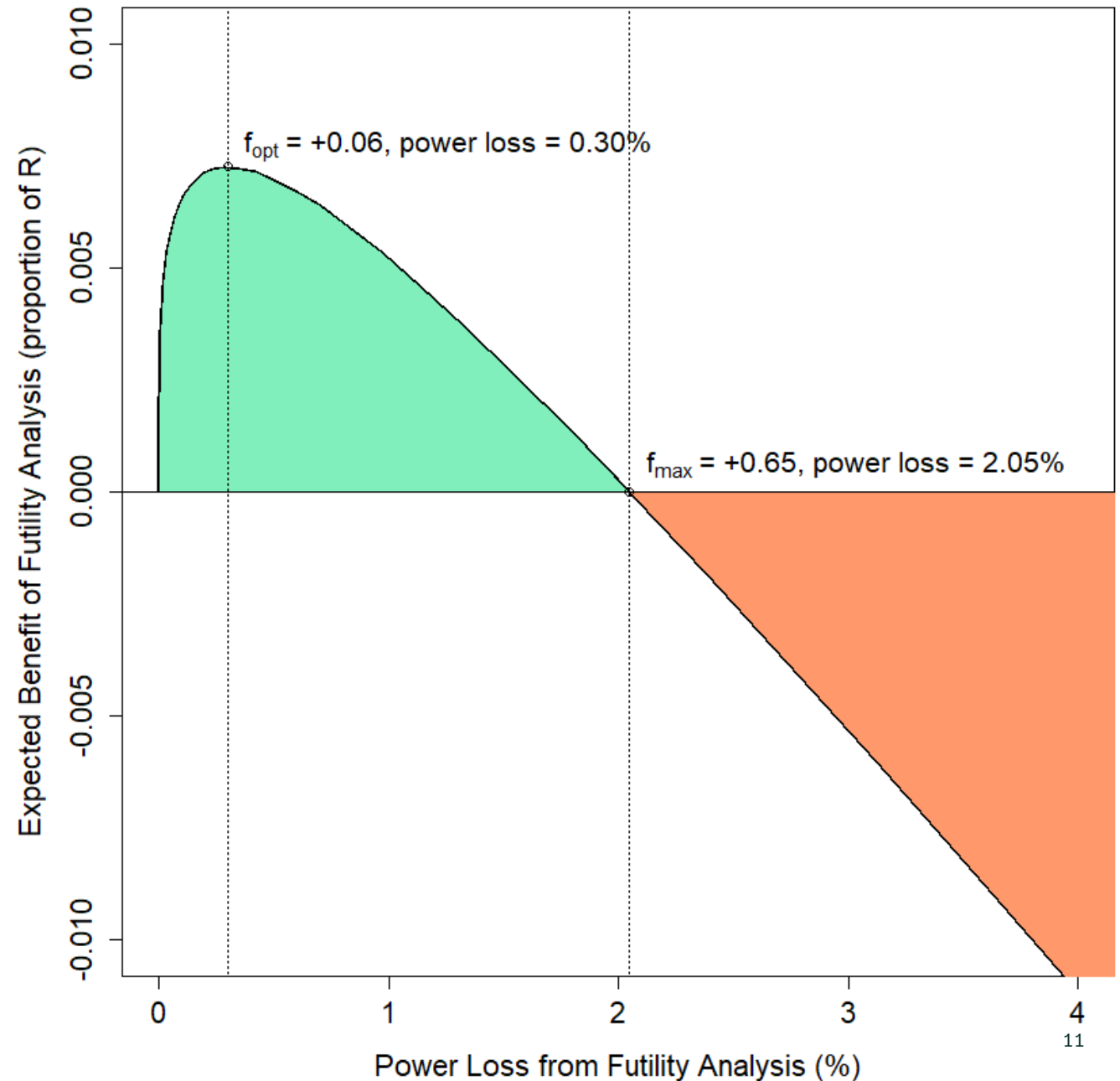
- Note:  $\frac{S}{R} \cdot Pr(stop) - Pr(incorrect\ stop)$  is expected benefit of futility analysis as proportion of expected revenue,  $R$

- Corresponding properties can be readily calculated from boundary, e.g. **Power loss**,  $Pr(stop)$
- For phase III trials with 90% power, 1-sided 2.5% type I error, only  $\tau$ ,  $\pi$  and  $S/R$  determine futility boundary properties

# Economic Value vs Power Loss

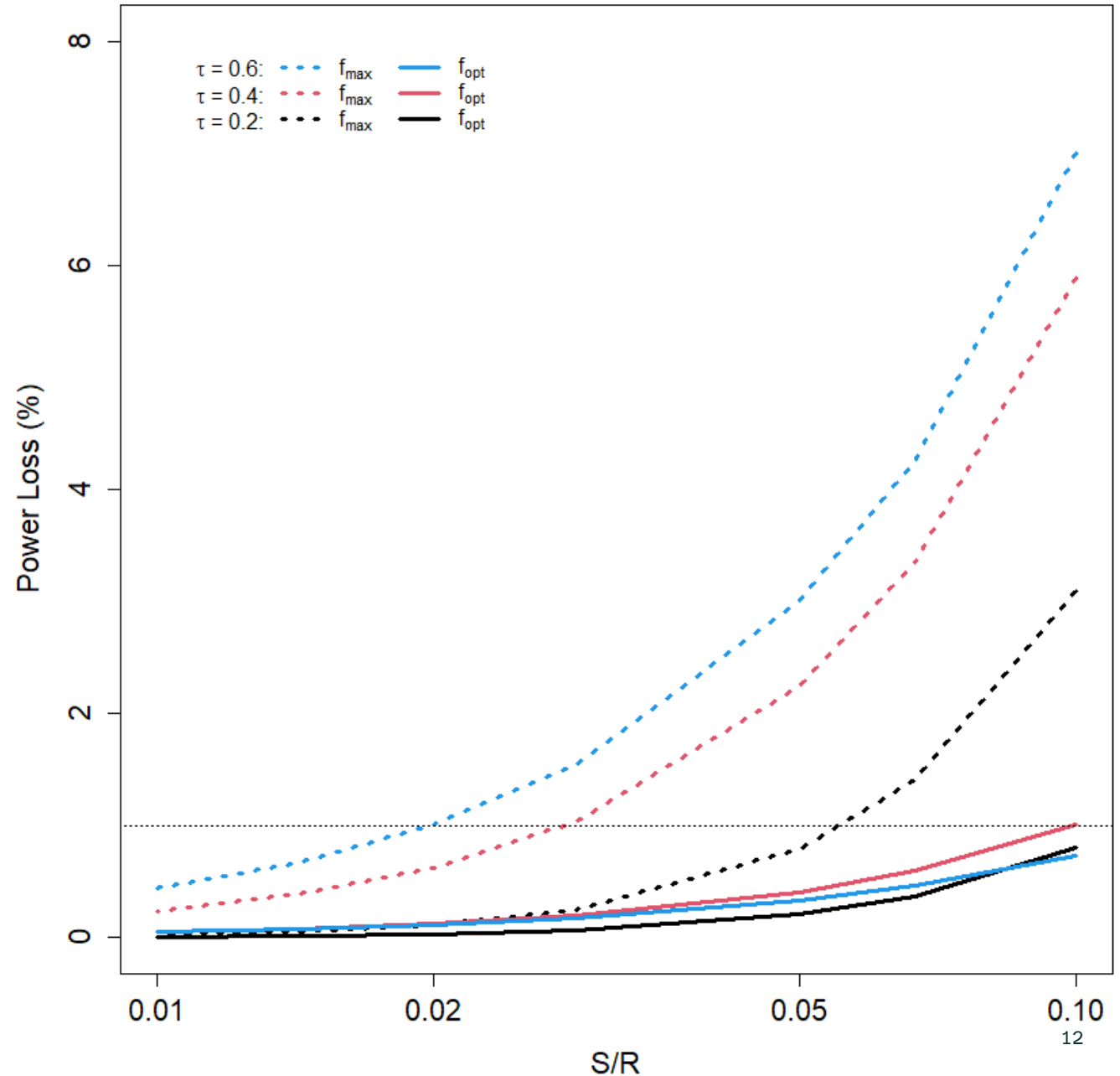
- Example plot showing benefit of futility analysis vs power loss from different bounds
- Assumes
  - $\tau = 0.5, \pi = 0.66$
  - $\frac{S}{R} = 0.05$ , e.g.  $S = 0.25, R = 5$
- Benefits optimised at very low power losses (0.3%)
  - 'zero boundary' is essentially optimal
  - Power loss > 2% loses money
- Shape of curve typical:
  - Steep gains in value with minimal power loss
  - Linear decline in value beyond optimal point

Benefit of Futility Analysis w.r.t. Power Loss,  $S/R = 0.05, \tau = 0.5, \pi = 0.66$



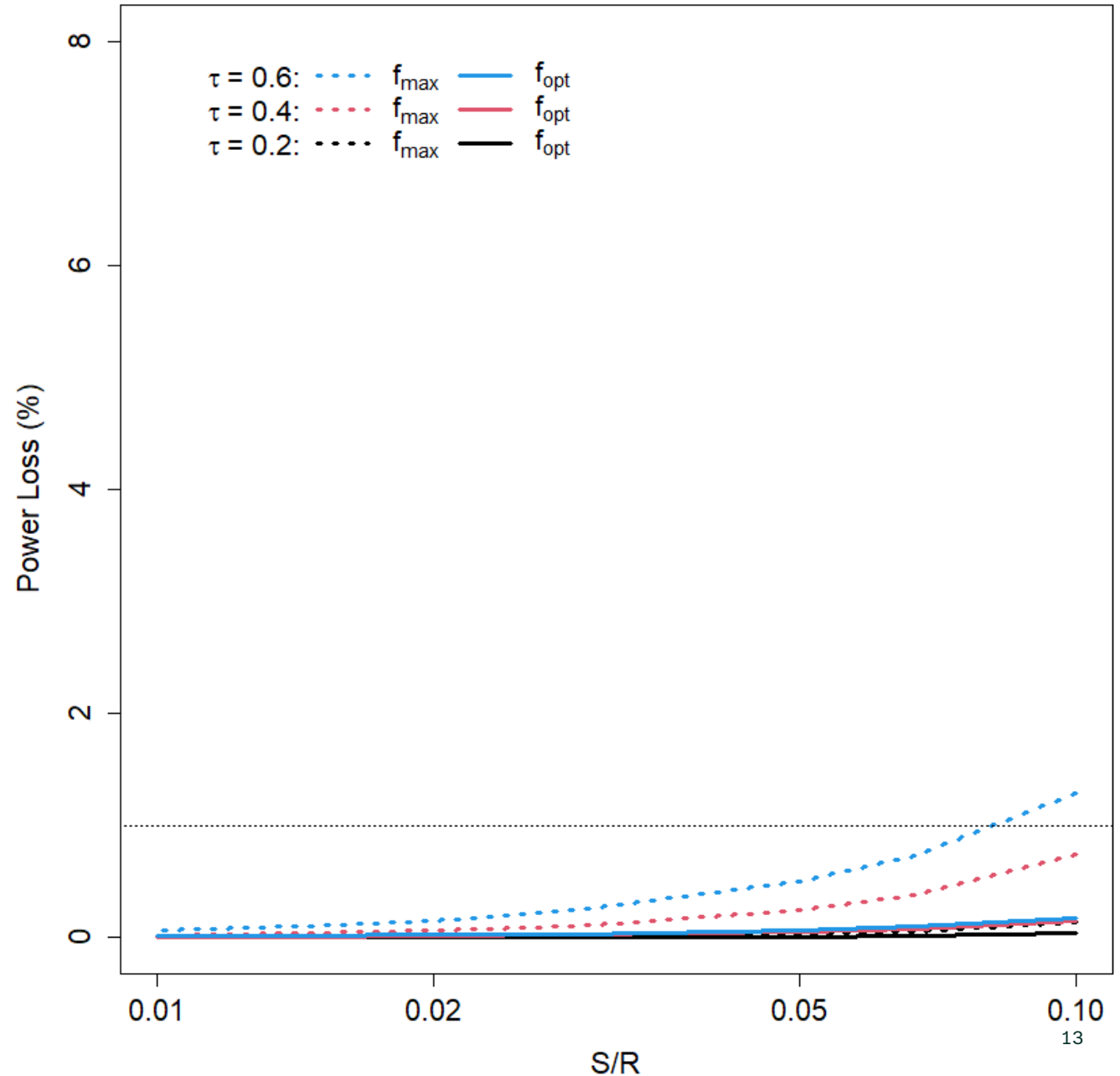
# Survey of Parameter Space

- Can screen many potential designs for reasonable futility boundaries and power loss
- $f_{\text{opt}}, f_{\max}$  and power losses are highly sensitive to  $S/R$  and  $\pi$
- $\tau$  has less effect...
  - ... and raising  $\tau$  also lowers  $S/R$
- For high-risk phase III trials ( $\pi = 0.6$ ), power losses of 2-4% may remain economically viable if relative savings are high.
- However, optimal futility analyses still result in 0.01% to 1% power loss



# Survey of Parameter Space

- For low-risk phase III trials ( $\pi = 0.9$ ), power losses above 1% are not economically viable
- Optimal futility power loss is typically  $< 0.2\%$



# The 1% Rule of Thumb

- “Futility boundaries for phase III trials that lose more than 1% marginal power are hard to justify economically.”
- **Justification**
  - **Broad applicability** - Almost all parameter combinations produce power loss  $< 1\%$
  - **Safe** - Limits expected economic loss if compound works
  - **Efficient** - Conservative stopping captures most of the potential economic benefits
  - **Simple** - Small impact on power avoids need to adjust power / sample size calculations
- **Caveats:**
  - 1% is an upper limit, not a target
    - 1% is often above  $f_{\max}$ ; may need much lower (e.g. 0.1%) for economic optimality
  - Overpowered trials or large effect requirements may still benefit from more aggressive futility stopping
  - Might not apply when *a priori* confidence in compound is very low (speculative phase III)

# Conclusions

- Futility analyses are important for derisking late phase trials
- Economic perspective can help to navigate the fundamental trade off between cost saving and preserving expected revenue
- In typical phase III trials power loss from futility analysis should be less than 1%
- Allows simpler trial design process by considering futility analysis **after** core trial design is aligned, due to negligible impact on power

