Statistical Analysis Plan

Study Title: The effects of PF-04995274 on emotional processing in treatment-resistant, medicated, depressed patients (RESTART study).

CT REGISTRATION: NCT03515733. ETHICS REF: 18/SC/0074

Objectives

The primary aim of the study is to investigate the effects of 7 days of PF-04995274 administration (adjunctive to SSRI/SNRI medication) on behavioural measures of non-emotional and emotional cognition, specifically memory performance on an auditory verbal learning task and performance (including accuracy and reaction times) on a facial expression recognition task. The secondary aim of the study is to investigate the effects of 7 days of PF-04995274 administration (adjunctive to SSRI/SNRI medication) on other behavioural measures of non-emotional and emotional cognition.

Brief summary of design

This study uses a double-blind, placebo-controlled, randomised between-groups design. Participants are patients who fulfil criteria for current episode of Major Depressive Disorder (MDD) and are currently taking an SSRI/SNRI and have failed to response clinically. Participants will be randomised to receive 7-9 days treatment with either PF-04995274 (15 mg daily) or a matched placebo. This study includes three visits in total: (a) Screening Visit; (b) First Dose Visit; (c) Research Visit Two. All visits will take place at the Warneford Hospital, Oxford University Department of Psychiatry.

Determination of Sample Size

We will recruit 50 participants to the study (25 on PF-0499574 and 25 on placebo). Participants who withdraw during the study or do not provide complete data-sets will be replaced. Based on data acquired in Harmer et al., (2004) comparing citalopram to placebo, if we aim for 0.9 power and a 0.05 false positive rate, a suggested group sample size is 19 (G*power) to ensure determination of group level differences at this variable if they exist. As 5HT4 agonism is less well studied, and to account for the exclusion of low quality data before analysis, we will aim for 25 individuals with complete datasets per group (total sample size of 50).

Data Cleaning

- Will be performed prior to unblinding
- Outliers will be excluded on a per task basis
- For all behavioural data, excluding the EPS, cut-off thresholds will be determined based on a visual inspection of a histogram plot, examining thresholds for:
 - > Trials with unusually low response times
 - > Trials with unusually high response times
 - Proportion of missing/removed trials per participant
 - Abnormally low mean accuracy (or equivalent outcome) per participant
 - Abnormally high mean reaction time per participant
- For all self-report data, extreme outliers indicating invalid data entry will be determined based on a visual inspection of a histogram plot
- For emotion potentiated startle data, two researchers will independently a) distinguish startle blink response from noise and decide whether a response could have been seen, had one occurred, excluding trials if no response could not be seen and b) determine if there is a blink response or if the trial should be recorded as a non-response. If there is disagreement, a third researcher will make a final decision.

Behavioural Analysis

Below is a non-exhaustive list of outcomes and analyses which will be conducted.

Behavioural Task	Outcomes	Analysis		
		 All key endpoints will be summarized (mean, standard deviation) in tables and bar charts (mean ±SEM) 		
		Conducted in R (version will be confirmed in publications)		
Facial Expression	Unbiased hit rate, as described by Wagner (1993) – a	Repeated measures analyses of variance (ANOVAs):		
Recognition Task (FERT)	measure of emotion identification accuracy which	Between-subject factor – 2 levels: Treatment group (PF-		
	accounts for response bias i.e. any general tendency to	04995274 or placebo)		
Recognition of computer-	identify the emotion when it is not present. Calculated as	Within-subject factor – 7 levels (Fear, anger, happy, surprise,		
based positive and negative	proportion of correct hits * (number of hits/all hits and	disgust, sad, neutral)		
facial expressions	misses), for each facial expression category.			
	% correct and response bias will also be reported			
P1vital® Limited Products	individually.			
	Misclassifications: Number of responses to each facial			
	expression category incorrectly classified as another facial			
	expression category e.g. identifying a fearful face as			
	surprised			
	Reaction time (ms) for trials with correct responses.			
Auditory Verbal Learning	Number of words recalled -	Repeated measures analyses of variance (ANOVAs):		
Task (AVLT)	List A immediate recall trials	 Between-subject factor – 2 levels: Treatment group (PF- 04995274 or placebo) 		
Recall of words read aloud		Within-subject factor - 5 levels (List A immediate recall trials 1-5)		

Pen and paper	Number of words recalled -	Repeated measures analyses of variance (ANOVAs):
	List A short delay	Between-subject factor – 2 levels: Treatment group (PF-
	Number of words recalled -	04995274 or placebo)
	List A long delay	Within-subject factor - 2 levels (List A short and long delay
		trials)
	Number of intrusions (words incorrectly recalled) across	Independent samples t-tests
	List A acquisition trials	
	Number of repetitions (words repeated within the same	
	trial) across List A acquisition trials	
	Number of words recalled -	
	List B recall	
	Number of hits and false alarms in the delayed	
	recognition test	
Probabilistic Instrumental	% Accuracy (correct or incorrect symbol choice)	Independent samples t-tests
Learning Task (PILT)	Correct = symbol associated with high probability of	
	winning or low probability of losing	
Reward sensitivity	Proportion of group choosing correct symbol per trial	The proportion will be calculated, and plotted on a learning curve
		to determine where learning plateaus.
Neurobehavioral Systems		
Presentation software		Repeated measures analyses of variance (ANOVAs) - trials where
(https://www.neurobs.com)		learning has plateaued
		Between-subject factor – 2 levels: Treatment group (PF-
		04995274 or placebo)
		 Within-subject factor – 2 levels: Condition (win or loss)
	Learning rate from reinforcement learning model	Repeated measures analyses of variance (ANOVAs)
		Between-subject factor – 2 levels: Treatment group (PF-
		04995274 or placebo)
		Within-subject factor – 2 levels: Condition (win or loss)

	Decision temperature parameters from reinforcement learning model	 Repeated measures analyses of variance (ANOVAs) Between-subject factor – 2 levels: Treatment group (PF-04995274 or placebo) Within-subject factor – 2 levels: Condition (win or loss)
	Amount won Amount lost Total monetary amount earned	Independent samples t-tests
Emotional Categorisation Task (ECAT) Categorisation of emotional words	% Accuracy – words correctly identified as positive or negative	 Mixed model analyses of variance (ANOVAs). Between-subject factor – 2 levels: Treatment group (PF-04995274 or placebo) Within-subject factor – 2 levels: Word valence (positive or negative)
P1vital® Limited Products Emotional Recall Task (EREC)	Reaction time Number of hits (words recalled correctly) Number of false alarms (words recalled incorrectly)	
Recall of emotional words from ECAT P1vital® Limited Products		
Emotional Recognition Task (EMEM)	Number of hits (words recognised correctly) Number of false alarms (words recognised incorrectly)	
Recognition of emotional words from ECAT	Reaction time	
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Facial Dot Probe Task	Vigilance scores derived from reaction time – e.g. bias	Mixed models analyses of variance (ANOVAs).
(FDOT) Vigilance to fearful and happy faces P1vital® Limited Products	scores calculated by subtracting median reaction times in congruent trials (i.e. the probe appears behind the emotional expression) from those in incongruent trials (i.e. the probe appears behind the neutral expression)	 Between-subject factor – 2 levels: Treatment group (PF-04995274 or placebo) Within-subject factors 2 levels: Emotion (positive or negative) 2 levels: Probe duration (masked or unmasked)
Emotion Potentiated	Raw amplitude of startle response	Mixed models analyses of variance (ANOVAs).
Startle (EPS)	Raw amplitude of startle response	Between-subject factor – 2 levels: Treatment group (PF- 04995274 or placebo)
EMG data, in response to white noise during positive or negative images	Z-transformed amplitude of startle response	 Within-subject factors – 2 levels: Trial type (positive, negative, neutral)
San Diego Instruments, San Diego, CA, USA	Latency of startle response (ms)	
Oxford Memory Test (OMT)	Proportion of correct probe selections	Mixed models analyses of variance (ANOVAs). Between-subject factor – 2 levels: Treatment group (PF-
Visual short term spatial memory	Absolute error for probe location Reaction Time	 04995274 or placebo) Within-subject factors – 2 levels: Trial condition (1 or 3 memory probes)
Oxford Memory Test application "Short_Fractals1" — modified from "What was where task" (Pertzov et al., 2013) running on iOS 12.3.1		

Self-report or researcher-observed scale – all completed on Qualtrics.XM (https://www.qualtrics.com) except HAM-D			
Eysenck Personality Questionnaire (EPQ)	Total score for each dimension	Report descriptives for each group	
State and Trait Anxiety Inventory –	Total score		
Trait subscale (STAI-T)			
Becks Depression Inventory (BDI)	Total score		
Hamilton Depression Scale (HAM-D)	Total score		
Pen and paper – scored by research team			
Snaith-Hamilton Pleasure Scale (SHAPS)	Total score		
State and Trait Anxiety Inventory –	Total score	Mixed model ANOVAs:	
State subscale (STAI-S)		Between-subject factor – 2 levels: Treatment group (PF-04995274 or	
Positive and Negative Affect Scale	Total score for positive and negative	placebo)	
(PANAS)	subscales	• Within-subject factors – 4 levels: Time condition (Pre-scan, Post-scan,	
Visual Analogue Scales (VAS)	Total score for each VAS (happy, sad, hostile, alert, anxious, calm)	Pre-ETB, Post-ETB)	
Side effects	Presence of side effect Severity of side effect Belief in relationship to drug	Descriptive report of frequency of side-effects for each group at four time points (baseline, pre-dose, post-dose and all other study days combined).	
		A generalised linear model will be used to analyse side effects, with presence of side-effect as outcome and predictors including treatment group (PF-04995274 or placebo) and time point (baseline, pre-dose, post-dose, day 2/3/4/5/6/7/8/9).	
		For side effects significantly associated with group and time-point, we will investigate severity and belief in relationship to study drug.	

When conducting ANOVAs, the Greenhouse-Geisser procedure will be used to correct the degrees of freedom where assumptions of equality of variance are violated. If there is a significant group x condition interaction found in ANOVAs. Post hoc independent samples t tests will be performed to follow up any significant interactions. We will not use the Bonferroni correction for multiple comparisons for post-hoc tests. When conducting t tests, degrees of freedom will be corrected where the assumption of equal variances between groups is violated (i.e. Levene's Test is significant).

Record of version changes and unblinding

Date	Version	Blinding Status	Comments
28 th October 2022	1.0	Team blinded, barring unblinding for study medics (AdeC, PC and BG) where necessary.	Data collection complete. First version of complete stats plans. Uploaded to clinicaltrials.gov and OSF.

Study Team involved in analysis

AdeC - Dr Angharad de Cates - DPhil Student, Study Medic

AG - Dr Amy Gillespie – Post-doctoral Researcher

BG - Dr Beata Godlewska - Study Medic

CH - Professor Catherine Harmer - Principal Investigator

MB - Merethe Blandhol - Research Assistant

PC - Professor Phil Cowen – Principal Investigator, Study Medic

SM - Dr Susannah Murphy - Senior Research Fellow