# Utilize Dummy Datasets in Clinical Statistical Programming <br> Amos Shu, Endo Pharmaceuticals., Chadds Ford, PA 


#### Abstract

Due to collectability or other issues, some clinical trial reporting tables like physical examination, demographic characteristics, and some efficacy tables usually need to be partially made up in some way in the real clinical practice world. Creating dummy datasets is an effective way to improve programming efficiency in these situations. This paper discusses six ways to utilize dummy datasets in clinical statistical programming.


## INTRODUCTION

Typically, tables like physical examination, demographic characteristics, and some efficacy tables need to be partially made up because not all data is collectable in the real clinical practice world. Utilizing dummy datasets is an effective way to improve programming efficiency in these situations. There are six ways to utilize dummy datasets in clinical statistical programming.

All programs presented in this paper were developed in Server SAS ${ }^{\circledR} 9.2$ in the Windows environment.

## 1. USE DUMMY DATASETS TO MAKE UP PHYISICAL EXAMINATION TABLES

Physical examination tables usually contain all medical scenarios such as 'Normal', 'Abnormal', and 'Not Done' for each organ regardless of if the actual data is available. They appear like the following table.

|  | Placebo <br> $(\mathrm{N}=45)$ | Treat1 <br> $(\mathrm{N}=43)$ | Treat2 <br> $(\mathrm{N}=43)$ |
| :---: | :---: | :---: | :---: |
| Heart |  |  |  |
| Normal | 8 | 9 | 11 |
| Abnormal | 0 | 0 | 0 |
| Not Done | 0 | 0 | 0 |
| Lungs/Chest |  |  |  |
| Normal | 7 | 8 | 10 |
| Abnormal | 0 | 1 | 0 |
| Not Done | 1 | 0 | 1 |
|  |  |  |  |
| $\ldots .$. |  |  |  |

In real practice, not all subjects have all findings for all organs. For example, there may be only 'Normal' Heart data, no 'Abnormal' or 'Not Done' data available for Heart. In this case, creating a dummy dataset will be very helpful to generate this type of tables.

```
DATA dummy;
    DO x = 1 to 9;
            DO y = 1 to 3;
            Output;
            END;
        END;
RUN;
```

Then associate x with each organ and associate y with the values - 'Normal', 'Abnormal', and 'Not Done'. Finally merge with raw data, the desired table will be easily generated.

| Body System | Findings |  | x | y | Body System | Findings |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| General Appearance | Normal |  | 1 | 1 | General Appearance | Normal |
| Lungs/Chest | Normal |  | 1 | 2 | General Appearance | Abnormal |
| Lungs/Chest | Abnormal |  | 1 | 3 | General Appearance | Not Done |
| Heart | Normal |  | 2 | 1 | Lungs/Chest | Normal |
| Heart | Abnormal |  | 2 | 2 | Lungs/Chest | Abnormal |
| ... | ... |  | 2 | 3 | Lungs/Chest | Not Done |
|  |  |  | 3 | 1 | Heart | Normal |
|  |  |  | 3 | 2 | Heart | Abnormal |
|  |  |  | 3 | 3 | Heart | Not Done |
|  |  |  | ... | ... | ... |  |

## 2. USE DUMMY DATASETS TO MAKE UP DEMOGRAPHIC CHARACTERISTICS TABLES

Only a few subjects are enrolled at the beginning of any clinical study, so not all races are available. Sometimes even in the end of a study, not all races are represented. We need to display all race information in the summary of a demographic characteristics table as follows:

| Placebo | Treat1 | Treat2 |
| ---: | ---: | ---: |
| $(\mathrm{N}=45)$ | $(\mathrm{N}=43)$ | $(\mathrm{N}=43)$ |

Race

| Caucasian | 28 | 29 | 27 |
| :--- | ---: | ---: | ---: |
| African American | 0 | 3 | 1 |
| Asian | 10 | 11 | 9 |
| American Indian or Alaska native | 0 | 0 | 0 |
| Native Hawaiian or Pacific Islander | 0 | 0 | 0 |
| Other | 1 | 0 | 1 |

To avoid possible error and improve programming efficiency, it would be better to use a dummy dataset to summarize races at the beginning of programming. With time and more subjects enrolled in the study, if new race becomes available, you do not have to modify the SAS program.

## 3. USE DUMMY DATASETS TO OPTIMIZE DATASETS

In efficacy analysis, statisticians often perform various subgroup analyses such as geographic subgroups - US, Europe, and Asia, sex subgroups - male and female, race subgroups - Asian, Non-Asian, smoking status subgroups- never smoker and current smoker, age subgroups - age $<=65$ and age $>65$. To perform those analyses, a macro is usually used to handle the SAS job. However, some subgroups may not have all treatment values available, e.g., subgroup A may contain treatment 1 and 2 only but not treatment 3 and subgroup B may contain treatment 1 and 3 only but not treatment 2 . Without the help of a treatment dummy dataset, the macro would fail.

```
DATA dummytrt ;
    Treat1 = . ; treat2= .; treat3 = .;
RUN;
DATA SubEff_d;
    MERGE dummytrt SubEff ;
RUN;
```

Please note that the treatment dummy dataset must be placed as the first dataset in the MERGE statement to avoid overwriting the treatment values in original dataset. After the merge, every subgroup contains all treatments. The macro can then perform efficacy analyses without any problem.

## 4. USE DUMMY DATASETS TO STACK DATASETS IN MACRO

If you do not know exactly how many sub datasets are available to stack together for analysis, it will be impossible to use a single SET statement to stack all sub datasets in a DO loop macro. A dummy dataset is helpful here.

```
DATA comb ;
    x = 0 ;
RUN;
%DO i= 1 %TO &sqlobs.;
    DATA sub&i. ;
            ... ;
    RUN;
    DATA comb ;
        SET comb sub&i. ;
    RUN ;
%END;
DATA final;
    SET comb;
    IF x = 0 THEN DELETE ;
RUN;
```


## 5. USE DUMMY DATASETS TO IMPUTE LAST OBSERVATION CARRIED FORWARD (LOCF)

There are normally two types of situations for LOCF - In the example below, a dataset may contain no data for a visit number, or both the visit number and data are missing for a subject. A dummy dataset would be useful to perform a LOCF job in such situations.

| SUBJECT | VISIT | AVAL |
| :---: | :---: | :---: |
| 101 | Visit 9 | 10.8 |
| 102 | Visit 9 | 9.5 |
| 102 | Visit 10 | 10.1 |
| 102 | Visit 11 |  |
| $\ldots$ |  |  |
|  |  |  |
|  |  |  |



| SUBJECT | VISIT | AVAL |
| :---: | :---: | :---: |
| 101 | Visit 9 | 10.8 |
| 101 | Visit 10 | 10.8 |
| 101 | Visit 11 | 10.8 |
| 102 | Visit 9 | 9.5 |
| 102 | Visit 10 | 10.1 |
| 102 | Visit 11 | 10.1 |
| $\ldots$ |  |  |

```
DATA dummy ;
            SET lockbase;
            DO AVISITN = 9, 10, 11 ;
                output ;
            END;
RUN;
DATA lockdata2 ;
    MERGE dummy lockdata ;
    BY USUBJID AVISITN ;
```

RUN;

After making up visit values, use RETAIN statements to fill out all missing data by LOCF.

## 6. USE DUMMY DATASETS TO ADD EXTRA LINES IN RTF OUTPUT

Dummy datasets can help improve the appearance of a table. For example, a Visit dummy dataset can help add visit lines (week 1, week2, etc.) and blank lines as in the output table below. Though compute block can add extra lines between visits, dummy dataset is an alternative way to do this.

| visit | stat |
| :--- | :--- |
| Week 1 | N |
| Week 1 | Mean |
| Week 1 | SD |
| Week 1 | Median |
| Week 1 | Minimum |
| Week 1 | Maximum |
| Week 2 | N |
| Week 2 | Mean |
| Week 2 | SD |
| Week 2 | Median |
| Week 2 | Minimum |
| Week 2 | Maximum |
| $\ldots$ |  |
|  |  |
|  |  |
|  |  |
|  |  |


| visit | stat |
| :--- | :--- |
| Week 1 | Week1 |
| Week 1 | N |
| Week 1 | Mean |
| Week 1 | SD |
| Week 1 | Median |
| Week 1 | Minimum |
| Week 1 | Maximum |
| Week 1 |  |
| Week 2 | Week2 |
| Week 2 | N |
| Week 2 | Mean |
| Week 2 | SD |
| Week 2 | Median |
| Week 2 | Minimum |
| Week 2 | Maximum |
| Week 2 |  |
| ... |  |


|  | Placebo <br> $(\mathrm{N}=45)$ | Treat1 <br> $(\mathrm{N}=43)$ | Treat2 <br> $(\mathrm{N}=43)$ |
| :--- | :---: | :---: | :---: |
| Week 1 |  |  |  |
| N | 103 | 103 |  |
| Mean | 36.2 | 37.4 | 101 |
| SD | 10.25 | 10.43 | 36.6 |
| Median | 36.0 | 37.0 | 9.77 |
| Minimum | 2 | 11 | 36.0 |
| Maximum | 59 | 64 | 60 |
|  |  |  |  |
| Week 2 | 103 | 102 | 101 |
| N | 35.9 | 37.1 | 36.3 |
| Mean | 10.15 | 10.03 | 10.07 |
| SD | 36.0 | 37.0 | 36.0 |
| Median | 3 | 10 | 6 |
| Minimum | 58 | 64 | 59 |

## CONCLUSION

Creating a dummy dataset is easy and simple. A simple dummy dataset is extremely helpful to generate physical examination, demographic characteristics, and some efficacy tables. Understanding when and how to create a dummy dataset in your programming process is important in clinical statistical programming work.

## CONTACT INFORMATION

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