# Package 'CARM'

July 21, 2025

Title Covariate-Adjusted Adaptive Randomization via Mahalanobis-Distance Version 1.1.0 Author Haoyu Yang [aut], Fanglu Chen [aut, cre], Yichen Qin [aut], Yang Li [aut] Maintainer Fanglu Chen <chenfanglu1031@qq.com> Description In randomized controlled trial (RCT), balancing covariate is often one of the most important concern. CARM package provides functions to balance the covariates and generate allocation sequence by covariate-adjusted Adaptive Randomization via Mahalanobisdistance (ARM) for RCT. About what ARM is and how it works please see Y. Qin, Y. Li, W. Ma, H. Yang, and F. Hu (2022). tive randomization via Mahalanobis distance" Statistica Sinica. <doi:10.5705/ss.202020.0440>. In addition, the package is also suitable for the randomization process of multi-arm trials. For details, please see Yang H, Qin Y, Wang F, et al. (2023). ``Balancing covariates in multi-arm trials via adaptive randomization" Computational Statistics & Data Analysis.<doi:10.1016/j.csda.2022.107642>. License GPL (>= 2) **Encoding** UTF-8 RoxygenNote 7.2.3

**Depends** R(>= 3.6.0), stats

Imports arrangements,dplyr,MASS

NeedsCompilation no

**Repository** CRAN

Date/Publication 2023-06-07 16:40:14 UTC

# Contents

CARM-pack	kage															 •											2
ARM																 •											2
ARMM .			•	 •	•	•	•	•	•	•		•		•	•	 •	•	•	•	•	•	•	•	•			4

# Index

CARM-package	CARM:Covariate-adjusted	Adaptive	Randomization	via
	Mahalanobis-distance			

# Description

The CARM package provides function of implement of randomization:

#### **ARM** functions

please ?ARM and ?ARMM to view function usage

ARM

Adaptive Randomization via Mahalanobis Distance

#### Description

Allocates patients to one of two treatments using Adaptive Randomization via Mahalanobis Distance proposed by Yichen Qin, Yang Li, Wei Ma, Haoyu Yang, and Feifang Hu.(2022)

#### Usage

```
ARM(covariate, assignment, q = 0.75)
```

#### Arguments

covariate	a data frame. A row of the dataframe corresponds to the covariate profile of a patient.
assignment	a vector. If partial patients had been allocated , please input their allocation. IF all the patients are not be allocated, please input 'assignment = $NA$ ' directly.
q	the biased coin probability. $q$ should be larger than $1/2$ and less than 1, default = 0.75

#### **Details**

Suppose that n patients are to be assigned to two treatment groups. Consider p continuous covariates for each patient.  $T_i$  is the assignment of the *i*th patient. The proposed procedure to assign units to treatment groups, namely adaptive randomization via Mahalanobis distance (ARM), is outlined below.

(1) Arrange all n units randomly into a sequence  $x_1, ..., x_n$ .

(2) Assign the first two units with  $T_1 = 1$  and  $T_2 = 2$ .

(3) Suppose that 2i units have been assigned to treatment groups, for the 2i + 1-th and 2i + 2-th units:

6

ARM

(3a) If the 2i + 1-th unit is assigned to treatment 1 and the 2i + 2-th unit to treatment 2, then calculate the potential Mahalanobis distance, between the updated treatment groups. with 2i + 2 units,  $M_1(2i + 2)$ .

(3b) Similarly, if the 2i + 1-th unit is assigned to treatment 2 and the 2i + 2-th unit to treatment 1, then calculate the other potential Mahalanobis distance,  $M_2(2i + 2)$ .

(4) Assign the 2i + 1-th unit to treatment groups according to the following probabilities:

if 
$$M_1(2i+2) < M_2(2i+2), P(T_{2i+1}=1) = q;$$

if 
$$M_1(2i+2) > M_2(2i+2), P(T_{2i+1}=1) = 1 - q;$$

if 
$$M_1(2i+2) = M_2(2i+2)$$
,  $P(T_{2i+1} = 1) = 0.5$ .

(5) Repeat the last two steps until all units are assigned. If n is odd, assign the last unit to two treatments with equal probabilities.

Mahalanobis distance M(n) between the sample means across different treatment groups is:

$$M(n) = np(1-p)(\hat{x}_1 - \hat{x}_2)^T cov(x)^{-1}(\hat{x}_1 - \hat{x}_2)$$

See the reference for more details.

# Value

An object of class "ARM" is a list containing the following components:

assignment	Allocation of patients.
sample_size	The number of patients in treatment 1 and treatment 2 respectively.
Mahalanobis_Di	stance
	Mahalanobis distance between treatment groups 1 and 2.

#### References

Qin, Y., Y. Li, W. Ma, H. Yang, and F. Hu (2022). Adaptive randomization via mahalanobis distance. Statistica Sinica.DOI:<10.5705/ss.202020.0440>.

#### Examples

```
library(MASS)
#simulate covariates of patients
p <- 6; n <- 30
sigma <- diag(p); mean <- c(rep(0,p))
data <- mvrnorm(n, mean, sigma)
covariate <- as.data.frame(data)
#IF all the patients are not be allocated
ARM(covariate = covariate, assignment = NA, q=0.75)
#IF you had allocated partial patients
ARM(covariate = covariate, assignment = c(1,2),q=0.75)</pre>
```

ARMM

#### Description

Randomize patients into treatment groups for multi-arm trials using ARMM proposed by Haoyu Yang, Yichen Qin, Yang Li, Fan Wang, and Feifang Hu.(2022)

#### Usage

```
ARMM(covariate, assignment, K, q = 0.75, method)
```

#### Arguments

covariate	a data frame. A row of the dataframe corresponds to the covariate profile of a patient.
assignment	a vector. If partial patients had been allocated , please input their allocation. IF all the patients are not be allocated, please input 'assignment = NA' directly.
К	an integer; number of arms of the trial.
q	the biased coin probability. $q$ should be larger than 1/2 and less than 1, default = $0.75$
method	Methods for calculating Mahalanobis distance, input one of these texts: 'mean', 'max' or 'median'.

#### Details

Suppose *n* units (participants) are to be assigned to *K* treatment groups. For each unit i, i = 1, ..., n and treatment j, j = 1, ..., K, define the assignment matrix  $[T_{ij}]^{n*K}$ , where  $T_{ij} = 1$  indicates unit *i* receives treatment *j*. Consider *p* continuous covariates, let  $x_i = (x_{i1}, ..., x_{in})^T$ .

The proposed method, namely the adaptive randomization via Mahalanobis distance for multi-arm design (ARMM), is outlined below. The implement of ARMM is similar to ARM.

First assume that n units are in a sequence and then assign the first K units to K treatment groups randomly as the initialization. Then, the following units are assigned in blocks of K sequentially and adaptively until all the units are assigned. For K units are assigned to K groups, there are in total K! possible allocations. Calculate K! potential overall covariate imbalance measurement according to pairwise Mahalanobis distance under the K! possible allocations. Choose the allocation which corresponds to the smallest Mahalanobis distance with a probability of q across all potential allocations. Repeat the process until all units are assigned.

For any pair of treatments s and t among the K treatment groups, calculate the Mahalanobis distance by:

$$M_{s,t}(n) = 2n/K/K(\hat{x}_1 - \hat{x}_2)^T cov(x)^{-1}(\hat{x}_1 - \hat{x}_2)$$

# ARMM

In total, there are  $C_K^2$  pairs of Mahalanobis distances among K treatment groups. Finally, calculate the mean, the median or the maximum to represent the total imbalance. See the reference for more details.

# Value

An object of class "ARMM" is a list containing the following components:

assignmentAllocation of patients.sample\_sizeThe number of patients from treatment 1 to treatment K respectively.Mahalanobis\_DistanceMahalanobis distance among treatment groups .

#### References

Yang H, Qin Y, Wang F, et al. Balancing covariates in multi-arm trials via adaptive randomization. Computational Statistics & Data Analysis, 2023, 179: 107642. https://doi.org/10.1016/j.csda.2022.107642

# Examples

```
library(MASS)
#simulate covariates of patients
p <- 6; n <- 30
sigma <- diag(p); mean <- c(rep(0,p))
data <- mvrnorm(n, mean, sigma)
covariate <- as.data.frame(data)
#IF all the patients are not be allocated
ARMM(covariate = covariate, assignment = NA, K = 3, q = 0.75, method = 'mean')
#IF you had allocated partial patients
ARMM(covariate = covariate, assignment = c(1,2), K=4, q=0.75, method = 'max')</pre>
```

# Index

ARM, 2 ARMM, 4

CARM-package, 2