

### S3 Appendix General flowchart for all designs.

All of the designs can be illustrated in a single flowchart (Fig A). In the two-arm single-stage designs  $K = 1$  and  $J = 1$ . In the multi-arm designs in our simulations  $K = 5$  and  $J = 4$ . For the frequentist designs the efficacy and futility measures are always equal to the standardized test statistic, i.e.  $e_{kj} = f_{kj} = Z_{kj}$  and the efficacy and futility thresholds are the upper and lower stopping boundaries with  $a_K = b_K$  in order to force a decision at the final analysis.

For the Bayesian designs the efficacy measure is the probability  $e_{kj} = P(p_j < p_0 | \text{Data}_k)$  given the data  $\text{Data}_k$  at the  $k$ -th analysis. The futility measure is  $f_{kj} = P(p_j < p_0 + 0.1 | \text{Data}_k)$ . The efficacy and futility thresholds are  $a_k = 0.1$  and  $b_k = 0.99$  ( $k = 1, \dots, K$ ).

For the designs with complete randomization the allocation probabilities are  $q_j = 1/(\tilde{K} + 1)$  for all  $j = 1, \dots, J$ , where  $\tilde{K}$  is the number of remaining treatment arms at stage  $k$ . For the response-adaptive randomization designs the allocation probabilities are initially  $q_j = 1/(K + 1)$  and are then updated at the interim analysis according to Eq (2).

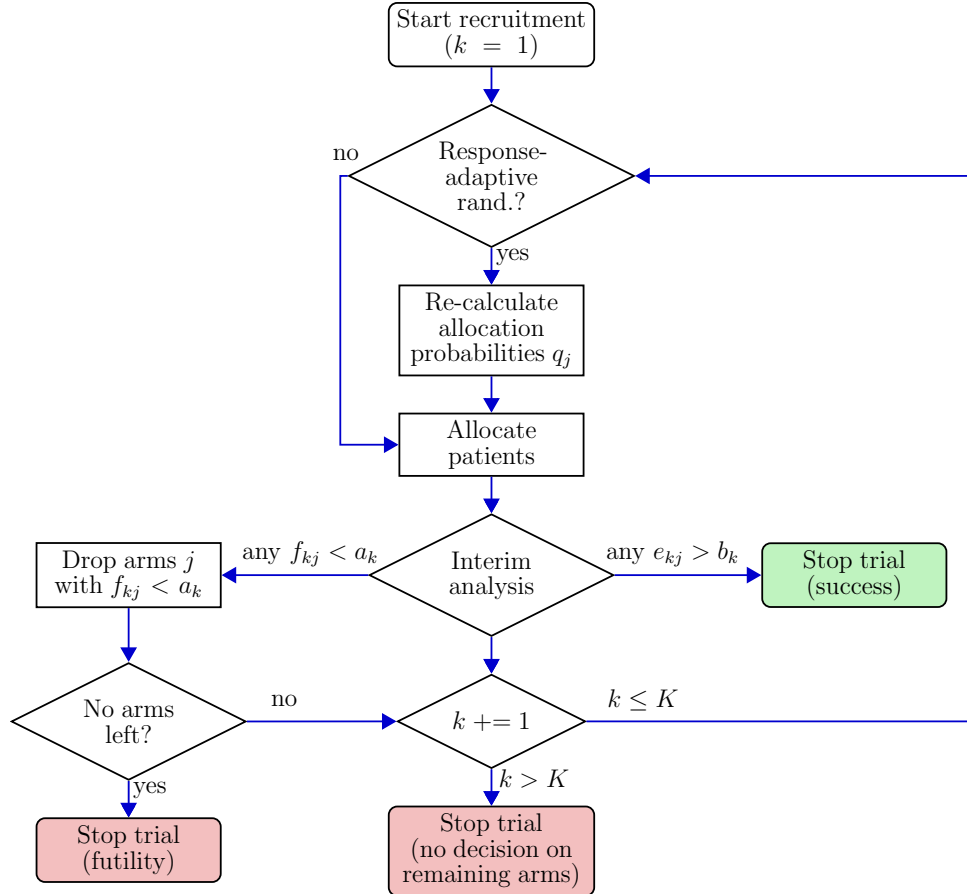


Figure A: **General flowchart for all designs.** At each of the at most  $K$  (interim) analyses the design-specific efficacy measures  $e_{kj}$  and futility measures  $f_{kj}$  ( $k = 1, \dots, K; j = 1, \dots, J$ ) for all remaining treatment arms are compared to efficacy thresholds  $b_k$  and futility thresholds  $a_k$ . Patients are allocated according to allocation probabilities  $q_{kj}$ .