

ClinicalTrials.gov Protocol and Results Registration System (PRS) Receipt  
Release Date: 08/29/2014

ClinicalTrials.gov ID: NCT00312377

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## Study Identification

Unique Protocol ID: D4200C00032

Brief Title: ZACTIMA (an Anti-EGFR / Anti-VEGF Agent) Combined With Docetaxel Compared to Docetaxel in Non-small Cell Lung Cancer ( ZODIAC )

Official Title: A Phase III, Randomized, Double-Blinded, Multi-Center, Study to Assess the Efficacy of Docetaxel (TAXOTERE™) in Combination With ZD6474 (ZACTIMA™) Versus Docetaxel (TAXOTERE™) With Placebo in Subjects With Locally Advanced or Metastatic NSCLC

Secondary IDs: 6474IL/0032

## Study Status

Record Verification: August 2014

Overall Status: Completed

Study Start: May 2006

Primary Completion: August 2008 [Actual]

Study Completion: March 2014 [Actual]

## Sponsor/Collaborators

Sponsor: AstraZeneca

Responsible Party: Sponsor

Collaborators:

## Oversight

FDA Regulated?: Yes

Applicable Trial?: Section 801 Clinical Trial? Yes  
Delayed Posting? No

IND/IDE Protocol?: Yes

IND/IDE Information: Grantor: CDER  
IND/IDE Number: 60,042  
Serial Number: 329  
Has Expanded Access? No

Review Board: Approval Status:  
Board Name:  
Board Affiliation:  
Phone:  
Email:

Data Monitoring?:

Plan to Share Data?:

Oversight Authorities: United States: Food and Drug Administration

## Study Description

**Brief Summary:** This large phase III clinical study is studying the effect of vandetanib (ZACTIMA) in treating non-small cell lung cancer (NSCLC). Vandetanib is a new type of agent that targets the blood supply to a cancer tumour (through it's anti-vascular endothelial growth factor receptor (VEGFR) properties) and the tumour cells themselves (through it's anti-endothelial growth factor receptor (EGFR) actions). This study will look at the effects of vandetanib in lung cancer patients who have had their cancer re-appear after treatment with standard chemotherapy.

This clinical study will test if the vandetanib anti-VEGF and anti-EGFR characteristics can deliver longer improved progression free survival and improved overall survival than docetaxel (Taxotere) alone.

All patients participating this clinical study will receive treatment with docetaxel, a commonly used treatment for recurrent non-small cell lung cancer.

In addition, some patients will also receive vandetanib (ZACTIMA), an anti-EGFR / anti-VEGF agent.

Recent clinical research shows that vascular endothelial growth factor receptor (VEGFR) inhibition, when used with standard chemotherapy, can lead to increased survival in advanced non-small cell lung cancer (NSCLC) patients.

Other research shows that epidermal growth factor receptor (EGFR) inhibitors, like erlotinib (Tarceva) can also increase overall non-small cell lung cancer survival by killing tumour cells and stopping them from dividing.

Detailed Description:

## Conditions

Conditions: Non-small Cell Lung Cancer  
Lung Cancer

Keywords: Non-small cell lung cancer  
NSCLC

## Study Design

Study Type: Interventional

Primary Purpose: Treatment

Study Phase: Phase 3

Intervention Model: Parallel Assignment

Number of Arms: 2

Masking: Double Blind (Subject, Caregiver, Investigator, Outcomes Assessor)

Allocation: Randomized

Endpoint Classification: Safety/Efficacy Study

Enrollment: 1690 [Actual]

## Arms and Interventions

Arms	Assigned Interventions
Active Comparator: 1 Docetaxel monotherapy	Drug: Docetaxel infusion  Other Names: <ul style="list-style-type: none"><li>• TAXOTERE™</li></ul>
Experimental: 2 Vandetanib + Docetaxel	Drug: Docetaxel infusion  Other Names: <ul style="list-style-type: none"><li>• TAXOTERE™</li></ul> Drug: Vandetanib oral  Other Names: <ul style="list-style-type: none"><li>• ZACTIMA™</li></ul>

Arms	Assigned Interventions
	• ZD6474

## Outcome Measures

[See Results Section.]

## Eligibility

Minimum Age: 18 Years

Maximum Age: 150 Years

Gender: Both

Accepts Healthy Volunteers?: No

Criteria: Inclusion Criteria:

Lung cancer patients who answer true to the following statements are eligible to join this clinical study.

- I have a confirmed diagnosis of locally advanced or metastatic non small cell lung cancer (Stage IIIb - IV)
- I have had 1st line anti-cancer therapy. Previous treatment with Avastin (bevacizumab) in first line NSCLC is allowed.

Exclusion Criteria:

Lung cancer patients who answer true to the following are NOT eligible to join this clinical study.

- I do not have non small cell lung cancer (NSCLC)
- I have received treatment with docetaxel (Taxotere). Prior treatment with paclitaxel is acceptable.
- I have received 2nd line anti-cancer therapy (For example, patients with previous 2nd line non small cell lung cancer (NSCLC) treatment with Tarceva (erlotinib, OSI-744), Alimta (pemetrexed) are not eligible)
- I have been treated with VEGFR-tyrosine kinase inhibitors (TKIs) (sunitinib, sorafenib, other VEGF TKIs). Previous treatment with Avastin (bevacizumab) in 1st line non small cell lung cancer is permitted.
- I have a history of uncontrolled irregular heartbeat
- I have a history of high blood pressure which has not been controlled with medication If you are unsure of the meaning of the inclusion and exclusion criteria above, please contact the call center number for help.

## Contacts/Locations

Study Officials: AstraZeneca Zactima Medical Science Director, MD  
Study Director  
AstraZeneca

Locations: Argentina  
Research Site

Rosario, Argentina

Research Site

Mendoza, Argentina

Research Site

Rosario, Argentina

Research Site

Bahía Blanca, Argentina

Research Site

Capital Federal, Argentina

Research Site

Ciudad de Buenos Aires, Argentina

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Ciudad de Buenos Aires, Argentina

Austria

Research Site

Linz, Austria

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Grimmenstein, Austria

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Wels, Austria

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Graz, Austria

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Innsbruck, Austria

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Wien, Austria

Belgium

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Edegem, Belgium

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Liege, Belgium

Research Site  
Brussels (Woluwe-St-Lambert), Belgium

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Brussels (Jette), Belgium

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Genk, Belgium

Brazil  
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Goiânia, Brazil

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Fortaleza, Brazil

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Porto Alegre, Brazil

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Porto Alegre, Brazil

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Rio de Janeiro, Brazil

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Salvador, Brazil

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Sao Paulo, Brazil

Canada, Quebec  
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Laval, Quebec, Canada

Canada, Alberta  
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Calgary, Alberta, Canada

Canada, Ontario

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Toronto, Ontario, Canada

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Kitchener, Ontario, Canada

Canada, Quebec  
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Quebec, Quebec, Canada

Canada, British Columbia  
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Surrey, British Columbia, Canada

Canada, Nova Scotia  
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Halifax, Nova Scotia, Canada

Canada, New Brunswick  
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Moncton, New Brunswick, Canada

Canada, Ontario  
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Toronto, Ontario, Canada

Canada, Alberta  
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Edmonton, Alberta, Canada

Canada, Ontario  
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London, Ontario, Canada

Research Site  
Newmarket, Ontario, Canada

Canada, British Columbia  
Research Site  
Vancouver, British Columbia, Canada

Canada, Ontario  
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Toronto, Ontario, Canada

Canada, Quebec

Research Site  
Greenfield Park, Quebec, Canada

China  
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Badalona(Barcelona), Spain

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Ankara, Turkey

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United States, Alaska

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Anchorage, Alaska, United States

United States, New York

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New York, New York, United States

United States, North Carolina

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United States, Utah

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United States, Illinois  
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United States, Colorado  
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United States, Oregon  
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Salem, Virginia, United States

United States, Ohio  
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Kettering, Ohio, United States

United States, Washington  
Research Site  
Vancouver, Washington, United States

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Research Site  
Hanoi city, Vietnam

Research Site  
Ho Chi Minh city, Vietnam

## References

### Citations:

Links: URL: <http://www.astrazeneca.com/node/emailtriage.aspx>  
Description AstraZeneca Clinical Trial Information - Outside US

URL: <http://www.astrazeneca-us.com/cancerstudylocator>  
Description Cancer Study Locator (US and Canada Only)

URL: [http://filehosting.pharmacm.com/DownloadService.ashx?client=CTR\\_MED\\_6111&studyid=340&fil...](http://filehosting.pharmacm.com/DownloadService.ashx?client=CTR_MED_6111&studyid=340&fil...)  
Description CSR-D4200C00032.pdf

Study Data/Documents:

## Study Results

### ► Participant Flow

Recruitment Details	First patient enrolled 08 May 2006, last patient enrolled 14 March 2008, cut off date 22 August 2008
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#### Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg oral tablet taken once daily in combination with docetaxel 75 mg/m <sup>2</sup> IVb infusion every 21 days up to a maximum of 6 cycles
Placebo Plus Docetaxel	Placebo tablet taken once daily plus docetaxel 75 mg/m <sup>2</sup> IVb infusion every 21 days up to a maximum of 6 cycles

#### Overall Study

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Started	694 <sup>[1]</sup>	697 <sup>[1]</sup>
Completed	50 <sup>[2]</sup>	29 <sup>[2]</sup>
Not Completed	644	668
Death	403	418
Withdrawal by Subject	23	30
Lost to Follow-up	9	12
Non-compliance	0	2
Randomised but never received treatment	6	6
Discontinue treatment survival follow up	202	200
Site ended participation in study	1	0

[1] randomised patients

[2] ongoing study treatment at data cut-off

## ► Baseline Characteristics

### Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

### Baseline Measures

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel	Total
Number of Participants	694	697	1391
Age, Continuous [units: years] Mean (Full Range)	58.5 (28 to 82)	58.4 (20 to 82)	58.45 (20 to 82)
Gender, Male/Female [units: Participants]			
Female	497	473	970
Male	197	224	421

## ► Outcome Measures

### 1. Primary Outcome Measure:

Measure Title	Progression-Free Survival (PFS) in the Overall Population
Measure Description	Median time (in weeks) from randomisation until objective disease progression or death (by any cause in the absence of objective progression) provided death is within 3 months from the last evaluable RECIST assessment. Progression was derived according to RECIST 1.0 and is defined as an increase of at least 20% in the total tumour size of measurable lesions over the nadir measurement, unequivocal progression in the non-target lesions or the appearance of one or more new lesions.
Time Frame	RECIST tumour assessments carried out every 6 weeks from randomisation until the date of first documented objective disease progression or date of death from any cause, whichever came first assessed up to 24 months
Safety Issue?	No

Analysis Population Description  
[Not Specified]

## Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

## Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Progression-Free Survival (PFS) in the Overall Population [units: Weeks] Median (95% Confidence Interval)	17.3 (15 to 18)	14 (12.7 to 16.9)

## 2. Primary Outcome Measure:

Measure Title	Progression-Free Survival (PFS) in the Female Population
Measure Description	Median time (in weeks) from randomisation until objective disease progression or death (by any cause in the absence of objective progression) provided death is within 3 months from the last evaluable RECIST assessment. Progression was derived according to RECIST 1.0 and is defined as an increase of at least 20% in the total tumour size of measurable lesions over the nadir measurement, unequivocal progression in the non-target lesions or the appearance of one or more new lesions.
Time Frame	RECIST tumour assessments carried out every 6 weeks from randomisation until the date of first documented objective disease progression or date of death from any cause, whichever came first assessed up to 24 months
Safety Issue?	No

## Analysis Population Description [Not Specified]

## Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

### Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	197	224
Progression-Free Survival (PFS) in the Female Population [units: Weeks] Median (95% Confidence Interval)	20.1 (17.9 to 23.9)	18.3 (15 to 22.1)

### 3. Secondary Outcome Measure:

Measure Title	Overall Survival (OS) in the Overall Population
Measure Description	Overall survival is defined as the time from date of randomization until death. Any patient not known to have died at the time of analysis will be censored based on the last recorded date on which the patient was known to be alive (ie their status must be known at the censored date and should not be lost to follow up or unknown).
Time Frame	Time to death in months
Safety Issue?	No

### Analysis Population Description [Not Specified]

### Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

### Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Overall Survival (OS) in the Overall Population [units: Months] Median (95% Confidence Interval)	10.6 (9.6 to 11.5)	10 (9.2 to 10.8)

#### 4. Secondary Outcome Measure:

Measure Title	Overall Survival (OS) in the Female Population
Measure Description	Overall survival is defined as the time from date of randomization until death. Any patient not known to have died at the time of analysis will be censored based on the last recorded date on which the patient was known to be alive (ie their status must be known at the censored date and should not be lost to follow up or unknown).
Time Frame	Time to death in months
Safety Issue?	No

Analysis Population Description  
[Not Specified]

#### Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

#### Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	197	224
Overall Survival (OS) in the Female Population [units: Months] Median (95% Confidence Interval)	12.7 (10.5 to 17.1)	14.2 (10.8 to 16.2)

#### 5. Secondary Outcome Measure:

Measure Title	Objective Response Rate (ORR)
Measure Description	The ORR is the number of patients that are responders ie those patients with a confirmed best objective response of complete response (CR) or partial response (PR) as determined according to RECIST 1.0. CR is defined as the disappearance of all target lesions with no evidence of tumour elsewhere and PR is defined as at least a 30% reduction in the total tumour size of measurable lesions with no new lesions and no progression in the non-target lesions.
Time Frame	Each patient was assessed for objective response from the sequence of RECIST scan data up to data cut off. RECIST tumour assessments carried out every 6 weeks from randomisation until objective progression
Safety Issue?	No

Analysis Population Description  
[Not Specified]



## Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

## Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Objective Response Rate (ORR) [units: Participants]	120	71

## 6. Secondary Outcome Measure:

Measure Title	Disease Control Rate (DCR)
Measure Description	Disease control rate is defined as the number of patients who achieved disease control at least 6 weeks following randomisation. Disease control at 6 weeks is defined as a best objective response of complete response (CR), partial response (PR) or stable disease (SD) $\geq 6$ weeks as determined according to RECIST 1.0. CR is defined as the disappearance of all target lesions with no evidence of tumour elsewhere, PR is defined as at least a 30% reduction in the total tumour size of measurable lesions with no new lesions and no progression in the non-target lesions and SD $\geq 6$ is assigned to patients who have not responded and have no evidence of progression at least 6 weeks after randomisation.
Time Frame	RECIST tumour assessments carried out every 6 weeks from randomisation until objective progression
Safety Issue?	No

## Analysis Population Description

[Not Specified]

## Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

#### Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Disease Control Rate (DCR) [units: Participants]	413	380

#### 7. Secondary Outcome Measure:

Measure Title	Duration of Response (DoR)
Measure Description	Response is defined as a confirmed best objective response of CR or PR. Duration of response is defined as time from the date of first documented response until date of documented progression or death in the absence of disease progression (provided death is within 3 months of last RECIST assessment)
Time Frame	RECIST tumour assessments carried out every 6 weeks from randomisation until objective progression
Safety Issue?	No

#### Analysis Population Description [Not Specified]

#### Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

#### Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Duration of Response (DoR) [units: Weeks] Median (Full Range)	29.9 (7.14 to 72.29)	19.7 (9.71 to 41.86)

#### 8. Secondary Outcome Measure:

Measure Title	Time to Deterioration of Disease-related Symptoms (TDS) by Functional Assessment of Cancer Therapy - Lung (FACT-L) Lung Cancer Subscale (LCS).
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Measure Description	<p>The lung cancer subscale (LCS) consists of 7 items of the FACT-L (3 items relating to breathing/dyspnea, and 1 item each relating to cough, weight loss, appetite, and cognition). The LCS total score is the sum of the scores from the 7 items.</p> <p>Time to deterioration is defined as the interval from the date of randomization to the first assessment of worsened without an improvement in the next 21 days.</p> <p>A patient will be defined as having a deterioration in symptoms if they have a single visit assessment of 'worsened' with no visit assessment of 'improved' within the next 21 days.</p>
Time Frame	FACT-L questionnaires are to be administered every 3 weeks after randomisation
Safety Issue?	No

Analysis Population Description  
[Not Specified]

Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Time to Deterioration of Disease-related Symptoms (TDS) by Functional Assessment of Cancer Therapy - Lung (FACT-L) Lung Cancer Subscale (LCS). [units: Weeks] Median (Inter-Quartile Range)	15 (6.1 to 82.3)	11.9 (6.0 to 28.1)

9. Secondary Outcome Measure:

Measure Title	Time to Deterioration of Disease-related Symptoms (TDS) by FACT-L Pulmonary Symptom Index (PSI)
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Measure Description	<p>The pulmonary symptom index (PSI) consists of 4 items of the LCS relating to pulmonary symptoms (i.e. 3 items relating to breathing/dyspnea, and 1 item relating to cough). The PSI score is the sum of the scores from the 4 items.</p> <p>Time to deterioration is defined as the interval from the date of randomization to the first assessment of worsened without an improvement in the next 21 days.</p> <p>A patient will be defined as having a deterioration in symptoms if they have a single visit assessment of 'worsened' with no visit assessment of 'improved' within the next 21 days.</p>
Time Frame	FACT-L questionnaires are to be administered every 3 weeks after randomisation
Safety Issue?	No

#### Analysis Population Description [Not Specified]

#### Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

#### Measured Values

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
Number of Participants Analyzed	694	697
Time to Deterioration of Disease-related Symptoms (TDS) by FACT-L Pulmonary Symptom Index (PSI) [units: Weeks] Median (Inter-Quartile Range)	12.3 (5.9 to 36.7)	11.9 (6 to 28.4)



#### Reported Adverse Events

Time Frame	[Not specified]
Additional Description	[Not specified]

# Reporting Groups

	Description
Vandetanib 100 mg Plus Docetaxel	Vandetanib 100 mg plus docetaxel
Placebo Plus Docetaxel	Placebo plus docetaxel

## Serious Adverse Events

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Total	263/694 (37.9%)	232/697 (33.29%)
Blood and lymphatic system disorders		
Anaemia <sup>A</sup> †	4/694 (0.58%)	6/697 (0.86%)
Bone Marrow Failure <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Febrile Bone Marrow Aplasia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Febrile Neutropenia <sup>A</sup> †	46/694 (6.63%)	38/697 (5.45%)
Iron Deficiency Anaemia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Leukocytosis <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Leukopenia <sup>A</sup> †	3/694 (0.43%)	2/697 (0.29%)
Neutropenia <sup>A</sup> †	16/694 (2.31%)	18/697 (2.58%)
Thrombocytopenia <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Cardiac disorders		
Acute Myocardial Infarction <sup>A</sup> †	2/694 (0.29%)	2/697 (0.29%)
Angina Unstable <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Arrhythmia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Atrial Fibrillation <sup>A</sup> †	3/694 (0.43%)	10/697 (1.43%)
Atrial Flutter <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)
Atrioventricular Block Complete <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Atrioventricular Block Second Degree <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Cardiac Arrest <sup>A</sup> †	1/694 (0.14%)	3/697 (0.43%)
Cardiac Failure <sup>A</sup> †	0/694 (0%)	3/697 (0.43%)
Cardiac Tamponade <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Cardio-Respiratory Arrest <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Extrasystoles <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Myocardial Infarction <sup>A</sup> †	0/694 (0%)	4/697 (0.57%)
Pericardial Effusion <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Pericarditis <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Supraventricular Tachycardia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Tachyarrhythmia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Tachycardia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Ventricular Extrasystoles <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Congenital, familial and genetic disorders		
Hereditary Angioedema <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Ear and labyrinth disorders		
Deafness Unilateral <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Vertigo <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Eye disorders		
Ocular Surface Disease <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Retinal Artery Occlusion <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Gastrointestinal disorders		
Abdominal Pain <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Abdominal Pain Upper <sup>A</sup> †	4/694 (0.58%)	1/697 (0.14%)
Appendicitis Perforated <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Ascites <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Constipation <sup>A</sup> †	0/694 (0%)	3/697 (0.43%)
Diarrhoea <sup>A</sup> †	14/694 (2.02%)	11/697 (1.58%)
Dyspepsia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Dysphagia <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Enteritis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Enterocolitis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Gastric Haemorrhage <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Gastric Ulcer <sup>A</sup> †	0/694 (0%)	3/697 (0.43%)
Gastritis <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Gastrointestinal Haemorrhage <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Gastrointestinal Inflammation <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Haematochezia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Ileus Paralytic <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Inguinal Hernia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Intestinal Obstruction <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Lower Gastrointestinal Haemorrhage <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Nausea <sup>A</sup> †	5/694 (0.72%)	4/697 (0.57%)
Oesophageal Fistula <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Oesophageal Stenosis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Proctitis Haemorrhagic <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Stomatitis <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Upper Gastrointestinal Haemorrhage <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Vomiting <sup>A</sup> †	7/694 (1.01%)	8/697 (1.15%)
General disorders		
Asthenia <sup>A</sup> †	2/694 (0.29%)	5/697 (0.72%)
Chest Pain <sup>A</sup> †	3/694 (0.43%)	0/697 (0%)
Chills <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Death <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Fatigue <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
General Physical Health Deterioration <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Malaise <sup>A</sup> †	3/694 (0.43%)	0/697 (0%)
Mucosal Inflammation <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Multi-Organ Failure <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Pain <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Performance Status Decreased <sup>A</sup> †	3/694 (0.43%)	0/697 (0%)
Pyrexia <sup>A</sup> †	13/694 (1.87%)	12/697 (1.72%)
Sudden Death <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Systemic Inflammatory Response Syndrome <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Immune system disorders		
Anaphylactic Shock <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Drug Hypersensitivity <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)



	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Infections and infestations		
Appendicitis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Bacteraemia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Bacterial Infection <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Bacterial Sepsis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Bronchitis <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Bronchopneumonia <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Bronchopulmonary Aspergillosis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Catheter Related Infection <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Cellulitis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Central Line Infection <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Diverticulitis <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Empyema <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Epiglottitis <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Gastroenteritis <sup>A</sup> †	4/694 (0.58%)	3/697 (0.43%)
Gastrointestinal Infection <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Infection <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Infective Exacerbation Of Chronic Obstructive Airways Disease <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Infective Myositis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Lobar Pneumonia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Lower Respiratory Tract Infection <sup>A</sup> †	3/694 (0.43%)	1/697 (0.14%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Lung Abscess <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Lung Infection <sup>A</sup> †	4/694 (0.58%)	2/697 (0.29%)
Neutropenic Infection <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Oesophageal Candidiasis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Perianal Abscess <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pneumocystis Jiroveci Pneumonia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Pneumonia <sup>A</sup> †	33/694 (4.76%)	26/697 (3.73%)
Pneumonia Streptococcal <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pyothorax <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Rash Pustular <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Rectal Abscess <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Respiratory Tract Infection <sup>A</sup> †	5/694 (0.72%)	6/697 (0.86%)
Respiratory Tract Infection Bacterial <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Sepsis <sup>A</sup> †	5/694 (0.72%)	5/697 (0.72%)
Septic Shock <sup>A</sup> †	3/694 (0.43%)	1/697 (0.14%)
Skin Bacterial Infection <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Staphylococcal Infection <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Tuberculosis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Upper Respiratory Tract Infection <sup>A</sup> †	0/694 (0%)	5/697 (0.72%)
Urinary Tract Infection <sup>A</sup> †	4/694 (0.58%)	3/697 (0.43%)
Urosepsis <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Injury, poisoning and procedural complications		

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Alanine Aminotransferase Increased <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Aspartate Aminotransferase Increased <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Blood Alkaline Phosphatase Increased <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Blood Pressure Orthostatic Decreased <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Brain Contusion <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Electrocardiogram T Wave Abnormal <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Facial Bones Fracture <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Femur Fracture <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)
Foot Fracture <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Hip Fracture <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Humerus Fracture <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Lower Limb Fracture <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Multiple Fractures <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Neutrophil Count Decreased <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Radiation Pneumonitis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Skin Laceration <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Skull Fracture <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Weight Decreased <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
White Blood Cell Count Decreased <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Metabolism and nutrition disorders		
Anorexia <sup>A</sup> †	3/694 (0.43%)	2/697 (0.29%)
Dehydration <sup>A</sup> †	1/694 (0.14%)	3/697 (0.43%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Diabetes Mellitus <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Failure To Thrive <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Hypercalcaemia <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Hyperglycaemia <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Hyperkalaemia <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Hypoglycaemia <sup>A</sup> †	2/694 (0.29%)	2/697 (0.29%)
Hypokalaemia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Hyponatraemia <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Type 2 Diabetes Mellitus <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Musculoskeletal and connective tissue disorders		
Arthralgia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Back Pain <sup>A</sup> †	2/694 (0.29%)	4/697 (0.57%)
Bone Pain <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Flank Pain <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Muscular Weakness <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Musculoskeletal Chest Pain <sup>A</sup> †	3/694 (0.43%)	4/697 (0.57%)
Musculoskeletal Pain <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Myalgia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pain In Extremity <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)		
Metastatic Pain <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Myelodysplastic Syndrome <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Tumour Pain <sup>A</sup> †	2/694 (0.29%)	2/697 (0.29%)
Nervous system disorders		
Altered State Of Consciousness <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Ataxia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Brachial Plexopathy <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Cauda Equina Syndrome <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Cerebral Haemorrhage <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Cerebral Infarction <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Cerebral Ischaemia <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Cerebrovascular Accident <sup>A</sup> †	1/694 (0.14%)	1/697 (0.14%)
Coma <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Coma Hepatic <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Convulsion <sup>A</sup> †	4/694 (0.58%)	1/697 (0.14%)
Dizziness <sup>A</sup> †	3/694 (0.43%)	4/697 (0.57%)
Dyskinesia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Headache <sup>A</sup> †	1/694 (0.14%)	3/697 (0.43%)
Hemiparesis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Ischaemic Stroke <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Loss Of Consciousness <sup>A</sup> †	3/694 (0.43%)	1/697 (0.14%)
Paraplegia <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Peripheral Sensory Neuropathy <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Polyneuropathy <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Pyramidal Tract Syndrome <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Somnolence <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Spinal Cord Compression <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Subarachnoid Haemorrhage <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Syncope <sup>A</sup> †	2/694 (0.29%)	2/697 (0.29%)
Psychiatric disorders		
Anxiety <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Confusional State <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Delirium <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Mental Status Changes <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)
Psychotic Behaviour <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Suicidal Ideation <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Renal and urinary disorders		
Dysuria <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Haematuria <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Nephrolithiasis <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Renal Failure <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)
Renal Failure Acute <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Respiratory, thoracic and mediastinal disorders		
Acute Respiratory Distress Syndrome <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Aspiration <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Asthma <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Bronchospasm <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Chronic Obstructive Pulmonary Disease <sup>A</sup> †	0/694 (0%)	3/697 (0.43%)
Cough <sup>A</sup> †	3/694 (0.43%)	0/697 (0%)
Cryptogenic Organising Pneumonia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Diaphragmatic Rupture <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Dyspnoea <sup>A</sup> †	22/694 (3.17%)	21/697 (3.01%)
Dyspnoea Exertional <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Epistaxis <sup>A</sup> †	0/694 (0%)	2/697 (0.29%)
Haemoptysis <sup>A</sup> †	5/694 (0.72%)	6/697 (0.86%)
Hydropneumothorax <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Hypoxia <sup>A</sup> †	2/694 (0.29%)	1/697 (0.14%)
Interstitial Lung Disease <sup>A</sup> †	12/694 (1.73%)	6/697 (0.86%)
Laryngeal Inflammation <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Lung Infiltration <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pleural Effusion <sup>A</sup> †	4/694 (0.58%)	3/697 (0.43%)
Pleurisy <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pneumonia Aspiration <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Pneumonitis <sup>A</sup> †	4/694 (0.58%)	5/697 (0.72%)
Pneumothorax <sup>A</sup> †	1/694 (0.14%)	5/697 (0.72%)
Productive Cough <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pulmonary Alveolar Haemorrhage <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Pulmonary Embolism <sup>A</sup> †	2/694 (0.29%)	8/697 (1.15%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Pulmonary Haemorrhage <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Pulmonary Oedema <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Respiratory Depression <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Respiratory Distress <sup>A</sup> †	1/694 (0.14%)	2/697 (0.29%)
Respiratory Failure <sup>A</sup> †	5/694 (0.72%)	6/697 (0.86%)
Skin and subcutaneous tissue disorders		
Dermatitis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Dermatitis Exfoliative <sup>A</sup> †	3/694 (0.43%)	0/697 (0%)
Drug Eruption <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Erythema <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Erythema Multiforme <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Exfoliative Rash <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Palmar-Plantar Erythrodysaesthesia Syndrome <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Photosensitivity Reaction <sup>A</sup> †	5/694 (0.72%)	0/697 (0%)
Pruritus <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Rash <sup>A</sup> †	15/694 (2.16%)	1/697 (0.14%)
Rash Erythematous <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Rash Maculo-Papular <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Skin Toxicity <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Stevens-Johnson Syndrome <sup>A</sup> †	3/694 (0.43%)	0/697 (0%)
Telangiectasia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)



	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Toxic Epidermal Necrolysis <sup>A</sup> †	4/694 (0.58%)	0/697 (0%)
Toxic Skin Eruption <sup>A</sup> †	2/694 (0.29%)	0/697 (0%)
Vascular disorders		
Deep Vein Thrombosis <sup>A</sup> †	1/694 (0.14%)	6/697 (0.86%)
Hypotension <sup>A</sup> †	5/694 (0.72%)	1/697 (0.14%)
Peripheral Arterial Occlusive Disease <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Peripheral Ischaemia <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Shock <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Subclavian Vein Thrombosis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Superior Vena Caval Stenosis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)
Vasculitis <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Vena Cava Thrombosis <sup>A</sup> †	0/694 (0%)	1/697 (0.14%)
Venous Thrombosis <sup>A</sup> †	1/694 (0.14%)	0/697 (0%)

† Indicates events were collected by systematic assessment.

A Term from vocabulary, MedDRA 11.0

#### Other Adverse Events

Frequency Threshold Above Which Other Adverse Events are Reported: 5%

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Total	637/694 (91.79%)	630/697 (90.39%)
Blood and lymphatic system disorders		
Anaemia <sup>A</sup> †	68/694 (9.8%)	98/697 (14.06%)
Leukopenia <sup>A</sup> †	125/694 (18.01%)	106/697 (15.21%)
Neutropenia <sup>A</sup> †	212/694 (30.55%)	174/697 (24.96%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Gastrointestinal disorders		
Abdominal Pain <sup>A</sup> †	41/694 (5.91%)	50/697 (7.17%)
Abdominal Pain Upper <sup>A</sup> †	30/694 (4.32%)	36/697 (5.16%)
Constipation <sup>A</sup> †	119/694 (17.15%)	140/697 (20.09%)
Diarrhoea <sup>A</sup> †	284/694 (40.92%)	218/697 (31.28%)
Dyspepsia <sup>A</sup> †	37/694 (5.33%)	25/697 (3.59%)
Nausea <sup>A</sup> †	158/694 (22.77%)	221/697 (31.71%)
Stomatitis <sup>A</sup> †	80/694 (11.53%)	80/697 (11.48%)
Vomiting <sup>A</sup> †	105/694 (15.13%)	141/697 (20.23%)
General disorders		
Asthenia <sup>A</sup> †	105/694 (15.13%)	90/697 (12.91%)
Fatigue <sup>A</sup> †	208/694 (29.97%)	214/697 (30.7%)
Mucosal Inflammation <sup>A</sup> †	49/694 (7.06%)	38/697 (5.45%)
Oedema Peripheral <sup>A</sup> †	49/694 (7.06%)	57/697 (8.18%)
Pyrexia <sup>A</sup> †	127/694 (18.3%)	110/697 (15.78%)
Infections and infestations		
Nasopharyngitis <sup>A</sup> †	41/694 (5.91%)	37/697 (5.31%)
Weight Decreased <sup>A</sup> †	54/694 (7.78%)	41/697 (5.88%)
Metabolism and nutrition disorders		
Anorexia <sup>A</sup> †	199/694 (28.67%)	204/697 (29.27%)
Musculoskeletal and connective tissue disorders		
Arthralgia <sup>A</sup> †	61/694 (8.79%)	52/697 (7.46%)
Back Pain <sup>A</sup> †	51/694 (7.35%)	62/697 (8.9%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Musculoskeletal Pain <sup>A</sup> †	35/694 (5.04%)	30/697 (4.3%)
Myalgia <sup>A</sup> †	90/694 (12.97%)	78/697 (11.19%)
Pain In Extremity <sup>A</sup> †	39/694 (5.62%)	31/697 (4.45%)
Nervous system disorders		
Dizziness <sup>A</sup> †	43/694 (6.2%)	58/697 (8.32%)
Dysgeusia <sup>A</sup> †	40/694 (5.76%)	49/697 (7.03%)
Headache <sup>A</sup> †	58/694 (8.36%)	62/697 (8.9%)
Paraesthesia <sup>A</sup> †	42/694 (6.05%)	42/697 (6.03%)
Peripheral Sensory Neuropathy <sup>A</sup> †	42/694 (6.05%)	48/697 (6.89%)
Psychiatric disorders		
Insomnia <sup>A</sup> †	95/694 (13.69%)	73/697 (10.47%)
Respiratory, thoracic and mediastinal disorders		
Cough <sup>A</sup> †	130/694 (18.73%)	133/697 (19.08%)
Dysphonia <sup>A</sup> †	41/694 (5.91%)	20/697 (2.87%)
Dyspnoea <sup>A</sup> †	102/694 (14.7%)	122/697 (17.5%)
Epistaxis <sup>A</sup> †	50/694 (7.2%)	27/697 (3.87%)
Haemoptysis <sup>A</sup> †	37/694 (5.33%)	45/697 (6.46%)
Hiccups <sup>A</sup> †	30/694 (4.32%)	41/697 (5.88%)
Skin and subcutaneous tissue disorders		
Alopecia <sup>A</sup> †	230/694 (33.14%)	240/697 (34.43%)
Dry Skin <sup>A</sup> †	45/694 (6.48%)	30/697 (4.3%)
Nail Disorder <sup>A</sup> †	52/694 (7.49%)	46/697 (6.6%)
Photosensitivity Reaction <sup>A</sup> †	42/694 (6.05%)	1/697 (0.14%)

	Vandetanib 100 mg Plus Docetaxel	Placebo Plus Docetaxel
	Affected/At Risk (%)	Affected/At Risk (%)
Pruritus <sup>A</sup> †	65/694 (9.37%)	42/697 (6.03%)
Rash <sup>A</sup> †	282/694 (40.63%)	166/697 (23.82%)
Vascular disorders		
Hypertension <sup>A</sup> †	41/694 (5.91%)	13/697 (1.87%)

† Indicates events were collected by systematic assessment.

A Term from vocabulary, MedDRA 11.0

## Limitations and Caveats

[Not specified]

## More Information

### Certain Agreements:

Principal Investigators are NOT employed by the organization sponsoring the study.

There IS an agreement between the Principal Investigator and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

If a Study Site, or an investigator, requests permission to publish data from this study, any such publication (including oral presentations) is to be agreed with AstraZeneca prior to publication.

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