



## Clinical trial results:

### An Open-Label Extension of BPS-MR-PAH-201 in Pulmonary Arterial Hypertension (PAH) Patients

#### Summary

EudraCT number	2008-006833-29
Trial protocol	IE BE
Global end of trial date	26 November 2013

#### Results information

Result version number	v1 (current)
This version publication date	14 June 2020
First version publication date	14 June 2020
Summary attachment (see zip file)	BPS-MR-PAH-202 Synopsis (bps-mr-pah-202-synopsis.pdf)

#### Trial information

##### Trial identification

Sponsor protocol code	BPS-MR-PAH-202
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT00792571
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	Lung Biotechnology PBC
Sponsor organisation address	1040 Spring Street, Silver Spring, United States, 20910
Public contact	Lung Biotechnology PBC Study Director, Lung Biotechnology PBC, 1 3016089292,
Scientific contact	Lung Biotechnology PBC Study Director, Lung Biotechnology PBC, 1 3016089292,

Notes:

#### Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

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**Results analysis stage**

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Analysis stage	Final
Date of interim/final analysis	26 November 2013
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	26 November 2013
Was the trial ended prematurely?	Yes

Notes:

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**General information about the trial**

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Main objective of the trial:

This is an open-label extension study for patients who participated in the BPS-MR-PAH-201 study.

Protection of trial subjects:

This study was conducted in accordance with Good Clinical Practices, the ethical principles that have their origin in the Declaration of Helsinki, and Title 21 of the Code of Federal Regulations Sections 50, 56, and 312.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	11 March 2009
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

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**Population of trial subjects**

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**Subjects enrolled per country**

Country: Number of subjects enrolled	Belgium: 4
Country: Number of subjects enrolled	Ireland: 2
Country: Number of subjects enrolled	United States: 12
Worldwide total number of subjects	18
EEA total number of subjects	6

Notes:

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**Subjects enrolled per age group**

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In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	16
From 65 to 84 years	2
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details:

Participants with pulmonary artery hypertension (PAH) who had completed lead in study BPS-MR-PAH-201 were enrolled in this study

### Pre-assignment

Screening details:

A Protocol Amendment was to include an optional arm investigating Beraprost Sodium Modified Release Tablets administered four times daily (QID), however, no participants were enrolled into this arm.

### Period 1

Period 1 title	Overall Study (overall period)
Is this the baseline period?	Yes
Allocation method	Non-randomised - controlled
Blinding used	Not blinded

### Arms

<b>Arm title</b>	Beraprost Sodium
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Arm description:

Beraprost Sodium Modified Release Tablets, 60mcg, b.i.d (twice a day dosing)

Arm type	Experimental
Investigational medicinal product name	beraprost sodium modified release (BPS-MR) tablets 60mcg
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Modified-release tablet
Routes of administration	Oral use

Dosage and administration details:

60 mcg twice a day

Number of subjects in period 1	Beraprost Sodium
Started	18
Completed	8
Not completed	10
Adverse event, serious fatal	1
Consent withdrawn by subject	1
Adverse event, non-fatal	4
Not Specified	4

## Baseline characteristics

### Reporting groups

Reporting group title	Beraprost Sodium
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Reporting group description:

Beraprost Sodium Modified Release Tablets, 60mcg, b.i.d (twice a day dosing)

Reporting group values	Beraprost Sodium	Total	
Number of subjects	18	18	
Age categorical			
Units: Subjects			
In utero	0	0	
Preterm newborn infants (gestational age < 37 wks)	0	0	
Newborns (0-27 days)	0	0	
Infants and toddlers (28 days-23 months)	0	0	
Children (2-11 years)	0	0	
Adolescents (12-17 years)	0	0	
Adults (18-64 years)	16	16	
From 65-84 years	2	2	
85 years and over	0	0	
Age Continuous			
Units: years			
arithmetic mean	47.8		
standard deviation	± 13.16	-	
Sex: Female, Male			
Units:			
Female	14	14	
Male	4	4	
Race (NIH/OMB)			
Units: Subjects			
American Indian or Alaska Native	0	0	
Asian	3	3	
Native Hawaiian or Other Pacific Islander	0	0	
Black or African American	0	0	
White	15	15	
More than one race	0	0	
Unknown or Not Reported	0	0	
Ethnicity (NIH/OMB)			
Units: Subjects			
Hispanic or Latino	3	3	
Not Hispanic or Latino	15	15	
Unknown or Not Reported	0	0	
Six-Minute Walk Distance			
A 6 minute walk test (6MWT) was conducted that measured how far a participant could walk in 6 continuous minutes. Participants were instructed to walk as far as possible in 6 minutes, and were allowed to slow down and take breaks as needed due to symptoms.			
Units: meters			

arithmetic mean	419.5		
standard deviation	± 73.1	-	
Borg Dyspnea Score			
The Modified Borg scale was an 11 point scale with a score range of 0-10, where 0 indicated no breathlessness at all and 10 indicated maximum breathlessness.			
Units: score on a scale			
arithmetic mean	3.4		
standard deviation	± 2.44	-	

## End points

### End points reporting groups

Reporting group title	Beraprost Sodium
Reporting group description:	
Beraprost Sodium Modified Release Tablets, 60mcg, b.i.d (twice a day dosing)	

### Primary: Number of Participants Reporting at Least One Treatment-Emergent Adverse Event (TEAE)

End point title	Number of Participants Reporting at Least One Treatment-Emergent Adverse Event (TEAE) <sup>[1]</sup>
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End point description:

A treatment-emergent adverse event (TEAEs) is defined as an event not present prior to the initiation of the treatments or any event already present that worsens in either intensity or frequency following exposure to the treatments. AEs occurring more than 3 days after the last day study drug is taken in the study will not be included in the statistical analyses or summaries (except for subjects with adverse events leading to study drug withdrawn). Only treatment-emergent adverse events occurring during the treatment period of the BPS-MR-PAH-202 study will be summarized. Any adverse event starting prior to the first dose of study drug will be excluded from the summary analyses and only presented in the data listings. A summary of serious and all other non-serious adverse events regardless of causality is located in the Reported Adverse Events module.

End point type	Primary
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End point timeframe:

Up to 56 months

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: The analysis of the primary endpoint was descriptive i.e. no statistical hypothesis test was performed.

End point values	Beraprost Sodium			
Subject group type	Reporting group			
Number of subjects analysed	18			
Units: Participants	18			

### Statistical analyses

No statistical analyses for this end point

### Primary: Number of Treatment Emergent Adverse Events Reported During The Study

End point title	Number of Treatment Emergent Adverse Events Reported During The Study <sup>[2]</sup>
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End point description:

A treatment-emergent adverse event (TEAE) is defined as an event not present prior to the initiation of the treatment or any event already present that worsens in either intensity or frequency following exposure to the treatment. AEs occurring more than 3 days after the last day study drug was taken in the study was not included in the statistical analyses or summaries (except for participants with adverse events leading to study drug withdrawn). Only TEAEs that occurred during the treatment period of the BPS-MR-PAH-202 study were summarized. Any adverse event starting prior to the first dose of study drug was excluded from the summary analyses and only presented in the data listings. All efficacy results are descriptive; no statistical analysis was conducted. A summary of serious and all other non-

serious adverse events regardless of causality is located in the Reported Adverse Events module.

End point type	Primary
End point timeframe:	
Up to 56 months	

Notes:

[2] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: The analysis of the primary endpoint was descriptive i.e. no statistical hypothesis test was performed.

<b>End point values</b>	Beraprost Sodium			
Subject group type	Reporting group			
Number of subjects analysed	18			
Units: TEAEs	156			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Mean Change From Baseline in Six Minutes Walk Distance (6MWD) at End of Study

End point title	Mean Change From Baseline in Six Minutes Walk Distance (6MWD) at End of Study
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End point description:

The area used for the Six Minute Walk Test (6MWT) was pre-measured at a minimum of 30 meters in length and at least 2 to 3 meters in width. There were no turns or significant curves to the 6-minute walk area. The length was marked with gradations to ensure the accurate measurement of the distance walked. The area was well ventilated with air temperature controlled at 20 to 23°C. Intermittent rest periods were allowed if the participant could no longer continue. If the participant needed to rest briefly, he/she could stand or sit and then begin again when rested but the clock continued to run. At the end of 6 minutes, the tester called "stop" while simultaneously stopping the watch and then measured the distance walked. For the purposes of the 6MWT if a participant was assessed at Baseline using oxygen therapy, then all future 6MWT were conducted in the same manner. All efficacy results are descriptive; no statistical analysis was conducted.

End point type	Secondary
End point timeframe:	
Baseline and 56 months	

<b>End point values</b>	Beraprost Sodium			
Subject group type	Reporting group			
Number of subjects analysed	11			
Units: meters				
arithmetic mean (standard deviation)	10.55 (± 79.17)			

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Borg Dyspnea Score at End of Study

End point title	Change From Baseline in Borg Dyspnea Score at End of Study
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End point description:

The modified 0–10 category-ratio Borg scale consists of an 11-point scale rating the maximum level of dyspnea experienced during the 6MWT. Scores range from 0 (for the best condition) and 10 (for the worst condition) with nonlinear spacing of verbal descriptors of severity corresponding to specific numbers. The participant chose the number or the verbal descriptor to reflect presumed ratio properties of sensation or symptom intensity. Baseline was defined as the last non-missing evaluation preceding the first dose of study drug in study BPS-MR-PAH-201. Only participants with both a measurement at baseline and at the given visit are presented. All efficacy results are descriptive; no statistical analysis was conducted.

End point type	Secondary
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End point timeframe:

Baseline and 56 months

End point values	Beraprost Sodium			
Subject group type	Reporting group			
Number of subjects analysed	11			
Units: scores on a scale				
arithmetic mean (standard deviation)	-0.09 (± 2.84)			

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Participants That Experienced Clinical Worsening During the Study

End point title	Number of Participants That Experienced Clinical Worsening During the Study
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End point description:

Number of Participants that experienced Clinical Worsening in the opinion of the Investigator. Clinical Worsening was defined as any of these events following the Baseline visit: Death, Transplantation or atrial septostomy, Clinical deterioration as defined by: Hospitalization as a result of PAH symptoms or Initiation of any new PAH specific therapy (e.g. ERA, PDE-5 inhibitor, prostanoid). All efficacy results are descriptive; no statistical analysis was conducted.

End point type	Secondary
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End point timeframe:

Up to 56 months



<b>End point values</b>	Beraprost Sodium			
Subject group type	Reporting group			
Number of subjects analysed	18			
Units: Participants				
Death	1			
New PAH Therapies	6			
Transplantation or atrial septostomy	0			
Hospitalization	0			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Participants With a Change in WHO Functional Class

End point title	Number of Participants With a Change in WHO Functional Class
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End point description:

Change from Baseline in participant clinical status was recorded according to the World Health Organization (WHO) Functional Class. A change from lower to higher functional class (i.e. 'III to IV' or 'II to III') was considered as a deterioration. A change from higher to lower functional class (i.e. 'III to II' or 'II to I') was considered as an improvement. All efficacy results are descriptive; no statistical analysis was conducted.

End point type	Secondary
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End point timeframe:

Baseline and 56 months

<b>End point values</b>	Beraprost Sodium			
Subject group type	Reporting group			
Number of subjects analysed	18			
Units: Participants				
Improved: Change from Class III to Class II	1			
No Change in Class	7			
Deteriorated: Change from Class II to Class III	4			
Not Reported	6			

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

From baseline to 30 days after study treatment discontinuation, up to 56 months.

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	16.0
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### Reporting groups

Reporting group title	Beraprost Sodium
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Reporting group description:

Beraprost Sodium Modified Release Tablets, 60mcg, b.i.d (twice a day dosing)

Serious adverse events	Beraprost Sodium		
Total subjects affected by serious adverse events			
subjects affected / exposed	7 / 18 (38.89%)		
number of deaths (all causes)	1		
number of deaths resulting from adverse events			
Injury, poisoning and procedural complications			
Post procedural haemorrhage			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cardiac disorders			
Right ventricular failure			
subjects affected / exposed	2 / 18 (11.11%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Atrial fibrillation			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Atrial flutter			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Surgical and medical procedures			
Atrial septal defect repair			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Nervous system disorders			
Presyncope			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Syncope			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			
Worsening Pulmonary arterial hypertension			
subjects affected / exposed	2 / 18 (11.11%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 1		
Haemoptysis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
Lower respiratory tract infection			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastroenteritis viral			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Bronchitis			

subjects affected / exposed	1 / 18 (5.56%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Frequency threshold for reporting non-serious adverse events: 5 %

<b>Non-serious adverse events</b>	Beraprost Sodium		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	18 / 18 (100.00%)		
Vascular disorders			
Flushing			
subjects affected / exposed	6 / 18 (33.33%)		
occurrences (all)	7		
Peripheral Coldness			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Vasculitis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Surgical and medical procedures			
Tooth Extraction			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Chest Pain			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Fatigue			
subjects affected / exposed	2 / 18 (11.11%)		
occurrences (all)	2		
Generalised oedema			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		

Pain subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Pyrexia subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Immune system disorders Seasonal Allergy subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Respiratory, thoracic and mediastinal disorders Cough subjects affected / exposed occurrences (all)	3 / 18 (16.67%) 4		
Worsening pulmonary arterial hypertension subjects affected / exposed occurrences (all)	2 / 18 (11.11%) 3		
Dyspnoea subjects affected / exposed occurrences (all)	5 / 18 (27.78%) 5		
Nasal congestion subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Sleep apnoea syndrome subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Psychiatric disorders Anxiety subjects affected / exposed occurrences (all)	2 / 18 (11.11%) 2		
Depression subjects affected / exposed occurrences (all)	2 / 18 (11.11%) 2		
Insomnia subjects affected / exposed occurrences (all)	3 / 18 (16.67%) 3		

Panic Attack subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Investigations Liver Function Test Abnormal subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Platelet Count Decreased subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Urine analysis abnormal subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Weight increased subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Cardiac disorders Arrhythmia subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 2		
Atrial Fibrillation subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Palpitations subjects affected / exposed occurrences (all)	4 / 18 (22.22%) 5		
Right ventricular heave subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1		
Nervous system disorders Dizziness subjects affected / exposed occurrences (all)	5 / 18 (27.78%) 5		
Headache subjects affected / exposed occurrences (all)	6 / 18 (33.33%) 6		
Hypoaesthesia			

<p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Presyncope</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Restless Leg Syndrome</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Syncope</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p>	<p>1 / 18 (5.56%)</p> <p>1</p> <p>1 / 18 (5.56%)</p> <p>1</p> <p>1 / 18 (5.56%)</p> <p>1</p> <p>2 / 18 (11.11%)</p> <p>2</p>		
<p>Blood and lymphatic system disorders</p> <p>Anaemia</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p>	<p>3 / 18 (16.67%)</p> <p>3</p>		
<p>Ear and labyrinth disorders</p> <p>Tinnitus</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Vertigo</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p>	<p>1 / 18 (5.56%)</p> <p>1</p> <p>1 / 18 (5.56%)</p> <p>1</p>		
<p>Eye disorders</p> <p>Astigmatism</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Cataract</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Eyelid Cyst</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Myopia</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Retinal Detachment</p>	<p>1 / 18 (5.56%)</p> <p>1</p> <p>1 / 18 (5.56%)</p> <p>1</p> <p>1 / 18 (5.56%)</p> <p>1</p> <p>1 / 18 (5.56%)</p> <p>1</p>		

subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Retinal Tear			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Gastrointestinal disorders			
Abdominal Discomfort			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Abdominal Pain			
subjects affected / exposed	2 / 18 (11.11%)		
occurrences (all)	2		
Abdominal Pain Upper			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Defaecation urgency			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Diarrhoea			
subjects affected / exposed	3 / 18 (16.67%)		
occurrences (all)	4		
Gastritis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Irritable Bowel Syndrome			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Nausea			
subjects affected / exposed	5 / 18 (27.78%)		
occurrences (all)	5		
Rectal Haemorrhage			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Vomiting			
subjects affected / exposed	3 / 18 (16.67%)		
occurrences (all)	4		



Hepatobiliary disorders Biliary Colic subjects affected / exposed occurrences (all)  Cholecystitis subjects affected / exposed occurrences (all)  Hepatitis acute subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1  1 / 18 (5.56%) 1  1 / 18 (5.56%) 1		
Skin and subcutaneous tissue disorders Rash subjects affected / exposed occurrences (all)  Urticaria subjects affected / exposed occurrences (all)  Skin Irritation subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1  1 / 18 (5.56%) 1  1 / 18 (5.56%) 1		
Renal and urinary disorders Haematuria subjects affected / exposed occurrences (all)  Pollakiuria subjects affected / exposed occurrences (all)	1 / 18 (5.56%) 1  1 / 18 (5.56%) 1		
Musculoskeletal and connective tissue disorders Arthralgia subjects affected / exposed occurrences (all)  Muscle spasms subjects affected / exposed occurrences (all)  Muscle Tightness	1 / 18 (5.56%) 1  2 / 18 (11.11%) 2		

subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Muscle twitching			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Musculoskeletal Chest Pain			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Osteoporosis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Pain in extremity			
subjects affected / exposed	3 / 18 (16.67%)		
occurrences (all)	3		
Pain in Jaw			
subjects affected / exposed	3 / 18 (16.67%)		
occurrences (all)	3		
Infections and infestations			
Bronchiolitis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Bronchitis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Cystitis			
subjects affected / exposed	3 / 18 (16.67%)		
occurrences (all)	3		
Fungal skin infection			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Herpes zoster			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Nasopharyngitis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	2		

Pharyngitis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Sinusitis			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Upper respiratory tract infection			
subjects affected / exposed	6 / 18 (33.33%)		
occurrences (all)	8		
Urinary Tract Infections			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Metabolism and nutrition disorders			
Fluid overload			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Hyperuricaemia			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Hypokalemia			
subjects affected / exposed	2 / 18 (11.11%)		
occurrences (all)	2		
Hypomagnesaemia			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		
Lactose Intolerance			
subjects affected / exposed	1 / 18 (5.56%)		
occurrences (all)	1		

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
29 June 2012	Revised to include an optional substudy investigating the safety, tolerability, and pharmacokinetics of BPS-MR tablets administered four times daily (QID). No subjects were enrolled into the optional substudy before the Sponsor discontinued the study.

Notes:

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### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

None reported