



Clinical trial results:

A phase III randomised, double-blind, active-controlled parallel group efficacy and safety study of BI 10773 compared to glimepiride administered orally during 104 weeks with a 104 week extension period in patients with type 2 diabetes mellitus and insufficient glycaemic control despite metformin treatment

Summary

| | |
|--------------------------|-------------------------------|
| EudraCT number | 2009-016244-39 |
| Trial protocol | NL NO FI SE IT ES GB PT CZ AT |
| Global end of trial date | 28 August 2015 |

Results information

| | |
|--------------------------------|-------------------|
| Result version number | v1 (current) |
| This version publication date | 02 September 2016 |
| First version publication date | 02 September 2016 |

Trial information

Trial identification

| | |
|-----------------------|---------|
| Sponsor protocol code | 1245.28 |
|-----------------------|---------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT01167881 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|--|
| Sponsor organisation name | Boehringer Ingelheim |
| Sponsor organisation address | Binger Strasse 173, Ingelheim am Rhein, Germany, 55216 |
| Public contact | QRPE Processes and Systems Coordination Clinical Trial Information Disclosure, Boehringer Ingelheim, +1 8002430127, clintriage.rdg@boehringer-ingelheim.com |
| Scientific contact | QRPE Processes and Systems Coordination Clinical Trial Information Disclosure, Boehringer Ingelheim, +1 8002430127, clintriage.rdg@boehringer-ingelheim.com |

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:

Results analysis stage

| | |
|--|-----------------|
| Analysis stage | Final |
| Date of interim/final analysis | 15 October 2015 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 05 August 2013 |
| Global end of trial reached? | Yes |
| Global end of trial date | 28 August 2015 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

The objective of this trial was to investigate the efficacy, safety, and tolerability of empagliflozin (25 mg once daily) compared with glimepiride (1 to 4 mg once daily) as add-on therapy to immediate release metformin given for 104 weeks, with a 104-week extension period in patients with type 2 diabetes mellitus with insufficient glycaemic control. The 4-year analysis was planned to assess the long-term (208-week) efficacy and safety of empagliflozin vs. glimepiride. All analyses of data at 208 weeks were exploratory. The analysis done at 4 years included analysis of primary or secondary endpoints (1-2 years) which were exploratory, therefore we are not disclosing any of the endpoints from this report (4 years). The primary and secondary endpoints at 1 and 2 years is being disclosed in this final disclosure with updated disposition information, baseline characteristics and AEs.

Protection of trial subjects:

Only subjects that met all the study inclusion and none of the exclusion criteria were to be entered in the study. All subjects were free to withdraw from the clinical trial at any time for any reason given. Close monitoring of all subjects was adhered to throughout the trial conduct. Rescue medication was allowed for all patients as required. Separate informed consent forms were required for participation in the 104-week extension.

Background therapy:

Patients were asked to continue their background therapy of immediate release metformin in an unchanged dose and dosing regimen throughout the trial.

Evidence for comparator:

The active comparator in this trial was glimepiride capsule 1-4 mg administered orally once daily.

| | |
|---|------------------|
| Actual start date of recruitment | 26 August 2010 |
| Long term follow-up planned | Yes |
| Long term follow-up rationale | Efficacy, Safety |
| Long term follow-up duration | 24 Months |
| Independent data monitoring committee (IDMC) involvement? | Yes |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|---------------------|
| Country: Number of subjects enrolled | Argentina: 178 |
| Country: Number of subjects enrolled | Austria: 53 |
| Country: Number of subjects enrolled | Canada: 221 |
| Country: Number of subjects enrolled | Colombia: 57 |
| Country: Number of subjects enrolled | Czech Republic: 105 |
| Country: Number of subjects enrolled | Finland: 164 |
| Country: Number of subjects enrolled | Hong Kong: 38 |
| Country: Number of subjects enrolled | India: 241 |
| Country: Number of subjects enrolled | Italy: 69 |

| | |
|--------------------------------------|---------------------|
| Country: Number of subjects enrolled | Malaysia: 116 |
| Country: Number of subjects enrolled | Mexico: 217 |
| Country: Number of subjects enrolled | Netherlands: 56 |
| Country: Number of subjects enrolled | Norway: 63 |
| Country: Number of subjects enrolled | Philippines: 152 |
| Country: Number of subjects enrolled | Portugal: 25 |
| Country: Number of subjects enrolled | South Africa: 181 |
| Country: Number of subjects enrolled | Spain: 114 |
| Country: Number of subjects enrolled | Sweden: 121 |
| Country: Number of subjects enrolled | Switzerland: 7 |
| Country: Number of subjects enrolled | Taiwan: 55 |
| Country: Number of subjects enrolled | Thailand: 74 |
| Country: Number of subjects enrolled | United Kingdom: 128 |
| Country: Number of subjects enrolled | United States: 202 |
| Worldwide total number of subjects | 2637 |
| EEA total number of subjects | 898 |

Notes:

| Subjects enrolled per age group | |
|---|------|
| 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) | 2023 |
| From 65 to 84 years | 614 |
| 85 years and over | 0 |

Subject disposition

Recruitment

Recruitment details:

An optional 2-year extension was implemented in this trial through a protocol amendment, which brought the total length of treatment to 4 years. However, some sites did not participate in the 2-year extension, and so considered patients to have completed treatment after 2 years.

Pre-assignment

Screening details:

All subjects were screened for eligibility to participate in the trial. Subjects attended specialist sites which would then ensure that they (the subjects) met all strictly implemented inclusion/exclusion criteria. Subjects were not to be randomised to trial treatment if any one of the specific entry criteria were violated.

Period 1

| | |
|------------------------------|-----------------------------------|
| Period 1 title | Treatment period (overall period) |
| Is this the baseline period? | Yes |
| Allocation method | Randomised - controlled |
| Blinding used | Double blind |
| Roles blinded | Subject, Investigator |

Blinding implementation details:

The placebo run-in period of this trial was performed open-label, i.e. both the investigator and the patient knew that the patient received placebo during the run-in period. The randomised period of this trial was performed double-blind. Two unblinded analyses (at 1 and 2 years) were done prior to the end of the 4-year treatment period.

Arms

| | |
|------------------------------|---------------------|
| Are arms mutually exclusive? | Yes |
| Arm title | Empagliflozin 25 mg |

Arm description:

Patients received one empagliflozin 25 mg tablet and one placebo glimepiride capsule orally once daily. Empagliflozin: 25 mg once daily. Placebo: Placebo matching glimepiride 1-4 mg. Out of 769, four patients randomised to the empagliflozin 25 mg arm were not treated. Consequently, number of subject that started is 769 but only 765 reported to ensure consistent reporting with baseline characteristics that includes only treated patients.

| | |
|--|---------------------|
| Arm type | Experimental |
| Investigational medicinal product name | Empagliflozin 25 mg |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

Empagliflozin tablets 25 mg once daily was administered orally.

| | |
|--|----------|
| Investigational medicinal product name | Placebo |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Placebo matching glimepiride 1-4 mg capsule was administered once daily orally.

| | |
|------------------|--------------------|
| Arm title | Glimepiride 1-4 mg |
|------------------|--------------------|

Arm description:

Patients received one glimepiride capsule and one placebo empagliflozin tablet orally once daily. Glimepiride: 1-4 mg once daily. Placebo: Placebo matching empagliflozin.

| | |
|--|-------------------|
| Arm type | Active comparator |
| Investigational medicinal product name | Glimepiride |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Glimepiride capsule 1-4 mg was administered orally once daily.

| | |
|--|----------|
| Investigational medicinal product name | Placebo |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

Placebo matching empagliflozin tablet was administered orally once daily.

| Number of subjects in period 1^[1] | Empagliflozin 25 mg | Glimepiride 1-4 mg |
|---|---------------------|--------------------|
| Started | 765 | 780 |
| Completed after 2 years treatment | 95 ^[2] | 127 ^[3] |
| Completed after 4 years treatment | 515 ^[4] | 462 ^[5] |
| Completed | 610 | 589 |
| Not completed | 155 | 191 |
| Adverse event, serious fatal | 8 | 7 |
| Other reason not defined | 31 | 55 |
| Non compliant with protocol | 9 | 18 |
| Patient refusal to cont., not due to AE | 45 | 40 |
| Adverse event, non-fatal | 39 | 44 |
| Lost to follow-up | 19 | 20 |
| Lack of efficacy | 4 | 7 |

Notes:

[1] - The number of subjects reported to be in the baseline period are not the same as the worldwide number enrolled in the trial. It is expected that these numbers will be the same.

Justification: Baseline characteristics are based on patients who were randomised after successfully completing the screening period and received at least one dose of the trial medication.

[2] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: An optional 2-year extension was implemented in this trial through a protocol amendment, which brought the total length of treatment to 4 years. However, some sites did not participate in the 2-year extension, and so considered patients to have completed treatment after 2 years.

[3] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: An optional 2-year extension was implemented in this trial through a protocol amendment, which brought the total length of treatment to 4 years. However, some sites did not participate in the 2-year extension, and so considered patients to have completed treatment after 2 years.

[4] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: An optional 2-year extension was implemented in this trial through a protocol amendment, which brought the total length of treatment to 4 years. However, some sites did not participate in the 2-year extension, and so considered patients to have completed treatment after 2 years.

[5] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: An optional 2-year extension was implemented in this trial through a protocol amendment, which brought the total length of treatment to 4 years. However, some sites did not participate in the 2-year extension, and so considered patients to have completed treatment after 2 years.

Baseline characteristics

Reporting groups

| | |
|--|---------------------|
| Reporting group title | Empagliflozin 25 mg |
| Reporting group description: Patients received one empagliflozin 25 mg tablet and one placebo glimepiride capsule orally once daily. Empagliflozin: 25 mg once daily. Placebo: Placebo matching glimepiride 1-4 mg. Out of 769, four patients randomised to the empagliflozin 25 mg arm were not treated. Consequently, number of subject that started is 769 but only 765 reported to ensure consistent reporting with baseline characteristics that includes only treated patients. | |
| Reporting group title | Glimepiride 1-4 mg |
| Reporting group description: Patients received one glimepiride capsule and one placebo empagliflozin tablet orally once daily. Glimepiride: 1-4 mg once daily. Placebo: Placebo matching empagliflozin. | |

| Reporting group values | Empagliflozin 25 mg | Glimepiride 1-4 mg | Total |
|--|---------------------|--------------------|-------|
| Number of subjects | 765 | 780 | 1545 |
| Age categorical Units: Subjects | | | |
| Age Continuous | | | |
| Full Analysis Set (FAS), All patients randomised, treated with at least one dose of study drug, and with a baseline HbA1c value. | | | |
| Units: years | | | |
| arithmetic mean | 56.2 | 55.7 | |
| standard deviation | ± 10.3 | ± 10.4 | - |
| Gender, Male/Female Units: participants | | | |
| Female | 333 | 359 | 692 |
| Male | 432 | 421 | 853 |

End points

End points reporting groups

| | |
|--|---------------------|
| Reporting group title | Empagliflozin 25 mg |
| Reporting group description: Patients received one empagliflozin 25 mg tablet and one placebo glimepiride capsule orally once daily. Empagliflozin: 25 mg once daily. Placebo: Placebo matching glimepiride 1-4 mg. Out of 769, four patients randomised to the empagliflozin 25 mg arm were not treated. Consequently, number of subject that started is 769 but only 765 reported to ensure consistent reporting with baseline characteristics that includes only treated patients. | |
| Reporting group title | Glimepiride 1-4 mg |
| Reporting group description: Patients received one glimepiride capsule and one placebo empagliflozin tablet orally once daily. Glimepiride: 1-4 mg once daily. Placebo: Placebo matching empagliflozin. | |

Primary: The change from baseline in glycosylated haemoglobin (HbA1c) after 104 weeks of treatment.

| | |
|---|--|
| End point title | The change from baseline in glycosylated haemoglobin (HbA1c) after 104 weeks of treatment. |
| End point description: FAS (LOCF) – Full Analysis Set (FAS) with Last Observation Carried Forward (LOCF); Values after start of antidiabetic rescue therapy were set to missing and last observation carried forward (LOCF) was used for imputation of missing values. | |
| End point type | Primary |
| End point timeframe: Baseline and 104 weeks. | |

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[1] | 780 ^[2] | | |
| Units: Percentage | | | | |
| arithmetic mean (standard error) | -0.66 (± 0.03) | -0.55 (± 0.03) | | |

Notes:

[1] - FAS (LOCF)

[2] - FAS (LOCF)

Statistical analyses

| | |
|--|--|
| Statistical analysis title | Statistical Analysis 1 |
| Statistical analysis description: Testing Hierarchy for main analysis (104 weeks): 1. Non-inferiority in HbA1c change from baseline at 104 weeks. 2. Superiority in body weight change from baseline at 104 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 104 weeks. 4. Superiority in HbA1c change from baseline at 104 weeks. 5. Superiority in systolic blood pressure change from baseline at 104 weeks. 6. Superiority in diastolic blood pressure change from baseline at 104 weeks. | |
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |

| | |
|---|----------------------------|
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | equivalence ^[3] |
| P-value | < 0.0001 |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -0.11 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -0.2 |
| upper limit | -0.01 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.04 |

Notes:

[3] - Non-inferiority was tested through a two-sided 97.5% confidence interval for the treatment effect of empagliflozin minus the effect of glimepiride in change from baseline in HbA1c. The null-hypothesis of material inferiority of empagliflozin was rejected if the confidence interval was entirely below the non-inferiority margin 0.3%. ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline HbA1c as linear covariate.

| | |
|-----------------------------------|------------------------|
| Statistical analysis title | Statistical analysis 2 |
|-----------------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for main analysis (104 weeks): 1. Non-inferiority in HbA1c change from baseline at 104 weeks. 2. Superiority in body weight change from baseline at 104 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 104 weeks. 4. Superiority in HbA1c change from baseline at 104 weeks. 5. Superiority in systolic blood pressure change from baseline at 104 weeks. 6. Superiority in diastolic blood pressure change from baseline at 104 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[4] |
| P-value | = 0.0153 ^[5] |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -0.11 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -0.2 |
| upper limit | -0.01 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.04 |

Notes:

[4] - ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline HbA1c as linear covariate.

[5] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The change in body weight from baseline after 104 weeks of treatment.

| | |
|-----------------|---|
| End point title | The change in body weight from baseline after 104 weeks of treatment. |
|-----------------|---|

End point description:

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:
Baseline and 104 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[6] | 780 ^[7] | | |
| Units: kilograms | | | | |
| arithmetic mean (standard error) | -3.11 (\pm 0.13) | 1.33 (\pm 0.13) | | |

Notes:

[6] - FAS (LOCF)

[7] - FAS (LOCF)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for main analysis (104 weeks): 1. Non-inferiority in HbA1c change from baseline at 104 weeks. 2. Superiority in body weight change from baseline at 104 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 104 weeks. 4. Superiority in HbA1c change from baseline at 104 weeks. 5. Superiority in systolic blood pressure change from baseline at 104 weeks. 6. Superiority in diastolic blood pressure change from baseline at 104 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[8] |
| P-value | < 0.0001 |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -4.46 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -4.87 |
| upper limit | -4.05 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.18 |

Notes:

[8] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%. ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline weight, baseline HbA1c as linear covariates.

Secondary: The occurrence of confirmed hypoglycaemic events during 104 weeks of treatment.

| | |
|-----------------|---|
| End point title | The occurrence of confirmed hypoglycaemic events during 104 weeks of treatment. |
|-----------------|---|

End point description:

Treated Set (TS), all patients treated with at least one dose of randomised study drug.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline and 104 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|-----------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[9] | 780 ^[10] | | |
| Units: participants | | | | |
| number (not applicable) | 19 | 189 | | |

Notes:

[9] - TS

[10] - TS

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|---|--|
| Statistical analysis description: | |
| Testing Hierarchy for main analysis (104 weeks): 1. Non-inferiority in HbA1c change from baseline at 104 weeks. 2. Superiority in body weight change from baseline at 104 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 104 weeks. 4. Superiority in HbA1c change from baseline at 104 weeks. 5. Superiority in systolic blood pressure change from baseline at 104 weeks. 6. Superiority in diastolic blood pressure change from baseline at 104 weeks. | |
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[11] |
| P-value | < 0.0001 ^[12] |
| Method | Cochran-Mantel-Haenszel |
| Parameter estimate | Risk ratio (RR) |
| Point estimate | 0.102 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | 0.06 |
| upper limit | 0.173 |

Notes:

[11] - Cochran-Mantel-Haenszel test adjusting for baseline HbA1c (<8.5 / >=8.5).

[12] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The change in Systolic Blood Pressure (SBP) from baseline after 104 weeks of treatment.

| | |
|---|---|
| End point title | The change in Systolic Blood Pressure (SBP) from baseline after 104 weeks of treatment. |
| End point description: | |
| FAS (LOCF-H) – Full Analysis Set (FAS) with Last Observation Carried Forward (LOCF); Values after start of anti-diabetic rescue therapy or change of anti-hypertensive therapy were set to missing and last observation carried forward (LOCF) was used for imputation of missing values. | |
| End point type | Secondary |
| End point timeframe: | |
| Baseline and 104 weeks. | |

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[13] | 780 ^[14] | | |
| Units: mmHg | | | | |
| arithmetic mean (standard error) | -3.1 (± 0.5) | 2.5 (± 0.5) | | |

Notes:

[13] - FAS (LOCF-H)

[14] - FAS (LOCF-H)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for main analysis (104 weeks): 1. Non-inferiority in HbA1c change from baseline at 104 weeks. 2. Superiority in body weight change from baseline at 104 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 104 weeks. 4. Superiority in HbA1c change from baseline at 104 weeks. 5. Superiority in systolic blood pressure change from baseline at 104 weeks. 6. Superiority in diastolic blood pressure change from baseline at 104 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[15] |
| P-value | < 0.0001 ^[16] |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -5.6 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -7 |
| upper limit | -4.2 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.6 |

Notes:

[15] - ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline SBP, baseline HbA1c as linear covariates.

[16] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The change in Diastolic Blood Pressure (DBP) from baseline after 104 weeks of treatment.

| | |
|-----------------|--|
| End point title | The change in Diastolic Blood Pressure (DBP) from baseline after 104 weeks of treatment. |
|-----------------|--|

End point description:

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline and 104 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[17] | 780 ^[18] | | |
| Units: mmHg | | | | |
| arithmetic mean (standard error) | -1.8 (± 0.3) | 0.9 (± 0.3) | | |

Notes:

[17] - FAS (LOCF-H)

[18] - FAS (LOCF-H)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for main analysis (104 weeks): 1. Non-inferiority in HbA1c change from baseline at 104 weeks. 2. Superiority in body weight change from baseline at 104 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 104 weeks. 4. Superiority in HbA1c change from baseline at 104 weeks. 5. Superiority in systolic blood pressure change from baseline at 104 weeks. 6. Superiority in diastolic blood pressure change from baseline at 104 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[19] |
| P-value | < 0.0001 ^[20] |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -2.7 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -3.5 |
| upper limit | -1.8 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.4 |

Notes:

[19] - ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline DBP, baseline HbA1c as linear covariates.

[20] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The change from baseline in HbA1c after 52 weeks of treatment.

| | |
|-----------------|--|
| End point title | The change from baseline in HbA1c after 52 weeks of treatment. |
|-----------------|--|

End point description:

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline and 52 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[21] | 780 ^[22] | | |
| Units: percentage of HbA1c | | | | |
| arithmetic mean (standard error) | -0.73 (± 0.03) | -0.66 (± 0.03) | | |

Notes:

[21] - FAS (LOCF)

[22] - FAS (LOCF)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for first interim analysis (52 weeks): 1. Non-inferiority in HbA1c change from baseline at 52 weeks. 2. Superiority in body weight change from baseline at 52 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 52 weeks. 4. Superiority in systolic blood pressure change from baseline at 52 weeks. 5. Superiority in diastolic blood pressure change from baseline at 52 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | equivalence ^[23] |
| P-value | < 0.0001 |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -0.07 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -0.16 |
| upper limit | 0.02 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.04 |

Notes:

[23] - Non-inferiority was tested through a two-sided 97.5% confidence interval for the treatment effect of empagliflozin minus the effect of glimepiride in change from baseline in HbA1c. The null-hypothesis of material inferiority of empagliflozin was rejected if the confidence interval is entirely below the non-inferiority margin 0.3%. ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline HbA1c as linear covariate.

Secondary: The change in body weight from baseline after 52 weeks of treatment.

| | |
|-----------------|--|
| End point title | The change in body weight from baseline after 52 weeks of treatment. |
|-----------------|--|

End point description:

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline and 52 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[24] | 780 ^[25] | | |
| Units: kilograms | | | | |
| arithmetic mean (standard error) | -3.21 (± 0.12) | 1.59 (± 0.11) | | |

Notes:

[24] - FAS (LOCF)

[25] - FAS (LOCF)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for first interim analysis (52 weeks): 1. Non-inferiority in HbA1c change from baseline at 52 weeks. 2. Superiority in body weight change from baseline at 52 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 52 weeks. 4. Superiority in systolic blood pressure change from baseline at 52 weeks. 5. Superiority in diastolic blood pressure change from baseline at 52 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[26] |
| P-value | < 0.0001 ^[27] |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -4.81 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -5.16 |
| upper limit | -4.46 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.16 |

Notes:

[26] - ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline weight, baseline HbA1c as linear covariates.

[27] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The occurrence of confirmed hypoglycaemic events during 52 weeks of treatment.

| | |
|-----------------|--|
| End point title | The occurrence of confirmed hypoglycaemic events during 52 weeks of treatment. |
|-----------------|--|

End point description:

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline and 52 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|-----------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[28] | 780 ^[29] | | |
| Units: participants | | | | |
| number (not applicable) | 12 | 159 | | |

Notes:

[28] - TS

[29] - TS

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for first interim analysis (52 weeks): 1. Non-inferiority in HbA1c change from baseline at 52 weeks. 2. Superiority in body weight change from baseline at 52 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 52 weeks. 4. Superiority in systolic blood pressure change from baseline at 52 weeks. 5. Superiority in diastolic blood pressure change from baseline at 52 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[30] |
| P-value | < 0.0001 ^[31] |
| Method | Cochran-Mantel-Haenszel |
| Parameter estimate | Risk ratio (RR) |
| Point estimate | 0.077 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | 0.04 |
| upper limit | 0.148 |

Notes:

[30] - Cochran-Mantel-Haenszel test adjusting for baseline HbA1c (<8.5 / >=8.5).

[31] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The change in Systolic Blood Pressure (SBP) from baseline after 52 weeks of treatment.

| | |
|-----------------|--|
| End point title | The change in Systolic Blood Pressure (SBP) from baseline after 52 weeks of treatment. |
|-----------------|--|

End point description:

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline and 52 weeks.

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[32] | 780 ^[33] | | |
| Units: mmHg | | | | |
| arithmetic mean (standard error) | -3.6 (± 0.5) | 2.2 (± 0.5) | | |

Notes:

[32] - FAS (LOCF-H)

[33] - FAS (LOCF-H)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for first interim analysis (52 weeks): 1. Non-inferiority in HbA1c change from baseline at 52 weeks. 2. Superiority in body weight change from baseline at 52 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 52 weeks. 4. Superiority in systolic blood pressure change from baseline at 52 weeks. 5. Superiority in diastolic blood pressure change from baseline at 52 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[34] |
| P-value | < 0.0001 ^[35] |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -5.8 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -7.3 |
| upper limit | -4.4 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.6 |

Notes:

[34] - ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline SBP, baseline HbA1c as linear covariates.

[35] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Secondary: The change in Diastolic Blood Pressure (DBP) from baseline after 52 weeks of treatment.

| | |
|-----------------|---|
| End point title | The change in Diastolic Blood Pressure (DBP) from baseline after 52 weeks of treatment. |
|-----------------|---|

End point description:

| | |
|------------------------|-----------|
| End point type | Secondary |
| End point timeframe: | |
| Baseline and 52 weeks. | |

| End point values | Empagliflozin 25 mg | Glimepiride 1-4 mg | | |
|----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 765 ^[36] | 780 ^[37] | | |
| Units: mmHg | | | | |
| arithmetic mean (standard error) | -1.9 (± 0.3) | 1 (± 0.3) | | |

Notes:

[36] - FAS (LOCF-H)

[37] - FAS (LOCF-H)

Statistical analyses

| Statistical analysis title | Statistical Analysis 1 |
|----------------------------|------------------------|
|----------------------------|------------------------|

Statistical analysis description:

Testing Hierarchy for first interim analysis (52 weeks): 1. Non-inferiority in HbA1c change from baseline at 52 weeks. 2. Superiority in body weight change from baseline at 52 weeks. 3. Superiority in occurrence of confirmed hypoglycaemic adverse events at 52 weeks. 4. Superiority in systolic blood pressure change from baseline at 52 weeks. 5. Superiority in diastolic blood pressure change from baseline at 52 weeks.

| | |
|---|--|
| Comparison groups | Empagliflozin 25 mg v Glimepiride 1-4 mg |
| Number of subjects included in analysis | 1545 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[38] |
| P-value | < 0.0001 ^[39] |
| Method | ANCOVA |
| Parameter estimate | Mean difference (net) |
| Point estimate | -2.8 |
| Confidence interval | |
| level | Other: 97.5 % |
| sides | 2-sided |
| lower limit | -3.7 |
| upper limit | -2 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.4 |

Notes:

[38] - ANCOVA with treatment, geographical region, renal function at baseline as fixed effects and baseline DBP, baseline HbA1c as linear covariates.

[39] - The superiority tests performed at 104 weeks and the superiority tests performed at 52 weeks both used a nominal significance level of 2.5% to maintain the overall significance level of 5%.

Adverse events

Adverse events information

Timeframe for reporting adverse events:

Up to 4 years.

Adverse event reporting additional description:

There were 16 on-treatment deaths due to (any) serious AEs, but zero on-treatment deaths due to related serious AEs.

| | |
|-----------------|------------|
| Assessment type | Systematic |
|-----------------|------------|

Dictionary used

| | |
|--------------------|--------|
| Dictionary name | MedDRA |
| Dictionary version | 18.0 |

Reporting groups

| | |
|-----------------------|---------------------|
| Reporting group title | Empagliflozin 25 mg |
|-----------------------|---------------------|

Reporting group description:

Patients received one empagliflozin 25 mg tablet and one placebo glimepiride capsule orally once daily.
Empagliflozin: 25 mg once daily Placebo: Placebo matching glimepiride 1-4 mg.

| | |
|-----------------------|-------------|
| Reporting group title | Glimepiride |
|-----------------------|-------------|

Reporting group description:

Patients received one glimepiride capsule and one placebo empagliflozin tablet orally once daily.
Glimepiride: 1-4 mg once daily Placebo: Placebo matching empagliflozin.

| Serious adverse events | Empagliflozin 25 mg | Glimepiride | |
|---|---------------------|--------------------|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 161 / 765 (21.05%) | 153 / 780 (19.62%) | |
| number of deaths (all causes) | 8 | 8 | |
| number of deaths resulting from adverse events | 0 | 0 | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Acute myeloid leukaemia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Adenocarcinoma pancreas | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Basal cell carcinoma | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 2 / 765 (0.26%) | 4 / 780 (0.51%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Breast cancer | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Colon cancer | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Endometrial adenocarcinoma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Glioblastoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatic cancer | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Invasive lobular breast carcinoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Laryngeal squamous cell carcinoma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lung adenocarcinoma | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lung adenocarcinoma stage IV | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Lung neoplasm malignant | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Malignant melanoma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Malignant melanoma in situ | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Malignant peritoneal neoplasm | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Melanoma recurrent | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Meningioma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metastases to bone | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Metastases to central nervous system | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metastases to liver | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Metastatic ocular melanoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nasal neoplasm benign | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Non-small cell lung cancer | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Pancreatic carcinoma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Prostate cancer | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 6 / 780 (0.77%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Paranasal sinus benign neoplasm | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rectal cancer | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal cell carcinoma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal neoplasm | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Squamous cell carcinoma | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Transitional cell carcinoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Uterine cancer | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Uterine leiomyoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vascular disorders | | | |
| Deep vein thrombosis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypertension | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypertensive emergency | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Orthostatic hypotension | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Peripheral arterial occlusive disease | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Peripheral artery stenosis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Peripheral ischaemia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Thrombophlebitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Varicose vein | | | |

| | | | |
|--|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Surgical and medical procedures | | | |
| Cholecystectomy | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Arrhythmia prophylaxis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hip arthroplasty | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hysterectomy | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Knee arthroplasty | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Oophorectomy bilateral | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Omentectomy | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| General disorders and administration site conditions | | | |

| | | | |
|---|-----------------|-----------------|--|
| Chest pain | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 5 / 780 (0.64%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cyst | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hernia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Non-cardiac chest pain | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Multi-organ failure | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Pain | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pyrexia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Sudden death | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Immune system disorders | | | |

| | | | |
|---|-----------------|-----------------|--|
| Drug hypersensitivity | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 3 / 780 (0.38%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Reproductive system and breast disorders | | | |
| Balanoposthitis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Benign prostatic hyperplasia | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 3 / 780 (0.38%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dysfunctional uterine bleeding | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Endometrial hyperplasia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Menorrhagia | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metrorrhagia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Prostatism | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Uterine prolapse | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vaginal prolapse | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Chronic obstructive pulmonary disease | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dysphonia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dyspnoea | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dyspnoea exertional | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lung consolidation | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nasal obstruction | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Paranasal cyst | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pleural effusion | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonia aspiration | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Pneumothorax | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pulmonary embolism | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Respiratory failure | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Psychiatric disorders | | | |
| Adjustment disorder | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Completed suicide | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Delusional disorder, unspecified type | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Depression | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Mental disorder | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Suicide attempt | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Investigations | | | |
| Liver function test abnormal | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Injury, poisoning and procedural complications | | | |
| Ankle fracture | | | |
| subjects affected / exposed | 3 / 765 (0.39%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Burns third degree | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Comminuted fracture | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Fall | | | |
| subjects affected / exposed | 8 / 765 (1.05%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 8 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Fibula fracture | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Femur fracture | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Foreign body | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Head injury | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Humerus fracture | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Incisional hernia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Jaw fracture | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Joint dislocation | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ligament sprain | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Laceration | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Limb injury | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Meniscus injury | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Muscle rupture | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Overdose | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Post procedural constipation | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Post procedural haemorrhage | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Procedural headache | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Radius fracture | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Road traffic accident | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Soft tissue injury | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Subdural haematoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tendon rupture | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tibia fracture | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Traumatic fracture | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Congenital, familial and genetic disorders | | | |
| Phimosis | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac disorders | | | |
| Acute coronary syndrome | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Acute myocardial infarction | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 7 / 780 (0.90%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 8 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Angina unstable | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 4 / 780 (0.51%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Angina pectoris | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Arrhythmia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Arteriosclerosis coronary artery | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Atrial fibrillation | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 8 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac disorder | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac failure | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac failure congestive | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac tamponade | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Coronary artery disease | | | |
| subjects affected / exposed | 3 / 765 (0.39%) | 8 / 780 (1.03%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 9 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Myocardial infarction | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 3 / 780 (0.38%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Myocardial ischaemia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 3 / 780 (0.38%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Palpitations | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tachycardia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ventricle rupture | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ventricular tachycardia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nervous system disorders | | | |
| Brain stem infarction | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Carotid artery stenosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Carpal tunnel syndrome | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebral haemorrhage | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebral infarction | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebrovascular accident | | | |
| subjects affected / exposed | 8 / 765 (1.05%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 8 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebrovascular disorder | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diabetic coma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Dizziness | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Headache | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ischaemic stroke | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lacunar infarction | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Myasthenia gravis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Myelopathy | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Optic neuritis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Partial seizures | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Paraesthesia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Radicular pain | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Seizure | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Subarachnoid haemorrhage | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Syncope | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Thalamic infarction | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Trigeminal neuralgia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Transient ischaemic attack | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Blood and lymphatic system disorders | | | |
| Anaemia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 8 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Iron deficiency anaemia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Thrombocytopenia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ear and labyrinth disorders | | | |
| Otosclerosis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tinnitus | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vertigo | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Eye disorders | | | |
| Cataract | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diabetic retinopathy | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Endocrine ophthalmopathy | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Open angle glaucoma | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Retinal detachment | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 3 / 780 (0.38%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Retinal neovascularisation | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vitreous haemorrhage | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal disorders | | | |
| Abdominal pain | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Abdominal hernia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Abdominal pain upper | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Anorectal varices | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Anorectal varices haemorrhage | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Crohn's disease | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Colitis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dyspepsia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Enterocolitis haemorrhagic | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diverticulum intestinal | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastric ulcer | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastritis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Haemorrhoids | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hiatus hernia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal haemorrhage | | | |
| subjects affected / exposed | 3 / 765 (0.39%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Incarcerated inguinal hernia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Impaired gastric emptying | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Inguinal hernia | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Intestinal obstruction | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Large intestine polyp | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Oesophageal varices haemorrhage | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pancreatitis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rectal haemorrhage | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pancreatitis acute | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Proctitis haemorrhagic | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rectal polyp | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Umbilical hernia | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vomiting | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Volvulus | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatobiliary disorders | | | |
| Cholangitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cholangitis acute | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cholecystitis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cholecystitis chronic | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cholecystitis acute | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cholelithiasis | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 5 / 780 (0.64%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Drug-induced liver injury | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatic cirrhosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Hepatic failure | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Hepatitis acute | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Liver disorder | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Non-alcoholic steatohepatitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Portal hypertension | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Skin and subcutaneous tissue disorders | | | |
| Diabetic foot | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Skin ulcer | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal and urinary disorders | | | |
| Acute kidney injury | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Bladder prolapse | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Haematuria | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Calculus ureteric | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal cyst | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nephrolithiasis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal failure | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Urinary tract obstruction | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Endocrine disorders | | | |
| Goitre | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pituitary-dependent Cushing's syndrome | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Musculoskeletal and connective tissue disorders | | | |
| Arthritis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Arthralgia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cervical spinal stenosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Back pain | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Chondrocalcinosis pyrophosphate | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Foot deformity | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Intervertebral disc protrusion | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Intervertebral disc disorder | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lumbar spinal stenosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Muscle twitching | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Musculoskeletal chest pain | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Neck pain | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Osteoarthritis | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 4 / 780 (0.51%) | |
| occurrences causally related to treatment / all | 0 / 5 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rotator cuff syndrome | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Spinal column stenosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Spinal osteoarthritis | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Spinal pain | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Synovial cyst | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Synovitis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tendonitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Infections and infestations | | | |
| Abscess limb | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Appendicitis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Bacteraemia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Bronchitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cellulitis | | | |
| subjects affected / exposed | 3 / 765 (0.39%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cystitis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dengue fever | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cystitis escherichia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diarrhoea infectious | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Erysipelas | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diverticulitis | | | |
| subjects affected / exposed | 3 / 765 (0.39%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastroenteritis | | | |
| subjects affected / exposed | 4 / 765 (0.52%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Escherichia bacteraemia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Febrile infection | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatitis E | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastroenteritis salmonella | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Kidney infection | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Infectious mononucleosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Liver abscess | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lobar pneumonia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Localised infection | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lung infection | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lower respiratory tract infection | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Osteomyelitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nasopharyngitis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Peritonitis bacterial | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonia | | | |
| subjects affected / exposed | 2 / 765 (0.26%) | 6 / 780 (0.77%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pelvic abscess | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonia legionella | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonia bacterial | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Post procedural infection | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Pyelonephritis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pyelonephritis acute | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Salmonellosis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Sepsis | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tuberculosis gastrointestinal | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Septic shock | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Sialoadenitis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Upper respiratory tract infection | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Urosepsis | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Viral infection | | | |
| subjects affected / exposed | 3 / 765 (0.39%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metabolism and nutrition disorders | | | |
| Diabetes mellitus inadequate control | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dehydration | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Fluid overload | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Electrolyte imbalance | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gout | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hyperglycaemia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hyperkalaemia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypoglycaemia | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 1 / 780 (0.13%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypokalaemia | | | |
| subjects affected / exposed | 1 / 765 (0.13%) | 0 / 780 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Obesity | | | |
| subjects affected / exposed | 0 / 765 (0.00%) | 2 / 780 (0.26%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

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

| Non-serious adverse events | Empagliflozin 25 mg | Glimepiride | |
|---|---------------------|--------------------|--|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 580 / 765 (75.82%) | 637 / 780 (81.67%) | |
| Vascular disorders | | | |
| Hypertension | | | |
| subjects affected / exposed | 55 / 765 (7.19%) | 105 / 780 (13.46%) | |
| occurrences (all) | 65 | 115 | |
| Nervous system disorders | | | |

| | | | |
|--|--------------------------|--------------------------|--|
| Dizziness subjects affected / exposed occurrences (all) | 62 / 765 (8.10%) 81 | 67 / 780 (8.59%) 106 | |
| Headache subjects affected / exposed occurrences (all) | 59 / 765 (7.71%) 85 | 68 / 780 (8.72%) 83 | |
| Gastrointestinal disorders | | | |
| Diarrhoea subjects affected / exposed occurrences (all) | 62 / 765 (8.10%) 79 | 67 / 780 (8.59%) 93 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Cough subjects affected / exposed occurrences (all) | 53 / 765 (6.93%) 63 | 62 / 780 (7.95%) 79 | |
| Musculoskeletal and connective tissue disorders | | | |
| Arthralgia subjects affected / exposed occurrences (all) | 70 / 765 (9.15%) 84 | 86 / 780 (11.03%) 116 | |
| Back pain subjects affected / exposed occurrences (all) | 93 / 765 (12.16%) 116 | 90 / 780 (11.54%) 109 | |
| Musculoskeletal pain subjects affected / exposed occurrences (all) | 43 / 765 (5.62%) 45 | 43 / 780 (5.51%) 46 | |
| Osteoarthritis subjects affected / exposed occurrences (all) | 23 / 765 (3.01%) 41 | 41 / 780 (5.26%) 47 | |
| Pain in extremity subjects affected / exposed occurrences (all) | 51 / 765 (6.67%) 56 | 50 / 780 (6.41%) 57 | |
| Infections and infestations | | | |
| Bronchitis subjects affected / exposed occurrences (all) | 34 / 765 (4.44%) 46 | 64 / 780 (8.21%) 88 | |
| Gastroenteritis | | | |

| | | | |
|------------------------------------|--------------------|--------------------|--|
| subjects affected / exposed | 38 / 765 (4.97%) | 47 / 780 (6.03%) | |
| occurrences (all) | 46 | 56 | |
| Influenza | | | |
| subjects affected / exposed | 71 / 765 (9.28%) | 73 / 780 (9.36%) | |
| occurrences (all) | 94 | 86 | |
| Nasopharyngitis | | | |
| subjects affected / exposed | 90 / 765 (11.76%) | 106 / 780 (13.59%) | |
| occurrences (all) | 158 | 190 | |
| Pharyngitis | | | |
| subjects affected / exposed | 42 / 765 (5.49%) | 44 / 780 (5.64%) | |
| occurrences (all) | 48 | 67 | |
| Upper respiratory tract infection | | | |
| subjects affected / exposed | 103 / 765 (13.46%) | 97 / 780 (12.44%) | |
| occurrences (all) | 180 | 165 | |
| Urinary tract infection | | | |
| subjects affected / exposed | 137 / 765 (17.91%) | 121 / 780 (15.51%) | |
| occurrences (all) | 213 | 213 | |
| Metabolism and nutrition disorders | | | |
| Dyslipidaemia | | | |
| subjects affected / exposed | 51 / 765 (6.67%) | 48 / 780 (6.15%) | |
| occurrences (all) | 55 | 50 | |
| Hyperglycaemia | | | |
| subjects affected / exposed | 152 / 765 (19.87%) | 227 / 780 (29.10%) | |
| occurrences (all) | 242 | 374 | |
| Hypoglycaemia | | | |
| subjects affected / exposed | 41 / 765 (5.36%) | 228 / 780 (29.23%) | |
| occurrences (all) | 80 | 1267 | |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|-----------------|---|
| 29 October 2010 | <p>The following changes to the trial design and procedures were made:</p> <ol style="list-style-type: none">1. The body composition sub-study was introduced to investigate the changes in visceral body fat content and distribution as well as to measure any changes in BMD after 52 and 104 weeks of trial medication.2. The occurrence of all confirmed hypoglycaemias, whether they were asymptomatic or symptomatic, were to be recorded.3. Change in weight of >2% was to be documented since this was to be included in a composite endpoint.4. Patients with acute coronary syndrome were excluded rather than those with a myocardial infarction since this umbrella term was used to cover any group of clinical symptoms compatible with acute myocardial ischemia.5. Percentage of patients with SBP/DBP <130/80 mmHg after 52 weeks and 104 weeks was added as a key secondary endpoint.6. Exempting cardiovascular outcome events from expedited and unblinded reporting to avoid jeopardising the integrity of this double-blind trial and inclusion of a definition of cardiovascular outcome events that were to be reported on the CRF pages instead of on an SAE form (however, this change was not implemented). Cardiovascular outcome events that occurred during the screening/run in phase were to be considered as SAEs and not as outcome events.7. Hepatic injury was added as a significant AE to fulfill the requirements of FDA as recommended in their Guidance for Industry: Drug induced liver disease.8. Clinically relevant abnormalities found on physical examination at Visit 2 or ECG at Visit 3 were considered to have already existed prior to signing of the informed consent and therefore were considered as baseline conditions instead of AEs unless there was a good reason to assume they first appeared after signing of consent.9. For triglycerides, a reflex test for direct LDL cholesterol was to be triggered if triglycerides were >400 mg/dL/4.52 mmol/L.10. Measurement of urinary alpha-1 microglobulin was deleted. |
| 26 May 2011 | <p>The Protocol amendment was implemented approximately 9 months after the first patient entered the study. This amendment introduced changes to clarify wording and study procedures to be performed/data to be collected, to introduce some administrative changes, and to correct minor typographical errors and inconsistencies between the synopsis, study flow charts, the CRF, and the text of the protocol, or to align procedures in this protocol with the other phase III empagliflozin studies.</p> <p>In addition, the following changes to the trial design were made:</p> <ol style="list-style-type: none">1. To fulfill a request by the FDA and ensure the follow-up period was of sufficient duration to allow collection of safety related information, such as potential changes in physiology, the follow-up period was extended from 1 week to 4 weeks. This was to be performed for all patients, including those who discontinued prematurely. The study flow chart, synopsis, protocol text, and CRF were updated to account for this change. <p>The following changes to the trial procedures were made:</p> <ol style="list-style-type: none">2. Lipid profile, waist circumference, and bone markers were also to be assessed at the end of the follow-up period; endpoints were updated to reflect these changes.3. Because the change to the protocol regarding the reporting of cardiovascular events as outcome events was not implemented, cardiovascular outcome events were not to be exempted from expedited reporting and were to be as originally classified and handled as SAEs. |

| | |
|------------------|---|
| 01 February 2012 | <p>The Protocol amendment was implemented approximately 17 months after the first patient entered the study. This amendment introduced changes to clarify wording and study procedures to be performed/data to be collected, to comply with the sponsor's SOPs, and to correct minor typographical errors and inconsistencies between the synopsis, study flow charts, the CRF, and the text of the protocol, or to align procedures in this protocol with the other phase III empagliflozin studies. The following changes to the trial design were made:</p> <ol style="list-style-type: none"> 1. The 104-week, double-blind, double-dummy treatment period of the trial was extended to 208 weeks by adding a further 104 weeks of double-blind treatment (referred to as the 104-week extension treatment period). This was to be implemented for all patients who signed an additional informed consent, including those who discontinued prematurely. The study flow chart, synopsis, text, and CRF were updated to account for this change. This change in design was required because both US and EU regulatory agencies (FDA and EMA) asked the sponsor to provide data on long-term safety and long-term efficacy (durability of efficacy) for empagliflozin. <p>In addition, the following changes to the trial procedures were made:</p> <ol style="list-style-type: none"> 2. The definition of drug-induced liver injury as a significant AE was extended to fulfill the requirements of FDA as recommended in their Guidance for Industry: Drug induced liver disease. 3. A clarification was added that LADA was assessed at baseline only. |
| 13 August 2012 | <p>The protocol amendment was implemented before database lock for the interim analysis at 52 weeks. To assess fully the difference of the 2 trial medications, a superiority hypothesis for HbA1c was added to the 104-week time point. Thus, the main objective of the trial was amended to describe that the study was designed to show non-inferiority of empagliflozin to glimepiride with the option to show superiority if non-inferiority was met.</p> |
| 12 May 2014 | <p>This amendment introduced changes to clarify wording and study procedures to be performed/data to be collected, to introduce some administrative changes (including a change in TCM and a change in workplace for the coordinating investigator), and to correct minor inconsistencies between the synopsis, study flow charts, the CRF, and the text of the protocol, or to align procedures/analyses in this protocol with the other phase III empagliflozin studies or BI's SOPs. Of note, the following changes to the trial procedures were made:</p> <ol style="list-style-type: none"> 1. Protocol-specified significant AEs (hepatic injury and decreased renal function) were renamed as AESIs at all appropriate points throughout the protocol to comply with BI's internal SOPs. 2. Reporting procedures of AEs and SAEs were updated to comply with BI's SOPs, including the reporting of nonserious AESIs in an expedited manner similar to the reporting of SAEs. 3. The adjudication of hepatic AEs and cases of cancer was described. 4. To describe the unblinding of the TCM that took place after the second database lock (at 104 weeks). |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

It should be noted that not all patients were followed up for 4 years with regard to the frequencies of adverse events presented up to 4 years.
The actual long term follow-up duration was 24.27 months.

Notes: