



Clinical trial results:

A randomized, double-blind, placebo-controlled Phase 3 study of SGN-35 (brentuximab vedotin) and best supportive care (BSC) versus placebo and BSC in the treatment of patients at high risk of residual Hodgkin lymphoma (HL) following autologous stem cell transplant (ASCT)

Summary

| | |
|--------------------------|-------------------------|
| EudraCT number | 2009-016947-20 |
| Trial protocol | FR HU ES CZ GB BG IT DE |
| Global end of trial date | 27 April 2020 |

Results information

| | |
|--------------------------------|--------------|
| Result version number | v1 (current) |
| This version publication date | 08 May 2021 |
| First version publication date | 08 May 2021 |

Trial information

Trial identification

| | |
|-----------------------|-----------|
| Sponsor protocol code | SGN35-005 |
|-----------------------|-----------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT01100502 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|--|
| Sponsor organisation name | PSI CRO Hungary Pharma Support LLC |
| Sponsor organisation address | Bank Center, Platina Tower, Szabadság tér 7, Budapest, Hungary, |
| Public contact | Clinical Operations, PSI CRO Hungary Pharma Support LLC, +36 1555 6755, rabudapest@psi-cro.com |
| Scientific contact | Clinical Operations, PSI CRO Hungary Pharma Support LLC, +36 1555 6755, rabudapest@psi-cro.com |
| Sponsor organisation name | Seagen Inc. |
| Sponsor organisation address | 21823 30th Drive SE, Bothell/WA, United States, 98021 |
| Public contact | Chief Medical Officer, Seagen Inc., 1 855-473-2436, medinfo@seagen.com |
| Scientific contact | Chief Medical Officer, Seagen Inc., 1 855-473-2436, medinfo@seagen.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 | 27 April 2020 |
| Is this the analysis of the primary completion data? | No |
| Global end of trial reached? | Yes |
| Global end of trial date | 27 April 2020 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

The primary objective of this study is to compare the progression-free survival (PFS) of brentuximab vedotin and best supportive care (BSC) versus placebo and BSC.

Protection of trial subjects:

The protocol for this study was designed in accordance with the general ethical principles outlined in the Declaration of Helsinki. The conduct of all aspects of the study, including methods for obtaining informed consent, were also in accordance with principles enunciated in the declaration, the International Conference on Harmonisation (ICH) Good Clinical Practices (GCP), and applicable Food and Drug Administration (FDA) regulations/guidelines set forth in Title 21 CFR Parts 11, 50, 54, 56, and 312.

The consent form approved by each IRB/IEC included all elements required by the applicable regional laws and regulations, including a statement that Seattle Genetics, Inc. and authorities had access to patient records. Consent was obtained from all patients before any protocol-required procedures were performed, including any procedure not part of normal patient care.

Background therapy: -

Evidence for comparator: -

| | |
|---|-------------------------------------|
| Actual start date of recruitment | 06 April 2010 |
| Long term follow-up planned | Yes |
| Long term follow-up rationale | Safety, Efficacy, Regulatory reason |
| Long term follow-up duration | 6 Years |
| Independent data monitoring committee (IDMC) involvement? | No |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|-------------------|
| Country: Number of subjects enrolled | Poland: 54 |
| Country: Number of subjects enrolled | Romania: 10 |
| Country: Number of subjects enrolled | Spain: 10 |
| Country: Number of subjects enrolled | United Kingdom: 6 |
| Country: Number of subjects enrolled | Bulgaria: 9 |
| Country: Number of subjects enrolled | Czech Republic: 5 |
| Country: Number of subjects enrolled | France: 13 |
| Country: Number of subjects enrolled | Germany: 3 |
| Country: Number of subjects enrolled | Hungary: 20 |
| Country: Number of subjects enrolled | Italy: 16 |

| | |
|--------------------------------------|------------------------|
| Country: Number of subjects enrolled | United States: 135 |
| Country: Number of subjects enrolled | Russian Federation: 39 |
| Country: Number of subjects enrolled | Serbia: 9 |
| Worldwide total number of subjects | 329 |
| EEA total number of subjects | 146 |

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) | 321 |
| From 65 to 84 years | 8 |
| 85 years and over | 0 |

Subject disposition

Recruitment

Recruitment details:

Apr 2010 to Aug 2014

Pre-assignment

Screening details:

Patients with HL who have received ASCT in the previous 30–45 days

Period 1

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

Arms

| | |
|------------------------------|----|
| Are arms mutually exclusive? | No |
|------------------------------|----|

| | |
|------------------|---------------------|
| Arm title | Brentuximab vedotin |
|------------------|---------------------|

Arm description:

Brentuximab vedotin 1.8 mg/kg every 3 weeks by IV infusion

| | |
|--|--|
| Arm type | Experimental |
| Investigational medicinal product name | Brentuximab vedotin |
| Investigational medicinal product code | |
| Other name | ADCETRIS, SGN-35 |
| Pharmaceutical forms | Concentrate for solution for injection |
| Routes of administration | Intravenous use |

Dosage and administration details:

Brentuximab vedotin 1.8 mg/kg every 3 weeks by IV infusion

| | |
|------------------|---------|
| Arm title | Placebo |
|------------------|---------|

Arm description:

Placebo every 3 weeks by IV infusion

| | |
|--|--|
| Arm type | Placebo |
| Investigational medicinal product name | Placebo |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Concentrate for solution for injection |
| Routes of administration | Intravenous use |

Dosage and administration details:

Placebo every 3 weeks by IV infusion

| Number of subjects in period 1 | Brentuximab vedotin | Placebo |
|--------------------------------|---------------------|---------|
| Started | 165 | 164 |
| Completed | 78 | 81 |
| Not completed | 87 | 83 |
| Adverse event, serious fatal | 2 | - |

| | | |
|--------------------------|----|----|
| Adverse event, non-fatal | 52 | 10 |
| Patient decision, non-AE | 9 | 4 |
| Progressive disease | 24 | 69 |

Baseline characteristics

Reporting groups

| | |
|-----------------------|---------------------|
| Reporting group title | Brentuximab vedotin |
|-----------------------|---------------------|

Reporting group description:

Brentuximab vedotin 1.8 mg/kg every 3 weeks by IV infusion

| | |
|-----------------------|---------|
| Reporting group title | Placebo |
|-----------------------|---------|

Reporting group description:

Placebo every 3 weeks by IV infusion

| Reporting group values | Brentuximab vedotin | Placebo | Total |
|---|---------------------|----------|-------|
| Number of subjects | 165 | 164 | 329 |
| Age categorical | | | |
| Units: Subjects | | | |
| Adults (18-64 years) | 160 | 161 | 321 |
| From 65-84 years | 5 | 3 | 8 |
| Age continuous | | | |
| Units: years | | | |
| median | 33 | 32 | |
| full range (min-max) | 18 to 71 | 18 to 76 | - |
| Gender categorical | | | |
| Units: Subjects | | | |
| Female | 89 | 67 | 156 |
| Male | 76 | 97 | 173 |
| Race | | | |
| Units: Subjects | | | |
| Asian | 2 | 3 | 5 |
| Black or African American | 10 | 2 | 12 |
| White | 153 | 156 | 309 |
| Other | 0 | 3 | 3 |
| Eastern Cooperative Oncology Group Performance Status | | | |
| Zero = Normal activity One = Symptoms but ambulatory Two = In bed < 50% of the time | | | |
| Units: Subjects | | | |
| Zero | 87 | 97 | 184 |
| One | 77 | 67 | 144 |
| Two | 1 | 0 | 1 |
| HL status after frontline therapy | | | |
| Refractory/relapsed status after the end of frontline standard chemotherapy or a combined modality treatment program. | | | |
| Units: Subjects | | | |
| Refractory | 99 | 97 | 196 |
| Relapse <12 months | 53 | 54 | 107 |
| Relapse ≥12 months with extranodal disease | 13 | 13 | 26 |
| Best response to salvage therapy pre-ASCT | | | |
| Units: Subjects | | | |

| | | | |
|--------------------|----|----|-----|
| Complete remission | 61 | 62 | 123 |
| Partial remission | 57 | 56 | 113 |
| Stable disease | 47 | 46 | 93 |

End points

End points reporting groups

| | |
|---|-----------------------------------|
| Reporting group title | Brentuximab vedotin |
| Reporting group description: | |
| Brentuximab vedotin 1.8 mg/kg every 3 weeks by IV infusion | |
| Reporting group title | Placebo |
| Reporting group description: | |
| Placebo every 3 weeks by IV infusion | |
| Subject analysis set title | BV Arm - Safety Analysis Set |
| Subject analysis set type | Safety analysis |
| Subject analysis set description: | |
| Safety Analysis Set includes all patients who received at least 1 dose of brentuximab vedotin or only received placebo: 2 patients randomized to placebo received a single dose of brentuximab vedotin and are included in the brentuximab vedotin arm; 2 patients randomized to placebo received no study treatment and are not included in the analysis | |
| Subject analysis set title | Placebo Arm - Safety Analysis Set |
| Subject analysis set type | Safety analysis |
| Subject analysis set description: | |
| Safety Analysis Set includes all patients who received at least 1 dose of brentuximab vedotin or only received placebo: 2 patients randomized to placebo received a single dose of brentuximab vedotin and are included in the brentuximab vedotin arm; 2 patients randomized to placebo received no study treatment and are not included in the analysis | |

Primary: Progression-free survival by independent review

| | |
|--|---|
| End point title | Progression-free survival by independent review |
| End point description: | |
| Time from date of randomization to the first documentation of disease progression by independent review or to death due to any cause, whichever comes first. | |
| End point type | Primary |
| End point timeframe: | |
| Up to approximately 4 years | |

| End point values | Brentuximab vedotin | Placebo | | |
|----------------------------------|---------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 165 ^[1] | 164 ^[2] | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 42.9 (30.4 to 42.9) | 24.1 (11.5 to 999) | | |

Notes:

[1] - Intention-to-treat

[2] - 999 = Not available (follow-up is not long enough to assess an upper bound)

Statistical analyses

| | |
|--|---|
| Statistical analysis title | Progression-free survival by independent review |
| Statistical analysis description: | |
| The primary analysis of PFS used a stratified log-rank test at a one-sided alpha level of 0.025. A stratified Cox regression model was used to estimate the HR and the corresponding 95% CI for the treatment effect. An HR <1 indicates that the duration of PFS is prolonged for patients on the | |

brentuximab vedotin arm compared with patients on the placebo arm. The median PFS and its two-sided 95% CI for the median was calculated using the complementary log-log transformation method (Collett 1994).

| | |
|---|-------------------------------|
| Comparison groups | Brentuximab vedotin v Placebo |
| Number of subjects included in analysis | 329 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | = 0.0013 |
| Method | Mantel-Haenszel |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 0.571 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.404 |
| upper limit | 0.808 |
| Variability estimate | Standard deviation |

Secondary: Adverse events

| | |
|---|----------------|
| End point title | Adverse events |
| End point description: | |
| Counts of participants who had treatment-emergent adverse events, defined as newly occurring (not present at baseline) or worsening after first dose of study drug. Relatedness to study drug was assessed by the investigator. Serious adverse events are reported from the time of informed consent. All events are from study day 1 pre-dose to the end of the safety reporting period. Participants with multiple occurrences of an adverse event within a category are counted once within the category. | |
| End point type | Secondary |
| End point timeframe: | |
| Up to 12 months | |

| End point values | BV Arm - Safety Analysis Set | Placebo Arm - Safety Analysis Set | | |
|----------------------------------|------------------------------------|---|--|--|
| Subject group type | Subject analysis set | Subject analysis set | | |
| Number of subjects analysed | 167 | 160 | | |
| Units: Number of participants | | | | |
| Any AE | 163 | 142 | | |
| Treatment-related AE | 147 | 79 | | |
| AE >=Grade 3 | 93 | 51 | | |
| Any SAE | 41 | 20 | | |
| Any treatment-related SAE | 19 | 7 | | |
| Discontinued treatment due to AE | 54 | 10 | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Incidence of anti-therapeutic antibodies (ATA) to brentuximab vedotin

| | |
|-----------------|---|
| End point title | Incidence of anti-therapeutic antibodies (ATA) to brentuximab vedotin |
|-----------------|---|

End point description:

Counts of participants with anti-brentuximab vedotin antibodies at any time during treatment.

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

End point timeframe:

Up to 12 months

| End point values | Brentuximab vedotin | Placebo | | |
|--|---------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 157 ^[3] | 154 ^[4] | | |
| Units: Number of participants | | | | |
| Baseline (BL) negative | 138 | 142 | | |
| - BL negative, negative post-BL | 92 | 104 | | |
| - BL negative, transiently positive post-BL | 36 | 27 | | |
| - BL negative, persistently positive post-BL | 10 | 11 | | |
| Baseline (BL) positive | 19 | 12 | | |
| - BL positive, negative post-BL | 7 | 0 | | |
| - BL positive, transiently positive post-BL | 9 | 5 | | |
| - BL positive, persistently positive post-BL | 3 | 7 | | |

Notes:

[3] - ATA-evaluable patients (i.e., patients with a baseline and at least one postbaseline sample)

[4] - ATA-evaluable patients (i.e., patients with a baseline and at least one postbaseline sample)

Statistical analyses

No statistical analyses for this end point

Secondary: Overall Survival

| | |
|-----------------|------------------|
| End point title | Overall Survival |
|-----------------|------------------|

End point description:

Time from date of randomization to date of death due to any cause.

Due to patients lost to follow up, patient withdrawal of consent and post ASCT therapies; there were less deaths on study than anticipated. Therefore, median OS was not reached. '999' is listed in lieu of "NA" due to requirement for numerical entry.

Full Observed Range:

Brentuximab Vedotin Arm: 1.31 to 117.88 months

Placebo Arm: 0.03 to 119.23 months

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

End point timeframe:

Up to approximately 10 years

| End point values | Brentuximab vedotin | Placebo | | |
|-----------------------------|------------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 165 | 164 | | |
| Units: months | 999 | 999 | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

Non-serious adverse events were followed for up to 15 months. Serious adverse event data were collected for up to approximately 10 years (116 months).

Adverse event reporting additional description:

Treatment-emergent adverse events (TEAEs) defined as newly occurring (not present at baseline) or worsening after first dose of investigational product on Study SGN35-005

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

Dictionary used

| | |
|-----------------|--------|
| Dictionary name | MedDRA |
|-----------------|--------|

| | |
|--------------------|------|
| Dictionary version | 23.0 |
|--------------------|------|

Reporting groups

| | |
|-----------------------|---------|
| Reporting group title | Placebo |
|-----------------------|---------|

Reporting group description:

placebo every 3 weeks by IV infusion

| | |
|-----------------------|---------------------|
| Reporting group title | Brentuximab Vedotin |
|-----------------------|---------------------|

Reporting group description:

brentuximab vedotin 1.8 mg/kg every 3 weeks by IV infusion

| Serious adverse events | Placebo | Brentuximab Vedotin | |
|---|-------------------|---------------------|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 21 / 160 (13.13%) | 43 / 167 (25.75%) | |
| number of deaths (all causes) | 2 | 4 | |
| number of deaths resulting from adverse events | 1 | 2 | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Bladder cancer | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Acute myeloid leukaemia | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 1 | |
| Mantle cell lymphoma | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|--|-----------------|-----------------|--|
| Myelodysplastic syndrome | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 2 / 2 | 2 / 2 | |
| deaths causally related to treatment / all | 1 / 1 | 1 / 1 | |
| Anogenital warts | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Brain neoplasm | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Metastases to spine | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vascular disorders | | | |
| Pelvic venous thrombosis | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypotension | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| General disorders and administration site conditions | | | |
| Asthenia | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 5 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Disease progression | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Pyrexia | | | |
| subjects affected / exposed | 2 / 160 (1.25%) | 6 / 167 (3.59%) | |
| occurrences causally related to treatment / all | 0 / 5 | 6 / 11 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Acute respiratory distress syndrome | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 2 / 167 (1.20%) | |
| occurrences causally related to treatment / all | 0 / 4 | 3 / 5 | |
| deaths causally related to treatment / all | 0 / 1 | 1 / 2 | |
| Asthma | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 3 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Bronchospasm | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Idiopathic pneumonia syndrome | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lung infiltration | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonitis | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 2 / 167 (1.20%) | |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pulmonary embolism | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Pulmonary toxicity | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Psychiatric disorders | | | |
| Anxiety | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Depression | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Depression suicidal | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Suicidal ideation | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Investigations | | | |
| Blood bilirubin increased | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (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 | | | |
| Radiation myelopathy | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac disorders | | | |
| Bradycardia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac failure congestive | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Myocardial infarction | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pericardial effusion | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 2 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Sinus tachycardia | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nervous system disorders | | | |
| Basilar migraine | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Posterior reversible encephalopathy syndrome | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Headache | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 2 / 167 (1.20%) | |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Neuralgia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Peripheral motor neuropathy | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Peripheral sensory neuropathy | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 3 / 167 (1.80%) | |
| occurrences causally related to treatment / all | 0 / 0 | 13 / 13 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Presyncope | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Syncope | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Blood and lymphatic system disorders | | | |
| Bone marrow failure | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Neutropenia | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 1 / 1 | 2 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Thrombocytopenia | | | |
| subjects affected / exposed | 2 / 160 (1.25%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 9 / 9 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal disorders | | | |

| | | | |
|---|-----------------|-----------------|--|
| Abdominal pain | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Constipation | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 2 / 167 (1.20%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diarrhoea | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Epigastric discomfort | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Erosive duodenitis | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal haemorrhage | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nausea | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 4 / 167 (2.40%) | |
| occurrences causally related to treatment / all | 0 / 2 | 3 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pancreatitis acute | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vomiting | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 160 (0.63%) | 5 / 167 (2.99%) | |
| occurrences causally related to treatment / all | 0 / 2 | 4 / 7 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatobiliary disorders | | | |
| Hepatotoxicity | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 3 / 167 (1.80%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 12 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Skin and subcutaneous tissue disorders | | | |
| Pruritus | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rash | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dermatitis allergic | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 2 / 167 (1.20%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Musculoskeletal and connective tissue disorders | | | |
| Bone pain | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Infections and infestations | | | |
| Acute hepatitis b | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Complicated appendicitis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatic candidiasis | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Herpes zoster | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 2 / 167 (1.20%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumocystis jirovecii pneumonia | | | |
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonia | | | |
| subjects affected / exposed | 4 / 160 (2.50%) | 7 / 167 (4.19%) | |
| occurrences causally related to treatment / all | 0 / 7 | 4 / 9 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Septic shock | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Sinusitis | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 0 / 167 (0.00%) | |
| occurrences causally related to treatment / all | 2 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Upper respiratory tract infection | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metabolism and nutrition disorders | | | |
| Hyperglycaemia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 160 (0.00%) | 1 / 167 (0.60%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

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

| Non-serious adverse events | Placebo | Brentuximab Vedotin | |
|---|--------------------|---------------------|--|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 127 / 160 (79.38%) | 151 / 167 (90.42%) | |
| Vascular disorders | | | |
| Hypotension | | | |
| subjects affected / exposed | 4 / 160 (2.50%) | 9 / 167 (5.39%) | |
| occurrences (all) | 7 | 10 | |
| General disorders and administration site conditions | | | |
| Asthenia | | | |
| subjects affected / exposed | 7 / 160 (4.38%) | 13 / 167 (7.78%) | |
| occurrences (all) | 10 | 13 | |
| Chills | | | |
| subjects affected / exposed | 8 / 160 (5.00%) | 17 / 167 (10.18%) | |
| occurrences (all) | 8 | 21 | |
| Fatigue | | | |
| subjects affected / exposed | 29 / 160 (18.13%) | 40 / 167 (23.95%) | |
| occurrences (all) | 34 | 68 | |
| Non-cardiac chest pain | | | |
| subjects affected / exposed | 9 / 160 (5.63%) | 6 / 167 (3.59%) | |
| occurrences (all) | 10 | 8 | |
| Oedema peripheral | | | |
| subjects affected / exposed | 10 / 160 (6.25%) | 8 / 167 (4.79%) | |
| occurrences (all) | 14 | 12 | |
| Pain | | | |
| subjects affected / exposed | 5 / 160 (3.13%) | 11 / 167 (6.59%) | |
| occurrences (all) | 5 | 19 | |
| Pyrexia | | | |
| subjects affected / exposed | 23 / 160 (14.38%) | 27 / 167 (16.17%) | |
| occurrences (all) | 37 | 49 | |
| Respiratory, thoracic and mediastinal | | | |

| | | | |
|-----------------------------|-------------------|-------------------|--|
| disorders | | | |
| Cough | | | |
| subjects affected / exposed | 26 / 160 (16.25%) | 35 / 167 (20.96%) | |
| occurrences (all) | 33 | 43 | |
| Dyspnoea | | | |
| subjects affected / exposed | 10 / 160 (6.25%) | 21 / 167 (12.57%) | |
| occurrences (all) | 11 | 34 | |
| Oropharyngeal pain | | | |
| subjects affected / exposed | 8 / 160 (5.00%) | 8 / 167 (4.79%) | |
| occurrences (all) | 10 | 9 | |
| Psychiatric disorders | | | |
| Anxiety | | | |
| subjects affected / exposed | 13 / 160 (8.13%) | 14 / 167 (8.38%) | |
| occurrences (all) | 14 | 15 | |
| Insomnia | | | |
| subjects affected / exposed | 5 / 160 (3.13%) | 14 / 167 (8.38%) | |
| occurrences (all) | 5 | 15 | |
| Investigations | | | |
| Weight decreased | | | |
| subjects affected / exposed | 9 / 160 (5.63%) | 31 / 167 (18.56%) | |
| occurrences (all) | 10 | 64 | |
| Weight increased | | | |
| subjects affected / exposed | 14 / 160 (8.75%) | 5 / 167 (2.99%) | |
| occurrences (all) | 28 | 5 | |
| Cardiac disorders | | | |
| Sinus tachycardia | | | |
| subjects affected / exposed | 3 / 160 (1.88%) | 9 / 167 (5.39%) | |
| occurrences (all) | 3 | 10 | |
| Nervous system disorders | | | |
| Headache | | | |
| subjects affected / exposed | 13 / 160 (8.13%) | 19 / 167 (11.38%) | |
| occurrences (all) | 18 | 31 | |
| Paraesthesia | | | |
| subjects affected / exposed | 2 / 160 (1.25%) | 16 / 167 (9.58%) | |
| occurrences (all) | 2 | 33 | |
| Peripheral motor neuropathy | | | |

| | | | |
|---|-------------------------|--------------------------|--|
| subjects affected / exposed occurrences (all) | 3 / 160 (1.88%) 3 | 37 / 167 (22.16%) 39 | |
| Peripheral sensory neuropathy subjects affected / exposed occurrences (all) | 25 / 160 (15.63%) 32 | 92 / 167 (55.09%) 220 | |
| Blood and lymphatic system disorders | | | |
| Anaemia subjects affected / exposed occurrences (all) | 4 / 160 (2.50%) 11 | 14 / 167 (8.38%) 36 | |
| Leukopenia subjects affected / exposed occurrences (all) | 3 / 160 (1.88%) 7 | 9 / 167 (5.39%) 18 | |
| Neutropenia subjects affected / exposed occurrences (all) | 18 / 160 (11.25%) 36 | 58 / 167 (34.73%) 163 | |
| Thrombocytopenia subjects affected / exposed occurrences (all) | 3 / 160 (1.88%) 7 | 12 / 167 (7.19%) 39 | |
| Gastrointestinal disorders | | | |
| Abdominal pain subjects affected / exposed occurrences (all) | 5 / 160 (3.13%) 7 | 20 / 167 (11.98%) 30 | |
| Constipation subjects affected / exposed occurrences (all) | 5 / 160 (3.13%) 5 | 20 / 167 (11.98%) 27 | |
| Diarrhoea subjects affected / exposed occurrences (all) | 15 / 160 (9.38%) 25 | 33 / 167 (19.76%) 47 | |
| Dyspepsia subjects affected / exposed occurrences (all) | 6 / 160 (3.75%) 6 | 11 / 167 (6.59%) 17 | |
| Nausea subjects affected / exposed occurrences (all) | 12 / 160 (7.50%) 18 | 34 / 167 (20.36%) 61 | |
| Vomiting | | | |

| | | | |
|--|------------------------|-------------------------|--|
| subjects affected / exposed occurrences (all) | 11 / 160 (6.88%) 14 | 24 / 167 (14.37%) 35 | |
| Skin and subcutaneous tissue disorders | | | |
| Dry skin | | | |
| subjects affected / exposed | 7 / 160 (4.38%) | 10 / 167 (5.99%) | |
| occurrences (all) | 9 | 10 | |
| Night sweats | | | |
| subjects affected / exposed | 18 / 160 (11.25%) | 12 / 167 (7.19%) | |
| occurrences (all) | 19 | 13 | |
| Pruritus | | | |
| subjects affected / exposed | 14 / 160 (8.75%) | 22 / 167 (13.17%) | |
| occurrences (all) | 18 | 40 | |
| Rash | | | |
| subjects affected / exposed | 5 / 160 (3.13%) | 14 / 167 (8.38%) | |
| occurrences (all) | 6 | 22 | |
| Musculoskeletal and connective tissue disorders | | | |
| Arthralgia | | | |
| subjects affected / exposed | 15 / 160 (9.38%) | 30 / 167 (17.96%) | |
| occurrences (all) | 16 | 42 | |
| Back pain | | | |
| subjects affected / exposed | 16 / 160 (10.00%) | 15 / 167 (8.98%) | |
| occurrences (all) | 17 | 22 | |
| Muscle spasms | | | |
| subjects affected / exposed | 9 / 160 (5.63%) | 18 / 167 (10.78%) | |
| occurrences (all) | 10 | 20 | |
| Muscular weakness | | | |
| subjects affected / exposed | 1 / 160 (0.63%) | 8 / 167 (4.79%) | |
| occurrences (all) | 2 | 10 | |
| Myalgia | | | |
| subjects affected / exposed | 7 / 160 (4.38%) | 15 / 167 (8.98%) | |
| occurrences (all) | 7 | 17 | |
| Pain in extremity | | | |
| subjects affected / exposed | 8 / 160 (5.00%) | 11 / 167 (6.59%) | |
| occurrences (all) | 9 | 12 | |
| Infections and infestations | | | |

| | | | |
|------------------------------------|-------------------|-------------------|--|
| Bronchitis | | | |
| subjects affected / exposed | 10 / 160 (6.25%) | 10 / 167 (5.99%) | |
| occurrences (all) | 13 | 10 | |
| Herpes zoster | | | |
| subjects affected / exposed | 3 / 160 (1.88%) | 10 / 167 (5.99%) | |
| occurrences (all) | 3 | 12 | |
| Pharyngitis | | | |
| subjects affected / exposed | 4 / 160 (2.50%) | 8 / 167 (4.79%) | |
| occurrences (all) | 4 | 10 | |
| Sinusitis | | | |
| subjects affected / exposed | 10 / 160 (6.25%) | 4 / 167 (2.40%) | |
| occurrences (all) | 10 | 6 | |
| Upper respiratory tract infection | | | |
| subjects affected / exposed | 37 / 160 (23.13%) | 43 / 167 (25.75%) | |
| occurrences (all) | 57 | 68 | |
| Metabolism and nutrition disorders | | | |
| Decreased appetite | | | |
| subjects affected / exposed | 9 / 160 (5.63%) | 20 / 167 (11.98%) | |
| occurrences (all) | 9 | 25 | |
| Hypokalaemia | | | |
| subjects affected / exposed | 6 / 160 (3.75%) | 10 / 167 (5.99%) | |
| occurrences (all) | 6 | 19 | |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|------------------|--|
| 21 October 2009 | The sample size was increased to 322 patients to enable detection of a hazard ratio of 0.667 in favor of brentuximab vedotin. Based on regulatory guidance, more frequent CT scanning and lymphoma assessments were incorporated to better characterize the primary endpoint of PFS. To better inform patient care after disease progression, the protocol was revised to allow unblinding of a patient's treatment assignment once disease progression had occurred. Investigator assessment of response to prior salvage therapy was added as a stratification factor to ensure that patients with different outcomes to salvage therapy were equally distributed between the treatment arms. Based on regulatory and investigator guidance and because of the blinded nature of the study, the prospective pathology review for confirmation of HL was removed. |
| 16 August 2010 | Administration of the EQ-5D health questionnaire and collection of MRU data was added to conduct exploratory health economics and outcomes research. A recommendation was added such that patients who experienced Grade 2 neuropathy were to resume treatment at 1.2 mg/kg to minimize additional or worsening events of neuropathy. The follow-up period for events of peripheral neuropathy and other AEs of interest was extended beyond the 30-day post-treatment reporting period to better characterize their resolution. |
| 03 October 2011 | The eligibility criteria were clarified to ensure exclusion of patients with PML. In addition, information and guidance were provided on the signs and symptoms of PML and diagnostic work-up/recommendations for suspending or discontinuing treatment with brentuximab vedotin in the event of PML. |
| 29 November 2011 | The safety assessments section was revised to better define the different subcategories of adverse events and provide guidance on their relative safety reporting periods; and to clarify sponsor safety reporting requirements in the US. The study assessments section was revised to require that any CT scans performed as standard of care after the 24-month scan were submitted for central review and study visits for patients who discontinued treatment before 16 cycles included all required assessments including CT scans and lymphoma assessments. |
| 07 June 2012 | The procedure for emergency unblinding was revised to allow investigators who needed treatment assignment information (for safety reasons or for clinical decision-making) to directly obtain treatment assignment information through the IWRS without having to first contact the sponsor. This change was made to better align with the recommendations of the EMA GCP Inspector's Working Group and Clinical Trial Facilitation Group. |
| 13 December 2013 | The timing of the primary efficacy analysis was changed after an evaluation of blinded, pooled PFS data from the current study showed a flattening of the PFS curve after 24 months; thus, it was unlikely that additional follow up after 24 months would provide significant additional events. The primary efficacy analysis was therefore changed to occur after all study scheduled CT scans had been performed. At this time, all patients had been off therapy for at least one year. The IDMC was consulted regarding this change to the primary analysis and they agreed that the scientific integrity of the study should remain intact. |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported