



## Clinical trial results:

### A Randomized, Open-Label, Phase 3 Trial of Brentuximab Vedotin (SGN-35) Versus Physician's Choice (Methotrexate or Bexarotene) in Patients With CD30-Positive Cutaneous T-Cell Lymphoma

#### Summary

EudraCT number	2010-024215-14
Trial protocol	BE GB ES DE AT IT PL
Global end of trial date	

#### Results information

Result version number	v1
This version publication date	07 January 2018
First version publication date	07 January 2018

#### Trial information

##### Trial identification

Sponsor protocol code	C25001
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT01578499
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	Takeda Oncology
Sponsor organisation address	40 Lansdowne Street, Cambridge MA, United States, 02139
Public contact	Medical Director, Takeda, +1 877-825-3327, clinicaltrialregistry@tpna.com
Scientific contact	Medical Director, Takeda, +1 877-825-3327, clinicaltrialregistry@tpna.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	Interim
Date of interim/final analysis	31 May 2016
Is this the analysis of the primary completion data?	Yes
Primary completion date	31 May 2016
Global end of trial reached?	No

Notes:

## General information about the trial

Main objective of the trial:

The purpose of this study is to determine ORR, lasting at least 4 months (ORR4), with brentuximab vedotin in participants with CD30+ MF or pcALCL compared to that achieved with therapy in the control arm.

Protection of trial subjects:

All study participants were required to read and sign an Informed Consent Form.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	11 June 2012
Long term follow-up planned	Yes
Long term follow-up rationale	Efficacy
Long term follow-up duration	24 Months
Independent data monitoring committee (IDMC) involvement?	No

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	Australia: 20
Country: Number of subjects enrolled	Belgium: 6
Country: Number of subjects enrolled	Brazil: 4
Country: Number of subjects enrolled	France: 7
Country: Number of subjects enrolled	Germany: 5
Country: Number of subjects enrolled	Italy: 18
Country: Number of subjects enrolled	Poland: 3
Country: Number of subjects enrolled	Spain: 5
Country: Number of subjects enrolled	Switzerland: 6
Country: Number of subjects enrolled	United Kingdom: 24
Country: Number of subjects enrolled	United States: 33
Worldwide total number of subjects	131
EEA total number of subjects	68

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)	79
From 65 to 84 years	52
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details:

Participants took part in the study at 34 investigative sites in Australia, Belgium, Brazil, France, Germany, Italy, Poland, Spain, Switzerland, United Kingdom, United States from 11 June 2012 to the Primary Completion data of 31 May 2016. The study is ongoing.

### Pre-assignment

Screening details:

Participants with a diagnosis of CD30-Positive Cutaneous T-Cell Lymphoma were enrolled equally in 1 of 2 arms: brentuximab vedotin 1.8 mg/kg or physician's choice (Methotrexate or Bexarotene).

### Pre-assignment period milestones

Number of subjects started	131
Number of subjects completed	128

### Pre-assignment subject non-completion reasons

Reason: Number of subjects	Did not Receive Study Drug: 3
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### Period 1

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

### Arms

Are arms mutually exclusive?	Yes
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<b>Arm title</b>	Brentuximab vedotin
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Arm description:

Brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).

Arm type	Experimental
Investigational medicinal product name	Brentuximab vedotin
Investigational medicinal product code	
Other name	SGN-35
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Participants received 1.8 milligram per kilogram (mg/kg) intravenous (IV) infusion over approximately 30 minutes on Day 1 of each 21-day cycle.

<b>Arm title</b>	Methotrexate or Bexarotene
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Arm description:

Methotrexate 5 to 50 mg, tablets, orally, once weekly (dose adjustment is guided by patient response and toxicity) or Bexarotene 300 mg/m<sup>2</sup>, tablets, orally, once daily with meals for up to 48 weeks.

Arm type	Active comparator
Investigational medicinal product name	Bexarotene
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Capsule, soft
Routes of administration	Oral use

Dosage and administration details:

Participant received single oral daily dose of 300 mg/m<sup>2</sup>/day

Investigational medicinal product name	Methotrexate
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

Participant received a single dose of 5 to 50 mg methotrexate orally once weekly.

<b>Number of subjects in period 1<sup>[1]</sup></b>	Brentuximab vedotin	Methotrexate or Bexarotene
Started	66	62
Completed	0	0
Not completed	66	62
Adverse event, serious fatal	11	14
Withdrawal by Participant	8	7
Participants in Follow-up	42	39
Participants on Study Treatment	3	-
Lost to follow-up	2	1
Reason not Specified	-	1

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: The number of subjects reported to be in the baseline period is based on the Safety Population that included all participants who received at least one dose of study drug.

## Baseline characteristics

### Reporting groups

Reporting group title	Brentuximab vedotin
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Reporting group description:

Brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).

Reporting group title	Methotrexate or Bexarotene
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Reporting group description:

Methotrexate 5 to 50 mg, tablets, orally, once weekly (dose adjustment is guided by patient response and toxicity) or Bexarotene 300 mg/m<sup>2</sup>, tablets, orally, once daily with meals for up to 48 weeks.

Reporting group values	Brentuximab vedotin	Methotrexate or Bexarotene	Total
Number of subjects	66	62	128
Age categorical			
Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	38	39	77
From 65-84 years	28	23	51
85 years and over	0	0	0
Age Continuous			
Units: years			
arithmetic mean	59.4	56.6	
standard deviation	± 13.80	± 14.43	-
Gender, Male/Female			
Units: Subjects			
Female	33	28	61
Male	33	34	67

## End points

### End points reporting groups

Reporting group title	Brentuximab vedotin
Reporting group description: Brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).	
Reporting group title	Methotrexate or Bexarotene
Reporting group description: Methotrexate 5 to 50 mg, tablets, orally, once weekly (dose adjustment is guided by patient response and toxicity) or Bexarotene 300 mg/m <sup>2</sup> , tablets, orally, once daily with meals for up to 48 weeks.	
Subject analysis set title	pcALCL: Brentuximab vedotin
Subject analysis set type	Sub-group analysis
Subject analysis set description: Participants with pcALCL received brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).	
Subject analysis set title	MF: Brentuximab vedotin 1.8 mg/kg
Subject analysis set type	Sub-group analysis
Subject analysis set description: Participants with MF received brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).	
Subject analysis set title	Brentuximab vedotin
Subject analysis set type	Intention-to-treat
Subject analysis set description: Brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).	
Subject analysis set title	Methotrexate or Bexarotene
Subject analysis set type	Intention-to-treat
Subject analysis set description: Methotrexate 5 to 50 mg, tablets, orally, once weekly (dose adjustment is guided by patient response and toxicity) or Bexarotene 300 mg/m <sup>2</sup> , tablets, orally, once daily with meals for up to 48 weeks.	

### Primary: Percentage of Participants Achieving an Objective Response that Lasts at Least 4 Months

End point title	Percentage of Participants Achieving an Objective Response that Lasts at Least 4 Months
End point description: ORR4 was determined by an Independent Review Facility (IRF) based on Global Response Score (GRS) which consisted of a skin assessment by the investigator using the modified severity-weighted assessment tool (mSWAT), nodal and visceral radiographic assessment by an IRF and for the participants with mycosis fungoides (MF) only, detection of circulation Sezary cells. Participants whose first response occurred after the start of subsequent anticancer therapy were excluded. Response Criteria was based on International Society for Cutaneous Lymphomas (ISCL), United States Cutaneous Lymphoma Consortium (USCLC) and Cutaneous Lymphoma Task Force (CLTF) of the European Organisation for Research and Treatment of Cancer (EORTC) Consensus guidelines (Olsen, 2011). The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment.	
End point type	Primary
End point timeframe: Each Cycle until disease progression, death or data cutoff (Median overall follow-up 22.9 months)	

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	64	64		
Units: percentage of participants				
number (confidence interval 95%)	56.3 (44.1 to 68.4)	12.5 (4.4 to 20.6)		

## Statistical analyses

Statistical analysis title	Statistical Analysis 1
Comparison groups	Brentuximab vedotin v Methotrexate or Bexarotene
Number of subjects included in analysis	128
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.001 <sup>[1]</sup>
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	43.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	29.1
upper limit	58.4

Notes:

[1] - P-value was stratified by baseline disease diagnosis (pcALCL and MF).

## Secondary: Percentage of Participants achieving a CR

End point title	Percentage of Participants achieving a CR
End point description:	Complete Response (CR) was determined by the IRF based on Global Response Score (GRS) which consisted of a skin assessment by the investigator using the modified severity-weighted assessment tool (mSWAT), nodal and visceral radiographic and for the participants with mycosis fungoides (MF) only, detection of circulation Sezary cells. Response Criteria was based on ISCL, USCLC and CLTF of the EORTC Consensus guidelines (Olsen, 2011). The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment.
End point type	Secondary
End point timeframe:	Each Cycle until disease progression, death or data cutoff (Median overall follow-up 22.9 months)

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	64	64		
Units: percentage of participants				
number (confidence interval 95%)	15.6 (7.8 to 26.9)	1.6 (0.0 to 8.4)		



## Statistical analyses

<b>Statistical analysis title</b>	Statistical Analysis 1
Comparison groups	Brentuximab vedotin v Methotrexate or Bexarotene
Number of subjects included in analysis	128
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.0046 <sup>[2]</sup>
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	14.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4
upper limit	31.5

Notes:

[2] - P-value was stratified by baseline disease diagnosis (pcALCL and MF).

## Secondary: Progression-Free Survival (PFS)

End point title	Progression-Free Survival (PFS)
End point description:	
PFS was assessed by the IRF and is defined as the time from randomization until disease progression or death due to any cause, whichever occurs first. Disease progression was based on ISCL, USCLC and CLTF of the EORTC Consensus guidelines (Olsen, 2011). The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment.	
End point type	Secondary
End point timeframe:	
Until disease progression, death or data cutoff (Median PFS follow-up of 17.5 months)	

<b>End point values</b>	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	64	64		
Units: months				
median (confidence interval 95%)	16.7 (14.9 to 22.8)	3.5 (2.4 to 4.6)		

## Statistical analyses

**Secondary: Maximum Change from Baseline in Symptom Domain Score of the Skindex-29 Questionnaire**

End point title	Maximum Change from Baseline in Symptom Domain Score of the Skindex-29 Questionnaire
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## End point description:

Skindex-29 is a 29-item dermatology-specific health-related quality of life (HRQoL). The Skindex-29 incorporates a 28-day recall period and consists of 3 domains: symptoms, emotions, and functioning. The domain scores and an overall score are expressed on a 100-point scale, from 0 to 100 with higher scores indicating lower levels of health- HRQoL. A negative change (reduction) from Baseline indicates improvement. The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment. Here number of participants analyzed are participants evaluable for this outcome measure.

End point type	Secondary
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## End point timeframe:

Baseline up to End of Treatment (Week 52)

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	58	54		
Units: score on a scale				
arithmetic mean (standard deviation)	-27.96 ( $\pm$ 26.877)	-8.62 ( $\pm$ 17.013)		

**Statistical analyses**

Statistical analysis title	Statistical Analysis 1
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## Statistical analysis description:

P-value is calculated using the analysis of covariance (ANCOVA) model controlling for baseline symptom domain score, eastern cooperative oncology group (ECOG) performance status score ( $=0$  and  $\geq 1$ ), and disease diagnosis (pcALCL and MF) between the brentuximab vedotin and comparator (methotrexate or bexarotene) arms.

Comparison groups	Brentuximab vedotin v Methotrexate or Bexarotene
Number of subjects included in analysis	112
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.001
Method	ANCOVA
Parameter estimate	Estimate of difference
Point estimate	-18.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	-26.6
upper limit	-11.2

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**Secondary: Duration of Response (DOR)**

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End point title	Duration of Response (DOR)
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End point description:

Duration of response was assessed by the IRF in participants with confirmed response [CR or Partial Response (PR)] and is defined as the time between first documentation of response and disease progression. Response Criteria was based on ISCL, USCLC and CLTF of the EORTC Consensus guidelines (Olsen, 2011). The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment. Responders in ITT population were analyzed in this outcome measure.

End point type	Secondary
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End point timeframe:

Until disease progression, death or data cutoff (Median follow-up 22.9 months)

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End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	43	13		
Units: months				
median (confidence interval 95%)	15.1 (9.7 to 25.5)	18.3 (3.5 to 18.4)		

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**Statistical analyses**

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No statistical analyses for this end point

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**Secondary: DOR of Skin Response**

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End point title	DOR of Skin Response
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End point description:

Duration of skin response (CR and PR) was assessed by the investigator and is defined as the time between the first skin response to progressive disease in skin. Per mSWAT, CR is defined as 100% clearance of skin lesions. PR is defined as 50%-99% clearance of skin disease from Baseline; No new tumors in participants without tumors at Baseline -MF; No new tumors-primary cutaneous anaplastic large cell lymphoma (pcALCL). Progressive disease is defined as  $\geq 25\%$  increase in skin disease from baseline, or loss of response: in those with CR or PR, increase of skin score of greater than the sum of nadir plus 50% baseline score, or new tumors in patients without tumors at baseline (MF). The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment. Skin responders in ITT population were analyzed in this outcome measure.

End point type	Secondary
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End point timeframe:

Until disease progression, death or data cutoff (Median follow-up 22.9 months)

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End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	47	19		
Units: months				
median (confidence interval 95%)	20.6 (14.1 to 25.7)	18.3 (3.5 to 18.9)		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Event-Free Survival (EFS)

End point title	Event-Free Survival (EFS)
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End point description:

EFS was assessed by the IRF and is defined as the time from randomization until any cause of treatment failure: disease progression, discontinuation of treatment for any reason, or death due to any cause, whichever occurs first. Disease progression was based on ISCL, USCLC and CLTF of the EORTC Consensus guidelines (Olsen, 2011). The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment.

End point type	Secondary
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End point timeframe:

From randomization until disease progression, death or data cutoff (Median follow-up 26.1 months)

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	64	64		
Units: months				
median (full range (min-max))	9.4 (5.9 to 11.7)	2.3 (1.7 to 3.5)		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Cmax: Maximum Observed Concentration for Brentuximab Vedotin

End point title	Cmax: Maximum Observed Concentration for Brentuximab Vedotin
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End point description:

The pharmacokinetic (PK) population included participants with sufficient dose and PK data to reliably estimate PK parameters as determined by a clinical pharmacologist. Here 'Number analyzed' is the number of participants with evaluable data at the specified time-point.

End point type	Secondary
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End point timeframe:

Day 1 pre-dose and 30 minutes after infusion in Cycles 1 and 3

End point values	pcALCL: Brentuximab vedotin	MF: Brentuximab vedotin 1.8 mg/kg		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	16	50		
Units: ug/mL				
arithmetic mean (standard deviation)				
Cycle 1 Day 1 (n= 15, 50)	38.36 (± 9.427)	38.40 (± 8.912)		
Cycle 3 Day 1 (n= 12, 41)	40.14 (± 12.697)	36.69 (± 14.249)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Ctrough: Observed Concentration at the End of a Dosing Interval for Brentuximab Vedotin

End point title	Ctrough: Observed Concentration at the End of a Dosing Interval for Brentuximab Vedotin
End point description: The PK population included participants with sufficient dose and PK data to reliably estimate PK parameters as determined by a clinical pharmacologist. Here 'Number analyzed' is the number of participants with evaluable data at the specified time-point.	
End point type	Secondary
End point timeframe: Day 1 pre-dose of Cycles 2 and 4	

End point values	pcALCL: Brentuximab vedotin	MF: Brentuximab vedotin 1.8 mg/kg		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	16	50		
Units: ug/mL				
arithmetic mean (standard deviation)				
Cycle 2 Day 1 (n= 11, 31)	3.57 (± 10.101)	0.58 (± 0.517)		
Cycle 4 Day 1 (n= 8, 28)	0.99 (± 0.528)	0.78 (± 0.446)		

### Statistical analyses

No statistical analyses for this end point

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**Secondary: Cmax: Maximum Observed Concentration for Monomethyl Auristatin (MMAE) for Brentuximab Vedotin**

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End point title	Cmax: Maximum Observed Concentration for Monomethyl Auristatin (MMAE) for Brentuximab Vedotin
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End point description:

The PK population included participants with sufficient dose and PK data to reliably estimate PK parameters as determined by a clinical pharmacologist. Here 'Number analyzed' is the number of participants with evaluable data at the specified time-point.

End point type	Secondary
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End point timeframe:

Day 1 pre-dose and 30 minutes after infusion ended in Cycles 1 and 3

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End point values	pcALCL: Brentuximab vedotin	MF: Brentuximab vedotin 1.8 mg/kg		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	16	50		
Units: ng/mL				
arithmetic mean (standard deviation)				
Cycle 1 Day 1 (n= 13, 46)	2.53 (± 1.382)	3.34 (± 1.901)		
Cycle 3 Day 1 (n= 12, 36)	2.96 (± 1.176)	3.08 (± 1.276)		

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**Statistical analyses**

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No statistical analyses for this end point

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**Secondary: Ctrough: Observed Concentration at the End of a Dosing Interval for MMAE for Brentuximab Vedotin**

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End point title	Ctrough: Observed Concentration at the End of a Dosing Interval for MMAE for Brentuximab Vedotin
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End point description:

The PK population included participants with sufficient dose and PK data to reliably estimate PK parameters as determined by a clinical pharmacologist. Here 'Number analyzed' is the number of participants with evaluable data at the specified time-point.

End point type	Secondary
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End point timeframe:

Day 1 pre-dose of Cycles 2 and 4

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End point values	pcALCL: Brentuximab vedotin	MF: Brentuximab vedotin 1.8 mg/kg		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	16	50		
Units: ng/mL				
arithmetic mean (standard deviation)				
Cycle 2 Day 1 (n= 11, 33)	0.11 (± 0.095)	0.09 (± 0.060)		
Cycle 4 Day 1 (n= 10, 34)	0.14 (± 0.113)	0.11 (± 0.091)		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Participants with Antitherapeutic Antibodies (ATA) to Brentuximab Vedotin

End point title	Number of Participants with Antitherapeutic Antibodies (ATA) to Brentuximab Vedotin
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End point description:

Blood was collected and evaluated for ATA and neutralizing ATA in all participants who received brentuximab vedotin to assess immunogenicity. The Safety population included participants who received at least one dose of study drug.

End point type	Secondary
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End point timeframe:

Baseline up to End of Treatment (Week 52)

End point values	pcALCL: Brentuximab vedotin	MF: Brentuximab vedotin 1.8 mg/kg		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	16	50		
Units: participants				
Immunogenicity-evaluable participants	14	46		
Baseline Negative: ATA negative	8	23		
Baseline Negative: ATA positive	6	19		
Baseline Negative: Transiently Positive	4	9		
Baseline Negative: Persistently Positive	2	10		
Baseline Negative: Neutralizing ATA Positive	4	14		
Baseline Positive: ATA Negative	0	1		
Baseline Positive: ATA Positive	0	3		
Baseline Positive: Transiently Positive	0	3		
Baseline Positive: Persistently Positive	0	0		
Baseline Positive: Neutralizing ATA Positive	0	2		

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change from Baseline in the Skindex-29 Questionnaire Total Score

End point title	Change from Baseline in the Skindex-29 Questionnaire Total Score
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End point description:

Skindex-29 is a 29-item dermatology-specific health-related quality of life (HRQoL). The Skindex-29 incorporates a 28-day recall period and consists of 3 domains: symptoms, emotions, and functioning. The domain scores and an overall score are expressed on a 100-point scale, 0 to 100 with higher scores indicating lower levels of health- HRQoL. A negative change (reduction) from Baseline indicates improvement. The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment. Here 'Number analyzed' is the number of participants with evaluable data at the specified time-point.

End point type	Secondary
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End point timeframe:

Day 1 of Cycles 1, 2, 4, 6, 8, 10, 12, 14, 16, at EOT and during posttreatment long treatment follow-up (LTFU) - (Median follow-up 22.9 months)

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	64	64		
Units: score on a scale				
arithmetic mean (standard deviation)				
Change at Cycle 2 (n= 55, 45)	-5.44 (± 11.055)	-2.49 (± 11.959)		
Change at Cycle 4 (n= 49, 30)	-14.60 (± 17.488)	-6.71 (± 9.755)		
Change at Cycle 6 (n= 40, 25)	-17.59 (± 17.770)	-5.40 (± 9.758)		
Change at Cycle 8 (n= 37, 14)	-21.73 (± 18.882)	-7.28 (± 16.769)		
Change at Cycle 10 (n= 35, 13)	-22.47 (± 21.722)	-3.71 (± 21.752)		
Change at Cycle 12 (n= 25, 8)	-23.37 (± 21.555)	-5.22 (± 17.704)		
Change at Cycle 14 (n= 25, 5)	-19.72 (± 20.980)	-7.49 (± 22.463)		
Change at Cycle 16 (n= 20, 3)	-19.31 (± 19.861)	0.75 (± 10.308)		
Change at End of Treatment (n= 44, 37)	-14.84 (± 22.681)	-0.96 (± 18.973)		
Change at 3-6 months LTFU (n= 2, 3)	-1.07 (± 3.704)	-9.48 (± 21.629)		
Change at 6-9 months LTFU (n= 6, 11)	-8.04 (± 8.800)	-9.68 (± 17.789)		



Change at 9-12 months LTFU (n= 6, 10)	-8.74 (± 16.910)	-4.93 (± 14.516)		
Change at 12-15 months LTFU (n= 17, 15)	-18.09 (± 20.161)	-11.35 (± 17.585)		
Change at 15-18 months LTFU (n= 20, 17)	-20.05 (± 17.434)	-8.58 (± 13.294)		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change from Baseline in Functional Assessment of Cancer Therapy General Questionnaire (FACT-G) Score

End point title	Change from Baseline in Functional Assessment of Cancer Therapy General Questionnaire (FACT-G) Score
End point description:	
FACT-G is a 27-item general cancer QOL instrument completed by participants receiving cancer treatment. FACT-G incorporates a 7-day recall period and contains 4 primary subscales: Physical Well-Being (PWB; sum of 7 items, point range 0-28); Social/Family Well-Being (SWB, sum of 7-items, point range 0-28); Emotional Well-Being (EWB; sum of 6-items, point range 0-24); Functional Well-Being (FWB; sum of 7-items, point range 0-28); Fact-G total score=sum of PWB, SWB, EWB, FWB, point range 0-108. Higher scores for the total scales and subscales indicate better quality of life. A negative change (reduction) from Baseline indicates improvement. The ITT population included all participants who were identified as CD30+ by the Ventana anti-CD30 (Ber-H2) assay and were randomized to treatment. Here 'Number analyzed' is the number of participants with evaluable data at the specified time-point.	
End point type	Secondary
End point timeframe:	
Day 1 of Cycles 1, 2, 4, 6, 8, 10, 12, 14, 16, at EOT and during posttreatment (LTFU) - (Median follow-up 22.9 months)	

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	64	64		
Units: score on a scale				
arithmetic mean (standard deviation)				
Change at Cycle 2 (n= 56, 46)	1.43 (± 10.168)	-0.37 (± 11.723)		
Change at Cycle 4 (n= 50, 32)	1.75 (± 12.014)	1.78 (± 10.740)		
Change at Cycle 6 (n= 40, 25)	4.23 (± 14.257)	2.24 (± 13.108)		
Change at Cycle 8 (n= 37, 13)	5.96 (± 16.030)	2.54 (± 10.809)		
Change at Cycle 10 (n= 35, 13)	6.61 (± 16.971)	4.38 (± 15.040)		
Change at Cycle 12 (n= 27, 8)	7.94 (± 18.837)	8.61 (± 21.024)		
Change at Cycle 14 (n= 26, 6)	9.04 (± 14.104)	10.75 (± 13.615)		
Change at Cycle 16 (n= 20, 4)	5.31 (± 9.416)	7.88 (± 23.432)		
Change at End of Treatment (n= 45, 37)	0.15 (± 16.388)	-2.29 (± 17.171)		

Change at 3-6 months LTFU (n= 2, 2)	16.00 (± 18.385)	-2.92 (± 8.367)		
Change at 6-9 months LTFU (n= 6, 12)	-0.19 (± 19.648)	-2.59 (± 12.473)		
Change at 9-12 months LTFU (n= 6, 10)	3.89 (± 19.320)	-5.32 (± 10.555)		
Change at 12-15 months LTFU (n= 20, 16)	8.99 (± 16.114)	0.04 (± 12.272)		
Change at 15-18 months LTFU (n= 16, 16)	3.27 (± 14.116)	3.24 (± 15.681)		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Participants with Adverse Events (AEs) and Serious Adverse Events (SAEs)

End point title	Number of Participants with Adverse Events (AEs) and Serious Adverse Events (SAEs)
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End point description:

AEs and SAEs were assessed according to National Cancer Institute Common Terminology Criteria for Adverse Events (NCI CTCAE) version 4.03. An Adverse Event (AE) is defined as any untoward medical occurrence in a clinical investigation participant administered a drug; it does not necessarily have to have a causal relationship with this treatment. A SAE is any AE that results in death, is life-threatening, requires inpatient hospitalization or prolongation of an existing hospitalization, results in significant disability or incapacity, is a congenital anomaly/birth defect or is a medically important event. The Safety population included participants who received at least one dose of study drug.

End point type	Secondary
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End point timeframe:

First dose of study drug through 30 days after last dose of study drug (Up to 395 days)

End point values	Brentuximab vedotin	Methotrexate or Bexarotene		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	66	62		
Units: participants				
AEs (n= 66, 62)	63	56		
SAEs (n= 66, 62)	19	18		

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

First dose of study drug through 30 days after last dose of study drug (Up to 395 days)

Adverse event reporting additional description:

At each visit the investigator had to document any occurrence of adverse events and abnormal laboratory findings. Any event spontaneously reported by the participant or observed by the investigator was recorded, irrespective of the relation to study treatment.

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	19.0
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### Reporting groups

Reporting group title	Methotrexate or Bexarotene
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Reporting group description:

Methotrexate 5 to 50 mg, tablets, orally, once weekly (dose adjustment is guided by patient response and toxicity) or Bexarotene 300 mg/m<sup>2</sup>, tablets, orally, once daily with meals for up to 48 weeks.

Reporting group title	Brentuximab vedotin
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Reporting group description:

Brentuximab vedotin 1.8 mg/kg, intravenous over approximately 30 minutes, once on Day 1 of each 21-day cycle and may continue as monotherapy for up to a total of 16 cycles (48 weeks).

Serious adverse events	Methotrexate or Bexarotene	Brentuximab vedotin	
Total subjects affected by serious adverse events			
subjects affected / exposed	18 / 62 (29.03%)	19 / 66 (28.79%)	
number of deaths (all causes)	0	4	
number of deaths resulting from adverse events			
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Lymphoma			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Squamous cell carcinoma of skin			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vascular disorders			
Hypotension			

subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
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	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Peripheral vascular disorder			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (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			
Pyrexia			
subjects affected / exposed	4 / 62 (6.45%)	2 / 66 (3.03%)	
occurrences causally related to treatment / all	2 / 6	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Extravasation			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
General physical health deterioration			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Multiple organ dysfunction syndrome	Additional description: One treatment-emergent death occurred in participant with pcALCL during treatment with brentuximab vedotin and is related.		
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	1 / 1	
Fatigue			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory, thoracic and mediastinal			

disorders			
Pulmonary embolism			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Psychiatric disorders			
Stress			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Fracture			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nervous system disorders			
Demyelinating polyneuropathy			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dizziness			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neuropathy peripheral			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neuralgia			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood and lymphatic system disorders			
Haemolytic uraemic syndrome			

subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Gastrointestinal disorders</b>			
Pancreatitis			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diarrhoea			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Intestinal perforation			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Hepatobiliary disorders</b>			
Hepatocellular injury			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Skin and subcutaneous tissue disorders</b>			
Drug eruption			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dermatitis bullous			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Rash maculo-papular			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	

Skin erosion			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal and urinary disorders			
Haematuria			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary retention			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Musculoskeletal and connective tissue disorders			
Musculoskeletal chest pain			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neck pain			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Crystal arthropathy			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (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			
Superinfection bacterial			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cellulitis			

subjects affected / exposed	0 / 62 (0.00%)	2 / 66 (3.03%)	
occurrences causally related to treatment / all	0 / 0	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lower respiratory tract infection			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diverticulitis			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sepsis			
subjects affected / exposed	3 / 62 (4.84%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	1 / 3	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Urosepsis			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Impetigo			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sinusitis			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract infection			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Parotitis			



subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Periorbital infection			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Erysipelas			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin infection			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Metabolism and nutrition disorders			
Hyperglycaemia			
subjects affected / exposed	0 / 62 (0.00%)	1 / 66 (1.52%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypernatraemia			
subjects affected / exposed	1 / 62 (1.61%)	0 / 66 (0.00%)	
occurrences causally related to treatment / all	0 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

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

<b>Non-serious adverse events</b>	Methotrexate or Bexarotene	Brentuximab vedotin	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	50 / 62 (80.65%)	60 / 66 (90.91%)	
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Cancer pain			
subjects affected / exposed	5 / 62 (8.06%)	1 / 66 (1.52%)	
occurrences (all)	7	1	

Vascular disorders			
Hypertension			
subjects affected / exposed	0 / 62 (0.00%)	6 / 66 (9.09%)	
occurrences (all)	0	7	
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	17 / 62 (27.42%)	18 / 66 (27.27%)	
occurrences (all)	17	22	
Asthenia			
subjects affected / exposed	5 / 62 (8.06%)	7 / 66 (10.61%)	
occurrences (all)	9	10	
Pyrexia			
subjects affected / exposed	8 / 62 (12.90%)	9 / 66 (13.64%)	
occurrences (all)	9	17	
Oedema peripheral			
subjects affected / exposed	6 / 62 (9.68%)	7 / 66 (10.61%)	
occurrences (all)	6	9	
Chills			
subjects affected / exposed	2 / 62 (3.23%)	4 / 66 (6.06%)	
occurrences (all)	2	4	
Peripheral swelling			
subjects affected / exposed	4 / 62 (6.45%)	1 / 66 (1.52%)	
occurrences (all)	4	1	
Respiratory, thoracic and mediastinal disorders			
Dyspnoea			
subjects affected / exposed	0 / 62 (0.00%)	7 / 66 (10.61%)	
occurrences (all)	0	8	
Cough			
subjects affected / exposed	4 / 62 (6.45%)	2 / 66 (3.03%)	
occurrences (all)	12	2	
Psychiatric disorders			
Insomnia			
subjects affected / exposed	5 / 62 (8.06%)	2 / 66 (3.03%)	
occurrences (all)	5	2	
Anxiety			

subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	0 / 66 (0.00%) 0	
Investigations			
Weight decreased subjects affected / exposed occurrences (all)	2 / 62 (3.23%) 2	6 / 66 (9.09%) 6	
Alanine aminotransferase increased subjects affected / exposed occurrences (all)	5 / 62 (8.06%) 6	3 / 66 (4.55%) 3	
Aspartate aminotransferase increased subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	1 / 66 (1.52%) 1	
Blood cholesterol increased subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	0 / 66 (0.00%) 0	
Blood triglycerides increased subjects affected / exposed occurrences (all)	5 / 62 (8.06%) 8	0 / 66 (0.00%) 0	
Nervous system disorders			
Paraesthesia subjects affected / exposed occurrences (all)	1 / 62 (1.61%) 1	6 / 66 (9.09%) 8	
Peripheral sensory neuropathy subjects affected / exposed occurrences (all)	1 / 62 (1.61%) 1	30 / 66 (45.45%) 52	
Peripheral motor neuropathy subjects affected / exposed occurrences (all)	0 / 62 (0.00%) 0	4 / 66 (6.06%) 6	
Dysgeusia subjects affected / exposed occurrences (all)	0 / 62 (0.00%) 0	5 / 66 (7.58%) 6	
Headache subjects affected / exposed occurrences (all)	6 / 62 (9.68%) 6	5 / 66 (7.58%) 5	
Dizziness			

subjects affected / exposed occurrences (all)	1 / 62 (1.61%) 1	4 / 66 (6.06%) 4	
Blood and lymphatic system disorders			
Neutropenia			
subjects affected / exposed	4 / 62 (6.45%)	5 / 66 (7.58%)	
occurrences (all)	6	11	
Anaemia			
subjects affected / exposed	6 / 62 (9.68%)	3 / 66 (4.55%)	
occurrences (all)	8	3	
Eye disorders			
Dry eye			
subjects affected / exposed	4 / 62 (6.45%)	0 / 66 (0.00%)	
occurrences (all)	4	0	
Gastrointestinal disorders			
Nausea			
subjects affected / exposed	8 / 62 (12.90%)	24 / 66 (36.36%)	
occurrences (all)	8	32	
Constipation			
subjects affected / exposed	4 / 62 (6.45%)	3 / 66 (4.55%)	
occurrences (all)	4	5	
Diarrhoea			
subjects affected / exposed	4 / 62 (6.45%)	18 / 66 (27.27%)	
occurrences (all)	4	24	
Vomiting			
subjects affected / exposed	3 / 62 (4.84%)	11 / 66 (16.67%)	
occurrences (all)	3	14	
Skin and subcutaneous tissue disorders			
Alopecia			
subjects affected / exposed	2 / 62 (3.23%)	10 / 66 (15.15%)	
occurrences (all)	2	10	
Rash maculo-papular			
subjects affected / exposed	3 / 62 (4.84%)	7 / 66 (10.61%)	
occurrences (all)	3	7	
Urticaria			
subjects affected / exposed	1 / 62 (1.61%)	5 / 66 (7.58%)	
occurrences (all)	1	6	
Dry skin			

subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	1 / 66 (1.52%) 1	
Pruritus subjects affected / exposed occurrences (all)	8 / 62 (12.90%) 9	11 / 66 (16.67%) 11	
Pruritus generalised subjects affected / exposed occurrences (all)	1 / 62 (1.61%) 1	7 / 66 (10.61%) 8	
Endocrine disorders Hypothyroidism subjects affected / exposed occurrences (all)	5 / 62 (8.06%) 6	0 / 66 (0.00%) 0	
Musculoskeletal and connective tissue disorders Pain in extremity subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	6 / 66 (9.09%) 6	
Arthralgia subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	8 / 66 (12.12%) 13	
Myalgia subjects affected / exposed occurrences (all)	2 / 62 (3.23%) 3	8 / 66 (12.12%) 9	
Muscle spasms subjects affected / exposed occurrences (all)	3 / 62 (4.84%) 3	4 / 66 (6.06%) 4	
Infections and infestations Upper respiratory tract infection subjects affected / exposed occurrences (all)	2 / 62 (3.23%) 2	4 / 66 (6.06%) 4	
Skin infection subjects affected / exposed occurrences (all)	6 / 62 (9.68%) 6	2 / 66 (3.03%) 3	
Staphylococcal skin infection subjects affected / exposed occurrences (all)	5 / 62 (8.06%) 5	1 / 66 (1.52%) 1	
Urinary tract infection			

subjects affected / exposed occurrences (all)	4 / 62 (6.45%) 4	4 / 66 (6.06%) 4	
Metabolism and nutrition disorders			
Decreased appetite			
subjects affected / exposed	3 / 62 (4.84%)	10 / 66 (15.15%)	
occurrences (all)	3	15	
Hyperglycaemia			
subjects affected / exposed	0 / 62 (0.00%)	5 / 66 (7.58%)	
occurrences (all)	0	6	
Hyperuricaemia			
subjects affected / exposed	2 / 62 (3.23%)	4 / 66 (6.06%)	
occurrences (all)	2	6	
Hypertriglyceridaemia			
subjects affected / exposed	11 / 62 (17.74%)	1 / 66 (1.52%)	
occurrences (all)	21	1	
Hypercholesterolaemia			
subjects affected / exposed	4 / 62 (6.45%)	0 / 66 (0.00%)	
occurrences (all)	4	0	

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
21 December 2011	Amendment 1: • The primary objective was revised to define ORR as lasting at least 4 months, and specify the study population. • The study population was modified to include only participants with a primary diagnosis of mycosis fungoides (MF) or primary cutaneous anaplastic large cell lymphoma (pcALCL). • The study population was revised to include participants who received at least 1 prior systemic therapy for their disease. • The protocol was revised to require confirmation of CD30 positivity, defined as membranous, cytoplasmic or golgi pattern of expression of the CD30 antigen by 10% or greater of either total lymphocytes or neoplastic cells at any intensity greater than zero on a scale of zero to 3+. • The protocol was revised to exclude patients with signs or symptoms of progressive multifocal leukoencephalopathy (PML) and contains instructions for the suggested management of suspected PML that include brentuximab vedotin discontinuation. • The schedule for modified severity weighted assessment tool (mSWAT) assessments was changed to include the following time points: before dose administration at Cycle 1, Day 1; at the end of every treatment cycle; within 30 days of the last dose of study drug; and at posttreatment follow-up visits. • The protocol was revised to exclude patients with known hepatitis B surface antigen-positive, or known or suspected active hepatitis C infection.
24 February 2012	Amendment 2: • The protocol was revised to include information on the occurrence of pulmonary toxicity and specifies that the concomitant use of bleomycin with brentuximab vedotin is contraindicated. • Revised recommendations for subsequent treatment for patients who complete 48 weeks of treatment with reference therapy or 16 cycles of brentuximab vedotin. • The protocol was revised to remove plan to reallocate patients to low-enrolling treatment arms for strata analysis.
04 March 2013	Amendment 3: • The protocol was revised to allow patients with stable disease (SD) to continue to receive study treatment up to the maximum treatment period (16 cycles of brentuximab vedotin or 48 weeks with methotrexate or bexarotene) at the discretion of the investigator. • The eligibility criteria was revised to allow for the enrollment of patients with pcALCL who have received prior radiation therapy or at least 1 prior systemic therapy for their disease. • A secondary objective was added to the protocol to assess duration of skin response with brentuximab vedotin. • The inclusion criterion requiring fasting serum triglycerides of <150 mg/dL before study entry was removed. • The timing of computed tomography (CT) scans was revised to align with current standard practice. • The planned analysis populations were revised to accommodate the change to the Ventana CD30 (Ber-H2) assay to determine CD30 expression for patient eligibility. • A real-time independent review performed at the time of anticipated treatment discontinuation for all patients, regardless of reason, was added. • References to ECGs were removed from the list of safety assessments in the protocol.
03 July 2013	Amendment 4: • Reverted to the text that stated that the sponsor was to be notified in the event that a participant was withdrawn from study treatment or from the study. • Revised instructions for calculating body surface area (BSA) to determine the dose of bexarotene. • The protocol was revised to require all events of peripheral neuropathy to be followed for changes in severity until resolution to baseline or study closure, whichever occurred first. • The protocol was revised to remove requirement to end safety monitoring when a patient received subsequent anticancer therapy.

02 December 2014	Amendment 5: • Updated safety information and revised the existing eligibility criteria regarding patients at risk for pancreatitis. • Language was added to the benefit and risk section summarizing the potential risk of pancreatitis in the population of patients at risk of pancreatitis and with cutaneous T-cell lymphoma (CTCL). • Eligibility criteria were updated to exclude patients with an elevated lipase value $\geq 3$ times the upper limit of normal (ULN) with an amylase value $>$ ULN. Allowed for Fludeoxyglucose-positron emission tomography (FDG-PET) scans and computed tomography (CT) taken within 8 weeks before signing the informed consent form (ICF) to be used as the subject FDG-PET scan, and CT scans taken within 4 weeks before signing the ICF to be used as the screening CT scan provided pre-specified conditions were met.
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Notes:

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## Interruptions (globally)

Were there any global interruptions to the trial? No

## Limitations and caveats

None reported