



## Clinical trial results:

### AN OPEN LABEL, RANDOMIZED (2:1) PHASE 2B STUDY OF DASATINIB VS IMATINIB IN PATIENTS WITH CHRONIC PHASE CHRONIC MYELOID LEUKEMIA WHO HAVE NOT ACHIEVED AN OPTIMAL RESPONSE TO 3 MONTHS OF THERAPY WITH 400 MG IMATINIB

#### Summary

EudraCT number	2011-006181-41
Trial protocol	ES CZ BE IT AT PL HU
Global end of trial date	12 April 2022

#### Results information

Result version number	v1 (current)
This version publication date	28 April 2023
First version publication date	28 April 2023

#### Trial information

##### Trial identification

Sponsor protocol code	CA180-399
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT01593254
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	Bristol-Myers Squibb
Sponsor organisation address	Chaussée de la Hulpe 185, Brussels, Belgium, 1170
Public contact	EU Study Start-Up Unit, Bristol-Myers Squibb International Corporation, Clinical.Trials@bms.com
Scientific contact	Bristol-Myers Squibb Study Director, Bristol-Myers Squibb, Clinical.Trials@bms.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	24 April 2022
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	12 April 2022
Was the trial ended prematurely?	No

Notes:

## General information about the trial

Main objective of the trial:

Compare the rate of MMR at 12 months after Day 1 initiation of first-line treatment with imatinib, in patients randomized at month 3 to treatment with dasatinib 100mg QD or imatinib at any dose, after less than optimal response to first-line imatinib (BCR-ABL > 10% IS).

Protection of trial subjects:

The study was in compliance with the ethical principles derived from the Declaration of Helsinki and in compliance with all International Conference on Harmonization Good Clinical Practice Guidelines. All the local regulatory requirements pertinent to safety of trial subjects were followed.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	29 October 2012
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	Argentina: 6
Country: Number of subjects enrolled	Austria: 5
Country: Number of subjects enrolled	Belgium: 1
Country: Number of subjects enrolled	Brazil: 21
Country: Number of subjects enrolled	Canada: 2
Country: Number of subjects enrolled	China: 175
Country: Number of subjects enrolled	Czechia: 1
Country: Number of subjects enrolled	France: 2
Country: Number of subjects enrolled	Italy: 7
Country: Number of subjects enrolled	Poland: 12
Country: Number of subjects enrolled	Korea, Republic of: 5
Country: Number of subjects enrolled	Spain: 2
Country: Number of subjects enrolled	Thailand: 8
Country: Number of subjects enrolled	United States: 13
Worldwide total number of subjects	260
EEA total number of subjects	30

Notes:

<b>Subjects enrolled per age group</b>	
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)	248
From 65 to 84 years	12
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details: -

### Pre-assignment

Screening details:

260 participants treated

### 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
<b>Arm title</b>	Arm 1: Imatinib ( $\geq 400$ mg)

Arm description:

Imatinib  $\geq 400$  mg tablets by mouth once daily (QD) or twice daily (BID) up to 60 months. Participants randomized to Imatinib that crossover to Dasatinib (n= 42); Participants randomized to Imatinib, no crossover (n = 44)

Arm type	Experimental
Investigational medicinal product name	Imatinib
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Coated tablet
Routes of administration	Oral use

Dosage and administration details:

100mg, 400mg

<b>Arm title</b>	Arm 2: Dasatinib (100 mg)
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Arm description:

Dasatinib 100 mg tablet by mouth QD up to 60 months

Arm type	Active comparator
Investigational medicinal product name	Dasatinib
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Coated tablet
Routes of administration	Oral use

Dosage and administration details:

20 mg, 50 mg, 80 mg,  
100 mg and 140 mg

<b>Number of subjects in period 1</b>	Arm 1: Imatinib ( $\geq 400$ mg)	Arm 2: Dasatinib (100 mg)
Started	86	174
Crossed Over to Dasatinib	46	0
Completed	0	0
Not completed	86	174

Adverse event, serious fatal	3	3
Disease progression	2	7
Admin reason by sponsor	7	3
participant withdrew consent	-	9
Poor/non compliance	1	1
participant request to discontinue study treatment	1	3
Study drug toxicity	6	20
Other Reasons	61	115
participant no longer meets study criteria	1	1
Imatinib treatment failure	2	-
lost to follow up	1	6
AE unrelated to study drug	-	1
Pregnancy	-	3
maximum clinical benefit	1	2

## Baseline characteristics

### Reporting groups

Reporting group title	Arm 1: Imatinib (≥400 mg)
Reporting group description: Imatinib ≥400 mg tablets by mouth once daily (QD) or twice daily (BID) up to 60 months. Participants randomized to Imatinib that crossover to Dasatinib (n= 42); Participants randomized to Imatinib, no crossover (n = 44)	
Reporting group title	Arm 2: Dasatinib (100 mg)
Reporting group description: Dasatinib 100 mg tablet by mouth QD up to 60 months	

Reporting group values	Arm 1: Imatinib (≥400 mg)	Arm 2: Dasatinib (100 mg)	Total
Number of subjects	86	174	260
Age categorical			
Units: Subjects			
Adults (18-64 years)	82	166	248
From 65-84 years	4	8	12
Age Continuous			
Units: years			
median	39.5	35.0	
full range (min-max)	18 to 73	18 to 82	-
Sex: Female, Male			
Units:			
Female	16	41	57
Male	70	133	203
Race (NIH/OMB)			
Units: Subjects			
American Indian or Alaska Native	0	0	0
Asian	63	127	190
Native Hawaiian or Other Pacific Islander	0	0	0
Black or African American	3	4	7
White	15	36	51
More than one race	0	0	0
Unknown or Not Reported	5	7	12
Ethnicity (NIH/OMB)			
Units: Subjects			
Hispanic or Latino	0	0	0
Not Hispanic or Latino	0	0	0
Unknown or Not Reported	86	174	260

## End points

### End points reporting groups

Reporting group title	Arm 1: Imatinib ( $\geq 400$ mg)
Reporting group description: Imatinib $\geq 400$ mg tablets by mouth once daily (QD) or twice daily (BID) up to 60 months. Participants randomized to Imatinib that crossover to Dasatinib (n= 42); Participants randomized to Imatinib, no crossover (n = 44)	
Reporting group title	Arm 2: Dasatinib (100 mg)
Reporting group description: Dasatinib 100 mg tablet by mouth QD up to 60 months	

### Primary: Percentage of patients achieving Major Molecular Response (MMR) after 12 months of CML treatment

End point title	Percentage of patients achieving Major Molecular Response (MMR) after 12 months of CML treatment
End point description: Major Molecular Response, is defined as a 3-log reduction in BCR-ABL transcripts from the standardized baseline, which represents 100% on the international scale, so a 3-log reduction is fixed at 0.1% for MMR; N/A = not applicable. 95% CI is Clopper-Pearson(Exact) two-sided 95% confidence intervals. P-value is based on Cochran-Mantel-Haenszel (CMH) test stratified by Sokal score(high, intermediate, low, and unknown) and time between 3 month molecular analysis and randomization ( $\leq 4$ weeks vs $> 4$ weeks). Month 12 is calculated from	
End point type	Primary
End point timeframe: At 12 months after Day 1 initiation of 1st line treatment with imatinib or imatinib at any dose, after less than optimal response to first-line imatinib.	

End point values	Arm 1: Imatinib ( $\geq 400$ mg)	Arm 2: Dasatinib (100 mg)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	86	174		
Units: Percentage of Patients				
number (confidence interval 95%)	12.8 (6.6 to 21.7)	28.7 (22.1 to 36.1)		

### Statistical analyses

Statistical analysis title	Statistical Analysis
Comparison groups	Arm 1: Imatinib ( $\geq 400$ mg) v Arm 2: Dasatinib (100 mg)

Number of subjects included in analysis	260
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.005
Method	Cochran-Mantel-Haenszel

### Secondary: Median Time to Major Molecular Response (MMR)

End point title	Median Time to Major Molecular Response (MMR)
End point description:	
Median time to major molecular response is the time between randomization date and first date that MMR (or MR4.5) criteria are satisfied. Participants who do not achieve MMR (or MR4.5) will be censored.	
Major Molecular Response, is defined as a 3-log reduction in BCR-ABL transcripts from the standardized baseline, which represents 100% on the international scale, so a 3-log reduction is fixed at 0.1% for MMR.	
End point type	Secondary
End point timeframe:	
From randomization to study completion. Approximately 115 months	

End point values	Arm 1: Imatinib (≥400 mg)	Arm 2: Dasatinib (100 mg)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	86	174		
Units: Months				
median (confidence interval 95%)	19.7 (14.2 to 26.4)	13.9 (11.6 to 17.6)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Progression Free Survival (PFS)

End point title	Progression Free Survival (PFS)
End point description:	
PFS is the time from randomization date to progression date or death date, whichever occurs first. Participants who neither progress nor die will be censored.	
Progression is defined as the following, meeting the criteria for accelerated or blast crisis CML are met at any time or death from any cause during treatment.	
Accelerated phase of CML:	
-The presence of ≥15%, but < 30% blasts in the blood or bone marrow	
-At least 30% blasts plus promyelocytes in the blood or bone marrow	
-At least 20% peripheral basophils	
-Thrombocytopenia (fewer than 100,000 platelets/mm <sup>3</sup> ) unrelated to treatment.	
Blast phase of CML	
-At least 30% blasts in the blood or bone marrow	
-Extramedullary involvement (e.g., chloromas), but not hepatosplenomegaly	

Here "99999" means NA

End point type	Secondary
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End point timeframe:

From randomization to study completion. Approximately 115 months

End point values	Arm 1: Imatinib (≥400 mg)	Arm 2: Dasatinib (100 mg)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	7	15		
Units: Months				
median (confidence interval 95%)	99999 (89.3 to 99999)	99999 (99999 to 99999)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Overall Survival (OS)

End point title	Overall Survival (OS)
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End point description:

OS is the time from randomization date to death date. Participants who have not died will be censored on the last date they are known to be alive.

Here "99999" means NA

End point type	Secondary
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End point timeframe:

From randomization to study completion. Approximately 115 months

End point values	Arm 1: Imatinib (≥400 mg)	Arm 2: Dasatinib (100 mg)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	5	11		
Units: Months				
median (confidence interval 95%)	99999 (89.3 to 99999)	99999 (99999 to 99999)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Time to Molecular Response (MR)^4.5

End point title	Time to Molecular Response (MR)^4.5
End point description:	
Time to molecular response (MR)^4.5 is the time between randomization date and first date that MMR (or MR4.5) criteria are satisfied. Participants who do not achieve MMR (or MR4.5) will be censored.	
MR4.5 is defined as a 4.5-log reduction in BCR-ABL transcript from the standardized baseline (0.0032% IS, either detectable disease <= 0.0032% BCR-ABL (IS) or undetectable disease in cDNA (in same volume used for BCR-ABL) with >= 32,000 ABL transcripts.	
Here "99999" means NA	
End point type	Secondary
End point timeframe:	
From randomization to study completion. Approximately 115 months	

End point values	Arm 1: Imatinib (≥400 mg)	Arm 2: Dasatinib (100 mg)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	86	174		
Units: Months				
median (confidence interval 95%)	67.7 (55.9 to 99999)	74.5 (67.1 to 91.8)		

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

From first dose date up to 30 days after last dose of study therapy. Assessed from Sept. 2012 to Nov. 2017 (approximately 62 months)

Adverse event reporting additional description:

3 patients allocated to dasatinib decided to withdraw their consent prior to start taking the study drug and were never exposed. This is why the safety population is 171 in dasatinib arm even though 174 were randomized to Dasatinib

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	24.1
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### Reporting groups

Reporting group title	Dasatinib
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Reporting group description:

Imatinib  $\geq 400$  mg tablets by mouth once daily (QD) or twice daily (BID) up to 60 months.

Reporting group title	Dasatinib after Crossover Imatinib
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Reporting group description:

Dasatinib 100 mg tablet by mouth QD

Reporting group title	Imatinib
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Reporting group description:

Imatinib  $\geq 400$  mg tablets by mouth once daily (QD) or twice daily (BID) up to 60 months.

Serious adverse events	Dasatinib	Dasatinib after Crossover Imatinib	Imatinib
Total subjects affected by serious adverse events			
subjects affected / exposed	48 / 171 (28.07%)	8 / 46 (17.39%)	11 / 86 (12.79%)
number of deaths (all causes)	11	4	1
number of deaths resulting from adverse events			
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Central nervous system leukaemia			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Chronic myeloid leukaemia transformation			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Chronic myeloid leukaemia			

subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Benign breast neoplasm			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Thyroid cancer			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Vascular disorders			
Hypertension			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Surgical and medical procedures			
Hysterectomy			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
General disorders and administration site conditions			
Chest pain			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pyrexia			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Sudden death			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0

Respiratory, thoracic and mediastinal disorders			
Pleural effusion			
subjects affected / exposed	11 / 171 (6.43%)	3 / 46 (6.52%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	11 / 11	4 / 4	0 / 0
deaths causally related to treatment / all	0 / 0	1 / 1	0 / 0
Respiratory failure			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 1	0 / 0
Dyspnoea			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Interstitial lung disease			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pulmonary arterial hypertension			
subjects affected / exposed	2 / 171 (1.17%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	2 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pulmonary hypertension			
subjects affected / exposed	2 / 171 (1.17%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	2 / 2	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Psychiatric disorders			
Suicide attempt			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Investigations			
Platelet count decreased			

subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Injury, poisoning and procedural complications			
Spinal fracture			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Limb injury			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Craniocerebral injury			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hip fracture			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Paternal exposure timing unspecified			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac disorders			
Coronary artery disease			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac failure congestive			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Pericardial effusion			
subjects affected / exposed	2 / 171 (1.17%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	2 / 2	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Ischaemic stroke			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 1	0 / 0
Cerebral haemorrhage			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 1	0 / 0
Blood and lymphatic system disorders			
Lymphadenitis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Thrombocytopenia			
subjects affected / exposed	2 / 171 (1.17%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	2 / 2	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Anaemia			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	1 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ear and labyrinth disorders			
Vertigo			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Eye disorders			
Visual impairment			

subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Vitreous haemorrhage			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Diabetic retinopathy			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Periorbital oedema			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Diarrhoea			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gingival cyst			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Haemorrhoids			
subjects affected / exposed	2 / 171 (1.17%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Salivary gland cyst			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Duodenal ulcer			

subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastritis haemorrhagic			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Large intestine polyp			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	1 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pancreatitis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hepatobiliary disorders			
Cholecystitis			
subjects affected / exposed	2 / 171 (1.17%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Rash			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Diabetic foot			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Glomerulonephritis chronic			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Musculoskeletal chest pain			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Myalgia			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Intervertebral disc disorder			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Appendicitis			
subjects affected / exposed	2 / 171 (1.17%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Anal abscess			
subjects affected / exposed	2 / 171 (1.17%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Dengue fever			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Tracheobronchitis			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pulmonary sepsis			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	1 / 1	0 / 0
Pneumonia			
subjects affected / exposed	5 / 171 (2.92%)	6 / 46 (13.04%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	5 / 8	2 / 7	0 / 0
deaths causally related to treatment / all	0 / 1	1 / 1	0 / 0
Lymphangitis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Folliculitis			
subjects affected / exposed	0 / 171 (0.00%)	1 / 46 (2.17%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Erysipelas			
subjects affected / exposed	2 / 171 (1.17%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Upper respiratory tract infection			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Bronchitis			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
COVID-19			

subjects affected / exposed	3 / 171 (1.75%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 3	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Diarrhoea infectious			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastroenteritis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Post procedural sepsis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Tuberculosis of central nervous system			
subjects affected / exposed	0 / 171 (0.00%)	0 / 46 (0.00%)	1 / 86 (1.16%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Complicated appendicitis			
subjects affected / exposed	1 / 171 (0.58%)	0 / 46 (0.00%)	0 / 86 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

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

<b>Non-serious adverse events</b>	Dasatinib	Dasatinib after Crossover Imatinib	Imatinib
Total subjects affected by non-serious adverse events			
subjects affected / exposed	159 / 171 (92.98%)	42 / 46 (91.30%)	68 / 86 (79.07%)
Vascular disorders			
Hypertension			
subjects affected / exposed	11 / 171 (6.43%)	3 / 46 (6.52%)	5 / 86 (5.81%)
occurrences (all)	11	3	5
General disorders and administration site conditions			
Pyrexia			
subjects affected / exposed	21 / 171 (12.28%)	10 / 46 (21.74%)	3 / 86 (3.49%)
occurrences (all)	25	11	4
Fatigue			
subjects affected / exposed	9 / 171 (5.26%)	0 / 46 (0.00%)	7 / 86 (8.14%)
occurrences (all)	11	0	8
Asthenia			
subjects affected / exposed	11 / 171 (6.43%)	2 / 46 (4.35%)	2 / 86 (2.33%)
occurrences (all)	17	2	2
Respiratory, thoracic and mediastinal disorders			
Pleural effusion			
subjects affected / exposed	24 / 171 (14.04%)	9 / 46 (19.57%)	0 / 86 (0.00%)
occurrences (all)	39	11	0
Cough			
subjects affected / exposed	18 / 171 (10.53%)	3 / 46 (6.52%)	3 / 86 (3.49%)
occurrences (all)	23	3	3
Dyspnoea			
subjects affected / exposed	11 / 171 (6.43%)	6 / 46 (13.04%)	4 / 86 (4.65%)
occurrences (all)	14	6	5
Psychiatric disorders			
Insomnia			
subjects affected / exposed	4 / 171 (2.34%)	1 / 46 (2.17%)	7 / 86 (8.14%)
occurrences (all)	6	1	7
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	14 / 171 (8.19%)	3 / 46 (6.52%)	8 / 86 (9.30%)
occurrences (all)	20	5	13
Aspartate aminotransferase increased			

subjects affected / exposed	15 / 171 (8.77%)	4 / 46 (8.70%)	6 / 86 (6.98%)
occurrences (all)	18	6	9
Blood bilirubin increased			
subjects affected / exposed	14 / 171 (8.19%)	2 / 46 (4.35%)	4 / 86 (4.65%)
occurrences (all)	23	2	4
Blood cholesterol increased			
subjects affected / exposed	12 / 171 (7.02%)	1 / 46 (2.17%)	1 / 86 (1.16%)
occurrences (all)	27	2	1
Blood creatine phosphokinase increased			
subjects affected / exposed	19 / 171 (11.11%)	4 / 46 (8.70%)	11 / 86 (12.79%)
occurrences (all)	27	6	19
Blood lactate dehydrogenase increased			
subjects affected / exposed	14 / 171 (8.19%)	2 / 46 (4.35%)	2 / 86 (2.33%)
occurrences (all)	15	4	2
Haemoglobin decreased			
subjects affected / exposed	11 / 171 (6.43%)	5 / 46 (10.87%)	3 / 86 (3.49%)
occurrences (all)	18	5	3
Gamma-glutamyltransferase increased			
subjects affected / exposed	11 / 171 (6.43%)	1 / 46 (2.17%)	3 / 86 (3.49%)
occurrences (all)	19	1	3
High density lipoprotein decreased			
subjects affected / exposed	10 / 171 (5.85%)	1 / 46 (2.17%)	2 / 86 (2.33%)
occurrences (all)	16	1	3
White blood cell count decreased			
subjects affected / exposed	26 / 171 (15.20%)	10 / 46 (21.74%)	15 / 86 (17.44%)
occurrences (all)	64	27	23
Neutrophil count decreased			
subjects affected / exposed	26 / 171 (15.20%)	13 / 46 (28.26%)	13 / 86 (15.12%)
occurrences (all)	53	28	16
Platelet count decreased			
subjects affected / exposed	36 / 171 (21.05%)	12 / 46 (26.09%)	19 / 86 (22.09%)
occurrences (all)	78	27	25
Low density lipoprotein increased			

subjects affected / exposed occurrences (all)	9 / 171 (5.26%) 13	0 / 46 (0.00%) 0	0 / 86 (0.00%) 0
Weight increased subjects affected / exposed occurrences (all)	5 / 171 (2.92%) 5	3 / 46 (6.52%) 3	2 / 86 (2.33%) 2
Cardiac disorders Pericardial effusion subjects affected / exposed occurrences (all)	9 / 171 (5.26%) 10	4 / 46 (8.70%) 4	0 / 86 (0.00%) 0
Nervous system disorders Dizziness subjects affected / exposed occurrences (all)	11 / 171 (6.43%) 17	1 / 46 (2.17%) 1	6 / 86 (6.98%) 6
Headache subjects affected / exposed occurrences (all)	40 / 171 (23.39%) 53	6 / 46 (13.04%) 7	3 / 86 (3.49%) 3
Blood and lymphatic system disorders Neutropenia subjects affected / exposed occurrences (all)	42 / 171 (24.56%) 152	20 / 46 (43.48%) 84	20 / 86 (23.26%) 45
Anaemia subjects affected / exposed occurrences (all)	53 / 171 (30.99%) 102	15 / 46 (32.61%) 37	20 / 86 (23.26%) 38
Leukopenia subjects affected / exposed occurrences (all)	17 / 171 (9.94%) 45	8 / 46 (17.39%) 16	8 / 86 (9.30%) 20
Thrombocytopenia subjects affected / exposed occurrences (all)	40 / 171 (23.39%) 75	10 / 46 (21.74%) 36	12 / 86 (13.95%) 26
Eye disorders Eyelid oedema subjects affected / exposed occurrences (all)	4 / 171 (2.34%) 5	1 / 46 (2.17%) 1	8 / 86 (9.30%) 10
Gastrointestinal disorders Abdominal pain subjects affected / exposed occurrences (all)	12 / 171 (7.02%) 13	0 / 46 (0.00%) 0	3 / 86 (3.49%) 5

Vomiting subjects affected / exposed occurrences (all)	9 / 171 (5.26%) 11	0 / 46 (0.00%) 0	5 / 86 (5.81%) 7
Nausea subjects affected / exposed occurrences (all)	17 / 171 (9.94%) 25	0 / 46 (0.00%) 0	9 / 86 (10.47%) 16
Diarrhoea subjects affected / exposed occurrences (all)	33 / 171 (19.30%) 52	8 / 46 (17.39%) 9	11 / 86 (12.79%) 23
Abdominal pain upper subjects affected / exposed occurrences (all)	14 / 171 (8.19%) 14	4 / 46 (8.70%) 5	4 / 86 (4.65%) 4
Skin and subcutaneous tissue disorders Rash subjects affected / exposed occurrences (all)	21 / 171 (12.28%) 29	3 / 46 (6.52%) 5	8 / 86 (9.30%) 8
Musculoskeletal and connective tissue disorders Pain in extremity subjects affected / exposed occurrences (all)	10 / 171 (5.85%) 10	1 / 46 (2.17%) 1	7 / 86 (8.14%) 8
Myalgia subjects affected / exposed occurrences (all)	11 / 171 (6.43%) 11	2 / 46 (4.35%) 2	3 / 86 (3.49%) 3
Muscle spasms subjects affected / exposed occurrences (all)	3 / 171 (1.75%) 4	1 / 46 (2.17%) 1	11 / 86 (12.79%) 15
Back pain subjects affected / exposed occurrences (all)	8 / 171 (4.68%) 8	0 / 46 (0.00%) 0	5 / 86 (5.81%) 5
Arthralgia subjects affected / exposed occurrences (all)	8 / 171 (4.68%) 9	4 / 46 (8.70%) 4	6 / 86 (6.98%) 6
Infections and infestations Influenza subjects affected / exposed occurrences (all)	10 / 171 (5.85%) 12	0 / 46 (0.00%) 0	1 / 86 (1.16%) 1

Nasopharyngitis subjects affected / exposed occurrences (all)	16 / 171 (9.36%) 26	4 / 46 (8.70%) 5	6 / 86 (6.98%) 6
Upper respiratory tract infection subjects affected / exposed occurrences (all)	29 / 171 (16.96%) 56	12 / 46 (26.09%) 19	13 / 86 (15.12%) 21
Bronchitis subjects affected / exposed occurrences (all)	7 / 171 (4.09%) 10	1 / 46 (2.17%) 1	5 / 86 (5.81%) 5
Metabolism and nutrition disorders			
Hypophosphataemia subjects affected / exposed occurrences (all)	27 / 171 (15.79%) 53	6 / 46 (13.04%) 12	18 / 86 (20.93%) 32
Hypocalcaemia subjects affected / exposed occurrences (all)	10 / 171 (5.85%) 13	2 / 46 (4.35%) 2	10 / 86 (11.63%) 13
Hyperuricaemia subjects affected / exposed occurrences (all)	14 / 171 (8.19%) 23	0 / 46 (0.00%) 0	6 / 86 (6.98%) 9
Hypertriglyceridaemia subjects affected / exposed occurrences (all)	12 / 171 (7.02%) 31	1 / 46 (2.17%) 1	3 / 86 (3.49%) 4
Hypokalaemia subjects affected / exposed occurrences (all)	9 / 171 (5.26%) 15	1 / 46 (2.17%) 1	5 / 86 (5.81%) 10

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
10 August 2012	Imatinib changed to investigational agent; clarification of endpoints and procedures; modification of definition of progression-free survival; FISH (peripheral blood) added as alternative to conventional cytogenetic assessments; visit windows slightly lengthened; annual follow-up visit specified; timing of some assessments refined with extra detail such as ECG timing and addition of Morisky Medication Adherence Scale at visit 1; details of some procedures added (eg pill count specified for adherence); minor editorial changes .
20 February 2013	<p>This amendment includes changes to the protocol made in compliance with requests from the French Health Authority and the Korean Health Authority related to the monitoring of the safety of patients enrolled in the study and to the specifications of those subjects who are eligible for the study.</p> <p>In addition, the role of the internal data monitoring committee has been specified with respect to the frequency and scope of review, and language to specify that patients will be followed for overall survival post study follow-up has been added.</p> <p>Editorial changes for clarification made throughout the protocol.</p>
10 April 2013	<p>Country specific amendment for Austria Changes to the definition of post-menopausal woman.</p> <p>For women of childbearing potential (WOCBP) duration of contraceptive use after discontinuation of study drug must be a minimum of five half-lives of the investigational product.</p> <p>Duration of contraceptive use after discontinuation of study drug must be a minimum of five half-lives of the investigational product plus the addition of one sperm cycle of 60-90 days for sexually active men whose partners are WOCBP.</p>
09 October 2013	<p>(CARES) and a revision to an internal BMS directive related to "Women of Childbearing Potential (WOCBP) in clinical trials", this protocol was amended to adjust the frequency of pregnancy testing for sexually active female patients of childbearing potential to monthly pregnancy testing, Additional changes related to this initiative are:</p> <ul style="list-style-type: none"><li>updated language related to WOCBP to harmonize with the new BMS directive including requiring 2 highly effective forms of birth control</li><li>define highly effective forms of birth control</li><li>adjust language related to sexually active fertile men with WOCBP partners and adapt the length of birth control to be used after the last dose of investigational product (90 days)</li></ul> <p>In addition, clarifications were added to the exclusion criteria for uncontrolled or significant cardiovascular disease and to the bone marrow assessment. Analyses conducted for safety and efficacy are now categorized under other analysis rather than interim analysis</p>

07 May 2015	<p>Increase in sample size</p> <p>Secondary and Tertiary objectives and endpoints modified</p> <p>Inclusion criteria for imatinib dose interruption prior to randomization and tolerance to imatinib further specified</p> <p>Patients with no evidence of clonal evolution, including those patients without cytogenetic testing at 3 months clarified as eligible for the study</p> <p>Interim Analyses added</p> <p>Change in assessment schedule for chest x-ray, echocardiogram, and complete blood count (CBC).</p> <p>The last on study visit has been clarified to "At study close: 60 months after LPFV" due to a change in the anticipated time for enrollment. Headings in the Table 5.1C have been adjusted accordingly.</p> <p>Update per BMS template for Destruction of Study Drug.</p> <p>Pill counts (drug adherence) deleted study assessment.</p> <p>Patient Reported Outcome and MDASI CML Symptom Burden deleted study assessment.</p> <p>Toxicity rates for CTC grades changed from "Grade 3" to "Grade 3 or above" (synopsis, statistical safety section)</p> <p>Exclusion from study due to pleural or pericardial effusion is clarified to at randomization rather than at "study entry";</p> <p>FISH (peripheral blood) allowed as a substitute for conventional cytogenetics at all time points except screening</p> <p>For cytogenetic response, the suggested number of metaphases (20) to be examined is no longer specified.</p> <p>Section 6.6, Potential Drug Induced Liver Injury (DILI) has been updated to reflect standard definitions for no known liver toxicities at baseline.</p> <p>Appendix 3: Medical Conditions and Drugs Which May Cause QTC Prolongation and Torsade De Pointes (Not All Inclusive):</p> <p>Update to Category Titles.</p> <p>Appendix 8: ELN 2013 replaces ELN 2009</p> <p>Updated references</p> <p>Editorial changes.</p>
22 April 2016	<p>Hepatitis B serology status of all randomized subjects now required and recommendations for subjects with positive serology included.</p> <p>Pregnancy Log (Appendix 9) has been revised to include method of contraception guidelines.</p> <p>Methods of contraception have been aligned with the most recent international guidance and are presented in Appendix 10.</p> <p>Protocol requirements for contraception while on treatment with dasatinib and for protocol-specified periods after the withdrawal or termination of treatment will now be reviewed with subjects as part of study assessments.</p> <p>The number of enrolled subjects has been increased to approximately 1100 due to enrollment/screen failure rate.</p>
09 March 2018	<p>Added clarifications for study assessments and assessment schedule for patients who crossover to treatment with dasatinib after ELN defined failure after treatment with imatinib and for all patients who remain on treatment after 60 months.</p>

Notes:

## Interruptions (globally)

Were there any global interruptions to the trial? No

## Limitations and caveats

None reported