



## Clinical trial results:

### A Randomized, Placebo-controlled, Double-blind, Multi-center, Phase 2 Study to Assess the Efficacy and Safety of CNTO 6785 in Subjects With Moderate to Severe Chronic Obstructive Pulmonary Disease

#### Summary

EudraCT number	2012-003607-36
Trial protocol	CZ DE HU
Global end of trial date	28 September 2015

#### Results information

Result version number	v1 (current)
This version publication date	08 July 2016
First version publication date	08 July 2016

#### Trial information

##### Trial identification

Sponsor protocol code	CNTO6785OPD2001
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT01966549
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	JanssenCilag International NV
Sponsor organisation address	Turnhoutseweg 30, Beerse, Belgium, 2340
Public contact	Clinical Registry Group, JanssenCilag International NV, ClinicalTrialsEU@its.jnj.com
Scientific contact	Clinical Registry Group, JanssenCilag International NV, ClinicalTrialsEU@its.jnj.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:

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**Results analysis stage**

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Analysis stage	Final
Date of interim/final analysis	28 September 2015
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	28 September 2015
Was the trial ended prematurely?	No

Notes:

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**General information about the trial**

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Main objective of the trial:

The main objective of this study was to assess the efficacy of CNTO 6785 compared with placebo in subjects with symptomatic Global Initiative for Chronic Obstructive Lung Disease (GOLD) Grade II and GOLD Grade III COPD.

Protection of trial subjects:

To protect the subjects in the study, a series of risk management actions were considered, excluding subjects with potential risks entering into the study, designed the discontinuation criteria during the study, applying for the comprehensive medical monitoring of clinical data on an ongoing basis and an independent Data Monitoring Committee to review unblinded data during the study to monitor patient safety and provide recommendation to the study implementation when identify significant safety signals. Safety monitoring also include assessing adverse Events, brief physical examinations, vital signs measurements, electrocardiogram (ECG) measurements, signs and symptoms of active tuberculosis (TB), laboratory assessments including chemistry, hematology and urinalysis during the study.

Background therapy:

Subjects received Inhalation of long acting bronchodilators.

Evidence for comparator: -

Actual start date of recruitment	11 November 2013
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

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**Population of trial subjects**

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**Subjects enrolled per country**

Country: Number of subjects enrolled	Czech Republic: 53
Country: Number of subjects enrolled	Germany: 55
Country: Number of subjects enrolled	Hungary: 21
Country: Number of subjects enrolled	Korea, Republic of: 13
Country: Number of subjects enrolled	Malaysia: 9
Country: Number of subjects enrolled	Poland: 15
Country: Number of subjects enrolled	Russian Federation: 19
Country: Number of subjects enrolled	Taiwan: 2
Worldwide total number of subjects	187
EEA total number of subjects	144

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)	116
From 65 to 84 years	71
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details:

A total of 187 male and female subjects with moderate to severe COPD subjects despite inhaled long acting bronchodilators with or without inhaled corticosteroids were enrolled and and randomized equally to the placebo and CNTO 6785 group.

### Pre-assignment

Screening details:

The study consisted of Screening phase (Week -3 to immediately prior to randomization at Study Visit 3), Treatment phase (at Study Visit 3 through Study Visit 8 at Week 12) and follow-up phase (after Study Visit 8 through Week 24). Prior to enrollment, subjects were screened to assess their eligibility for participation in the study.

### Period 1

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

### Arms

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

Subjects received intravenous (IV) infusion of placebo (for not less than 30 minutes in duration) at Week 0, 2, 4, 8 and 12.

Arm type	Placebo
Investigational medicinal product name	Placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Subjects received placebo IV infusion at Week 0, 2, 4, 8 and 12.

<b>Arm title</b>	CNTO 6785
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Arm description:

Subjects received IV infusion (for not less than 30 minutes in duration) of CNTO 6785 6 milligram per kilogram (mg/kg) at Week 0, 2, 4, 8 and 12.

Arm type	Experimental
Investigational medicinal product name	CNTO 6785
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Subjects received CNTO 6785 6 mg/kg IV infusion at Week 0, 2, 4, 8 and 12.

<b>Number of subjects in period 1</b>	Placebo	CNTO 6785
Started	94	93
Completed	86	81
Not completed	8	12
Consent withdrawn by subject	3	4
Adverse event, non-fatal	1	4
COPD Exacerbation	-	3
Other	-	1
Adverse event, serious non-fatal	3	-
Lack of efficacy	1	-

## Baseline characteristics

### Reporting groups

Reporting group title	Placebo
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Reporting group description:

Subjects received intravenous (IV) infusion of placebo (for not less than 30 minutes in duration) at Week 0, 2, 4, 8 and 12.

Reporting group title	CNTO 6785
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Reporting group description:

Subjects received IV infusion (for not less than 30 minutes in duration) of CNTO 6785 6 milligram per kilogram (mg/kg) at Week 0, 2, 4, 8 and 12.

Reporting group values	Placebo	CNTO 6785	Total
Number of subjects	94	93	187
Title for AgeCategorical Units: subjects			
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	59	57	116
From 65 to 84 years	35	36	71
85 years and over	0	0	0
Title for AgeContinuous Units: years			
arithmetic mean	62.4	62	
standard deviation	± 7.22	± 6.44	-
Title for Gender Units: subjects			
Female	29	32	61
Male	65	61	126

## End points

### End points reporting groups

Reporting group title	Placebo
Reporting group description: Subjects received intravenous (IV) infusion of placebo (for not less than 30 minutes in duration) at Week 0, 2, 4, 8 and 12.	
Reporting group title	CNTO 6785
Reporting group description: Subjects received IV infusion (for not less than 30 minutes in duration) of CNTO 6785 6 milligram per kilogram (mg/kg) at Week 0, 2, 4, 8 and 12.	

### Primary: Change From Baseline in Prebronchodilator Percent-Predicted Forced Expiratory Volume in 1 Second (FEV1) at Week 16

End point title	Change From Baseline in Prebronchodilator Percent-Predicted Forced Expiratory Volume in 1 Second (FEV1) at Week 16
End point description: FEV1 is the amount of air that can be exhaled in one second. FEV1 was measured by spirometry. A positive change from baseline in FEV1 indicates improvement in lung function. Modified intent-to-treat (mITT) analysis set included subjects who received at least 1 or partial dose of study agent and had at least 1 post-treatment efficacy measurement.	
End point type	Primary
End point timeframe: Baseline and Week 16	

End point values	Placebo	CNTO 6785		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	93 <sup>[1]</sup>	92 <sup>[2]</sup>		
Units: percentage				
arithmetic mean (standard deviation)				
Baseline	50.07 (± 10.663)	51.92 (± 10.297)		
Change at Week 16	-0.56 (± 6.363)	-1.12 (± 6.23)		

Notes:

[1] - Here "N" signifies number of subjects analysed for this endpoint.

[2] - Here "N" signifies number of subjects analysed for this endpoint.

### Statistical analyses

Statistical analysis title	Statistical Analysis
Comparison groups	CNTO 6785 v Placebo

Number of subjects included in analysis	185
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.599
Method	ANCOVA
Confidence interval	
level	90 %
sides	2-sided
lower limit	-2.03
upper limit	1.05

### Secondary: Change From Baseline in Postbronchodilator Percent-Predicted Forced Expiratory Volume in 1 Second (FEV1) at Week 16

End point title	Change From Baseline in Postbronchodilator Percent-Predicted Forced Expiratory Volume in 1 Second (FEV1) at Week 16
End point description:	FEV1 is the amount of air that can be exhaled in one second. FEV1 was measured by spirometry. A positive change from baseline in FEV1 indicates improvement in lung function. mITT analysis set included subjects who received at least 1 or partial dose of study agent and had at least 1 post-treatment efficacy measurement.
End point type	Secondary
End point timeframe:	Baseline and Week 16

End point values	Placebo	CNTO 6785		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	93 <sup>[3]</sup>	92 <sup>[4]</sup>		
Units: percentage				
arithmetic mean (standard deviation)				
Baseline	53.87 (± 10.113)	56.18 (± 9.306)		
Change at Week 16	-0.82 (± 6.37)	-1.82 (± 6.372)		

Notes:

[3] - Here "N" signifies number of subjects analysed for this endpoint.

[4] - Here "N" signifies number of subjects analysed for this endpoint.

### Statistical analyses

Statistical analysis title	Statistical Analysis
Comparison groups	CNTO 6785 v Placebo
Number of subjects included in analysis	185
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.286
Method	ANCOVA



Confidence interval	
level	90 %
sides	2-sided
lower limit	-2.57
upper limit	0.551

### Secondary: Change from Baseline in Use of Rescue Medication at Week 16

End point title	Change from Baseline in Use of Rescue Medication at Week 16
End point description:	
Rescue medication is a relief medication for chronic obstructive pulmonary disease symptoms. example; when subjects feel breathless, chest tight, or frequent cough. The reduction of number of the occasions indicates disease improvement with less symptoms. mITT analysis set included subjects who received at least 1 or partial dose of study agent and had at least 1 post-treatment efficacy measurement.	
End point type	Secondary
End point timeframe:	
Baseline and Week 16	

End point values	Placebo	CNTO 6785		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	93 <sup>[5]</sup>	92 <sup>[6]</sup>		
Units: day				
arithmetic mean (standard deviation)				
Baseline	4.37 (± 4.825)	3.91 (± 4.608)		
Change at Week 16	-1.03 (± 5.482)	-0.57 (± 4.703)		

Notes:

[5] - Here "N" signifies number of subjects analysed for this endpoint.

[6] - Here "N" signifies number of subjects analysed for this endpoint.

### Statistical analyses

Statistical analysis title	Statistical Analysis
Comparison groups	Placebo v CNTO 6785
Number of subjects included in analysis	185
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.843
Method	ANCOVA
Confidence interval	
level	90 %
sides	2-sided
lower limit	-0.762
upper limit	0.971

### Secondary: Change from Baseline in Exacerbations of Chronic Pulmonary Disease

## Tool-Respiratory Symptoms™ (E-RS™) at Week 16

End point title	Change from Baseline in Exacerbations of Chronic Pulmonary Disease Tool-Respiratory Symptoms™ (E-RS™) at Week 16
End point description: E-RS is a 11-item respiratory system scoring algorithm to assess the severity of respiratory symptoms in participants with chronic obstructive pulmonary disease (COPD). Each item has either 5 or 6 response options. Higher score indicates more severe COPD. mITT analysis set included subjects who received at least 1 or partial dose of study agent and had at least 1 post-treatment efficacy measurement.	
End point type	Secondary
End point timeframe: Baseline and Week 16	

End point values	Placebo	CNTO 6785		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	93 <sup>[7]</sup>	92 <sup>[8]</sup>		
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline	13.29 (± 6.18)	13.12 (± 5.955)		
Change at Week 16	-1.22 (± 5.145)	-1.13 (± 4.54)		

Notes:

[7] - Here "N" signifies number of subjects analysed for this endpoint.

[8] - Here "N" signifies number of subjects analysed for this endpoint.

## Statistical analyses

Statistical analysis title	Statistical Analysis
Comparison groups	Placebo v CNTO 6785
Number of subjects included in analysis	185
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.953
Method	ANCOVA
Confidence interval	
level	90 %
sides	2-sided
lower limit	-1.077
upper limit	1.156

## Secondary: Change From Baseline in St George's Respiratory Questionnaire for Chronic Obstructive Pulmonary Disease (COPD) Subjects (SGRQ-C) at Week 16

End point title	Change From Baseline in St George's Respiratory Questionnaire for Chronic Obstructive Pulmonary Disease (COPD) Subjects (SGRQ-C) at Week 16
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End point description:

SGRQ-C is a 40-item questionnaire designed to measure health impairment in participants with COPD. SGRQ-C is divided into two components: 1) symptoms, 2) activity and impacts. Total SGRQ-C score ranges from 0 (best) and 100 (worst). Higher scores indicate greater health impairment. mITT analysis

set included subjects who received at least 1 or partial dose of study agent and had at least 1 post-treatment efficacy measurement.

End point type	Secondary
End point timeframe:	
Baseline and Week 16	

End point values	Placebo	CNTO 6785		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	89 <sup>[9]</sup>	90 <sup>[10]</sup>		
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline	48.7 (± 17.759)	51.58 (± 18.448)		
Change at Week 16	-1.94 (± 12.166)	-2.56 (± 13.099)		

Notes:

[9] - Here "N" signifies number of subjects analysed for this endpoint.

[10] - Here "N" signifies number of subjects analysed for this endpoint.

### Statistical analyses

Statistical analysis title	Statistical Analysis
Comparison groups	Placebo v CNTO 6785
Number of subjects included in analysis	179
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.922
Method	ANCOVA
Confidence interval	
level	90 %
sides	2-sided
lower limit	-3.246
upper limit	2.885

### Secondary: Number of Subjects With Antibodies to CNTO 6785 At Week 24

End point title	Number of Subjects With Antibodies to CNTO 6785 At Week
End point description:	
The antibodies to CNTO 6785 analysis set was defined as all subjects who received at least a partial dose of CNTO 6785 and had evaluable samples for antibodies to CNTO 6785 assessment.	
End point type	Secondary
End point timeframe:	
Week 24	

Notes:

[11] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: Statistical analysis was not analysed for the outcome measure.

<b>End point values</b>	CNTO 6785			
Subject group type	Reporting group			
Number of subjects analysed	88 <sup>[12]</sup>			
Units: subjects				
Positive for antibodies to CNTO 6785	6			
Negative for antibodies to CNTO 6785	82			

Notes:

[12] - Here "N" signifies number of subjects analysed for this endpoint.

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Treatment Emergent Adverse Events (TEAEs) and Treatment Emergent Serious Adverse Events (TESAEs)

End point title	Number of Subjects With Treatment Emergent Adverse Events (TEAEs) and Treatment Emergent Serious Adverse Events (TESAEs)
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End point description:

An AE is any untoward medical occurrence in a subject who received study drug without regard to possibility of causal relationship. An serious adverse events (SAE) is an AE resulting in any of the following outcomes or deemed significant for any other reason: death; initial or prolonged inpatient hospitalization; life-threatening experience (immediate risk of dying); persistent or significant disability/incapacity; congenital anomaly. The safety analysis set is defined as all subjects who had received at least a partial dose of study agent by the actual treatment received.

End point type	Secondary
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End point timeframe:

Up to 24 Weeks

<b>End point values</b>	Placebo	CNTO 6785		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	94	92 <sup>[13]</sup>		
Units: subjects				
TEAEs	51	54		
Serious TEAEs	7	6		

Notes:

[13] - Here "N" signifies number of subjects analysed for this endpoint.

### Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Up to 24 weeks

Assessment type	Non-systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	16.0
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### Reporting groups

Reporting group title	Placebo
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Reporting group description:

Placebo was administered by intravenous (IV) infusion (for not less than 30 minutes in duration) at Study Visit 3, Study Visit 5, Study Visit 6, Study Visit 7 and Study Visit 8.

Reporting group title	CNTO 6785
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Reporting group description:

CNTO 6785 6 milligram per kilogram (mg/kg) was administered by IV infusion (for not less than 30 minutes in duration) at Study Visit 3, Study Visit 5, Study Visit 6, Study Visit 7 and Study Visit 8.

Serious adverse events	Placebo	CNTO 6785	
Total subjects affected by serious adverse events			
subjects affected / exposed	7 / 94 (7.45%)	6 / 92 (6.52%)	
number of deaths (all causes)	0	0	
number of deaths resulting from adverse events			
Injury, poisoning and procedural complications			
Contusion			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Fall			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Radius Fracture			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Rib Fracture			

subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Traumatic Haemothorax			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Congenital, familial and genetic disorders			
Paranasal Sinus Aplasia			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Atrial Fibrillation			
subjects affected / exposed	2 / 94 (2.13%)	0 / 92 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nervous system disorders			
Cerebrovascular Accident			
subjects affected / exposed	1 / 94 (1.06%)	0 / 92 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Eye disorders			
Dacryostenosis Acquired			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
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			
Chronic Obstructive Pulmonary Disease			
subjects affected / exposed	3 / 94 (3.19%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 3	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nasal Polyps			

subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Nasal Septum Deviation</b>			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Respiratory Failure</b>			
subjects affected / exposed	1 / 94 (1.06%)	0 / 92 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Infections and infestations</b>			
<b>Arthritis Bacterial</b>			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Bronchopneumonia</b>			
subjects affected / exposed	1 / 94 (1.06%)	0 / 92 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Osteomyelitis</b>			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Pneumonia</b>			
subjects affected / exposed	2 / 94 (2.13%)	0 / 92 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Sepsis</b>			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Urinary Tract Infection</b>			

subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Metabolism and nutrition disorders			
Dehydration			
subjects affected / exposed	0 / 94 (0.00%)	1 / 92 (1.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
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>	Placebo	CNTO 6785	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	23 / 94 (24.47%)	27 / 92 (29.35%)	
Respiratory, thoracic and mediastinal disorders			
Chronic Obstructive Pulmonary Disease			
subjects affected / exposed	15 / 94 (15.96%)	19 / 92 (20.65%)	
occurrences (all)	18	26	
Infections and infestations			
Nasopharyngitis			
subjects affected / exposed	9 / 94 (9.57%)	10 / 92 (10.87%)	
occurrences (all)	9	12	



## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
15 May 2014	This Amendment 1 included the following changes in the protocol: 1) More frequent chemistry tests were added during the study to ensure all potential safety signals were captured timely; 2) Nasal brushing test was added as an optional choice for all non-bronchoscopy subjects to mitigate the potential risk of inadequate nasal epithelial samples if only collected from bronchoscopy subjects; 3) Extended the maximum screening period for tuberculosis screening from 4 weeks to 6 weeks; 4) Extended the maximum screening period for tuberculosis screening from 4 weeks to 6 weeks; 5) Clarified the exclusion criteria regarding previous episodes of chronic obstructive pulmonary disease (COPD) exacerbations; 6) Clarified that post-dose pharmacokinetic (PK) samples would be collected 1 hour after study agent administration; 7) Relieved subject load of unnecessary pre-bronchodilator spirometry test in the bronchoscopy subgroup at visit 9 if the bronchoscopy was performed on another day different from the efficacy evaluation day. The bronchoscopy eligibility was only related to the post-bronchodilator spirometry value; 8) Sampling dates/times for lab samples were captured on the requisition form but not in the electronic case report forms (eCRF); 9) Deleted unnecessary requirement on electrocardiogram (ECG) test; 10) Clarified that details of strata used for primary analysis were provided in the statistical analysis plan (SAP); 11) Physical examination was not analyzed and summarized by descriptive analysis; 12) Further clarified Independent Data Monitoring Committee (IDMC) performance and kept the statement to be consistent with IDMC charter and Specified that 5 percent (%) dextrose would be used either as diluent for CNTO 6785 or the placebo.

Notes:

### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

None reported