



Clinical trial results:

A Phase 2, Randomized, Double-Blind, Placebo-Controlled, Multicenter Study of Efficacy and Safety of Enzalutamide in Combination With Exemestane in Patients With Advanced Breast Cancer That Is Estrogen or Progesterone Receptor-Positive and HER2-Normal

Summary

| | |
|--------------------------|----------------|
| EudraCT number | 2013-002717-35 |
| Trial protocol | IE BE GB IT ES |
| Global end of trial date | |

Results information

| | |
|--------------------------------|-----------------|
| Result version number | v1 |
| This version publication date | 14 October 2017 |
| First version publication date | 14 October 2017 |

Trial information

Trial identification

| | |
|-----------------------|------------|
| Sponsor protocol code | MDV3100-12 |
|-----------------------|------------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT02007512 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|--|
| Sponsor organisation name | Pfizer, Inc. |
| Sponsor organisation address | 235 E 42nd Street, New York, United States, NY 10017 |
| Public contact | Pfizer ClinicalTrials.gov Call Center, Pfizer, Inc., 001 8007181021, ClinicalTrials.gov_Inquiries@pfizer.com |
| Scientific contact | Pfizer ClinicalTrials.gov Call Center, Pfizer, Inc., 001 8007181021, ClinicalTrials.gov_Inquiries@pfizer.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 | 07 March 2017 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 23 September 2016 |
| Global end of trial reached? | No |

Notes:

General information about the trial

Main objective of the trial:

To determine the benefit of exemestane plus enzalutamide versus exemestane plus placebo as assessed by progression-free survival (PFS) in subjects with advanced breast cancer that was estrogen or progesterone receptor-positive or both (ER+/PgR+) and human epidermal growth factor receptor 2 (HER2)-normal as followed:

- Cohort 1: Subjects who had not previously received hormone treatment for advanced breast cancer and the subset that was also diagnostic-positive (Dx+);
- Cohort 2: Subjects who previously progressed following 1 (one) hormone treatment for advanced breast cancer and the subset that was also Dx+.

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 Council for Harmonization (ICH) Good Clinical Practice (GCP) Guidelines. All the local regulatory requirements pertinent to safety of trials subjects were followed.

Background therapy: -

Evidence for comparator: -

| | |
|---|------------------|
| Actual start date of recruitment | 18 December 2013 |
| Long term follow-up planned | No |
| Independent data monitoring committee (IDMC) involvement? | No |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|--------------------|
| Country: Number of subjects enrolled | United States: 119 |
| Country: Number of subjects enrolled | Belgium: 18 |
| Country: Number of subjects enrolled | Canada: 4 |
| Country: Number of subjects enrolled | Ireland: 16 |
| Country: Number of subjects enrolled | Italy: 44 |
| Country: Number of subjects enrolled | Spain: 31 |
| Country: Number of subjects enrolled | United Kingdom: 15 |
| Worldwide total number of subjects | 247 |
| EEA total number of subjects | 124 |

Notes:

Subjects enrolled per age group

| | |
|--|---|
| In utero | 0 |
| Preterm newborn - gestational age < 37 | 0 |

| | |
|--|-----|
| wk | |
| 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) | 151 |
| From 65 to 84 years | 92 |
| 85 years and over | 4 |

Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

This was a phase 2, randomized, double blind, placebo-controlled study. The results disclosed in this draft were based on the data collected till 23 Sep 2016.

Period 1

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

Arms

| | |
|------------------------------|--|
| Are arms mutually exclusive? | Yes |
| Arm title | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg |

Arm description:

Subjects with no previous hormonal treatment for advanced breast cancer, received enzalutamide 160 milligram (mg) along with exemestane 50 mg, orally, once daily until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|--|--------------|
| Arm type | Experimental |
| Investigational medicinal product name | Enzalutamide |
| Investigational medicinal product code | |
| Other name | MDV3100 |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Enzalutamide 160 mg was administered orally, once daily.

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

Dosage and administration details:

Exemestane 50 mg was administered orally, once daily.

| | |
|------------------|--------------------------------------|
| Arm title | Cohort 1: Placebo + Exemestane 25 mg |
|------------------|--------------------------------------|

Arm description:

Subjects with no previous hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|----------|---------|
| Arm type | Placebo |
|----------|---------|

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

Dosage and administration details:

Placebo matched to enzalutamide was administered orally, once daily.

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

Dosage and administration details:

Exemestane 25 mg was administered orally, once daily.

| | |
|------------------|--|
| Arm title | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|------------------|--|

Arm description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|--|--------------|
| Arm type | Experimental |
| Investigational medicinal product name | Enzalutamide |
| Investigational medicinal product code | |
| Other name | MDV3100 |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Enzalutamide 160 mg was administered orally, once daily.

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

Dosage and administration details:

Exemestane 50 mg was administered orally, once daily.

| | |
|------------------|--------------------------------------|
| Arm title | Cohort 2: Placebo + Exemestane 25 mg |
|------------------|--------------------------------------|

Arm description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

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

Dosage and administration details:

Placebo matched to enzalutamide was administered orally, once daily.

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

Dosage and administration details:

Exemestane 25 mg was administered orally, once daily.

| Number of subjects in period 1 | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|--|---|--------------------------------------|---|
| | | | |
| Started | 63 | 64 | 60 |
| Treated | 62 | 63 | 60 |
| Completed | 0 | 0 | 0 |
| Not completed | 63 | 64 | 60 |
| Consent withdrawn by subject | 4 | 2 | 3 |
| Disease progression | 44 | 49 | 45 |
| Death | 1 | - | - |
| Ongoing as of the data cutoff date (23 Sep 2016) | 10 | 11 | 5 |
| Adverse event | 4 | 2 | 6 |
| Unspecified | - | - | 1 |
| Protocol deviation | - | - | - |

| Number of subjects in period 1 | Cohort 2: Placebo + Exemestane 25 mg |
|--|--------------------------------------|
| Started | 60 |
| Treated | 60 |
| Completed | 0 |
| Not completed | 60 |
| Consent withdrawn by subject | 3 |
| Disease progression | 51 |
| Death | - |
| Ongoing as of the data cutoff date (23 Sep 2016) | 1 |
| Adverse event | 2 |
| Unspecified | 2 |
| Protocol deviation | 1 |

Period 2

| | |
|------------------------------|-----------------------------|
| Period 2 title | Open Label Treatment Period |
| Is this the baseline period? | No |
| Allocation method | Randomised - controlled |
| Blinding used | Not blinded |

Arms

| | |
|------------------------------|--------------------------------------|
| Are arms mutually exclusive? | No |
| Arm title | Cohort 1: Placebo + Exemestane 25 mg |

Arm description:

Subjects with no previous hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|--|--------------|
| Arm type | Placebo |
| Investigational medicinal product name | Enzalutamide |
| Investigational medicinal product code | |
| Other name | MDV3100 |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Enzalutamide 160 mg was administered orally, once daily.

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

Dosage and administration details:

Exemestane 50 mg was administered orally, once daily.

| | |
|------------------|--------------------------------------|
| Arm title | Cohort 2: Placebo + Exemestane 25 mg |
|------------------|--------------------------------------|

Arm description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|--|--------------|
| Arm type | Placebo |
| Investigational medicinal product name | Enzalutamide |
| Investigational medicinal product code | |
| Other name | MDV3100 |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Enzalutamide 160 mg was administered orally, once daily.

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

Dosage and administration details:

Exemestane 50 mg was administered orally, once daily.

| Number of subjects in period 2 | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Placebo + Exemestane 25 mg |
|---|---|---|
| Started | 21 | 12 |
| Open Label Treatment | 21 | 12 |
| Completed | 0 | 0 |
| Not completed | 21 | 12 |
| Disease progression | 17 | 11 |
| Ongoing as of the data cutoff date (23 Sep 2016) | 3 | - |
| Adverse event | 1 | - |
| Unspecified | - | 1 |

Baseline characteristics

Reporting groups

| | |
|-----------------------|--|
| Reporting group title | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg |
|-----------------------|--|

Reporting group description:

Subjects with no previous hormonal treatment for advanced breast cancer, received enzalutamide 160 milligram (mg) along with exemestane 50 mg, orally, once daily until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|-----------------------|--------------------------------------|
| Reporting group title | Cohort 1: Placebo + Exemestane 25 mg |
|-----------------------|--------------------------------------|

Reporting group description:

Subjects with no previous hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|-----------------------|--|
| Reporting group title | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|-----------------------|--|

Reporting group description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|-----------------------|--------------------------------------|
| Reporting group title | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------|--------------------------------------|

Reporting group description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| Reporting group values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|---|---|---|---|
| Number of subjects | 63 | 64 | 60 |
| 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) | 42 | 32 | 37 |
| From 65-84 years | 20 | 31 | 23 |
| 85 years and over | 1 | 1 | 0 |
| Age continuous Units: years arithmetic mean | 59 | 63.5 | 60.1 |

| | | | |
|--------------------|---------|---------|---------|
| standard deviation | ± 10.82 | ± 11.56 | ± 11.27 |
|--------------------|---------|---------|---------|

| | | | |
|--|----|----|----|
| Gender, Male/Female Units: Subjects | | | |
| Female | 63 | 64 | 60 |
| Male | 0 | 0 | 0 |

| Reporting group values | Cohort 2: Placebo + Exemestane 25 mg | Total | |
|---|---|-------|--|
| Number of subjects | 60 | 247 | |
| Age Categorical Units: Subjects | | | |
| In utero | 0 | 0 | |
| Preterm newborn infants (gestational age < 37 wks) | 0 | 0 | |
| Newborns (0-27 days) | 0 | 0 | |
| Infants and toddlers (28 days-23 months) | 0 | 0 | |
| Children (2-11 years) | 0 | 0 | |
| Adolescents (12-17 years) | 0 | 0 | |
| Adults (18-64 years) | 40 | 151 | |
| From 65-84 years | 18 | 92 | |
| 85 years and over | 2 | 4 | |
| Age continuous Units: years | | | |
| arithmetic mean | 60.6 | | |
| standard deviation | ± 13.47 | - | |
| Gender, Male/Female Units: Subjects | | | |
| Female | 60 | 247 | |
| Male | 0 | 0 | |

End points

End points reporting groups

| | |
|---|--|
| Reporting group title | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg |
| Reporting group description: Subjects with no previous hormonal treatment for advanced breast cancer, received enzalutamide 160 milligram (mg) along with exemestane 50 mg, orally, once daily until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Reporting group title | Cohort 1: Placebo + Exemestane 25 mg |
| Reporting group description: Subjects with no previous hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Reporting group title | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
| Reporting group description: Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Reporting group title | Cohort 2: Placebo + Exemestane 25 mg |
| Reporting group description: Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Reporting group title | Cohort 1: Placebo + Exemestane 25 mg |
| Reporting group description: Subjects with no previous hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Reporting group title | Cohort 2: Placebo + Exemestane 25 mg |
| Reporting group description: Subjects with previous disease progression following hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Subject analysis set title | Enzalutamide 160 mg |
| Subject analysis set type | Sub-group analysis |
| Subject analysis set description: Subjects received enzalutamide 160 mg dose orally, once daily, either in double blind treatment period or in open label treatment period until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after the last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Subject analysis set title | Exemestane 25 mg |

| | |
|--|--------------------|
| Subject analysis set type | Sub-group analysis |
| Subject analysis set description: | |
| Subjects received exemestane 25 mg dose orally, once daily, in double blind treatment period until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after the last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first. | |
| Subject analysis set title | Exemestane 50 mg |
| Subject analysis set type | Sub-group analysis |
| Subject analysis set description: | |
| Subjects received exemestane 50 mg dose orally, once daily until disease progression or permanent treatment discontinuation, either in double blind treatment period or in open label treatment period. Subjects were followed-up until 30 days after the last dose of study drug, the date of death, or before initiation of a new antitumor treatment, whichever occurred first. | |

Primary: Progression Free Survival (PFS)

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|---|---------------------------------|
| End point title | Progression Free Survival (PFS) |
| End point description: | |
| PFS was defined as the time in months from randomization to the first documentation of progression of disease (PD) or death on study due to any cause, whichever occurred first. PD according to response evaluation criteria in solid tumors version 1.1 (RECIST 1.1) was defined as greater than or equal to (\geq) 20 percent (%) increase in the sum of diameters of the target lesions taking as a reference the smallest sum recorded since the start of treatment or unequivocal progression in non-target lesions or the appearance of 1 or more new lesions. The analysis of PFS was based on investigator assessment of disease progression. Subjects who were not known to have had a PFS event at the analysis date were censored at last tumor assessment date prior to data cutoff or date of new treatment initiation, whichever occurred first. Intent-to-treat (ITT) population included all the subjects randomly assigned to double-blind study treatment. | |
| End point type | Primary |
| End point timeframe: | |
| From randomization until PD, last tumor assessment without PD before new antitumor treatment initiation or death due to any cause, whichever occurred first (up to the data cutoff date [23 Sep 2016]) | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 63 | 64 | 60 | 60 |
| Units: months | | | | |
| median (confidence interval 95%) | 11.8 (7.3 to 15.9) | 5.8 (3.5 to 10.9) | 3.6 (1.9 to 5.5) | 3.9 (2.6 to 5.4) |

Statistical analyses

| | |
|--|---|
| Statistical analysis title | Cohort 1 (Experimental versus Placebo) |
| Statistical analysis description: | |
| Hazard ratio was based on stratified Cox regression model. | |
| Comparison groups | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg v Cohort 1: Placebo + Exemestane 25 mg |

| | |
|---|---------------------|
| Number of subjects included in analysis | 127 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.3631 |
| Method | Stratified log-rank |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 0.82 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.535 |
| upper limit | 1.257 |

| | |
|---|---|
| Statistical analysis title | Cohort 2 (Experimental versus Placebo) |
| Statistical analysis description: Hazard ratio was based on stratified Cox regression model. | |
| Comparison groups | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg v Cohort 2: Placebo + Exemestane 25 mg |
| Number of subjects included in analysis | 120 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.9212 |
| Method | Stratified log-rank |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.022 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.659 |
| upper limit | 1.586 |

| | |
|---|-----------------------------------|
| Secondary: Clinical Benefit Rate-24 (CBR-24) | |
| End point title | Clinical Benefit Rate-24 (CBR-24) |
| End point description: CBR-24:Subjects (%) with best response of complete response (CR), partial response (PR) or stable disease (SD) sustained ≥ 24 weeks, determined by investigator using RECIST 1.1. CR:Disappearance of all lesions and normalization of tumor marker level for non-target lesions, also, lymph nodes must be non-pathological in size (less than $<$ 10 millimeter [mm] short axis). PR: $\geq 30\%$ decrease in sum of diameters of target lesions, using baseline sum diameters as reference. SD: Neither sufficient reduction to qualify as PR nor sufficient increase to qualify as PD, using the smallest sum diameters as reference. PD: $\geq 20\%$ increase in sum of diameters of target lesions, using smallest sum as reference (including baseline), also, the sum must demonstrate an absolute increase of at least 5 mm, or unequivocal progression of existing non-target lesions or appearance of 1 or more new target or non-target lesions. ITT population included all subjects randomly assigned to double-blind study treatment. | |
| End point type | Secondary |
| End point timeframe: From randomization up to the data cutoff date (23 Sep 2016) | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 63 | 64 | 60 | 60 |
| Units: percentage of subjects | | | | |
| number (confidence interval 95%) | 61.9 (48.8 to 73.9) | 45.3 (38.2 to 58.3) | 20 (10.8 to 32.3) | 31.7 (20.3 to 45) |

Statistical analyses

No statistical analyses for this end point

Secondary: Best Objective Response Rate (BORR)

| | |
|---|-------------------------------------|
| End point title | Best Objective Response Rate (BORR) |
| End point description: | |
| <p>BORR: Subjects (%) with measurable disease and best response of CR or PR using RECIST 1.1. CR: Disappearance of all lesions and normalization of tumor marker level for non-target lesions, also, lymph nodes must be non-pathological in size (<10 mm short axis). PR: $\geq 30\%$ decrease in sum of diameters of target lesions, using baseline sum diameters as reference. SD: Neither sufficient reduction to qualify as PR nor sufficient increase to qualify as PD, using smallest sum diameters as reference. PD: $\geq 20\%$ increase (absolute increase of ≥ 5 mm) in sum of diameters of target lesions, using smallest sum as reference (including baseline), or unequivocal progression of existing non-target lesions, or appearance of 1 or more new lesions. ITT population included all subjects randomly assigned to double-blind study treatment. Here 'Number of subjects analyzed' signifies subjects evaluable for this</p> | |
| End point type | Secondary |
| End point timeframe: | |
| From randomization until CR or PR, whichever occurred first (up to the data cutoff date [23 Sep 2016]) | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 39 | 42 | 42 | 42 |
| Units: percentage of subjects | | | | |
| number (confidence interval 95%) | 30.8 (17 to 47.6) | 19 (8.6 to 34.1) | 9.5 (2.7 to 22.6) | 4.8 (0.6 to 16.2) |

Statistical analyses

Secondary: Duration of Objective Response (DOR)

| | |
|---|--------------------------------------|
| End point title | Duration of Objective Response (DOR) |
| End point description: | |
| DOR: Time from first documentation of CR or PR, to first documentation of PD or death due to any cause, whichever occurred first, using RECIST 1.1. CR: Disappearance of all lesions and normalization of tumor marker level for non-target lesions, also, lymph nodes must be non-pathological in size (<10 mm short axis). PR: $\geq 30\%$ decrease in sum of diameters of target lesions, using baseline sum diameters as reference. SD: Neither sufficient reduction to qualify as PR nor sufficient increase to qualify as PD, using smallest sum diameters as reference. PD: $\geq 20\%$ increase (absolute increase of ≥ 5 mm) in sum of diameters of target lesions, compared to smallest sum, or unequivocal progression of existing non-target lesions, or appearance of 1 or more new lesions. ITT population. 'Number of subjects analyzed' signifies subjects evaluable for this endpoint. '99999' signifies data not available as upper limit of 95% confidence interval was not reached due to insufficient number of events. | |
| End point type | Secondary |
| End point timeframe: | |
| From first documentation of CR or PR until PD, last tumor assessment without PD before new antitumor treatment initiation or death due to any cause, whichever occurred first (up to the data cutoff date [23 Sep 2016]) | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 39 | 42 | 42 | 42 |
| Units: months | | | | |
| median (confidence interval 95%) | 14 (5.6 to 99999) | 9.1 (3.2 to 10.2) | 18.3 (3.3 to 23.1) | 4.6 (1.9 to 7.4) |

Statistical analyses

No statistical analyses for this end point

Secondary: Time to Response

| | |
|--|------------------|
| End point title | Time to Response |
| End point description: | |
| Time to response: Time from randomization to first documentation of CR or PR. CR: Disappearance of all (target and non-target) lesions and normalization of tumor marker level for non-target lesions. All lymph nodes (target and non-target) must be non-pathological in size (< 10 mm short axis). PR: $\geq 30\%$ decrease in the sum of diameters of target lesions, using baseline sum diameters as a reference. Subjects with no CR or PR were censored at last tumor assessment date prior to data cutoff or date of new treatment initiation, whichever occurred first. ITT population. 'Number of subjects analyzed' signifies subjects evaluable for this endpoint. '99999' signifies data not available as either, median and/or upper limit of 95% confidence interval, or median and 95% confidence interval were not reached due to insufficient number of events at the time of data cutoff. | |
| End point type | Secondary |
| End point timeframe: | |
| From randomization until first documentation of CR, PR, last tumor assessment without PD before new antitumor treatment initiation or death due to any cause, whichever occurred first (up to the data cutoff date [23 Sep 2016]) | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 39 | 42 | 42 | 42 |
| Units: months | | | | |
| median (confidence interval 95%) | 12.9 (7.3 to 99999) | 14 (7.4 to 99999) | 99999 (3.9 to 99999) | 99999 (99999 to 99999) |

Statistical analyses

No statistical analyses for this end point

Secondary: Time to Progression

| | |
|-----------------|---------------------|
| End point title | Time to Progression |
|-----------------|---------------------|

End point description:

Time to progression was defined as the time from the date of randomization to PD defined by the investigator using RECIST 1.1. PD: $\geq 20\%$ increase in the sum of diameters of target lesions, using the smallest sum during the study as a reference (including baseline sum if it is the smallest), also, the sum must demonstrate an absolute increase of at least 5 mm, unequivocal progression of existing non-target lesions or appearance of 1 or more new lesions (target or non-target). Subjects who did not experience disease progression, time to progression was right censored at the date of the last tumor assessment prior to data cutoff or date of new antitumor treatment, whichever occurred first. ITT population included all the subjects randomly assigned to double-blind study treatment.

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

End point timeframe:

From randomization until PD or last tumor assessment without PD before new antitumor treatment initiation, whichever occurred first (up to the data cutoff date [23 Sep 2016])

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 63 | 64 | 60 | 60 |
| Units: months | | | | |
| median (confidence interval 95%) | 11.8 (7.3 to 15.9) | 7.4 (3.5 to 13.5) | 3.6 (1.9 to 5.6) | 3.9 (2.6 to 5.4) |

Statistical analyses

Secondary: Progression Free Survival (PFS) at 6 Months

| | |
|--|---|
| End point title | Progression Free Survival (PFS) at 6 Months |
| End point description: | |
| PFS at 6 months was defined as the percentage of subjects with no event of disease progression at Month 6 landmark, estimated by Kaplan-Meier methods. PFS was defined as the time in months from randomization to the first documentation of PD or death on study due to any cause, whichever occurred first. PD: $\geq 20\%$ increase in the sum of diameters of target lesions, using the smallest sum during the study as a reference (including baseline sum if it is the smallest), also, the sum must demonstrate an absolute increase of at least 5 mm, unequivocal progression of existing non-target lesions or appearance of 1 or more new lesions (target or non-target). The analysis of PFS was based on investigator assessment of disease progression. ITT population included all the subjects randomly assigned to double-blind study treatment. | |
| End point type | Secondary |
| End point timeframe: | |
| Month 6 | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|----------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 63 | 64 | 60 | 60 |
| Units: percentage of subjects | | | | |
| number (confidence interval 95%) | 66.7 (53.2 to 77) | 50 (37.1 to 61.6) | 31.5 (19.7 to 43.9) | 33.3 (21.6 to 45.5) |

Statistical analyses

No statistical analyses for this end point

Secondary: Concentration Versus Time Summary of Enzalutamide

| | |
|--|---|
| End point title | Concentration Versus Time Summary of Enzalutamide |
| End point description: | |
| Concentration versus time summary was calculated by setting concentration values below limit of quantitation to zero. Pharmacokinetic (PK) population for enzalutamide included all subjects in safety population who received any amount of enzalutamide and had at least 1 reportable concentration value for enzalutamide or its active metabolite (N-desmethyl enzalutamide). Here, "n" signifies number of subjects evaluable at each specified time-point. | |
| End point type | Secondary |
| End point timeframe: | |
| Predose on Day 29, 57 and 113 | |

| | | | | |
|--------------------------------------|------------------------|--|--|--|
| End point values | Enzalutamide 160 mg | | | |
| Subject group type | Subject analysis set | | | |
| Number of subjects analysed | 114 | | | |
| Units: microgram per milliliter | | | | |
| arithmetic mean (standard deviation) | | | | |
| Day 29 (n = 109) | 14.2 (± 2.97) | | | |
| Day 57 (n = 92) | 14.2 (± 3.21) | | | |
| Day 113 (n = 67) | 13.2 (± 4.51) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Concentration Versus Time Summary of Exemestane

| | |
|-----------------|---|
| End point title | Concentration Versus Time Summary of Exemestane |
|-----------------|---|

End point description:

Concentration versus time summary was calculated by setting concentration values below limit of quantitation to zero. PK population for exemestane was defined as all subjects in the safety population who received any amount of exemestane and had at least 1 reportable plasma concentration value for exemestane. Here, 'n' signifies number of subjects evaluable at each specified time-point. Here '99999' signifies data not available as either no subjects were evaluable, or only one subject was evaluable at specified time points.

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

End point timeframe:

Predose, 1 and 6 hour postdose on Day 29, 57, 113 and 169

| | | | | |
|--------------------------------------|----------------------|----------------------|--|--|
| End point values | Exemestane 25 mg | Exemestane 50 mg | | |
| Subject group type | Subject analysis set | Subject analysis set | | |
| Number of subjects analysed | 114 | 115 | | |
| Units: Picogram per milliliter | | | | |
| arithmetic mean (standard deviation) | | | | |
| Day 29: Predose (n=108, 108) | 1010 (± 1600) | 943 (± 939) | | |
| Day 29: 1 hour Postdose (n=99, 102) | 17000 (± 16400) | 19200 (± 17800) | | |
| Day 29: 6 hour Postdose (n=57, 55) | 5590 (± 4750) | 6850 (± 9090) | | |
| Day 57: Predose (n=89, 92) | 1160 (± 2590) | 1100 (± 2650) | | |
| Day 57: 1 hour Postdose (n=76, 83) | 19900 (± 18600) | 15300 (± 14500) | | |
| Day 57: 6 hour Postdose (n=26, 23) | 5890 (± 4880) | 5650 (± 6200) | | |
| Day 113: Predose (n=65, 68) | 1160 (± 2870) | 1330 (± 3380) | | |
| Day 113: 1 hour Postdose (n=58, 58) | 20800 (± 18100) | 19400 (± 18500) | | |
| Day 113: 6 hour Postdose (n=12, 14) | 3510 (± 3850) | 5600 (± 5290) | | |
| Day 169: Predose (n=0, 0) | 99999 (± 99999) | 99999 (± 99999) | | |
| Day 169: 1 hour Postdose (n=0, 1) | 99999 (± 99999) | 22800 (± 99999) | | |

| | | | | |
|-----------------------------------|-----------------|----------------|--|--|
| Day 169: 6 hour Postdose (n=0, 1) | 99999 (± 99999) | 6020 (± 99999) | | |
|-----------------------------------|-----------------|----------------|--|--|

Statistical analyses

No statistical analyses for this end point

Secondary: Concentration Versus Time Summary of N-desmethyl Enzalutamide

| | |
|--|---|
| End point title | Concentration Versus Time Summary of N-desmethyl Enzalutamide |
| End point description: N-desmethyl enzalutamide was the active metabolite of enzalutamide. Concentration versus time summary was calculated by setting concentration values below limit of quantitation to zero. PK population for N-desmethyl enzalutamide included all the subjects in safety population who received any amount of enzalutamide and had at least 1 reportable concentration value for N-desmethyl enzalutamide. Here, "n" signifies number of subjects evaluable at each specified time-point. | |
| End point type | Secondary |
| End point timeframe: Predose on Day 29, 57 and 113 | |

| | | | | |
|--------------------------------------|----------------------|--|--|--|
| End point values | Enzalutamide 160 mg | | | |
| Subject group type | Subject analysis set | | | |
| Number of subjects analysed | 114 | | | |
| Units: microgram per milliliter | | | | |
| arithmetic mean (standard deviation) | | | | |
| Day 29 (n = 109) | 11.6 (± 4.1) | | | |
| Day 57 (n = 92) | 15.2 (± 4.76) | | | |
| Day 113 (n = 67) | 15.2 (± 5.81) | | | |

Statistical analyses

No statistical analyses for this end point

Other pre-specified: European Organization for Research and Treatment of Cancer (EORTC) Quality-of-Life Core Questionnaire (QLQ-C30)

| | |
|----------------------------------|---|
| End point title | European Organization for Research and Treatment of Cancer (EORTC) Quality-of-Life Core Questionnaire (QLQ-C30) |
| End point description: | |
| End point type | Other pre-specified |
| End point timeframe: Month 24 | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|--------------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 0 ^[1] | 0 ^[2] | 0 ^[3] | 0 ^[4] |
| Units: units on a scale | | | | |
| arithmetic mean (standard deviation) | () | () | () | () |

Notes:

[1] - Data was not analyzed at this time point and will be reported at the time of final analysis.

[2] - Data was not analyzed at this time point and will be reported at the time of final analysis.

[3] - Data was not analyzed at this time point and will be reported at the time of final analysis.

[4] - Data was not analyzed at this time point and will be reported at the time of final analysis.

Statistical analyses

No statistical analyses for this end point

Other pre-specified: European Organization for Research and Treatment of Cancer (EORTC) Breast Cancer Module (QLQ-BR23)

| | |
|------------------------|--|
| End point title | European Organization for Research and Treatment of Cancer (EORTC) Breast Cancer Module (QLQ-BR23) |
| End point description: | |
| End point type | Other pre-specified |
| End point timeframe: | |
| Month 24 | |

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|--------------------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 0 ^[5] | 0 ^[6] | 0 ^[7] | 0 ^[8] |
| Units: units on a scale | | | | |
| arithmetic mean (standard deviation) | () | () | () | () |

Notes:

[5] - Data was not analyzed at this time point and will be reported at the time of final analysis.

[6] - Data was not analyzed at this time point and will be reported at the time of final analysis.

[7] - Data was not analyzed at this time point and will be reported at the time of final analysis.

[8] - Data was not analyzed at this time point and will be reported at the time of final analysis.

Statistical analyses

No statistical analyses for this end point

Other pre-specified: Number of Subjects With Positive Androgen Receptor (AR) Expression by Immunohistochemistry (IHC)

| | |
|-----------------|--|
| End point title | Number of Subjects With Positive Androgen Receptor (AR) Expression by Immunohistochemistry (IHC) |
|-----------------|--|

End point description:

| | |
|----------------|---------------------|
| End point type | Other pre-specified |
|----------------|---------------------|

End point timeframe:

Day 1, 29, 57, 113 and 169

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 0 ^[9] | 0 ^[10] | 0 ^[11] | 0 ^[12] |
| Units: subjects | | | | |

Notes:

[9] - Protocol was amended and data not analyzed as per planned analysis.

[10] - Protocol was amended and data not analyzed as per planned analysis.

[11] - Protocol was amended and data not analyzed as per planned analysis.

[12] - Protocol was amended and data not analyzed as per planned analysis.

Statistical analyses

No statistical analyses for this end point

Other pre-specified: Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs)

| | |
|-----------------|---|
| End point title | Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs) |
|-----------------|---|

End point description:

An AE was any untoward medical occurrence in a subject who received study drug without regard to possibility of causal relationship. SAE was 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. A treatment emergent AE was defined as an event that emerged during the treatment period that was absent before treatment, or worsened during the treatment period relative to the pretreatment state. AEs included both serious and non-serious AEs. Safety population included all the subjects who received study drug either in double blind or in open label treatment period.

| | |
|----------------|---------------------|
| End point type | Other pre-specified |
|----------------|---------------------|

End point timeframe:

Baseline up to 30 days after the last dose of study drug or before initiation of a new antitumor treatment, whichever occurred first (up to data cutoff date [23 Sep 2016])

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 62 | 63 | 60 | 60 |
| Units: subjects | | | | |
| AEs | 59 | 58 | 58 | 53 |
| SAEs | 15 | 12 | 10 | 8 |

Statistical analyses

No statistical analyses for this end point

Other pre-specified: Number of Subjects With Treatment-Emergent Adverse Events of Grade 3 or Higher Severity

| | |
|-----------------|---|
| End point title | Number of Subjects With Treatment-Emergent Adverse Events of Grade 3 or Higher Severity |
|-----------------|---|

End point description:

An AE was any untoward medical occurrence in a subject who received study drug without regard to possibility of causal relationship. Severity of the AEs was graded according to the National Cancer Institute (NCI) Common Terminology Criteria for Adverse Events (CTCAE) version 4.0. Only the subjects with treatment-emergent AEs of grade 3 (severe) or higher grade were reported in this endpoint. Safety population included all the subjects who received study drug either in double blind or in open label treatment period.

| | |
|----------------|---------------------|
| End point type | Other pre-specified |
|----------------|---------------------|

End point timeframe:

Baseline up to 30 days after the last dose of study drug or before initiation of a new antitumor treatment, whichever occurred first (up to data cutoff date [23 Sep 2016])

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 62 | 63 | 60 | 60 |
| Units: subjects | 20 | 15 | 22 | 12 |

Statistical analyses

No statistical analyses for this end point

Other pre-specified: Number of Subjects With Clinically Significant Vital Sign Abnormalities

| | |
|-----------------|---|
| End point title | Number of Subjects With Clinically Significant Vital Sign Abnormalities |
|-----------------|---|

End point description:

Clinically significant vital sign abnormality criteria: Systolic blood pressure (SBP): absolute SBP <90 millimeters of mercury (mmHg) and decrease from baseline (DFB) >30 mmHg, absolute SBP>180 mmHg and increase from baseline (IFB) >40 mmHg, final visit or 2 consecutive visits SBP >=20 mmHg change from baseline (CFB), most extreme post-baseline (MEPB) SBP >=140 mmHg, MEPB SBP >=180 mmHg, most extreme SBP >=140 mmHg and >=20 mmHg CFB, most extreme SBP >=180 mmHg and >=20 mmHg CFB; diastolic blood pressure (DBP): absolute DBP >105 mmHg and IFB >30 mmHg, absolute DBP <50 mmHg and DFB >20 mmHg, final visit or 2 consecutive visits DBP >=15 mmHg CFB, MEPB DBP >=90 mmHg, MEPB DBP >=105 mmHg, most extreme DBP >=90 mmHg and >=15 mmHg CFB, most extreme DBP >=105 mmHg and >=15 mmHg CFB; heart rate (HR) <50 beats per minute (BPM) and DFB >20 BPM or HR >120 BPM and IFB >30 BPM. Safety population included all subjects who received study drug in double blind or in open label treatment period.

| | |
|----------------|---------------------|
| End point type | Other pre-specified |
|----------------|---------------------|

End point timeframe:

Baseline up to 30 days after the last dose of study drug or before initiation of a new antitumor treatment, whichever occurred first (up to data cutoff date [23 Sep 2016])

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 62 | 63 | 60 | 60 |
| Units: subjects | | | | |
| Blood pressure | 36 | 39 | 43 | 24 |
| Heart rate | 0 | 2 | 0 | 0 |

Statistical analyses

No statistical analyses for this end point

Other pre-specified: Number of Subjects With Clinically Significant Laboratory Abnormalities

| | |
|-----------------|---|
| End point title | Number of Subjects With Clinically Significant Laboratory Abnormalities |
|-----------------|---|

End point description:

Laboratory tests included hematology (hematocrit, hemoglobin, platelet count, red blood cell count, total neutrophils [absolute] and white blood cell count with differential) and serum chemistry (albumin, alkaline phosphatase, alanine aminotransferase [ALT], aspartate transaminase [AST], blood urea nitrogen and creatinine, calcium, sodium, potassium, chloride, glucose (non-fasting), lactate dehydrogenase, magnesium, phosphorus/phosphate, total bilirubin, total bicarbonate, total protein and uric acid). Clinically significant abnormality evaluation was based on clinical investigator's judgment. Safety population included all the subjects who received study drug either in double blind or in open label treatment period.

| | |
|----------------|---------------------|
| End point type | Other pre-specified |
|----------------|---------------------|

End point timeframe:

Baseline up to 30 days after the last dose of study drug or before initiation of a new antitumor treatment, whichever occurred first (up to data cutoff date [23 Sep 2016])

| End point values | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------------|--|---|--|---|
| Subject group type | Reporting group | Reporting group | Reporting group | Reporting group |
| Number of subjects analysed | 62 | 63 | 60 | 60 |
| Units: subjects | 0 | 0 | 0 | 0 |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

Baseline up to 30 days after the last dose of study drug or before initiation of a new antitumor treatment, whichever occurred first (up to data cutoff date [23 Sep 2016])

Adverse event reporting additional description:

Same event may appear as both an AE and a SAE. However, what is presented are distinct events. An event may be categorized as serious in one subject and as non-serious in another subject, or one subject may have experienced both a serious and non-serious event during the study. AEs and SAEs were collected for safety population.

| | |
|-----------------|----------------|
| Assessment type | Non-systematic |
|-----------------|----------------|

Dictionary used

| | |
|--------------------|--------|
| Dictionary name | MedDRA |
| Dictionary version | 16.1 |

Reporting groups

| | |
|-----------------------|--|
| Reporting group title | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg |
|-----------------------|--|

Reporting group description:

Subjects with no previous hormonal treatment for advanced breast cancer, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|-----------------------|--------------------------------------|
| Reporting group title | Cohort 1: Placebo + Exemestane 25 mg |
|-----------------------|--------------------------------------|

Reporting group description:

Subjects with no previous hormonal treatment for advanced breast cancer received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|-----------------------|--|
| Reporting group title | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|-----------------------|--|

Reporting group description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| | |
|-----------------------|--------------------------------------|
| Reporting group title | Cohort 2: Placebo + Exemestane 25 mg |
|-----------------------|--------------------------------------|

Reporting group description:

Subjects with previous disease progression following hormonal treatment for advanced breast cancer, received placebo matched to enzalutamide along with exemestane 25 mg, orally, once daily in double blind treatment period until disease progression or permanent treatment discontinuation. Eligible subjects with disease progression in double blind period, on their discretion, received enzalutamide 160 mg along with exemestane 50 mg, orally, once daily up to disease progression in open label treatment period. Subjects were followed-up until 30 days after last dose of study drug, death, or before initiation of a new antitumor treatment, whichever occurred first.

| Serious adverse events | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|---|---|--------------------------------------|---|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 15 / 62 (24.19%) | 12 / 63 (19.05%) | 10 / 60 (16.67%) |

| | | | |
|---|----------------|----------------|----------------|
| number of deaths (all causes) | 2 | 8 | 3 |
| number of deaths resulting from adverse events | 2 | 2 | 2 |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| ADENOCARCINOMA PANCREAS | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| BREAST CANCER | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| BREAST CANCER METASTATIC | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| CONTRALATERAL BREAST CANCER | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| LYMPHANGIOSIS CARCINOMATOSA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| MALIGNANT ASCITES | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| MALIGNANT PLEURAL EFFUSION | | | |
| subjects affected / exposed | 2 / 62 (3.23%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| METASTASES TO CENTRAL NERVOUS SYSTEM | | | |

| | | | |
|---|----------------|----------------|----------------|
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| METASTATIC PAIN | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 1 / 63 (1.59%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | 0 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| PLASMA CELL MYELOMA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| General disorders and administration site conditions | | | |
| ASTHENIA | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| CHILLS | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| DISEASE PROGRESSION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | 1 / 1 |
| FACIAL PAIN | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| FATIGUE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| GENERAL PHYSICAL HEALTH DETERIORATION | | | |

| | | | |
|---|----------------|----------------|----------------|
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 1 / 1 |
| INFLUENZA LIKE ILLNESS | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| NON-CARDIAC CHEST PAIN | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| PAIN | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| Immune system disorders | | | |
| ANAPHYLACTIC REACTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| DRUG HYPERSENSITIVITY | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| Respiratory, thoracic and mediastinal disorders | | | |
| DYSпноEA | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 1 / 63 (1.59%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| DYSпноEA EXERTIONAL | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |

| | | | |
|---|----------------|----------------|----------------|
| PLEURAL EFFUSION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| PULMONARY EMBOLISM | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| Psychiatric disorders | | | |
| DELIRIUM | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| SUICIDAL IDEATION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Injury, poisoning and procedural complications | | | |
| FALL | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| HUMERUS FRACTURE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| LACERATION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| OPTIC NERVE INJURY | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|---|----------------|----------------|----------------|
| RADIATION PNEUMONITIS | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| SPINAL COMPRESSION FRACTURE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| TRAUMATIC HAEMORRHAGE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| Cardiac disorders | | | |
| CARDIAC FAILURE CONGESTIVE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Nervous system disorders | | | |
| BRACHIAL PLEXOPATHY | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| CEREBROVASCULAR ACCIDENT | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| DIZZINESS | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| EMBOLIC STROKE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|---|----------------|----------------|----------------|
| GRAND MAL CONVULSION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| HAEMORRHAGE INTRACRANIAL | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| INTRACRANIAL HAEMATOMA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| SPEECH DISORDER | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| SPINAL CORD COMPRESSION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| STATUS EPILEPTICUS | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| SYNCOPE | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| Blood and lymphatic system disorders | | | |
| ANAEMIA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| THROMBOCYTOPENIA | | | |

| | | | |
|---|----------------|----------------|----------------|
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| Gastrointestinal disorders | | | |
| FAECES DISCOLOURED | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 HAEMORRHAGE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| INTESTINAL OBSTRUCTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| OESOPHAGEAL STENOSIS | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| VOMITING | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| HEPATIC HAEMORRHAGE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Renal and urinary disorders | | | |

| | | | |
|---|----------------|----------------|----------------|
| RENAL FAILURE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Musculoskeletal and connective tissue disorders | | | |
| BACK PAIN | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| MASTICATION DISORDER | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| NECK PAIN | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| PAIN IN EXTREMITY | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| PATHOLOGICAL FRACTURE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Infections and infestations | | | |
| BREAST CELLULITIS | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| INFECTIVE EXACERBATION OF CHRONIC OBSTRUCTIVE AIRWAYS DISEASE | | | |

| | | | |
|---|----------------|----------------|----------------|
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| PNEUMONIA | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |
| POSTOPERATIVE WOUND INFECTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| PYELONEPHRITIS | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| URINARY TRACT INFECTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| WOUND INFECTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 1 / 63 (1.59%) | 0 / 60 (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 |
| Metabolism and nutrition disorders | | | |
| HYPERCALCAEMIA | | | |
| subjects affected / exposed | 2 / 62 (3.23%) | 0 / 63 (0.00%) | 2 / 60 (3.33%) |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | 0 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| HYPONATRAEMIA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 1 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| HYPOPHOSPHATAEMIA | | | |

| | | | |
|---|----------------|----------------|----------------|
| subjects affected / exposed | 1 / 62 (1.61%) | 0 / 63 (0.00%) | 0 / 60 (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 |

| Serious adverse events | Cohort 2: Placebo + Exemestane 25 mg | | |
|---|--------------------------------------|--|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 8 / 60 (13.33%) | | |
| number of deaths (all causes) | 2 | | |
| number of deaths resulting from adverse events | 0 | | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| ADENOCARCINOMA PANCREAS | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| BREAST CANCER | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| BREAST CANCER METASTATIC | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| CONTRALATERAL BREAST CANCER | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| LYMPHANGIOSIS CARCINOMATOSA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| MALIGNANT ASCITES | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | |
|--|----------------|--|--|
| MALIGNANT PLEURAL EFFUSION | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| METASTASES TO CENTRAL NERVOUS SYSTEM | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| METASTATIC PAIN | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| PLASMA CELL MYELOMA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| General disorders and administration site conditions | | | |
| ASTHENIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| CHILLS | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| DISEASE PROGRESSION | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| FACIAL PAIN | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | | |
|---|----------------|--|--|--|
| FATIGUE | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| GENERAL PHYSICAL HEALTH DETERIORATION | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| INFLUENZA LIKE ILLNESS | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| NON-CARDIAC CHEST PAIN | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| PAIN | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| Immune system disorders | | | | |
| ANAPHYLACTIC REACTION | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| DRUG HYPERSENSITIVITY | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| Respiratory, thoracic and mediastinal disorders | | | | |
| DYSPNOEA | | | | |

| | | | |
|---|----------------|--|--|
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| DYSпноEA EXERTIONAL | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| PLEURAL EFFUSION | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| PULMONARY EMBOLISM | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Psychiatric disorders | | | |
| DELIRIUM | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| SUICIDAL IDEATION | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Injury, poisoning and procedural complications | | | |
| FALL | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| HUMERUS FRACTURE | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 1 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | |
|---|----------------|--|--|
| LACERATION | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| OPTIC NERVE INJURY | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| RADIATION PNEUMONITIS | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| SPINAL COMPRESSION FRACTURE | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| TRAUMATIC HAEMORRHAGE | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Cardiac disorders | | | |
| CARDIAC FAILURE CONGESTIVE | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 2 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Nervous system disorders | | | |
| BRACHIAL PLEXOPATHY | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| CEREBROVASCULAR ACCIDENT | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | | |
|---|----------------|--|--|--|
| DIZZINESS | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| EMBOLIC STROKE | | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | | |
| occurrences causally related to treatment / all | 0 / 1 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| GRAND MAL CONVULSION | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| HAEMORRHAGE INTRACRANIAL | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| INTRACRANIAL HAEMATOMA | | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | | |
| occurrences causally related to treatment / all | 0 / 1 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| SPEECH DISORDER | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| SPINAL CORD COMPRESSION | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| STATUS EPILEPTICUS | | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | | |
| occurrences causally related to treatment / all | 0 / 0 | | | |
| deaths causally related to treatment / all | 0 / 0 | | | |
| SYNCOPE | | | | |

| | | | |
|---|----------------|--|--|
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Blood and lymphatic system disorders | | | |
| ANAEMIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| THROMBOCYTOPENIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Gastrointestinal disorders | | | |
| FAECES DISCOLOURED | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| GASTROINTESTINAL HAEMORRHAGE | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| INTESTINAL OBSTRUCTION | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| OESOPHAGEAL STENOSIS | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| VOMITING | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Hepatobiliary disorders | | | |

| | | | |
|---|----------------|--|--|
| CHOLECYSTITIS | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| HEPATIC HAEMORRHAGE | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Renal and urinary disorders | | | |
| RENAL FAILURE | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Musculoskeletal and connective tissue disorders | | | |
| BACK PAIN | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| MASTICATION DISORDER | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| NECK PAIN | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| PAIN IN EXTREMITY | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| PATHOLOGICAL FRACTURE | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | |
|---|----------------------------------|--|--|
| Infections and infestations BREAST CELLULITIS subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 0 / 60 (0.00%) 0 / 0 0 / 0 | | |
| INFECTIVE EXACERBATION OF CHRONIC OBSTRUCTIVE AIRWAYS DISEASE subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 0 / 60 (0.00%) 0 / 0 0 / 0 | | |
| PNEUMONIA subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 0 / 60 (0.00%) 0 / 0 0 / 0 | | |
| POSTOPERATIVE WOUND INFECTION subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 0 / 60 (0.00%) 0 / 0 0 / 0 | | |
| PYELONEPHRITIS subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 1 / 60 (1.67%) 0 / 1 0 / 0 | | |
| URINARY TRACT INFECTION subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 1 / 60 (1.67%) 0 / 1 0 / 0 | | |
| WOUND INFECTION subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 0 / 60 (0.00%) 0 / 0 0 / 0 | | |
| Metabolism and nutrition disorders HYPERCALCAEMIA | | | |

| | | | |
|---|----------------|--|--|
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences causally related to treatment / all | 1 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| HYPONATRAEMIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| HYPOPHOSPHATAEMIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences causally related to treatment / all | 0 / 0 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

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

| Non-serious adverse events | Cohort 1: Enzalutamide 160 mg + Exemestane 50 mg | Cohort 1: Placebo + Exemestane 25 mg | Cohort 2: Enzalutamide 160 mg + Exemestane 50 mg |
|---|---|--------------------------------------|---|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 59 / 62 (95.16%) | 58 / 63 (92.06%) | 58 / 60 (96.67%) |
| Investigations | | | |
| ALANINE AMINOTRANSFERASE INCREASED | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 2 / 60 (3.33%) |
| occurrences (all) | 0 | 0 | 3 |
| ASPARTATE AMINOTRANSFERASE INCREASED | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 4 / 63 (6.35%) | 2 / 60 (3.33%) |
| occurrences (all) | 0 | 4 | 3 |
| WHITE BLOOD CELL COUNT DECREASED | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 3 / 60 (5.00%) |
| occurrences (all) | 0 | 0 | 3 |
| Vascular disorders | | | |
| HOT FLUSH | | | |
| subjects affected / exposed | 19 / 62 (30.65%) | 14 / 63 (22.22%) | 14 / 60 (23.33%) |
| occurrences (all) | 21 | 16 | 19 |
| HYPERTENSION | | | |

| | | | |
|---|---------------------|---------------------|---------------------|
| subjects affected / exposed occurrences (all) | 6 / 62 (9.68%) 7 | 4 / 63 (6.35%) 4 | 0 / 60 (0.00%) 0 |
| Nervous system disorders | | | |
| DIZZINESS | | | |
| subjects affected / exposed | 8 / 62 (12.90%) | 4 / 63 (6.35%) | 5 / 60 (8.33%) |
| occurrences (all) | 8 | 4 | 5 |
| HEADACHE | | | |
| subjects affected / exposed | 9 / 62 (14.52%) | 6 / 63 (9.52%) | 9 / 60 (15.00%) |
| occurrences (all) | 10 | 6 | 12 |
| AMNESIA | | | |
| subjects affected / exposed | 4 / 62 (6.45%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences (all) | 4 | 0 | 0 |
| COGNITIVE DISORDER | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 3 / 60 (5.00%) |
| occurrences (all) | 0 | 0 | 3 |
| DISTURBANCE IN ATTENTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 3 / 60 (5.00%) |
| occurrences (all) | 0 | 0 | 4 |
| NEUROPATHY PERIPHERAL | | | |
| subjects affected / exposed | 4 / 62 (6.45%) | 3 / 63 (4.76%) | 0 / 60 (0.00%) |
| occurrences (all) | 4 | 3 | 0 |
| PARAESTHESIA | | | |
| subjects affected / exposed | 4 / 62 (6.45%) | 2 / 63 (3.17%) | 0 / 60 (0.00%) |
| occurrences (all) | 5 | 2 | 0 |
| SOMNOLENCE | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 3 / 60 (5.00%) |
| occurrences (all) | 0 | 0 | 3 |
| Blood and lymphatic system disorders | | | |
| ANAEMIA | | | |
| subjects affected / exposed | 4 / 62 (6.45%) | 1 / 63 (1.59%) | 6 / 60 (10.00%) |
| occurrences (all) | 11 | 1 | 8 |
| General disorders and administration site conditions | | | |
| ASTHENIA | | | |
| subjects affected / exposed | 10 / 62 (16.13%) | 7 / 63 (11.11%) | 6 / 60 (10.00%) |
| occurrences (all) | 9 | 7 | 8 |
| FATIGUE | | | |

| | | | |
|---|------------------|------------------|------------------|
| subjects affected / exposed | 23 / 62 (37.10%) | 21 / 63 (33.33%) | 22 / 60 (36.67%) |
| occurrences (all) | 29 | 24 | 24 |
| OEDEMA PERIPHERAL | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 2 / 60 (3.33%) |
| occurrences (all) | 0 | 0 | 2 |
| PAIN | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences (all) | 0 | 0 | 0 |
| PYREXIA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences (all) | 0 | 0 | 0 |
| Gastrointestinal disorders | | | |
| CONSTIPATION | | | |
| subjects affected / exposed | 10 / 62 (16.13%) | 7 / 63 (11.11%) | 8 / 60 (13.33%) |
| occurrences (all) | 10 | 7 | 10 |
| DIARRHOEA | | | |
| subjects affected / exposed | 12 / 62 (19.35%) | 10 / 63 (15.87%) | 6 / 60 (10.00%) |
| occurrences (all) | 16 | 10 | 8 |
| DYSPEPSIA | | | |
| subjects affected / exposed | 1 / 62 (1.61%) | 6 / 63 (9.52%) | 5 / 60 (8.33%) |
| occurrences (all) | 1 | 6 | 5 |
| NAUSEA | | | |
| subjects affected / exposed | 24 / 62 (38.71%) | 10 / 63 (15.87%) | 18 / 60 (30.00%) |
| occurrences (all) | 33 | 11 | 23 |
| VOMITING | | | |
| subjects affected / exposed | 11 / 62 (17.74%) | 7 / 63 (11.11%) | 6 / 60 (10.00%) |
| occurrences (all) | 17 | 12 | 8 |
| ABDOMINAL PAIN UPPER | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 4 / 60 (6.67%) |
| occurrences (all) | 0 | 0 | 4 |
| ABDOMINAL PAIN | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 2 / 60 (3.33%) |
| occurrences (all) | 0 | 0 | 2 |
| Respiratory, thoracic and mediastinal disorders | | | |

| | | | |
|--|------------------------|------------------------|------------------------|
| COUGH subjects affected / exposed occurrences (all) | 9 / 62 (14.52%) 10 | 6 / 63 (9.52%) 7 | 2 / 60 (3.33%) 2 |
| DYSпноEA subjects affected / exposed occurrences (all) | 9 / 62 (14.52%) 10 | 7 / 63 (11.11%) 8 | 5 / 60 (8.33%) 7 |
| OROPHARYNGEAL PAIN subjects affected / exposed occurrences (all) | 4 / 62 (6.45%) 4 | 2 / 63 (3.17%) 2 | 0 / 60 (0.00%) 0 |
| Skin and subcutaneous tissue disorders | | | |
| ALOPECIA subjects affected / exposed occurrences (all) | 8 / 62 (12.90%) 9 | 3 / 63 (4.76%) 3 | 5 / 60 (8.33%) 5 |
| RASH subjects affected / exposed occurrences (all) | 0 / 62 (0.00%) 0 | 0 / 63 (0.00%) 0 | 3 / 60 (5.00%) 4 |
| Psychiatric disorders | | | |
| ANXIETY subjects affected / exposed occurrences (all) | 7 / 62 (11.29%) 8 | 4 / 63 (6.35%) 4 | 0 / 60 (0.00%) 0 |
| INSOMNIA subjects affected / exposed occurrences (all) | 5 / 62 (8.06%) 5 | 4 / 63 (6.35%) 4 | 5 / 60 (8.33%) 5 |
| DEPRESSED MOOD subjects affected / exposed occurrences (all) | 0 / 62 (0.00%) 0 | 0 / 63 (0.00%) 0 | 4 / 60 (6.67%) 4 |
| DEPRESSION subjects affected / exposed occurrences (all) | 0 / 62 (0.00%) 0 | 0 / 63 (0.00%) 0 | 3 / 60 (5.00%) 3 |
| Musculoskeletal and connective tissue disorders | | | |
| ARTHRALGIA subjects affected / exposed occurrences (all) | 14 / 62 (22.58%) 16 | 11 / 63 (17.46%) 14 | 10 / 60 (16.67%) 11 |
| BACK PAIN subjects affected / exposed occurrences (all) | 11 / 62 (17.74%) 11 | 5 / 63 (7.94%) 6 | 4 / 60 (6.67%) 5 |

| | | | |
|------------------------------------|-----------------|-----------------|-----------------|
| BONE PAIN | | | |
| subjects affected / exposed | 2 / 62 (3.23%) | 4 / 63 (6.35%) | 5 / 60 (8.33%) |
| occurrences (all) | 2 | 4 | 6 |
| MUSCULOSKELETAL CHEST PAIN | | | |
| subjects affected / exposed | 7 / 62 (11.29%) | 4 / 63 (6.35%) | 2 / 60 (3.33%) |
| occurrences (all) | 9 | 4 | 3 |
| MUSCULOSKELETAL PAIN | | | |
| subjects affected / exposed | 7 / 62 (11.29%) | 1 / 63 (1.59%) | 0 / 60 (0.00%) |
| occurrences (all) | 8 | 2 | 0 |
| MYALGIA | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 0 / 60 (0.00%) |
| occurrences (all) | 0 | 0 | 0 |
| PAIN IN EXTREMITY | | | |
| subjects affected / exposed | 8 / 62 (12.90%) | 8 / 63 (12.70%) | 3 / 60 (5.00%) |
| occurrences (all) | 6 | 13 | 5 |
| MUSCULOSKELETAL STIFFNESS | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 3 / 60 (5.00%) |
| occurrences (all) | 0 | 0 | 3 |
| Infections and infestations | | | |
| URINARY TRACT INFECTION | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 1 / 60 (1.67%) |
| occurrences (all) | 0 | 0 | 1 |
| Influenza | | | |
| subjects affected / exposed | 2 / 62 (3.23%) | 4 / 63 (6.35%) | 0 / 60 (0.00%) |
| occurrences (all) | 2 | 5 | 0 |
| Nasopharyngitis | | | |
| subjects affected / exposed | 0 / 62 (0.00%) | 0 / 63 (0.00%) | 3 / 60 (5.00%) |
| occurrences (all) | 0 | 0 | 3 |
| Metabolism and nutrition disorders | | | |
| DECREASED APPETITE | | | |
| subjects affected / exposed | 6 / 62 (9.68%) | 6 / 63 (9.52%) | 6 / 60 (10.00%) |
| occurrences (all) | 9 | 6 | 7 |

| | | | |
|---|--------------------------------------|--|--|
| Non-serious adverse events | Cohort 2: Placebo + Exemestane 25 mg | | |
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 53 / 60 (88.33%) | | |

| | | | |
|---|------------------|--|--|
| Investigations | | | |
| ALANINE AMINOTRANSFERASE INCREASED | | | |
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 5 | | |
| ASPARTATE AMINOTRANSFERASE INCREASED | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 3 | | |
| WHITE BLOOD CELL COUNT DECREASED | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences (all) | 1 | | |
| Vascular disorders | | | |
| HOT FLUSH | | | |
| subjects affected / exposed | 9 / 60 (15.00%) | | |
| occurrences (all) | 10 | | |
| HYPERTENSION | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| Nervous system disorders | | | |
| DIZZINESS | | | |
| subjects affected / exposed | 2 / 60 (3.33%) | | |
| occurrences (all) | 2 | | |
| HEADACHE | | | |
| subjects affected / exposed | 10 / 60 (16.67%) | | |
| occurrences (all) | 17 | | |
| AMNESIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| COGNITIVE DISORDER | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences (all) | 1 | | |
| DISTURBANCE IN ATTENTION | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| NEUROPATHY PERIPHERAL | | | |

| | | | |
|--|------------------|--|--|
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| PARAESTHESIA | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| SOMNOLENCE | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| Blood and lymphatic system disorders | | | |
| ANAEMIA | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 9 | | |
| General disorders and administration site conditions | | | |
| ASTHENIA | | | |
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 8 | | |
| FATIGUE | | | |
| subjects affected / exposed | 13 / 60 (21.67%) | | |
| occurrences (all) | 16 | | |
| OEDEMA PERIPHERAL | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 4 | | |
| PAIN | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 4 | | |
| PYREXIA | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 3 | | |
| Gastrointestinal disorders | | | |
| CONSTIPATION | | | |
| subjects affected / exposed | 8 / 60 (13.33%) | | |
| occurrences (all) | 9 | | |
| DIARRHOEA | | | |
| subjects affected / exposed | 10 / 60 (16.67%) | | |
| occurrences (all) | 15 | | |
| DYSPEPSIA | | | |

| | | | |
|---|------------------|--|--|
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 4 | | |
| NAUSEA | | | |
| subjects affected / exposed | 11 / 60 (18.33%) | | |
| occurrences (all) | 17 | | |
| VOMITING | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 4 | | |
| ABDOMINAL PAIN UPPER | | | |
| subjects affected / exposed | 2 / 60 (3.33%) | | |
| occurrences (all) | 3 | | |
| ABDOMINAL PAIN | | | |
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 5 | | |
| Respiratory, thoracic and mediastinal disorders | | | |
| COUGH | | | |
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 5 | | |
| DYSPNOEA | | | |
| subjects affected / exposed | 5 / 60 (8.33%) | | |
| occurrences (all) | 5 | | |
| OROPHARYNGEAL PAIN | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| Skin and subcutaneous tissue disorders | | | |
| ALOPECIA | | | |
| subjects affected / exposed | 2 / 60 (3.33%) | | |
| occurrences (all) | 2 | | |
| RASH | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| Psychiatric disorders | | | |
| ANXIETY | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| INSOMNIA | | | |

| | | | |
|---|------------------|--|--|
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 4 | | |
| DEPRESSED MOOD | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| DEPRESSION | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 5 | | |
| Musculoskeletal and connective tissue disorders | | | |
| ARTHRALGIA | | | |
| subjects affected / exposed | 7 / 60 (11.67%) | | |
| occurrences (all) | 9 | | |
| BACK PAIN | | | |
| subjects affected / exposed | 12 / 60 (20.00%) | | |
| occurrences (all) | 13 | | |
| BONE PAIN | | | |
| subjects affected / exposed | 2 / 60 (3.33%) | | |
| occurrences (all) | 4 | | |
| MUSCULOSKELETAL CHEST PAIN | | | |
| subjects affected / exposed | 3 / 60 (5.00%) | | |
| occurrences (all) | 3 | | |
| MUSCULOSKELETAL PAIN | | | |
| subjects affected / exposed | 0 / 60 (0.00%) | | |
| occurrences (all) | 0 | | |
| MYALGIA | | | |
| subjects affected / exposed | 4 / 60 (6.67%) | | |
| occurrences (all) | 6 | | |
| PAIN IN EXTREMITY | | | |
| subjects affected / exposed | 5 / 60 (8.33%) | | |
| occurrences (all) | 6 | | |
| MUSCULOSKELETAL STIFFNESS | | | |
| subjects affected / exposed | 1 / 60 (1.67%) | | |
| occurrences (all) | 2 | | |
| Infections and infestations | | | |

| | | | |
|--|---------------------|--|--|
| URINARY TRACT INFECTION subjects affected / exposed occurrences (all) | 4 / 60 (6.67%) 9 | | |
| Influenza subjects affected / exposed occurrences (all) | 0 / 60 (0.00%) 0 | | |
| Nasopharyngitis subjects affected / exposed occurrences (all) | 1 / 60 (1.67%) 1 | | |
| Metabolism and nutrition disorders DECREASED APPETITE subjects affected / exposed occurrences (all) | 2 / 60 (3.33%) 2 | | |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|------------------|--|
| 05 October 2016 | To add an open-label period if the study met its primary endpoint. |
| 01 February 2017 | To define and analyze subject cohorts by gene expression status rather than Immunohistochemistry analysis of breast tumor tissue for nuclear androgen receptor staining. |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported