



## Clinical trial results:

### A Phase 3 Randomized, Double-Blind, Placebo-Controlled, Multicenter Study of the Analgesic Efficacy and Safety of the Subcutaneous Administration of Tanezumab in Subjects with Osteoarthritis of the Hip Or Knee

#### Summary

EudraCT number	2013-004508-21
Trial protocol	DE AT GB PT HU FI SK ES SE BG IT
Global end of trial date	14 November 2018

#### Results information

Result version number	v1 (current)
This version publication date	08 November 2019
First version publication date	08 November 2019

#### Trial information

##### Trial identification

Sponsor protocol code	A4091057
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02709486
WHO universal trial number (UTN)	-
Other trial identifiers	Other Identifier: Alias Study Number: OA 6-MONTH EU STUDY

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 18007181021, ClinicalTrials.gov_Inquiries@pfizer.com
Scientific contact	Pfizer ClinicalTrials.gov Call Center, Pfizer, Inc., 001 18007181021, 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	Final
Date of interim/final analysis	02 March 2016
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	14 November 2018
Was the trial ended prematurely?	No

Notes:

## General information about the trial

Main objective of the trial:

To demonstrate superior efficacy of tanezumab 5 milligrams (mg) and 2.5 mg administered subcutaneously (SC) every 8 weeks versus placebo at Week 24.

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 trial subjects were followed.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	02 March 2016
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	Austria: 27
Country: Number of subjects enrolled	Bulgaria: 70
Country: Number of subjects enrolled	Finland: 11
Country: Number of subjects enrolled	France: 18
Country: Number of subjects enrolled	Germany: 46
Country: Number of subjects enrolled	Hungary: 87
Country: Number of subjects enrolled	Italy: 15
Country: Number of subjects enrolled	Japan: 106
Country: Number of subjects enrolled	Poland: 75
Country: Number of subjects enrolled	Portugal: 1
Country: Number of subjects enrolled	Romania: 61
Country: Number of subjects enrolled	Slovakia: 37
Country: Number of subjects enrolled	Spain: 206
Country: Number of subjects enrolled	Sweden: 67
Country: Number of subjects enrolled	United Kingdom: 22
Worldwide total number of subjects	849
EEA total number of subjects	743

Notes:

<b>Subjects enrolled per age group</b>	
In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	391
From 65 to 84 years	449
85 years and over	9

## Subject disposition

### Recruitment

Recruitment details: -

### Pre-assignment

Screening details:

The study was conducted at 141 sites in 15 countries. Twenty (20) sites were terminated.

### Period 1

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

### Arms

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

Arm description:

Placebo matched to tanezumab (RN624 or PF-04383119) injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

Arm type	Placebo
Investigational medicinal product name	Placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

Placebo injection administered subcutaneously (matched to tanezumab [RN624 or PF-04383119]) on Day 1 (Baseline), Week 8 and Week 16.

<b>Arm title</b>	Tanezumab 2.5 mg
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Arm description:

Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

Arm type	Experimental
Investigational medicinal product name	Tanezumab
Investigational medicinal product code	RN624 or PF- 04383119
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

Tanezumab (RN624 or PF-04383119) 2.5 mg injection, subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

<b>Arm title</b>	Tanezumab 5 mg
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Arm description:

Tanezumab (RN624 or PF-04383119) 5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

Arm type	Experimental
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Investigational medicinal product name	Tanezumab
Investigational medicinal product code	RN624 or PF- 04383119
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

Tanezumab (RN624 or PF-04383119) 5 mg injection, subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

<b>Number of subjects in period 1</b>	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg
Started	282	283	284
Completed	238	249	239
Not completed	44	34	45
Adverse event, serious fatal	-	-	2
Consent withdrawn by subject	32	22	32
Adverse event	2	5	3
Unspecified	-	2	3
Lost to follow-up	3	2	2
Insufficient clinical response	7	3	3

## Baseline characteristics

### Reporting groups

Reporting group title	Placebo
Reporting group description: Placebo matched to tanezumab (RN624 or PF-04383119) injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.	
Reporting group title	Tanezumab 2.5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.	
Reporting group title	Tanezumab 5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.	

Reporting group values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg
Number of subjects	282	283	284
Age categorical			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
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)	138	138	115
From 65-84 years	142	143	164
85 years and over	2	2	5
Age Continuous			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: years			
arithmetic mean	64.24	65.17	65.23
standard deviation	± 9.58	± 8.39	± 10.16
Sex: Female, Male			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
Female	196	198	193
Male	86	85	91
Race/Ethnicity, Customized			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
White	247	245	248
Black or African American	0	0	0
Asian	34	38	34
Other	1	0	2
Unknown	0	0	0

Ethnicity (NIH/OMB)			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
Hispanic or Latino	19	19	10
Not Hispanic or Latino	263	264	274
Unknown or Not Reported	0	0	0

<b>Reporting group values</b>	Total		
Number of subjects	849		
Age categorical			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
In utero	0		
Preterm newborn infants (gestational age < 37 wks)	0		
Newborns (0-27 days)	0		
Infants and toddlers (28 days-23 months)	0		
Children (2-11 years)	0		
Adolescents (12-17 years)	0		
Adults (18-64 years)	391		
From 65-84 years	449		
85 years and over	9		
Age Continuous			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: years			
arithmetic mean			
standard deviation	-		
Sex: Female, Male			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
Female	587		
Male	262		
Race/Ethnicity, Customized			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
White	740		
Black or African American	0		
Asian	106		
Other	3		
Unknown	0		
Ethnicity (NIH/OMB)			
The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.			
Units: Subjects			
Hispanic or Latino	48		
Not Hispanic or Latino	801		
Unknown or Not Reported	0		

## End points

### End points reporting groups

Reporting group title	Placebo
Reporting group description: Placebo matched to tanezumab (RN624 or PF-04383119) injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.	
Reporting group title	Tanezumab 2.5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.	
Reporting group title	Tanezumab 5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.	

### Primary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 24

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 24
End point description: WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with osteoarthritis (OA). The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint (knee or hip) during past 48 hours (hrs). It was calculated as the mean of scores from 5 individual questions scored on a numerical rating scale (NRS). Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. The intent to treat (ITT) population included all randomized subjects who received at least one dose of subcutaneous (SC) study medication (either tanezumab or placebo).	
End point type	Primary
End point timeframe: Baseline, Week 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)	-2.24 (± 0.17)	-2.70 (± 0.17)	-2.85 (± 0.17)	

### Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. Analysis of covariance (ANCOVA) model for imputed datasets included treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects,	



baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority <sup>[1]</sup>
P-value	= 0.0088 <sup>[2]</sup>
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.46
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.81
upper limit	-0.12
Variability estimate	Standard error of the mean
Dispersion value	0.18

Notes:

[1] - Step-down testing procedure within each of the primary end points was applied to maintain Type I error. Tanezumab 5 mg versus placebo was tested first and if found significant, then the testing was continued for Tanezumab 2.5 mg versus placebo. Tanezumab treatment group was declared as superior to placebo if the corresponding treatment contrast was significant over all 3 primary end points.

[2] - Threshold for significance at 0.05 level.

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority <sup>[3]</sup>
P-value	= 0.0006 <sup>[4]</sup>
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.97
upper limit	-0.26
Variability estimate	Standard error of the mean
Dispersion value	0.18

Notes:

[3] - A step-down testing procedure within each of the primary end points was applied to maintain Type I error. Tanezumab 5 mg versus placebo was tested first and if found significant, then the testing was continued for Tanezumab 2.5 mg versus placebo. A tanezumab treatment group was declared as superior to placebo if the corresponding treatment contrast was significant over all 3 primary end points.

[4] - Threshold for significance at 0.05 level.

### **Primary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Week 24**

End point title	Change From Baseline in Western Ontario and McMaster
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## End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function refers to subjects ability to move around and perform usual activities of daily living. The WOMAC physical function subscale is a 17-item questionnaire used to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours. It was calculated as mean of the scores from 17 individual questions scored on a NRS. Scores for each question and WOMAC physical function subscale score on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), where higher scores indicated extreme difficulty/worse physical function. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Primary
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End point timeframe:

Baseline, Week 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)	-2.11 (± 0.17)	-2.70 (± 0.17)	-2.82 (± 0.17)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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## Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority <sup>[5]</sup>
P-value	= 0.0008 <sup>[6]</sup>
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.59
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.93
upper limit	-0.24
Variability estimate	Standard error of the mean
Dispersion value	0.18

## Notes:

[5] - Step-down testing procedure within each of the primary end points was applied to maintain Type I error. Tanezumab 5 mg versus placebo was tested first and if found significant, then the testing was continued for Tanezumab 2.5 mg versus placebo. Tanezumab treatment group was declared as superior

to placebo if the corresponding treatment contrast was significant over all 3 primary end points.

[6] - Threshold for significance at 0.05 level.

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority <sup>[7]</sup>
P-value	< 0.0001 <sup>[8]</sup>
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.05
upper limit	-0.36
Variability estimate	Standard error of the mean
Dispersion value	0.17

Notes:

[7] - Step-down testing procedure within each of the primary end points was applied to maintain Type I error. Tanezumab 5 mg versus placebo was tested first and if found significant, then the testing was continued for Tanezumab 2.5 mg versus placebo. Tanezumab treatment group was declared as superior to placebo if the corresponding treatment contrast was significant over all 3 primary end points.

[8] - Threshold for significance at 0.05 level.

### **Primary: Change from Baseline in the Patient's Global Assessment (PGA) of Osteoarthritis at Week 24**

End point title	Change from Baseline in the Patient's Global Assessment (PGA) of Osteoarthritis at Week 24
End point description:	
PGA of OA was assessed by asking a question from subjects: "Considering all the ways your osteoarthritis in your knee or hip (index joint) affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, where 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5= very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worsening of condition. The intent to treat population was defined as all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).	
End point type	Primary
End point timeframe:	
Baseline, Week 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)	-0.72 (± 0.06)	-0.82 (± 0.06)	-0.90 (± 0.06)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority <sup>[9]</sup>
P-value	= 0.1092 <sup>[10]</sup>
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.24
upper limit	0.02
Variability estimate	Standard error of the mean
Dispersion value	0.07

Notes:

[9] - A step-down testing procedure within each of the primary end points was applied to maintain Type I error. Tanezumab 5 mg versus placebo was tested first and if found significant, then the testing was continued for Tanezumab 2.5 mg versus placebo. A tanezumab treatment group was declared as superior to placebo if the corresponding treatment contrast was significant over all 3 primary end points.

[10] - Threshold for significance at 0.05 level.

Statistical analysis title	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority <sup>[11]</sup>
P-value	= 0.0051 <sup>[12]</sup>
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.19

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.32
upper limit	-0.06
Variability estimate	Standard error of the mean
Dispersion value	0.07

Notes:

[11] - A step-down testing procedure within each of the primary end points was applied to maintain Type I error. Tanezumab 5 mg versus placebo was tested first and if found significant, then the testing was continued for Tanezumab 2.5 mg versus placebo. A tanezumab treatment group was declared as superior to placebo if the corresponding treatment contrast was significant over all 3 primary end points.  
[12] - Threshold for significance at 0.05 level.

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 2, 4, 8, 12 and 16

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 2, 4, 8, 12 and 16
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to osteoarthritis of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a numerical rating scale (NRS). Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 12 and 16

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.35 (± 0.14)	-2.02 (± 0.14)	-1.69 (± 0.14)	
Change at Week 4	-1.78 (± 0.15)	-2.57 (± 0.15)	-2.56 (± 0.15)	
Change at Week 8	-1.84 (± 0.15)	-2.47 (± 0.15)	-2.61 (± 0.15)	
Change at Week 12	-2.19 (± 0.17)	-2.91 (± 0.16)	-2.96 (± 0.16)	
Change at Week 16	-2.10 (± 0.17)	-2.69 (± 0.17)	-2.69 (± 0.17)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain

subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.94
upper limit	-0.4
Variability estimate	Standard error of the mean
Dispersion value	0.14

### Statistical analysis title

Placebo Versus Tanezumab 5 mg

Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0149
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.61
upper limit	-0.07
Variability estimate	Standard error of the mean
Dispersion value	0.14

### Statistical analysis title

Placebo Versus Tanezumab 2.5 mg

Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.08
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.78
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.07
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.92
upper limit	-0.32
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.07
upper limit	-0.47
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.05
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.09
upper limit	-0.44
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.59
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.93
upper limit	-0.26
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0004
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.6
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.93
upper limit	-0.27
Variability estimate	Standard error of the mean
Dispersion value	0.17

**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 32**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 32
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to osteoarthritis of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a numerical rating scale (NRS). Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores

indicated higher pain. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
End point timeframe:	
Baseline, Week 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=281, 282, 284)	6.59 (± 0.94)	6.70 (± 0.94)	6.60 (± 0.89)	
Change at Week 32 (n=231, 247, 246)	-2.70 (± 2.06)	-2.29 (± 1.95)	-2.26 (± 2.24)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 2, 4, 8, 12 and 16

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 2, 4, 8, 12 and 16
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function refers to subjects ability to move around and perform usual activities of daily living. The WOMAC physical function subscale is a 17-item questionnaire used to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours. It was calculated as mean of the scores from 17 individual questions scored on a NRS. Scores for each question and WOMAC physical function subscale score on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), where higher scores indicated extreme difficulty/worse physical function. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 12 and 16	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.26 (± 0.14)	-1.95 (± 0.14)	-1.69 (± 0.14)	

Change at Week 4	-1.71 (± 0.15)	-2.52 (± 0.15)	-2.50 (± 0.15)	
Change at Week 8	-1.76 (± 0.15)	-2.38 (± 0.15)	-2.52 (± 0.15)	
Change at Week 12	-2.04 (± 2.16)	-2.83 (± 0.16)	-2.87 (± 0.16)	
Change at Week 16	-2.02 (± 0.17)	-2.68 (± 0.16)	-2.69 (± 0.16)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.69
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.95
upper limit	-0.42
Variability estimate	Standard error of the mean
Dispersion value	0.14

Statistical analysis title	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0014
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.43
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.7
upper limit	-0.17

Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.81
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.09
upper limit	-0.53
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.08
upper limit	-0.51
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.93
upper limit	-0.33
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.76
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.06
upper limit	-0.47
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.11
upper limit	-0.46
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.82
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.15
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1
upper limit	-0.34
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1
upper limit	-0.35
Variability estimate	Standard error of the mean
Dispersion value	0.17

## **Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Week 32**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function
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## End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function refers to subject's ability to move around and perform usual activities of daily living. The WOMAC physical function subscale is a 17-item questionnaire used to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours. It was calculated as mean of the scores from 17 individual questions scored on a NRS. Scores for each question and WOMAC physical function subscale score on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), where higher scores indicated extreme difficulty/worse physical function. The ITT population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Week 32

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=281, 282, 284)	6.59 (± 0.94)	6.70 (± 0.94)	6.60 (± 0.89)	
Change at Week 32 (n= 231, 247, 246)	-2.70 (± 2.06)	-2.29 (± 1.95)	-2.26 (± 2.24)	

## Statistical analyses

No statistical analyses for this end point

**Secondary: Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Weeks 2, 4, 8, 12 and 16**

End point title	Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Weeks 2, 4, 8, 12 and 16
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## End point description:

PGA of OA was assessed by asking a question from subjects: "Considering all the ways your osteoarthritis in your knee or hip (index joint) affects you, how are you doing today?" subjects responded on a scale ranging from 1-5, where 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5 = very poor (very severe symptoms and inability to carry out all normal activities). The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 12 and 16

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-0.50 (± 0.05)	-0.73 (± 0.05)	-0.67 (± 0.05)	
Change at Week 4	-0.60 (± 0.05)	-0.85 (± 0.05)	-0.93 (± 0.05)	
Change at Week 8	-0.62 (± 0.05)	-0.79 (± 0.05)	-0.88 (± 0.05)	
Change at Week 12	-0.71 (± 0.06)	-0.99 (± 0.06)	-1.03 (± 0.06)	
Change at Week 16	-0.64 (± 0.06)	-0.78 (± 0.06)	-0.90 (± 0.06)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.23
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	-0.12
Variability estimate	Standard error of the mean
Dispersion value	0.05

Statistical analysis title	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg

Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0022
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.27
upper limit	-0.06
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.35
upper limit	-0.14
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	-0.22
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0029
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.28
upper limit	-0.06
Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	-0.15
Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.4
upper limit	-0.17
Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	-0.2
Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0352
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.26
upper limit	-0.01
Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline PGA of osteoarthritis and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	-0.13
Variability estimate	Standard error of the mean
Dispersion value	0.06

### Secondary: Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Week 32

End point title	Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Week 32
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#### End point description:

PGA of OA was assessed by asking a question from subjects: "Considering all the ways your osteoarthritis in your knee or hip (index joint) affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, where 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5 = very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worse condition. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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#### End point timeframe:

Baseline, Week 32

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n= 281, 282, 284)	3.55 (± 0.62)	3.61 (± 0.62)	3.56 (± 0.63)	
Change at Week 32 (n= 231, 247, 246)	-0.84 (± 0.87)	-0.64 (± 0.88)	-0.63 (± 0.91)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects Meeting Outcomes Measures in Arthritis Clinical

## **Trials-Osteoarthritis Research Society International (OMERACT-OARSI) Responder Index**

End point title	Percentage of Subjects Meeting Outcomes Measures in Arthritis Clinical Trials-Osteoarthritis Research Society International (OMERACT-OARSI) Responder Index
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End point description:

Subjects were considered as OMERACT-OARSI responders: if the change (improvement) from baseline to week of interest was greater than or equal to ( $\geq$ ) 50 percent(%) and  $\geq 2$  units in either WOMAC pain subscale/physical function subscale score; if change (improvement) from baseline to week of interest was  $\geq 20\%$  and  $\geq 1$  unit in at least 2 of the following: 1) WOMAC pain subscale: assess amount of pain experienced (score: 0 [no pain] to 10 [extreme pain], higher score = more pain), 2) WOMAC physical function subscale: assess degree of difficulty experienced (score: 0 [minimum difficulty] to 10 [extreme difficulty], higher score = worse physical function) and 3) PGA of OA: (score: 1 [very good] to 5 [very poor], higher score = worse condition). Missing data was imputed using mixed baseline/last observation carried forward (BOCF/LOCF). ITT population. 'number of subjects analysed' (N) = subjects who were evaluable for this endpoint; 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Weeks 2, 4, 8, 12, 16, 24 and 32

<b>End point values</b>	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	281	282	284	
Units: percentage of subjects				
number (not applicable)				
Week 2 (n= 281, 282, 284)	44.1	63.1	54.9	
Week 4 (n= 281, 282, 284)	53.0	74.8	71.8	
Week 8 (n= 281, 282, 284)	61.9	75.5	75.4	
Week 12 (n= 281, 282, 284)	68.7	80.9	81.0	
Week 16 (n= 281, 282, 284)	64.4	78.7	76.1	
Week 24 (n= 281, 282, 284)	65.1	76.2	77.1	
Week 32 (n= 231, 247, 246)	74.0	66.4	63.0	

## **Statistical analyses**

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2: Odds ratio and 95 percent (%) confidence interval (CI) estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.23



Confidence interval	
level	95 %
sides	2-sided
lower limit	1.59
upper limit	3.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0085
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.56
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.12
upper limit	2.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.89
upper limit	3.88

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 4: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.31
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.62
upper limit	3.28

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 8: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.91
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.33
upper limit	2.75

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 8: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.32
upper limit	2.73

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0009
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.31
upper limit	2.86

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0008
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.95

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.32
upper limit	2.89

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.41
upper limit	3.01

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0022
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.78
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.23
upper limit	2.57

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0032
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.21
upper limit	2.54

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0013
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.85
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.27
upper limit	2.69

### **Secondary: Percentage of Subjects With Cumulative Percent Change From Baseline in the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 16 and 24**

End point title	Percentage of Subjects With Cumulative Percent Change From Baseline in the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 16 and 24
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint during past 48 hours, calculated as the mean of scores from 5 individual questions scored on a NRS. Scores for each question and WOMAC Pain subscale score on NRS ranged from 0(no pain) to 10

(extreme pain), where higher scores=higher pain. Percentage of subjects with cumulative reduction (as percent) (>0% ; >= 10, 20, 30, 40, 50, 60, 70, 80, 90%; =100%) in WOMAC pain subscale from Baseline to Weeks 16 and 24 were reported, subjects (%) are reported more than once in categories specified. Missing data was imputed using mixed BOCF/LOCF. ITT population. Here, 'N'=subjects evaluable for this endpoint.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	281	282	284	
Units: percentage of subjects				
number (not applicable)				
Week 16: >0%	81.9	91.8	89.4	
Week 16: >=10%	77.6	87.6	82.0	
Week 16: >=20%	66.9	79.4	76.1	
Week 16: >=30%	56.2	68.1	68.7	
Week 16: >=40%	45.2	57.8	59.9	
Week 16: >=50%	35.9	49.6	47.5	
Week 16: >=60%	27.0	34.4	36.6	
Week 16: >=70%	17.1	22.3	24.3	
Week 16: >=80%	10.0	14.5	14.4	
Week 16: >=90%	3.2	7.4	4.9	
Week 16: =100%	1.1	1.8	3.2	
Week 24: >0%	80.1	89.7	88.4	
Week 24: >=10%	70.8	83.0	83.5	
Week 24: >=20%	65.8	76.2	76.8	
Week 24: >=30%	56.6	65.6	68.7	
Week 24: >=40%	44.8	55.0	59.2	
Week 24: >=50%	33.8	45.4	47.9	
Week 24: >=60%	24.9	33.3	36.6	
Week 24: >=70%	17.8	21.3	23.2	
Week 24: >=80%	11.4	12.1	14.1	
Week 24: >=90%	3.2	5.3	6.0	
Week 24: =100%	1.1	0.7	2.8	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Reduction >=30 Percent (%), >=50%, >=70% and >=90% Response

End point title	Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Reduction >=30 Percent (%), >=50%, >=70% and >=90% Response
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End point description:

Percentage of subjects with reduction in WOMAC pain intensity of at least ( $\geq$ ) 30%, 50%, 70% and 90% at Weeks 2, 4, 8, 12, 16, 24 and 32 compared to baseline were classified as responders to WOMAC pain subscale and are reported here. WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a NRS. Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. Missing data was imputed using mixed BOCF/LOCF. ITT population. 'N'=subjects who were evaluable for this endpoint and 'n'=subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Weeks 2, 4, 8, 12, 16, 24 and 32

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	281	282	284	
Units: percentage of subjects				
number (not applicable)				
Week 2: At least 30% reduction (n=281, 282, 284)	33.5	46.8	42.6	
Week 2: At least 50% reduction (n=281, 282, 284)	16.7	27.7	18.3	
Week 2: At least 70% reduction (n=281, 282, 284)	5.0	10.3	6.7	
Week 2: At least 90% reduction (n=281, 282, 284)	1.1	2.5	1.4	
Week 4: At least 30% reduction (n=281, 282, 284)	45.2	61.3	58.8	
Week 4: At least 50% reduction (n=281, 282, 284)	22.8	33.0	37.7	
Week 4: At least 70% reduction (n=281, 282, 284)	8.5	13.1	15.8	
Week 4: At least 90% reduction (n=281, 282, 284)	1.4	3.9	4.9	
Week 8: At least 30% reduction (n=281, 282, 284)	50.5	64.2	61.6	
Week 8: At least 50% reduction (n=281, 282, 284)	26.0	37.2	44.4	
Week 8: At least 70% reduction (n=281, 282, 284)	10.7	15.2	22.2	
Week 8: At least 90% reduction (n=281, 282, 284)	2.1	4.3	5.6	
Week 12: At least 30% reduction (n=281, 282, 284)	58.4	71.6	71.1	
Week 12: At least 50% reduction (n=281, 282, 284)	33.8	46.8	50.7	
Week 12: At least 70% reduction (n=281, 282, 284)	15.7	24.1	23.2	
Week 12: At least 90% reduction (n=281, 282, 284)	1.8	8.5	7.0	
Week 16: At least 30% reduction (n=281, 282, 284)	56.2	68.1	68.7	
Week 16: At least 50% reduction (n=281, 282, 284)	35.9	49.6	47.5	

Week 16: At least 70% reduction (n=281, 282, 284)	17.1	22.3	24.3	
Week 16: At least 90% reduction (n=281, 282, 284)	3.2	7.4	4.9	
Week 24: At least 30% reduction (n=281, 282, 284)	56.6	65.6	68.7	
Week 24: At least 50% reduction (n=281, 282, 284)	33.8	45.4	47.9	
Week 24: At least 70% reduction (n=281, 282, 284)	17.8	21.3	23.2	
Week 24: At least 90% reduction (n=281, 282, 284)	3.2	5.3	6.0	
Week 32: At least 30% reduction (n=231, 247, 246)	65.4	54.7	57.3	
Week 32: At least 50% reduction (n=231, 247, 246)	43.7	32.8	32.9	
Week 32: At least 70% reduction (n=231, 247, 246)	21.2	12.1	15.4	
Week 32: At least 90% reduction (n=231, 247, 246)	4.8	1.6	4.9	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2, $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.83
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.3
upper limit	2.59

Statistical analysis title	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2, $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.	
Comparison groups	Placebo v Tanezumab 5 mg



Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.016
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.53
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	2.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0008
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.34
upper limit	3.07

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5118
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.16

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.75
upper limit	1.8

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0093
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.25
upper limit	4.81

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3017
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.46
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.71
upper limit	3.01

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 2,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.216
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.6
upper limit	9.58

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 2,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7174
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.33
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.29
upper limit	6.08

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 4,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.45
upper limit	2.87

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.81
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.29
upper limit	2.54

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0024
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.81

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.23
upper limit	2.65

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.49
upper limit	3.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0373
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.04
upper limit	3.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 4,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0046
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.27
upper limit	3.72

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 4,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0683
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.95
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.92
upper limit	9.47

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 4,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0214
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	11.66

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.83
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.3
upper limit	2.58

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0048
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.63

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.16
upper limit	2.28

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0012
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.84
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.27
upper limit	2.65

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.41
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.68
upper limit	3.47

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 8,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0537
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.99
upper limit	2.74

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 8,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.55
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.58
upper limit	4.13

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 8,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1155
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.82
upper limit	6.27

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0271
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.13
upper limit	7.96

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0007
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.85

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.3
upper limit	2.63

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0011
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.26
upper limit	2.56

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0009
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.27
upper limit	2.52

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 12,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.47
upper limit	2.91

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 12,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0064
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.81
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.18
upper limit	2.78

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 12,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.018
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.09
upper limit	2.58

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	5.61
Confidence interval	
level	95 %
sides	2-sided
lower limit	2.09
upper limit	15.08

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0034
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	4.46

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.64
upper limit	12.13

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0022
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	2.44

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0014
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.25
upper limit	2.5

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 16,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.87
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.33
upper limit	2.64

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 16,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.003
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.19
upper limit	2.36

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 16,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0754
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.47
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.96
upper limit	2.24

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0253
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.61
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.06
upper limit	2.44

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0098
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.98



Confidence interval	
level	95 %
sides	2-sided
lower limit	1.3
upper limit	6.83

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.223
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.72
upper limit	4.13

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0201
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.07
upper limit	2.12

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 24,  $\geq 30\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0021
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.73
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	2.44

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 24,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0022
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	2.43

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 24,  $\geq 50\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0004
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.87
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.32
upper limit	2.64

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2031
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	2.01

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24,  $\geq 70\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0867
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.44

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.95
upper limit	2.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1746
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.77
upper limit	4.22

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24,  $\geq 90\%$ : Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1039
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	4.57

## Secondary: Percentage of Subjects Achieving Western Ontario and McMaster

# Universities Osteoarthritis Index (WOMAC) Physical Function Subscale Reduction >=30%, >=50%, >=70% and >=90% Response

End point title	Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale Reduction >=30%, >=50%, >=70% and >=90% Response
End point description:	
Percentage of subjects with reduction in WOMAC physical function of at least(>=)30,50,70,90% at weeks 2,4,8,12,16,24,32 compared to baseline were classified as responders.WOMAC:Self-administered,disease-specific questionnaire assesses clinically important, subject-relevant symptoms for pain,stiffness and physical function. Physical function:Subject's ability to move around and perform usual activities of daily living. Physical function subscale17-item questionnaire assesses the degree of difficulty experienced due to OA in index joint(knee/hip) during past 48 hrs,calculated as mean of the scores from 17 individual questions scored on a NRS. Scores for each question and physical subscale on NRS ranged 0(no difficulty) to 10(extreme difficulty),higher scores=extreme difficulty/worse physical function. Missing data was imputed using mixed BOCF/LOCF.ITT population. 'N'=subjects who were evaluable for this endpoint; 'n'=subjects evaluable for this endpoint at specified time points.	
End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8, 12, 16, 24 and 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	281	282	284	
Units: percentage of subjects				
number (not applicable)				
Week 2: At least 30% reduction (n= 281, 282, 284)	30.2	44.3	38.7	
Week 2: At least 50% reduction (n= 281, 282, 284)	14.6	19.1	18.3	
Week 2: At least 70% reduction (n= 281, 282, 284)	3.9	9.2	5.3	
Week 2: At least 90% reduction (n= 281, 282, 284)	1.1	2.5	1.8	
Week 4: At least 30% reduction (n= 281, 282, 284)	36.3	55.0	53.9	
Week 4: At least 50% reduction (n= 281, 282, 284)	18.1	28.0	32.4	
Week 4: At least 70% reduction (n= 281, 282, 284)	6.4	11.7	12.0	
Week 4: At least 90% reduction (n= 281, 282, 284)	1.1	2.8	4.6	
Week 8: At least 30% reduction (n= 281, 282, 284)	45.6	57.4	59.2	
Week 8: At least 50% reduction (n= 281, 282, 284)	22.8	33.7	37.3	
Week 8: At least 70% reduction (n= 281, 282, 284)	7.5	16.0	15.5	
Week 8: At least 90% reduction (n= 281, 282, 284)	1.4	5.0	4.9	
Week 12: At least 30% reduction (n= 281, 282, 284)	51.2	67.4	69.4	
Week 12: At least 50% reduction (n= 281, 282, 284)	27.8	43.6	43.7	
Week 12: At least 70% reduction (n= 281, 282, 284)	12.8	19.9	21.1	

Week 12: At least 90% reduction (n= 281, 282, 284)	0.7	6.7	5.6	
Week 16: At least 30% reduction (n= 281, 282, 284)	53.0	65.2	66.2	
Week 16: At least 50% reduction (n= 281, 282, 284)	32.0	42.9	44.0	
Week 16: At least 70% reduction (n= 281, 282, 284)	14.2	21.3	18.3	
Week 16: At least 90% reduction (n= 281, 282, 284)	2.5	6.0	6.0	
Week 24: At least 30% reduction (n= 281, 282, 284)	51.2	64.9	68.7	
Week 24: At least 50% reduction (n= 281, 282, 284)	32.4	41.5	44.7	
Week 24: At least 70% reduction (n= 281, 282, 284)	14.6	19.1	17.3	
Week 24: At least 90% reduction (n= 281, 282, 284)	1.8	5.3	5.3	
Week 32: At least 30% reduction (n= 231, 247, 246)	60.2	51.4	53.7	
Week 32: At least 50% reduction (n= 231, 247, 246)	40.3	31.2	30.5	
Week 32: At least 70% reduction (n= 231, 247, 246)	16.9	11.7	11.4	
Week 32: At least 90% reduction (n= 231, 247, 246)	3.5	2.0	3.3	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2, >=30%: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.89
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.33
upper limit	2.68

Statistical analysis title	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2, >=30%: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and

classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0286
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.04
upper limit	2.1

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1031
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.93
upper limit	2.27

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2033
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.34

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	2.1

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0064
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.34
upper limit	5.86

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3706
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.44
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.65
upper limit	3.23

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 2,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2121
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.61
upper limit	9.41

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 2,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4859
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.39
upper limit	7.11

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 4,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.6
upper limit	3.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.5
upper limit	2.96

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.002
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.91

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.27
upper limit	2.87

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.28
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.53
upper limit	3.4

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0107
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.23
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.21
upper limit	4.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 4,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0126
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.18
upper limit	4.02

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 4,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1516
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.7
upper limit	10.26

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<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 4,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.021
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	4.49
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.25
upper limit	16.05

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0034
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.18
upper limit	2.31

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.75

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.26
upper limit	2.45

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0014
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.86
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.27
upper limit	2.71

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.46
upper limit	3.1

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 8,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0007
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.61
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.49
upper limit	4.55

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 8,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0018
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.43
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.39
upper limit	4.24

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 8,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.015
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	4.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.31
upper limit	12.79

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0211
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	11.78

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.01



Confidence interval	
level	95 %
sides	2-sided
lower limit	1.43
upper limit	2.84

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.55
upper limit	3.1

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.47
upper limit	3

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 12,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.46
upper limit	2.96

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 12,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.018
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.1
upper limit	2.76

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 12,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0072
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.86
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.18
upper limit	2.94

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0015
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	10.84
Confidence interval	
level	95 %
sides	2-sided
lower limit	2.49
upper limit	47.22

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0044
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	8.62

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.96
upper limit	37.96

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0018
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	2.43

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0011
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.26
upper limit	2.5

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 16,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0035
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.19
upper limit	2.38

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 16,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0022
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	2.43

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 16,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0155
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.11
upper limit	2.72

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1549
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	2.2

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0212
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.94

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.18
upper limit	7.37

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0373
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.64
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.06
upper limit	6.57

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.83
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.29
upper limit	2.57

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 24,  $\geq 30\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.51
upper limit	3.02

**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

**Statistical analysis description:**

Week 24,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0152
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.54
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.09
upper limit	2.18

**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

**Statistical analysis description:**

Week 24,  $\geq 50\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0018
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.73
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.23
upper limit	2.45

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.097
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.47
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.93
upper limit	2.31

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24,  $\geq 70\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3435
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.25

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.98

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0236
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.17
upper limit	9.27

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24,  $\geq 90\%$ : Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0296
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.12
upper limit	8.81

## Secondary: Percentage of Subjects With Cumulative Percent Change From Baseline

## Reduction in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 16 and 24

End point title	Percentage of Subjects With Cumulative Percent Change From Baseline Reduction in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 16 and 24
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### End point description:

Percentage of subjects with cumulative reduction (as percent) (>0; >=10, 20, 30, 40, 50, 60, 70, 80 and 90; =100 %) in WOMAC physical function subscale from Baseline to Weeks 16 and 24 were reported. WOMAC:Self-administered, disease-specific questionnaire assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function:subjects ability to move around and perform usual activities of daily living. WOMAC physical function subscale:17-item questionnaire to assess the degree of difficulty experienced due to OA in index joint(knee or hip) during past 48 hrs, calculated as mean of the scores from 17 individual questions scored on a NRS. Scores for each question and WOMAC Pain subscale on NRS ranged 0(no difficulty) to 10(extreme difficulty), higher scores=extreme difficulty/worse physical function. Missing data was imputed using mixed BOCF/LOCF. ITT population. Here 'N'=subjects who were evaluable for this endpoint.

End point type	Secondary
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### End point timeframe:

Baseline, Weeks 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	281	282	284	
Units: percentage of subjects				
number (not applicable)				
Week 16: >=0%	84.7	93.6	93.0	
Week 16: >=10%	75.1	87.2	83.8	
Week 16: >=20%	61.6	73.8	73.9	
Week 16: >=30%	53.0	65.2	66.2	
Week 16: >=40%	44.1	55.3	56.0	
Week 16: >=50%	32.0	42.9	44.0	
Week 16: >=60%	20.3	30.1	30.3	
Week 16: >=70%	14.2	21.3	18.3	
Week 16: >=80%	7.1	12.4	11.3	
Week 16: >=90%	2.5	6.0	6.0	
Week 16: =100%	0.7	0.7	1.8	
Week 24: >=0%	79.7	89.0	90.1	
Week 24: >=10%	70.1	85.8	84.2	
Week 24: >=20%	61.6	74.8	78.2	
Week 24: >=30%	51.2	64.9	68.7	
Week 24: >=40%	41.3	51.1	57.0	
Week 24: >=50%	32.4	41.5	44.7	
Week 24: >=60%	21.0	30.9	30.6	
Week 24: >=70%	14.6	19.1	17.3	
Week 24: >=80%	6.4	10.6	10.2	
Week 24: >=90%	1.8	5.3	5.3	
Week 24: =100%	0	0.4	1.8	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects Achieving Improvement of $\geq 2$ Points in Patient's Global Assessment (PGA) of Osteoarthritis

End point title	Percentage of Subjects Achieving Improvement of $\geq 2$ Points in Patient's Global Assessment (PGA) of Osteoarthritis
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End point description:

PGA of OA was assessed by asking a question from subjects: "Considering all the ways your osteoarthritis in your knee or hip affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, where, 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5 = very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worse condition. Percentage of subjects with improvement of at least 2 points from Baseline in PGA of OA were reported. Missing data was imputed using mixed BOCF/LOCF. ITT population. Here 'N'=subjects who were evaluable for this endpoint and 'n'=subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Weeks 2, 4, 8, 12, 16, 24 and 32

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	281	282	284	
Units: percentage of subjects				
number (not applicable)				
Week 2 (n=281, 282, 284)	8.5	15.6	12.0	
Week 4 (n=281, 282, 284)	8.5	17.7	19.0	
Week 8 (n=281, 282, 284)	12.8	21.3	21.8	
Week 12 (n=281, 282, 284)	14.6	26.2	28.5	
Week 16 (n=281, 282, 284)	14.6	22.7	27.1	
Week 24 (n=281, 282, 284)	17.4	24.1	25.7	
Week 32 (n=231, 247, 246)	19.9	14.2	15.4	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0132
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.17
upper limit	3.9

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1274
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	3.02

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 4: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0016
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.62

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.44
upper limit	4.76

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.84
upper limit	6.03

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0089
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.2
upper limit	3.49

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 8: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0012
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.41
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.42
upper limit	4.1

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 12: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.45
upper limit	3.98

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 12: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.92
upper limit	5.21

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0203
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.83
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.1
upper limit	3.06

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.94



Confidence interval	
level	95 %
sides	2-sided
lower limit	1.77
upper limit	4.86

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	563
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0775
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.56
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.95
upper limit	2.55

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline patient global assessment of osteoarthritis scale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0064
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.21
upper limit	3.21

## Secondary: Change From Baseline for Average Pain Score in the Index Joint at

**Weeks 1, 2, 3, 4, 6, 8, 10, 12, 16, 20 and 24**

End point title	Change From Baseline for Average Pain Score in the Index Joint at Weeks 1, 2, 3, 4, 6, 8, 10, 12, 16, 20 and 24
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## End point description:

Subjects assessed their average pain in the index hip/knee in the past 24 hours using a scale ranging from 0 (no pain) to 10 (worst possible pain). Higher scores indicated higher pain. Data represents averages of the values reported during the 8-week interval up to and including the given week. Change from baseline was calculated using the difference between each post-baseline weekly mean and the baseline mean score. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
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## End point timeframe:

Baseline, Weeks 1, 2, 3, 4, 6, 8, 10, 12, 16, 20 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 1	-0.57 (± 0.11)	-1.06 (± 0.11)	-0.93 (± 0.11)	
Change at Week 2	-0.98 (± 0.14)	-1.72 (± 0.14)	-1.49 (± 0.14)	
Change at Week 3	-1.19 (± 0.15)	-1.97 (± 0.15)	-1.67 (± 0.15)	
Change at Week 4	-1.37 (± 0.15)	-2.28 (± 0.15)	-2.13 (± 0.15)	
Change at Week 6	-1.48 (± 0.16)	-2.38 (± 0.16)	-2.43 (± 0.16)	
Change at Week 8	-1.57 (± 0.16)	-2.19 (± 0.16)	-2.39 (± 0.16)	
Change at Week 10	-1.79 (± 0.17)	-2.51 (± 0.17)	-2.56 (± 0.17)	
Change at Week 12	-1.84 (± 0.17)	-2.57 (± 0.17)	-2.64 (± 0.17)	
Change at Week 16	-1.98 (± 0.18)	-2.50 (± 0.17)	-2.61 (± 0.17)	
Change at Week 20	-2.17 (± 0.18)	-2.87 (± 0.18)	-2.86 (± 0.18)	
Change at Week 24	-2.21 (± 0.19)	-2.60 (± 0.18)	-2.73 (± 0.18)	

**Statistical analyses**

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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## Statistical analysis description:

Week 1: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.49

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.7
upper limit	-0.27
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 1: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0009
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.36
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.58
upper limit	-0.15
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.74

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1
upper limit	-0.48
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.51
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.77
upper limit	-0.25
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 3: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.78

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.06
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 3: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.49
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.77
upper limit	-0.21
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.91

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.2
upper limit	-0.62
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.06
upper limit	-0.47
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 6: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.9

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.2
upper limit	-0.59
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 6: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.95
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.25
upper limit	-0.64
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.61

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.93
upper limit	-0.3
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.81
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.13
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 10: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.72



Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.05
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 10: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.1
upper limit	-0.44
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.73

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.06
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.13
upper limit	-0.46
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.004
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.52

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.87
upper limit	-0.16
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.98
upper limit	-0.27
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 20: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.7

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.06
upper limit	-0.33
Variability estimate	Standard error of the mean
Dispersion value	0.19

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 20: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.05
upper limit	-0.32
Variability estimate	Standard error of the mean
Dispersion value	0.19

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0506
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.39

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.78
upper limit	0
Variability estimate	Standard error of the mean
Dispersion value	0.2

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0086
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.52
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.91
upper limit	-0.13
Variability estimate	Standard error of the mean
Dispersion value	0.2

## **Secondary: Change From Baseline for Average Pain Score in the Index Joint at Weeks 28 and 32**

End point title	Change From Baseline for Average Pain Score in the Index Joint at Weeks 28 and 32
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End point description:

Subjects assessed their average pain in the index hip/knee in the past 24 hours using a scale ranging from 0 (no pain) to 10 (worst possible pain). Higher scores indicated higher pain. Data represents averages of the values reported during the 8-week interval up to and including the given week. Change from baseline was calculated using the difference between each post-baseline weekly mean and the baseline mean score. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 28 and 32

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=278, 280, 280)	6.79 (± 1.56)	7.03 (± 1.38)	6.90 (± 1.43)	
Change at Week 28 (n=239, 260, 254)	-2.26 (± 2.27)	-2.63 (± 2.32)	-2.58 (± 2.33)	
Change at Week 32 (n=226, 250, 245)	-2.19 (± 2.40)	-2.07 (± 2.33)	-2.13 (± 2.40)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Weeks 2, 4, 8, 12, 16 and 24

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Weeks 2, 4, 8, 12, 16 and 24
End point description:	
WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Stiffness was defined as a sensation of decreased ease of movement in the index joint (knee or hip). The WOMAC stiffness subscale is a 2-item questionnaire used to assess the amount of stiffness experienced due to OA in the index joint (knee or hip) during the past 48 hours. It was calculated as the mean of scores from 2 individual questions scored on NRS. Scores for each question and WOMAC stiffness subscale score on NRS ranged from 0 (no stiffness) to 10 (extreme stiffness), where higher scores indicated higher stiffness. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).	
End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 12, 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.25 (± 0.15)	-2.03 (± 0.15)	-1.90 (± 0.15)	
Change at Week 4	-1.90 (± 0.16)	-2.62 (± 0.16)	-2.74 (± 0.16)	
Change at Week 8	-1.82 (± 0.17)	-2.41 (± 0.17)	-2.81 (± 0.17)	
Change at Week 12	-2.10 (± 0.18)	-2.90 (± 0.17)	-2.95 (± 0.17)	
Change at Week 16	-2.00 (± 0.18)	-2.65 (± 0.18)	-2.77 (± 0.18)	
Change at Week 24	-1.97 (± 0.19)	-2.59 (± 0.19)	-2.84 (± 0.19)	

## Statistical analyses

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.07
upper limit	-0.48
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.64
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.94
upper limit	-0.35
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification	

variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.03
upper limit	-0.41
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.84
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.15
upper limit	-0.53
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg



Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0004
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.58
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.91
upper limit	-0.26
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.31
upper limit	-0.67
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.14
upper limit	-0.46
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.84
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.18
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1
upper limit	-0.3
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.12
upper limit	-0.43
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0013
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.99
upper limit	-0.24
Variability estimate	Standard error of the mean
Dispersion value	0.19

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.87
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.25
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.19

**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Week 32**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Week 32
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Stiffness was defined as a sensation of decreased ease of movement in the index joint (knee or hip). The WOMAC stiffness subscale is a 2-item questionnaire used to assess the amount of stiffness experienced due to OA in the index joint (knee or hip) during the past 48 hours. It was calculated as the mean of scores from 2 individual questions scored on a NRS. Scores for each question and WOMAC stiffness subscale score on

NRS ranged from 0 (no stiffness) to 10 (extreme stiffness), where higher scores indicated higher stiffness. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
End point timeframe:	
Baseline, Week 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=281, 282, 284)	6.46 (± 1.43)	6.44 (± 1.59)	6.44 (± 1.53)	
Change at Week 32 (n=231, 247, 246)	-2.57 (± 2.22)	-2.34 (± 2.18)	-2.31 (± 2.51)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Weeks 2, 4, 8, 12, 16 and 24

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Weeks 2, 4, 8, 12, 16 and 24
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA of index joint (knee or hip). WOMAC pain subscale assess amount of pain experienced (score: 0 [no pain] to 10 [extreme pain], higher score = more pain), WOMAC physical function subscale assess degree of difficulty experienced (score: 0 [no difficulty] to 10 [extreme difficulty], higher score = worse physical function) and WOMAC stiffness subscale assess the amount of stiffness experienced (score: 0 [no stiffness] to 10 [extreme stiffness], higher score = higher stiffness). WOMAC average score was the mean of WOMAC pain, physical function and stiffness subscale scores and ranges from 0 to 10, where higher scores indicated worse response. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 12, 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.28 (± 0.13)	-1.99 (± 0.13)	-1.75 (± 0.13)	

Change at Week 4	-1.80 ( $\pm$ 0.14)	-2.57 ( $\pm$ 0.14)	-2.60 ( $\pm$ 0.14)	
Change at Week 8	-1.81 ( $\pm$ 0.15)	-2.42 ( $\pm$ 0.15)	-2.65 ( $\pm$ 0.15)	
Change at Week 12	-2.11 ( $\pm$ 0.16)	-2.89 ( $\pm$ 0.16)	-2.92 ( $\pm$ 0.16)	
Change at Week 16	-2.04 ( $\pm$ 0.17)	-2.67 ( $\pm$ 0.17)	-2.71 ( $\pm$ 0.16)	
Change at Week 24	-2.11 ( $\pm$ 0.17)	-2.66 ( $\pm$ 0.17)	-2.83 ( $\pm$ 0.17)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.96
upper limit	-0.45
Variability estimate	Standard error of the mean
Dispersion value	0.13

Statistical analysis title	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0004
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.47

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.73
upper limit	-0.21
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.04
upper limit	-0.49
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.8

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.08
upper limit	-0.53
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.61
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.9
upper limit	-0.32
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.84



Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.13
upper limit	-0.56
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.78
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.09
upper limit	-0.47
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.81

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.12
upper limit	-0.5
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.95
upper limit	-0.35
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.67

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.99
upper limit	-0.35
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0015
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.55
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.89
upper limit	-0.21
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.73

Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.07
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.17

### Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Week 32

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Week 32
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#### End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA of index joint (knee or hip). WOMAC pain subscale assess amount of pain experienced (score: 0 [no pain] to 10 [extreme pain], higher score = more pain), WOMAC physical function subscale assess degree of difficulty experienced (score: 0 [no difficulty] to 10 [extreme difficulty], higher score = worse physical function) and WOMAC stiffness subscale assess the amount of stiffness experienced (score: 0 [no stiffness] to 10 [extreme stiffness], higher score = higher stiffness). WOMAC average score was the mean of WOMAC pain, physical function and stiffness subscale scores and ranges from 0 to 10, where higher scores indicated worse response. ITT population. Here, 'n'=subjects evaluable for this endpoint at specified time points.

End point type	Secondary
End point timeframe:	
Baseline, Week 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=281, 282, 284)	6.57 (± 0.90)	6.63 (± 0.96)	6.60 (± 0.91)	
Change at Week 32 (n= 231, 247, 246)	-2.61 (± 1.96)	-2.28 (± 1.87)	-2.27 (± 2.12)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Walking on a Flat Surface) at Weeks 2, 4, 8, 12, 16 and 24

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Walking on a Flat Surface) at Weeks 2, 4, 8, 12, 16 and 24
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**End point description:**

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when walking on a flat surface?". Subjects responded about the amount of pain they experienced when walking on a flat surface by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
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**End point timeframe:**

Baseline, Weeks 2, 4, 8, 12, 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.27 (± 0.14)	-1.94 (± 0.14)	-1.64 (± 0.14)	
Change at Week 4	-1.69 (± 0.15)	-2.51 (± 0.15)	-2.54 (± 0.15)	
Change at Week 8	-1.77 (± 0.16)	-2.36 (± 0.15)	-2.49 (± 0.15)	
Change at Week 12	-2.17 (± 0.17)	-2.91 (± 0.16)	-2.97 (± 0.16)	
Change at Week 16	-2.06 (± 0.18)	-2.68 (± 0.17)	-2.66 (± 0.17)	
Change at Week 24	-2.21 (± 0.18)	-2.61 (± 0.17)	-2.80 (± 0.17)	

**Statistical analyses**

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.96
upper limit	-0.38
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0139
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.37
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.67
upper limit	-0.08
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.82
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.13
upper limit	-0.51
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.86
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.16
upper limit	-0.55
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.59
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.91
upper limit	-0.27
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.04
upper limit	-0.4
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.08
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.18



<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.14
upper limit	-0.44
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.98
upper limit	-0.27
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0009
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.6
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.96
upper limit	-0.25
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0377
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.78
upper limit	-0.02
Variability estimate	Standard error of the mean
Dispersion value	0.19

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0019
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.59
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.96
upper limit	-0.22
Variability estimate	Standard error of the mean
Dispersion value	0.19

## **Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Walking on a Flat Surface) at Week 32**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Walking on a Flat Surface) at Week 32
End point description:	
WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when walking on a flat surface?". Subjects responded about the amount of pain they experienced when walking on a flat surface by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.	
End point type	Secondary
End point timeframe:	
Baseline, Week 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=281, 282, 284)	6.73 (± 1.25)	6.77 (± 1.27)	6.79 (± 1.19)	
Change at Week 32 (n=231, 247, 246)	-2.46 (± 2.24)	-2.01 (± 2.10)	-1.99 (± 2.49)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Going Up or Downstairs) at Weeks 2, 4, 8, 12, 16 and 24

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Going Up or Downstairs) at Weeks 2, 4, 8, 12, 16 and 24
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when going up or down the stairs?" Subjects responded about the amount of pain they experienced when going up or down stairs by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 12, 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.39 (± 0.15)	-2.08 (± 0.15)	-1.96 (± 0.15)	
Change at Week 4	-1.76 (± 0.16)	-2.73 (± 0.15)	-2.72 (± 0.15)	
Change at Week 8	-1.72 (± 0.17)	-2.49 (± 0.17)	-2.74 (± 0.17)	
Change at Week 12	-2.17 (± 0.18)	-2.92 (± 0.18)	-3.05 (± 0.18)	
Change at Week 16	-2.06 (± 0.18)	-2.72 (± 0.18)	-2.83 (± 0.18)	
Change at Week 24	-2.32 (± 0.19)	-2.76 (± 0.18)	-3.04 (± 0.18)	

## Statistical analyses

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.69
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.99
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.57
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.87
upper limit	-0.27
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.29
upper limit	-0.65
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.28
upper limit	-0.65
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification

variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.76
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.11
upper limit	-0.42
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.35
upper limit	-0.67
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.11
upper limit	-0.39
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.87
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.23
upper limit	-0.51
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg



Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.66
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.03
upper limit	-0.29
Variability estimate	Standard error of the mean
Dispersion value	0.19

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.13
upper limit	-0.4
Variability estimate	Standard error of the mean
Dispersion value	0.19

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0246
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.44
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.82
upper limit	-0.06
Variability estimate	Standard error of the mean
Dispersion value	0.2

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets includes treatment, randomization stratification variables (index joint and highest Kellgren-Lawrence grade) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.1
upper limit	-0.33
Variability estimate	Standard error of the mean
Dispersion value	0.2

**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Going Up or Downstairs) at Week 32**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item (Pain When Going Up or Downstairs) at Week 32
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subject answered a question: "How much pain have you had when going up or down the stairs?" Subjects responded about the amount of pain they experienced when going up or down stairs by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. The intent to treat

population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
End point timeframe:	
Baseline, Week 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n=281, 282, 284)	7.65 (± 1.13)	7.79 (± 1.06)	7.66 (± 1.18)	
Change at Week 32 (n=231, 247, 246)	-2.72 (± 2.32)	-2.23 (± 2.09)	-2.15 (± 2.41)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Scores at Baseline

End point title	Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Scores at Baseline
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End point description:

WPAI is 6-question subject rated questionnaire to determine the impact of OA on absenteeism, presenteeism, work productivity, and daily activity impairment for a period of 7 days prior to a visit. It yields 4 sub-scores: work time missed (absenteeism), impairment while working (presenteeism), overall work impairment (work productivity) and activity impairment (daily activity impairment). These sub-scores are expressed as an impairment percentage (range from 0 to 100), with higher numbers indicating greater impairment and less productivity. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
End point timeframe:	
Baseline	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Percent Work Time Missed (n=81, 76, 72)	9.7 (± 23.46)	5.6 (± 18.33)	6.9 (± 21.33)	
Percent Impairment While Working (n=78, 74, 69)	56.5 (± 22.26)	58.9 (± 21.81)	57.4 (± 18.44)	

Percent Overall Work Impairment (n=78, 74, 69)	59.3 (± 21.32)	60.2 (± 21.20)	58.3 (± 18.89)	
Percent Activity Impairment (n=277, 278, 283)	66.6 (± 13.35)	67.7 (± 15.53)	67.5 (± 13.26)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Impairment Scores at Weeks 8, 16 and 24

End point title	Change From Baseline in Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Impairment Scores at Weeks 8, 16 and 24
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End point description:

WPAI is 6-question subject rated questionnaire to determine the impact of OA on absenteeism, presenteeism, work productivity, and daily activity impairment for a period of 7 days prior to a visit. It yields 4 sub-scores: work time missed (absenteeism), impairment while working (presenteeism), overall work impairment (work productivity) and activity impairment (daily activity impairment). These sub-scores are expressed as an impairment percentage (range from 0 to 100), with higher numbers indicating greater impairment and less productivity. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 8: absenteeism, n=65,62,60	0.04 (± 2.12)	1.24 (± 2.12)	-2.05 (± 2.11)	
Change at Week 8: presenteeism, n=64,60,57	-13.57 (± 3.11)	-20.26 (± 3.10)	-26.26 (± 3.12)	
Change at Week 8:work productivity, n=64,60,57	-13.78 (± 3.20)	-20.53 (± 3.18)	-26.26 (± 3.22)	
Change at Week8:activity Impairment,n=268,272,281	-15.66 (± 1.55)	-21.84 (± 1.54)	-24.79 (± 1.53)	
Change at Week 16: absenteeism, n=64,59,51	2.36 (± 2.24)	1.74 (± 2.29)	-2.16 (± 2.36)	
Change at Week 16: presenteeism, n=61,58,50	-15.92 (± 3.28)	-26.23 (± 3.33)	-26.48 (± 3.42)	
Change at Week 16:work productivity, n=61,58,50	-16.38 (± 3.33)	-25.79 (± 3.37)	-26.42 (± 3.47)	
Change at Week16:Activity Impairment,n=254,261,271	-19.15 (± 1.77)	-25.16 (± 1.77)	-26.13 (± 1.74)	
Change at Week 24: absenteeism, n=50,57,51	4.09 (± 3.27)	2.77 (± 3.18)	1.16 (± 3.27)	

Change at Week 24: presenteeism, n=47,55,48	-15.03 (± 3.86)	-19.31 (± 3.50)	-17.77 (± 3.74)	
Change at Week24:work productivity, n=47,55,48	-15.17 (± 3.92)	-19.03 (± 3.56)	-17.29 (± 3.82)	
Change at Week24:activity Impairment,n=231,252,254	-21.49 (± 1.84)	-24.57 (± 1.79)	-26.44 (± 1.79)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Percent Work Time Missed: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6427
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	1.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-3.9
upper limit	6.29
Variability estimate	Standard error of the mean
Dispersion value	2.57

Statistical analysis title	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 8: Percent Work Time Missed: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4208
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-2.09
Confidence interval	
level	95 %
sides	2-sided
lower limit	-7.22
upper limit	3.04

Variability estimate	Standard error of the mean
Dispersion value	2.59

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Percent Work Time Missed: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8204
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	-6.03
upper limit	4.79
Variability estimate	Standard error of the mean
Dispersion value	2.73

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Percent Work Time Missed: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1157
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-4.52
Confidence interval	
level	95 %
sides	2-sided
lower limit	-10.16
upper limit	1.13
Variability estimate	Standard error of the mean
Dispersion value	2.85

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 24: Percent Work Time Missed: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5845
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-1.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	-6.12
upper limit	3.47
Variability estimate	Standard error of the mean
Dispersion value	2.41

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 24: Percent Work Time Missed: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2514
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-2.93
Confidence interval	
level	95 %
sides	2-sided
lower limit	-7.97
upper limit	2.11
Variability estimate	Standard error of the mean
Dispersion value	2.54

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Percent Impairment While Working: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0717
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-6.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	-13.97
upper limit	0.6
Variability estimate	Standard error of the mean
Dispersion value	3.67

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 8: Percent Impairment While Working: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-12.69
Confidence interval	
level	95 %
sides	2-sided
lower limit	-20.11
upper limit	-5.26
Variability estimate	Standard error of the mean
Dispersion value	3.74

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 16: Percent Impairment While Working: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg



Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0079
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-10.31
Confidence interval	
level	95 %
sides	2-sided
lower limit	-17.85
upper limit	-2.77
Variability estimate	Standard error of the mean
Dispersion value	3.8

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 16: Percent Impairment While Working: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0096
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-10.56
Confidence interval	
level	95 %
sides	2-sided
lower limit	-18.49
upper limit	-2.63
Variability estimate	Standard error of the mean
Dispersion value	4

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 24: Percent Impairment While Working: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3302
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-4.28
Confidence interval	
level	95 %
sides	2-sided
lower limit	-12.97
upper limit	4.41
Variability estimate	Standard error of the mean
Dispersion value	4.37

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 24: Percent Impairment While Working: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5483
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-2.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	-11.78
upper limit	6.3
Variability estimate	Standard error of the mean
Dispersion value	4.54

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Percent Overall Work Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0774
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-6.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	-14.26
upper limit	0.76
Variability estimate	Standard error of the mean
Dispersion value	3.79

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Percent Overall Work Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0017
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-12.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-20.15
upper limit	-4.81
Variability estimate	Standard error of the mean
Dispersion value	3.87

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Percent Overall Work Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0135
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-9.41
Confidence interval	
level	95 %
sides	2-sided
lower limit	-16.83
upper limit	-1.99
Variability estimate	Standard error of the mean
Dispersion value	3.74

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Percent Overall Work Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0129
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-10.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-17.91
upper limit	-2.17
Variability estimate	Standard error of the mean
Dispersion value	3.97

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Percent Overall Work Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3869
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-3.85
Confidence interval	
level	95 %
sides	2-sided
lower limit	-12.66
upper limit	4.96
Variability estimate	Standard error of the mean
Dispersion value	4.43

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 24: Percent Overall Work Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6485
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-2.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-11.31
upper limit	7.08
Variability estimate	Standard error of the mean
Dispersion value	4.62

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: Percent Activity Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-6.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	-9.34
upper limit	-3.03
Variability estimate	Standard error of the mean
Dispersion value	1.61

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: Percent Activity Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-9.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	-12.26
upper limit	-6
Variability estimate	Standard error of the mean
Dispersion value	1.6

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 16: Percent Activity Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0008
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-6
Confidence interval	
level	95 %
sides	2-sided
lower limit	-9.51
upper limit	-2.5
Variability estimate	Standard error of the mean
Dispersion value	1.79

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Percent Activity Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-6.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	-10.44
upper limit	-3.51
Variability estimate	Standard error of the mean
Dispersion value	1.77

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Percent Activity Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1004
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-3.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-6.76
upper limit	0.6
Variability estimate	Standard error of the mean
Dispersion value	1.87

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 24: Percent Activity Impairment: WPAI parameters were analysed using ANCOVA model which included covariates of the corresponding baseline score, baseline diary average pain, index joint, highest Kellgren-Lawrence grade (2, 3 or 4), and treatment, with study site as a random effect	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0079
Method	ANCOVA
Parameter estimate	Least Square Mean Difference
Point estimate	-4.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	-8.59
upper limit	-1.3
Variability estimate	Standard error of the mean
Dispersion value	1.86

## Secondary: European Quality of Life- 5 Dimension-5 Levels (EQ-5D-5L) Dimensions Score

End point title	European Quality of Life- 5 Dimension-5 Levels (EQ-5D-5L) Dimensions Score
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### End point description:

EQ-5D-5L is a standardized subject completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional visual analogue scale (VAS). EQ-5D health state profile is comprised of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. The health utility score for a subject with no problems in all 5 items is 1 for all countries (except for Zimbabwe where it is 0.9), and is reduced where a subject reports greater levels of problems across the five dimensions. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or



placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 8, 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline: Mobility (n=277, 278, 283)	3.1 (± 0.63)	3.1 (± 0.62)	3.2 (± 0.65)	
Baseline: Self-care (n=277, 278, 283)	2.4 (± 0.92)	2.3 (± 0.92)	2.3 (± 0.90)	
Baseline: Usual activities (n=277, 278, 283)	3.0 (± 0.65)	3.0 (± 0.68)	3.0 (± 0.68)	
Baseline: Pain/Discomfort (n=277, 278, 283)	3.3 (± 0.72)	3.2 (± 0.73)	3.3 (± 0.69)	
Baseline: Anxiety/Depression (n=277, 278, 283)	1.7 (± 0.87)	1.7 (± 0.88)	1.7 (± 0.87)	
Week 8: Mobility (n=273, 276, 282)	2.6 (± 0.82)	2.3 (± 0.83)	2.3 (± 0.80)	
Week 8: Self-care (n=273, 276, 282)	2.0 (± 0.90)	1.8 (± 0.80)	1.6 (± 0.78)	
Week 8: Usual activities (n=273, 276, 282)	2.5 (± 0.78)	2.3 (± 0.82)	2.2 (± 0.78)	
Week 8: Pain/Discomfort (n=273, 276, 282)	2.7 (± 0.85)	2.5 (± 0.80)	2.4 (± 0.79)	
Week 8: Anxiety/Depression (n=273, 276, 282)	1.5 (± 0.80)	1.4 (± 0.64)	1.4 (± 0.71)	
Week 16: Mobility (n=259, 266 and 271)	2.4 (± 0.88)	2.2 (± 0.84)	2.2 (± 0.84)	
Week 16: Self-care (n=259, 266, 271)	1.8 (± 0.88)	1.7 (± 0.78)	1.6 (± 0.80)	
Week 16: Usual activities (n=259, 266, 272)	2.3 (± 0.81)	2.2 (± 0.78)	2.1 (± 0.84)	
Week 16: Pain/Discomfort (n=259, 266, 271)	2.5 (± 0.82)	2.3 (± 0.80)	2.3 (± 0.80)	
Week 16: Anxiety/Depression (n=259, 266, 271)	1.4 (± 0.78)	1.3 (± 0.61)	1.4 (± 0.68)	
Week 24: Mobility (n=236, 257, 255)	2.4 (± 0.78)	2.3 (± 0.84)	2.3 (± 0.84)	
Week 24: Self-care (n=236, 257, 255)	1.7 (± 0.83)	1.7 (± 0.77)	1.6 (± 0.76)	
Week 24: Usual activities (n=236, 257, 255)	2.3 (± 0.78)	2.2 (± 0.82)	2.2 (± 0.82)	
Week 24: Pain/Discomfort (n=236, 257, 255)	2.5 (± 0.81)	2.4 (± 0.78)	2.4 (± 0.77)	
Week 24: Anxiety/Depression (n=236, 257, 255)	1.4 (± 0.67)	1.4 (± 0.71)	1.4 (± 0.68)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: European Quality of Life- 5 Dimension-5 Levels (EQ-5D-5L) Overall Health Utility Score/ Index Value

End point title	European Quality of Life- 5 Dimension-5 Levels (EQ-5D-5L) Overall Health Utility Score/ Index Value
End point description:	
EQ-5D-5L: standardized subject completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional VAS. EQ-5D health state profile comprises of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. Responses from the five domains were used to calculate a single utility index (the Overall health utility score) where values are less than equal to ( $\leq$ ) 1. The Overall health utility score for a subject with no problems in all 5 items is 1 for all countries (except for Zimbabwe where it is 0.9), and is reduced where a subject reports greater levels of problems across the five dimensions. ITT population. Here, 'n'=subjects evaluable for this endpoint at specified time points.	
End point type	Secondary
End point timeframe:	
Baseline, Weeks 8, 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n= 277, 278, 283)	0.57 ( $\pm$ 0.18)	0.56 ( $\pm$ 0.18)	0.56 ( $\pm$ 0.18)	
Week 8 (n= 273, 276, 282)	0.67 ( $\pm$ 0.17)	0.71 ( $\pm$ 0.16)	0.73 ( $\pm$ 0.17)	
Week 16 (n= 259, 266, 271)	0.70 ( $\pm$ 0.19)	0.73 ( $\pm$ 0.15)	0.73 ( $\pm$ 0.17)	
Week 24 (n= 236, 257, 255)	0.70 ( $\pm$ 0.16)	0.72 ( $\pm$ 0.16)	0.73 ( $\pm$ 0.15)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Reported Treatment Impact Assessment-Overall, How Satisfied Are You With The Drug That You Received in This Study?

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Reported Treatment Impact Assessment-Overall, How Satisfied Are You With The Drug That You Received in This Study?
End point description:	
The mPRTI is a self-administered questionnaire containing subject reported treatment impact assessment (to assess subject satisfaction), subject global preference assessment (to assess previous treatment and preference to continue using the investigational product) and subject willingness to use drug again assessment. For subject satisfaction, subjects responded using interactive response technology (IRT) on a 5 point likert scale from 1-5, where 1=extremely dissatisfied, 2=dissatisfied, 3=neither satisfied nor dissatisfied, 4=satisfied and 5=extremely satisfied. Higher scores indicated greater satisfaction. Here mPRTI was reported for week (W) 16 and 24. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.	
End point type	Secondary
End point timeframe:	
Weeks 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
W16:extremely satisfied,n=268,270,278	41	65	65	
W24:extremely satisfied,n=238,257,255	46	72	66	
W16:satisfied,n=268,270,278	109	141	137	
W24:satisfied,n=238,257,255	97	119	128	
W16:neither satisfied/dissatisfied,n=268,270,278	78	50	63	
W24:neither satisfied/dissatisfied,n=238,257,255	64	54	48	
W16:dissatisfied,n=268,270,278	31	13	11	
W24:dissatisfied,n=238,257,255	28	10	9	
W16:extremely dissatisfied,n=268,270,278	9	1	2	
W24:extremely dissatisfied,n=238,257,255	3	2	4	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Global Preference Assessment- What is The Current or Most Recent Treatment You Were Receiving For Osteoarthritis Pain Before Enrolling?

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Global Preference Assessment- What is The Current or Most Recent Treatment You Were Receiving For Osteoarthritis Pain Before Enrolling?
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End point description:

The mPRTI is a self-administered questionnaire containing subject reported treatment impact assessment (to assess subject satisfaction), subject global preference assessment (to assess previous treatment and preference to continue using the investigational product) and subject willingness to use drug again assessment. To assess previous treatment, subjects responded for, 1=injectable prescription medicines, 2=prescription medicines taken by mouth, 3=surgery, 4=prescription medicines and surgery and 5=no treatment. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this end point at specified time point.

End point type	Secondary
End point timeframe:	
Weeks 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
W 16: Injectable medicines, n=268,270,278	23	34	28	
W 24: Injectable medicines, n=238,257,255	16	21	35	
W 16: medicines taken by mouth, n=268,270,278	214	212	224	
W 24: medicines taken by mouth, n=238,257,255	196	211	196	
W 16: surgery, n=268,270,278	5	0	1	
W 24: surgery, n=238,257,255	3	0	3	
W 16: medicines and surgery, n=268,270,278	8	5	5	
W 24: medicines and surgery, n=238,257,255	4	3	4	
W 16: No treatment, n=268,270,278	18	19	20	
W 24: No treatment, n=238,257,255	19	22	17	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Global Preference Assessment- Overall, do You Prefer The Drug That You Received in This Study to Previous Treatment?

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Global Preference Assessment- Overall, do You Prefer The Drug That You Received in This Study to Previous Treatment?
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End point description:

The mPRTI is a self-administered questionnaire containing subject reported treatment impact assessment (to assess subject satisfaction), subject global preference assessment (to assess previous (prev) treatment and preference to continue using the investigational product) and subject willingness to use drug again assessment. To assess preference to continue using the investigational product, subjects responded using interactive response technology (IRT) on a 5 point likert scale from 1-5, where, 1= yes, I definitely prefer the drug that I am receiving now, 2= I have a slight preference for the drug that I am receiving now, 3= I have no preference either way, 4= I have a slight preference for my previous treatment, 5= No, I definitely prefer my previous treatment. Higher scores indicate lesser preference to use the investigational product. ITT population. Here, 'n'=subjects evaluable for this end point at specified time point.

End point type	Secondary
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End point timeframe:

Weeks 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
W16: definitely prefer study drug, n=268,270,278	106	129	138	
W24: definitely prefer study drug, n=238,257,255	87	129	127	
W16: slight preference-study drug, n=268,270,278	66	86	83	
W24: slight preference-study drug, n=238,257,255	73	79	78	
W16: no preference either way, n=268,270,278	65	41	48	
W24: no preference either way, n=238,257,255	58	43	36	
W16: slight preference-prev treatment, n=268,270,278	14	11	4	
W24: slight preference-prev treatment, n=238,257,255	14	4	8	
W16: definitely prefer prev treatment, n=268,270,278	17	3	5	
W24: definitely prefer prev treatment, n=238,257,255	6	2	6	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Willingness to Use Drug Again Assessment- Willing to Use The Same Drug That You Have Received in This Study For Your Osteoarthritis Pain?

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 24: Subject Willingness to Use Drug Again Assessment- Willing to Use The Same Drug That You Have Received in This Study For Your Osteoarthritis Pain?
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End point description:

The mPRTI is a self-administered questionnaire containing subject reported treatment impact assessment (to assess subject satisfaction), subject global preference assessment (to assess previous treatment and preference to continue using the investigational product) and subject willingness to use drug again assessment. To assess Patient willingness to use drug again, subjects responded using interactive response technology (IRT) on a 5 point likert scale from 1-5, where, 1= yes, I would definitely want to use the same drug again, 2= I might want to use the same drug again, 3= I am not sure, 4= I might not want to use the same drug again, 5= no, I definitely would not want to use the same drug again. Higher scores indicate lesser willingness to use the investigational product. ITT population. Here, 'n'=subjects evaluable for this endpoint at specified time point.

End point type	Secondary
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End point timeframe:

Weeks 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
W16: definitely the same drug again, n=268,270,278	111	144	155	
W24: definitely the same drug again, n=238,257,255	101	131	139	
W16: might want same drug again, n=268,270,278	67	83	74	
W24: might want same drug again, n=238,257,255	62	73	63	
W16: I am not sure, n=268,270,278	59	29	41	
W24: I am not sure, n=238,257,255	53	43	38	
W16: might not want same drug again, n=268,270,278	10	9	5	
W24: might not want same drug again, n=238,257,255	13	5	9	
W16: definitely not same drug again, n=268,270,278	21	5	3	
W24: definitely not same drug again, n=238,257,255	9	5	6	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Number of Visits of Services Directly Related to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Visits of Services Directly Related to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during last 3 months (for baseline and week 48) and past 8 weeks (for week 32). Visits of services directly related to osteoarthritis evaluated were: visits to primary care physician, neurologist, rheumatologist, physician assistant (pa) or nurse practitioner, pain specialist, orthopedist, physical therapist, chiropractor, alternative medicine or therapy, podiatrist, nutritionist/dietitian, radiologist, home healthcare services and other practitioner. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint for specified categories.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: visits				
median (full range (min-max))				

Baseline: Primary Care Physician (n=116, 115, 112)	2.0 (1.0 to 14.0)	2.0 (1.0 to 10.0)	2.0 (1.0 to 7.0)
Baseline: Neurologist (n=4, 7, 5)	1.0 (1.0 to 3.0)	1.0 (1.0 to 100.0)	1.0 (1.0 to 2.0)
Baseline: Rheumatologist (n=82, 99, 89)	2.0 (1.0 to 102.0)	2.0 (1.0 to 11.0)	2.0 (1.0 to 5.0)
Baseline: Pa or nurse Practitioner (n=7, 6, 5)	3.0 (1.0 to 7.0)	2.5 (1.0 to 5.0)	3.0 (3.0 to 8.0)
Baseline: Pain specialist (n=12, 21, 24)	1.0 (1.0 to 3.0)	2.0 (1.0 to 5.0)	1.0 (1.0 to 6.0)
Baseline: Orthopedist (n=84, 83, 85)	2.0 (1.0 to 12.0)	2.0 (1.0 to 12.0)	2.0 (1.0 to 7.0)
Baseline: Physical therapist (n=25, 20, 30)	10.0 (1.0 to 24.0)	3.5 (1.0 to 100.0)	2.5 (1.0 to 60.0)
Baseline: Chiropractor (n=3, 1, 1)	2.0 (1.0 to 3.0)	1.0 (1.0 to 1.0)	2.0 (2.0 to 2.0)
Baseline: Alternative medicine/therapy (n=4, 2, 4)	1.0 (1.0 to 3.0)	2.0 (2.0 to 2.0)	2.5 (1.0 to 4.0)
Baseline: Podiatrist (n=7, 4, 3)	1.0 (1.0 to 2.0)	1.0 (1.0 to 1.0)	3.0 (2.0 to 3.0)
Baseline: Nutritionist/dietitian (n=3, 2, 7)	3.0 (2.0 to 5.0)	2.0 (1.0 to 3.0)	3.0 (1.0 to 8.0)
Baseline: Radiologist (n=44, 34, 46)	1.0 (1.0 to 4.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 4.0)
Baseline: Home healthcare services (n=1, 1, 1)	1.0 (1.0 to 1.0)	1.0 (1.0 to 1.0)	24.0 (24.0 to 24.0)
Baseline: Other practitioner (n=13, 15, 21)	1.0 (1.0 to 6.0)	1.0 (1.0 to 2.0)	1.0 (1.0 to 12.0)
Week 32: Primary Care Physician (n=62, 61, 57)	1.0 (1.0 to 101.0)	1.0 (1.0 to 100.0)	1.0 (1.0 to 190.0)
Week 32: Neurologist (n=1, 4, 2)	1.0 (1.0 to 1.0)	1.0 (1.0 to 1.0)	51.0 (1.0 to 101.0)
Week 32: Rheumatologist (n=23, 34, 33)	1.0 (1.0 to 10.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 20.0)
Week 32: Pa or nurse Practitioner (n=9, 4, 3)	1.0 (1.0 to 111.0)	2.0 (1.0 to 3.0)	4.0 (1.0 to 101.0)
Week 32: Pain specialist (n=6, 7, 9)	1.0 (1.0 to 3.0)	1.0 (1.0 to 2.0)	1.0 (1.0 to 16.0)
Week 32: Orthopedist (n=34, 36, 35)	1.0 (1.0 to 111.0)	1.0 (1.0 to 6.0)	1.0 (1.0 to 2.0)
Week 32: Physical therapist (n=11, 12, 12)	8.0 (1.0 to 111.0)	2.0 (1.0 to 12.0)	5.5 (1.0 to 16.0)
Week 32: Chiropractor (n=0, 1, 1)	0 (0 to 0)	8.0 (8.0 to 8.0)	2.0 (2.0 to 2.0)
Week 32: Alternative medicine/therapy (n=5, 2, 6)	3.0 (1.0 to 10.0)	2.5 (1.0 to 4.0)	1.5 (1.0 to 10.0)
Week 32: Podiatrist (n=4, 4, 1)	1.0 (1.0 to 1.0)	1.5 (1.0 to 2.0)	1.0 (1.0 to 1.0)
Week 32: Nutritionist/dietitian (n=2, 1, 1)	1.0 (1.0 to 1.0)	1.0 (1.0 to 1.0)	2.0 (2.0 to 2.0)
Week 32: Radiologist (n=10, 10, 14)	1.0 (1.0 to 2.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 2.0)
Week 32: Home healthcare services (n=1, 1, 1)	10.0 (10.0 to 10.0)	1.0 (1.0 to 1.0)	10.0 (10.0 to 10.0)
Week 32: Other practitioner (n=13, 12, 14)	1.0 (1.0 to 8.0)	1.0 (1.0 to 8.0)	1.0 (1.0 to 16.0)
Week 48: Primary Care Physician (n=53, 63, 64)	1.0 (1.0 to 7.0)	1.0 (1.0 to 90.0)	2.0 (1.0 to 100.0)
Week 48: Neurologist (n=3, 5, 1)	1.0 (1.0 to 4.0)	1.0 (1.0 to 2.0)	2.0 (2.0 to 2.0)
Week 48: Rheumatologist (n=16, 34, 27)	1.0 (1.0 to 3.0)	1.0 (1.0 to 90.0)	1.0 (1.0 to 3.0)
Week 48: Pa or nurse Practitioner (n=4, 8, 4)	5.5 (2.0 to 55.0)	2.5 (1.0 to 90.0)	2.0 (1.0 to 4.0)
Week 48: Pain specialist (n=4, 3, 2)	1.0 (1.0 to 1.0)	3.0 (1.0 to 90.0)	1.0 (1.0 to 1.0)
Week 48: Orthopedist (n=31, 44, 55)	2.0 (1.0 to 6.0)	2.0 (1.0 to 90.0)	2.0 (1.0 to 8.0)

Week 48: Physical therapist (n=13, 19, 20)	6.0 (1.0 to 16.0)	6.0 (1.0 to 90.0)	10.0 (1.0 to 36.0)	
Week 48: Chiropractor (n=2, 2, 1)	1.0 (1.0 to 1.0)	46.5 (3.0 to 90.0)	3.0 (3.0 to 3.0)	
Week 48: Alternative medicine/therapy (n=0, 6, 3)	0 (0 to 0)	11.0 (3.0 to 90.0)	3.0 (2.0 to 5.0)	
Week 48: Podiatrist (n=5, 3, 3)	1.0 (1.0 to 2.0)	1.0 (1.0 to 190.0)	3.0 (1.0 to 110.0)	
Week 48: Nutritionist/dietitian (n=3, 1, 3)	1.0 (1.0 to 2.0)	130.0 (130.0 to 130.0)	1.0 (1.0 to 2.0)	
Week 48: Radiologist (n=5, 8, 11)	1.0 (1.0 to 1.0)	1.5 (1.0 to 190.0)	1.0 (1.0 to 91.0)	
Week 48: Home healthcare services (n=0, 3, 0)	0 (0 to 0)	5.0 (1.0 to 90.0)	0 (0 to 0)	
Week 48: Other practitioner (n=6, 13, 9)	1.0 (1.0 to 3.0)	1.0 (1.0 to 90.0)	2.0 (1.0 to 4.0)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Number of Subjects who Visited the Emergency Room Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Subjects who Visited the Emergency Room Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during last 3 months (for Baseline and Week 48) and past 8 weeks (for Week 32). Domain evaluated was number of subjects who visited the emergency room due to osteoarthritis. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
Baseline (n=281, 282, 284)	1	3	2	
Week 32 (n=250, 260, 251)	2	2	0	
Week 48 (n=218, 240, 231)	2	1	2	

## Statistical analyses

No statistical analyses for this end point



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**Secondary: Health Care Resource Utilization (HCRU): Number of Visits to the Emergency Room Due to Osteoarthritis**

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End point title	Health Care Resource Utilization (HCRU): Number of Visits to the Emergency Room Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during last 3 months (for Baseline and Week 48) and past 8 weeks (for Week 32). Domain evaluated was number of visits to the emergency room due to OA. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

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End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: visits				
median (full range (min-max))				
Baseline (n=1, 3, 2)	1.0 (1.0 to 1.0)	2.0 (1.0 to 2.0)	1.5 (1.0 to 2.0)	
Week 32 (n=2, 2, 0)	1.5 (1.0 to 2.0)	1.0 (1.0 to 1.0)	0 (0 to 0)	
Week 48 (n=2, 1, 2)	2.0 (1.0 to 3.0)	2.0 (2.0 to 2.0)	1.0 (1.0 to 1.0)	

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**Statistical analyses**

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No statistical analyses for this end point

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**Secondary: Health Care Resource Utilization (HCRU): Number of Subjects Hospitalized Due to Osteoarthritis**

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End point title	Health Care Resource Utilization (HCRU): Number of Subjects Hospitalized Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during last 3 months (for Baseline and Week 48) and past 8 weeks (for Week 32). Domain evaluated was number of subjects who were hospitalized due to OA. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

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End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
Baseline (n= 281, 282, 284)	1	2	1	
Week 32 (n= 250, 260, 251)	1	1	1	
Week 48 (218, 240, 231)	0	1	5	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Health Care Resource Utilization (HCRU): Number of Nights Stayed in the Hospital Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Nights Stayed in the Hospital Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during last 3 months (for Baseline and Week 48) and past 8 weeks (for Week 32). Domain evaluated was number of nights stayed in the hospital due to OA. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: nights				
median (full range (min-max))				
Baseline (n=1, 2, 1)	1.0 (1.0 to 1.0)	11.0 (1.0 to 21.0)	1.0 (1.0 to 1.0)	
Week 32 (n=1, 1, 1)	5.0 (5.0 to 5.0)	21.0 (21.0 to 21.0)	2.0 (2.0 to 2.0)	
Week 48 (n=0, 1, 5)	0 (0 to 0)	1.0 (1.0 to 1.0)	1.0 (1.0 to 9.0)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Health Care Resource Utilization (HCRU): Number of Subjects who Used Any Aids/Devices for Doing Things

End point title	Health Care Resource Utilization (HCRU): Number of Subjects who Used Any Aids/Devices for Doing Things
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End point description:

Osteoarthritis HCRU assessed healthcare usage during last 3 months (for baseline and week 48) and past 8 weeks (for week 32). Domain evaluated was number of subjects who used any aids/devices for doing things. Aids such as walking aid, wheelchair, device or utensil for dress/bathe/eat and any other aids/devices. Response for each aid/device usage was in terms of Never (Ne), Rarely (R), Sometimes (S), Often (O) and Always (A). The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint for specified categories.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
Baseline: Walking aid use(n=281,282,284):Ne	250	240	242	
Baseline: Wheelchair use(n=281,282,284):Ne	281	282	283	
Baseline: Device to DressBatheEat(n=281,282,284):Ne	271	274	279	
Baseline: Other aids/devices(n=281,282,284):Ne	275	265	270	
Week 32: Walking aid use(n=250,260,251):Ne	225	232	214	
Week 32: Wheelchair use(n=250,260,251):Ne	248	260	250	
Week 32: Device to DressBatheEat(n=250,260,251):Ne	248	257	246	
Week 32: Other aids/devices(n=250,260,251):Ne	246	252	245	
Week 48: Walking aid use(n=218,240,231):Ne	200	211	191	
Week 48: Wheelchair use(n=218,240,231):Ne	217	240	230	
Week 48: Device to DressBatheEat(n=218,240,231):Ne	217	238	228	
Week 48: Other aids/devices(n=218,240,231):Ne	215	234	225	
Baseline: Walking aid use(n=281,282,284):R	4	8	5	
Baseline: Wheelchair use(n=281,282,284):R	0	0	0	
Baseline: Device to DressBatheEat(n=281,282,284):R	1	2	0	
Baseline: Other aids/devices(n=281,282,284):R	2	2	5	
Week 32: Walking aid use(n=250,260,251):R	4	1	6	
Week 32: Wheelchair use(n=250,260,251):R	1	0	0	
Week 32: Device to DressBatheEat(n=250,260,251):R	0	0	1	
Week 32: Other aids/devices(n=250,260,251):R	0	0	1	

Week 48: Walking aid use(n=218,240,231):R	1	2	3	
Week 48: Wheelchair use(n=218,240,231):R	0	0	0	
Week 48: Device to DressBatheEat(n=218,240,231):R	1	0	0	
Week 48: Other aids/devices(n=218,240,231):R	1	0	1	
Baseline: Walking aid use(n=281,282,284):S	11	13	15	
Baseline: Wheelchair use(n=281,282,284):S	0	0	0	
Baseline: Device to DressBatheEat(n=281,282,284):S	4	2	2	
Baseline: Other aids/devices(n=281,282,284):S	0	8	4	
Week 32: Walking aid use(n=250,260,251):S	8	8	10	
Week 32: Wheelchair use(n=250,260,251):S	0	0	0	
Week 32: Device to DressBatheEat(n=250,260,251):S	1	2	2	
Week 32: Other aids/devices(n=250,260,251):S	2	4	3	
Week 48: Walking aid use(n=218,240,231):S	6	12	13	
Week 48: Wheelchair use(n=218,240,231):S	0	0	0	
Week 48: Device to DressBatheEat(n=218,240,231):S	0	0	2	
Week 48: Other aids/devices(n=218,240,231):S	2	2	1	
Baseline: Walking aid use(n=281,282,284):O	7	12	7	
Baseline: Wheelchair use(n=281,282,284):O	0	0	1	
Baseline: Device to DressBatheEat(n=281,282,284):O	2	0	3	
Baseline: Other aids/devices(n=281,282,284):O	3	5	3	
Week 32: Walking aid use(n=250,260,251):O	4	7	12	
Week 32: Wheelchair use(n=250,260,251):O	0	0	1	
Week 32: Device to DressBatheEat(n=250,260,251):O	0	0	1	
Week 32: Other aids/devices(n=250,260,251):O	1	4	1	
Week 48: Walking aid use(n=218,240,231):O	4	8	10	
Week 48: Wheelchair use(n=218,240,231):O	0	0	1	
Week 48: Device to DressBatheEat(n=218,240,231):O	0	0	0	
Week 48: Other aids/devices(n=218,240,231):O	0	3	3	
Baseline: Walking aid use(n=281,282,284):A	9	9	15	
Baseline: Wheelchair use(n=281,282,284):A	0	0	0	
Baseline: Device to DressBatheEat(n=281,282,284):A	3	4	0	

Baseline:Other aids/devices(n=281,282,284):A	1	2	2	
Week 32: Walking aid use(n=250,260,251):A	9	12	9	
Week 32: Wheelchair use(n=250,260,251):A	1	0	0	
Week 32: Device to DressBatheEat(n=250,260,251):A	1	1	1	
Week 32: Other aids/devices(n=250,260,251):A	1	0	1	
Week 48: Walking aid use(n=218,240,231):A	7	7	14	
Week 48: Wheelchair use(n=218,240,231):A	1	0	0	
Week 48: Device to DressBatheEat(n=218,240,231):A	0	2	1	
Week 48: Other aids/devices(n=218,240,231):A	0	1	1	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Number of Subjects who Quit Job Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Subjects who Quit Job Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage (during 3 months prior to baseline) at baseline, Week 32 and Week 48. Domain evaluated was number of subjects who quit job due to OA. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
Baseline (n=281, 282, 284)	13	12	9	
Week 32 (n=250, 260, 251)	7	9	4	
Week 48 (218, 240, 231)	7	7	4	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Health Care Resource Utilization (HCRU): Duration Since Quitting Job Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Duration Since Quitting Job Due to Osteoarthritis
End point description: Osteoarthritis HCRU assessed healthcare usage (during 3 months prior to baseline) at baseline, Week 32 and Week 48. Domain evaluated was duration since quitting job due to OA. ITT population: all randomized subjects who received at least one dose of SC study medication (either Tanezumab or placebo). One additional subject apart from the ones who had responded for quitting job responded to duration since quitting job. 'n' = subjects evaluable for this endpoint at specified time points.	
End point type	Secondary
End point timeframe: Baseline, Weeks 32 and 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: years				
median (full range (min-max))				
Baseline (n=13, 12, 9)	2.0 (0.1 to 20.9)	1.0 (0.2 to 7.0)	5.3 (0.1 to 30.0)	
Week 32 (n=7, 10, 4)	0.5 (0.3 to 2.9)	2.4 (0.2 to 17.8)	1.1 (0.1 to 10.2)	
Week 48 (n=7, 7, 4)	0.8 (0.3 to 2.8)	2.5 (0.6 to 10.0)	0.7 (0.1 to 1.5)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects Who Withdrew Due to Lack of Efficacy

End point title	Number of Subjects Who Withdrew Due to Lack of Efficacy
End point description: Number of subjects who withdrew from treatment due to lack of efficacy have been reported here. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).	
End point type	Secondary
End point timeframe: Baseline up to Week 24	

<b>End point values</b>	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects	18	2	3	

## Statistical analyses

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Logistic regression model included baseline diary average pain, baseline WOMAC pain score, classification variables index joint, highest Kellgren-Lawrence grade and treatment. Odds ratio and 95% CI estimated from logistic regression model.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0027
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.02
upper limit	0.46

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Logistic regression model included baseline diary average pain, baseline WOMAC pain score, classification variables index joint, highest Kellgren-Lawrence grade and treatment. Odds ratio and 95% CI estimated from logistic regression model.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0033
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.05
upper limit	0.54

## Secondary: Time to Discontinuation Due to Lack of Efficacy

End point title	Time to Discontinuation Due to Lack of Efficacy
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End point description:

Time to discontinuation due to lack of efficacy was defined as the time interval from the date of first study drug administration up to the date of discontinuation of subject from treatment due to lack of efficacy. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'number of subjects analysed' signifies subjects who discontinued from the study due to lack of efficacy. Due to the Kaplan-Meier estimate not reaching the level for discontinuation due to lack of efficacy, median and upper limit could not be calculated and has been denoted by 99999.

End point type	Secondary
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End point timeframe:

Baseline up to Week 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	18	2	3	
Units: days				
median (full range (min-max))	99999 (10 to 99999)	99999 (27 to 99999)	99999 (12 to 99999)	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Missing data for the selected percentile(s) was due to the Kaplan-Meier estimate not reaching the level for discontinuation due to lack of efficacy.

Comparison groups	Placebo v Tanezumab 5 mg
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Number of subjects included in analysis	21
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Analysis specification	Pre-specified
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Analysis type	superiority
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P-value	= 0.0007 <sup>[13]</sup>
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Method	Logrank
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Notes:

[13] - P-value based on the log-rank test.

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Missing data for the selected percentile(s) was due to the Kaplan-Meier estimate not reaching the level for discontinuation due to lack of efficacy.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	20
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002 <sup>[14]</sup>
Method	Logrank

Notes:

[14] - P-value based on the log-rank test.

## Secondary: Number of Subjects Who Took Rescue Medication during Weeks 2, 4, 8, 12, 16 and 24

End point title	Number of Subjects Who Took Rescue Medication during Weeks 2, 4, 8, 12, 16 and 24
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End point description:

In case of inadequate pain relief, acetaminophen/paracetamol up to 4000 mg per day up to 5 days in a week could be taken as rescue medication between day 1 and week 24. Number of subjects with any use of rescue medication during the particular study week were summarized. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).

End point type	Secondary
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End point timeframe:

Weeks 2, 4, 8, 12, 16 and 24

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
Week 2	205	150	169	
Week 4	181	134	150	
Week 8	166	135	146	
Week 12	151	122	122	
Week 16	154	130	122	
Week 24	126	127	115	

## Statistical analyses

Statistical analysis title	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 2: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.42
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.29
upper limit	0.59

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 2: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.55
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.38
upper limit	0.78

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 4: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.5

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.36
upper limit	0.7

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 4: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0067
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.44
upper limit	0.88

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 8: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0087
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.64
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.45
upper limit	0.89

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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**Statistical analysis description:**

Week 8: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0787
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.53
upper limit	1.04

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 12: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0129
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.47
upper limit	0.91

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 16: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0399
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.5
upper limit	0.98

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 12: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0124
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.47
upper limit	0.91

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 24: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9449
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.01

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.72
upper limit	1.42

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 16: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.45
upper limit	0.87

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade and treatment.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3238
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.84
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.6
upper limit	1.18

## Secondary: Number of Subjects Who Took Rescue Medication during Week 32

End point title	Number of Subjects Who Took Rescue Medication during Week 32
End point description:	
In case of inadequate pain relief, after Week 24, acetaminophen/paracetamol up to 4000 mg per day up to 5 days in a week could be taken as rescue medication and use was reported weekly via diary. Number of subjects with any use of rescue medication during the 4 weeks up to and including the particular study week were summarized. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'number of subjects analysed' signifies subjects who were evaluable for this endpoint.	
End point type	Secondary
End point timeframe:	
Week 32	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	231	251	249	
Units: subjects	130	158	149	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Days of Rescue Medication Used at Weeks 2, 4, 8, 12, 16 and 24

End point title	Number of Days of Rescue Medication Used at Weeks 2, 4, 8, 12, 16 and 24
End point description:	
In case of inadequate pain relief during the treatment period, acetaminophen/paracetamol up to 4000 mg per day up to 5 days in a week a could be taken as rescue medication. Number of days the subjects used the rescue medication during the particular study weeks were summarized. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).	
End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8, 12, 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: days				
least squares mean (standard error)				
Week 2	3.17 (± 0.27)	2.12 (± 0.19)	2.39 (± 0.21)	
Week 4	2.82 (± 0.28)	1.81 (± 0.18)	2.07 (± 0.21)	
Week 8	2.54 (± 0.26)	1.83 (± 0.19)	1.92 (± 0.20)	
Week 12	2.29 (± 0.27)	1.70 (± 0.20)	1.72 (± 0.20)	

Week 16	2.11 ( $\pm$ 0.24)	1.64 ( $\pm$ 0.19)	1.70 ( $\pm$ 0.19)	
Week 24	1.74 ( $\pm$ 0.22)	1.49 ( $\pm$ 0.18)	1.43 ( $\pm$ 0.18)	

## Statistical analyses

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: Least square (LS) Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.54
upper limit	0.82
Variability estimate	Standard error of the mean
Dispersion value	0.07

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0067
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.61
upper limit	0.92
Variability estimate	Standard error of the mean
Dispersion value	0.08



<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 4: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.64
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.51
upper limit	0.82
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 4: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0112
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.58
upper limit	0.93
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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**Statistical analysis description:**

Week 8: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.

Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0093
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.56
upper limit	0.92
Variability estimate	Standard error of the mean
Dispersion value	0.09

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**Statistical analysis title**

Placebo Versus Tanezumab 5 mg

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**Statistical analysis description:**

Week 8: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0237
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.59
upper limit	0.96
Variability estimate	Standard error of the mean
Dispersion value	0.09

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**Statistical analysis title**

Placebo Versus Tanezumab 2.5 mg

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**Statistical analysis description:**

Week 12: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0374
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.74
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.56
upper limit	0.98
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 12: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0468
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.57
upper limit	1
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 16: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0751
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.78
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.59
upper limit	1.03
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 16: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1305
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.81
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.61
upper limit	1.06
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 24: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3057
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.85
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.63
upper limit	1.16
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 24: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2056
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.82
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.61
upper limit	1.11
Variability estimate	Standard error of the mean
Dispersion value	0.13

**Secondary: Number of Days of Rescue Medication Used at Week 32**

End point title	Number of Days of Rescue Medication Used at Week 32
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End point description:

In case of inadequate pain relief, after Week 24, acetaminophen/paracetamol up to 4000 mg per day up to 7 days in a week could be taken as rescue medication and use was reported weekly via diary. Number of days per week the subjects used the rescue medication during the 4 weeks up to and including the particular study week were summarized. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo). Here, 'number of subjects analysed' signifies subjects who took rescue medication.

End point type	Secondary
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End point timeframe:

Week 32

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	231	251	249	
Units: days				
arithmetic mean (standard deviation)	1.8 (± 2.24)	2.2 (± 2.34)	2.0 (± 2.28)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Amount of Rescue Medication Used at Weeks 2, 4, 8, 12, 16 and 24

End point title	Amount of Rescue Medication Used at Weeks 2, 4, 8, 12, 16 and 24
End point description:	
In case of inadequate pain relief, acetaminophen/paracetamol up to 4000 mg per day up to 5 days in a week could be taken as rescue medication. The total dosage of acetaminophen in milligrams used during the specified week were summarized. The intent to treat population included all randomized subjects who received at least one dose of subcutaneous study medication (either tanezumab or placebo).	
End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8, 12, 16 and 24	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: milligrams				
least squares mean (standard error)				
Week 2	3690.6 (± 714.30)	2283.4 (± 444.56)	2703.4 (± 516.83)	
Week 4	3139.0 (± 707.35)	1868.9 (± 396.26)	2366.6 (± 529.63)	
Week 8	2940.9 (± 678.61)	1902.4 (± 425.30)	2269.4 (± 523.10)	
Week 12	2893.1 (± 749.38)	1950.1 (± 495.07)	1992.3 (± 509.28)	
Week 16	2627.1 (± 658.47)	1864.2 (± 458.32)	1897.6 (± 466.14)	
Week 24	2273.8 (± 625.84)	1868.1 (± 482.13)	1828.8 (± 491.51)	

## Statistical analyses

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 2: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg
Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0441
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.39
upper limit	0.99
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 2: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1895
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.73
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.46
upper limit	1.17
Variability estimate	Standard error of the mean
Dispersion value	0.17

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 4: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0567
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.6
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.35
upper limit	1.01
Variability estimate	Standard error of the mean
Dispersion value	0.16

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 4: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.296
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.44
upper limit	1.28
Variability estimate	Standard error of the mean
Dispersion value	0.2

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 8: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg



Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1215
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.37
upper limit	1.12
Variability estimate	Standard error of the mean
Dispersion value	0.18

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
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Statistical analysis description:

Week 8: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.

Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3569
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.44
upper limit	1.34
Variability estimate	Standard error of the mean
Dispersion value	0.22

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
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Statistical analysis description:

Week 12: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.

Comparison groups	Placebo v Tanezumab 2.5 mg
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Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2096
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.36
upper limit	1.25
Variability estimate	Standard error of the mean
Dispersion value	0.21

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 12: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2387
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.69
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.37
upper limit	1.28
Variability estimate	Standard error of the mean
Dispersion value	0.22

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 16: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2627
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.39
upper limit	1.29
Variability estimate	Standard error of the mean
Dispersion value	0.22

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 16: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2863
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.72
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.4
upper limit	1.31
Variability estimate	Standard error of the mean
Dispersion value	0.22

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 2.5 mg
Statistical analysis description:	
Week 24: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 2.5 mg

Number of subjects included in analysis	565
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.556
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.82
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.43
upper limit	1.58
Variability estimate	Standard error of the mean
Dispersion value	0.27

<b>Statistical analysis title</b>	Placebo Versus Tanezumab 5 mg
Statistical analysis description:	
Week 24: LS Mean was ratio of treatments. Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, and treatment group.	
Comparison groups	Placebo v Tanezumab 5 mg
Number of subjects included in analysis	566
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5076
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.42
upper limit	1.53
Variability estimate	Standard error of the mean
Dispersion value	0.26

## Secondary: Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs) up to End of Study

End point title	Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs) up to End of Study
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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. Treatment-emergent were events between first dose of study drug and up to week 48 that were absent before treatment or that worsened relative to pretreatment state. AEs included both serious and non-serious AEs. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.

End point type	Secondary
End point timeframe:	
Baseline up to Week 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
AEs	178	184	198	
SAEs	11	24	27	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Treatment-Emergent Treatment-Related Adverse Events (AEs) and Serious Adverse Events (SAEs) up to End of Study

End point title	Number of Subjects With Treatment-Emergent Treatment-Related Adverse Events (AEs) and Serious Adverse Events (SAEs) up to End of Study
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End point description:

Treatment-related AE was any untoward medical occurrence attributed to study drug in a subject who received study drug. 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. Treatment-emergent were events between first dose of study drug and up to week 48 that were absent before treatment or that worsened relative to pre-treatment state. Relatedness to study drug was assessed by the investigator. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.

End point type	Secondary
End point timeframe:	
Baseline up to Week 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
AEs	46	52	59	
SAEs	1	0	3	

### Statistical analyses

**Secondary: Number of Subjects With Laboratory Test Abnormalities With Regard to Normal Baseline**

End point title	Number of Subjects With Laboratory Test Abnormalities With Regard to Normal Baseline
End point description: Primary Abnormality criteria:HGB,hematocrit,RBC count<0.8*lower limit of normal(LLN);Ery.MCV/hemoglobin/ HGB concentration,RBCs distribution width<0.9*LLN, >1.1*upper limit of normal(ULN);platelets <0.5*LLN,>1.75*ULN;WBC count<0.6*LLN, >1.5*ULN;Lymphocytes,Leukocytes,Neutrophils <0.8*LLN, >1.2*ULN;Basophils,Eosinophils,Monocytes>1.2*ULN;Prothrombin time/Intl.normalized ratio>1.1*ULN; total bilirubin>1.5*ULN; aspartate aminotransferase,alanine aminotransferase,gamma GT,LDH,alkaline phosphatase >3.0*ULN;total protein; albumin<0.8*LLN,>1.2*ULN; blood urea nitrogen,creatinine,Cholesterol,triglycerides >1.3*ULN;Urate>1.2*ULN;sodium<0.95*LLN,>1.05*ULN;potassium,chloride,calcium,magnesium,bicarbonate <0.9*LLN, >1.1*ULN;phosphate<0.8*LLN, >1.2*ULN;glucose<0.6*LLN,>1.5*ULN;HGB A1C >1.3*ULN;creatinine kinase>2.0*ULN,specific gravity<1.003, >1.030;pH<4.5, >8;Urine	
End point type	Secondary
End point timeframe: Baseline up to Week 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	265	271	274	
Units: subjects	32	34	34	

**Statistical analyses**

No statistical analyses for this end point

**Secondary: Number of Subjects With Laboratory Test Abnormalities With Regard to Abnormal Baseline**

End point title	Number of Subjects With Laboratory Test Abnormalities With Regard to Abnormal Baseline
End point description: Primary Abnormality criteria: hemoglobin; hematocrit; RBC count < 0.8*LLN; Ery. mean corpuscular volume/ hemoglobin/ HGB concentration, erythrocytes distribution width <0.9*LLN, >1.1*ULN; platelets <0.5*LLN,>1.75*upper limit of normal (ULN); white blood cell count<0.6*LLN, >1.5*ULN; Lymphocytes, Leukocytes, Neutrophils <0.8*LLN, >1.2*ULN; Basophils, Eosinophils, Monocytes >1.2*ULN; total bilirubin>1.5*ULN; aspartate aminotransferase, alanine aminotransferase, gamma GT,LDH, alkaline phosphatase >3.0*ULN; total protein; albumin<0.8*LLN, >1.2*ULN; blood urea nitrogen, creatinine, Cholesterol, triglycerides >1.3*ULN; Urate >1.2*ULN; sodium <0.95*LLN,>1.05*ULN; potassium, chloride, calcium, magnesium, bicarbonate <0.9*LLN, >1.1*ULN; phosphate <0.8*LLN, >1.2*ULN; glucose <0.6*LLN, >1.5*ULN; Hemoglobin A1C >1.3*ULN; creatine kinase >2.0*ULN; Nitrite >=1. Safety population. N=subjects evaluable for this endpoint.	
End point type	Secondary
End point timeframe: Baseline up to Week 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	205	215	207	
Units: subjects	19	26	22	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Blood Pressure (BP) at Weeks 2, 4, 8, 12, 16, 24, 32 and 48

End point title	Change From Baseline in Blood Pressure (BP) at Weeks 2, 4, 8, 12, 16, 24, 32 and 48
End point description: Measurement of BP included sitting systolic blood pressure (SBP) and diastolic blood pressure (DBP). The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n' = subjects evaluable for this endpoint for specified categories.	
End point type	Secondary
End point timeframe: Baseline, Weeks 2, 4, 8, 12, 16, 24, 32 and 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: millimeters of mercury (mmHg)				
arithmetic mean (standard deviation)				
SBP: Baseline (n= 282, 283, 284)	132.0 (± 13.54)	132.7 (± 12.59)	132.0 (± 12.12)	
SBP:Change at Week 2 (n= 276, 278, 278)	-1.0 (± 10.26)	-2.0 (± 11.24)	-2.4 (± 11.24)	
SBP:Change at Week 4 (n= 272, 280, 278)	-0.3 (± 11.09)	-2.0 (± 10.94)	-2.4 (± 11.52)	
SBP:Change at Week 8 (n= 265, 275, 275)	-0.8 (± 10.89)	-2.1 (± 10.63)	-2.5 (± 12.07)	
SBP:Change at Week 12 (n= 255, 274, 271)	-1.2 (± 11.38)	-1.8 (± 11.53)	-2.8 (± 11.64)	
SBP:Change at Week 16 (n= 242, 265, 265)	-0.4 (± 12.18)	-1.6 (± 12.92)	-2.3 (± 11.63)	
SBP:Change at Week 24 (n= 236, 255, 254)	-1.5 (± 11.47)	-2.0 (± 12.55)	-2.5 (± 12.11)	
SBP:Change at Week 32 (n= 228, 251, 139)	-2.1 (± 12.61)	-1.8 (± 12.40)	-1.0 (± 12.55)	
SBP:Change at Week 48 (n= 220, 242, 229)	-0.7 (± 10.38)	-1.7 (± 11.60)	-1.8 (± 11.34)	
DBP: Baseline (n= 282, 283, 284)	79.7 (± 8.28)	79.3 (± 8.45)	79.5 (± 8.10)	

DBP:Change at Week 2 (n= 276, 278, 278)	-0.4 (± 6.81)	-1.7 (± 7.18)	-1.7 (± 7.33)	
DBP:Change at Week 4 (272, 280, 278)	-0.6 (± 7.06)	-1.7 (± 7.35)	-1.8 (± 7.85)	
DBP:Change at Week 8 (265, 275, 275)	-0.1 (± 7.59)	-1.0 (± 7.11)	-1.7 (± 7.65)	
DBP:Change at Week 12 (255, 274, 271)	-1.0 (± 7.44)	-1.3 (± 7.79)	-2.8 (± 7.94)	
DBP:Change at Week 16 (242, 265, 265)	-0.7 (± 7.85)	-0.6 (± 8.26)	-1.8 (± 7.90)	
DBP:Change at Week 24 (236, 255, 254)	-0.1 (± 7.81)	-0.2 (± 8.42)	-2.0 (± 7.90)	
DBP:Change at Week 32 (228, 251, 239)	-1.2 (± 8.52)	-0.7 (± 8.06)	-1.5 (± 8.64)	
DBP:Change at Week 48 (282, 283, 284)	-0.6 (± 7.22)	-0.7 (± 8.32)	-0.9 (± 8.17)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Heart Rate at Weeks 2, 4, 8, 12, 16, 24, 32 and 48

End point title	Change From Baseline in Heart Rate at Weeks 2, 4, 8, 12, 16, 24, 32 and 48
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End point description:

Heart rate was measured at sitting position. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n' = subjects evaluable for this endpoint for specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 12, 16, 24, 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: beats per minute				
arithmetic mean (standard deviation)				
Baseline (n= 282, 283, 283)	71.1 (± 8.45)	70.4 (± 8.62)	70.8 (± 8.33)	
Change at Week 2 (275, 277, 277)	0.2 (± 7.26)	1.2 (± 7.25)	0.2 (± 8.45)	
Change at Week 4 (n= 272, 280, 277)	0.8 (± 7.92)	0.9 (± 7.91)	-0.1 (± 7.99)	
Change at Week 8 (265, 275, 274)	0.5 (± 7.61)	-0.3 (± 8.08)	-0.9 (± 7.54)	
Change at Week 12 (n= 255, 274, 270)	0.9 (± 8.14)	1.6 (± 8.28)	0.5 (± 8.39)	
Change at Week 16 (n= 242, 265, 264)	-0.3 (± 8.13)	-0.4 (± 8.01)	-0.0 (± 8.12)	
Change at Week 24 (n= 236, 255, 253)	-0.5 (± 8.56)	0.5 (± 8.77)	0.4 (± 8.86)	
Change at Week 32 (n= 228, 251, 238)	1.1 (± 8.51)	0.8 (± 8.19)	0.6 (± 9.40)	
Change at Week 48 (220, 242, 228)	-0.2 (± 8.13)	1.4 (± 9.87)	0.6 (± 10.01)	



## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Electrocardiogram (ECG) Parameters at Weeks 24 and 48

End point title	Change From Baseline in Electrocardiogram (ECG) Parameters at Weeks 24 and 48
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End point description:

A 12-lead ECG was recorded after subjects had rested for at least 5 minutes in the supine position in a quiet environment. All standard intervals (PR, QRS, QT, QTcF, QTcB, QTcF, RR intervals) were collected. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n' = subjects evaluable for this endpoint for specified categories.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 24 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: millisecond				
arithmetic mean (standard deviation)				
RR Interval: Baseline (n=282, 283, 284)	923.9 (± 124.86)	923.6 (± 139.69)	928.3 (± 126.14)	
RR Interval:Change at Week 24 (n=236, 254, 252)	-3.2 (± 108.30)	-14.6 (± 119.62)	-16.1 (± 124.65)	
RR Interval:Change at Week 48 (n=216, 238, 224)	-19.0 (± 118.49)	-16.0 (± 112.48)	-26.7 (± 125.81)	
PR Interval: Baseline (n=276, 278, 277)	168.7 (± 23.95)	165.6 (± 21.92)	168.0 (± 24.54)	
PR Interval:Change at Week 24 (n= 229, 248, 240)	0.1 (± 14.07)	0.5 (± 13.38)	2.0 (± 15.43)	
PR Interval:Change at Week 48 (n= 209, 231, 213)	1.3 (± 13.64)	-1.1 (± 14.38)	-0.4 (± 14.23)	
QRS Interval: Baseline (n= 282, 283, 284)	95.7 (± 12.69)	95.6 (± 14.05)	95.8 (± 14.48)	
QRS Interval:Change at Week 24 (n= 236, 254, 252)	-0.2 (± 7.22)	0.2 (± 7.57)	0.0 (± 7.34)	
QRS Interval:Change at Week 48 (n= 216, 238, 224)	-0.2 (± 8.04)	0.2 (± 8.33)	0.8 (± 8.73)	
QT Interval: Baseline (n=281, 282, 283)	402.0 (± 28.45)	403.1 (± 29.92)	405.6 (± 26.84)	
QT Interval:Change at Week 24 (n= 234, 252, 251)	-2.2 (± 22.65)	-3.1 (± 21.78)	-3.8 (± 25.84)	
QT Interval:Change at Week 48 (n= 215, 237, 222)	-2.5 (± 23.27)	-1.6 (± 24.40)	-4.9 (± 24.06)	
QTcB Interval: Baseline (n= 281, 282, 283)	419.8 (± 22.32)	421.3 (± 20.78)	422.5 (± 20.57)	
QTcB Interval:Change at Week 24 (n= 234, 252, 251)	-1.5 (± 17.56)	0.2 (± 18.47)	0.0 (± 16.26)	
QTcB Interval:Change at Week 48 (n= 215, 237, 222)	1.5 (± 16.45)	1.7 (± 16.70)	1.8 (± 16.80)	
QTcF Interval: Baseline (n= 281, 282, 283 )	413.6 (± 20.70)	414.9 (± 19.23)	416.6 (± 18.61)	

QTCF Interval:Change at Week 24 (n= 234, 252, 251)	-1.7 (± 15.72)	-1.0 (± 14.94)	-1.3 (± 15.05)	
QTCF Interval:Change at Week 48 (n= 215, 237, 222)	0.2 (± 14.50)	0.5 (± 15.58)	-0.5 (± 13.96)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Heart Rate (as assessed by ECG) at Weeks 24 and 48

End point title	Change From Baseline in Heart Rate (as assessed by ECG) at Weeks 24 and 48
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End point description:

Heart rate was measured at sitting position. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n' = Subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 24 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: beats per minute				
arithmetic mean (standard deviation)				
Baseline (n= 282, 283, 284 )	66.2 (± 9.28)	66.5 (± 10.69)	65.9 (± 9.22)	
change at Week 24 (n= 236, 254, 252)	0.3 (± 8.05)	0.9 (± 9.15)	1.4 (± 10.19)	
Change at Week 48 (216, 238, 224)	1.4 (± 8.59)	1.1 (± 8.98)	2.3 (± 10.44)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects With Adjudicated Joint Safety Outcomes

End point title	Percentage of Subjects With Adjudicated Joint Safety Outcomes
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End point description:

Incidence of subjects with any of the joint safety adjudication outcomes of primary osteonecrosis, rapidly progressive OA (type 1 and type 2), subchondral insufficiency fracture (or SPONK), or pathological fracture. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'number of subjects analysed' signifies subjects analysed by adjudication committee.

End point type	Secondary
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End point timeframe:

Baseline up to Week 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	19	27	33	
Units: percentage of subjects				
number (confidence interval 95%)				
Composite Joint Safety Endpoint	0 (0.0 to 1.3)	1.8 (0.6 to 4.1)	3.2 (1.5 to 5.9)	
Rapidly Progressive OA	0 (0.0 to 1.3)	1.4 (0.4 to 3.6)	2.8 (1.2 to 5.5)	
Rapidly Progressive OA type 1	0 (0.0 to 1.3)	1.1 (0.2 to 3.1)	1.8 (0.6 to 4.1)	
Rapidly Progressive OA type 2	0 (0.0 to 1.3)	0.4 (0.0 to 2.0)	1.1 (0.2 to 3.1)	
Primary Osteonecrosis	0 (0.0 to 1.3)	0 (0.0 to 1.3)	0.4 (0.0 to 1.9)	
Pathological Fracture	0 (0.0 to 1.3)	0 (0.0 to 1.3)	0 (0.0 to 1.3)	
Subchondral Insufficiency Fracture	0 (0.0 to 1.3)	0.4 (0.0 to 2.0)	0 (0.0 to 1.3)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects With Total Joint Replacements

End point title	Percentage of Subjects With Total Joint Replacements
End point description:	
Percentage of subjects who underwent at least one total knee, hip or shoulder joint replacement surgery. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously.	
End point type	Secondary
End point timeframe:	
Baseline up to Week 48	

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: percentage of subjects				
number (confidence interval 95%)	6.7 (4.1 to 10.3)	7.8 (4.9 to 11.5)	7.0 (4.4 to 10.7)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Confirmed Orthostatic Hypotension

End point title	Number of Subjects With Confirmed Orthostatic Hypotension
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**End point description:**

Orthostatic hypotension was defined as postural change (supine to standing) that met the following criteria: For systolic BP  $\leq 150$  mmHg (mean supine): Reduction in systolic BP  $\geq 20$  mmHg or reduction in diastolic BP  $\geq 10$  mmHg at the 1 and/or 3 minute standing BP measurements. For systolic BP  $> 150$  mmHg (mean supine): Reduction in systolic BP  $\geq 30$  mmHg or reduction in diastolic BP  $\geq 15$  mmHg at the 1 and/or 3 minute standing BP measurements. If the 1 minute or 3 minute standing BP in a sequence met the orthostatic hypotension criteria, then that sequence was considered positive. If 2 of 2 or 2 of 3 sequences were positive, then orthostatic hypotension was considered confirmed. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'number of subjects analysed' signifies subjects analysed for this endpoint.

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End point type	Secondary
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**End point timeframe:**

Baseline, Weeks 2, 4, 8, 12, 16, 24, 32 and 48

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End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	221	242	228	
Units: subjects				
Baseline	0	1	0	
Week 2	0	0	0	
Week 4	0	0	1	
Week 8	0	0	1	
Week 12	0	0	0	
Week 16	0	0	1	
Week 24	0	0	0	
Week 32	0	0	0	
Week 48	0	1	1	

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**Statistical analyses**

No statistical analyses for this end point

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**Secondary: Change From Baseline in Survey of Autonomic Symptom (SAS) Scores at Week 24**

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End point title	Change From Baseline in Survey of Autonomic Symptom (SAS) Scores at Week 24
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**End point description:**

The SAS is a 12 item (11 for females) questionnaire, from which the total number of symptoms (NoS) (0-12 for males and 0-11 for females) is calculated. Each positive symptom is rated from 1 (not at all) to 5 (a lot). The total symptom impact score (SIS) was the sum of all symptom rating scores, with 0 assigned where the subject did not have the particular symptom. The range for the total impact score is 0-60 for males and 0-55 for females, higher scores indicating higher impact. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n' = subjects evaluable for this endpoint at specified time points.

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End point type	Secondary
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**End point timeframe:**

Baseline, Week 24

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End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
NoS reported: Baseline (n=280,282,283)	0.55 (± 0.85)	0.53 (± 0.85)	0.55 (± 0.83)	
NoS reported: Change at Week 24 (n=232,255,254)	0.03 (± 1.07)	0.15 (± 1.18)	0.18 (± 1.22)	
Total SIS: Baseline (n=280,282,283)	1.14 (± 1.94)	1.11 (± 1.79)	1.20 (± 1.99)	
Total SIS: Change at Week 24 (n=232,255,254)	0.32 (± 2.92)	0.53 (± 3.23)	0.56 (± 3.11)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Neuropathy Impairment Score (NIS) at Weeks 2, 4, 8, 12, 16, 24, 32 and 48

End point title	Change From Baseline in Neuropathy Impairment Score (NIS) at Weeks 2, 4, 8, 12, 16, 24, 32 and 48
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End point description:

NIS is a standardized instrument used to evaluate subject for signs of peripheral neuropathy. NIS is the sum of scores of 37 items, from both the left and right side, where 24 items scored from 0 (normal) to 4 (paralysis), higher score indicated higher abnormality/impairment and 13 items scored from 0 (normal), 1 (decreased) and 2 (absent), higher score indicated higher impairment. NIS possible overall score ranged from 0 (no impairment) to 244 (maximum impairment), higher scores indicated increased impairment. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n' = subjects evaluable for this endpoint at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 12, 16, 24, 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n= 282, 283, 284)	1.35 (± 2.85)	1.35 (± 3.72)	1.48 (± 3.11)	
Change at Week 2 (n=280, 280, 276)	0.03 (± 0.92)	-0.09 (± 0.68)	-0.21 (± 1.14)	
Change at Week 4 (n=282, 282, 281)	0.01 (± 1.16)	0.00 (± 1.31)	-0.32 (± 1.24)	
Change at Week 8 (n=282, 282, 283)	-0.11 (± 1.42)	-0.13 (± 1.20)	-0.41 (± 1.56)	
Change at Week 12 (n=282, 282, 283)	-0.12 (± 1.38)	-0.03 (± 1.50)	-0.39 (± 1.59)	
Change at Week 16 (n=282, 282, 283)	-0.17 (± 1.59)	-0.03 (± 1.72)	-0.46 (± 1.53)	

Change at Week 24 (n=282, 282, 283)	-0.20 (± 1.51)	-0.01 (± 1.85)	-0.47 (± 1.58)	
Change at Week 32 (n=282, 282, 283)	-0.23 (± 1.69)	0.00 (± 1.75)	-0.41 (± 1.57)	
Change at Week 48 (n=282, 282, 283)	-0.22 (± 1.67)	0.01 (± 1.91)	-0.43 (± 1.57)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Anti Tanezumab Antibodies

End point title	Number of Subjects With Anti Tanezumab Antibodies
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End point description:

Human serum ADA samples were analysed for the presence or absence of anti-tanezumab antibodies by using a semi quantitative enzyme linked immunosorbent assay (ELISA). Subjects listed as having anti-tanezumab antibodies had ADA titer level  $\geq 3.32$ . Less than 3.32 was considered below the limit of quantitation. The safety population was defined as all subjects treated with tanezumab or placebo subcutaneously. Here, 'n'=subjects evaluable for this end point at specified time points.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8,16, 24, 32 and 48

End point values	Placebo	Tanezumab 2.5 mg	Tanezumab 5 mg	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	282	283	284	
Units: subjects				
Baseline (n= 281, 281, 281)	24	26	36	
Week 8 (n= 261, 275, 275)	24	27	41	
Week 16 (n= 242, 263, 265)	25	34	48	
Week 24 (n= 233, 253, 251)	19	39	49	
Week 32 (n= 224, 247, 236)	19	38	42	
Week 48 (n= 216, 242, 227)	18	32	31	

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Baseline up to Week 24

Adverse event reporting additional description:

Same event may appear as AE and serious AE, what is presented are distinct events. Event may be categorized as serious in 1 subject and as non-serious in another subject or 1 subject may have experienced both serious and non-serious event during study. One death was accounted as lost to follow-up in subject disposition.

Assessment type	Non-systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	21.1
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### Reporting groups

Reporting group title	Placebo
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Reporting group description:

Placebo matched to tanezumab (RN624 or PF-04383119) injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

Reporting group title	Tanezumab 5 mg
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Reporting group description:

Tanezumab (RN624 or PF-04383119) 5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

Reporting group title	Tanezumab 2.5 mg
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Reporting group description:

Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered subcutaneously on Day 1 (Baseline), Week 8 and Week 16.

Serious adverse events	Placebo	Tanezumab 5 mg	Tanezumab 2.5 mg
Total subjects affected by serious adverse events			
subjects affected / exposed	3 / 282 (1.06%)	9 / 284 (3.17%)	8 / 283 (2.83%)
number of deaths (all causes)	0	2	1
number of deaths resulting from adverse events			
Injury, poisoning and procedural complications			
Nerve injury			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nerve root injury lumbar			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pelvic fracture			

subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Radius fracture			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Vascular disorders			
Lymphatic fistula			
subjects affected / exposed	1 / 282 (0.35%)	0 / 284 (0.00%)	0 / 283 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac disorders			
Acute myocardial infarction			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Arrhythmia			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Cardio-respiratory arrest			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Coronary artery stenosis			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0



Eye disorders			
Cataract			
subjects affected / exposed	1 / 282 (0.35%)	0 / 284 (0.00%)	0 / 283 (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
Ocular vascular disorder			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Pancreatitis			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Hepatobiliary disorders			
Cholecystitis			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Cholelithiasis			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Hepatitis			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Osteoarthritis			

subjects affected / exposed	1 / 282 (0.35%)	2 / 284 (0.70%)	1 / 283 (0.35%)
occurrences causally related to treatment / all	0 / 1	0 / 2	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Rotator cuff syndrome			
subjects affected / exposed	0 / 282 (0.00%)	0 / 284 (0.00%)	1 / 283 (0.35%)
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			
Nasopharyngitis			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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
Pneumonia			
subjects affected / exposed	0 / 282 (0.00%)	1 / 284 (0.35%)	0 / 283 (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

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

<b>Non-serious adverse events</b>	Placebo	Tanezumab 5 mg	Tanezumab 2.5 mg
Total subjects affected by non-serious adverse events			
subjects affected / exposed	77 / 282 (27.30%)	60 / 284 (21.13%)	73 / 283 (25.80%)
Nervous system disorders			
Headache			
subjects affected / exposed	18 / 282 (6.38%)	14 / 284 (4.93%)	15 / 283 (5.30%)
occurrences (all)	34	16	18
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	34 / 282 (12.06%)	22 / 284 (7.75%)	27 / 283 (9.54%)
occurrences (all)	45	38	35
Back pain			
subjects affected / exposed	15 / 282 (5.32%)	17 / 284 (5.99%)	16 / 283 (5.65%)
occurrences (all)	16	17	19
Infections and infestations			

Nasopharyngitis subjects affected / exposed occurrences (all)	25 / 282 (8.87%) 28	21 / 284 (7.39%) 26	31 / 283 (10.95%) 32
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## **More information**

### **Substantial protocol amendments (globally)**

Were there any global substantial amendments to the protocol? No

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### **Interruptions (globally)**

Were there any global interruptions to the trial? No

### **Limitations and caveats**

None reported