



## Clinical trial results:

**A Phase II, randomised, open-label study of Gemcitabine/Carboplatin first-line chemotherapy in combination with or without the antisense oligonucleotide Apatorsen (OGX-427) in advanced squamous cell lung cancers.**

### Summary

EudraCT number	2014-000199-25
Trial protocol	GB
Global end of trial date	24 May 2018

### Results information

Result version number	v1 (current)
This version publication date	29 June 2019
First version publication date	29 June 2019

### Trial information

#### Trial identification

Sponsor protocol code	009436
-----------------------	--------

#### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02423590
WHO universal trial number (UTN)	-

Notes:

### Sponsors

Sponsor organisation name	Queen Mary University of London
Sponsor organisation address	QM Innovation Building, 5 Walden Street, London, United Kingdom, E1 2EF
Public contact	CECM Trials Team, Queen Mary University of London , +44 02078828197, bci-cecmmonitoring@qmul.ac.uk
Scientific contact	CECM Trials Team, Queen Mary University of London , +44 02078829187, bci-cecmmonitoring@qmul.ac.uk

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	31 May 2019
Is this the analysis of the primary completion data?	Yes
Primary completion date	21 May 2018
Global end of trial reached?	Yes
Global end of trial date	24 May 2018
Was the trial ended prematurely?	Yes

Notes:

## General information about the trial

Main objective of the trial:

To estimate the clinical benefit of gemcitabine/carboplatin plus Apatorsen (OGX-427) relative to gemcitabine /carboplatin alone, as measured by investigator-assessed progression-free survival (PFS).

Protection of trial subjects:

The study design aims to minimise potential risks. Eligibility criteria were selected to enhance the safety of patients in this trial and a number of exclusion criteria were specifically based on the known safety profiles of the study drug treatments. A dose modification strategy for management of toxicity and monitoring was in place for those risks deemed to be most likely or serious.

Background therapy:

All patients received gemcitabine and carboplatin, which were used within their licensed indications and were therefore regarded as non-investigational products. Commercial gemcitabine and carboplatin was sourced locally by the investigational sites in keeping with standard local practice. Commercial brands of gemcitabine and carboplatin were permitted for use.

Evidence for comparator:

Not applicable.

Actual start date of recruitment	27 June 2014
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	United Kingdom: 86
Worldwide total number of subjects	86
EEA total number of subjects	86

Notes:

### Subjects enrolled per age group

In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0

Adults (18-64 years)	35
From 65 to 84 years	51
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details:

From June 2014 to December 2016 86 patients with advanced squamous cell lung cancer were recruited from 21 UK centres.

### Pre-assignment

Screening details:

Patients with newly diagnosed cytologically or histologically confirmed Stage IIIB/IV squamous cell carcinoma, with no symptomatic CNS involvement or CNS involvement requiring steroids. ECOG performance status 0 - 2.

Adequate organ and bone marrow function, with no history of significant cardiovascular disease or polyneuropathy > Grade 2. .

### Period 1

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

Blinding implementation details:

Not applicable.

### Arms

Are arms mutually exclusive?	Yes
------------------------------	-----

<b>Arm title</b>	Gemcitabine/Carboplatin
------------------	-------------------------

Arm description:

Gemcitabine/carboplatin will be administered as standard 21-day treatment cycles according to normal clinical practice. Gemcitabine (1250 mg/m<sup>2</sup>) will be given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Following the administration of gemcitabine on Day 1, carboplatin (AUC5) will be given by infusion over 30-60 minutes.

Arm type	Active comparator
Investigational medicinal product name	Gemcitabine
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder for solution for injection/infusion
Routes of administration	Intravenous use

Dosage and administration details:

1250 mg/m<sup>2</sup> given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle.

Investigational medicinal product name	Carboplatin
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Intravenous use

Dosage and administration details:

Following the administration of gemcitabine on Day 1, carboplatin (AUC5) will be given by infusion over 30-60 minutes. AUC dose was calculated as per local guidelines. Sites could use the Calvert formula as a guide.

<b>Arm title</b>	Apatorsen plus gemcitabine/carboplatin
------------------	--

Arm description:

Gemcitabine/carboplatin was administered as standard 21-day treatment cycles according to normal clinical practice. Apatorsen (OGX-427) was administered prior to gemcitabine/carboplatin chemotherapy. Apatorsen (OGX-427) treatment began with a loading dose period prior to the initiation of chemotherapy. Patients received three loading doses of 400 mg by 2 hour intravenous infusions within a 9-day period (with at least 48 hours between start times of infusions and between the start of the last

infusion and the initiation of chemotherapy); following the loading dose period and upon initiation of the 21-day treatment cycles, 400mg Apatorsen (OGX-427) was given weekly by approximately 2 hour intravenous infusions. Gemcitabine was given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Carboplatin was given by 30 to 60 minute infusion on Day 1 of each 21-day Cycle. Chemotherapy was initiated within 7 calendar days following completion of the loading dose period.

Arm type	Experimental
Investigational medicinal product name	Gemcitabine
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder for solution for injection/infusion
Routes of administration	Intravenous use

Dosage and administration details:

1250 mg/m<sup>2</sup> given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle.

Investigational medicinal product name	Carboplatin
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Intravenous use

Dosage and administration details:

Following the administration of gemcitabine on Day 1, carboplatin (AUC5) will be given by infusion over 30-60 minutes. AUC dose was calculated as per local guidelines. Sites could use the Calvert formula as a guide.

Investigational medicinal product name	Apatorsen
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Apatorsen (OGX-427) treatment began with a loading dose period prior to the initiation of chemotherapy. Patients received three loading doses of 400 mg by 2 hour intravenous infusions within a 9-day period (with at least 48 hours between start times of infusions and between the start of the last infusion and the initiation of chemotherapy); following the loading dose period and upon initiation of the 21-day treatment cycles, 400mg Apatorsen (OGX-427) was given weekly by approximately 2 hour intravenous infusions.

<b>Number of subjects in period 1<sup>[1]</sup></b>	Gemcitabine/Carboplatin	Apatorsen plus gemcitabine/carboplatin
Started	41	42
Completed	41	42

Notes:

[1] - The number of subjects reported to be in the baseline period are not the same as the worldwide number enrolled in the trial. It is expected that these numbers will be the same.

Justification: 3 of the 86 randomised patients did not receive any treatment and were excluded from the analysis cohort.

## Baseline characteristics

### Reporting groups

Reporting group title	Gemcitabine/Carboplatin
-----------------------	-------------------------

Reporting group description:

Gemcitabine/carboplatin will be administered as standard 21-day treatment cycles according to normal clinical practice. Gemcitabine (1250 mg/m<sup>2</sup>) will be given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Following the administration of gemcitabine on Day 1, carboplatin (AUC5) will be given by infusion over 30-60 minutes.

Reporting group title	Apatorsen plus gemcitabine/carboplatin
-----------------------	--

Reporting group description:

Gemcitabine/carboplatin was administered as standard 21-day treatment cycles according to normal clinical practice. Apatorsen (OGX-427) was administered prior to gemcitabine/carboplatin chemotherapy. Apatorsen (OGX-427) treatment began with a loading dose period prior to the initiation of chemotherapy. Patients received three loading doses of 400 mg by 2 hour intravenous infusions within a 9-day period (with at least 48 hours between start times of infusions and between the start of the last infusion and the initiation of chemotherapy); following the loading dose period and upon initiation of the 21-day treatment cycles, 400mg Apatorsen (OGX-427) was given weekly by approximately 2 hour intravenous infusions. Gemcitabine was given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Carboplatin was given by 30 to 60 minute infusion on Day 1 of each 21-day Cycle. Chemotherapy was initiated within 7 calendar days following completion of the loading dose period.

Reporting group values	Gemcitabine/Carboplatin	Apatorsen plus gemcitabine/carboplatin	Total
Number of subjects	41	42	83
Age categorical Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	17	16	33
From 65-84 years	24	26	50
85 years and over	0	0	0
Age continuous Units: years			
median	66	67.5	
full range (min-max)	50 to 80	45 to 77	-
Gender categorical Units: Subjects			
Female	10	21	31
Male	31	21	52
ECOG Units: Subjects			
0 - Fully Active	5	7	12
1 - Ambulatory, capable of light work	32	31	63
2 - Up and about >50% of time	4	4	8
Tumour stage			

Units: Subjects			
IIIB	11	12	23
IV	30	30	60

## End points

### End points reporting groups

Reporting group title	Gemcitabine/Carboplatin
Reporting group description: Gemcitabine/carboplatin will be administered as standard 21-day treatment cycles according to normal clinical practice. Gemcitabine (1250 mg/m <sup>2</sup> ) will be given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Following the administration of gemcitabine on Day 1, carboplatin (AUC5) will be given by infusion over 30-60 minutes.	
Reporting group title	Apatorsen plus gemcitabine/carboplatin
Reporting group description: Gemcitabine/carboplatin was administered as standard 21-day treatment cycles according to normal clinical practice. Apatorsen (OGX-427) was administered prior to gemcitabine/carboplatin chemotherapy. Apatorsen (OGX-427) treatment began with a loading dose period prior to the initiation of chemotherapy. Patients received three loading doses of 400 mg by 2 hour intravenous infusions within a 9-day period (with at least 48 hours between start times of infusions and between the start of the last infusion and the initiation of chemotherapy); following the loading dose period and upon initiation of the 21-day treatment cycles, 400mg Apatorsen (OGX-427) was given weekly by approximately 2 hour intravenous infusions. Gemcitabine was given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Carboplatin was given by 30 to 60 minute infusion on Day 1 of each 21-day Cycle. Chemotherapy was initiated within 7 calendar days following completion of the loading dose period.	

### Primary: Progression-free survival (PFS)

End point title	Progression-free survival (PFS)
End point description:	
End point type	Primary
End point timeframe: PFS is defined as the time from date of randomisation to the date of first documented tumour progression or death from any cause, whichever occurs first.	

End point values	Gemcitabine/Carboplatin	Apatorsen plus gemcitabine/carboplatin		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	41	42		
Units: months				
median (confidence interval 95%)	6.47 (5.32 to 7.33)	5.19 (3.25 to 5.82)		

### Statistical analyses

Statistical analysis title	Log-rank test and Cox proportional hazards
Comparison groups	Gemcitabine/Carboplatin v Apatorsen plus gemcitabine/carboplatin



Number of subjects included in analysis	83
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.174
Method	Logrank
Parameter estimate	Cox proportional hazard
Point estimate	1.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	2.27

### Secondary: Overall Survival (OS)

End point title	Overall Survival (OS)
-----------------	-----------------------

End point description:

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

End point timeframe:

OS is defined as the time from date of randomisation to the date of death from any cause.

End point values	Gemcitabine/C arboplatin	Apatorsen plus gemcitabine/ca rboplatin		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	41	42		
Units: months				
median (confidence interval 95%)	12.98 (8.18 to 18.83)	9.10 (5.39 to 10.68)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Objective response rate (ORR)

End point title	Objective response rate (ORR)
-----------------	-------------------------------

End point description:

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

End point timeframe:

Patients with at least one confirmed complete response (CR) or partial response (PR) based on investigator assessment using RECIST v1.1.

<b>End point values</b>	Gemcitabine/C arboplatin	Apatorsen plus gemcitabine/ca rboplatin		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	41	42		
Units: Percentage				
number (confidence interval 95%)	21.95 (10.56 to 37.61)	19.05 (8.60 to 34.12)		

### Statistical analyses

---

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Adverse Events will be recorded from the day of written informed consent until 30 days after the last dose of study treatment. Prior to initiation of study medications, only SAEs caused by a protocol-mandated interventions will be reported.

Assessment type	Systematic
-----------------	------------

### Dictionary used

Dictionary name	MedDRA
Dictionary version	17.1

### Reporting groups

Reporting group title	Gemcitabine/Carboplatin
-----------------------	-------------------------

Reporting group description:

Gemcitabine/carboplatin will be administered as standard 21-day treatment cycles according to normal clinical practice. Gemcitabine (1250 mg/m<sup>2</sup>) will be given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Following the administration of gemcitabine on Day 1, carboplatin (AUC5) will be given by infusion over 30-60 minutes.

Reporting group title	Apatorsen plus gemcitabine/carboplatin
-----------------------	--

Reporting group description:

Gemcitabine/carboplatin was administered as standard 21-day treatment cycles according to normal clinical practice. Apatorsen (OGX-427) was administered prior to gemcitabine/carboplatin chemotherapy. Apatorsen (OGX-427) treatment began with a loading dose period prior to the initiation of chemotherapy. Patients received three loading doses of 400 mg by 2 hour intravenous infusions within a 9-day period (with at least 48 hours between start times of infusions and between the start of the last infusion and the initiation of chemotherapy); following the loading dose period and upon initiation of the 21-day treatment cycles, 400mg Apatorsen (OGX-427) was given weekly by approximately 2 hour intravenous infusions. Gemcitabine was given by 30 minute intravenous infusions on Day 1 and Day 8 of each 21-day Cycle. Carboplatin was given by 30 to 60 minute infusion on Day 1 of each 21-day Cycle. Chemotherapy was initiated within 7 calendar days following completion of the loading dose period.

Serious adverse events	Gemcitabine/Carboplatin	Apatorsen plus gemcitabine/carboplatin	
Total subjects affected by serious adverse events			
subjects affected / exposed	17 / 41 (41.46%)	30 / 42 (71.43%)	
number of deaths (all causes)	31	32	
number of deaths resulting from adverse events			
Investigations			
Pancytopenia			
subjects affected / exposed	1 / 41 (2.44%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	0 / 1	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Platelet count decreased			
subjects affected / exposed	1 / 41 (2.44%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	1 / 1	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	

Thrombocytopenia			
subjects affected / exposed	5 / 41 (12.20%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	6 / 7	3 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vascular disorders			
Deep vein thrombosis			
subjects affected / exposed	1 / 41 (2.44%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pulmonary embolism			
subjects affected / exposed	0 / 41 (0.00%)	3 / 42 (7.14%)	
occurrences causally related to treatment / all	0 / 0	3 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Splenic infarction			
subjects affected / exposed	1 / 41 (2.44%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Thrombosis			
subjects affected / exposed	0 / 41 (0.00%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	0 / 0	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Atrial Fibrillation			
subjects affected / exposed	1 / 41 (2.44%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nervous system disorders			
Headache			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Transient ischaemic attack			

subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Blood and lymphatic system disorders</b>			
Anaemia			
subjects affected / exposed	2 / 41 (4.88%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	3 / 3	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Febrile neutropenia			
subjects affected / exposed	3 / 41 (7.32%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	3 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenia			
subjects affected / exposed	3 / 41 (7.32%)	4 / 42 (9.52%)	
occurrences causally related to treatment / all	2 / 3	3 / 4	
deaths causally related to treatment / all	0 / 0	1 / 1	
<b>General disorders and administration site conditions</b>			
Fever			
subjects affected / exposed	0 / 41 (0.00%)	6 / 42 (14.29%)	
occurrences causally related to treatment / all	0 / 0	5 / 6	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infusion related reaction			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pain			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sudden death			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	

Gastrointestinal disorders			
Dyspepsia			
subjects affected / exposed	1 / 41 (2.44%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nausea			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Small bowel obstruction			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	1 / 1	
Vomiting			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory, thoracic and mediastinal disorders			
Hypoxia			
subjects affected / exposed	1 / 41 (2.44%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pleural effusion			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin and subcutaneous tissue disorders			
Purpura			
subjects affected / exposed	1 / 41 (2.44%)	0 / 42 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Psychiatric disorders			
Unresponsiveness			

subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Infections and infestations</b>			
Infection			
subjects affected / exposed	4 / 41 (9.76%)	4 / 42 (9.52%)	
occurrences causally related to treatment / all	1 / 4	1 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenic sepsis			
subjects affected / exposed	2 / 41 (4.88%)	4 / 42 (9.52%)	
occurrences causally related to treatment / all	2 / 2	4 / 4	
deaths causally related to treatment / all	0 / 0	1 / 1	
Pneumonia			
subjects affected / exposed	4 / 41 (9.76%)	6 / 42 (14.29%)	
occurrences causally related to treatment / all	1 / 4	1 / 6	
deaths causally related to treatment / all	0 / 1	0 / 1	
Sepsis			
subjects affected / exposed	0 / 41 (0.00%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	0 / 0	1 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract infection			
subjects affected / exposed	0 / 41 (0.00%)	2 / 42 (4.76%)	
occurrences causally related to treatment / all	0 / 0	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
<b>Metabolism and nutrition disorders</b>			
Hypercalcaemia			
subjects affected / exposed	0 / 41 (0.00%)	1 / 42 (2.38%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	

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

<b>Non-serious adverse events</b>	Gemcitabine/Carboplatin	Apatosens plus gemcitabine/carboplatin	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	41 / 41 (100.00%)	42 / 42 (100.00%)	
Vascular disorders			
Hypertension			
subjects affected / exposed	5 / 41 (12.20%)	7 / 42 (16.67%)	
occurrences (all)	17	31	
Hypotension			
subjects affected / exposed	2 / 41 (4.88%)	4 / 42 (9.52%)	
occurrences (all)	2	5	
Thromboembolic event			
subjects affected / exposed	3 / 41 (7.32%)	3 / 42 (7.14%)	
occurrences (all)	3	4	
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	31 / 41 (75.61%)	25 / 42 (59.52%)	
occurrences (all)	51	55	
Pain			
subjects affected / exposed	25 / 41 (60.98%)	18 / 42 (42.86%)	
occurrences (all)	33	38	
Fever			
subjects affected / exposed	7 / 41 (17.07%)	11 / 42 (26.19%)	
occurrences (all)	10	15	
Edema			
subjects affected / exposed	9 / 41 (21.95%)	4 / 42 (9.52%)	
occurrences (all)	9	6	
Chills			
subjects affected / exposed	2 / 41 (4.88%)	6 / 42 (14.29%)	
occurrences (all)	3	8	
Dysphonia			
subjects affected / exposed	2 / 41 (4.88%)	3 / 42 (7.14%)	
occurrences (all)	2	6	
Respiratory, thoracic and mediastinal disorders			
Dyspnoea			



subjects affected / exposed occurrences (all)	25 / 41 (60.98%) 41	29 / 42 (69.05%) 61	
Cough subjects affected / exposed occurrences (all)	23 / 41 (56.10%) 28	21 / 42 (50.00%) 32	
Epistaxis subjects affected / exposed occurrences (all)	7 / 41 (17.07%) 13	7 / 42 (16.67%) 8	
Psychiatric disorders Insomnia subjects affected / exposed occurrences (all)	7 / 41 (17.07%) 7	6 / 42 (14.29%) 8	
Investigations Thrombocytopenia subjects affected / exposed occurrences (all)	14 / 41 (34.15%) 50	21 / 42 (50.00%) 88	
Neutropenia subjects affected / exposed occurrences (all)	9 / 41 (21.95%) 37	18 / 42 (42.86%) 75	
Leucopenia subjects affected / exposed occurrences (all)	5 / 41 (12.20%) 28	12 / 42 (28.57%) 52	
Liver function test abnormal subjects affected / exposed occurrences (all)	6 / 41 (14.63%) 14	7 / 42 (16.67%) 36	
Hypocalcaemia subjects affected / exposed occurrences (all)	4 / 41 (9.76%) 7	5 / 42 (11.90%) 10	
Weight loss subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 4	6 / 42 (14.29%) 8	
Lymphopenia subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 13	5 / 42 (11.90%) 19	
Creatinine increased			

subjects affected / exposed occurrences (all)	2 / 41 (4.88%) 6	4 / 42 (9.52%) 11	
Hypokalaemia subjects affected / exposed occurrences (all)	2 / 41 (4.88%) 2	3 / 42 (7.14%) 5	
Injury, poisoning and procedural complications Bruising subjects affected / exposed occurrences (all)	4 / 41 (9.76%) 5	3 / 42 (7.14%) 3	
Cardiac disorders Sinus tachycardia subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 3	7 / 42 (16.67%) 17	
Chest pain subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 3	4 / 42 (9.52%) 5	
Nervous system disorders Dysgeusia subjects affected / exposed occurrences (all)	7 / 41 (17.07%) 8	7 / 42 (16.67%) 9	
Headache subjects affected / exposed occurrences (all)	4 / 41 (9.76%) 5	7 / 42 (16.67%) 20	
Dizziness subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 7	7 / 42 (16.67%) 7	
Neuropathy subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 3	4 / 42 (9.52%) 4	
Tremor subjects affected / exposed occurrences (all)	2 / 41 (4.88%) 2	5 / 42 (11.90%) 5	
Lethargy subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 5	3 / 42 (7.14%) 3	
Paraesthesia			

subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 4	2 / 42 (4.76%) 2	
Blood and lymphatic system disorders			
Anaemia			
subjects affected / exposed	21 / 41 (51.22%)	24 / 42 (57.14%)	
occurrences (all)	92	145	
Localized edema			
subjects affected / exposed	2 / 41 (4.88%)	3 / 42 (7.14%)	
occurrences (all)	2	3	
Gastrointestinal disorders			
Constipation			
subjects affected / exposed	21 / 41 (51.22%)	23 / 42 (54.76%)	
occurrences (all)	32	31	
Nausea			
subjects affected / exposed	12 / 41 (29.27%)	20 / 42 (47.62%)	
occurrences (all)	17	33	
Mucositis			
subjects affected / exposed	11 / 41 (26.83%)	12 / 42 (28.57%)	
occurrences (all)	16	15	
Diarrhoea			
subjects affected / exposed	8 / 41 (19.51%)	7 / 42 (16.67%)	
occurrences (all)	11	16	
Vomiting			
subjects affected / exposed	3 / 41 (7.32%)	7 / 42 (16.67%)	
occurrences (all)	3	12	
Dyspepsia			
subjects affected / exposed	5 / 41 (12.20%)	4 / 42 (9.52%)	
occurrences (all)	5	4	
Haemoptysis			
subjects affected / exposed	2 / 41 (4.88%)	7 / 42 (16.67%)	
occurrences (all)	2	8	
Skin and subcutaneous tissue disorders			
Rash			
subjects affected / exposed	9 / 41 (21.95%)	8 / 42 (19.05%)	
occurrences (all)	9	9	
Alopecia			

subjects affected / exposed occurrences (all)	1 / 41 (2.44%) 1	6 / 42 (14.29%) 6	
Dry skin subjects affected / exposed occurrences (all)	2 / 41 (4.88%) 2	3 / 42 (7.14%) 3	
Hyperhidrosis subjects affected / exposed occurrences (all)	1 / 41 (2.44%) 1	4 / 42 (9.52%) 4	
Pruritus subjects affected / exposed occurrences (all)	1 / 41 (2.44%) 3	4 / 42 (9.52%) 7	
Musculoskeletal and connective tissue disorders Musculoskeletal pain subjects affected / exposed occurrences (all)	12 / 41 (29.27%) 19	18 / 42 (42.86%) 25	
Arthralgia subjects affected / exposed occurrences (all)	3 / 41 (7.32%) 4	3 / 42 (7.14%) 4	
Muscular weakness subjects affected / exposed occurrences (all)	2 / 41 (4.88%) 2	3 / 42 (7.14%) 4	
Infections and infestations Infection subjects affected / exposed occurrences (all)	24 / 41 (58.54%) 43	26 / 42 (61.90%) 52	
Metabolism and nutrition disorders Anorexia subjects affected / exposed occurrences (all)	14 / 41 (34.15%) 18	17 / 42 (40.48%) 22	
Hypomagnesaemia subjects affected / exposed occurrences (all)	6 / 41 (14.63%) 12	8 / 42 (19.05%) 43	
Hyperglycaemia subjects affected / exposed occurrences (all)	4 / 41 (9.76%) 4	3 / 42 (7.14%) 10	
Hypertriglyceridaemia			

subjects affected / exposed	4 / 41 (9.76%)	3 / 42 (7.14%)	
occurrences (all)	8	5	
Hypercalcaemia			
subjects affected / exposed	4 / 41 (9.76%)	2 / 42 (4.76%)	
occurrences (all)	6	3	
Hypoalbuminaemia			
subjects affected / exposed	3 / 41 (7.32%)	3 / 42 (7.14%)	
occurrences (all)	4	4	

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
23 May 2014	<ul style="list-style-type: none"><li>- Clarification of adverse reaction expectdness listed in the Protocol</li><li>- List of prohibited medications amended to include live vaccines because they are not recommended in patients treated with gemcitabine.</li><li>- Pharmacovigilance reporting clarification</li><li>- Due to the gemcitabine cardiotoxic potential, ECG added at screening and when clinically indicated to the safety assessments.</li><li>- As per SmPC requirements, neurological evaluation and an assessment of hearing must be performed on a regular basis in patients treated with carboplatin.</li><li>- Contraception updates</li></ul>
18 August 2015	<ul style="list-style-type: none"><li>- Addition of exploratory objective to investigate any apatorsen benefit in a study subpopulation defined as having poor prognostic features.</li></ul>
15 March 2016	<ul style="list-style-type: none"><li>- Change to the dose of IMP from 600mg to 400mg following review of data provided by the IMP manufacturer on recently completed studies.</li><li>- Expansion of inclusion criteria to better suit recent advances in treatment. Patients who have received previous first-line immunotherapy (without chemotherapy) were now eligible for the trial. Patients with cytological diagnosis of squamous cell cancer were also eligible following this amendment, previously only patients with a histological diagnosis were elligible.</li><li>- Length of chemotherapy amended from '6 cycles' to '4-6 cycles' to reflect differences in local practice across all research sites.</li></ul>
21 February 2017	Reduction of sample size from 140 to 86 patients due to unavailability of IMP.

Notes:

### Interruptions (globally)

Were there any global interruptions to the trial? Yes

Date	Interruption	Restart date
05 January 2017	Halt to recruitment while preparing amendment to reduce protocol sample size.	-

Notes:

### Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

Not applicable.

Notes: