Clinical trial results:

A Phase 2, Multicenter, Single-Arm Study of Trastuzumab Emtansine in Patients With HER2 IHC-Positive, Locally Advanced or Metastatic Non-Small Cell Lung Cancer Who Have Received At Least One Prior Chemotherapy Regimen

Summary

EudraCT number	2014-001237-83	
Trial protocol	DE ES IT PL	
Global end of trial date	26 July 2018	
Results information		
Result version number	v2 (current)	
This version publication date	23 August 2019	
First version publication date	09 November 2017	
Version creation reason		

Trial information

Trial identification	
Sponsor protocol code	B029389
Additional study identifiers	
ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02289833
WHO universal trial number (UTN)	-
Neteo	

Notes:

Sponsors

Sponsor organisation name	Hoffmann-LaRoche
Sponsor organisation address	Grenzacherstrasse 124, CH, Basel, Basel, Switzerland, 4070
Public contact	Medical Communications, Hoffmann-LaRoche, +41 8008218590, genentech@druginfo.com
Scientific contact	Medical Communications, Hoffmann-LaRoche, +41 8008218590, genentech@druginfo.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	26 October 2016
Is this the analysis of the primary completion data?	Νο
Global end of trial reached?	Yes
Global end of trial date	26 July 2018
Was the trial ended prematurely?	No
Notes:	

General information about the trial

Main objective of the trial:

The main objective of this study is to evaluate the efficacy of single-agent trastuzumab emtansine in subjects with centrally confirmed human epidermal growth factor receptor (HER2) immunohistochemistry (IHC)-positive (IHC2+ or IHC3+) locally advanced or metastatic non-small cell lung cancer (NSCLC) who had received at least one prior chemotherapy regimen, as measured by confirmed objective response rate (ORR).

Protection of trial subjects:

All subjects signed an informed consent form before participating in the study.

Evidence for comparator:

Actual start date of recruitment	15 December 2014
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Subjects enrolled per country	
Country: Number of subjects enrolled	Spain: 12
Country: Number of subjects enrolled	Germany: 5
Country: Number of subjects enrolled	Italy: 4
Country: Number of subjects enrolled	Poland: 8
Country: Number of subjects enrolled	Switzerland: 4
Country: Number of subjects enrolled	United States: 16
Worldwide total number of subjects	49
EEA total number of subjects	29

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)	27
From 65 to 84 years	22
85 years and over	0

Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

Subjects were screened centrally for HER2 status, using archived tumor specimens from previously collected tissue, if available.

Period 1

Period 1 title	Overall Study (overall period)
Is this the baseline period?	Yes
Allocation method	Not applicable
Blinding used	Not blinded

Arms

Are arms mutually exclusive?	Yes
Arm title	Cohort IHC2+

Arm description:

Subjects with HER2 IHC2-positive (IHC 2+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Arm type	Experimental
Investigational medicinal product name	Trastuzumab emtansine
Investigational medicinal product code	
Other name	Kadcyla, T-DM1
Pharmaceutical forms	Powder for solution for injection
Routes of administration	Intravenous use

Dosage and administration details:

Trastuzumab emtansine will be administered intravenously (IV) at a dose of 3.6 milligrams/kilogram (mg/kg) on Day 1 of every 21-day cycle until disease progression (as assessed by the investigator), unmanageable toxicity, or study termination by the sponsor, whichever occurs first.

Arm title Cohort IHC3+	

Arm description:

Subjects with HER2 IHC3-positive (IHC 3+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Arm type	Experimental
Investigational medicinal product name	Trastuzumab emtansine
Investigational medicinal product code	
Other name	Kadcyla, T-DM1
Pharmaceutical forms	Powder for solution for injection
Routes of administration	Intravenous use

Dosage and administration details:

Trastuzumab emtansine will be administered intravenously (IV) at a dose of 3.6 mg/kg on Day 1 of every 21-day cycle until disease progression (as assessed by the investigator), unmanageable toxicity, or study termination by the sponsor, whichever occurs first.

Number of subjects in period 1	Cohort IHC2+	Cohort IHC3+
Started	29	20
Completed	2	3
Not completed	27	17
Death	23	16
Study Discontinuation	-	1
Lost to follow-up	4	-

Baseline characteristics

Reporting groups

Reporting group title

Cohort IHC2+

Cohort IHC3+

Reporting group description:

Subjects with HER2 IHC2-positive (IHC 2+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Reporting group title

Reporting group description:

Subjects with HER2 IHC3-positive (IHC 3+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Reporting group values	Cohort IHC2+	Cohort IHC3+	Total
Number of subjects	29	20	49
Age categorical			
Units: Subjects			
Age Continuous			
Units: years			
arithmetic mean	63.1	61.4	
standard deviation	± 10.3	± 8.6	-
Gender, Male/Female			
Units: Subjects			
Female	13	7	20
Male	16	13	29

End points reporting groups

Reporting group title

Cohort IHC2+

Reporting group description:

Subjects with HER2 IHC2-positive (IHC 2+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Reporting group title Cohort IHC3+

Reporting group description:

Subjects with HER2 IHC3-positive (IHC 3+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

	PK Analyses for Trastuzumab Emtansine and Total Trastuzumab
Subject analysis set type	Sub-group analysis

Subject analysis set description:

Subjects with HER2 IHC2 or IHC3-positive (IHC 2+ or IHC 3+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine. There were 47 patiens in PK pop from which 44 had valid sparse PK data.

Subject analysis set title	Cmax Analysis for DM1
Subject analysis set type	Sub-group analysis

Subject analysis set description:

Subjects with HER2 IHC2 or IHC3-positive (IHC 2+ or IHC 3+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Subject analysis set title	Anti-drug Antibody Analysis Group
Subject analysis set type	Sub-group analysis

Subject analysis set description:

Subjects with HER2 IHC2 or IHC3-positive (IHC 2+ or IHC 3+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine. Treated subjects with post-dose sample available for ADA analysis.

Primary: Percentage of Subjects With Objective Response as per Investigator Assessment According to Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST v. 1.1)

End point title

Percentage of Subjects With Objective Response as per Investigator Assessment According to Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST v. 1.1)^[1]

Objective response is defined as a coript valuationvaluat on

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: percentage of subjects			
number (confidence interval 95%)	0 (0 to 11.9)	20.0 (5.7 to 43.7)	

No statistical analyses for this end point

Secondary: Overall Su	
End point title	Overall Survival (OS)
End point description:	
	om first study drug administration to death from any cause. The efficacy- ed subjects who received at least one dose of study drug.
E	Secondary
End point type	o coontaan j
End point type End point timeframe:	o contrait y

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: months			
median (confidence interval 95%)	12.2 (3.8 to 23.6)	13.7 (4.1 to 33.0)	

Statistical analyses

No statistical analyses for this end point

Secondary: Progression-Free Survival (PFS) as per Investigator Assessment According to RECIST v. 1.1

End point title	Progression-Free Survival (PFS) as per Investigator Assessment
	According to RECIST v. 1.1

End point description:

PFS is defined as the time from first study drug administration to first documented disease progression, based on investigator assessment using RECIST, v1.1, or death from any cause during the study, whichever occurs first. Disease progression is defined as: at least a 20% increase in the sum of diameters of target lesions, taking as reference the smallest sum on study, including baseline; an absolute increase of at least 5 mm in the sum of diameters of target lesions; the appearance of one or more new lesions. The efficacy-evaluable population included subjects who received at least one dose of study drug.

End point type	Secondary
End point timeframe:	

From Day 1 to PD or death from any cause, up to the study completion date (approximately 43 months)

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: months			
median (confidence interval 95%)	2.6 (1.4 to 2.8)	2.7 (1.4 to 8.3)	

No statistical analyses for this end point

Secondary: Duration of Objective Response (DOR) Assessed According to RECIST v1.1

End point title	Duration of Objective Response (DOR) Assessed According to
	RECIST v1.1

End point description:

DOR is defined as the time from the initial documentation of response (CR or PR using RECIST, v1.1) to documented disease progression or death from any cause during the study. CR: disappearance of all target lesions; and any pathological lymph nodes (whether target or non-target) must have reduction in short axis to < 10 mm. PR: at least a 30% decrease in the sum of diameters of target lesions, taking as reference the baseline sum of diameters. Disease progression: at least a 20% increase in the sum of diameters of target lesions, taking as reference the smallest sum on study, including baseline; an absolute increase of at least 5 mm in the sum of diameters of target lesions; the appearance of one or more new lesions. Data are reported for subjects with response. 9999 = the upper limit confidence interval was not calculable due to the low number of participants with events.

End point type	Secondary

End point timeframe:

From first documented objective response to PD or death from any cause, up to the study completion date (approximately 43 months)

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	0 ^[2]	4	
Units: months			
median (confidence interval 95%)	(to)	7.3 (2.9 to 9999)	

Notes:

[2] - No subjects had response.

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects With Clinical Benefit as per Investigator Assessment According to RECIST, v1.1

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End point title	Percentage of Subjects With Clinical Benefit as per Investigator

End point description:

Clinical benefit is defined as having a CR or PR or stable disease (using RECIST, v1.1) at 6 months. Subjects with no post-baseline response assessment are considered as experiencing no clinical benefit. CR: disappearance of all target lesions; and any pathological lymph nodes (whether target or nontarget) must have reduction in short axis to < 10 mm. PR: at least a 30% decrease in the sum of diameters of target lesions, taking as reference the baseline sum of diameters. Stable disease: neither sufficient shrinkage to qualify for PR nor sufficient increase to qualify for PD, taking as reference the smallest sum while in the study. PD: at least a 20% increase in the sum of diameters of target lesions, taking as reference the smallest sum on study, including baseline; an absolute increase of at least 5 mm in the sum of diameters of target lesions; the appearance of one or more new lesions. The efficacyevaluable population included subjects who received at least one dose of study drug.

End point type	Secondary

End point timeframe:

From Day 1 to PD or death from any cause, up to the study completion date (approximately 43 months)

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: percentage of subjects			
number (confidence interval 95%)	6.9 (0.85 to 22.77)	30.0 (11.89 to 54.28)	

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects With Adverse Events (AEs) and Serious AEs (SAEs)

End point title	Percentage of Subjects With Adverse Events (AEs) and Serious
	AEs (SAEs)

End point description:

An AE is any untoward medical occurrence in a clinical investigation participant administered a pharmaceutical product, whether or not considered related to the study drug. A SAE is any experience that: results in death, is life-threatening, requires in-patient hospitalization or prolongation of existing hospitalization, results in persistent or significant disability/incapacity, is a congenital anomaly/birth defect, or is medically significant. The safety-evaluable population included subjects who received at least one dose of study treatment.

End point type	Secondary
End point timoframe:	

End point timeframe:

From Day 1 to 30 days after last dose of study drug, up to the study completion date (approximately 43 months)

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: percentage of subjects			
number (not applicable)			
AEs	93.1	95.0	
SAEs	17.2	25.0	

No statistical analyses for this end point

Secondary: Maximum Observed Concentration (Cmax) for Trastuzumab Emtansine and Total Trastuzumab

End point title	Maximum Observed Concentration (Cmax) for Trastuzumab
	Emtansine and Total Trastuzumab

End point description:

Cmax is the O-21 day maximum observed concentration of a drug and was measured in blood serum. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable subjects.

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End point type		Secondary
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End point timeframe:

Pre-dose (within 2 days) and 30 minutes (min) after end of infusion (infusion length= 100 min or less) on Day 1 of Cycles 1 and 3 (one cycle=21 days); at treatment discontinuation/early termination, up to the clinical cutoff date (approximately 22 months)

End point values	PK Analyses for Trastuzumab Emtansine and Total Trastuzumab		
Subject group type	Subject analysis set		
Number of subjects analysed	44		
Units: micrograms per milliliter (ug/mL)			
arithmetic mean (standard deviation)			
Trastuzumab Emtansine	78.7 (± 19.6)		
Total Trastuzumab	79.9 (± 21.3)		

Statistical analyses

No statistical analyses for this end point

Secondary: AUCinf for Trastuzumab Emtansine and Total Trastuzumab

End point title

AUCinf for Trastuzumab Emtansine and Total Trastuzumab

End point description:

AUC (from zero to infinity) represents the total drug exposure over time in blood serum. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable participants who consented to intense sampling.

End point type	Secondary

End point timeframe:

Pre-dose & 30 minutes (min) post-infusion (inf.) on Day (D) 1 of Cycles (C) 1 & 3; post- inf. on D 2, 3, 4 or 5, 8, & 15 of C1, & pre- inf. on D1 of C2 & D1 of C4 (C=21D; at treatment discontinuation/early termination, up to approx. 22 months

End point values	PK Analyses for Trastuzumab Emtansine and Total Trastuzumab		
Subject group type	Subject analysis set		
Number of subjects analysed	4 ^[3]		
Units: days times ug/mL			
arithmetic mean (standard deviation)			
Trastuzumab Emtansine	324 (± 49.9)		
Total Trastuzumab	436 (± 83.4)		

Notes:

[3] - 4 subjects had valid intense sampling data.

Statistical analyses

No statistical analyses for this end point

Secondary: Elimination Half-Life (t1/2) for Trastuzumab Emtansine and Total Trastuzumab

End point title	Elimination Half-Life (t1/2) for Trastuzumab Emtansine and
	Total Trastuzumab

End point description:

t1/2 is the time required for the drug serum concentration to be reduced to half. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable participants who consented to intense sampling.

End point type	Secondary

End point timeframe:

Pre-dose and 30minutes (min) post-infusion (inf.) on Day (D) 1 of Cycles (C) 1 and 3; post- inf. on D2, 3, 4 or 5, 8, and 15 of C 1, and pre- inf. on D1 of C2 and D1 of C4 (C= 21 days); at treatment discontinuation/early termination, up to approx. 22 months

End point values	PK Analyses for Trastuzumab Emtansine and Total Trastuzumab		
Subject group type	Subject analysis set		
Number of subjects analysed	4 ^[4]		
Units: days			
arithmetic mean (standard deviation)			
Trastuzumab Emtansine	3.2 (± 0.51)		
Total Trastuzumab	5.6 (± 1.14)		

Notes:

[4] - 4 subjects had valid intense sampling data.

Statistical analyses

No statistical analyses for this end point

Secondary: Volume of Distribution (Vss) for Trastuzumab Emtansine and Total Trastuzumab

End point title	Volume of Distribution (Vss) for Trastuzumab Emtansine and
	Total Trastuzumab

End point description:

Vss is the volume of distribution of study drug at steady state. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable participants who consented to intense sampling.

End point type	Secondary
End point timeframe:	

Pre-dose and 30 minutes (min) post-infusion (inf.) on D1 of C1 and 3; post- inf. on D2, 3, 4 or 5, 8, and 15 of C1, and pre- inf. on D1 of C2 and D1 of C4 (C= 21 days); at treatment discontinuation/early termination, up to approx. 22 months

End point values	PK Analyses for Trastuzumab Emtansine and Total Trastuzumab		
Subject group type	Subject analysis set		
Number of subjects analysed	4 ^[5]		
Units: milligrams per kilogram (mL/kg)			
arithmetic mean (standard deviation)			
Trastuzumab Emtansine	51.1 (± 1.81)		
Total Trastuzumab	60.7 (± 4.23)		

Notes:

[5] - 4 subjects had valid intense sampling data.

Statistical analyses

No statistical analyses for this end point

Secondary: Clearance (CL) for Trastuzumab Emtansine and Total Trastuzumab

End point title	Clearance (CL) for Trastuzumab Emtansine and Total
	Trastuzumab

End point description:

CL is a measure of the body's elimination of a drug from blood serum over time. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable participants who consented to intense sampling.

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End point type	Secondary
End point timeframe:	

Pre-dose and 30 minutes (min) post-infusion (inf.) on D1 of C1 and 3; post- inf. on D2, 3, 4 or 5, 8, and 15 of C1, and pre- inf. on D1 of C2 and D1 of C4 (C= 21 days); at treatment discontinuation/early termination, up to approx. 22 months

End point values	PK Analyses for Trastuzumab Emtansine and Total Trastuzumab		
Subject group type	Subject analysis set		
Number of subjects analysed	4 ^[6]		
Units: mL/day/kg			
arithmetic mean (standard deviation)			
Trastuzumab Emtansine	11.35 (± 1.99)		
Total Trastuzumab	8.54 (± 1.99)		

Notes:

[6] - 4 subjects had valid intense sampling data.

Statistical analyses

No statistical analyses for this end point

Secondary: Maximum Observed Concentration (Cmax) for N2'- deacetyl-N2'-(3mercapto-1-oxopropyl)-maytansine (DM1)

End point title	Maximum Observed Concentration (Cmax) for N2'- deacetyl-
	N2'-(3-mercapto-1-oxopropyl)-maytansine (DM1)

End point description:

Cmax is the maximum observed concentration of a drug and was measured in blood plasma. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable subjects.

End point type	Secondary
End point timeframe:	

Pre-dose (within 2 days) and 30 minutes (min) after end of infusion (infusion length= 100 min or less) on Day 1 of Cycle 1 (one cycle= 21 days); at treatment discontinuation/early termination, up to the clinical cutoff date (approximately 22 months)

End point values	Cmax Analysis for DM1		
Subject group type	Subject analysis set		
Number of subjects analysed	34		
Units: nanograms per milliliter (ng/mL)			
arithmetic mean (standard deviation)	4.3 (± 3.36)		

No statistical analyses for this end point

Secondary: Percentage of Subjects who Died

Percentage of Subjects who Died				
The efficacy-evaluable population included subjects who received at least one dose of study drug.				
Secondary				
End point timeframe:				
From Day 1 to death from any cause, up to the study completion date (approximately 43 months)				

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: percentage of subjects			
number (not applicable)	79.3	80.0	

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects With Treatment-Emergent Anti-Drug Antibodies (ADAs)

End point title	Percentage of Subjects With Treatment-Emergent Anti-Drug Antibodies (ADAs)
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End point description:

The presence of ADAs in blood serum is an indication of the body's immune response to a drug. The pharmacokinetic (PK) population included subjects who had received at least one dose of study treatment and had at least one serum or plasma concentration result available at clinical data cut-off. Data are reported for evaluable subjects.

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End point type		Secondary

End point timeframe:

Pre-dose (within 2 days) on Day 1 of Cycles 1 and 3; at treatment discontinuation/early termination, up to the clinical cutoff date (approximately 22 months)

End point values	Anti-drug Antibody Analysis Group		
Subject group type	Subject analysis set		
Number of subjects analysed	39 ^[7]		
Units: percentage of subjects	0		

Notes:

[7] - Treated subjects with post-dose sample available for ADA analysis.

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects with PFS Event of Disease Progression, as per Investigator Assessment According to RECIST v. 1.1, or Death

Percentage of Subjects with PFS Event of Disease Progression, as per Investigator Assessment According to RECIST v. 1.1, or Death
Death

End point description:

PFS is defined as the time from first study drug administration to first documented disease progression, based on investigator assessment using RECIST, v1.1, or death from any cause during the study, whichever occurs first. Disease progression is defined as: at least a 20% increase in the sum of diameters of target lesions, taking as reference the smallest sum on study, including baseline; an absolute increase of at least 5 mm in the sum of diameters of target lesions; the appearance of one or more new lesions. The efficacy-evaluable population included subjects who received at least one dose of study drug.

End point type	Secondary

End point timeframe:

From Day 1 to PD or death from any cause, up to the study completion date (approximately 43 months)

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	29	20	
Units: percentage of subjects			
number (not applicable)	100	95.0	

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects with DOR Event of Disease Progression, Assessed According to RECIST v1.1

End point title	Percentage of Subjects with DOR Event of Disease Progression,
	Assessed According to RECIST v1.1

End point description:

DOR is defined as the time from the initial documentation of response (CR or PR using RECIST, v1.1) to documented disease progression using RECIST v1.1 or death from any cause during the study. CR: disappearance of all target lesions; and any pathological lymph nodes (whether target or non-target) must have reduction in short axis to < 10 mm. PR: at least a 30% decrease in the sum of diameters of target lesions, taking as reference the baseline sum of diameters. Disease progression: at least a 20%

increase in the sum of diameters of target lesions, taking as reference the smallest sum on study, including baseline; an absolute increase of at least 5 mm in the sum of diameters of target lesions; the appearance of one or more new lesions. The efficacy-evaluable population included subjects who received at least one dose of study drug.

End point type

Secondary

End point timeframe:

From first documented objective response to PD or death from any cause, up to the study completion date (approximately 43 months)

End point values	Cohort IHC2+	Cohort IHC3+	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	O ^[8]	4	
Units: percentage of subjects			
number (not applicable)		75.0	

Notes:

[8] - No subjects had response.

Statistical analyses

No statistical analyses for this end point

Adverse events informat	ion
Timeframe for reporting adver	se events:
From baseline to study comple	etion (approximately 43 months)
Assessment type	Systematic
Dictionary used	
Dictionary name	MedDRA
Dictionary version	21.1
Reporting groups	
Reporting group title	Cohort IHC3+
Reporting group description:	
	tive (IHC 3+) locally advanced or metastatic NSCLC, who had received at t chemotherapy regimen, will receive trastuzumab emtansine.

east one phot platinum-based chemotherapy regimen, will receive trastizumab enitarisme.			
Reporting group title	Cohort IHC2+		

Reporting group description:

Subjects with HER2 IHC2-positive (IHC 2+) locally advanced or metastatic NSCLC, who had received at least one prior platinum-based chemotherapy regimen, will receive trastuzumab emtansine.

Serious adverse events	Cohort IHC3+	Cohort IHC2+	
Total subjects affected by serious adverse events			
subjects affected / exposed	5 / 20 (25.00%)	5 / 29 (17.24%)	
number of deaths (all causes)	16	23	
number of deaths resulting from adverse events	0	0	
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Tumour pain			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0/0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Craniocerebral injury			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0/0	
deaths causally related to treatment / all	0/0	0/0	
Subdural haematoma			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0/0	
deaths causally related to treatment / all	0/0	0/0	
Nervous system disorders			

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Seizure subjects affected / exposed occurrences causally related to treatment / all	0 / 20 (0.00%) 0 / 0	1 / 29 (3.45%) 0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0/0	
deaths causally related to treatment / all	0/0	0/0	
Constipation			
subjects affected / exposed	0 / 20 (0.00%)	1 / 29 (3.45%)	
occurrences causally related to treatment / all	0/0	0 / 1	
deaths causally related to treatment / all	0/0	0 / 0	

Respiratory, thoracic and mediastinal

subjects affected / exposed	0 / 20 (0.00%)	1 / 29 (3.45%)	
occurrences causally related to treatment / all	0/0	0 / 1	
deaths causally related to treatment / all	0/0	0/0	
Lung infection			
subjects affected / exposed	0 / 20 (0.00%)	1 / 29 (3.45%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0/0	0/0	
Pneumonia			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0/0	0 / 0	

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

Non-serious adverse events	Cohort IHC3+	Cohort IHC2+	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	19 / 20 (95.00%)	24 / 29 (82.76%)	
Vascular disorders			
Poor venous access			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	4 / 20 (20.00%)	5 / 29 (17.24%)	
occurrences (all)	6	6	
Fatigue			
subjects affected / exposed	3 / 20 (15.00%)	10 / 29 (34.48%)	
occurrences (all)	5	13	
Chills			
subjects affected / exposed	4 / 20 (20.00%)	1 / 29 (3.45%)	
occurrences (all)	4	1	
Pyrexia			
subjects affected / exposed	3 / 20 (15.00%)	4 / 29 (13.79%)	
occurrences (all)	3	4	
Chest pain			

subjects affected / exposed	2 / 20 (10.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
Mucosal inflammation subjects affected / exposed			
	1 / 20 (5.00%)	2 / 29 (6.90%)	
occurrences (all)	1	3	
Malaise			
subjects affected / exposed	0 / 20 (0.00%)	2 / 29 (6.90%)	
occurrences (all)	0	2	
Oedema peripheral			
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)	
occurrences (all)	3	1	
Non-cardiac chest pain subjects affected / exposed			
	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Influenza like illness			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Oedema			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Mucosal Dryness subjects affected / exposed	1 (20 (5 00%)	0 / 29 (0.00%)	
occurrences (all)	1 / 20 (5.00%)		
	1	0	
Reproductive system and breast disorders			
Metrorrhagia			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Vaginal baomorrhogo			
Vaginal haemorrhage subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)			
	1	0	
Respiratory, thoracic and mediastinal disorders			
Cough			
subjects affected / exposed	3 / 20 (15.00%)	7 / 29 (24.14%)	
occurrences (all)	4	10	
Duannaaa			
Dyspnoea			

occurrences (all) 2 9 Epistaxis subjects affected / exposed 4 / 20 (20.00%) 0 / 29 (0.00%) occurrences (all) 9 0 Pleural effusion 1 / 20 (5.00%) 2 / 29 (6.90%) occurrences (all) 2 2 Dysphonia 1 / 20 (5.00%) 1 / 29 (3.45%) occurrences (all) 1 1 Nasal congestion 1 / 20 (5.00%) 1 / 29 (3.45%) occurrences (all) 1 1 Dysphonia 1 / 20 (5.00%) 1 / 29 (3.45%) occurrences (all) 1 1 Nasal congestion 1 / 20 (5.00%) 0 / 29 (0.00%) occurrences (all) 2 1 Dyspnoea exertional 1 / 20 (5.00%) 0 / 29 (0.00%) occurrences (all) 1 0 Productive cough 1 / 20 (5.00%) 0 / 29 (0.00%) occurrences (all) 1 0 Pulmonary pain 1 / 20 (5.00%) 0 / 29 (0.00%) occurrences (all) 1 0 Oropharyngeal Pain 1 / 20 (5.00%) 0 / 29 (0.00%) occurrences (all) </th <th>subjects affected / exposed</th> <th>2 / 20 (10.00%)</th> <th>8 / 29 (27.59%)</th>	subjects affected / exposed	2 / 20 (10.00%)	8 / 29 (27.59%)
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subjects affected / exposed occurrences (all)1 / 20 (5.00%) 0 / 29 (0.00%) 0Psychiatric disorders Depressive symptom subjects affected / exposed1 / 20 (5.00%) 1 / 20 (5.00%)0 / 29 (0.00%) 0 / 29 (0.00%)Anxiety subjects affected / exposed occurrences (all)1 / 20 (5.00%) 1 / 20 (5.00%)0 / 29 (0.00%) 0 / 29 (0.00%)	Dhiporrhoop		
occurrences (all)10Psychiatric disorders Depressive symptom subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)occurrences (all)10Anxiety subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)		1 / 20 (5.00%)	0 / 29 (0.00%)
Depressive symptom subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)occurrences (all)10Anxiety subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)	occurrences (all)		
Depressive symptom subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)occurrences (all)10Anxiety subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)			_
subjects affected / exposed 1 / 20 (5.00%) 0 / 29 (0.00%) occurrences (all) 1 0 Anxiety 1 / 20 (5.00%) 0 / 29 (0.00%) subjects affected / exposed 1 / 20 (5.00%) 0 / 29 (0.00%)			
occurrences (all)10Anxiety subjects affected / exposed1 / 20 (5.00%)0 / 29 (0.00%)		1 / 20 (5.00%)	0 / 29 (0.00%)
Anxiety subjects affected / exposed 1 / 20 (5.00%) 0 / 29 (0.00%)			
subjects affected / exposed 1 / 20 (5.00%) 0 / 29 (0.00%)			-
	•	1 (20 (5 00%)	
		1	U

Insomnia			
subjects affected / exposed	3 / 20 (15.00%)	0 / 29 (0.00%)	
occurrences (all)	3	0	
Investigations			
Aspartate aminotransferase increased			
subjects affected / exposed	3 / 20 (15.00%)	2 / 29 (6.90%)	
occurrences (all)	3	2	
Platelet count decreased			
subjects affected / exposed	2 / 20 (10.00%)	2 / 29 (6.90%)	
occurrences (all)	2	3	
Weight decreased			
subjects affected / exposed	1 / 20 (5.00%)	3 / 29 (10.34%)	
occurrences (all)	1	3	
Alanine aminotransferase increased			
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)	
occurrences (all)	1	1	
Blood alkaline phosphatase increased			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Blood bilirubin increased			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Lymphocyte count decreased			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
White blood cell count decreased			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
Injury, poisoning and procedural			
complications Infusion related reaction			
subjects affected / exposed	4 / 20 (20.00%)	3 / 29 (10.34%)	
occurrences (all)	4	3	
Skin Wound			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
Cardiac disorders			
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Sinus tachycardia subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)	
occurrences (all)	1	1	
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Vervous system disorders Neuropathy peripheral			
subjects affected / exposed	1 / 20 (5.00%)	4 / 29 (13.79%)	
occurrences (all)	2	5	
	2	5	
Headache			
subjects affected / exposed	1 / 20 (5.00%)	3 / 29 (10.34%)	
occurrences (all)	1	4	
Cerebrovascular accident			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Dizziness			
subjects affected / exposed	2 / 20 (10.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
Paraesthesia			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Sciatica subjects affected / exposed	1 ()0 (E 00%)		
occurrences (all)	1 / 20 (5.00%)	0 / 29 (0.00%)	
	1	0	
Blood and lymphatic system disorders			
Anaemia			
subjects affected / exposed	3 / 20 (15.00%)	1 / 29 (3.45%)	
occurrences (all)	3	1	
Leukocytosis			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Thrombocytopenia			
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)	
occurrences (all)	1	1	
Gastrointestinal disorders			
Nausea			
subjects affected / exposed	3 / 20 (15.00%)	6 / 29 (20.69%)	
occurrences (all)	6	8	
Vomiting			

subjects affected / exposed	2 / 20 (10.00%)	3 / 29 (10.34%)	
occurrences (all)	4	6	
Dry mouth			
Dry mouth subjects affected / exposed	0 / 20 (0.00%)	4 / 29 (13.79%)	
occurrences (all)	0	4	
	Ŭ	·	
Constipation			
subjects affected / exposed	3 / 20 (15.00%)	1 / 29 (3.45%)	
occurrences (all)	3	1	
Diarrhoea			
subjects affected / exposed	2 / 20 (10.00%)	2 / 29 (6.90%)	
occurrences (all)	2	2	
Dyspepsia			
subjects affected / exposed	2 / 20 (10.00%)	1 / 29 (3.45%)	
occurrences (all)	2	1	
Abdominal pain			
subjects affected / exposed	1 / 20 (5.00%)	2 / 29 (6.90%)	
occurrences (all)	1	3	
Abdominal pain upper subjects affected / exposed	2 / 20 (10.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
	_		
Mouth ulceration subjects affected / exposed	1 (00 (5 00))		
occurrences (all)	1 / 20 (5.00%)	0 / 29 (0.00%)	
	2	0	
Stomatitis			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Odynophagia			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Skin and subcutaneous tissue disorders			
Pruritus			
subjects affected / exposed	2 / 20 (10.00%)	2 / 29 (6.90%)	
occurrences (all)	3	2	
Rash maculo-papular			
subjects affected / exposed	3 / 20 (15.00%)	0 / 29 (0.00%)	
occurrences (all)	3	0	

Dermatitis acneiform		
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)
occurrences (all)	1	0
_		
Eczema subjects affected / exposed		
	1 / 20 (5.00%)	0 / 29 (0.00%)
occurrences (all)	1	0
Hyperhidrosis		
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)
occurrences (all)	1	0
		C .
Petechiae		
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)
occurrences (all)	1	0
Alopecia		
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)
occurrences (all)	1	
	I	0
Onychoclasis		
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)
occurrences (all)	1	1
Musculoskeletal and connective tissue disorders		
Arthralgia		
subjects affected / exposed	4 / 20 (20.00%)	4 / 29 (13.79%)
occurrences (all)	6	4
Muscle spasms subjects affected / exposed	2 (20 (10 00%)	
	2 / 20 (10.00%)	1 / 29 (3.45%)
occurrences (all)	2	1
Muscular weakness		
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)
occurrences (all)	1	1
Musculoskeletal chest pain		
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)
occurrences (all)	1	1
Musculoskeletal pain		
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)
occurrences (all)	1	1
Myalgia		

subjects affected / exposed	0 / 20 (0.00%)	2 / 29 (6.90%)	
occurrences (all)	0	2	
Bone Pain			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Pain in Extremity			
subjects affected / exposed	1 / 20 (5.00%)	1 / 29 (3.45%)	
occurrences (all)	1	1	
Infections and infestations			
Respiratory tract infection			
subjects affected / exposed	0 / 20 (0.00%)	3 / 29 (10.34%)	
occurrences (all)	0	4	
Urinary tract infection			
subjects affected / exposed	2 / 20 (10.00%)	1 / 29 (3.45%)	
occurrences (all)			
	7	3	
Pneumonia			
subjects affected / exposed	2 / 20 (10.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
Paronychia			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	2	0	
Viral Upper Respiratory Tract			
Infection			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	0	
Metabolism and nutrition disorders			
Decreased appetite			
subjects affected / exposed	3 / 20 (15.00%)	10 / 29 (34.48%)	
occurrences (all)	3	10	
Hypokalaemia			
subjects affected / exposed	2 / 20 (10.00%)	2 / 29 (6.90%)	
occurrences (all)	2	2	
Hypomagnesaemia			
subjects affected / exposed	1 / 20 (5.00%)	0 / 29 (0.00%)	
occurrences (all)	1	О	
Hyperglycaemia			
	•		•

subjects affected / exposed occurrences (all)	0 / 20 (0.00%) 0	2 / 29 (6.90%) 2	
Hypophosphataemia subjects affected / exposed occurrences (all)	1 / 20 (5.00%) 1	0 / 29 (0.00%) 0	
Iron Deficiency subjects affected / exposed occurrences (all)	1 / 20 (5.00%) 1	2 / 29 (6.90%) 2	

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? No

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported