Clinical trial results:
Nab-paclitaxel (Abraxane) Plus Gemcitabine in Subjects With Locally Advanced Pancreatic Cancer (LAPC): An International, Open-label, Multi-center, Phase 2 Study (LAPACT).

Summary

EudraCT number	2014-001408-23
Trial protocol	IT ES
Global end of trial date	21 November 2017

Results information

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

Trial information

Trial identification

Sponsor protocol code	ABI-007-PANC-007

Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02301143
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Celgene Corporation
Sponsor organisation address	86 Morris Avenue, Summit, United States, 07901
Public contact	Clinical Trial Disclosure, Celgene Corporation, 01 888-260-1599, ClinicalTrialDisclosure@Celgene.com
Scientific contact	Teng Jin Ong, Celgene Corporation, 01 908-673-9586, TOng@Celgene.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	28 January 2018
Is this the analysis of the primary completion data?	Yes
Primary completion date	21 November 2017
Global end of trial reached?	Yes
Global end of trial date	21 November 2017
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

To evaluate the time to treatment failure (TTF) in locally advanced pancreatic cancer (LAPC) subjects treated with nab-paclitaxel plus gemcitabine as induction therapy followed by Investigator's Choice of treatment

Protection of trial subjects:

Patient Confidentiality, Personal Data Protection, Archiving of Essential Documents

Background therapy:

Six cycles of nab-Paclitaxel 125 mg/m2 intravenous (IV) infusion over approximately 30 to 45 minutes on Days 1, 8, and 15, followed by gemcitabine 1000 mg/m2 IV infusion over approximately 30 minutes on Days 1, 8, and 15 of each 28-day cycle were administered as induction therapy.

Once six cycles have been completed, subjects without disease progression or unacceptable toxicity will be eligible for Investigator choice phase, consisting of continuation of nab-paclitaxel and gemcitabine therapy, or chemoradiation therapy, or surgery.

Evidence for comparator: -

Actual start date of recruitment	21 April 2015
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	United States: 45
Country: Number of subjects enrolled	France: 28
Country: Number of subjects enrolled	Spain: 20
Country: Number of subjects enrolled	Canada: 8
Country: Number of subjects enrolled	Italy: 6
Worldwide total number of subjects	107
EEA total number of subjects	54

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)	44
From 65 to 84 years	62
85 years and over	1

Subject disposition

Recruitment

Recruitment details:

152 patients were screened and 107 participants enrolled. First subject first visit was 21 April 2015. Last subject last visit was 26 April 2018

Pre-assignment

Screening details:

Subjects eligible for treatment with nab-paclitaxel and gemcitabine for 6 cycles were to be enrolled, provided all inclusion/exclusion criteria were met within a 14day Screening Period prior to Cycle 1 Day 1.

Period 1

Period 1 title	Induction Period
Is this the baseline period?	Yes
Allocation method	Not applicable
Blinding used	Not blinded

Arms

Arm title	nab-Paclitaxel plus Gemcitabine

Arm description:

Participants received nab-Paclitaxel 125 mg/m^2 by intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine (Gem) 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1, 8, and 15 of each 28-day cycle for 6 cycles. For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period.

Arm type	Experimental
Investigational medicinal product name	nab-Paclitaxel
Investigational medicinal product code	
Other name	Abraxane
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

nab-Paclitaxel 125 mg/m^2 by intravenous (IV) administration over approximately 30 to 45 minutes on Days 1, 8, and 15.

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

Dosage and administration details:

Gemcitabine 1000 mg/m^2 by IV administration over approximately 30 minutes on Days 1, 8, and 15

Number of subjects in period 1	nab-Paclitaxel plus Gemcitabine
Started	107
Completed	62
Not completed	45
Adverse event, serious fatal	1

Consent withdrawn by subject	3
Physician decision	4
Adverse event, non-fatal	22
Progressive Disease	8
Enrolled But Not Treated	1
Not Specified	1
Symptomatic Deterioration	2
Noncompliance With Study Drug	1
Protocol deviation	2

Period 2

Period 2 title	Investigator's Choice (IC)
Is this the baseline period?	No
Allocation method	Non-randomised - controlled
Blinding used	Not blinded

Arms

Arm title	Investigator Choice (Overall)

Arm description:

For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period. Investigator Choice includes 3 options: 1. Continued on nab-Paclitaxel and gemcitabine (included 12 subjects) 2. Chemoradiation therapy consisting of capecitabine or gemcitabine with radiation according to institutional practice (included 18 subjects) 3. Surgical Intervention (included 17 subjects)

Arm type	Experimental
Investigational medicinal product name	nab-Paclitaxel
Investigational medicinal product code	
Other name	Abraxane
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

nab-Paclitaxel 125 mg/m^2 by intravenous (IV) administration over approximately 30 to 45 minutes on Days 1, 8, and 15 until disease progression or unacceptable toxicity.

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

Dosage and administration details:

Gemcitabine 1000 mg/m^2 by IV administration over approximately 30 minutes on Days 1, 8, and 15 disease progression or unacceptable toxicity.

Number of subjects in period 2[1]	Investigator Choice (Overall)
Started	47
Completed	37
Not completed	10
Adverse event, non-fatal	3
Progressive Disease	3
Not Specified	1
Unresectable Surgery	1
Symptomatic Deterioration	1
Noncompliance With Study Drug	1

Notes:

[1] - The number of subjects starting the period is not consistent with the number completing the preceding period. It is expected the number of subjects starting the subsequent period will be the same as the number completing the preceding period.
Justification: Not all 62 subjects who completed the induction period elected to be treated in the Investigator's Choice period of the study. Only 49 intended to start the Investigator's Choice period. Of these 47 started this period and two subjects who were chosen for surgery did not have surgery because of disease progression and unsuitability based on the assessment by the GI surgeon.

Baseline characteristics

Reporting groups	
Reporting group title	nab-Paclitaxel plus Gemcitabine
Reporting group description:	
Participants received nab-Paclitaxel 125 mg/m^2 by intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine (Gem) 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1, 8, and 15 of each 28-day cycle for 6 cycles. For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period.	

Reporting group values	nab-Paclitaxel plus Gemcitabine	Total	
Number of subjects	107	107	
Age, Customized Units: Subjects			
<65 years	44	44	
>=65 - 75 years	50	50	
>75 years	13	13	
Age Continuous Units: years			
median	65.0		
full range (min-max)	42 to 85	-	
Sex: Female, Male Units: Subjects			
Female	59	59	
Male	48	48	
Ethnicity (NIH/OMB) Units: Subjects			
Hispanic or Latino	1	1	
Not Hispanic or Latino	78	78	
Unknown or Not Reported	28	28	
Race (NIH/OMB) Units: Subjects			
American Indian or Alaska Native	0	0	
Asian	3	3	
Native Hawaiian or Other Pacific Islander	0	0	
Black or African American	2	2	
White	72	72	
More than one race	0	0	
Unknown or Not Reported	30	30	
Eastern Cooperative Oncology Group (ECOG) Performance Status			
ECOG performance status assesses how the disease affects the daily living activities of the participant and helps determine appropriate treatment and prognosis. - 0 = Fully Active (Most Favorable Activity); - 1 = Restricted activity but ambulatory; - 2 = Ambulatory but unable to carry out work activities; - 3 = Limited Self-Care; - 4 = Completely Disabled.			
Units: Subjects			
Grade 0	50	50	
Grade 1	57	57	

Grade 2	0	0	
Grade 3	0	0	
Grade 4	0	0	
Physician Assessment of Peripheral Neuropathy			
Physician assessment for grading of peripheral neuropathy in participants receiving chemotherapy according to National Cancer Institute Common Toxicity Criteria (NCICTC): Grade 0 = None or no neuromotor or neurosensory loss; Grade 1 = Asymptomatic: loss of deep tendon reflexes or paresthesia; - Grade 2 = Moderate symptoms: limiting instrumental Activities of Daily Living (ADLs); - Grade 3 = Severe symptoms: limiting self-care ADL; assistance device indicated; - Grade 4 = Life-threatening consequences: urgent intervention indicated.			
Units: Subjects			
Grade 0	101	101	
Grade 1	6	6	
Grade 2	0	0	
Grade 3	0	0	
Grade 4	0	0	
Baseline Neutrophil - to - Lymphocyte Ratio (NLR)			
Neutrophil to lymphocyte ratio (NLR) is used as a marker of subclinical inflammation. Increased NLR is associated with poor prognosis in advanced pancreatic cancer.			
Units: Subjects			
<= 5	91	91	
> 5	14	14	
Missing	2	2	
Baseline Albumin			
Units: g/L			
median	39.0		
full range (min-max)	28 to 50	-	
Carbohydrate Antigen 19-9 (CA19-9)			
Serum CA 19-9 concentrations may be elevated in patients with gastrointestinal malignancies such as pancreatic cancer. Measure Analysis Population Description: Baseline CA19-9 measures are missing for six participants.			
Units: U/mL			
median	243.3		
full range (min-max)	0 to 20741	-	
Sum of Longest Diameter of Target Lesions			
Units: mm			
median	44.0		
full range (min-max)	17 to 130	-	
Number of Target Lesions			
Units: lesions			
median	1.0		
full range (min-max)	1 to 3	-	
Time from Primary Diagnosis to First Dose			
Units: days			
median	27.0		
full range (min-max)	4 to 95	-	

Subject analysis sets

Subject analysis set title	Nab-Paclitaxel Plus Gemcitabine
Subject analysis set type	Intention-to-treat

Subject analysis set description:

nab-Paclitaxel 125 mg/m^2 intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1,8, and 15 of each 28-day cycle. For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period. - Continuation of nab-paclitaxel and gemcitabine therapy to disease progression or unacceptable toxicity OR - Chemoradiation therapy consisting of the concurrent use of capecitabine or gemcitabine with radiation according to institutional practice (included 18 subjects) OR - Surgical intervention (included 17 subjects)

Reporting group values	Nab-Paclitaxel Plus Gemcitabine		
Number of subjects	107		
Age, Customized Units: Subjects			
<65 years	44		
>=65 - 75 years	50		
>75 years	13		
Age Continuous Units: years			
median	65.0		
full range (min-max)	42 to 85		
Sex: Female, Male Units: Subjects			
Female	59		
Male	48		
Ethnicity (NIH/OMB) Units: Subjects			
Hispanic or Latino	1		
Not Hispanic or Latino	78		
Unknown or Not Reported	28		
Race (NIH/OMB) Units: Subjects			
American Indian or Alaska Native	0		
Asian	3		
Native Hawaiian or Other Pacific Islander	0		
Black or African American	2		
White	72		
More than one race	0		
Unknown or Not Reported	30		
Eastern Cooperative Oncology Group (ECOG) Performance Status			
ECOG performance status assesses how the disease affects the daily living activities of the participant and helps determine appropriate treatment and prognosis. - 0 = Fully Active (Most Favorable Activity); - 1 = Restricted activity but ambulatory; - 2 = Ambulatory but unable to carry out work activities; - 3 = Limited Self-Care; - 4 = Completely Disabled.			
Units: Subjects			
Grade 0	50		
Grade 1	57		
Grade 2	0		
Grade 3	0		
Grade 4	0		
Physician Assessment of Peripheral Neuropathy			
Physician assessment for grading of peripheral neuropathy in participants receiving chemotherapy			

according to National Cancer Institute Common Toxicity Criteria (NCICTC): Grade 0 = None or no neuromotor or neurosensory loss; Grade 1 = Asymptomatic: loss of deep tendon reflexes or paresthesia; - Grade 2 = Moderate symptoms: limiting instrumental Activities of Daily Living (ADLs); - Grade 3 = Severe symptoms: limiting self-care ADL; assistance device indicated; - Grade 4 = Life-threatening consequences: urgent intervention indicated.			
Units: Subjects			
Grade 0	101		
Grade 1	6		
Grade 2	0		
Grade 3	0		
Grade 4	0		
Baseline Neutrophil - to - Lymphocyte Ratio (NLR)			
Neutrophil to lymphocyte ratio (NLR) is used as a marker of subclinical inflammation. Increased NLR is associated with poor prognosis in advanced pancreatic cancer.			
Units: Subjects			
<= 5	91		
> 5	14		
Missing	2		
Baseline Albumin			
Units: g/L			
median	39.0		
full range (min-max)	28 to 50		
Carbohydrate Antigen 19-9 (CA19-9)			
Serum CA 19-9 concentrations may be elevated in patients with gastrointestinal malignancies such as pancreatic cancer. Measure Analysis Population Description: Baseline CA19-9 measures are missing for six participants.			
Units: U/mL			
median	243.3		
full range (min-max)	0 to 20741		
Sum of Longest Diameter of Target Lesions			
Units: mm			
median	44.0		
full range (min-max)	17 to 130		
Number of Target Lesions			
Units: lesions			
median	1.0		
full range (min-max)	1 to 3		
Time from Primary Diagnosis to First Dose			
Units: days			
median	27.0		
full range (min-max)	4 to 95		

End points

End points reporting groups

Reporting group title	nab-Paclitaxel plus Gemcitabine

Reporting group description:

Participants received nab-Paclitaxel 125 mg/m^2 by intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine (Gem) 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1, 8, and 15 of each 28-day cycle for 6 cycles. For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period.

Reporting group title	Investigator Choice (Overall)

Reporting group description:

For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period. Investigator Choice includes 3 options: 1. Continued on nab-Paclitaxel and gemcitabine (included 12 subjects) 2. Chemoradiation therapy consisting of capecitabine or gemcitabine with radiation according to institutional practice (included 18 subjects) 3. Surgical Intervention (included 17 subjects)

Subject analysis set title	Nab-Paclitaxel Plus Gemcitabine
Subject analysis set type	Intention-to-treat

Subject analysis set description:

nab-Paclitaxel 125 mg/m^2 intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1,8, and 15 of each 28-day cycle. For participants who completed 6 cycles of nab-paclitaxel and gemcitabine without disease progression or unacceptable toxicities, the Investigator then determined the best option for the participant in the Investigator's Choice Period. - Continuation of nab-paclitaxel and gemcitabine therapy to disease progression or unacceptable toxicity OR - Chemoradiation therapy consisting of the concurrent use of capecitabine or gemcitabine with radiation according to institutional practice (included 18 subjects) OR - Surgical intervention (included 17 subjects)

Primary: Kaplan-Meier Estimates for Time to Treatment Failure (TTF)

End point title	Kaplan-Meier Estimates for Time to Treatment Failure (TTF)[1]

End point description:

TTF was defined as the time after the first dose of study therapy to discontinuation of study therapy due to disease progression, death by any cause, or the start of a new non-protocol-defined anticancer therapy/surgery. If a subject does not progress, die or start a new non-protocol-defined anticancer therapy, the subject was censored on the last tumor assessment date.
Tumor evaluations of CT or MRI scans were assessed and response determined according to Response Evaluation Criteria in Solid Tumors (RECIST) guidelines, version 1.1.
The definition for progressive disease (PD) was >= 20% increase in the sum of diameters of target lesions from nadir, and the sum showed an absolute increase of >= 5 mm; the progression of a non-target lesion or the appearance of any new lesions is also considered progression.
Median and its 90% confidence interval (CI) of TTF were estimated using the method of Brookmeyer and Crowley.
Intent to Treat population = all subjects enrolled into the study.

End point type	Primary

End point timeframe:

Day 1 of study treatment up to 28.75 months; (maximum time for the last tumor assessment)

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: The primary goal of this study was to evaluate time to treatment failure (primary endpoint) with nab-paclitaxel plus gemcitabine as induction therapy. Therefore there was no statistical comparison to be made. Treatment choices in period 2 (investigator's choice period) were non-randomized and no comparisons were intended there either.

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	107			
Units: months				
median (confidence interval 90%)	9.0 (7.26 to 10.05)			

Statistical analyses

No statistical analyses for this end point

Secondary: Disease Control Rate (DCR): Percentage of Participants With Complete (CR) or Partial Response (PR), or Stable Disease (SD) for ≥ 16 Weeks According to RECIST Version 1.1

End point title	Disease Control Rate (DCR): Percentage of Participants With Complete (CR) or Partial Response (PR), or Stable Disease (SD) for ≥ 16 Weeks According to RECIST Version 1.1

End point description:

DCR was defined as the percentage of participants with a CR or PR or SD from of date of first treatment to 16 weeks. Tumor assessments after start of non-protocol-defined anticancer therapy were excluded. RECIST 1.1 Definition: - CR: disappearance of all target and non-target lesions; any pathological lymph nodes (target or non-target) must have reduction in short axis to < 10 mm and no new lesions diagnosed. - PR: a >= 30% decrease in the sum of diameters of target lesions from baseline; no evidence of progression in any of the non-target lesions diagnosed at baseline; and no new lesions diagnosed. - SD: neither sufficient shrinkage to qualify for PR nor sufficient increase of lesions to qualify for PD. The two-sided 90% binomial confidence intervals (CIs) were estimated by Wilson score method. Intent to treat population was defined as all participants enrolled into the study. Intent to treat population was defined as all participants enrolled into the study.

End point type	Secondary

End point timeframe:

Day 1 of study treatment up to the end of investigator choice period plus 28 days; up to 76.9 weeks

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	107			
Units: percentage of participants				
number (confidence interval 90%)	77.6 (70.3 to 83.5)			

Statistical analyses

No statistical analyses for this end point

Secondary: Overall Response Rate (ORR): Percentage of Participants With Complete (CR) or Partial Response (PR) According to RECIST Version 1.1

End point title	Overall Response Rate (ORR): Percentage of Participants With Complete (CR) or Partial Response (PR) According to RECIST Version 1.1

End point description:

ORR was defined as the percentage of participants that achieved a combined incidence of complete (CR) and partial response (PR) using RECIST 1.1 guidelines as assessed by the investigator at baseline, every 56 (-3/+7 days) and at the 28-day follow-up visit . Assessments after new non-protocol-defined anticancer therapy are excluded. For participants who had resectable surgery in Investigator Choice period, assessments after surgical intervention are excluded. RECIST 1.1 Definition: - CR: disappearance of all target and non-target lesions; any pathological lymph nodes (target or non-target) must have reduction in short axis to < 10 mm and no new lesions diagnosed. - PR: a >= 30% decrease in the sum of diameters of target lesions from baseline; no evidence of progression in any of the non-target lesions diagnosed at baseline; and no new lesions diagnosed. Intent to treat population was defined as all participants enrolled into the study.

End point type	Secondary

End point timeframe:

Day 1 of study treatment up to the end of investigator choice period plus 28 days; up to 76.9 weeks

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	107			
Units: percentage of participants				
number (confidence interval 90%)	39.3 (31.8 to 47.2)			

Statistical analyses

No statistical analyses for this end point

Secondary: Kaplan-Meier Estimate of Progression-Free Survival (PFS)

End point title	Kaplan-Meier Estimate of Progression-Free Survival (PFS)

End point description:

Progression-free Survival was determined based on RECIST 1.1. criteria and was defined as the time from the date of the first dose to the date of disease progression or death (by any cause), whichever is earlier. The analysis day was calculated from enrollment date for one participant who was not treated. Participants who have no disease progression or have not died were censored to last tumor assessment date with progression-free. The definition for progressive disease (PD) was at least a 20% increase in the sum of diameters of target lesions from nadir; the sum must also demonstrate an absolute increase of >= 5 mm; the progression of a non-target lesion or the appearance of any new lesions is also considered progression. Median and its 90% confidence interval of PFS were estimated using the method of Brookmeyer and Crowley. Intent to treat population was defined as all participants enrolled into the study.

End point type	Secondary

End point timeframe:

Day 1 of study treatment up to 28.75 months (maximum time for the last tumor assessment)

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	107			
Units: months				
median (confidence interval 90%)	10.9 (9.26 to 11.63)			

Statistical analyses

No statistical analyses for this end point

Secondary: Kaplan-Meier Estimates for Overall Survival (OS)

End point title	Kaplan-Meier Estimates for Overall Survival (OS)

End point description:

Overall survival was defined as the time from the date of first dose of study therapy to the date of death (by any cause). Participants who were alive at the end of study or clinical data cut were censored on the last known time that the participant was alive or the clinical cutoff date, whichever was earlier. Median and its 90% confidence interval of OS were estimated using the method of Brookmeyer and Crowley. Intent to treat population was defined as all participants enrolled into the study.

End point type	Secondary

End point timeframe:

Day 1 of study treatment up to 31.34 months (maximum time for survival follow-up)

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	107			
Units: months				
median (confidence interval 90%)	18.8 (14.95 to 24.02)			

Statistical analyses

No statistical analyses for this end point

Secondary: Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire (EORTC QLQ-C30): Global Health Status and 5 Functioning Scales

End point title	Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire (EORTC QLQ-C30): Global Health Status and 5 Functioning Scales

End point description:

The European Organization for Research and Treatment of Cancer Quality-of-Life questionnaire (EORTC QLQ-C30) is a validated health-related quality of life (HRQoL) measure. The EORTC QLQ-C30 is composed of both multi-item scales and single-item measures, including 5 functional scales, 3 symptom

scales, 6 single symptom items, and 1 global health status / quality of life scale. All reported measures are transformed to a 0 - 100 scale. In the Global Health Status and 5 functional scales, 0 = worst possible quality of life/health status and 100 = best possible quality of life/health status. The best score on treatment is the best score from all post-baseline visits and is compared to the baseline to get the following responder categories. Responder categories: - Improved: >=10 increase from baseline - Stable: neither increase nor decrease >10 - Worsened: >=10 decrease from baseline. ITT population = all participants enrolled into the study with both baseline and post baseline values.

End point type	Secondary

End point timeframe:

Baseline (Day -1), Day 1 of each cycle, for up to 19 cycles each cycle consisting of 28 days and the 28-day follow-up visit

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	95			
Units: Participants				
Global Health Status: Improved	43			
Global Health Status: Stable	34			
Global Health Status: Worsened	18			
Physical Functioning Scale: Improved	20			
Physical Functioning Scale: Stable	66			
Physical Functioning Scale: Worsened	9			
Role Functioning Scale: Improved	36			
Role Functioning Scale: Stable	46			
Role Functioning Scale: Worsened	13			
Emotional Functioning Scale: Improved	50			
Emotional Functioning Scale: Stable	40			
Emotional Functioning Scale: Worsened	5			
Cognitive Functioning Scale: Improved	33			
Cognitive Functioning Scale: Stable	51			
Cognitive Functioning Scale: Worsened	11			
Social Functioning Scale: Improved	38			
Social Functioning Scale: Stable	43			
Social Functioning Scale: Worsened	14			

Statistical analyses

No statistical analyses for this end point

Secondary: Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire (EORTC QLQ-C30): Symptom Scales and Single Symptom Items

End point title	Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire (EORTC QLQ-C30): Symptom Scales and Single Symptom Items

End point description:

The European Organization for Research and Treatment of Cancer Quality-of-Life questionnaire (EORTC

QLQ-C30) is a validated health-related quality of life (HRQoL) measure. The EORTC QLQ-C30 is composed of both multi-item scales and single-item measures, including 5 functional scales, 3 symptom scales, 6 single symptom items, and 1 global health status / quality of life scale. All reported measures are transformed to a 0 to 100 scale. In the symptom scales and single symptom items, 0 = optimal health state and 100 = worst possible health state. The best score on treatment is the best score from all post-baseline visits and is compared to the baseline to get the following responder categories. Responder categories: - Improved: >=10 decrease from baseline - Stable: neither increase nor decrease >10 - Worsened: >=10 increase from baseline. ITT population = all participants enrolled into the study with both baseline and post baseline values.

End point type	Secondary

End point timeframe:

Baseline (Day -1), Day 1 of each cycle, for up to 19 cycles each cycle consisting of 28 days and the 28-day follow-up visit

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	95			
Units: Participants				
Symptom Scale-Fatigue: Improved	46			
Symptom Scale-Fatigue: Stable	24			
Symptom Scale-Fatigue: Worsened	25			
Scale-Nausea+Vomiting: Improved	29			
Scale-Nausea+Vomiting: Stable	64			
Scale-Nausea+Vomiting: Worsened	2			
Symptom Scale-Pain: Improved	62			
Symptom Scale-Pain: Stable	29			
Symptom Scale-Pain: Worsened	4			
Symptom - Dyspnoea: Improved	12			
Symptom - Dyspnoea: Stable	74			
Symptom - Dyspnoea: Worsened	9			
Symptom - Insomnia: Improved	53			
Symptom - Insomnia: Stable	35			
Symptom - Insomnia: Worsened	7			
Symptom - Appetite loss: Improved	48			
Symptom - Appetite loss: Stable	39			
Symptom - Appetite loss: Worsened	8			
Symptom - Constipation: Improved	46			
Symptom - Constipation: Stable	45			
Symptom - Constipation: Worsened	4			
Symptom - Diarrhoea: Improved	18			
Symptom - Diarrhoea: Stable	69			
Symptom - Diarrhoea: Worsened	8			
Symptom - Financial difficulties: Improved	17			
Symptom - Financial difficulties: stable:	74			
Symptom - Financial difficulties: Worsened	4			

Statistical analyses

No statistical analyses for this end point

Secondary: Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire For Pancreatic Cancer (EORTC-QLQ PAN26): Six Summary Scales

End point title	Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire For Pancreatic Cancer (EORTC-QLQ PAN26): Six Summary Scales

End point description:

The EORTC pancreatic cancer module is a validated tool intended for patients at all disease stages undergoing surgical resection, palliative surgical intervention, endoscopic palliation or palliative chemotherapy. The module includes 26 questions, organized into 7 scales and 10 individual item scores. All reported measures are transformed to a 0 to 100 scale. Six summary scales reported are: - Pancreatic Pain - Digestive Symptoms - Altered Bowel Habits - Hepatic Scale - Body Image - Sexuality Scores of 0 = optimal health state and 100 = worst possible health state. The best score on treatment is the best score from all post-baseline visits and is compared to the baseline. Responder categories: - Improved: >=MID decrease from baseline - Stable: no increase or decrease >MID - Worsened: >=MID increase from baseline MID = half the baseline standard deviation. Intent to treat population was defined as all participants enrolled into the study with both baseline and post baseline values.

End point type	Secondary

End point timeframe:

Baseline (Day -1), Day 1 of each cycle, for up to 19 cycles each cycle consisting of 28 days and the 28-day follow-up visit

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	95			
Units: Participants				
Pancreatic Pain Scale: Improved	62			
Pancreatic Pain Scale: Stable	33			
Pancreatic Pain Scale: Worsened	0			
Digestive Symptom Scale: Improved	49			
Digestive Symptom Scale: Stable	36			
Digestive Symptom Scale: Worsened	10			
Altered Bowel Habits Scale: Improved	28			
Altered Bowel Habits Scale: Stable	53			
Altered Bowel Habits Scale: Worsened	14			
Hepatic Scale: Improved	25			
Hepatic Scale: Stable	66			
Hepatic Scale: Worsened	4			
Body Image Scale: Improved	22			
Body Image Scale: Stable	50			
Body Image Scale: Worsened	23			
Sexuality Scale: Improved	31			
Sexuality Scale: Stable	51			
Sexuality Scale: Worsened	13			

Statistical analyses

No statistical analyses for this end point

Secondary: Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire For Pancreatic Cancer (EORTC-QLQ PAN26): Satisfaction with Health Care Scale

End point title	Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire For Pancreatic Cancer (EORTC-QLQ PAN26): Satisfaction with Health Care Scale

End point description:

The EORTC pancreatic cancer module is a validated tool intended for patients at all disease stages undergoing surgical resection, palliative surgical intervention, endoscopic palliation or palliative chemotherapy. The module includes 26 questions, organized into 7 scales and 10 individual item scores. The summary scale for Satisfaction with Health Care is reported. All reported measures are transformed to a 0 to 100 scale. Scores of 0 = not satisfied, worst possible health state and 100 = extremely satisfied, best possible health state. The best score on treatment is the best score from all post-baseline visits and is compared to the baseline to get the following responder categories. Responder categories: - Improved: >=MID increase from baseline - Stable: no increase or decrease >MID - Worsened: >=MID decrease from baseline MID = half the baseline standard deviation. ITT population = all participants enrolled into the study with both baseline and post baseline values.

End point type	Secondary

End point timeframe:

Baseline (Day -1), Day 1 of each cycle, for up to 19 cycles each cycle consisting of 28 days and the 28-day follow-up visit

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	95			
Units: Participants				
Satisfaction with Health Care Scale: Improved	42			
Satisfaction with Health Care Scale: Stable	40			
Satisfaction with Health Care Scale: Worsened	13			

Statistical analyses

No statistical analyses for this end point

Secondary: Participant Counts in Response Categories Using the European

Organization for Research and Treatment of Cancer Quality of Life Questionnaire For Pancreatic Cancer (EORTC-QLQ PAN26): 10 Individual Item Scores

End point title	Participant Counts in Response Categories Using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire For Pancreatic Cancer (EORTC-QLQ PAN26): 10 Individual Item Scores

End point description:

The EORTC pancreatic cancer module is a validated tool intended for patients at all disease stages undergoing surgical resection, palliative surgical intervention, endoscopic palliation or palliative chemotherapy. The module includes 26 questions, organized into 7 scales and 10 individual item scores. The 10 individual item scores are reported. All reported measures are transformed to a 0 to 100 scale. Scores of 0 = best possible health state and 100 = worst possible health state. The best score on treatment is the best score from all post-baseline visits and is compared to the baseline to get the following responder categories. Responder categories: - Improved: >=MID decrease from baseline - Stable: no increase or decrease >MID - Worsened: >=MID increase from baseline MID = half the baseline standard deviation. Intent to treat population was defined as all participants enrolled into the study with both baseline and post baseline values.

End point type	Secondary

End point timeframe:

Baseline (Day -1), Day 1 of each cycle, for up to 19 cycles each cycle consisting of 28 days and the 28-day follow-up visit

End point values	Nab-Paclitaxel Plus Gemcitabine			
Subject group type	Subject analysis set			
Number of subjects analysed	95			
Units: Participants				
Abdominal Bloating: Improved	50			
Abdominal Bloating: Stable	42			
Abdominal Bloating: Worsened	3			
Taste Changes: Improved	20			
Taste Changes: Stable	54			
Taste Changes: Worsened	21			
Indigestion: Improved	41			
Indigestion: Stable	47			
Indigestion: Worsened	7			
Flatulence: Improved	47			
Flatulence: Stable	37			
Flatulence: Worsened	11			
Weight Loss: Improved	36			
Weight Loss: Stable	56			
Weight Loss: Worsened	3			
Limb Weakness: Improved	22			
Limb Weakness: Stable	55			
Limb Weakness: Worsened	18			
Dry Mouth: Improved	37			
Dry Mouth: Stable	45			
Dry Mouth: Worsened	13			
Treatment Side-Effects: Improved	8			
Treatment Side-Effects: Stable	48			
Treatment Side-Effects: Worsened	39			
Worry About Future Health: Improved	42			

Worry About Future Health: Stable	45			
Worry About Future Health: Worsened	8			
Limits on Activity Planning: Improved	42			
Limits on Activity Planning: Stable	42			
Limits on Activity Planning: Worsened	11			

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Participants with Treatment Emergent Adverse Events (TEAEs)

End point title	Number of Participants with Treatment Emergent Adverse Events (TEAEs)

End point description:

TEAEs are defined as any adverse event (AE) that begin or worsen on or after the start of study drug or procedure of the study period through the maximum duration of the period plus 28 days. The severity of AEs was graded based on National Cancer Institute Common Terminology Criteria for Adverse Events (CTCAE), Version 4.0 and the scale: Grade 1 = Mild Grade 2 = Moderate Grade 3 = Severe Grade 4 = Life threatening Grade 5 = Death. Relation to study drug was determined by the investigator. A treatment-related TEAE is defined as TEAE which was considered to be related to one or both of the study drugs and reported as 'Suspected' on the case report form. AEs with a missing relationship were treated as 'treatment-related' in data summaries. IP (investigational product) refers to nab-Paclitaxel and/or Gemcitabine. "Related" TEAE refers to relation to study drug (IP). The Treated population consists of all participants who received at least 1 dose of nab-paclitaxel or gemcitabine.

End point type	Secondary

End point timeframe:

Day 1 of study drug up to end of the study; up to 31.3 months

End point values	nab-Paclitaxel plus Gemcitabine	Nab-Paclitaxel Plus Gemcitabine		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	106[2]	106[3]		
Units: Participants				
>= 1 TEAE	105	105		
>=1 related TEAE	102	103		
>=1 TEAE of severity grade 3 or higher	85	90		
>=1 related TEAE of severity grade 3 or higher	72	75		
>=1 serious TEAE	38	39		
>= 1 related serious TEAE	14	14		
>=1 TEAE leading to discontinuation of IP	25	28		
>=1 related TEAE leading to discontinuation of IP	15	18		
>=1 TEAE leading to dose reduction of IP	69	72		
>=1 related TEAE leading to dose reduction of IP	68	71		
>=1 TEAE leading to interruption of IP	66	68		

>=1 related TEAE leading to interruption of IP	48	50		
>= TEAE leading to death	2	2		
>=1 related TEAE leading to death	0	0		

Notes:

[2] - nab-Paclitaxel Plus Gemcitabine in the Induction period

[3] - Overall = nab-pac + Gem in the Induction priod plus a subset who continued regimen in the IC period

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

Day 1 of study drug up to end of the study; up to 31.3 months

Assessment type	Systematic

Dictionary used

Dictionary name	MedDRA
Dictionary version	20.0

Reporting groups

Reporting group title	nab-Paclitaxel plus Gemcitabine (Induction Period)

Reporting group description:

nab-Paclitaxel 125 mg/m^2 intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1, 8, and 15 of each 28-day cycle.

Reporting group title	nab-Paclitaxel plus Gemcitabine (Overall)

Reporting group description:

nab-Paclitaxel 125 mg/m^2 intravenous (IV) infusion administered over approximately 30-45 minutes on Days 1, 8, and 15, followed by gemcitabine 1000 mg/m^2 IV infusion over approximately 30 minutes on Days 1, 8, and 15 of each 28-day cycle. Overall includes nab-Paclitaxel plus Gemcitabine treatment cycles during the Induction Period, as well as the subset of participants who continued the regimen during the Investigator Choice Period.

Serious adverse events	nab-Paclitaxel plus Gemcitabine (Induction Period)	nab-Paclitaxel plus Gemcitabine (Overall)	
Total subjects affected by serious adverse events			
subjects affected / exposed	38 / 106 (35.85%)	39 / 106 (36.79%)	
number of deaths (all causes)	2	2	
number of deaths resulting from adverse events	0	0	
Vascular disorders			
Hypotension			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Jugular vein thrombosis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
General disorders and administration site conditions			
Death			

subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 1	0 / 1	
General physical health deterioration			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Generalised oedema			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Influenza like illness			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Malaise			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyrexia			
subjects affected / exposed	5 / 106 (4.72%)	5 / 106 (4.72%)	
occurrences causally related to treatment / all	3 / 6	3 / 6	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory, thoracic and mediastinal disorders			
Interstitial lung disease			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonitis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pulmonary embolism			

subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Investigations			
Blood bilirubin increased			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Peripancreatic fluid collection			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Spinal compression fracture			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Acute coronary syndrome			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrial fibrillation			
subjects affected / exposed	2 / 106 (1.89%)	2 / 106 (1.89%)	
occurrences causally related to treatment / all	1 / 2	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac arrest			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 1	0 / 1	
Nervous system disorders			
Presyncope			

subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood and lymphatic system disorders			
Febrile neutropenia			
subjects affected / exposed	3 / 106 (2.83%)	3 / 106 (2.83%)	
occurrences causally related to treatment / all	3 / 3	3 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenia			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	2 / 2	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	2 / 106 (1.89%)	2 / 106 (1.89%)	
occurrences causally related to treatment / all	0 / 2	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Constipation			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diarrhoea			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Obstruction gastric			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pancreatitis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vomiting			

subjects affected / exposed	0 / 106 (0.00%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatobiliary disorders			
Cholangitis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cholecystitis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 2	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cholecystitis acute			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatic cirrhosis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Jaundice cholestatic			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal and urinary disorders			
Obstructive uropathy			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations			
Cellulitis			
subjects affected / exposed	2 / 106 (1.89%)	2 / 106 (1.89%)	
occurrences causally related to treatment / all	0 / 2	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	

Clostridium difficile colitis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Escherichia sepsis			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastroenteritis Escherichia coli			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Liver abscess			
subjects affected / exposed	0 / 106 (0.00%)	1 / 106 (0.94%)	
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	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenic sepsis			
subjects affected / exposed	2 / 106 (1.89%)	2 / 106 (1.89%)	
occurrences causally related to treatment / all	2 / 2	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pancreas infection			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Parainfluenzae virus infection			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonia			

subjects affected / exposed	5 / 106 (4.72%)	5 / 106 (4.72%)	
occurrences causally related to treatment / all	2 / 5	2 / 5	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sepsis			
subjects affected / exposed	2 / 106 (1.89%)	2 / 106 (1.89%)	
occurrences causally related to treatment / all	1 / 2	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Metabolism and nutrition disorders			
Dehydration			
subjects affected / exposed	1 / 106 (0.94%)	1 / 106 (0.94%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	

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

Non-serious adverse events	nab-Paclitaxel plus Gemcitabine (Induction Period)	nab-Paclitaxel plus Gemcitabine (Overall)	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	104 / 106 (98.11%)	104 / 106 (98.11%)	
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	21 / 106 (19.81%)	23 / 106 (21.70%)	
occurrences (all)	46	51	
Aspartate aminotransferase increased			
subjects affected / exposed	16 / 106 (15.09%)	17 / 106 (16.04%)	
occurrences (all)	43	46	
Blood alkaline phosphatase increased			
subjects affected / exposed	14 / 106 (13.21%)	16 / 106 (15.09%)	
occurrences (all)	21	26	
Gamma-glutamyltransferase increased			
subjects affected / exposed	6 / 106 (5.66%)	6 / 106 (5.66%)	
occurrences (all)	8	8	
Neutrophil count decreased			

subjects affected / exposed	22 / 106 (20.75%)	23 / 106 (21.70%)	
occurrences (all)	57	67	
Platelet count decreased			
subjects affected / exposed	25 / 106 (23.58%)	27 / 106 (25.47%)	
occurrences (all)	72	85	
Weight decreased			
subjects affected / exposed	12 / 106 (11.32%)	12 / 106 (11.32%)	
occurrences (all)	16	16	
White blood cell count decreased			
subjects affected / exposed	14 / 106 (13.21%)	14 / 106 (13.21%)	
occurrences (all)	40	45	
Vascular disorders			
Hypotension			
subjects affected / exposed	8 / 106 (7.55%)	8 / 106 (7.55%)	
occurrences (all)	10	10	
Nervous system disorders			
Dizziness			
subjects affected / exposed	10 / 106 (9.43%)	12 / 106 (11.32%)	
occurrences (all)	12	14	
Dysgeusia			
subjects affected / exposed	32 / 106 (30.19%)	33 / 106 (31.13%)	
occurrences (all)	38	40	
Headache			
subjects affected / exposed	17 / 106 (16.04%)	17 / 106 (16.04%)	
occurrences (all)	18	19	
Neuropathy peripheral			
subjects affected / exposed	23 / 106 (21.70%)	25 / 106 (23.58%)	
occurrences (all)	37	41	
Paraesthesia			
subjects affected / exposed	11 / 106 (10.38%)	11 / 106 (10.38%)	
occurrences (all)	24	24	
Peripheral sensory neuropathy			
subjects affected / exposed	29 / 106 (27.36%)	30 / 106 (28.30%)	
occurrences (all)	60	74	
Blood and lymphatic system disorders			

Anaemia			
subjects affected / exposed	49 / 106 (46.23%)	49 / 106 (46.23%)	
occurrences (all)	155	173	
Leukopenia			
subjects affected / exposed	7 / 106 (6.60%)	7 / 106 (6.60%)	
occurrences (all)	20	20	
Lymphopenia			
subjects affected / exposed	6 / 106 (5.66%)	6 / 106 (5.66%)	
occurrences (all)	14	14	
Neutropenia			
subjects affected / exposed	44 / 106 (41.51%)	45 / 106 (42.45%)	
occurrences (all)	92	94	
Thrombocytopenia			
subjects affected / exposed	25 / 106 (23.58%)	27 / 106 (25.47%)	
occurrences (all)	46	49	
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	36 / 106 (33.96%)	36 / 106 (33.96%)	
occurrences (all)	106	109	
Chills			
subjects affected / exposed	18 / 106 (16.98%)	18 / 106 (16.98%)	
occurrences (all)	23	24	
Fatigue			
subjects affected / exposed	53 / 106 (50.00%)	53 / 106 (50.00%)	
occurrences (all)	127	137	
Influenza like illness			
subjects affected / exposed	7 / 106 (6.60%)	8 / 106 (7.55%)	
occurrences (all)	13	14	
Oedema peripheral			
subjects affected / exposed	45 / 106 (42.45%)	47 / 106 (44.34%)	
occurrences (all)	75	81	
Pain			
subjects affected / exposed	5 / 106 (4.72%)	6 / 106 (5.66%)	
occurrences (all)	5	6	
Pyrexia			

subjects affected / exposed	39 / 106 (36.79%)	40 / 106 (37.74%)	
occurrences (all)	75	79	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	19 / 106 (17.92%)	19 / 106 (17.92%)	
occurrences (all)	23	25	
Abdominal pain upper			
subjects affected / exposed	9 / 106 (8.49%)	10 / 106 (9.43%)	
occurrences (all)	13	14	
Constipation			
subjects affected / exposed	30 / 106 (28.30%)	32 / 106 (30.19%)	
occurrences (all)	49	52	
Diarrhoea			
subjects affected / exposed	48 / 106 (45.28%)	48 / 106 (45.28%)	
occurrences (all)	93	95	
Dry mouth			
subjects affected / exposed	7 / 106 (6.60%)	7 / 106 (6.60%)	
occurrences (all)	7	7	
Dyspepsia			
subjects affected / exposed	7 / 106 (6.60%)	8 / 106 (7.55%)	
occurrences (all)	8	9	
Nausea			
subjects affected / exposed	46 / 106 (43.40%)	47 / 106 (44.34%)	
occurrences (all)	89	92	
Stomatitis			
subjects affected / exposed	20 / 106 (18.87%)	20 / 106 (18.87%)	
occurrences (all)	26	26	
Vomiting			
subjects affected / exposed	30 / 106 (28.30%)	30 / 106 (28.30%)	
occurrences (all)	44	44	
Respiratory, thoracic and mediastinal disorders			
Cough			
subjects affected / exposed	24 / 106 (22.64%)	25 / 106 (23.58%)	
occurrences (all)	36	38	
Dyspnoea			

subjects affected / exposed	14 / 106 (13.21%)	15 / 106 (14.15%)	
occurrences (all)	16	17	
Epistaxis			
subjects affected / exposed	9 / 106 (8.49%)	9 / 106 (8.49%)	
occurrences (all)	12	12	
Skin and subcutaneous tissue disorders			
Alopecia			
subjects affected / exposed	57 / 106 (53.77%)	57 / 106 (53.77%)	
occurrences (all)	73	74	
Dermatitis acneiform			
subjects affected / exposed	9 / 106 (8.49%)	9 / 106 (8.49%)	
occurrences (all)	11	11	
Dry skin			
subjects affected / exposed	8 / 106 (7.55%)	9 / 106 (8.49%)	
occurrences (all)	8	9	
Pruritus			
subjects affected / exposed	11 / 106 (10.38%)	12 / 106 (11.32%)	
occurrences (all)	12	13	
Rash maculo-papular			
subjects affected / exposed	9 / 106 (8.49%)	9 / 106 (8.49%)	
occurrences (all)	19	19	
Psychiatric disorders			
Anxiety			
subjects affected / exposed	15 / 106 (14.15%)	15 / 106 (14.15%)	
occurrences (all)	19	19	
Depression			
subjects affected / exposed	6 / 106 (5.66%)	6 / 106 (5.66%)	
occurrences (all)	6	6	
Insomnia			
subjects affected / exposed	11 / 106 (10.38%)	11 / 106 (10.38%)	
occurrences (all)	12	12	
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	9 / 106 (8.49%)	10 / 106 (9.43%)	
occurrences (all)	14	15	
Back pain			

subjects affected / exposed	16 / 106 (15.09%)	17 / 106 (16.04%)	
occurrences (all)	17	18	
Bone pain			
subjects affected / exposed	6 / 106 (5.66%)	6 / 106 (5.66%)	
occurrences (all)	9	9	
Muscular weakness			
subjects affected / exposed	6 / 106 (5.66%)	7 / 106 (6.60%)	
occurrences (all)	9	10	
Myalgia			
subjects affected / exposed	12 / 106 (11.32%)	12 / 106 (11.32%)	
occurrences (all)	16	17	
Infections and infestations			
Upper respiratory tract infection			
subjects affected / exposed	6 / 106 (5.66%)	7 / 106 (6.60%)	
occurrences (all)	7	8	
Metabolism and nutrition disorders			
Decreased appetite			
subjects affected / exposed	46 / 106 (43.40%)	46 / 106 (43.40%)	
occurrences (all)	56	56	
Dehydration			
subjects affected / exposed	11 / 106 (10.38%)	11 / 106 (10.38%)	
occurrences (all)	13	13	
Hyperglycaemia			
subjects affected / exposed	12 / 106 (11.32%)	12 / 106 (11.32%)	
occurrences (all)	17	17	
Hyperkalaemia			
subjects affected / exposed	6 / 106 (5.66%)	6 / 106 (5.66%)	
occurrences (all)	9	9	
Hypoalbuminaemia			
subjects affected / exposed	11 / 106 (10.38%)	11 / 106 (10.38%)	
occurrences (all)	18	18	
Hypokalaemia			
subjects affected / exposed	14 / 106 (13.21%)	14 / 106 (13.21%)	
occurrences (all)	29	31	
Hypomagnesaemia			

subjects affected / exposed	7 / 106 (6.60%)	7 / 106 (6.60%)	
occurrences (all)	10	11	
Hyponatraemia			
subjects affected / exposed	10 / 106 (9.43%)	10 / 106 (9.43%)	
occurrences (all)	16	16	
Iron deficiency			
subjects affected / exposed	7 / 106 (6.60%)	7 / 106 (6.60%)	
occurrences (all)	7	7	

More information

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