



## Clinical trial results:

### An Open-Label, Dose-Escalating Study Of The Pharmacokinetics, Safety And Tolerability Of Fesoterodine In Pediatric Overactive Bladder Patients Aged 8-17 Years.

#### Summary

|                          |                  |
|--------------------------|------------------|
| EudraCT number           | 2014-004161-24   |
| Trial protocol           | Outside EU/EEA   |
| Global end of trial date | 20 December 2010 |

#### Results information

|                                |              |
|--------------------------------|--------------|
| Result version number          | v1 (current) |
| This version publication date  | 30 May 2016  |
| First version publication date | 12 July 2015 |

#### Trial information

##### Trial identification

|                       |          |
|-----------------------|----------|
| Sponsor protocol code | A0221066 |
|-----------------------|----------|

##### Additional study identifiers

|                                    |             |
|------------------------------------|-------------|
| ISRCTN number                      | -           |
| ClinicalTrials.gov id (NCT number) | NCT00857896 |
| WHO universal trial number (UTN)   | -           |

Notes:

#### Sponsors

|                              |   |
|------------------------------|---|
| Sponsor organisation name    | Pfizer, Inc.  |
| Sponsor organisation address | 235 E 42nd Street, New York, United States, NY 10017  |
| Public contact               | Pfizer ClinicalTrials.gov Call Center, Pfizer Inc., 001 8007181021, ClinicalTrials.gov_Inquiries@pfizer.com |
| Scientific contact           | Pfizer ClinicalTrials.gov Call Center, Pfizer Inc., 001 8007181021, ClinicalTrials.gov_Inquiries@pfizer.com |

Notes:

#### Paediatric regulatory details

|  |     |
|--|-----|
| Is trial part of an agreed paediatric investigation plan (PIP)       | No  |
| Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial? | No  |
| Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial? | Yes |

Notes:

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**Results analysis stage**

|  |                  |
|--|------------------|
| Analysis stage                                       | Final            |
| Date of interim/final analysis                       | 17 May 2011      |
| Is this the analysis of the primary completion data? | No               |
| Global end of trial reached?                         | Yes              |
| Global end of trial date                             | 20 December 2010 |
| Was the trial ended prematurely?                     | No               |

Notes:

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**General information about the trial**

Main objective of the trial:

To determine the pharmacokinetics of 5-hydroxy-methyltolterodine (5-HMT) in pediatric overactive bladder (OAB) subjects aged 8-17 years.

Protection of trial subjects:

The study was in compliance with the ethical principles derived from the Declaration of Helsinki and in compliance with all International Conference on Harmonization (ICH) Good Clinical Practice (GCP) Guidelines. All the local regulatory requirements pertinent to safety of trial subjects were followed.

Background therapy: -

Evidence for comparator: -

|   |               |
|---|---------------|
| Actual start date of recruitment                          | 20 March 2009 |
| Long term follow-up planned                               | No            |
| Independent data monitoring committee (IDMC) involvement? | No            |

Notes:

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**Population of trial subjects****Subjects enrolled per country**

|                                      |                   |
|--------------------------------------|-------------------|
| Country: Number of subjects enrolled | United States: 21 |
| Worldwide total number of subjects   | 21                |
| EEA total number of subjects         | 0                 |

Notes:

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**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)                     | 6  |
| Adolescents (12-17 years)                 | 15 |
| Adults (18-64 years)                      | 0  |
| From 65 to 84 years                       | 0  |
| 85 years and over                         | 0  |

## Subject disposition

### Recruitment

Recruitment details: -

### Pre-assignment

Screening details:

Total 21 subjects were enrolled in 7 centres of United States. Study started from 20 Mar 2009 and completed on 20 Dec 2010.

### Period 1

|                              |                    |
|------------------------------|--------------------|
| Period 1 title               | Baseline to Week 4 |
| Is this the baseline period? | Yes                |
| Allocation method            | Not applicable     |
| Blinding used                | Not blinded        |

### Arms

|           |              |
|-----------|--------------|
| Arm title | Fesoterodine |
|-----------|--------------|

Arm description:

Fesoterodine 4 milligram (mg) tablet from Baseline to Week 4, escalated to 8 mg tablet for Weeks 5 to 8.

|  |              |
|--|--------------|
| Arm type                               | Experimental |
| Investigational medicinal product name | Fesoterodine |
| Investigational medicinal product code |              |
| Other name                             |              |
| Pharmaceutical forms                   | Tablet       |
| Routes of administration               | Oral use     |

Dosage and administration details:

Fesoterodine 4 mg tablet was administered once daily (QD) from Baseline to Week 4.

| Number of subjects in period 1 | Fesoterodine |
|--------------------------------|--------------|
| Started                        | 21           |
| Completed                      | 20           |
| Not completed                  | 1            |
| Consent withdrawn by subject   | 1            |

### Period 2

|                              |                  |
|------------------------------|------------------|
| Period 2 title               | Week 5 to Week 8 |
| Is this the baseline period? | No               |
| Allocation method            | Not applicable   |
| Blinding used                | Not blinded      |

### Arms

|   |              |
|---|--------------|
| <b>Arm title</b>  | Fesoterodine |
| Arm description:<br>Fesoterodine 4 mg tablet from Baseline to Week 4, escalated to 8 mg tablet QD for Weeks 5 to 8. |              |
| Arm type  | Experimental |
| Investigational medicinal product name  | Fesoterodine |
| Investigational medicinal product code  |              |
| Other name  |              |
| Pharmaceutical forms  | Tablet       |
| Routes of administration  | Oral use     |

Dosage and administration details:

Fesoterodine 8 mg tablet QD for Weeks 5 to 8.

| <b>Number of subjects in period 2</b> | Fesoterodine |
|---------------------------------------|--------------|
| Started                               | 20           |
| Completed                             | 20           |

## Baseline characteristics

### Reporting groups

|                       |              |
|-----------------------|--------------|
| Reporting group title | Fesoterodine |
|-----------------------|--------------|

Reporting group description:

Fesoterodine 4 milligram (mg) tablet from Baseline to Week 4, escalated to 8 mg tablet for Weeks 5 to 8.

| Reporting group values | Fesoterodine | Total |  |
|------------------------|--------------|-------|--|
| Number of subjects     | 21           | 21    |  |
| Age categorical        |              |       |  |
| Units: Subjects        |              |       |  |
| Age Continuous         |              |       |  |
| Units: years           |              |       |  |
| arithmetic mean        | 13.1         |       |  |
| standard deviation     | ± 2.7        | -     |  |
| Gender, Male/Female    |              |       |  |
| Units: subjectss       |              |       |  |
| Female                 | 9            | 9     |  |
| Male                   | 12           | 12    |  |

## End points

### End points reporting groups

|  |              |
|--|--------------|
| Reporting group title  | Fesoterodine |
| Reporting group description:<br>Fesoterodine 4 milligram (mg) tablet from Baseline to Week 4, escalated to 8 mg tablet for Weeks 5 to 8. |              |
| Reporting group title  | Fesoterodine |
| Reporting group description:<br>Fesoterodine 4 mg tablet from Baseline to Week 4, escalated to 8 mg tablet QD for Weeks 5 to 8.          |              |

### Primary: Absorption Rate Constant (Ka)

|   |  |
|---|--|
| End point title   | Absorption Rate Constant (Ka) <sup>[1]</sup> |
| End point description:<br>Pharmacokinetic (PK) concentration population: randomized and treated subjects who had at least 1 concentration during the study. |  |
| End point type  | Primary                                      |
| End point timeframe:<br>Day 28 and Day 56   |  |

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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|   |                     |  |  |  |
|---|---------------------|--|--|--|
| <b>End point values</b>                   | Fesoterodine        |  |  |  |
| Subject group type                        | Reporting group     |  |  |  |
| Number of subjects analysed               | 21                  |  |  |  |
| Units: 1 per hour (hr)                    |                     |  |  |  |
| arithmetic mean (confidence interval 95%) | 0.44 (0.15 to 0.58) |  |  |  |

### Statistical analyses

No statistical analyses for this end point

### Primary: Apparent Volume of Distribution (VC/F)

|  |   |
|--|---|
| End point title  | Apparent Volume of Distribution (VC/F) <sup>[2]</sup> |
| End point description:<br>The volume necessary to account for the total amount of drug in the body if it were present throughout the body at the same concentration found in the blood. Estimated using non linear mixed effect modeling. PK concentration population. |   |
| End point type   | Primary   |
| End point timeframe:<br>Day 28 and Day 56  |   |

Notes:

[2] - 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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|   |                    |  |  |  |
|---|--------------------|--|--|--|
| <b>End point values</b>                   | Fesoterodine       |  |  |  |
| Subject group type                        | Reporting group    |  |  |  |
| Number of subjects analysed               | 21                 |  |  |  |
| Units: Liters (L)                         |                    |  |  |  |
| arithmetic mean (confidence interval 95%) | 1010 (566 to 1232) |  |  |  |

## Statistical analyses

No statistical analyses for this end point

### Primary: Area Under the plasma drug concentration time curve (AUC)

|                 |  |
|-----------------|--|
| End point title | Area Under the plasma drug concentration time curve (AUC) <sup>[3]</sup> |
|-----------------|--|

End point description:

AUC is a measure of the serum concentration of the drug over time. It is used to characterize drug absorption.

|                |         |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Day 28 and Day 56

Notes:

[3] - 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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|                                       |                  |  |  |  |
|---------------------------------------|------------------|--|--|--|
| <b>End point values</b>               | Fesoterodine     |  |  |  |
| Subject group type                    | Reporting group  |  |  |  |
| Number of subjects analysed           | 0 <sup>[4]</sup> |  |  |  |
| Units: micrograms*hour per milliliter |                  |  |  |  |
| arithmetic mean (standard deviation)  | ( )              |  |  |  |

Notes:

[4] - Not analyzed due to the limited amount of data available.

## Statistical analyses

No statistical analyses for this end point

### Primary: Time to Reach Maximum Observed Plasma Concentration (Tmax)

|                 |   |
|-----------------|---|
| End point title | Time to Reach Maximum Observed Plasma Concentration (Tmax) <sup>[5]</sup> |
|-----------------|---|

End point description:

|                |         |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Day 28 and Day 56

Notes:

[5] - 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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|                                      |                  |  |  |  |
|--------------------------------------|------------------|--|--|--|
| <b>End point values</b>              | Fesoterodine     |  |  |  |
| Subject group type                   | Reporting group  |  |  |  |
| Number of subjects analysed          | 0 <sup>[6]</sup> |  |  |  |
| Units: hours                         |                  |  |  |  |
| arithmetic mean (standard deviation) | ( )              |  |  |  |

Notes:

[6] - Not analyzed due to the limited amount of data available.

## Statistical analyses

No statistical analyses for this end point

### Primary: Maximum Observed Plasma Concentration (C<sub>max</sub>)

|                 |  |
|-----------------|--|
| End point title | Maximum Observed Plasma Concentration (C <sub>max</sub> ) <sup>[7]</sup> |
|-----------------|--|

End point description:

|                |         |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Day 28 and Day 56

Notes:

[7] - 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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|   |                  |  |  |  |
|---|------------------|--|--|--|
| <b>End point values</b>                   | Fesoterodine     |  |  |  |
| Subject group type                        | Reporting group  |  |  |  |
| Number of subjects analysed               | 0 <sup>[8]</sup> |  |  |  |
| Units: micrograms per milliliter (mcg/mL) |                  |  |  |  |
| arithmetic mean (standard deviation)      | ( )              |  |  |  |

Notes:

[8] - Not analyzed due to the limited amount of data available.

## Statistical analyses

No statistical analyses for this end point

### Primary: Plasma Decay Half-Life (t<sub>1/2</sub>)

|                 |   |
|-----------------|---|
| End point title | Plasma Decay Half-Life (t <sub>1/2</sub> ) <sup>[9]</sup> |
|-----------------|---|

End point description:

Plasma decay half-life is the time measured for the plasma concentration to decrease by one half.



|                |         |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Day 28 and Day 56

Notes:

[9] - 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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|                                      |                   |  |  |  |
|--------------------------------------|-------------------|--|--|--|
| <b>End point values</b>              | Fesoterodine      |  |  |  |
| Subject group type                   | Reporting group   |  |  |  |
| Number of subjects analysed          | 0 <sup>[10]</sup> |  |  |  |
| Units: hours                         |                   |  |  |  |
| arithmetic mean (standard deviation) | ( )               |  |  |  |

Notes:

[10] - Not analyzed due to the limited amount of data available.

## Statistical analyses

No statistical analyses for this end point

### Primary: Apparent Oral Clearance (CL/F)

|                 |  |
|-----------------|--|
| End point title | Apparent Oral Clearance (CL/F) <sup>[11]</sup> |
|-----------------|--|

End point description:

Clearance of a drug is a measure of the rate at which a drug is metabolized or eliminated by normal biological processes. Clearance obtained after oral dose (apparent oral clearance) is influenced by the fraction of the dose absorbed. Clearance was estimated using non linear mixed effect modeling. Drug clearance is a quantitative measure of the rate at which a drug substance is removed from the blood. PK Concentration population.

|                |         |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Day 28 and Day 56

Notes:

[11] - 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 plasma concentration-time data were analyzed by population PK modeling to estimate the 5-HMT PK parameters, for which descriptive summary statistics such as point estimate, relative standard error and 95% confidence intervals were reported

|   |                     |  |  |  |
|---|---------------------|--|--|--|
| <b>End point values</b>                   | Fesoterodine        |  |  |  |
| Subject group type                        | Reporting group     |  |  |  |
| Number of subjects analysed               | 21                  |  |  |  |
| Units: L/hr                               |                     |  |  |  |
| arithmetic mean (confidence interval 95%) | 86.7 (63.9 to 98.1) |  |  |  |

## Statistical analyses

No statistical analyses for this end point

### Secondary: Post-void Residual (PVR) Volume

|   |                                 |
|---|---------------------------------|
| End point title   | Post-void Residual (PVR) Volume |
| End point description:<br>Volume of urine remaining in the bladder immediately after urination. Safety Population: all subjects who were known to have received study medication, n = subjects not performing clean intermittent bladder catheterization (CIC) at specified time point. |                                 |
| End point type  | Secondary                       |
| End point timeframe:<br>Baseline, Week 4, Week 8 post-dose  |                                 |

|                               |                    |  |  |  |
|-------------------------------|--------------------|--|--|--|
| <b>End point values</b>       | Fesoterodine       |  |  |  |
| Subject group type            | Reporting group    |  |  |  |
| Number of subjects analysed   | 12 <sup>[12]</sup> |  |  |  |
| Units: mL                     |                    |  |  |  |
| median (full range (min-max)) |                    |  |  |  |
| Baseline (n=10)               | 6 (0 to 65)        |  |  |  |
| Week 4 (n=12)                 | 4 (0 to 90)        |  |  |  |
| Week 8 (n=10)                 | 25 (0 to 70)       |  |  |  |

Notes:

[12] - Subjects not performing CIC.

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Baseline up to 7 days after the last dose of study drug

Adverse event reporting additional description:

The same event may appear as both an adverse event (AE) and a serious AE (SAE). An event may be categorized as serious in one subject and as nonserious in another subject. EU BR specific AE tables were generated separately as per EU format using latest coding.

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

### Dictionary used

|                 |        |
|-----------------|--------|
| Dictionary name | MedDRA |
|-----------------|--------|

|                    |      |
|--------------------|------|
| Dictionary version | 17.1 |
|--------------------|------|

### Reporting groups

|                       |                   |
|-----------------------|-------------------|
| Reporting group title | Fesoterodine 4 mg |
|-----------------------|-------------------|

Reporting group description:

Fesoterodine 4 mg tablet QD anytime during the study

|                       |                   |
|-----------------------|-------------------|
| Reporting group title | Fesoterodine 8 mg |
|-----------------------|-------------------|

Reporting group description:

Fesoterodine 8 mg tablet QD anytime during the study

| Serious adverse events                            | Fesoterodine 4 mg | Fesoterodine 8 mg |  |
|---|-------------------|-------------------|--|
| Total subjects affected by serious adverse events |                   |                   |  |
| subjects affected / exposed                       | 0 / 21 (0.00%)    | 1 / 20 (5.00%)    |  |
| number of deaths (all causes)                     | 0                 | 0                 |  |
| number of deaths resulting from adverse events    | 0                 | 0                 |  |
| Gastrointestinal disorders                        |                   |                   |  |
| Constipation                                      |                   |                   |  |
| subjects affected / exposed                       | 0 / 21 (0.00%)    | 1 / 20 (5.00%)    |  |
| occurrences causally related to treatment / all   | 0 / 0             | 1 / 1             |  |
| deaths causally related to treatment / all        | 0 / 0             | 0 / 0             |  |

Frequency threshold for reporting non-serious adverse events: 0 %

| Non-serious adverse events                            | Fesoterodine 4 mg | Fesoterodine 8 mg |  |
|---|-------------------|-------------------|--|
| Total subjects affected by non-serious adverse events |                   |                   |  |
| subjects affected / exposed                           | 8 / 21 (38.10%)   | 13 / 20 (65.00%)  |  |
| Investigations  |                   |                   |  |
| Residual urine volume increased                       |                   |                   |  |

|  |   |   |  |
|--|---|---|--|
| subjects affected / exposed<br>occurrences (all)   | 0 / 21 (0.00%)<br>0   | 2 / 20 (10.00%)<br>2  |  |
| Congenital, familial and genetic disorders<br>Developmental hip dysplasia<br>subjects affected / exposed<br>occurrences (all)  | 1 / 21 (4.76%)<br>1   | 1 / 20 (5.00%)<br>1   |  |
| Nervous system disorders<br>Disturbance in attention<br>subjects affected / exposed<br>occurrences (all)<br><br>Resting tremor<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1<br><br>0 / 21 (0.00%)<br>0                            | 0 / 20 (0.00%)<br>0<br><br>1 / 20 (5.00%)<br>1                            |  |
| General disorders and administration site conditions<br>Pyrexia<br>subjects affected / exposed<br>occurrences (all)  | 1 / 21 (4.76%)<br>1   | 1 / 20 (5.00%)<br>1   |  |
| Eye disorders<br>Dry eye<br>subjects affected / exposed<br>occurrences (all)<br><br>Vision blurred<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1<br><br>0 / 21 (0.00%)<br>0                            | 0 / 20 (0.00%)<br>0<br><br>1 / 20 (5.00%)<br>1                            |  |
| Gastrointestinal disorders<br>Abdominal pain upper<br>subjects affected / exposed<br>occurrences (all)<br><br>Constipation<br>subjects affected / exposed<br>occurrences (all)<br><br>Dry mouth<br>subjects affected / exposed<br>occurrences (all)<br><br>Dyspepsia | 1 / 21 (4.76%)<br>1<br><br>1 / 21 (4.76%)<br>1<br><br>1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1<br><br>0 / 20 (0.00%)<br>0<br><br>0 / 20 (0.00%)<br>0 |  |

|  |                     |                     |  |
|--|---------------------|---------------------|--|
| subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1 | 0 / 20 (0.00%)<br>0 |  |
| Haematochezia<br>subjects affected / exposed<br>occurrences (all)  | 0 / 21 (0.00%)<br>0 | 1 / 20 (5.00%)<br>1 |  |
| Nausea<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1 |  |
| Vomiting<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1 |  |
| Respiratory, thoracic and mediastinal disorders<br>Rhinitis allergic<br>subjects affected / exposed<br>occurrences (all) | 0 / 21 (0.00%)<br>0 | 1 / 20 (5.00%)<br>1 |  |
| Sinus congestion<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1 | 0 / 20 (0.00%)<br>0 |  |
| Sneezing<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1 | 0 / 20 (0.00%)<br>0 |  |
| Upper respiratory tract congestion<br>subjects affected / exposed<br>occurrences (all)                                   | 0 / 21 (0.00%)<br>0 | 1 / 20 (5.00%)<br>1 |  |
| Skin and subcutaneous tissue disorders<br>Skin ulcer<br>subjects affected / exposed<br>occurrences (all)                 | 1 / 21 (4.76%)<br>1 | 0 / 20 (0.00%)<br>0 |  |
| Musculoskeletal and connective tissue disorders<br>Joint effusion<br>subjects affected / exposed<br>occurrences (all)    | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1 |  |
| Joint swelling<br>subjects affected / exposed<br>occurrences (all)   | 1 / 21 (4.76%)<br>1 | 0 / 20 (0.00%)<br>0 |  |
| Musculoskeletal pain   |                     |                     |  |

|   |                     |                      |  |
|---|---------------------|----------------------|--|
| subjects affected / exposed<br>occurrences (all)                            | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1  |  |
| Myositis<br>subjects affected / exposed<br>occurrences (all)                | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1  |  |
| Infections and infestations   |                     |                      |  |
| Arthritis bacterial<br>subjects affected / exposed<br>occurrences (all)     | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1  |  |
| Gastroenteritis<br>subjects affected / exposed<br>occurrences (all)         | 1 / 21 (4.76%)<br>1 | 0 / 20 (0.00%)<br>0  |  |
| Gastroenteritis viral<br>subjects affected / exposed<br>occurrences (all)   | 0 / 21 (0.00%)<br>0 | 1 / 20 (5.00%)<br>1  |  |
| Joint abscess<br>subjects affected / exposed<br>occurrences (all)           | 1 / 21 (4.76%)<br>1 | 1 / 20 (5.00%)<br>1  |  |
| Urinary tract infection<br>subjects affected / exposed<br>occurrences (all) | 2 / 21 (9.52%)<br>2 | 3 / 20 (15.00%)<br>3 |  |
| Viral infection<br>subjects affected / exposed<br>occurrences (all)         | 0 / 21 (0.00%)<br>0 | 1 / 20 (5.00%)<br>1  |  |

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date             | Amendment   |
|------------------|---|
| 23 November 2009 | Inclusion criteria of age was changed from 8-11 years to 8-17 years.  |
| 28 July 2010     | Inclusion criteria of total body weight of greater than (>) 35 kg was changed to total body weight of >25 kg. |

Notes:

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### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

None reported