



Clinical trial results:

A Phase II/III, Randomised, Multicentre Study of MOR00208 with Bendamustine versus Rituximab with Bendamustine in Patients with Relapsed or Refractory Diffuse Large B-Cell Lymphoma (R-R DLBCL) Who Are Not Eligible for High-Dose Chemotherapy (HDC) and Autologous Stem-Cell Transplantation (ASCT)

Summary

EudraCT number	2014-004689-11
Trial protocol	HU DE FI PT FR AT CZ ES RO GB HR IT
Global end of trial date	21 June 2024

Results information

Result version number	v1
This version publication date	07 June 2025
First version publication date	07 June 2025

Trial information

Trial identification

Sponsor protocol code	MOR208C204
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	-
WHO universal trial number (UTN)	-
Other trial identifiers	Abbreviation: B-MIND

Notes:

Sponsors

Sponsor organisation name	Incyte Corporation
Sponsor organisation address	1801 Augustine Cutoff, Wilmington, United States, 19803
Public contact	Study Director, Incyte Corporation, 1 8554633463, medinfo@incyte.com
Scientific contact	Study Director, Incyte Corporation, 1 8554633463, medinfo@incyte.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	21 June 2024
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	21 June 2024
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

To determine the efficacy of a combination of tafasitamab with bendamustine versus a combination of rituximab with bendamustine in terms of progression-free survival (PFS) in adult participants with relapsed or refractory diffuse large B-cell lymphoma (R-R DLBCL)

Protection of trial subjects:

This study was conducted in accordance with the ethical principles of Good Clinical Practice, according to the International Council for Harmonisation Guidelines

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	29 August 2016
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Australia: 44
Country: Number of subjects enrolled	Austria: 5
Country: Number of subjects enrolled	Canada: 17
Country: Number of subjects enrolled	Croatia: 7
Country: Number of subjects enrolled	Czechia: 22
Country: Number of subjects enrolled	Finland: 3
Country: Number of subjects enrolled	France: 13
Country: Number of subjects enrolled	Germany: 27
Country: Number of subjects enrolled	Hungary: 13
Country: Number of subjects enrolled	Israel: 12
Country: Number of subjects enrolled	Italy: 60
Country: Number of subjects enrolled	Korea, Republic of: 73
Country: Number of subjects enrolled	New Zealand: 9
Country: Number of subjects enrolled	Poland: 16
Country: Number of subjects enrolled	Portugal: 19
Country: Number of subjects enrolled	Romania: 5
Country: Number of subjects enrolled	Serbia: 31
Country: Number of subjects enrolled	Singapore: 5
Country: Number of subjects enrolled	Spain: 18
Country: Number of subjects enrolled	Taiwan: 6

Country: Number of subjects enrolled	Türkiye: 25
Country: Number of subjects enrolled	United Kingdom: 11
Country: Number of subjects enrolled	United States: 12
Worldwide total number of subjects	453
EEA total number of subjects	208

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)	85
From 65 to 84 years	354
85 years and over	14

Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

This study was conducted at 138 study centers in: Australia, Austria, Canada, Croatia, Czech Republic, Finland, France, Germany, Hungary, Israel, Italy, New Zealand, Poland, Portugal, Romania, Serbia, South Korea, Spain, Singapore, Taiwan, Turkey, the United Kingdom, and the United States of America.

Period 1

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

Arms

Are arms mutually exclusive?	Yes
Arm title	Tafasitamab + bendamustine

Arm description:

Participants received intravenous (IV) tafasitamab 12.0 milligrams per kilogram (mg/kg) in combination with IV bendamustine 90 mg/meters squared (m^2) in 28-day cycles for a maximum of 6 cycles. During Cycles 1 to 3, participants received tafasitamab on Days 1, 8, 15, and 22, plus a loading dose on Day 4 of Cycle 1. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

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

Dosage and administration details:

dosage level = 90 mg/ m^2

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

Dosage and administration details:

lyophilisate for solution for infusion; dosage level = 12.0 mg/kg

Arm title	Rituximab + bendamustine
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Arm description:

Participants received IV rituximab 375 mg/ m^2 in combination with IV bendamustine 90 mg/ m^2 in 28-day cycles for a maximum of 6 cycles. Participants received rituximab on Day 1 of each cycle until disease progression. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Arm type	Experimental
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Investigational medicinal product name	bendamustine
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder for concentrate for solution for infusion
Routes of administration	Intravenous use
Dosage and administration details:	
dosage level = 90 mg/m ²	
Investigational medicinal product name	rituximab
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Concentrate for solution for infusion
Routes of administration	Intravenous use
Dosage and administration details:	
dosage level = 375 mg/m ²	

Number of subjects in period 1	Tafasitamab + bendamustine	Rituximab + bendamustine
Started	226	227
Completed	0	0
Not completed	226	227
Noncompliance with Study Drug	2	-
Physician decision	1	7
Consent withdrawn by subject	26	25
Completed Maximum per Protocol Treatment Period	1	-
Adverse event, non-fatal	12	3
Death	123	123
Progressive Disease	24	27
Captured as "Other" in Database	29	34
Lost to follow-up	6	7
Tested Positive for Coronavirus SARS-CoV-2	2	1

Baseline characteristics

Reporting groups

Reporting group title	Tafasitamab + bendamustine
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Reporting group description:

Participants received intravenous (IV) tafasitamab 12.0 milligrams per kilogram (mg/kg) in combination with IV bendamustine 90 mg/meters squared (m²) in 28-day cycles for a maximum of 6 cycles. During Cycles 1 to 3, participants received tafasitamab on Days 1, 8, 15, and 22, plus a loading dose on Day 4 of Cycle 1. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Reporting group title	Rituximab + bendamustine
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Reporting group description:

Participants received IV rituximab 375 mg/m² in combination with IV bendamustine 90 mg/m² in 28-day cycles for a maximum of 6 cycles. Participants received rituximab on Day 1 of each cycle until disease progression. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Reporting group values	Tafasitamab + bendamustine	Rituximab + bendamustine	Total
Number of subjects	226	227	453
Age categorical			
Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	42	42	84
From 65-84 years	176	178	354
85 years and over	8	7	15
Age Continuous			
Units: years			
arithmetic mean	70.9	70.8	
standard deviation	± 10.36	± 9.92	-
Sex: Female, Male			
Units: participants			
Female	96	96	192
Male	130	131	261
Race/Ethnicity, Customized			
Units: Subjects			
Black or African American	1	0	1
American Indian or Alaskan Native	1	0	1
Asian	41	45	86
Native Hawaiian or Other Pacific Islander	0	1	1

White	172	171	343
Not Applicable in Enrolled Country	8	4	12
Captured as "Other" in Database	2	2	4
Iraqi	1	0	1
European	0	2	2
Eurasian	0	1	1
Captured as "Hispanic" in Database	0	1	1

End points

End points reporting groups

Reporting group title	Tafasitamab + bendamustine
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Reporting group description:

Participants received intravenous (IV) tafasitamab 12.0 milligrams per kilogram (mg/kg) in combination with IV bendamustine 90 mg/m² in 28-day cycles for a maximum of 6 cycles. During Cycles 1 to 3, participants received tafasitamab on Days 1, 8, 15, and 22, plus a loading dose on Day 4 of Cycle 1. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Reporting group title	Rituximab + bendamustine
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Reporting group description:

Participants received IV rituximab 375 mg/m² in combination with IV bendamustine 90 mg/m² in 28-day cycles for a maximum of 6 cycles. Participants received rituximab on Day 1 of each cycle until disease progression. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Primary: Kaplan-Meier Estimate of Progression-Free Survival by Independent Radiology/Clinical Review Committee Assessment in the Overall Population

End point title	Kaplan-Meier Estimate of Progression-Free Survival by Independent Radiology/Clinical Review Committee Assessment in the Overall Population
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End point description:

Progression-free survival was defined as the time from randomization to tumor progression or death from any cause. The Full Analysis Set was comprised of all participants who were randomized to either treatment arm. Participants were analyzed according to the treatment and stratification factors they were assigned to during the randomization procedure. 95% confidence intervals (CIs) (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Primary
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End point timeframe:

up to 41.4 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[1]	227 ^[2]		
Units: months				
median (confidence interval 95%)	7.10 (5.800 to 8.500)	8.30 (5.600 to 11.500)		

Notes:

[1] - Full Analysis Set

[2] - Full Analysis Set

Statistical analyses

Statistical analysis title	PFS: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	453
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.468
Method	Inverse normal test
Parameter estimate	Hazard ratio (HR)
Point estimate	1.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.837
upper limit	1.351

Primary: Kaplan-Meier Estimate of Progression-Free Survival by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer (NK) Cell Count-Low Subgroup

End point title	Kaplan-Meier Estimate of Progression-Free Survival by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer (NK) Cell Count-Low Subgroup
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End point description:

Progression-free survival was defined as the time from randomization to tumor progression or death from any cause. The Natural Killer Cell Count-Low Full Analysis Set (NK CC-Low FAS) was comprised of all participants in the FAS with ≤ 100 NK cells/ μ L at Baseline. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Primary
End point timeframe:	up to 46.5 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[3]	74 ^[4]		
Units: months				
median (confidence interval 95%)	5.60 (4.400 to 8.600)	5.60 (3.600 to 10.000)		

Notes:

[3] - Natural Killer Cell Count-Low Full Analysis Set

[4] - Natural Killer Cell Count-Low Full Analysis Set

Statistical analyses

Statistical analysis title	PFS: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine

Number of subjects included in analysis	162
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.568
Method	Inverse normal test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.586
upper limit	1.33

Secondary: Best ORR by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup

End point title	Best ORR by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup
End point description:	Best ORR was defined as the percentage of patients with CR or PR based on the best response achieved at any time during the study. Per International Working Group response criteria: CR: the disappearance of all evidence of disease; PR: regression of measurable disease and no new sites. A 2-sided 95% Clopper-Pearson exact method based on binomial distribution was used.
End point type	Secondary
End point timeframe:	up to 77 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[5]	74 ^[6]		
Units: percentage of participants				
number (confidence interval 95%)	64.8 (53.86 to 74.66)	59.5 (47.41 to 70.73)		

Notes:

[5] - Natural Killer Cell Count-Low Full Analysis Set

[6] - Natural Killer Cell Count-Low Full Analysis Set

Statistical analyses

Statistical analysis title	ORR: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	162
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Odds ratio (OR)
Point estimate	1.54

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.778
upper limit	3.041

Secondary: Best Objective Response Rate (ORR) by Independent Radiology/Clinical Review Committee Assessment in the Overall Population

End point title	Best Objective Response Rate (ORR) by Independent Radiology/Clinical Review Committee Assessment in the Overall Population
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End point description:

Best ORR was defined as the percentage of patients with complete response (CR) or partial response (PR) based on the best response achieved at any time during the study. Per International Working Group response criteria: CR: the disappearance of all evidence of disease; PR: regression of measurable disease and no new sites. A 2-sided 95% Clopper-Pearson exact method based on binomial distribution was used.

End point type	Secondary
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End point timeframe:

up to 77 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[7]	227 ^[8]		
Units: percentage of participants				
number (confidence interval 95%)	65.5 (58.90 to 71.67)	61.7 (55.01 to 68.03)		

Notes:

[7] - Full Analysis Set

[8] - Full Analysis Set

Statistical analyses

Statistical analysis title	ORR: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	453
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Odds ratio (OR)
Point estimate	1.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.812
upper limit	1.779

Secondary: Kaplan-Meier Estimate of Duration of Response by Independent Radiology/Clinical Review Committee Assessment in the Overall Population

End point title	Kaplan-Meier Estimate of Duration of Response by Independent Radiology/Clinical Review Committee Assessment in the Overall Population
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End point description:

Duration of response was defined as the elapsed time (in months) between the date of the first documented response (CR or PR) and the following date of an event defined as the first documented progression (any new lesion or an increase by $\geq 50\%$ of previously involved sites from nadir) or death. Per International Working Group response criteria: CR: the disappearance of all evidence of disease; PR: regression of measurable disease and no new sites. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Secondary
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End point timeframe:

up to 40.2 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	148 ^[9]	140 ^[10]		
Units: months				
median (confidence interval 95%)	7.40 (5.800 to 12.100)	12.10 (10.000 to 23.300)		

Notes:

[9] - Full Analysis Set. Only participants with CR or PR were analyzed.

[10] - Full Analysis Set. Only participants with CR or PR were analyzed.

Statistical analyses

Statistical analysis title	DOR: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	288
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	1.28
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.938
upper limit	1.745

Secondary: Kaplan-Meier Estimate of Duration of Response by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup

End point title	Kaplan-Meier Estimate of Duration of Response by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup
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End point description:

Duration of response was defined as the elapsed time (in months) between the date of the first

documented response (CR or PR) and the following date of an event defined as the first documented progression (any new lesion or an increase by $\geq 50\%$ of previously involved sites from nadir) or death. Per International Working Group response criteria: CR: the disappearance of all evidence of disease; PR: regression of measurable disease and no new sites. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Secondary
End point timeframe:	
up to 44.7 months	

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	57 ^[11]	44 ^[12]		
Units: months				
median (confidence interval 95%)	6.70 (3.700 to 12.700)	10.30 (4.900 to 37.500)		

Notes:

[11] - Natural Killer Cell Count-Low Full Analysis Set. Only participants with CR or PR were analyzed.

[12] - Natural Killer Cell Count-Low Full Analysis Set. Only participants with CR or PR were analyzed.

Statistical analyses

Statistical analysis title	DOR: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	101
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	1.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.673
upper limit	2.035

Secondary: Kaplan-Meier Estimate of Overall Survival in the Overall Population

End point title	Kaplan-Meier Estimate of Overall Survival in the Overall Population
End point description:	
Overall survival was defined as the time (in months) from randomization until death from any cause. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.	
End point type	Secondary
End point timeframe:	
up to 50.0 months	

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[13]	227 ^[14]		
Units: months				
median (confidence interval 95%)	14.60 (11.600 to 23.400)	20.20 (13.400 to 24.300)		

Notes:

[13] - Full Analysis Set

[14] - Full Analysis Set

Statistical analyses

Statistical analysis title	Overall Survival: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	453
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	1.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.875
upper limit	1.452

Secondary: Kaplan-Meier Estimate of Overall Survival in the Natural Killer Cell Count-Low Subgroup

End point title	Kaplan-Meier Estimate of Overall Survival in the Natural Killer Cell Count-Low Subgroup
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End point description:

Overall survival (OS) was defined as the time (in months) from randomization until death from any cause. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Secondary
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End point timeframe:

up to 50.6 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[15]	74 ^[16]		
Units: months				
median (confidence interval 95%)	10.60 (8.300 to 19.700)	12.50 (8.300 to 32.300)		

Notes:

[15] - Natural Killer Cell Count-Low Full Analysis Set

[16] - Natural Killer Cell Count-Low Full Analysis Set

Statistical analyses

Statistical analysis title	OS: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	162
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	1.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.682
upper limit	1.626

Secondary: Disease Control Rate (DCR) by Independent Radiology/Clinical Review Committee Assessment in the Overall Population

End point title	Disease Control Rate (DCR) by Independent Radiology/Clinical Review Committee Assessment in the Overall Population
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End point description:

DCR was defined as the percentage of participants with a CR, PR, or stable disease (SD) based on the best response achieved at any time during the study. Per the International Working Group response criteria: CR: the disappearance of all evidence of disease; PR: regression of measurable disease and no new sites; SD: failure to attain CR/PR or progressive disease (PD; any new lesion or an increase by $\geq 50\%$ of previously involved sites from nadir). A 2-sided 95% Clopper-Pearson exact method based on binomial distribution was used.

End point type	Secondary
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End point timeframe:

up to 77 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[17]	227 ^[18]		
Units: percentage of participants				
number (confidence interval 95%)	76.1 (70.00 to 81.51)	71.8 (65.47 to 77.56)		

Notes:

[17] - Full Analysis Set

[18] - Full Analysis Set

Statistical analyses

Statistical analysis title	DCR: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine

Number of subjects included in analysis	453
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Odds ratio (OR)
Point estimate	1.28
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.829
upper limit	1.985

Secondary: Kaplan-Meier Estimate of Time to Progression (TTP) by Independent Radiology/Clinical Review Committee Assessment in the Overall Population

End point title	Kaplan-Meier Estimate of Time to Progression (TTP) by Independent Radiology/Clinical Review Committee Assessment in the Overall Population
End point description:	Time to progression was defined as the time (in months) from randomization until documented diffuse large B-cell lymphoma (DLBCL) progression or death as a result of lymphoma. Death from other causes than lymphoma was not considered in relation to the TTP evaluation. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.
End point type	Secondary
End point timeframe:	up to 25.8 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	117 ^[19]	111 ^[20]		
Units: months				
median (confidence interval 95%)	8.20 (6.200 to 9.300)	11.10 (8.100 to 18.300)		

Notes:

[19] - Full Analysis Set. Only participants with progression/death as a result of lymphoma were analyzed.

[20] - Full Analysis Set. Only participants with progression/death as a result of lymphoma were analyzed.

Statistical analyses

Statistical analysis title	TTP: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	228
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	1.08

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.831
upper limit	1.416

Secondary: DCR by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup

End point title	DCR by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup
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End point description:

DCR was defined as the percentage of participants with a CR, PR, or SD based on the best response achieved at any time during the study. Per the International Working Group response criteria: CR: the disappearance of all evidence of disease; PR: regression of measurable disease and no new sites; SD: failure to attain CR/PR or PD (any new lesion or an increase by $\geq 50\%$ of previously involved sites from nadir). A 2-sided 95% Clopper-Pearson exact method based on binomial distribution was used.

End point type	Secondary
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End point timeframe:

up to 77 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[21]	74 ^[22]		
Units: percentage of participants				
number (confidence interval 95%)	75.0 (64.63 to 83.62)	70.3 (58.52 to 80.34)		

Notes:

[21] - Natural Killer Cell Count-Low Full Analysis Set

[22] - Natural Killer Cell Count-Low Full Analysis Set

Statistical analyses

Statistical analysis title	DCR: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	162
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Odds ratio (OR)
Point estimate	1.62
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.755
upper limit	3.457

Secondary: Kaplan-Meier Estimate of Time to Progression by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup

End point title	Kaplan-Meier Estimate of Time to Progression by Independent Radiology/Clinical Review Committee Assessment in the Natural Killer Cell Count-Low Subgroup
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End point description:

Time to progression was defined as the time (in months) from randomization until documented diffuse large B-cell lymphoma (DLBCL) progression or death as a result of lymphoma. Death from other causes than lymphoma was not considered in relation to the TTP evaluation. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Secondary
End point timeframe:	up to 40.6 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	50 ^[23]	36 ^[24]		
Units: months				
median (confidence interval 95%)	8.00 (5.400 to 9.200)	10.00 (3.800 to 39.400)		

Notes:

[23] - NK CC-Low FAS. Only participants with progression/death as a result of lymphoma were analyzed.

[24] - NK CC-Low FAS. Only participants with progression/death as a result of lymphoma were analyzed.

Statistical analyses

Statistical analysis title	TTP: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	86
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.633
upper limit	1.595

Secondary: Kaplan-Meier Estimate of Time to Next Treatment (TTNT) in the Overall Population

End point title	Kaplan-Meier Estimate of Time to Next Treatment (TTNT) in the Overall Population
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End point description:

Time to next treatment was defined as the time (in months) from randomization to the institution of the next anti-neoplastic therapy (for any reason including disease progression, treatment toxicity, and participant preference) or death due to any cause, whatever came first. 95% CIs (Greenwood formula)

for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Secondary
End point timeframe:	
up to 59.4 months	

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[25]	227 ^[26]		
Units: months				
median (confidence interval 95%)	8.80 (7.500 to 10.900)	8.70 (6.800 to 11.500)		

Notes:

[25] - Full Analysis Set

[26] - Full Analysis Set

Statistical analyses

Statistical analysis title	TTNT: Overall Population
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	453
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.794
upper limit	1.244

Secondary: Kaplan-Meier Estimate of Time to Next Treatment in the Natural Killer Cell Count-Low Subgroup

End point title	Kaplan-Meier Estimate of Time to Next Treatment in the Natural Killer Cell Count-Low Subgroup
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End point description:

Time to next treatment was defined as the time (in months) from randomization to the institution of the next anti-neoplastic therapy (for any reason including disease progression, treatment toxicity, and participant preference) or death due to any cause, whatever came first. 95% CIs (Greenwood formula) for the median and the 25th and 75th percentiles were calculated using the method of Brookmeyer and Crowley.

End point type	Secondary
End point timeframe:	
up to 70.1 months	

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[27]	74 ^[28]		
Units: months				
median (confidence interval 95%)	7.20 (5.800 to 9.500)	6.30 (4.300 to 9.000)		

Notes:

[27] - Natural Killer Cell Count-Low Full Analysis Set

[28] - Natural Killer Cell Count-Low Full Analysis Set

Statistical analyses

Statistical analysis title	TTNT: Natural Killer Cell Count-Low Subgroup
Comparison groups	Tafasitamab + bendamustine v Rituximab + bendamustine
Number of subjects included in analysis	162
Analysis specification	Pre-specified
Analysis type	
Parameter estimate	Hazard ratio (HR)
Point estimate	0.83
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.57
upper limit	1.22

Secondary: Number of participants with any treatment-emergent adverse event (TEAE)

End point title	Number of participants with any treatment-emergent adverse event (TEAE)
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End point description:

An adverse event was defined as any untoward medical occurrence in a participant administered a medicinal product, which did not necessarily have a causal relationship to this treatment. An AE could therefore have been any unfavourable and unintended sign (including an abnormal laboratory finding), symptom, or disease temporally associated with the use of a study drug, whether or not it was considered related to that study drug. TEAEs were defined as any adverse events either reported for the first time or the worsening of pre-existing events after the first dose of study drug and within 30 days of the last administration of study drug. The Safety Analysis Set was comprised of all participants who received at least one dose of tafasitamab, bendamustine, or rituximab. Analyses were based on the actual treatment received.

End point type	Secondary
End point timeframe:	
up to 77 months	

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	219 ^[29]	225 ^[30]		
Units: percentage of participants	215	215		

Notes:

[29] - Safety Analysis Set

[30] - Safety Analysis Set

Statistical analyses

No statistical analyses for this end point

Secondary: Number of participants with any Grade 3 or higher TEAE

End point title	Number of participants with any Grade 3 or higher TEAE
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End point description:

AEs were graded according to the National Cancer Institute (NCI) Common Terminology Criteria for Adverse Events (CTCAE), version 4.0 (or higher). Grade 1: mild; asymptomatic or mild symptoms. Grade 2: moderate. Grade 3: severe or medically significant but not immediately life threatening. Grade 4: life-threatening consequences. Grade 5: death. TEAEs were defined as any adverse events either reported for the first time or the worsening of pre-existing events after the first dose of study drug and within 30 days of the last administration of study drug.

End point type	Secondary
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End point timeframe:

up to 77 months

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	219 ^[31]	225 ^[32]		
Units: percentage of participants	191	159		

Notes:

[31] - Safety Analysis Set

[32] - Safety Analysis Set

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline (CFB) in the EORTC QLQ-C30 Scores at End of Treatment in the Overall Population

End point title	Change from Baseline (CFB) in the EORTC QLQ-C30 Scores at End of Treatment in the Overall Population
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End point description:

The European Organization for the Research and Treatment of Cancer Core Quality of Life Questionnaire (EORTC QLQ-C30) contains 30 items and measures 5 functional dimensions (i.e., physical, role, emotional, cognitive, and social), 3 symptom items (i.e., fatigue, nausea/vomiting, and pain), 6 single items (i.e., dyspnea, sleep disturbance, appetite loss, constipation, diarrhea, and financial impact), and a global health (GH) and quality of life (QoL) scale. For each scale and single item, a linear transformation was applied to standardize the scores between 0 (worst) and 100 (best) as described in the EORTC QLQ-C30 Scoring Manual.

End point type	Secondary
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End point timeframe:

Baseline (BL); End of Treatment (EOT) (up to 77 months)

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[33]	227 ^[34]		
Units: scores on a scale				
arithmetic mean (standard deviation)				
BL; Global Health Status/QoL Scale, n=223, 225	59.19 (± 22.94)	59.89 (± 23.75)		
Baseline; Physical Functioning, n=222, 225	71.68 (± 23.05)	69.39 (± 24.60)		
Baseline; Role Functioning, n=221, 226	68.91 (± 30.84)	69.53 (± 31.48)		
Baseline; Emotional Functioning, n=220, 224	76.63 (± 22.24)	74.79 (± 25.05)		
Baseline; Cognitive Functioning, n=222, 224	82.81 (± 18.61)	81.41 (± 22.74)		
Baseline; Social Functioning, n=222, 224	74.74 (± 27.53)	73.93 (± 29.45)		
Baseline, Fatigue, n=221, 223	37.74 (± 26.69)	36.64 (± 27.28)		
Baseline, Nausea and Vomiting, n=222, 225	6.20 (± 15.26)	9.69 (± 21.25)		
Baseline, Pain, n=220, 223	28.25 (± 31.02)	27.36 (± 30.18)		
Baseline, Dyspnoea, n=223, 227	19.43 (± 25.13)	18.06 (± 25.70)		
Baseline, Insomnia, n=223, 227	30.64 (± 32.77)	29.22 (± 31.87)		
Baseline, Loss of Appetite, n=222, 227	20.27 (± 28.44)	22.17 (± 31.87)		
Baseline, Constipation, n=223, 227	15.25 (± 24.85)	14.83 (± 24.30)		
Baseline, Diarrhoea, n=223, 225	8.07 (± 17.46)	8.74 (± 21.07)		
Baseline, Financial Impact, n=223, 225	14.20 (± 24.97)	21.78 (± 28.26)		
CFB at EOT; BL; GH Status/QoL Scale, n=128, 145	-7.23 (± 22.56)	-7.99 (± 22.71)		
CFB at EOT; BL; Phys Functioning, n=128, 144	-13.59 (± 25.48)	-7.51 (± 22.95)		
CFB at EOT; Role Functioning, n=128, 144	-14.84 (± 33.87)	-10.88 (± 32.35)		
CFB at EOT; Emotional Functioning, n=128, 144	-5.60 (± 24.88)	-2.41 (± 24.83)		
CFB at EOT; Cognitive Functioning, n=128, 145	-7.29 (± 23.37)	-4.71 (± 24.67)		
CFB at EOT; Social Functioning, n=128, 144	-14.32 (± 31.56)	-4.98 (± 27.03)		
CFB at EOT, Fatigue, n=128, 146	11.89 (± 31.49)	10.24 (± 24.30)		
CFB at EOT, Nausea and Vomiting, n=128, 145	5.47 (± 18.37)	3.10 (± 25.00)		
CFB at EOT, Pain, n=129, 145	6.33 (± 30.42)	7.93 (± 33.11)		
CFB at EOT, Dyspnoea, n=128, 145	9.11 (± 34.93)	8.05 (± 28.40)		
CFB at EOT, Insomnia, n=128, 146	1.30 (± 36.80)	2.28 (± 33.37)		

CFB at EOT, Loss of Appetite, n=128, 146	16.15 (± 38.33)	9.36 (± 31.98)		
CFB at EOT, Constipation, n=128, 146	5.21 (± 33.58)	1.60 (± 28.05)		
CFB at EOT, Diarrhoea, n=128, 145	7.03 (± 28.26)	1.38 (± 28.02)		
CFB at EOT, Financial Impact, n=128, 142	2.08 (± 22.04)	1.17 (± 25.24)		

Notes:

[33] - Full Analysis Set. Only participants with available data were analyzed.

[34] - Full Analysis Set. Only participants with available data were analyzed.

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline (CFB) in the EORTC QLQ-C30 Scores at End of Treatment in the Natural Killer Cell Count-Low Subgroup

End point title	Change from Baseline (CFB) in the EORTC QLQ-C30 Scores at End of Treatment in the Natural Killer Cell Count-Low Subgroup
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End point description:

The European Organization for the Research and Treatment of Cancer Core Quality of Life Questionnaire (EORTC QLQ-C30) contains 30 items and measures 5 functional dimensions (i.e., physical, role, emotional, cognitive, and social), 3 symptom items (i.e., fatigue, nausea/vomiting, and pain), 6 single items (i.e., dyspnea, sleep disturbance, appetite loss, constipation, diarrhea, (GH) and financial impact), and a global health and quality of life (QoL) scale. For each scale and single item, a linear transformation was applied to standardize the scores between 0 (worst) and 100 (best) as described in the EORTC QLQ-C30 Scoring Manual.

End point type	Secondary
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End point timeframe:

Baseline (BL); End of Treatment (EOT) (up to 77 months)

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[35]	74 ^[36]		
Units: scores on a scale				
arithmetic mean (standard deviation)				
BL; Global Health Status/QoL Scale, n=86, 74	57.66 (± 22.37)	52.59 (± 24.13)		
Baseline; Physical Functioning, n=86, 72	68.60 (± 24.73)	64.30 (± 26.46)		
Baseline; Role Functioning, n=85, 74	65.89 (± 31.61)	60.59 (± 33.63)		
Baseline; Emotional Functioning, n=85, 73	76.10 (± 22.32)	67.61 (± 28.71)		
Baseline; Cognitive Functioning, n=86, 74	84.88 (± 18.72)	77.03 (± 23.84)		
Baseline; Social Functioning, n=86, 73	73.84 (± 27.00)	67.34 (± 31.87)		
Baseline, Fatigue, n=85, 72	39.02 (± 26.61)	43.62 (± 28.01)		
Baseline, Nausea and Vomiting, n=86, 74	6.20 (± 14.24)	15.77 (± 26.44)		
Baseline, Pain, n=85, 72	28.88 (± 32.38)	34.68 (± 32.50)		

Baseline, Dyspnoea, n=86, 74	21.32 (± 25.52)	21.62 (± 28.37)		
Baseline, Insomnia, n=86, 74	31.78 (± 30.64)	36.49 (± 33.64)		
Baseline, Loss of Appetite, n=86, 74	21.32 (± 27.49)	29.73 (± 36.00)		
Baseline, Constipation, n=86, 74	17.83 (± 26.91)	16.67 (± 27.72)		
Baseline, Diarrhoea, n=86, 74	7.75 (± 16.71)	9.01 (± 22.95)		
Baseline, Financial Impact, n=86, 74	13.57 (± 25.25)	24.32 (± 32.78)		
CFB at EOT; BL; GH Status/QoL Scale, n=52, 42	-6.57 (± 23.70)	-7.54 (± 30.84)		
CFB at EOT; BL; Physical Functioning, n=51, 41	-15.29 (± 25.83)	-11.83 (± 33.60)		
CFB at EOT; Role Functioning, n=51, 41	-19.61 (± 37.07)	-15.45 (± 41.06)		
CFB at EOT; Emotional Functioning, n=52, 41	-4.81 (± 28.02)	0.27 (± 33.98)		
CFB at EOT; Cognitive Functioning, n=52, 42	-7.69 (± 22.01)	-5.95 (± 30.54)		
CFB at EOT; Social Functioning, n=52, 41	-16.67 (± 27.42)	-2.44 (± 32.18)		
CFB at EOT, Fatigue, n=51, 42	13.51 (± 31.69)	13.10 (± 33.19)		
CFB at EOT, Nausea and Vomiting, n=51, 41	5.66 (± 14.78)	-3.66 (± 34.86)		
CFB at EOT, Pain, n=52, 42	8.65 (± 33.09)	7.94 (± 42.97)		
CFB at EOT, Dyspnoea, n=51, 42	9.15 (± 37.17)	7.94 (± 32.77)		
CFB at EOT, Insomnia, n=51, 42	5.88 (± 35.09)	-1.59 (± 41.62)		
CFB at EOT, Loss of Appetite, n=51, 42	20.26 (± 41.14)	10.32 (± 42.60)		
CFB at EOT, Constipation, n=51, 42	5.88 (± 32.46)	0.79 (± 30.79)		
CFB at EOT, Diarrhoea, n=52, 42	5.77 (± 21.61)	5.56 (± 30.28)		
CFB at EOT, Financial Impact, n=52, 41	2.56 (± 17.27)	7.32 (± 26.37)		

Notes:

[35] - NK CC-Low FAS. Only participants with available data were analyzed.

[36] - NK CC-Low FAS. Only participants with available data were analyzed.

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline (CFB) in EQ-5D-5L Dimension Scores at End of Treatment in the Overall Population

End point title	Change from Baseline (CFB) in EQ-5D-5L Dimension Scores at End of Treatment in the Overall Population
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End point description:

The EQ-5D-5L is a standardized instrument for use as a measure of health outcome. The EQ-5D-5L descriptive system is composed of 5 dimensions (mobility, self-care, usual activities, pain/discomfort, and anxiety/depression). Each dimension has 5 response levels, which are coded by single-digit numbers: 1 = no problems, 2 = slight problems, 3 = moderate problems, 4 = severe problems, 5 = unable to/extreme problems. The EQ-5D-5L also includes a graded (0 [worst overall health] to 100 [best overall health]) vertical visual analog scale that provides a quantitative measure of the participant's perception of their overall health.

End point type	Secondary
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End point timeframe:

Baseline; End of Treatment (EOT) (up to 77 months)

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[37]	227 ^[38]		
Units: scores on a scale				
arithmetic mean (standard deviation)				
Baseline, Mobility Level, n=206, 212	1.83 (± 0.969)	1.94 (± 1.054)		
Baseline, Self-care Level, n=206, 212	1.37 (± 0.771)	1.44 (± 0.861)		
Baseline, Usual Activities, n=206, 212	1.97 (± 1.086)	1.92 (± 1.063)		
Baseline, Pain/Discomfort, n=206, 211	2.04 (± 1.045)	2.08 (± 1.027)		
Baseline, Anxiety/Depression, n=206, 212	1.67 (± 0.844)	1.73 (± 0.907)		
CFB at EOT, Mobility Level, n=118, 132	0.47 (± 1.076)	0.25 (± 1.094)		
CFB at EOT, Self-care Level, n=118, 132	0.48 (± 1.052)	0.23 (± 0.946)		
CFB at EOT, Usual Activities, n=118, 131	0.42 (± 1.410)	0.31 (± 1.066)		
CFB at EOT, Pain/Discomfort, n=118, 131	0.29 (± 1.102)	0.09 (± 1.173)		
CFB at EOT, Anxiety/Depression, n=118, 131	0.33 (± 1.071)	0.21 (± 1.030)		

Notes:

[37] - Full Analysis Set. Only participants with available data were analyzed.

[38] - Full Analysis Set. Only participants with available data were analyzed.

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline (CFB) in EQ-5D-5L Dimension Scores at End of Treatment in the Natural Killer Cell Count-Low Subgroup

End point title	Change from Baseline (CFB) in EQ-5D-5L Dimension Scores at End of Treatment in the Natural Killer Cell Count-Low Subgroup
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End point description:

The EQ-5D-5L is a standardized instrument for use as a measure of health outcome. The EQ-5D-5L descriptive system is composed of 5 dimensions (mobility, self-care, usual activities, pain/discomfort, and anxiety/depression). Each dimension has 5 response levels, which are coded by single-digit numbers: 1 = no problems, 2 = slight problems, 3 = moderate problems, 4 = severe problems, 5 = unable to/extreme problems. The EQ-5D-5L also includes a graded (0 [worst overall health] to 100 [best overall health]) vertical visual analog scale that provides a quantitative measure of the participant's perception of their overall health.

End point type	Secondary
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End point timeframe:

Baseline; End of Treatment (EOT) (up to 77 months)

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[39]	74 ^[40]		
Units: scores on a scale				
arithmetic mean (standard deviation)				
Baseline, Mobility Level, n=78, 69	2.09 (± 0.983)	2.04 (± 1.104)		
Baseline, Self-care Level, n=78, 69	1.49 (± 0.977)	1.54 (± 0.917)		
Baseline, Usual Activities, n=78, 69	2.03 (± 1.116)	2.14 (± 1.228)		
Baseline, Pain/Discomfort, n=78, 68	2.08 (± 1.054)	2.26 (± 1.060)		
Baseline, Anxiety/Depression, n=78, 69	1.65 (± 0.803)	1.96 (± 1.143)		
CFB at EOT, Mobility Level, n=47, 39	0.55 (± 1.080)	0.46 (± 1.315)		
CFB at EOT, Self-care Level, n=47, 39	0.53 (± 1.080)	0.41 (± 1.312)		
CFB at EOT, Usual Activities, n=47, 38	0.62 (± 1.392)	0.53 (± 1.224)		
CFB at EOT, Pain/Discomfort, n=47, 38	0.40 (± 1.173)	0.05 (± 1.469)		
CFB at EOT, Anxiety/Depression, n=47, 38	0.30 (± 1.250)	0.24 (± 1.324)		

Notes:

[39] - NK CC-Low FAS. Only participants with available data were analyzed.

[40] - NK CC-Low FAS. Only participants with available data were analyzed.

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline (CFB) in EQ-5D-5L VAS Score at End of Treatment in the Overall Population

End point title	Change from Baseline (CFB) in EQ-5D-5L VAS Score at End of Treatment in the Overall Population
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End point description:

The EQ-5D-5L is a standardized instrument for use as a measure of health outcome. The EQ-5D-5L descriptive system is composed of 5 dimensions (mobility, self-care, usual activities, pain/discomfort, and anxiety/depression). Each dimension has 5 response levels, which are coded by single-digit numbers: 1 = no problems, 2 = slight problems, 3 = moderate problems, 4 = severe problems, 5 = unable to/extreme problems. The EQ-5D-5L also includes a graded (0 [worst overall health] to 100 [best overall health]) vertical visual analog scale that provides a quantitative measure of the participant's perception of their overall health.

End point type	Secondary
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End point timeframe:

Baseline; End of Treatment (EOT) (up to 77 months)

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	226 ^[41]	227 ^[42]		
Units: scores on a scale				
arithmetic mean (standard deviation)				
Baseline, n=206, 211	66.22 (± 20.5)	66.69 (± 20.4)		
CFB at EOT, n=119, 129	-8.10 (± 21.1)	-5.47 (± 23.2)		

Notes:

[41] - Full Analysis Set. Only participants with available data were analyzed.

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline (CFB) in EQ-5D-5L VAS Score at End of Treatment in the Natural Killer Cell Count-Low Subgroup

End point title	Change from Baseline (CFB) in EQ-5D-5L VAS Score at End of Treatment in the Natural Killer Cell Count-Low Subgroup
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End point description:

The EQ-5D-5L is a standardized instrument for use as a measure of health outcome. The EQ-5D-5L descriptive system is composed of 5 dimensions (mobility, self-care, usual activities, pain/discomfort, and anxiety/depression). Each dimension has 5 response levels, which are coded by single-digit numbers: 1 = no problems, 2 = slight problems, 3 = moderate problems, 4 = severe problems, 5 = unable to/extreme problems. The EQ-5D-5L also includes a graded (0 [worst overall health] to 100 [best overall health]) vertical visual analog scale that provides a quantitative measure of the participant's perception of their overall health.

End point type	Secondary
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End point timeframe:

Baseline; End of Treatment (EOT) (up to 77 months)

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	88 ^[43]	74 ^[44]		
Units: scores on a scale				
arithmetic mean (standard deviation)				
Baseline, n=78, 68	65.87 (± 21.4)	58.65 (± 20.7)		
CFB at EOT, n=48, 38	-10.75 (± 21.0)	-7.53 (± 31.4)		

Notes:

[43] - NK CC-Low FAS. Only participants with available data were analyzed.

[44] - NK CC-Low FAS. Only participants with available data were analyzed.

Statistical analyses

No statistical analyses for this end point

Secondary: Tafasitamab serum concentrations

End point title	Tafasitamab serum concentrations
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End point description:

Blood samples were collected for the assessment of serum concentrations of tafasitamab. The Pharmacokinetic (PK) Analysis Set was comprised of all participants who received at least one dose of tafasitamab and had at least one quantifiable serum tafasitamab concentration. 9999=Dispersion cannot be calculated for a single participant. Pharmacokinetic (PK) Analysis Set: all participants who received at least one dose of tafasitamab and had at least one quantifiable serum tafasitamab concentration.

End point type	Secondary
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End point timeframe:

pre-dose: Cycle 1 Days 1, 2, 3, 4, 15; Cycle 2 Days 1, 15; Cycle 3 Days 1, 15, Cycles 4, 5, 6, 7, 9, 11, 13, 15, 17, 19, 21, 23, 25, 27, 29, 31, 33, and 35 Day 1. 1 hour post-dose: Cycle 1 Days 1, 4, 15; Cycle 2 Days 1, 15; Cycle 3 Days 1, 15

End point values	Tafasitamab + bendamustine	Rituximab + bendamustine		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	219 ^[45]	0 ^[46]		
Units: micrograms per milliliter (µg/mL)				
geometric mean (geometric coefficient of variation)				
Cycle 1 Day 1, pre-dose, n=218	0.00 (± 58.8)	()		
Cycle 1 Day 1, 1 hour post-dose, n=40	2.45 (± 37.1)	()		
Cycle 1 Day 2, pre-dose, n=215	2.06 (± 30.2)	()		
Cycle 1 Day 3, pre-dose, n=211	1.63 (± 30.4)	()		
Cycle 1 Day 4, pre-dose, n=209	1.34 (± 33.5)	()		
Cycle 1 Day 4, 1 hour post-dose, n=169	3.84 (± 31.8)	()		
Cycle 1 Day 15, pre-dose, n=198	2.14 (± 39.1)	()		
Cycle 1 Day 15, 1 hour post-dose, n=168	4.68 (± 31.9)	()		
Cycle 2 Day 1, pre-dose, n=197	2.37 (± 55.1)	()		
Cycle 2 Day 1, 1 hour post-dose, n=160	4.80 (± 32.8)	()		
Cycle 2 Day 15, pre-dose, n=174	2.73 (± 42.4)	()		
Cycle 2 Day 15, 1 hour post-dose, n=152	5.20 (± 44.4)	()		
Cycle 3 Day 1, pre-dose, n=174	2.92 (± 43.5)	()		
Cycle 3 Day 1, 1 hour post-dose, n=134	5.38 (± 32.2)	()		
Cycle 3 Day 15, pre-dose, n=159	3.14 (± 38.3)	()		
Cycle 3 Day 15, 1 hour post-dose, n=136	5.54 (± 30.1)	()		
Cycle 4 Day 1, pre-dose, n=150	3.27 (± 5.54)	()		
Cycle 5 Day 1, pre-dose, n=133	1.95 (± 54.6)	()		
Cycle 6 Day 1, pre-dose, n=118	1.60 (± 61.2)	()		
Cycle 7 Day 1, pre-dose, n=91	1.14 (± 75.3)	()		
Cycle 9 Day 1, pre-dose, n=66	1.79 (± 50.3)	()		
Cycle 11 Day 1, pre-dose, n=50	1.73 (± 58.1)	()		
Cycle 13 Day 1, pre-dose, n=46	1.81 (± 66.4)	()		
Cycle 15 Day 1, pre-dose, n=39	1.83 (± 55.8)	()		
Cycle 17 Day 1, pre-dose, n=33	1.86 (± 48.3)	()		
Cycle 19 Day 1, pre-dose, n=30	1.98 (± 36.4)	()		
Cycle 21 Day 1, pre-dose, n=32	1.91 (± 52.0)	()		
Cycle 23 Day 1, pre-dose, n=31	1.88 (± 55.2)	()		
Cycle 25 Day 1, pre-dose, n=7	2.24 (± 37.7)	()		
Cycle 27 Day 1, pre-dose, n=2	1.92 (± 12.6)	()		
Cycle 29 Day 1, pre-dose, n=2	2.05 (± 21.3)	()		
Cycle 31 Day 1, pre-dose, n=2	1.64 (± 23.9)	()		
Cycle 33 Day 1, pre-dose, n=1	1.45 (± 9999)	()		
Cycle 35 Day 1, pre-dose, n=2	1.51 (± 2.7)	()		

Notes:

[45] - PK Analysis Set. Only participants with available data were analyzed.

[46] - PK was not assessed for rixuximab or for bendamustine.

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

up to approximately 7.5 years

Adverse event reporting additional description:

Adverse events have been reported for the Safety Analysis Set, comprised of all participants who received at least one dose of tafasitamab, bendamustine, or rituximab.

Assessment type	Systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	22
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Reporting groups

Reporting group title	Rituximab + bendamustine
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Reporting group description:

Participants received IV rituximab 375 mg/m² in combination with IV bendamustine 90 mg/m² in 28-day cycles for a maximum of 6 cycles. Participants received rituximab on Day 1 of each cycle until disease progression. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Reporting group title	Tafasitamab + bendamustine
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Reporting group description:

Participants received intravenous (IV) tafasitamab 12.0 milligrams per kilogram (mg/kg) in combination with IV bendamustine 90 mg/meters squared (m²) in 28-day cycles for a maximum of 6 cycles. During Cycles 1 to 3, participants received tafasitamab on Days 1, 8, 15, and 22, plus a loading dose on Day 4 of Cycle 1. Participants received bendamustine on either Days 2 and 3 or Days 1 and 2 of Cycles 1 to 6. Participants with an ongoing response of at least partial response at the end of Cycle 6, as per local assessment, continued tafasitamab or rituximab monotherapy per initially allocated treatment until disease progression. Treatment was stopped due to disease progression, unacceptable toxicity, death, or discontinuation for any other reason, whichever came first.

Serious adverse events	Rituximab + bendamustine	Tafasitamab + bendamustine	
Total subjects affected by serious adverse events			
subjects affected / exposed	100 / 225 (44.44%)	115 / 219 (52.51%)	
number of deaths (all causes)	127	129	
number of deaths resulting from adverse events	33	31	
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Acute myeloid leukaemia			
subjects affected / exposed	2 / 225 (0.89%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 2	0 / 1	
Bowen's disease			

subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Basal cell carcinoma			
subjects affected / exposed	1 / 225 (0.44%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 1	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Basosquamous carcinoma			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Breast cancer			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Malignant melanoma			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lung neoplasm malignant			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Lung adenocarcinoma recurrent			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lung adenocarcinoma			
subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neoplasm			

subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Myelodysplastic syndrome			
subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Non-small cell lung cancer recurrent			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Pancreatic carcinoma			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Skin cancer			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Squamous cell carcinoma of skin			
subjects affected / exposed	1 / 225 (0.44%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 1	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Squamous cell carcinoma			
subjects affected / exposed	1 / 225 (0.44%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 1	0 / 5	
deaths causally related to treatment / all	0 / 0	0 / 0	
Tumour necrosis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Tumour pain			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vascular disorders			
Aneurysm			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Aortic stenosis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Deep vein thrombosis			
subjects affected / exposed	2 / 225 (0.89%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypertensive crisis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypotension			
subjects affected / exposed	1 / 225 (0.44%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 1	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Shock haemorrhagic			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	3 / 225 (1.33%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Death			
subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 2	0 / 0	
Discomfort			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Fatigue			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
General physical health deterioration			
subjects affected / exposed	0 / 225 (0.00%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 0	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Influenza like illness			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Illness			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Multiple organ dysfunction syndrome			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Mucosal inflammation			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyrexia			

subjects affected / exposed	5 / 225 (2.22%)	9 / 219 (4.11%)	
occurrences causally related to treatment / all	0 / 5	0 / 12	
deaths causally related to treatment / all	0 / 0	0 / 0	
Immune system disorders			
Haemophagocytic lymphohistiocytosis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory, thoracic and mediastinal disorders			
Atelectasis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bronchial obstruction			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dyspnoea			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Organising pneumonia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pleural effusion			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pleurisy			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Pulmonary oedema			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pulmonary embolism			
subjects affected / exposed	0 / 225 (0.00%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 0	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 1	
Pneumonitis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Psychiatric disorders			
Delirium			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Product issues			
Device malfunction			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Compression fracture			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Fall			
subjects affected / exposed	1 / 225 (0.44%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 1	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 1	
Femoral neck fracture			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Flatback syndrome			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Foot fracture			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Fracture			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hand fracture			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Humerus fracture			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infusion related reaction			
subjects affected / exposed	3 / 225 (1.33%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Wrist fracture			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Angina unstable			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrial fibrillation			
subjects affected / exposed	1 / 225 (0.44%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 2	0 / 3	
deaths causally related to treatment / all	0 / 1	0 / 0	
Atrial flutter			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac arrest			
subjects affected / exposed	1 / 225 (0.44%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 1	0 / 2	
deaths causally related to treatment / all	0 / 1	0 / 2	
Cardiac failure acute			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Cardiac failure congestive			
subjects affected / exposed	0 / 225 (0.00%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 1	
Cardiomyopathy			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Cardiopulmonary failure			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac failure			

subjects affected / exposed	4 / 225 (1.78%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 4	0 / 3	
deaths causally related to treatment / all	0 / 2	0 / 2	
Myocardial infarction			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 1	0 / 1	
Supraventricular tachyarrhythmia			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Tachycardia			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Ventricular tachycardia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (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			
Carpal tunnel syndrome			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cerebral infarction			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cerebrovascular accident			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hemiparesis			

subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Ischaemic stroke			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Limbic encephalitis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neuropathy peripheral			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Peripheral sensorimotor neuropathy			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Post herpetic neuralgia			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Seizure			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sciatica			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Status epilepticus			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Syncope			
subjects affected / exposed	3 / 225 (1.33%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 3	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Toxic encephalopathy			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Blood and lymphatic system disorders			
Febrile neutropenia			
subjects affected / exposed	6 / 225 (2.67%)	4 / 219 (1.83%)	
occurrences causally related to treatment / all	0 / 7	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lymphopenia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Myelosuppression			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenia			
subjects affected / exposed	4 / 225 (1.78%)	5 / 219 (2.28%)	
occurrences causally related to treatment / all	0 / 4	0 / 5	
deaths causally related to treatment / all	0 / 0	0 / 0	
Thrombocytopenia			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Eye disorders			

Macular oedema			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (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	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diarrhoea			
subjects affected / exposed	0 / 225 (0.00%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diverticulum oesophageal			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dysbiosis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dyspepsia			
subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Enterocolitis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastric ulcer haemorrhage			

subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastritis erosive			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Ileus			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Mouth ulceration			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nausea			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pancreatitis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Small intestinal haemorrhage			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Small intestinal obstruction			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Small intestinal perforation			

subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Vomiting			
subjects affected / exposed	3 / 225 (1.33%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatobiliary disorders			
Cholelithiasis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatic cirrhosis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin and subcutaneous tissue disorders			
Drug eruption			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Drug reaction with eosinophilia and systemic symptoms			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pruritus			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	2 / 225 (0.89%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	

Azotaemia	subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
	occurrences causally related to treatment / all	0 / 1	0 / 0	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Chronic kidney disease	subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
	occurrences causally related to treatment / all	0 / 2	0 / 0	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Renal impairment	subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
	occurrences causally related to treatment / all	0 / 1	0 / 1	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Musculoskeletal and connective tissue disorders				
Arthralgia	subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
	occurrences causally related to treatment / all	0 / 0	0 / 1	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Back pain	subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
	occurrences causally related to treatment / all	0 / 0	0 / 1	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Spinal osteoarthritis	subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
	occurrences causally related to treatment / all	0 / 0	0 / 1	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations				
Abdominal infection	subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
	occurrences causally related to treatment / all	0 / 0	0 / 1	
	deaths causally related to treatment / all	0 / 0	0 / 0	
Atypical pneumonia	subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
	occurrences causally related to treatment / all	0 / 0	0 / 1	
	deaths causally related to treatment / all	0 / 0	0 / 1	

Bacteraemia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bacterial sepsis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Appendicitis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bronchitis			
subjects affected / exposed	2 / 225 (0.89%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 3	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
COVID-19			
subjects affected / exposed	6 / 225 (2.67%)	9 / 219 (4.11%)	
occurrences causally related to treatment / all	0 / 6	0 / 9	
deaths causally related to treatment / all	0 / 2	0 / 3	
COVID-19 pneumonia			
subjects affected / exposed	6 / 225 (2.67%)	4 / 219 (1.83%)	
occurrences causally related to treatment / all	0 / 6	0 / 4	
deaths causally related to treatment / all	0 / 6	0 / 4	
Cellulitis			
subjects affected / exposed	2 / 225 (0.89%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Central nervous system infection			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Clostridial sepsis			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Cystitis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cytomegalovirus infection			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Clostridium difficile colitis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Enterococcal sepsis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Device related infection			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Disseminated tuberculosis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastroenteritis viral			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Escherichia sepsis			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Febrile infection			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastroenteritis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Erysipelas			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Haemophilus sepsis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Herpes simplex			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Herpes zoster			
subjects affected / exposed	0 / 225 (0.00%)	4 / 219 (1.83%)	
occurrences causally related to treatment / all	0 / 0	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Herpes zoster disseminated			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Herpes zoster reactivation			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infection			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lower respiratory tract infection			
subjects affected / exposed	3 / 225 (1.33%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 3	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Influenza			
subjects affected / exposed	5 / 225 (2.22%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 5	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Klebsiella infection			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Large intestine infection			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Liver abscess			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenic sepsis			
subjects affected / exposed	0 / 225 (0.00%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 0	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 1	
Oropharyngeal candidiasis			

subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonia			
subjects affected / exposed	17 / 225 (7.56%)	26 / 219 (11.87%)	
occurrences causally related to treatment / all	0 / 17	0 / 29	
deaths causally related to treatment / all	0 / 1	0 / 8	
Pneumonia bacterial			
subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Pharyngitis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Parainfluenzae virus infection			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyelonephritis acute			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyelonephritis			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pulmonary sepsis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory syncytial virus infection			

subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonia streptococcal			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Pneumonia staphylococcal			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Rectal abscess			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin infection			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Septic shock			
subjects affected / exposed	4 / 225 (1.78%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 4	0 / 1	
deaths causally related to treatment / all	0 / 2	0 / 0	
Sepsis			
subjects affected / exposed	5 / 225 (2.22%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 5	0 / 1	
deaths causally related to treatment / all	0 / 2	0 / 1	
Salmonella bacteraemia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Rhinovirus infection			

subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Staphylococcal sepsis			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Varicella zoster virus infection			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urosepsis			
subjects affected / exposed	1 / 225 (0.44%)	2 / 219 (0.91%)	
occurrences causally related to treatment / all	0 / 1	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract infection			
subjects affected / exposed	2 / 225 (0.89%)	3 / 219 (1.37%)	
occurrences causally related to treatment / all	0 / 3	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Upper respiratory tract infection			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Streptococcal sepsis			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Weil's disease			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Metabolism and nutrition disorders			
Decreased appetite			

subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dehydration			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diabetes mellitus			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypercalcaemia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyperkalaemia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypoglycaemia			
subjects affected / exposed	1 / 225 (0.44%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyponatraemia			
subjects affected / exposed	0 / 225 (0.00%)	1 / 219 (0.46%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypokalaemia			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Tumour lysis syndrome			

subjects affected / exposed	2 / 225 (0.89%)	0 / 219 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vitamin B12 deficiency			
subjects affected / exposed	1 / 225 (0.44%)	0 / 219 (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	Rituximab + bendamustine	Tafasitamab + bendamustine	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	199 / 225 (88.44%)	206 / 219 (94.06%)	
Vascular disorders			
Hypertension			
subjects affected / exposed	11 / 225 (4.89%)	13 / 219 (5.94%)	
occurrences (all)	13	16	
Hypotension			
subjects affected / exposed	12 / 225 (5.33%)	17 / 219 (7.76%)	
occurrences (all)	12	18	
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	25 / 225 (11.11%)	40 / 219 (18.26%)	
occurrences (all)	32	51	
Fatigue			
subjects affected / exposed	37 / 225 (16.44%)	56 / 219 (25.57%)	
occurrences (all)	45	78	
Pyrexia			
subjects affected / exposed	35 / 225 (15.56%)	38 / 219 (17.35%)	
occurrences (all)	49	57	
Oedema peripheral			
subjects affected / exposed	17 / 225 (7.56%)	25 / 219 (11.42%)	
occurrences (all)	18	30	
Respiratory, thoracic and mediastinal disorders			

Cough subjects affected / exposed occurrences (all)	25 / 225 (11.11%) 33	41 / 219 (18.72%) 68	
Dyspnoea subjects affected / exposed occurrences (all)	18 / 225 (8.00%) 21	28 / 219 (12.79%) 33	
Productive cough subjects affected / exposed occurrences (all)	6 / 225 (2.67%) 6	13 / 219 (5.94%) 19	
Psychiatric disorders Insomnia subjects affected / exposed occurrences (all)	18 / 225 (8.00%) 21	20 / 219 (9.13%) 22	
Investigations Alanine aminotransferase increased subjects affected / exposed occurrences (all)	10 / 225 (4.44%) 16	11 / 219 (5.02%) 14	
Aspartate aminotransferase increased subjects affected / exposed occurrences (all)	8 / 225 (3.56%) 13	12 / 219 (5.48%) 15	
Blood creatinine increased subjects affected / exposed occurrences (all)	10 / 225 (4.44%) 17	18 / 219 (8.22%) 25	
Weight decreased subjects affected / exposed occurrences (all)	20 / 225 (8.89%) 20	15 / 219 (6.85%) 15	
Injury, poisoning and procedural complications Infusion related reaction subjects affected / exposed occurrences (all)	15 / 225 (6.67%) 15	8 / 219 (3.65%) 8	
Cardiac disorders Tachycardia subjects affected / exposed occurrences (all)	7 / 225 (3.11%) 7	13 / 219 (5.94%) 14	
Nervous system disorders			

Dizziness subjects affected / exposed occurrences (all)	14 / 225 (6.22%) 15	26 / 219 (11.87%) 32	
Headache subjects affected / exposed occurrences (all)	25 / 225 (11.11%) 36	30 / 219 (13.70%) 38	
Blood and lymphatic system disorders			
Anaemia subjects affected / exposed occurrences (all)	48 / 225 (21.33%) 73	60 / 219 (27.40%) 94	
Leukopenia subjects affected / exposed occurrences (all)	14 / 225 (6.22%) 40	21 / 219 (9.59%) 37	
Lymphopenia subjects affected / exposed occurrences (all)	19 / 225 (8.44%) 39	20 / 219 (9.13%) 26	
Neutropenia subjects affected / exposed occurrences (all)	98 / 225 (43.56%) 347	116 / 219 (52.97%) 304	
Thrombocytopenia subjects affected / exposed occurrences (all)	60 / 225 (26.67%) 101	67 / 219 (30.59%) 112	
Gastrointestinal disorders			
Constipation subjects affected / exposed occurrences (all)	41 / 225 (18.22%) 46	50 / 219 (22.83%) 63	
Diarrhoea subjects affected / exposed occurrences (all)	43 / 225 (19.11%) 61	58 / 219 (26.48%) 103	
Dyspepsia subjects affected / exposed occurrences (all)	14 / 225 (6.22%) 15	18 / 219 (8.22%) 24	
Abdominal pain subjects affected / exposed occurrences (all)	15 / 225 (6.67%) 16	31 / 219 (14.16%) 41	
Nausea			

subjects affected / exposed occurrences (all)	62 / 225 (27.56%) 92	77 / 219 (35.16%) 133	
Vomiting subjects affected / exposed occurrences (all)	22 / 225 (9.78%) 38	31 / 219 (14.16%) 43	
Skin and subcutaneous tissue disorders Pruritus subjects affected / exposed occurrences (all)	26 / 225 (11.56%) 32	10 / 219 (4.57%) 18	
Rash subjects affected / exposed occurrences (all)	14 / 225 (6.22%) 18	18 / 219 (8.22%) 22	
Musculoskeletal and connective tissue disorders Arthralgia subjects affected / exposed occurrences (all)	11 / 225 (4.89%) 11	15 / 219 (6.85%) 19	
Back pain subjects affected / exposed occurrences (all)	26 / 225 (11.56%) 30	16 / 219 (7.31%) 19	
Pain in extremity subjects affected / exposed occurrences (all)	9 / 225 (4.00%) 10	15 / 219 (6.85%) 20	
Infections and infestations Pneumonia subjects affected / exposed occurrences (all)	12 / 225 (5.33%) 13	9 / 219 (4.11%) 10	
Nasopharyngitis subjects affected / exposed occurrences (all)	14 / 225 (6.22%) 17	13 / 219 (5.94%) 15	
Upper respiratory tract infection subjects affected / exposed occurrences (all)	21 / 225 (9.33%) 31	18 / 219 (8.22%) 29	
Urinary tract infection subjects affected / exposed occurrences (all)	20 / 225 (8.89%) 31	17 / 219 (7.76%) 21	
Metabolism and nutrition disorders			

Hyperglycaemia			
subjects affected / exposed	15 / 225 (6.67%)	16 / 219 (7.31%)	
occurrences (all)	33	31	
Decreased appetite			
subjects affected / exposed	36 / 225 (16.00%)	47 / 219 (21.46%)	
occurrences (all)	45	63	
Hypokalaemia			
subjects affected / exposed	30 / 225 (13.33%)	28 / 219 (12.79%)	
occurrences (all)	41	48	
Hypomagnesaemia			
subjects affected / exposed	7 / 225 (3.11%)	13 / 219 (5.94%)	
occurrences (all)	10	15	

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
25 November 2015	A summary of changes is not available.
18 December 2015	A summary of changes is not available.
04 March 2016	A summary of changes is not available.
21 November 2016	The primary purpose of the amendment was to clarify and add secondary objectives and endpoints and to update eligibility criteria.
05 April 2017	The primary purpose of this protocol amendment was to update eligibility criteria.
21 July 2017	The primary purpose of this amendment was to outline the continuation of antibody monotherapy treatment in accordance with the original treatment allocation until disease progression and to clarify exclusion criteria.
23 August 2017	The primary purpose of this amendment was to outline the continuation of antibody monotherapy treatment in accordance with the original treatment allocation until disease progression and to clarify exclusion criteria.
14 February 2019	The primary purpose of this amendment was to introduce the co-primary endpoint to evaluate progression-free survival (PFS) in the natural killer cell count (NKCC)-low population in addition to evaluate PFS in the overall population.
22 December 2021	The primary purpose of this amendment was to remove duration of response from the key secondary endpoints for hierarchical statistical testing and to clarify that event-driven primary analysis would not be performed because time-driven final analysis was projected to be reached before the event-driven primary analysis.
02 December 2022	The primary purpose of the amendment was to include details on the final analysis for overall survival.
10 April 2024	The primary purpose of the amendment was to update the sponsorship from MorphoSys AG to Incyte Corporation.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported