# Clinical trial results:
# A Randomized Phase 2 Study of Abemaciclib (LY2835219) versus Docetaxel in Patients with Stage IV Squamous Non-Small Cell Lung Cancer Previously Treated with Platinum-based Chemotherapy

## Summary

| | |
|---|---|
| EudraCT number | 2014-004832-20 |
| Trial protocol | DE ES HU IT PL FR RO |
| Global end of trial date | 29 July 2020 |

### Results information

| | |
|---|---|
| Result version number | v1 (current) |
| This version publication date | 11 August 2021 |
| First version publication date | 11 August 2021 |

## Trial information

### Trial identification

| | |
|---|---|
| Sponsor protocol code | I3Y-MC-JPBX |

### Additional study identifiers

| | |
|---|---|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT02450539 |
| WHO universal trial number (UTN) | - |
| Other trial identifiers | Trial Number: 15806 |

Notes:

### Sponsors

| | |
|---|---|
| Sponsor organisation name | Eli Lilly and Company |
| Sponsor organisation address | Lilly Corporate Center, Indianapolis, IN, United States, 46285 |
| Public contact | Available Mon Fri 9 AM 5 PM EST, Eli Lilly and Company, 1 877CTLilly, |
| Scientific contact | Available Mon Fri 9 AM 5 PM EST, Eli Lilly and Company, 1 8772854559, |

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 | 29 July 2020 |
| Is this the analysis of the primary completion data? | No |

| | |
|---|---|
| Global end of trial reached? | Yes |
| Global end of trial date | 29 July 2020 |
| Was the trial ended prematurely? | No |

Notes:

## General information about the trial

Main objective of the trial:

The main purpose of this study is to evaluate the effectiveness of the study drug known as abemaciclib versus docetaxel in participants with stage IV squamous non-small cell lung cancer (NSCLC) previously treated with platinum-based chemotherapy.

Protection of trial subjects:

This study was conducted in accordance with International Conference on Harmonization (ICH) Good Clinical Practice, and the principles of the Declaration of Helsinki, in addition to following the laws and regulations of the country or countries in which a study is conducted.

Background therapy: -

Evidence for comparator: -

| | |
|---|---|
| Actual start date of recruitment | 06 August 2015 |
| Long term follow-up planned | Yes |
| Long term follow-up rationale | Safety, Efficacy |
| Long term follow-up duration | 23 Months |
| Independent data monitoring committee (IDMC) involvement? | No |

Notes:

## Population of trial subjects

### Subjects enrolled per country

| | |
|---|---|
| Country: Number of subjects enrolled | Romania: 22 |
| Country: Number of subjects enrolled | Hungary: 13 |
| Country: Number of subjects enrolled | United States: 6 |
| Country: Number of subjects enrolled | Ukraine: 26 |
| Country: Number of subjects enrolled | Russian Federation: 13 |
| Country: Number of subjects enrolled | Spain: 14 |
| Country: Number of subjects enrolled | Korea, Republic of: 9 |
| Country: Number of subjects enrolled | Taiwan: 4 |
| Country: Number of subjects enrolled | Poland: 24 |
| Country: Number of subjects enrolled | Italy: 8 |
| Country: Number of subjects enrolled | Australia: 4 |
| Country: Number of subjects enrolled | France: 3 |
| Country: Number of subjects enrolled | Germany: 13 |
| Worldwide total number of subjects | 159 |
| EEA total number of subjects | 97 |

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 | 74 |
| 85 years and over | 0 |

## Subject disposition

### Recruitment

Recruitment details:

No Text Available

### Pre-assignment

Screening details:

Study completers are participants who died due to any cause, were on follow-up at study completion or completed continued access period.

### Period 1

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

### Arms

| | |
|---|---|
| Are arms mutually exclusive? | Yes |
| **Arm title** | Abemaciclib |

Arm description:

200 milligram(mg) abemaciclib given orally every 12 hours (Q12H) on days 1 to 21 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met.

| | |
|---|---|
| Arm type | Experimental |
| Investigational medicinal product name | Abemaciclib |
| Investigational medicinal product code | |
| Other name | LY2835219 |
| Pharmaceutical forms | Capsule, Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

Administered orally.

| | |
|---|---|
| **Arm title** | Docetaxel |

Arm description:

75 milligram per meter squared (mg/m²) docetaxel given intravenously (IV) on day 1 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met.

| | |
|---|---|
| Arm type | Active comparator |
| Investigational medicinal product name | Docetaxel |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Infusion |
| Routes of administration | Intravenous use |

Dosage and administration details:

Administered IV.

| **Number of subjects in period 1** | Abemaciclib | Docetaxel |
|---|---|---|
| Started | 106 | 53 |
| Received at least one dose of study drug | 106 | 52 |
| Completed | 90 | 46 |
| Not completed | 16 | 7 |
| Consent withdrawn by subject | 12 | 6 |
| Lost to follow-up | 4 | 1 |

## Baseline characteristics

| Reporting groups | |
|---|---|
| Reporting group title | Abemaciclib |
| Reporting group description: | |
| 200 milligram(mg) abemaciclib given orally every 12 hours (Q12H) on days 1 to 21 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met. | |
| Reporting group title | Docetaxel |
| Reporting group description: | |
| 75 milligram per meter squared (mg/m²) docetaxel given intravenously (IV) on day 1 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met. | |

| Reporting group values | Abemaciclib | Docetaxel | Total |
|---|---|---|---|
| Number of subjects | 106 | 53 | 159 |
| Age categorical<br>Units: Subjects | | | |
| Age continuous<br>Units: years | | | |
| arithmetic mean | 63.1 | 64.5 | |
| standard deviation | ± 7.8 | ± 7.1 | - |
| Gender categorical<br>Units: Subjects | | | |
| Female | 16 | 9 | 25 |
| Male | 90 | 44 | 134 |
| Ethnicity (NIH/OMB)<br>Units: Subjects | | | |
| Hispanic or Latino | 5 | 3 | 8 |
| Not Hispanic or Latino | 84 | 48 | 132 |
| Unknown or Not Reported | 17 | 2 | 19 |
| Race (NIH/OMB)<br>Units: Subjects | | | |
| American Indian or Alaska Native | 0 | 0 | 0 |
| Asian | 10 | 3 | 13 |
| Native Hawaiian or Other Pacific Islander | 0 | 0 | 0 |
| Black or African American | 0 | 0 | 0 |
| White | 96 | 50 | 146 |
| More than one race | 0 | 0 | 0 |
| Unknown or Not Reported | 0 | 0 | 0 |
| Region of Enrollment<br>Units: Subjects | | | |
| Romania | 18 | 4 | 22 |
| Hungary | 7 | 6 | 13 |
| United States | 4 | 2 | 6 |
| Ukraine | 13 | 13 | 26 |
| Russia | 11 | 2 | 13 |
| Spain | 8 | 6 | 14 |
| South Korea | 8 | 1 | 9 |
| Taiwan | 2 | 2 | 4 |

| | | | |
|---|---|---|---|
| Poland | 14 | 10 | 24 |
| Italy | 7 | 1 | 8 |
| Australia | 4 | 0 | 4 |
| France | 1 | 2 | 3 |
| Germany | 9 | 4 | 13 |
| Eastern Cooperative Oncology Group (ECOG) Performance Status (PS) | | | |
| Participants were stratified at randomization according to the following: Eastern Cooperative Oncology Group (ECOG) PS (0 vs. 1); number of prior therapies (received only platinum-based therapy vs. platinum-based therapy plus immune checkpoint inhibitor) and time since initiation of first line therapy (<=9 months vs >9 months). The ECOG Performance Status:0 - Fully active, able to carry on all pre-disease performance without restriction,1 - Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature. | | | |
| Units: Subjects | | | |
| Zero (0) | 22 | 7 | 29 |
| One (1) | 84 | 46 | 130 |

## End points

### End points reporting groups

| | |
|---|---|
| Reporting group title | Abemaciclib |
| Reporting group description: | |
| 200 milligram(mg) abemaciclib given orally every 12 hours (Q12H) on days 1 to 21 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met. | |
| Reporting group title | Docetaxel |
| Reporting group description: | |
| 75 milligram per meter squared (mg/m²) docetaxel given intravenously (IV) on day 1 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met. | |

### Primary: Progression Free Survival (PFS)

| | |
|---|---|
| End point title | Progression Free Survival (PFS) |
| End point description: | |
| PFS was defined as time from the date of randomization to the date of investigator-determined disease progression as defined by Response Evaluation Criteria in Solid Tumors (RECIST v1.1) or death from any cause. Progressive disease (PD) was defined as at least a 20% increase in the sum of the longest diameters (LD) of target lesions, with reference the smallest sum on study and an absolute increase of at least 5mm, or unequivocal progression of non-target lesions, or 1 or more new lesions. If a participant was not known to have died or have objective progression, PFS time will be censored at the day of their last radiographic tumor assessment (if available) or date of randomization if no post baseline radiographic assessment is available.<br><br>Analysis Population Description (APD): All participants according to the treatment group to which they were randomized. Participants censored: Abemaciclib=19 and Docetaxel= 15. | |
| End point type | Primary |
| End point timeframe: | |
| Baseline to Objective Progression or Death from Any Cause ( Up To 6 Months) | |

| End point values | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 106 | 53 | | |
| Units: months | | | | |
| median (confidence interval 95%) | 2.53 (1.68 to 2.89) | 4.21 (2.79 to 5.65) | | |

### Statistical analyses

| | |
|---|---|
| **Statistical analysis title** | Progression Free Survival (PFS) |
| Statistical analysis description: | |
| Stratified by baseline ECOG performance status (0 vs 1), number of Prior Therapies (received only platinum-based therapy vs Received platinum-based Therapy plus Immune Checkpoint Inhibitor), and time since initiation of first line therapy (<=9 months vs >9 months). | |
| Comparison groups | Abemaciclib v Docetaxel |

| | |
|---|---|
| Number of subjects included in analysis | 159 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | = 0.0068 |
| Method | Stratified log-rank test. |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.765 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 1.165 |
| upper limit | 2.672 |

## Secondary: Pharmacokinetics (PK): Clearance of Abemaciclib

| | |
|---|---|
| End point title | Pharmacokinetics (PK): Clearance of Abemaciclib[1] |

End point description:

Pharmacokinetics (PK): Clearance of Abemaciclib

Analysis Population Description: All participants who received abemaciclib and had evaluable PK data.

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

End point timeframe:

Cycle (C) 1 Day (D) 1: Pre-dose; C1D8: 4 and 7 hr Post-dose; C2D1: Pre-dose and 3 hr Post-dose; C3 and C4 D1:Pre-dose

Notes:

[1] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.
Justification: Per protocol, statistical analysis (comparison analysis) were not planned for this outcome measure.

| End point values | Abemaciclib | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 102 | | | |
| Units: Liters/hour (L/h) | | | | |
| geometric mean (geometric coefficient of variation) | 21.3 (± 36) | | | |

## Statistical analyses

No statistical analyses for this end point

## Secondary: PK: Volume of Distribution of Abemaciclib

| | |
|---|---|
| End point title | PK: Volume of Distribution of Abemaciclib[2] |

End point description:

PK: Volume of Distribution of Abemaciclib

Analysis Population Description: All participants who received Abemaciclib and had evaluable PK data.

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

End point timeframe:

Cycle (C) 1 Day (D) 1: Pre-dose; C1D8: 4 and 7 hr Post-dose; C2D1: Pre-dose and 3 hr Post-dose; C3

and C4 D1:Pre-dose

Notes:

[2] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.
Justification: Per protocol, statistical analysis (comparison analysis) were not planned for this outcome measure.

| **End point values** | Abemaciclib | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 102 | | | |
| Units: Liters (L) | | | | |
| geometric mean (geometric coefficient of variation) | 769 (± 51) | | | |

## Statistical analyses

No statistical analyses for this end point

## Secondary: Overall Survival (OS)

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

End point description:

OS was defined as the time from randomization to the date of death due to any cause. For each participant who is not known to have died as the data inclusion cutoff date for overall survival analysis, OS time was censored on the last date the participant is known to be alive.

Analysis Population Description: All participants according to the treatment group to which they were randomized. Participants censored: Abemaciclib =35 and Docetaxel= 17.

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

End point timeframe:

Baseline to Date of Death from Any Cause (Up To 27 Months)

| **End point values** | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 106 | 53 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 7 (5.00 to 8.78) | 12.39 (7.13 to 15.98) | | |

## Statistical analyses

| **Statistical analysis title** | Overall Survival |
|---|---|

Statistical analysis description:

Stratified by baseline ECOG performance status (0 vs 1), number of Prior Therapies (received only platinum-based therapy vs Received platinum-based Therapy plus Immune Checkpoint Inhibitor), and time since initiation of first line therapy (<=9 months vs >9 months).]

| Comparison groups | Abemaciclib v Docetaxel |
|---|---|

| | |
|---|---|
| Number of subjects included in analysis | 159 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | = 0.175 |
| Method | Stratified log-rank test |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.333 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.879 |
| upper limit | 2.022 |

## Secondary: Percentage of Participants With Complete Response (CR) or Partial Response (PR) (Overall Response Rate [ORR])

| | |
|---|---|
| End point title | Percentage of Participants With Complete Response (CR) or Partial Response (PR) (Overall Response Rate [ORR]) |

End point description:

Overall response was defined as the percentage of randomized participants achieving a best overall response (BoR) of complete response (CR) or partial response (PR) using Response Evaluation Criteria In Solid Tumors (RECIST v1.1) criteria. Participants with unevaluable or unknown response status are considered nonresponders. Complete response (CR) is defined as the disappearance of all target and non-target lesions and no appearance of new lesions. Partial response (PR) is defined as at least a 30% decrease in the sum of the longest diameters (LD) of target lesions (taking as reference the baseline sum LD), no progression of non-target lesions and no appearance of new lesions.

Analysis Population Description: All randomized participants.

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

End point timeframe:

Baseline to Objective Progression (Up To 6 Months)

| End point values | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 106 | 53 | | |
| Units: percentage participants | | | | |
| number (not applicable) | 2.8 | 20.8 | | |

### Statistical analyses

| Statistical analysis title | Overall Response Rate (ORR) |
|---|---|
| Comparison groups | Abemaciclib v Docetaxel |

| | |
|---|---|
| Number of subjects included in analysis | 159 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[3] |
| Parameter estimate | Rate Difference |
| Point estimate | -17.9 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -29.3 |
| upper limit | -6.6 |

Notes:

[3] - Confidence intervals are based on the normal approximation to the binomial.

## Secondary: Percentage of Participants who Exhibit Stable Disease (SD) or Confirmed Response (CR) or Partial Response (PR): Disease Control Rate (DCR)

| | |
|---|---|
| End point title | Percentage of Participants who Exhibit Stable Disease (SD) or Confirmed Response (CR) or Partial Response (PR): Disease Control Rate (DCR) |

End point description:

DCR is the percentage of randomized participants who achieved a complete response, partial response or stable disease using Response Evaluation Criteria In Solid Tumors (RECIST v1.1) criteria. Complete response (CR) is defined as the disappearance of all target and non-target lesions, and no appearance of new lesions. Partial response (PR) is defined as at least a 30% decrease in the sum of longest diameters (LD) of target lesions (taking as reference the baseline sum LD), no progression of non-target lesions and no appearance of new lesions. Stable disease was neither sufficient shrinkage to qualify for PR nor sufficient increase to qualify for PD for target lesions, no progression of non-target lesions, and no appearance of new lesions.

Analysis Population Description: All randomized participants.

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

End point timeframe:

Baseline through Measured Progressive Disease or Death Due to Any Cause (Up To 6 Months)

| **End point values** | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 106 | 53 | | |
| Units: percentage participants | | | | |
| number (not applicable) | 50.9 | 64.2 | | |

### Statistical analyses

| **Statistical analysis title** | Disease Control Rate (DCR) |
|---|---|
| Comparison groups | Abemaciclib v Docetaxel |

| | |
|---|---|
| Number of subjects included in analysis | 159 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| Parameter estimate | Stratified Log-rank test |
| Point estimate | -13.2 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -29.2 |
| upper limit | 2.8 |

## Secondary: Time to Worsening of Eastern Cooperative Oncology Group (ECOG) Performance Status of >/=2

| | |
|---|---|
| End point title | Time to Worsening of Eastern Cooperative Oncology Group (ECOG) Performance Status of >/=2 |

End point description:

Worsening of ECOG performance status is the duration from randomization to ECOG PFS of >/=2. Participants without an ECOG PFS >/=2 are censored at last adequate post baseline ECOG Performance Status or randomization date (whichever is last).
The ECOG Performance Status:0 - Fully active, able to carry on all pre-disease performance without restriction,1 - Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature, 2 - Ambulatory and capable of all selfcare but unable to carry out any work activities. Up and about more than 50% of waking hours,3 - Capable of only limited selfcare, confined to bed or chair more than 50% of waking hours, 4 - Completely disabled. Cannot carry on any selfcare. Totally confined to bed or chair, 5 - Dead.

Analysis Population Description: All randomized participants. Participants censored: Abemaciclib =93 and Docetaxel= 43.

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

End point timeframe:

Randomization to ECOG PFS of >/=2 (Up To 11.5 Months)

| **End point values** | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 106[4] | 53[5] | | |
| Units: months | | | | |
| median (confidence interval 95%) | 9999 (6.58 to 9999) | 10.52 (4.64 to 9999) | | |

Notes:

[4] - 9999=NA. Due to insufficient data to support the analysis and the results.

[5] - 9999=NA. Due to insufficient data to support the analysis and the results.

### Statistical analyses

| **Statistical analysis title** | Time to Worsening ECOG Performance Status of >/=2 |
|---|---|

Statistical analysis description:

Stratification factors are baseline ECOG performance status (0 vs 1), Number of Prior Therapies (received only platinum-based therapy vs Received platinum-based Therapy plus Immune Checkpoint Inhibitor), and time since initiation of first line therapy (<=9 months vs >9 months).

| | |
|---|---|
| Comparison groups | Abemaciclib v Docetaxel |

| | |
|---|---|
| Number of subjects included in analysis | 159 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[6] |
| P-value | = 0.7039 |
| Method | Stratified Log Rank |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.184 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.502 |
| upper limit | 2.792 |

Notes:

[6] - Stratification factors are baseline ECOG performance status (0 vs 1), Number of Prior Therapies (received only platinum-based therapy vs Received platinum-based Therapy plus Immune Checkpoint Inhibitor), and time since initiation of first line therapy (<=9 months vs >9 months).

## Secondary: Change from Baseline in MD Anderson Symptom Inventory-Lung Cancer (MDASI-LC) Scores

| | |
|---|---|
| End point title | Change from Baseline in MD Anderson Symptom Inventory-Lung Cancer (MDASI-LC) Scores |

End point description:

MDASI-LC included 33 items:6 interference and 27 symptom(3 lung-cancer (LC),8 brain tumor (BT),and 3 study-specific(headache,diarrhea, and rash).Analyzed endpoints were 9 constructs:3 single-items (headache,diarrhea,and rash) and 6 composites(interference+core,LC,core+LC,BT, and core+LC worst 5 baseline).Data for all 9 constructs were collected by an 11-point numeric rating scale anchored at 0(not present or does not interfere) and 10(as bad as you can imagine or interfered completely).The measurement range was 10 (maximum score–minimum score). Between-group difference in regression-predicted change from baseline were estimated for each specified construct. MMRM models included independent variables treatment,visit, treatment*visit,and baseline score. Group-level negative change from baseline indicated group improvement.

All randomized participants for cycles which at least 25% of participants in each arm have a score.

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

End point timeframe:

Baseline through End of Study (Up To 6 Months)

| **End point values** | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 87 | 43 | | |
| Units: units on a scale | | | | |
| least squares mean (standard error) | | | | |
| Headache | 0.19 (± 0.14) | 0.01 (± 0.18) | | |
| Diarrhea | 1.01 (± 0.18) | 0.15 (± 0.23) | | |
| Mean core symptom severity | 0.53 (± 0.14) | 0.00 (± 0.18) | | |
| Mean interference | 0.50 (± 0.20) | 0.18 (± 0.27) | | |
| Mean lung cancer symptom severity | 0.20 (± 0.12) | -0.19 (± 0.15) | | |
| Mean core plus lung cancer symptom severity | 0.47 (± 0.13) | -0.04 (± 0.17) | | |
| Mean brain tumor symptom severity | 0.19 (± 0.11) | 0.13 (± 0.15) | | |
| Mean core plus lung worst 5 symptoms severity | -0.25 (± 0.17) | -0.94 (± 0.22) | | |

| | | | | |
|---|---|---|---|---|
| Rash | 0.28 (± 0.14) | 0.18 (± 0.17) | | |

## Statistical analyses

| **Statistical analysis title** | MDASI-LC Scores - Headache |
|---|---|
| Statistical analysis description:<br>Headache | |
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[7] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.18 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -0.27 |
| upper limit | 0.62 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.23 |

Notes:
[7] - Headache

| **Statistical analysis title** | MDASI-LC Scores- Diarrhea |
|---|---|
| Statistical analysis description:<br>Diarrhea | |
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[8] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.86 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.29 |
| upper limit | 1.43 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.29 |

Notes:
[8] - Diarrhea

| **Statistical analysis title** | MDASI-LC Scores - Mean core symptom severity |
|---|---|
| Statistical analysis description:<br>Mean core symptom severity | |
| Comparison groups | Abemaciclib v Docetaxel |

| | |
|---|---|
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[9] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.53 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.09 |
| upper limit | 0.98 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.22 |

Notes:

[9] - Mean core symptom severity

| **Statistical analysis title** | MDASI-LC Scores - Mean interference |
|---|---|

Statistical analysis description:

Mean interference

| | |
|---|---|
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[10] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.32 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -0.35 |
| upper limit | 0.99 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.34 |

Notes:

[10] - Mean interference

| **Statistical analysis title** | MDASI-LC Score - Mean lung cancer symptom severity |
|---|---|

Statistical analysis description:

Mean lung cancer symptom severity

| | |
|---|---|
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[11] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.39 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0 |
| upper limit | 0.77 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.19 |

Notes:
[11] - Mean lung cancer symptom severity

| **Statistical analysis title** | MDASI-LC Scores - Core plus lung cancer symptom |
|---|---|
| Statistical analysis description: | |
| Mean core plus lung cancer symptom severity | |
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[12] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.52 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.1 |
| upper limit | 0.93 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.21 |

Notes:
[12] - Mean core plus lung cancer symptom severity

| **Statistical analysis title** | MDASI-LC Scores - Brain tumor symptom |
|---|---|
| Statistical analysis description: | |
| Mean brain tumor symptom severity | |
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[13] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.06 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -0.13 |
| upper limit | 0.43 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.19 |

Notes:
[13] - Mean brain tumor symptom severity

| **Statistical analysis title** | MDASI-LC Scores - Lung worst 5 symptoms severity |
|---|---|
| Statistical analysis description: | |
| Mean core plus lung worst 5 symptoms severity | |
| Comparison groups | Abemaciclib v Docetaxel |

| | |
|---|---|
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[14] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.69 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.14 |
| upper limit | 1.24 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.28 |

Notes:

[14] - Mean core plus lung worst 5 symptoms severity

| **Statistical analysis title** | MDASI-LC Scores - Rash |
|---|---|

Statistical analysis description:

Rash

| | |
|---|---|
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[15] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | 0.09 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -0.34 |
| upper limit | 0.53 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.22 |

Notes:

[15] - Rash

## Secondary: Change From Baseline in EuroQol 5-Dimensional 5-Level (EQ-5D-5L) Questionnaire EQ VAS Overall Self-rated Health Score

| End point title | Change From Baseline in EuroQol 5-Dimensional 5-Level (EQ-5D-5L) Questionnaire EQ VAS Overall Self-rated Health Score |
|---|---|

End point description:

The EQ-5D-5L is a standardized instrument for use as a measure of self-reported health status. Overall self-rated health was measured with a vertical 20 cm visual analog scale (VAS) anchored at 0 (worst health) and ranged through 100 (best health). Between-group differences in regression-predicted change from baseline score were estimated for VAS scores. MMRM models included independent variables treatment, visit, treatment*visit, and baseline score. Group-level negative change from baseline indicated group improvement.

Analysis Population Description: All randomized participants for cycles which at least 25% of participants in each arm have a score.

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

End point timeframe:

Baseline to Measured Progressive Disease (Up To 6 Months)

| End point values | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 88 | 42 | | |
| Units: units on a scale | | | | |
| least squares mean (standard error) | -5.49 (± 1.28) | -2.36 (± 1.63) | | |

**Statistical analyses**

| Statistical analysis title | Change From Baseline in EQ5D5L VAS |
|---|---|
| Statistical analysis description: EQ VAS Overall Self-rated Health Score | |
| Comparison groups | Abemaciclib v Docetaxel |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[16] |
| Parameter estimate | Mean difference (final values) |
| Point estimate | -3.13 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -7.26 |
| upper limit | 1 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 2.07 |

Notes:

[16] - EQ VAS Overall Self-rated Health Score

## Secondary: Change From Baseline in EuroQol 5-Dimensional 5-Level (EQ-5D-5L) Questionnaire Index Value

| End point title | Change From Baseline in EuroQol 5-Dimensional 5-Level (EQ-5D-5L) Questionnaire Index Value |
|---|---|

End point description:

There are 5 response levels on a good-to-bad continuum of 1-5 corresponding to none, slight, moderate, severe, and extreme/unable to.The EuroQol-developed crosswalk method was used to convert the EQ-5D-5L,using UK weights,health dimensions(mobility,self-care,usual activities,pain/discomfort, and anxiety/depression) into a single index value;the dimensions are not separately scored.The index is marked missing when ≥1 dimensions are missing.The index scores for the response patterns were anchored on full health to dead with negative values assigned to response patterns/health states considered worse than death.The best pattern is assigned the index value of 1.0; the worst pattern is assigned an index value of -0.594. Between-group differences in regression-predicted change from baseline score were estimated for the index .MMRM models included independent variables treatment, visit, treatment*visit, and baseline score.Group-level negative change from baseline indicated group improvement.

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

End point timeframe:

Baseline to Measured Progressive Disease (Up To 6 Months)

Analysis population description: All randomized participants for cycles which at least 25% of participants in each arm have a score.

| **End point values** | Abemaciclib | Docetaxel | | |
|---|---|---|---|---|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 88 | 42 | | |
| Units: units on a scale | | | | |
| least squares mean (standard error) | -0.05 (± 0.02) | -0.01 (± 0.02) | | |

**Statistical analyses**

| **Statistical analysis title** | Change From Baseline in EQ-5D-5L Index Value |
|---|---|
| Statistical analysis description:<br>EQ-5D-5L Index Value | |
| Comparison groups | Docetaxel v Abemaciclib |
| Number of subjects included in analysis | 130 |
| Analysis specification | Pre-specified |
| Analysis type | superiority[17] |
| Parameter estimate | Median difference (final values) |
| Point estimate | -0.04 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -0.1 |
| upper limit | 0.01 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.03 |

Notes:

[17] - EQ-5D-5L Index Value

## Adverse events

| Adverse events information | |
|---|---|
| Timeframe for reporting adverse events: | |
| Baseline Up To 5 Years | |
| Adverse event reporting additional description: | |
| All randomized participants who received at least one dose of study drug. | |
| Assessment type | Systematic |

| Dictionary used | |
|---|---|
| Dictionary name | MedDRA |
| Dictionary version | 23.1 |

| Reporting groups | |
|---|---|
| Reporting group title | Abemaciclib |
| Reporting group description: | |
| 200 milligram(mg) abemaciclib given orally every 12 hours (Q12H) on days 1 to 21 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met. | |
| Reporting group title | Docetaxel |
| Reporting group description: | |
| 75 milligram per meter squared (mg/m²) docetaxel given intravenously (IV) on day 1 of each 21 day cycle. Participants may continue to receive treatment until discontinuation criteria are met. | |

| Serious adverse events | Abemaciclib | Docetaxel | |
|---|---|---|---|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 29 / 106 (27.36%) | 17 / 52 (32.69%) | |
| number of deaths (all causes) | 71 | 35 | |
| number of deaths resulting from adverse events | 6 | 2 | |
| Vascular disorders | | | |
| embolism | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 3 / 106 (2.83%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| hypotension | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (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 | | | |
| general physical health deterioration | | | |
| alternative dictionary used: | | | |

| | | | |
|---|---|---|---|
| MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| pyrexia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | |
| Immune system disorders | | | |
| anaphylactic reaction | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| dyspnoea | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| hypoxia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| laryngeal haemorrhage | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| pleural effusion | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| pneumonitis | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 3 / 106 (2.83%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 3 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| pulmonary haemorrhage | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Investigations | | | |
| blood creatinine increased | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| international normalised ratio increased | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Injury, poisoning and procedural complications | | | |
| ankle fracture | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| wrist fracture | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac disorders | | | |
| cardiovascular insufficiency | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 1 / 1 | 0 / 0 | |
| Nervous system disorders | | | |
| cerebrovascular accident | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| dizziness | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| syncope | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Blood and lymphatic system disorders | | | |
| anaemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 2 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| febrile neutropenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 0 / 106 (0.00%) | 3 / 52 (5.77%) | |
| occurrences causally related to treatment / all | 0 / 0 | 3 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| leukopenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 2 / 52 (3.85%) | |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| neutropenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 4 / 52 (7.69%) | |
| occurrences causally related to treatment / all | 1 / 1 | 4 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| pancytopenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal disorders | | | |
| constipation | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| diarrhoea | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 2 / 106 (1.89%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 2 / 2 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| gastric haemorrhage | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| nausea | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 1 / 1 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| oesophageal fistula | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal and urinary disorders | | | |
| acute kidney injury | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| renal failure | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 2 / 106 (1.89%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Musculoskeletal and connective tissue disorders | | | |
| muscular weakness | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Infections and infestations | | | |
| bronchitis | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| lung infection | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 6 / 106 (5.66%) | 4 / 52 (7.69%) | |
| occurrences causally related to treatment / all | 2 / 6 | 2 / 4 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| myelitis | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| pleural infection | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| salmonella bacteraemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| upper respiratory tract infection | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| wound infection | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 0 / 106 (0.00%) | 1 / 52 (1.92%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|---|---|---|
| Metabolism and nutrition disorders | | | |
| dehydration | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| hypokalaemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| hyponatraemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 0 / 52 (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** | Abemaciclib | Docetaxel | |
|---|---|---|---|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 94 / 106 (88.68%) | 43 / 52 (82.69%) | |
| Investigations | | | |
| blood alkaline phosphatase increased | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 3 / 52 (5.77%) | |
| occurrences (all) | 1 | 3 | |
| blood creatinine increased | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 13 / 106 (12.26%) | 1 / 52 (1.92%) | |
| occurrences (all) | 17 | 6 | |
| weight decreased | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 12 / 106 (11.32%) | 6 / 52 (11.54%) | |
| occurrences (all) | 13 | 6 | |
| Vascular disorders | | | |
| hypotension | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 8 / 106 (7.55%) | 0 / 52 (0.00%) | |
| occurrences (all) | 8 | 0 | |
| Nervous system disorders | | | |
| dizziness | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 8 / 106 (7.55%) | 3 / 52 (5.77%) | |
| occurrences (all) | 10 | 3 | |
| headache | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 7 / 106 (6.60%) | 2 / 52 (3.85%) | |
| occurrences (all) | 7 | 2 | |
| neuropathy | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 3 / 106 (2.83%) | 7 / 52 (13.46%) | |
| occurrences (all) | 3 | 9 | |
| Blood and lymphatic system disorders | | | |
| anaemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 41 / 106 (38.68%) | 12 / 52 (23.08%) | |
| occurrences (all) | 47 | 18 | |
| leukopenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 10 / 106 (9.43%) | 14 / 52 (26.92%) | |
| occurrences (all) | 10 | 48 | |
| neutropenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 18 / 106 (16.98%) | 26 / 52 (50.00%) | |
| occurrences (all) | 20 | 76 | |
| thrombocytopenia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 27 / 106 (25.47%) | 2 / 52 (3.85%) | |
| occurrences (all) | 35 | 2 | |
| General disorders and administration site conditions | | | |
| fatigue | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 30 / 106 (28.30%) | 7 / 52 (13.46%) | |
| occurrences (all) | 34 | 10 | |
| non-cardiac chest pain | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 8 / 106 (7.55%) | 2 / 52 (3.85%) | |
| occurrences (all) | 9 | 2 | |
| pain | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 3 / 52 (5.77%) | |
| occurrences (all) | 1 | 3 | |
| pyrexia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 5 / 106 (4.72%) | 4 / 52 (7.69%) | |
| occurrences (all) | 5 | 4 | |
| Gastrointestinal disorders | | | |
| abdominal pain | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 8 / 106 (7.55%) | 3 / 52 (5.77%) | |
| occurrences (all) | 10 | 3 | |
| diarrhoea | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 41 / 106 (38.68%) | 5 / 52 (9.62%) | |
| occurrences (all) | 67 | 5 | |
| nausea | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 33 / 106 (31.13%) | 7 / 52 (13.46%) | |
| occurrences (all) | 35 | 10 | |
| vomiting | | | |
| alternative dictionary used: MedDRA 23.1 | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 9 / 106 (8.49%) | 3 / 52 (5.77%) | |
| occurrences (all) | 11 | 3 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| cough | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 11 / 106 (10.38%) | 2 / 52 (3.85%) | |
| occurrences (all) | 11 | 2 | |
| dyspnoea | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 19 / 106 (17.92%) | 6 / 52 (11.54%) | |
| occurrences (all) | 20 | 6 | |
| laryngeal haemorrhage | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 9 / 106 (8.49%) | 1 / 52 (1.92%) | |
| occurrences (all) | 9 | 1 | |
| productive cough | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 6 / 106 (5.66%) | 2 / 52 (3.85%) | |
| occurrences (all) | 7 | 2 | |
| Skin and subcutaneous tissue disorders | | | |
| alopecia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 1 / 106 (0.94%) | 7 / 52 (13.46%) | |
| occurrences (all) | 1 | 8 | |
| Musculoskeletal and connective tissue disorders | | | |
| back pain | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 2 / 106 (1.89%) | 3 / 52 (5.77%) | |
| occurrences (all) | 2 | 3 | |
| muscular weakness | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 10 / 106 (9.43%) | 7 / 52 (13.46%) | |
| occurrences (all) | 12 | 8 | |
| Metabolism and nutrition disorders | | | |

| | | | |
|---|---|---|---|
| decreased appetite | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 17 / 106 (16.04%) | 7 / 52 (13.46%) | |
| occurrences (all) | 19 | 7 | |
| hypokalaemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 8 / 106 (7.55%) | 1 / 52 (1.92%) | |
| occurrences (all) | 10 | 2 | |
| hyponatraemia | | | |
| alternative dictionary used: MedDRA 23.1 | | | |
| subjects affected / exposed | 7 / 106 (6.60%) | 1 / 52 (1.92%) | |
| occurrences (all) | 9 | 1 | |

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|---|---|
| 08 February 2019 | Protocol Amendment a:<br>Added the dose modification guidance for hepatic enzyme alterations. |
| 12 February 2020 | Protocol Amendment b:<br>Updates for dose adjustments for Interstitial Lung Disease (ILD)/Pneumonitis are safety-related. |

Notes:

### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

None reported