

**Clinical trial results:****A 26-Week Randomized, Open-label, Active Controlled, Parallel-group, Study Assessing the Efficacy and Safety of the Insulin Glargine/Lixisenatide Fixed Ratio Combination in Adults With Type 2 Diabetes Inadequately Controlled on GLP-1 Receptor Agonist and Metformin (Alone or With Pioglitazone and/or SGLT2 Inhibitors), Followed by a Fixed Ratio Combination Single-arm 26-Week Extension Period****Summary**

| | |
|--------------------------|------------------|
| EudraCT number | 2014-004850-32 |
| Trial protocol | SK EE ES DE IT |
| Global end of trial date | 17 November 2018 |

Results information

| | |
|--------------------------------|------------------|
| Result version number | v1 (current) |
| This version publication date | 02 December 2019 |
| First version publication date | 02 December 2019 |

Trial information**Trial identification**

| | |
|-----------------------|----------|
| Sponsor protocol code | EFC13794 |
|-----------------------|----------|

Additional study identifiers

| | |
|------------------------------------|-----------------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT02787551 |
| WHO universal trial number (UTN) | U1111-1168-4639 |
| Other trial identifiers | STUDY NAME: LixiLan-G |

Notes:

Sponsors

| | |
|------------------------------|------------------------------------------------------------------------------------------|
| Sponsor organisation name | Sanofi aventis recherche & développement |
| Sponsor organisation address | 1 avenue Pierre Brossolette, Chilly--Mazarin, France, 91380 |
| Public contact | Trial Transparency Team, Sanofi aventis recherche & développement, Contact-US@sanofi.com |
| Scientific contact | Trial Transparency Team, Sanofi aventis recherche & développement, Contact-US@sanofi.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 | 13 December 2018 |
| Is this the analysis of the primary completion data? | No |
| Global end of trial reached? | Yes |
| Global end of trial date | 17 November 2018 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

To demonstrate the superiority of the insulin glargine/lixisenatide fixed ratio combination (FRC) versus GLP-1 receptor agonist (GLP-1 RA) in hemoglobin A1c (HbA1c) change from Baseline to Week 26.

Protection of trial subjects:

Subjects were fully informed of all pertinent aspects of the clinical trial as well as the possibility to discontinue at any time in language and terms appropriate for the subject and considering the local culture. During the course of the trial, subjects were provided with individual subject cards indicating the nature of the trial the subject was participating, contact details and any information needed in the event of a medical emergency. Collected personal data and human biological samples were processed in compliance with the Sanofi-Aventis Group Personal Data Protection Charter ensuring that the Group abides by the laws governing personal data protection in force in all countries in which it operates.

Background therapy:

Oral anti-diabetic (OAD) treatment metformin, pioglitazone, and sodium-glucose co-transporter 2 (SGLT2) inhibitors (canagliflozin, dapagliflozin, empagliflozin) was used as background therapy.

Evidence for comparator: -

| | |
|-----------------------------------------------------------|--------------|
| Actual start date of recruitment | 06 July 2016 |
| Long term follow-up planned | No |
| Independent data monitoring committee (IDMC) involvement? | No |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|--------------------|
| Country: Number of subjects enrolled | Romania: 62 |
| Country: Number of subjects enrolled | Slovakia: 75 |
| Country: Number of subjects enrolled | Spain: 48 |
| Country: Number of subjects enrolled | Estonia: 13 |
| Country: Number of subjects enrolled | Germany: 20 |
| Country: Number of subjects enrolled | Canada: 23 |
| Country: Number of subjects enrolled | Israel: 17 |
| Country: Number of subjects enrolled | Italy: 33 |
| Country: Number of subjects enrolled | United States: 223 |
| Worldwide total number of subjects | 514 |
| EEA total number of subjects | 251 |

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) | 334 |
| From 65 to 84 years | 180 |
| 85 years and over | 0 |

Subject disposition

Recruitment

Recruitment details:

The study was conducted at 112 sites in 9 countries. A total of 840 subjects were screened between 06 July 2016 and 01 November 2017, of which 326 were screen failures. Screen failures were mainly due to glycated hemoglobin (HbA1c) level lesser than (<) 7% or more than (>) 9% at screening visit.

Pre-assignment

Screening details:

A total of 514 subjects were randomized in 1:1 (Insulin Glargine/Lixisenatide FRC or GLP-1 RA) ratio. Randomization was stratified by values of HbA1c at screening (=8%) & GLP-1 RA subtype at screening (once/twice daily [QD/BID], once weekly [QW] formulations).

Period 1

| | |
|------------------------------|-------------------------|
| Period 1 title | Core Period: 26 Weeks |
| Is this the baseline period? | Yes |
| Allocation method | Randomised - controlled |
| Blinding used | Not blinded |

Arms

| | |
|------------------------------|-------------------------------------------------------------|
| Are arms mutually exclusive? | Yes |
| Arm title | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) |

Arm description:

FRC injected subcutaneously QD for 26 weeks on top of oral anti-diabetic drug (OAD) therapy. Dose individually adjusted.

| | |
|----------------------------------------|-------------------------------------------------------|
| Arm type | Experimental |
| Investigational medicinal product name | Insulin glargine/lixisenatide fixed-ratio combination |
| Investigational medicinal product code | HOE901/AVE0010 |
| Other name | Soliqua |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

FRC was self-administered with a pre-filled disposable SoloStar® pen-injector. Dose of the combination was titrated according to the subject's need for insulin. FRC was given QD in the morning in the hour (0 to 60 minutes) before breakfast. Dose was individually titrated throughout the study to reach and maintain fasting SMPG: 80-100 milligrams per deciliter (mg/dL) (4.4 - 5.6 millimoles per litre [mmol/L]) avoiding hypoglycemia.

| | |
|------------------|------------------------|
| Arm title | GLP-1 Receptor Agonist |
|------------------|------------------------|

Arm description:

GLP-1 RA receptor agonist (liraglutide QD, exenatide BID, exenatide extended-release QW, albiglutide QW, or dulaglutide QW) injected subcutaneously for 26 weeks on top of OAD therapy. GLP-1 RAs were administered as per local labeling at the same dose schedule as prior to randomisation.

| | |
|----------------------------------------|------------------------------------------|
| Arm type | Active comparator |
| Investigational medicinal product name | Liraglutide |
| Investigational medicinal product code | |
| Other name | Victoza® |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

QD at any time of day, independently of meals. Victoza is a marketed product and the dose used was in accordance with labeling document.

| | |
|----------------------------------------|------------------------------------------|
| Investigational medicinal product name | Exenatide |
| Investigational medicinal product code | |
| Other name | Byetta® |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

BID at any time within the 60 minute period before the morning and evening meal. Byetta is a marketed product and the dose used was in accordance with labeling document.

| | |
|----------------------------------------|------------------------------------------|
| Investigational medicinal product name | Exenatide extended-release |
| Investigational medicinal product code | |
| Other name | Bydureon® |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

QW at any time of day, independently of meals. Bydureon is a marketed product and the dose used was in accordance with labeling document.

| | |
|----------------------------------------|------------------------------------------|
| Investigational medicinal product name | Albiglutide |
| Investigational medicinal product code | |
| Other name | Tanzeum® |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

QW at any time of day, independently of meals. Tanzeum is a marketed product and the dose used was in accordance with labeling document.

| | |
|----------------------------------------|------------------------------------------|
| Investigational medicinal product name | Dulaglutide |
| Investigational medicinal product code | |
| Other name | Trulicity® |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

QW at any time of day, independently of meals. Trulicity is a marketed product and the dose used was in accordance with labeling document.

| Number of subjects in period 1 | Insulin Glargine/Lixisenatid e Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist |
|--------------------------------|-----------------------------------------------------------------------|---------------------------|
| | Started | 257 |
| Treated | 255 | 256 |
| Completed | 230 | 246 |
| Not completed | 27 | 11 |
| Randomized but not treated | 2 | 1 |
| Adverse event | 10 | - |
| Withdrawal by Subject | 9 | 9 |
| Other than specified | 3 | 1 |
| Poor compliance to protocol | 2 | - |
| Lack of efficacy | 1 | - |

Period 2

| | |
|------------------------------|------------------------------------------|
| Period 2 title | Extension Period:26 Weeks(Upto 52 Weeks) |
| Is this the baseline period? | No |
| Allocation method | Randomised - controlled |
| Blinding used | Not blinded |

Arms

| | |
|------------------|----------------------------------------------------------------|
| Arm title | Insulin Glargine/Lixisenatide FRC- Single Arm Extension Period |
|------------------|----------------------------------------------------------------|

Arm description:

Subjects who completed core treatment period and met eligibility criteria entered in extension treatment period and received same treatment (FRC injected subcutaneously QD on top of OAD therapy) for 26 weeks (up to Week 52). Dose individually adjusted.

| | |
|----------------------------------------|-------------------------------------------------------|
| Arm type | Experimental |
| Investigational medicinal product name | Insulin glargine/lixisenatide fixed-ratio combination |
| Investigational medicinal product code | HOE901/AVE0010 |
| Other name | Soliqua |
| Pharmaceutical forms | Solution for injection in pre-filled pen |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

FRC was self-administered with a pre-filled disposable SoloStar® pen-injector. Dose of the combination was titrated according to the subject's need for insulin. FRC was given QD in the morning in the hour (0 to 60 minutes) before breakfast. Dose was individually titrated throughout the study to reach and maintain fasting SMPG: 80-100 mg/dL (4.4 - 5.6 mmol/L) avoiding hypoglycemia.

| Number of subjects in period 2^[1] | Insulin Glargine/Lixisenatide FRC- Single Arm Extension Period |
|-----------------------------------------------------|----------------------------------------------------------------|
| Started | 206 |
| Completed | 197 |
| Not completed | 9 |
| Adverse event | 1 |
| Other than specified | 5 |
| Poor compliance to protocol | 3 |

Notes:

[1] - The number of subjects starting the period is not consistent with the number completing the preceding period. It is expected the number of subjects starting the subsequent period will be the same as the number completing the preceding period.

Justification: Out of 230 subjects, 206 subjects completed core period and met eligibility criteria for extension period.

Baseline characteristics

Reporting groups

| | |
|-----------------------|-------------------------------------------------------------|
| Reporting group title | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) |
|-----------------------|-------------------------------------------------------------|

Reporting group description:

FRC injected subcutaneously QD for 26 weeks on top of oral anti-diabetic drug (OAD) therapy. Dose individually adjusted.

| | |
|-----------------------|------------------------|
| Reporting group title | GLP-1 Receptor Agonist |
|-----------------------|------------------------|

Reporting group description:

GLP-1 RA receptor agonist (liraglutide QD, exenatide BID, exenatide extended-release QW, albiglutide QW, or dulaglutide QW) injected subcutaneously for 26 weeks on top of OAD therapy. GLP-1 RAs were administered as per local labeling at the same dose schedule as prior to randomisation.

| Reporting group values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | Total |
|------------------------------------|-------------------------------------------------------------|------------------------|-------|
| Number of subjects | 257 | 257 | 514 |
| Age categorical Units: Subjects | | | |

| | | | |
|--------------------------------------------------------------------|--------|--------|-----|
| Age continuous Units: years | | | |
| arithmetic mean | 59.2 | 60.0 | - |
| standard deviation | ± 9.6 | ± 10.3 | - |
| Gender categorical Units: Subjects | | | |
| Female | 131 | 113 | 244 |
| Male | 126 | 144 | 270 |
| Race/Ethnicity Units: Subjects | | | |
| American Indian or Alaska Native | 0 | 0 | 0 |
| Asian/Oriental | 3 | 4 | 7 |
| Native Hawaiian or Other Pacific Islander | 1 | 0 | 1 |
| White | 241 | 244 | 485 |
| Black | 12 | 7 | 19 |
| Unknown or Not Reported | 0 | 2 | 2 |
| Body Mass Index (BMI) Units: Subjects | | | |
| <30 | 71 | 69 | 140 |
| ≥30 | 186 | 188 | 374 |
| GLP-1 receptor agonist use by type at screening Units: Subjects | | | |
| Once/twice daily formulation | 153 | 154 | 307 |
| Once weekly formulation | 104 | 103 | 207 |
| Duration of diabetes Units: years | | | |
| arithmetic mean | 11.23 | 10.95 | - |
| standard deviation | ± 7.42 | ± 6.08 | - |

| | | | |
|----------------------------------------------------------------------------------------------------------|---------------------|---------------------|---|
| Hemoglobin A1C (HbA1C) Units: percentage of HbA1c arithmetic mean standard deviation | 7.78 ± 0.62 | 7.80 ± 0.56 | - |
| Daily dose of metformin at baseline Units: milligrams (mg) arithmetic mean standard deviation | 1966.93 ± 434.56 | 2030.74 ± 497.15 | - |
| Daily dose of pioglitazone at baseline | | | |
| Data for Daily dose of pioglitazone at baseline is reported for 34 subjects. | | | |
| Units: mg arithmetic mean standard deviation | 31.25 ± 10.03 | 32.73 ± 8.83 | - |
| Daily dose of SGLT2 inhibitor (Canagliflozin) at baseline | | | |
| Data for daily dose of Canagliflozin at baseline is reported for 19 subjects. | | | |
| Units: mg arithmetic mean standard deviation | 214.29 ± 106.90 | 283.33 ± 57.74 | - |
| Daily dose of SGLT2 inhibitor (Empagliflozin) at baseline | | | |
| Data for daily dose of Empagliflozin at baseline is reported for 15 subjects. | | | |
| Units: mg arithmetic mean standard deviation | 15.42 ± 7.49 | 16.67 ± 8.20 | - |
| Daily dose of SGLT2 inhibitor (Dapagliflozin) at baseline | | | |
| Data for daily dose of Dapagliflozin at baseline is reported for 18 subjects. | | | |
| Units: mg arithmetic mean standard deviation | 9.62 ± 3.80 | 9.00 ± 2.24 | - |
| Duration of GLP-1 receptor agonist treatment Units: years arithmetic mean standard deviation | 1.89 ± 1.76 | 1.92 ± 1.85 | - |

End points

End points reporting groups

| | |
|-----------------------|-------------------------------------------------------------|
| Reporting group title | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) |
|-----------------------|-------------------------------------------------------------|

Reporting group description:

FRC injected subcutaneously QD for 26 weeks on top of oral anti-diabetic drug (OAD) therapy. Dose individually adjusted.

| | |
|-----------------------|------------------------|
| Reporting group title | GLP-1 Receptor Agonist |
|-----------------------|------------------------|

Reporting group description:

GLP-1 RA receptor agonist (liraglutide QD, exenatide BID, exenatide extended-release QW, albiglutide QW, or dulaglutide QW) injected subcutaneously for 26 weeks on top of OAD therapy. GLP-1 RAs were administered as per local labeling at the same dose schedule as prior to randomisation.

| | |
|-----------------------|----------------------------------------------------------------|
| Reporting group title | Insulin Glargine/Lixisenatide FRC- Single Arm Extension Period |
|-----------------------|----------------------------------------------------------------|

Reporting group description:

Subjects who completed core treatment period and met eligibility criteria entered in extension treatment period and received same treatment (FRC injected subcutaneously QD on top of OAD therapy) for 26 weeks (up to Week 52). Dose individually adjusted.

Primary: Change From Baseline in Glycated Hemoglobin (HbA1c) to Week 26: Core Period

| | |
|-----------------|-----------------------------------------------------------------------------|
| End point title | Change From Baseline in Glycated Hemoglobin (HbA1c) to Week 26: Core Period |
|-----------------|-----------------------------------------------------------------------------|

End point description:

Change in HbA1c was calculated by subtracting baseline value from Week 26 value. Adjusted least squares (LS) mean and standard error (SE) were obtained from Mixed-effect model with repeated measures (MMRM) to account for missing data using all available post baseline data during the 26 week treatment period. Modified Intent-To-Treat (mITT) population: all randomised subjects who had a baseline and at least 1 post-baseline assessment of any primary/secondary endpoints, irrespective of compliance with study protocol and procedures. Here, "number of subjects analysed" = subjects with baseline and at least 1 post-baseline HbA1c assessment.

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

End point timeframe:

Baseline, Week 26

| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------------|-------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 250 | 253 | | |
| Units: percentage of HbA1c | | | | |
| least squares mean (standard error) | -1.02 (± 0.048) | -0.38 (± 0.048) | | |

Statistical analyses

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Statistical analysis title | FRC vs. GLP-1 RA |
| Statistical analysis description: | |
| Analysis was performed using MMRM with treatment groups, randomisation strata of Week -2 HbA1c (<8.0%, >=8.0%), GLP-1 RA subtype at screening, visits, treatment-by-visit interaction, world region as fixed effects, baseline HbA1c value-by-visit interaction as a covariate. Analysis included all scheduled measurements obtained during 26-week randomised treatment period, including those obtained after IMP discontinuation/introduction of rescue medication. | |
| Comparison groups | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) v GLP-1 Receptor Agonist |
| Number of subjects included in analysis | 503 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.0001 [1] |
| Method | Mixed models analysis |
| Parameter estimate | Least square (LS) mean difference |
| Point estimate | -0.64 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -0.77 |
| upper limit | -0.508 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.067 |

Notes:

[1] - Threshold for significance at 0.05 level.

Primary: Change From Baseline in Glycated Hemoglobin (HbA1c) to Week 52: Single Arm Extension Period

| | |
|-----------------|------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in Glycated Hemoglobin (HbA1c) to Week 52: Single Arm Extension Period ^[2] |
|-----------------|------------------------------------------------------------------------------------------------------------|

End point description:

Change in HbA1c was calculated by subtracting baseline value from Week 52 value. Analysis was performed on mITT population who entered the extension period. Here, "number of subjects analysed"= subjects with baseline and at least 1 post-baseline HbA1c assessment.

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

End point timeframe:

Baseline, Week 52

Notes:

[2] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: As the endpoint is descriptive in nature, no statistical analysis is provided.

| | | | | |
|----------------------------------|---------------------------------------------------------------|--|--|--|
| End point values | Insulin Glargine/Lixisenatide FRC-Single Arm Extension Period | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 202 | | | |
| Units: percentage of HbA1c | | | | |
| arithmetic mean (standard error) | -1.01 (± 0.063) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects Reaching HbA1c <7% or <=6.5% at Week 26: Core Period

| | |
|-----------------|-----------------------------------------------------------------------------|
| End point title | Percentage of Subjects Reaching HbA1c <7% or <=6.5% at Week 26: Core Period |
|-----------------|-----------------------------------------------------------------------------|

End point description:

Subjects without any available HbA1c assessment at Week 26 were considered as non-responders. Analysis was performed on mITT population.

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

End point timeframe:

Week 26

| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------|-------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 252 | 253 | | |
| Units: percentage of subjects | | | | |
| number (not applicable) | | | | |
| HbA1c <7% | 61.9 | 25.7 | | |
| HbA1c <=6.5% | 40.5 | 9.9 | | |

Statistical analyses

| | |
|----------------------------|------------------|
| Statistical analysis title | FRC vs. GLP-1 RA |
|----------------------------|------------------|

Statistical analysis description:

HbA1c <7.0%: Insulin Glargine/Lixisenatide FRC vs GLP-1 Receptor Agonist. Analysis was performed using Cochran-Mantel-Haenszel method stratified on randomisation strata of Week -2 HbA1c (<8.0%, >=8.0%), and randomisation strata of GLP-1 receptor agonist subtype at screening. Hierarchical testing procedure was used to control type I error and handle multiple secondary endpoint analyses. Testing was then performed sequentially per pre-specified order (only HbA1c < 7% was part of testing).

| | |
|-------------------|--------------------------------------------------------------------------------------|
| Comparison groups | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) v GLP-1 Receptor Agonist |
|-------------------|--------------------------------------------------------------------------------------|

| | |
|-----------------------------------------|--------------------------|
| Number of subjects included in analysis | 505 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.0001 [3] |
| Method | Cochran-Mantel-Haenszel |
| Parameter estimate | Difference in percentage |
| Point estimate | 36.05 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 28.11 |
| upper limit | 43.99 |

Notes:

[3] - Threshold for significance ≤ 0.05

Secondary: Percentage of Subjects Reaching HbA1c <7 % or $\leq 6.5\%$ at Week 52: Single Arm Extension Period

| | |
|-----------------|----------------------------------------------------------------------------------------------------|
| End point title | Percentage of Subjects Reaching HbA1c <7 % or $\leq 6.5\%$ at Week 52: Single Arm Extension Period |
|-----------------|----------------------------------------------------------------------------------------------------|

End point description:

Subjects without any available HbA1c assessment at Week 52 were considered as non-responders. Analysis was performed on mITT population who entered the extension period.

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

End point timeframe:

Week 52

| End point values | Insulin Glargine/Lixise natide FRC- Single Arm Extension Period | | | |
|-------------------------------|-----------------------------------------------------------------|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 206 | | | |
| Units: percentage of subjects | | | | |
| number (not applicable) | | | | |
| HbA1c <7% | 64.1 | | | |
| HbA1c $\leq 6.5\%$ | 42.7 | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in Fasting Plasma Glucose (FPG) to Week 26: Core Period

| | |
|-----------------|------------------------------------------------------------------------------|
| End point title | Change From Baseline in Fasting Plasma Glucose (FPG) to Week 26: Core Period |
|-----------------|------------------------------------------------------------------------------|

End point description:

Change in FPG was calculated by subtracting baseline value from Week 26 value. Adjusted LS means and SE were obtained from MMRM to account for missing data using all available post baseline data during the 26 week treatment period. Analysis was performed using mITT population. Here, "number of subjects analysed"= subjects with baseline and at least one post-baseline FPG assessment.

End point type Secondary

End point timeframe:

Baseline, Week 26

| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|--------------------------------------|-------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 251 | 253 | | |
| Units: millimoles per litre (mmol/L) | | | | |
| least squares mean (standard error) | -2.28 (\pm 0.120) | -0.60 (\pm 0.119) | | |

Statistical analyses

Statistical analysis title FRC vs. GLP-1 RA

Statistical analysis description:

Analysis was performed using MMRM with treatment groups, randomisation strata of Week -2 HbA1c (<8.0%, \geq 8.0%), randomisation strata of GLP-1 RA subtype at screening, scheduled visit, treatment-by-visit interaction, and world region as fixed effects, and baseline FPG value-by visit interaction as a covariate. Testing according to the hierarchical testing procedure (continued only if previous end points were statistically significant).

| | |
|-----------------------------------------|--------------------------------------------------------------------------------------|
| Comparison groups | GLP-1 Receptor Agonist v Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) |
| Number of subjects included in analysis | 504 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.0001 [4] |
| Method | Mixed models analysis |
| Parameter estimate | LS Mean Difference |
| Point estimate | -1.67 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -2.001 |
| upper limit | -1.341 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.168 |

Notes:

[4] - Threshold for significance at 0.05 level.

Secondary: Change From Baseline in Fasting Plasma Glucose (FPG) to Week 52:

Single Arm Extension Period

| | |
|-----------------|----------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in Fasting Plasma Glucose (FPG) to Week 52: Single Arm Extension Period |
|-----------------|----------------------------------------------------------------------------------------------|

End point description:

Change in FPG was calculated by subtracting baseline value from Week 52 value. Analysis was performed on mITT population who entered the extension period. Here, "number of subjects analysed"= subjects with baseline and at least one post-baseline FPG assessment.

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

End point timeframe:

Baseline, Week 52

| End point values | Insulin Glargine/Lixisenatide FRC- Single Arm Extension Period | | | |
|----------------------------------|----------------------------------------------------------------|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 196 | | | |
| Units: mmol/L | | | | |
| arithmetic mean (standard error) | -2.27 (± 0.173) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in the Daily Average of the 7-point Self-monitored Plasma Glucose (SMPG) to Week 26: Core Period

| | |
|-----------------|-----------------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in the Daily Average of the 7-point Self-monitored Plasma Glucose (SMPG) to Week 26: Core Period |
|-----------------|-----------------------------------------------------------------------------------------------------------------------|

End point description:

The 7-point SMPG profile was measured at the following 7 points: pre-prandial and 2 hours postprandial for breakfast, lunch, dinner and at bedtime. Two hours postprandial (breakfast, lunch and dinner) was defined as 2 hours after the start of the meal. Adjusted LS means and SE were obtained from MMRM to account for missing data using all available post baseline data during the 26 week treatment period. Analysis was performed using mITT population. Here, "number of subjects analysed"= subjects with baseline and at least one post-baseline 7-point SMPG assessment.

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

End point timeframe:

Baseline, Week 26

| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------------|-------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 216 | 220 | | |
| Units: mmol/L | | | | |
| least squares mean (standard error) | -1.69 (± 0.114) | -0.67 (± 0.112) | | |

Statistical analyses

| Statistical analysis title | FRC vs. GLP-1 RA |
|-----------------------------------|------------------|
|-----------------------------------|------------------|

Statistical analysis description:

Analysis was performed using MMRM with treatment groups, randomisation strata of Week -2 HbA1c (<8.0%, ≥8.0%), randomisation strata of GLP-1 RA subtype at screening, scheduled visit, treatment-by-visit interaction, and world region as fixed effects, and baseline average SMPG value-by-visit interaction as a covariate. Testing according to the hierarchical testing procedure (continued only if previous end points were statistically significant).

| | |
|-----------------------------------------|--------------------------------------------------------------------------------------|
| Comparison groups | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) v GLP-1 Receptor Agonist |
| Number of subjects included in analysis | 436 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.0001 [5] |
| Method | Mixed models analysis |
| Parameter estimate | LS Mean Difference |
| Point estimate | -1.02 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -1.325 |
| upper limit | -0.708 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.157 |

Notes:

[5] - Threshold for significance at 0.05 level.

Secondary: Change From Baseline in the Daily Average of the 7-point Self-monitored Plasma Glucose (SMPG) to Week 52: Single Arm Extension Period

| | |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in the Daily Average of the 7-point Self-monitored Plasma Glucose (SMPG) to Week 52: Single Arm Extension Period |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------|

End point description:

The 7-point SMPG profile was measured at the following 7 points: pre-prandial and 2 hours postprandial for breakfast, lunch, dinner and at bedtime. Two hours postprandial (breakfast, lunch and dinner) was defined as 2 hours after the start of the meal. Analysis was performed on mITT population who entered the extension period. Here, "number of subjects analysed"= subjects with baseline and at least one post-baseline 7-point SMPG assessment.

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

End point timeframe:

Baseline, Week 52

| End point values | Insulin Glargine/Lixise natide FRC- Single Arm Extension Period | | | |
|----------------------------------|--------------------------------------------------------------------------------|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 142 | | | |
| Units: mmol/L | | | | |
| arithmetic mean (standard error) | -1.68 (± 0.176) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in 2-Hour Postprandial Plasma Glucose (PPG) During Standardized Meal Test to Week 26: Core Period

| | |
|-----------------|------------------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in 2-Hour Postprandial Plasma Glucose (PPG) During Standardized Meal Test to Week 26: Core Period |
|-----------------|------------------------------------------------------------------------------------------------------------------------|

End point description:

The 2-hour PPG test measured blood glucose 2 hours after eating a liquid standardized breakfast meal. Change in PPG was calculated by subtracting baseline value from Week 26 value. Missing data was imputed using LOCF. Analysis was performed on mITT population. Here, "number of subjects analysed" = subjects with baseline and at least one post-baseline plasma glucose assessment.

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

End point timeframe:

Baseline, Week 26

| End point values | Insulin Glargine/Lixise natide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------------|-----------------------------------------------------------------------------|---------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 215 | 222 | | |
| Units: mmol/L | | | | |
| least squares mean (standard error) | -3.96 (± 0.211) | -1.11 (± 0.205) | | |

Statistical analyses

| | |
|-----------------------------------|------------------|
| Statistical analysis title | FRC vs. GLP-1 RA |
|-----------------------------------|------------------|

Statistical analysis description:

Analysis was performed using analysis of covariance (ANCOVA) model with treatment groups, randomisation strata of Week -2 HbA1c (<8.0%, >=8.0%), randomisation strata of GLP-1 RA subtype (once/twice daily formulations, once weekly formulations) at screening, and world region as fixed effects and baseline 2-hour PPG value as a covariate. Testing according to the hierarchical testing procedure (continued only if previous endpoints were statistically significant).

| | |
|-----------------------------------------|--------------------------------------------------------------------------------------|
| Comparison groups | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) v GLP-1 Receptor Agonist |
| Number of subjects included in analysis | 437 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.0001 ^[6] |
| Method | ANCOVA |
| Parameter estimate | LS Mean Difference] |
| Point estimate | -2.85 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -3.42 |
| upper limit | -2.279 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.29 |

Notes:

[6] - Threshold for significance at 0.05 level.

Secondary: Change From Baseline in 2-Hour Postprandial Plasma Glucose (PPG) During Standardized Meal Test to Week 52: Single Arm Extension Period

| | |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in 2-Hour Postprandial Plasma Glucose (PPG) During Standardized Meal Test to Week 52: Single Arm Extension Period |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------|

End point description:

The 2-hour PPG test measured blood glucose 2 hours after eating a liquid standardized breakfast meal. Change in PPG was calculated by subtracting baseline value from Week 52 value. Missing data was imputed using LOCF. Analysis was performed on mITT population who entered the extension period. Here, "number of subjects analysed"=subjects with baseline and at least one post-baseline plasma glucose assessment.

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

End point timeframe:

Baseline, Week 52

| | | | | |
|----------------------------------|---------------------------------------------------------------|--|--|--|
| End point values | Insulin Glargine/Lixisenatide FRC-Single Arm Extension Period | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 192 | | | |
| Units: mmol/L | | | | |
| arithmetic mean (standard error) | -4.30 (± 0.284) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in 2-Hour Blood Glucose Excursion During Standardized Meal Test to Week 26: Core Period

| | |
|-----------------|--------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in 2-Hour Blood Glucose Excursion During Standardized Meal Test to Week 26: Core Period |
|-----------------|--------------------------------------------------------------------------------------------------------------|

End point description:

2-hour plasma glucose excursion = 2-hour PPG value minus plasma glucose value obtained 30 minutes prior to the start of meal and before investigational medicinal product (IMP) administration if IMP was injected before breakfast. Change in plasma glucose excursions were calculated by subtracting baseline value from Week 26 value. Missing data was imputed using LOCF. Analysis was performed using mITT population. Here, "number of subjects analysed"= subjects with baseline and Week 26 assessments.

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

End point timeframe:

Baseline, Week 26

| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------------|-------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 215 | 220 | | |
| Units: mmol/L | | | | |
| least squares mean (standard error) | -1.51 (\pm 0.177) | -0.52 (\pm 0.173) | | |

Statistical analyses

| | |
|----------------------------|------------------|
| Statistical analysis title | FRC vs. GLP-1 RA |
|----------------------------|------------------|

Statistical analysis description:

Analysis was performed using ANCOVA model with treatment groups, randomisation strata of Week -2 HbA1c (<8.0%, \geq 8.0%), randomisation strata of GLP-1 receptor agonist subtype (once/twice daily formulations, once weekly formulations) at screening, and world region as fixed effects and baseline 2-hour plasma glucose excursion value as a covariate. Testing according to the hierarchical testing procedure (continued only if previous endpoints were statistically significant).

| | |
|-------------------|--------------------------------------------------------------------------------------|
| Comparison groups | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) v GLP-1 Receptor Agonist |
|-------------------|--------------------------------------------------------------------------------------|

| | |
|-----------------------------------------|----------------------------|
| Number of subjects included in analysis | 435 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.0001 [7] |
| Method | ANCOVA |
| Parameter estimate | LS Mean Difference |
| Point estimate | -0.99 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -1.468 |
| upper limit | -0.508 |
| Variability estimate | Standard error of the mean |
| Dispersion value | 0.244 |

Notes:

[7] - Threshold for significance at 0.05 level.

Secondary: Change From Baseline in 2-Hour Blood Glucose Excursion During Standardized Meal Test to Week 52: Single Arm Extension Period

| | |
|-----------------|------------------------------------------------------------------------------------------------------------------------------|
| End point title | Change From Baseline in 2-Hour Blood Glucose Excursion During Standardized Meal Test to Week 52: Single Arm Extension Period |
|-----------------|------------------------------------------------------------------------------------------------------------------------------|

End point description:

2-hour plasma glucose excursion = 2-hour PPG value minus plasma glucose value obtained 30 minutes prior to the start of meal and before IMP administration if IMP was injected before breakfast. Change in plasma glucose excursions were calculated by subtracting baseline value from Week 52 value. Missing data was imputed using LOCF. Analysis was performed on mITT population who entered the extension period. Here, "number of subjects analysed" = subjects with baseline and Week 52 assessments.

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

End point timeframe:

Baseline, Week 52

| | | | | |
|----------------------------------|---------------------------------------------------------------|--|--|--|
| End point values | Insulin Glargine/Lixisenatide FRC-Single Arm Extension Period | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 192 | | | |
| Units: mmol/L | | | | |
| arithmetic mean (standard error) | -1.85 (± 0.209) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects Requiring Rescue Therapy During the 26 Week

Treatment Period: Core Period

| | |
|-----------------|--------------------------------------------------------------------------------------------------|
| End point title | Percentage of Subjects Requiring Rescue Therapy During the 26 Week Treatment Period: Core Period |
|-----------------|--------------------------------------------------------------------------------------------------|

End point description:

Routine HbA1c value was used to determine the requirement of rescue medication. Threshold values at Week 12 or later on Week 12: HbA1c >8%. Analysis was performed using mITT population.

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

End point timeframe:

From Baseline to Week 26

| End point values | Insulin Glargine/Lixise notide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------|--------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 252 | 253 | | |
| Units: percentage of subjects | | | | |
| number (not applicable) | 4.8 | 15.0 | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Subjects Requiring Rescue Therapy During the 52 Week Treatment Period: Single Arm Extension Period

| | |
|-----------------|------------------------------------------------------------------------------------------------------------------|
| End point title | Percentage of Subjects Requiring Rescue Therapy During the 52 Week Treatment Period: Single Arm Extension Period |
|-----------------|------------------------------------------------------------------------------------------------------------------|

End point description:

Routine HbA1c value was used to determine the requirement of rescue medication. Threshold values at Week 12 or later on Week 12: HbA1c >8%. Analysis was performed on mITT population who entered the extension period.

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

End point timeframe:

From Week 26 to Week 52

| End point values | Insulin Glargine/Lixise notide FRC-Single Arm Extension Period | | | |
|-------------------------------|----------------------------------------------------------------|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 206 | | | |
| Units: percentage of subjects | | | | |
| number (not applicable) | 1.5 | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in Body Weight at Week 26: Core Period

| | |
|-----------------|-------------------------------------------------------------|
| End point title | Change From Baseline in Body Weight at Week 26: Core Period |
|-----------------|-------------------------------------------------------------|

End point description:

Change in body weight was calculated by subtracting baseline value from Week 26 value. Analysis was performed using mITT population. Here, "number of subjects analysed" = subjects with baseline and at least one post-baseline body weight assessment.

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

End point timeframe:

Baseline, Week 26

| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
|-------------------------------------|-------------------------------------------------------------|------------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 251 | 253 | | |
| Units: kilogram (kg) | | | | |
| least squares mean (standard error) | 1.89 (\pm 0.222) | -1.14 (\pm 0.220) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in Body Weight to Week 52: Single Arm Extension Period

| | |
|-----------------|-----------------------------------------------------------------------------|
| End point title | Change From Baseline in Body Weight to Week 52: Single Arm Extension Period |
|-----------------|-----------------------------------------------------------------------------|

End point description:

Change in body weight was calculated by subtracting baseline value from Week 52 value. Analysis was performed using mITT population who entered the extension period. Here, "number of subjects analysed"=subjects with baseline and at least one post-baseline body weight assessment.

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

End point timeframe:

Baseline, Week 52

| | | | | |
|----------------------------------|---------------------------------------------------------------|--|--|--|
| End point values | Insulin Glargine/Lixisenatide FRC-Single Arm Extension Period | | | |
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 202 | | | |
| Units: kg | | | | |
| arithmetic mean (standard error) | 2.78 (± 0.294) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Documented Symptomatic Hypoglycemia Events Per Subject-Year: Core Period

| | |
|-----------------|------------------------------------------------------------------------------------|
| End point title | Number of Documented Symptomatic Hypoglycemia Events Per Subject-Year: Core Period |
|-----------------|------------------------------------------------------------------------------------|

End point description:

Documented symptomatic hypoglycemia was an event during which symptoms of hypoglycemia were accompanied by a measured plasma glucose concentration of ≤ 3.9 mmol/L (70 mg/dL). Hypoglycemic episodes with plasma glucose of < 3.0 mmol/L (54 mg/dL) were also analysed. Analysis was performed on safety population which included all randomised subjects who received at least one dose of open-label IMP, regardless of the amount of treatment administered. Subjects were analysed according to the treatment actually received (as treated).

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

End point timeframe:

From Baseline to Week 26

| | | | | |
|-----------------------------------------------------------|-------------------------------------------------------------|------------------------|--|--|
| End point values | Insulin Glargine/Lixisenatide Fixed Ratio Combination (FRC) | GLP-1 Receptor Agonist | | |
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 255 | 256 | | |
| Units: events per subject-year | | | | |
| number (not applicable) | | | | |
| Documented symptomatic hypoglycemia (≤ 3.9 mmol/ L) | 1.54 | 0.08 | | |
| Documented symptomatic hypoglycemia (< 3.0 mmol/ L) | 0.25 | 0.01 | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Documented Symptomatic Hypoglycemia Events Per Subject-Year: Single Arm Extension Period

| | |
|-----------------|----------------------------------------------------------------------------------------------------|
| End point title | Number of Documented Symptomatic Hypoglycemia Events Per Subject-Year: Single Arm Extension Period |
|-----------------|----------------------------------------------------------------------------------------------------|

End point description:

Documented symptomatic hypoglycemia was an event during which symptoms of hypoglycemia were accompanied by a measured plasma glucose concentration of ≤ 3.9 mmol/L (70 mg/dL). Hypoglycemic episodes with plasma glucose of < 3.0 mmol/L (54 mg/dL) were also analysed. Analysis was performed on safety population who entered the extension period and their data for whole study duration was analysed and reported.

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

End point timeframe:

From Baseline to Week 52

| End point values | Insulin Glargine/Lixise natide FRC- Single Arm Extension Period | | | |
|-----------------------------------------------------------|-----------------------------------------------------------------------------|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 206 | | | |
| Units: events per subject-year | | | | |
| number (not applicable) | | | | |
| Documented symptomatic hypoglycemia (≤ 3.9 mmol/ L) | 1.59 | | | |
| Documented symptomatic hypoglycemia (< 3.0 mmol/ L) | 0.24 | | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

All Adverse Events (AEs) were collected from signature of informed consent until the end of the study (up to 52 weeks).

Adverse event reporting additional description:

Reported AEs are treatment-emergent that is AEs that developed/worsened during during the period from the administration of first dose of the study treatments up to 3 days (9 days for the weekly GLP1) after the last administration. Analysis was performed on safety population.

| | |
|-----------------|------------|
| Assessment type | Systematic |
|-----------------|------------|

Dictionary used

| | |
|--------------------|--------|
| Dictionary name | MedDRA |
| Dictionary version | 21 |

Reporting groups

| | |
|-----------------------|-------------------------|
| Reporting group title | Fixed Ratio Combination |
|-----------------------|-------------------------|

Reporting group description:

FRC injected subcutaneously QD for 26 weeks on top of OAD therapy. Dose individually adjusted (median exposure: 183 days).

| | |
|-----------------------|------------------------|
| Reporting group title | GLP-1 Receptor Agonist |
|-----------------------|------------------------|

Reporting group description:

GLP-1 Receptor Agonist GLP-1 RA receptor agonist (liraglutide QD, exenatide BID, exenatide extendedrelease QW, albiglutide QW, or dulaglutide QW) injected subcutaneously for 26 weeks on top of OAD therapy. GLP-1 RAs were administered as per local labeling at the same dose schedule as prior to randomization (median exposure: 183 days).

| | |
|-----------------------|--------------------------------------------|
| Reporting group title | Fixed Ratio Combination Whole Study period |
|-----------------------|--------------------------------------------|

Reporting group description:

Participants who completed core treatment period and met eligibility criteria entered in extension treatment period and received same treatment (FRC injected subcutaneously QD on top of OAD therapy) for 26 weeks (up to Week 52). Dose individually adjusted (median exposure: 365 days).

| Serious adverse events | Fixed Ratio Combination | GLP-1 Receptor Agonist | Fixed Ratio Combination Whole Study period |
|---------------------------------------------------------------------|-------------------------|------------------------|--------------------------------------------|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 10 / 255 (3.92%) | 9 / 256 (3.52%) | 21 / 206 (10.19%) |
| number of deaths (all causes) | 0 | 0 | 1 |
| number of deaths resulting from adverse events | | | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Adenosquamous Cell Lung Cancer | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Basal Cell Carcinoma | | | |

| | | | |
|-------------------------------------------------|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Bladder Papilloma | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Endometrial Adenocarcinoma | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Glioblastoma | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| Hepatic Neoplasm | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Invasive Ductal Breast Carcinoma | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Papillary Thyroid Cancer | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Renal Cell Carcinoma | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Vascular disorders | | | |
| Vasculitis Necrotising | | | |

| | | | |
|-------------------------------------------------------------|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| General disorders and administration site conditions | | | |
| Non-Cardiac Chest Pain | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Oedema Peripheral | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Respiratory, thoracic and mediastinal disorders | | | |
| Acute Pulmonary Oedema | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pneumonia Aspiration | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Injury, poisoning and procedural complications | | | |
| Ankle Fracture | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Fall | | | |
| subjects affected / exposed | 2 / 255 (0.78%) | 0 / 256 (0.00%) | 2 / 206 (0.97%) |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | 0 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Foot Fracture | | | |

| | | | |
|-------------------------------------------------|-----------------|-----------------|-----------------|
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Hip Fracture | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Laceration | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Rib Fracture | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Skin Laceration | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Subarachnoid Haemorrhage | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Subcutaneous Haematoma | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Cardiac disorders | | | |
| Arteriosclerosis Coronary Artery | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Atrial Fibrillation | | | |

| | | | |
|-------------------------------------------------|-----------------|-----------------|-----------------|
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Cardiac Failure | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Cardiac Failure Congestive | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 2 / 206 (0.97%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Coronary Artery Disease | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 2 / 206 (0.97%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Ischaemic Cardiomyopathy | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Nervous system disorders | | | |
| Cerebral Infarction | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Diabetic Neuropathy | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Hypoglycaemic Unconsciousness | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 1 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Intraventricular Haemorrhage | | | |

| | | | |
|-------------------------------------------------|-----------------|-----------------|-----------------|
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Subarachnoid Haemorrhage | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 2 / 206 (0.97%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 3 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Gastrointestinal disorders | | | |
| Duodenal Ulcer | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Large Intestine Polyp | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Rectal Haemorrhage | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Skin and subcutaneous tissue disorders | | | |
| Dermal Cyst | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Renal and urinary disorders | | | |
| Acute Kidney Injury | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 1 / 256 (0.39%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Urinary Retention | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|-------------------------------------------------|-----------------|-----------------|-----------------|
| Musculoskeletal and connective tissue disorders | | | |
| Intervertebral Disc Protrusion | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Musculoskeletal Chest Pain | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Osteoarthritis | | | |
| subjects affected / exposed | 1 / 255 (0.39%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Spinal Column Stenosis | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Infections and infestations | | | |
| Cellulitis | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Diverticulitis | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Infected Skin Ulcer | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Peritonitis | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|-------------------------------------------------|-----------------|-----------------|-----------------|
| Pneumonia | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Postoperative Abscess | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 0 / 256 (0.00%) | 1 / 206 (0.49%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Metabolism and nutrition disorders | | | |
| Electrolyte Imbalance | | | |
| subjects affected / exposed | 0 / 255 (0.00%) | 1 / 256 (0.39%) | 0 / 206 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

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

| Non-serious adverse events | Fixed Ratio Combination | GLP-1 Receptor Agonist | Fixed Ratio Combination Whole Study period |
|-------------------------------------------------------|-------------------------|------------------------|--------------------------------------------|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 69 / 255 (27.06%) | 48 / 256 (18.75%) | 75 / 206 (36.41%) |
| Gastrointestinal disorders | | | |
| Diarrhoea | | | |
| subjects affected / exposed | 14 / 255 (5.49%) | 6 / 256 (2.34%) | 15 / 206 (7.28%) |
| occurrences (all) | 14 | 6 | 17 |
| Nausea | | | |
| subjects affected / exposed | 22 / 255 (8.63%) | 6 / 256 (2.34%) | 19 / 206 (9.22%) |
| occurrences (all) | 30 | 6 | 30 |
| Infections and infestations | | | |
| Influenza | | | |
| subjects affected / exposed | 11 / 255 (4.31%) | 6 / 256 (2.34%) | 15 / 206 (7.28%) |
| occurrences (all) | 12 | 6 | 19 |
| Nasopharyngitis | | | |
| subjects affected / exposed | 25 / 255 (9.80%) | 23 / 256 (8.98%) | 32 / 206 (15.53%) |
| occurrences (all) | 27 | 26 | 37 |
| Upper Respiratory Tract Infection | | | |

| | | | |
|-----------------------------|-----------------|------------------|------------------|
| subjects affected / exposed | 9 / 255 (3.53%) | 12 / 256 (4.69%) | 13 / 206 (6.31%) |
| occurrences (all) | 11 | 15 | 17 |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 22 September 2016 | Main changes were the following: - A single-arm FRC 26-week extension period was introduced to provide additional assessment of all safety, efficacy and other endpoints over 52 weeks in total. - Pharmacokinetic and antibody assessments were added in the FRC treatment group to gain information about exposure to lixisenatide and to assess the immunogenicity of insulin glargine and lixisenatide. - Minor clarifications and corrections were also made. |
| 12 May 2017 | Main change was to allow inclusion of subjects receiving background treatment of SGLT2 inhibitors. - Minor clarifications and corrections were also made. |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported