



Clinical trial results:

A Randomized Open-Label Phase III Study of Single Agent Pembrolizumab versus Single Agent Chemotherapy per Physician's Choice for Metastatic Triple Negative Breast Cancer (mTNBC) – (KEYNOTE-119)

Summary

| | |
|--------------------------|----------------------------|
| EudraCT number | 2015-001020-27 |
| Trial protocol | DE SE NL BE FR GB PL ES IT |
| Global end of trial date | 10 November 2020 |

Results information

| | |
|--------------------------------|------------------|
| Result version number | v1 (current) |
| This version publication date | 25 November 2021 |
| First version publication date | 25 November 2021 |

Trial information

Trial identification

| | |
|-----------------------|----------|
| Sponsor protocol code | 3475-119 |
|-----------------------|----------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT02555657 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|--|
| Sponsor organisation name | Merck Sharp & Dohme Corp. |
| Sponsor organisation address | 2000 Galloping Hill Road, Kenilworth, NJ, United States, 07033 |
| Public contact | Clinical Trials Disclosure, Merck Sharp & Dohme Corp., ClinicalTrialsDisclosure@merck.com |
| Scientific contact | Clinical Trials Disclosure, Merck Sharp & Dohme Corp., ClinicalTrialsDisclosure@merck.com |

Notes:

Paediatric regulatory details

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|--|----|
| 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 | 10 November 2020 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 11 April 2019 |
| Global end of trial reached? | Yes |
| Global end of trial date | 10 November 2020 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

In this study, participants with metastatic triple negative breast cancer (mTNBC) were randomly assigned to receive either single agent pembrolizumab or single agent chemotherapy chosen by the treating physician (Treatment of Physician's Choice, TPC) in accordance with local regulations and guidelines, consisting of either capecitabine, eribulin, gemcitabine, or vinorelbine. The primary study hypothesis was that pembrolizumab extends overall survival compared to TPC.

Protection of trial subjects:

This study was conducted in conformance with Good Clinical Practice standards and applicable country and/or local statutes and regulations regarding ethical committee review, informed consent, and the protection of human subjects participating in biomedical research.

Background therapy: -

Evidence for comparator: -

| | |
|---|-----------------|
| Actual start date of recruitment | 13 October 2015 |
| Long term follow-up planned | No |
| Independent data monitoring committee (IDMC) involvement? | Yes |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|------------------------|
| Country: Number of subjects enrolled | Argentina: 7 |
| Country: Number of subjects enrolled | Australia: 21 |
| Country: Number of subjects enrolled | Belgium: 4 |
| Country: Number of subjects enrolled | Brazil: 27 |
| Country: Number of subjects enrolled | Colombia: 3 |
| Country: Number of subjects enrolled | France: 33 |
| Country: Number of subjects enrolled | Germany: 33 |
| Country: Number of subjects enrolled | Guatemala: 5 |
| Country: Number of subjects enrolled | Hong Kong: 5 |
| Country: Number of subjects enrolled | Ireland: 7 |
| Country: Number of subjects enrolled | Italy: 28 |
| Country: Number of subjects enrolled | Japan: 90 |
| Country: Number of subjects enrolled | Korea, Republic of: 32 |
| Country: Number of subjects enrolled | Malaysia: 14 |
| Country: Number of subjects enrolled | Mexico: 22 |
| Country: Number of subjects enrolled | Netherlands: 9 |
| Country: Number of subjects enrolled | New Zealand: 2 |
| Country: Number of subjects enrolled | Peru: 8 |

| | |
|--------------------------------------|------------------------|
| Country: Number of subjects enrolled | Philippines: 9 |
| Country: Number of subjects enrolled | Poland: 25 |
| Country: Number of subjects enrolled | Russian Federation: 45 |
| Country: Number of subjects enrolled | Singapore: 13 |
| Country: Number of subjects enrolled | South Africa: 4 |
| Country: Number of subjects enrolled | Spain: 29 |
| Country: Number of subjects enrolled | Sweden: 9 |
| Country: Number of subjects enrolled | Switzerland: 4 |
| Country: Number of subjects enrolled | Taiwan: 14 |
| Country: Number of subjects enrolled | Thailand: 4 |
| Country: Number of subjects enrolled | Turkey: 19 |
| Country: Number of subjects enrolled | United Kingdom: 37 |
| Country: Number of subjects enrolled | United States: 60 |
| Worldwide total number of subjects | 622 |
| EEA total number of subjects | 177 |

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) | 524 |
| From 65 to 84 years | 97 |
| 85 years and over | 1 |

Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

Per protocol, response/progression or adverse events during the second pembrolizumab course were not counted towards efficacy outcome measures or safety outcome measures respectively.

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 | Pembrolizumab |

Arm description:

Participants received pembrolizumab 200 mg intravenously (IV) every 3 weeks (Q3W) for up to 35 administrations (up to ~2 years). Qualified participants who received first course of pembrolizumab but continued to experience disease progression may have, at investigator's discretion, initiated a second course of pembrolizumab at 200 mg IV Q3W for up to 17 administrations (up to ~1 year).

| | |
|--|--------------------|
| Arm type | Experimental |
| Investigational medicinal product name | pembrolizumab |
| Investigational medicinal product code | |
| Other name | MK-3475, KEYTRUDA® |
| Pharmaceutical forms | Infusion |
| Routes of administration | Intravenous use |

Dosage and administration details:

Participants receive pembrolizumab 200 mg intravenously (IV) every 3 weeks (Q3W) for up to 35 administrations (up to ~2 years). Qualified participants who received first course of pembrolizumab but continued to experience disease progression may have, at investigator's discretion, initiated a second course of pembrolizumab at 200 mg IV Q3W for up to 17 administrations (up to ~1 year).

| | |
|------------------|--------------|
| Arm title | Chemotherapy |
|------------------|--------------|

Arm description:

Participants received capecitabine, eribulin, gemcitabine, or vinorelbine as single agent chemotherapy chosen by the treating physician (Treatment of Physician's Choice, TPC) in accordance with local regulations and guidelines.

| | |
|--|-------------------|
| Arm type | Active comparator |
| Investigational medicinal product name | capecitabine |
| Investigational medicinal product code | |
| Other name | XELODA® |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

Participants receive capecitabine as TPC in accordance with local regulations and guidelines.

| | |
|--|-----------------|
| Investigational medicinal product name | eribulin |
| Investigational medicinal product code | |
| Other name | HALAVEN® |
| Pharmaceutical forms | Infusion |
| Routes of administration | Intravenous use |

Dosage and administration details:

Participants receive eribulin as TPC in accordance with local regulations and guidelines.

| | |
|--|-----------------|
| Investigational medicinal product name | gemcitabine |
| Investigational medicinal product code | |
| Other name | GEMZAR® |
| Pharmaceutical forms | Infusion |
| Routes of administration | Intravenous use |

Dosage and administration details:

Participants receive gemcitabine as TPC in accordance with local regulations and guidelines.

| | |
|--|-----------------|
| Investigational medicinal product name | vinorelbine |
| Investigational medicinal product code | |
| Other name | NAVELBINE® |
| Pharmaceutical forms | Infusion |
| Routes of administration | Intravenous use |

Dosage and administration details:

Participants receive vinorelbine as TPC in accordance with local regulations and guidelines.

| Number of subjects in period 1 | Pembrolizumab | Chemotherapy |
|---------------------------------------|---------------|--------------|
| Started | 312 | 310 |
| Treated | 309 | 292 |
| Completed | 0 | 0 |
| Not completed | 312 | 310 |
| Consent withdrawn by subject | 11 | 32 |
| Physician decision | - | 1 |
| Death | 274 | 262 |
| Sponsor Decision | 27 | 15 |

Baseline characteristics

Reporting groups

| | |
|--|---------------|
| Reporting group title | Pembrolizumab |
| Reporting group description: | |
| Participants received pembrolizumab 200 mg intravenously (IV) every 3 weeks (Q3W) for up to 35 administrations (up to ~2 years). Qualified participants who received first course of pembrolizumab but continued to experience disease progression may have, at investigator's discretion, initiated a second course of pembrolizumab at 200 mg IV Q3W for up to 17 administrations (up to ~1 year). | |
| Reporting group title | Chemotherapy |
| Reporting group description: | |
| Participants received capecitabine, eribulin, gemcitabine, or vinorelbine as single agent chemotherapy chosen by the treating physician (Treatment of Physician's Choice, TPC) in accordance with local regulations and guidelines. | |

| Reporting group values | Pembrolizumab | Chemotherapy | Total |
|------------------------|---------------|--------------|-------|
| Number of subjects | 312 | 310 | 622 |
| Age categorical | | | |
| Units: Subjects | | | |

| | | | |
|---|--------|--------|-----|
| Age Continuous | | | |
| Units: Years | | | |
| arithmetic mean | 51.4 | 52.6 | |
| standard deviation | ± 11.4 | ± 11.2 | - |
| Sex: Female, Male | | | |
| Units: Participants | | | |
| Female | 312 | 308 | 620 |
| Male | 0 | 2 | 2 |
| Race (NIH/OMB) | | | |
| Units: Subjects | | | |
| American Indian or Alaska Native | 4 | 4 | 8 |
| Asian | 87 | 101 | 188 |
| Native Hawaiian or Other Pacific Islander | 0 | 0 | 0 |
| Black or African American | 13 | 4 | 17 |
| White | 183 | 180 | 363 |
| More than one race | 12 | 12 | 24 |
| Unknown or Not Reported | 13 | 9 | 22 |

End points

End points reporting groups

| | |
|--|---------------|
| Reporting group title | Pembrolizumab |
| Reporting group description: Participants received pembrolizumab 200 mg intravenously (IV) every 3 weeks (Q3W) for up to 35 administrations (up to ~2 years). Qualified participants who received first course of pembrolizumab but continued to experience disease progression may have, at investigator's discretion, initiated a second course of pembrolizumab at 200 mg IV Q3W for up to 17 administrations (up to ~1 year). | |
| Reporting group title | Chemotherapy |
| Reporting group description: Participants received capecitabine, eribulin, gemcitabine, or vinorelbine as single agent chemotherapy chosen by the treating physician (Treatment of Physician's Choice, TPC) in accordance with local regulations and guidelines. | |

Primary: Overall Survival in Participants With Programmed Cell Death Ligand 1 (PD-L1) With Combined Positive Score (CPS) ≥ 10

| | |
|---|---|
| End point title | Overall Survival in Participants With Programmed Cell Death Ligand 1 (PD-L1) With Combined Positive Score (CPS) ≥ 10 |
| End point description: Overall survival (OS) was defined as the time from randomization to death due to any cause. The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥ 10 who were included in a treatment group at randomization. | |
| End point type | Primary |
| End point timeframe: Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019) | |

| End point values | Pembrolizumab | Chemotherapy | | |
|----------------------------------|--------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 96 | 98 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 12.7 (9.9 to 16.3) | 11.6 (8.3 to 13.7) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | OS Hazard Ratio |
| Comparison groups | Chemotherapy v Pembrolizumab |
| Number of subjects included in analysis | 194 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.0574 |
| Method | Regression, Cox |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 0.78 |

| | |
|---------------------|---------|
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.57 |
| upper limit | 1.06 |

Primary: Overall Survival in Participants With PD-L1 CPS ≥ 1

| | |
|--|--|
| End point title | Overall Survival in Participants With PD-L1 CPS ≥ 1 |
| End point description: | |
| Overall survival (OS) was defined as the time from randomization to death due to any cause. The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥ 1 who were included in a treatment group at randomization. | |
| End point type | Primary |
| End point timeframe: | |
| Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019) | |

| End point values | Pembrolizumab | Chemotherapy | | |
|----------------------------------|--------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 203 | 202 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 10.7 (9.3 to 12.5) | 10.2 (7.9 to 12.6) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | OS Hazard Ratio |
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 405 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.0728 |
| Method | Regression, Cox |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 0.86 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.69 |
| upper limit | 1.06 |

Primary: Overall Survival in All Participants

| | |
|-----------------|--------------------------------------|
| End point title | Overall Survival in All Participants |
|-----------------|--------------------------------------|

End point description:

Overall survival (OS) was defined as the time from randomization to death due to any cause. The analysis population for this endpoint consisted of all participants who were included in a treatment group at randomization.

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

End point timeframe:

Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019)

| End point values | Pembrolizumab | Chemotherapy | | |
|----------------------------------|-------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 312 | 310 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 9.9 (8.3 to 11.4) | 10.8 (9.1 to 12.6) | | |

Statistical analyses

| Statistical analysis title | OS Hazard Ratio |
|---|------------------------------|
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 622 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.3802 |
| Method | Regression, Cox |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 0.97 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.82 |
| upper limit | 1.15 |

Secondary: Overall Response Rate per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1) in Participants With PD-L1 CPS ≥ 10

| | |
|-----------------|--|
| End point title | Overall Response Rate per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1) in Participants With PD-L1 CPS ≥ 10 |
|-----------------|--|

End point description:

Overall Response Rate (ORR), based on a Blinded Independent Central Review (BICR) assessment per RECIST 1.1, was defined as the percentage of participants who had a confirmed Complete Response (CR: Disappearance of all target lesions) or a Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions). The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥ 10 who were included in a treatment group at randomization.

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

End point timeframe:

Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019)

| | | | | |
|-----------------------------------|---------------------|-------------------|--|--|
| End point values | Pembrolizumab | Chemotherapy | | |
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 96 | 98 | | |
| Units: Percentage of participants | | | | |
| number (confidence interval 95%) | 17.7 (10.7 to 26.8) | 9.2 (4.3 to 16.7) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | Difference in Percentages |
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 194 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.0457 |
| Method | Miettinen & Nurminen method |
| Parameter estimate | Difference in percentages |
| Point estimate | 8.3 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -1.4 |
| upper limit | 18.4 |

Secondary: Overall Response Rate per RECIST 1.1 in Participants With PD-L1 CPS ≥1

| | |
|---|--|
| End point title | Overall Response Rate per RECIST 1.1 in Participants With PD-L1 CPS ≥1 |
| End point description: | |
| Overall Response Rate (ORR), based on BICR assessment per RECIST 1.1, was defined as the percentage of participants who had a confirmed Complete Response (CR: Disappearance of all target lesions) or a Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions). The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥1 who were included in a treatment group at randomization. | |
| End point type | Secondary |
| End point timeframe: | |
| Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019) | |

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------------|--------------------|-------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 203 | 202 | | |
| Units: Percentage of participants | | | | |
| number (confidence interval 95%) | 12.3 (8.1 to 17.6) | 9.4 (5.8 to 14.3) | | |

Statistical analyses

| Statistical analysis title | Difference in Percentages |
|---|------------------------------|
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 405 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.1752 |
| Method | Miettinen & Nurminen method |
| Parameter estimate | Difference in percentages |
| Point estimate | 2.9 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -3.3 |
| upper limit | 9.2 |

Secondary: Overall Response Rate per RECIST 1.1 in All Participants

| End point title | Overall Response Rate per RECIST 1.1 in All Participants |
|------------------------|---|
| End point description: | Overall Response Rate (ORR), based on BICR assessment per RECIST 1.1, was defined as the percentage of participants who had a confirmed Complete Response (CR: Disappearance of all target lesions) or a Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions). The analysis population for this endpoint consisted of all participants who were included in a treatment group at randomization. |
| End point type | Secondary |
| End point timeframe: | Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019) |

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------------|-------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 312 | 310 | | |
| Units: Percentage of participants | | | | |
| number (confidence interval 95%) | 9.6 (6.6 to 13.4) | 10.6 (7.4 to 14.6) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | Difference in Percentages |
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 622 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.6629 |
| Method | Miettinen & Nurminen method |
| Parameter estimate | Difference in percentages |
| Point estimate | -1 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -5.9 |
| upper limit | 3.8 |

Secondary: Progression-Free Survival per RECIST 1.1 in Participants With PD-L1 CPS ≥ 10

| | |
|-----------------|---|
| End point title | Progression-Free Survival per RECIST 1.1 in Participants With PD-L1 CPS ≥ 10 |
|-----------------|---|

End point description:

Progression-Free Survival (PFS), based on BICR assessment per RECIST 1.1, was defined as the time from randomization to the first documented progressive disease (PD) or death due to any cause, whichever occurred first. Per RECIST 1.1, PD was defined as $\geq 20\%$ increase in the sum of diameters of target lesions. In addition to the relative increase of 20%, the sum must also demonstrate an absolute increase of ≥ 5 mm. The appearance of one or more new lesions was also considered PD. The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥ 10 who were included in a treatment group at randomization.

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

End point timeframe:

Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019)

| | | | | |
|----------------------------------|------------------|------------------|--|--|
| End point values | Pembrolizumab | Chemotherapy | | |
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 96 | 98 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 2.1 (2.0 to 2.5) | 3.4 (2.3 to 4.1) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | PFS Hazard Ratio |
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 194 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.7936 |
| Method | Regression, Cox |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.14 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.82 |
| upper limit | 1.59 |

Secondary: Progression-Free Survival per RECIST 1.1 in Participants With PD-L1 CPS ≥ 1

| | |
|---|--|
| End point title | Progression-Free Survival per RECIST 1.1 in Participants With PD-L1 CPS ≥ 1 |
| End point description: Progression-Free Survival (PFS), based on BICR assessment per RECIST 1.1, was defined as the time from randomization to the first documented progressive disease (PD) or death due to any cause, whichever occurred first. Per RECIST 1.1, PD was defined as $\geq 20\%$ increase in the sum of diameters of target lesions. In addition to the relative increase of 20%, the sum must also demonstrate an absolute increase of ≥ 5 mm. The appearance of one or more new lesions was also considered PD. The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥ 1 who were included in a treatment group at randomization. | |
| End point type | Secondary |
| End point timeframe: Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019) | |

| | | | | |
|----------------------------------|------------------|------------------|--|--|
| End point values | Pembrolizumab | Chemotherapy | | |
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 203 | 202 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 2.1 (2.0 to 2.1) | 3.1 (2.3 to 4.0) | | |

Statistical analyses

| | |
|-----------------------------------|------------------------------|
| Statistical analysis title | PFS Hazard Ratio |
| Comparison groups | Pembrolizumab v Chemotherapy |

| | |
|---|-------------------|
| Number of subjects included in analysis | 405 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.9964 |
| Method | Regression, Cox |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.35 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 1.08 |
| upper limit | 1.68 |

Secondary: Progression-Free Survival per RECIST 1.1 in All Participants

| | |
|---|--|
| End point title | Progression-Free Survival per RECIST 1.1 in All Participants |
| End point description: | |
| Progression-Free Survival (PFS), based on BICR assessment per RECIST 1.1, was defined as the time from randomization to the first documented progressive disease (PD) or death due to any cause, whichever occurred first. Per RECIST 1.1, PD was defined as $\geq 20\%$ increase in the sum of diameters of target lesions. In addition to the relative increase of 20%, the sum must also demonstrate an absolute increase of ≥ 5 mm. The appearance of one or more new lesions was also considered PD. The analysis population for this endpoint consisted of all participants who were included in a treatment group at randomization. | |
| End point type | Secondary |
| End point timeframe: | |
| Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019) | |

| End point values | Pembrolizumab | Chemotherapy | | |
|----------------------------------|------------------|------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 312 | 310 | | |
| Units: Months | | | | |
| median (confidence interval 95%) | 2.1 (2.0 to 2.1) | 3.3 (2.7 to 4.0) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | PFS Hazard Ratio |
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 622 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 1 |
| Method | Regression, Cox |
| Parameter estimate | Hazard ratio (HR) |
| Point estimate | 1.6 |

| | |
|---------------------|---------|
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 1.33 |
| upper limit | 1.92 |

Secondary: Duration of Response per RECIST 1.1 in Participants With PD-L1 CPS ≥10 Who Had a Confirmed Response

| | |
|-----------------|---|
| End point title | Duration of Response per RECIST 1.1 in Participants With PD-L1 CPS ≥10 Who Had a Confirmed Response |
|-----------------|---|

End point description:

For participants with PD-L1 CPS ≥10 who demonstrated a confirmed Complete Response (CR: disappearance of all target lesions) or Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions) per RECIST 1.1, Duration of Response (DOR) was defined as the time from first documented evidence of a CR or PR until progressive disease (PD) or death. Per RECIST 1.1, PD was defined as at least a 20% increase in the sum of diameters of target lesions as well as an absolute increase of at least a 5 mm in the sum of diameters. The appearance of one or more new lesions was also considered PD. DOR assessments were based on BICR. The analysis population for this endpoint consisted of all randomized participants with PD-L1 CPS ≥10, whether or not they received study treatment, who demonstrated a confirmed response (CR or PR). Participants were included in the treatment arm to which they were randomized.

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

End point timeframe:

Up to approximately 36 months (from time of first documented evidence of CR or PR through Final Analysis database cutoff date of 11-April-2019)

| End point values | Pembrolizumab | Chemotherapy | | |
|-------------------------------|--------------------|-------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 17 | 9 | | |
| Units: Months | | | | |
| median (full range (min-max)) | 9999 (2.2 to 9999) | 7.1 (3.8 to 9999) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Duration of Response per RECIST 1.1 in Participants With PD-L1 CPS ≥1 Who Had a Confirmed Response

| | |
|-----------------|--|
| End point title | Duration of Response per RECIST 1.1 in Participants With PD-L1 CPS ≥1 Who Had a Confirmed Response |
|-----------------|--|

End point description:

For participants with PD-L1 CPS ≥1 who demonstrated a confirmed Complete Response (CR: disappearance of all target lesions) or Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions) per RECIST 1.1, Duration of Response (DOR) was defined as the time from first documented evidence of a CR or PR until progressive disease (PD) or death. Per RECIST 1.1, PD was defined as at least a 20% increase in the sum of diameters of target lesions as well as an absolute increase of at least a 5 mm in the sum of diameters. The appearance of one or more new lesions was also considered PD. DOR assessments were based on BICR. The analysis population for this endpoint

consisted of all randomized participants with PD-L1 CPS ≥ 1 , regardless of whether or not they received study treatment, who demonstrated a confirmed response (CR or PR). Participants were included in the treatment arm to which they were randomized.

| | |
|---|-----------|
| End point type | Secondary |
| End point timeframe: | |
| Up to approximately 36 months (from time of first documented evidence of CR or PR through Final Analysis database cutoff date of 11-April-2019) | |

| End point values | Pembrolizumab | Chemotherapy | | |
|-------------------------------|--------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 25 | 19 | | |
| Units: Months | | | | |
| median (full range (min-max)) | 12.2 (2.2 to 9999) | 9999 (9999 to 9999) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Duration of Response per RECIST 1.1 in All Participants Who Had a Confirmed Response

| | |
|-----------------|--|
| End point title | Duration of Response per RECIST 1.1 in All Participants Who Had a Confirmed Response |
|-----------------|--|

End point description:

For participants who demonstrated a confirmed Complete Response (CR: disappearance of all target lesions) or Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions) per RECIST 1.1, Duration of Response (DOR) was defined as the time from first documented evidence of a CR or PR until progressive disease (PD) or death. Per RECIST 1.1, PD was defined as at least a 20% increase in the sum of diameters of target lesions as well as an absolute increase of at least a 5 mm in the sum of diameters. The appearance of one or more new lesions was also considered PD. DOR assessments were based on BICR. The analysis population for this endpoint consisted of all randomized participants, regardless of whether or not they received study treatment, who demonstrated a confirmed response (CR or PR). Participants were included in the treatment arm to which they were randomized.

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

End point timeframe:

Up to approximately 36 months (from time of first documented evidence of CR or PR through Final Analysis database cutoff date of 11-April-2019)

| End point values | Pembrolizumab | Chemotherapy | | |
|-------------------------------|--------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 30 | 33 | | |
| Units: Months | | | | |
| median (full range (min-max)) | 12.2 (2.2 to 9999) | 9999 (9999 to 9999) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Disease Control Rate per RECIST 1.1 in Participants With PD-L1 CPS ≥ 10

| | |
|-----------------|--|
| End point title | Disease Control Rate per RECIST 1.1 in Participants With PD-L1 CPS ≥ 10 |
|-----------------|--|

End point description:

Disease Control Rate (DCR), based on BICR assessment per RECIST 1.1, was defined as the percentage of participants who had a Complete Response (CR: Disappearance of all target lesions) or Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions) or Stable Disease for at least 24 weeks (SD: Neither sufficient shrinkage to qualify for PR nor sufficient increase to qualify for Progressive Disease [PD: At least a 20% increase in the sum of diameters of target lesions and an absolute increase of at least 5 mm. The appearance of one or more new lesions was also considered PD.]) The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥ 10 who were included in a treatment group at randomization.

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

End point timeframe:

Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019)

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------------|---------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 96 | 98 | | |
| Units: Percentage of participants | | | | |
| number (confidence interval 95%) | 19.8 (12.4 to 29.2) | 17.3 (10.4 to 26.3) | | |

Statistical analyses

| | |
|---|------------------------------|
| Statistical analysis title | Difference in Percentages |
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 194 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.3388 |
| Method | Miettinen & Nurminen method |
| Parameter estimate | Difference in percentages |
| Point estimate | 2.3 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -8.7 |
| upper limit | 13.5 |

Secondary: Disease Control Rate per RECIST 1.1 in Participants With PD-L1 CPS ≥ 1

| | |
|-----------------|--|
| End point title | Disease Control Rate per RECIST 1.1 in Participants With PD-L1 |
|-----------------|--|

End point description:

Disease Control Rate (DCR), based on BICR assessment per RECIST 1.1, was defined as the percentage of participants who had a Complete Response (CR: Disappearance of all target lesions) or Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions) or Stable Disease for at least 24 weeks (SD: Neither sufficient shrinkage to qualify for PR nor sufficient increase to qualify for Progressive Disease [PD: At least a 20% increase in the sum of diameters of target lesions and an absolute increase of at least 5 mm. The appearance of one or more new lesions was also considered PD.]) The analysis population for this endpoint consisted of all participants with PD-L1 CPS ≥1 who were included in a treatment group at randomization.

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

End point timeframe:

Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019)

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------------|--------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 203 | 202 | | |
| Units: Percentage of participants | | | | |
| number (confidence interval 95%) | 14.3 (9.8 to 19.9) | 15.8 (11.1 to 21.6) | | |

Statistical analyses

| Statistical analysis title | Difference in Percentages |
|---|------------------------------|
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 405 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.6701 |
| Method | Miettinen & Nurminen method |
| Parameter estimate | Difference in percentages |
| Point estimate | -1.6 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -8.6 |
| upper limit | 5.5 |

Secondary: Disease Control Rate per RECIST 1.1 in All Participants

| | |
|-----------------|---|
| End point title | Disease Control Rate per RECIST 1.1 in All Participants |
|-----------------|---|

End point description:

Disease Control Rate (DCR), based on BICR assessment per RECIST 1.1, was defined as the percentage of participants who had a Complete Response (CR: Disappearance of all target lesions) or Partial Response (PR: At least a 30% decrease in the sum of diameters of target lesions) or Stable Disease for at least 24 weeks (SD: Neither sufficient shrinkage to qualify for PR nor sufficient increase to qualify for Progressive Disease [PD: At least a 20% increase in the sum of diameters of target lesions and an absolute increase of at least 5 mm. The appearance of one or more new lesions was also considered

PD.]) The analysis population for this endpoint consisted of all participants who were included in a treatment group at randomization.

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

End point timeframe:

Up to approximately 36 months (through Final Analysis database cutoff date of 11-April-2019)

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------------|--------------------|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 312 | 310 | | |
| Units: Percentage of participants | | | | |
| number (confidence interval 95%) | 12.2 (8.8 to 16.3) | 18.7 (14.5 to 23.5) | | |

Statistical analyses

| Statistical analysis title | Difference in Percentages |
|---|------------------------------|
| Comparison groups | Pembrolizumab v Chemotherapy |
| Number of subjects included in analysis | 622 |
| Analysis specification | Pre-specified |
| Analysis type | |
| P-value | = 0.9877 |
| Method | Miettinen & Nurminen method |
| Parameter estimate | Difference in percentages |
| Point estimate | -6.5 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -12.2 |
| upper limit | -0.8 |

Secondary: Number of Participants Who Experienced One or More Adverse Events

| | |
|-----------------|---|
| End point title | Number of Participants Who Experienced One or More Adverse Events |
|-----------------|---|

End point description:

An adverse event (AE) is any untoward medical occurrence in a study participant administered a pharmaceutical product that does not necessarily have to have a causal relationship with this treatment. An AE can therefore be any unfavorable and unintended sign, symptom, or disease temporally associated with the use of a medicinal product, whether or not related to the medicinal product. The analysis population for this endpoint consisted of all randomized participants who received at least 1 dose of study treatment.

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

End point timeframe:

Up to approximately 60 months

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------|-----------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 309 | 292 | | |
| Units: Participants | 285 | 281 | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Participants Who Discontinued Study Treatment Due to an Adverse Event

| | |
|-----------------|---|
| End point title | Number of Participants Who Discontinued Study Treatment Due to an Adverse Event |
|-----------------|---|

End point description:

An adverse event (AE) is any untoward medical occurrence in a study participant administered a pharmaceutical product that does not necessarily have to have a causal relationship with this treatment. An AE can therefore be any unfavorable and unintended sign, symptom, or disease temporally associated with the use of a medicinal product, whether or not related to the medicinal product. The analysis population for this endpoint consisted of all randomized participants who received at least 1 dose of study treatment.

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

End point timeframe:

Up to approximately 60 months

| End point values | Pembrolizumab | Chemotherapy | | |
|-----------------------------|-----------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 309 | 292 | | |
| Units: Participants | 14 | 16 | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

All-Cause Mortality and Adverse Events (including first and second courses): Up to approximately 60 months

Adverse event reporting additional description:

All-cause mortality includes all randomized participants. Serious and other AEs include participants who received at least 1 dose of study treatment. MedDRA preferred terms "Neoplasm progression", "Malignant neoplasm progression" and "Disease progression" unrelated to drug were excluded as AEs.

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

Dictionary used

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

| | |
|--------------------|------|
| Dictionary version | 23.1 |
|--------------------|------|

Reporting groups

| | |
|-----------------------|----------------------------|
| Reporting group title | Pembrolizumab First Course |
|-----------------------|----------------------------|

Reporting group description:

Participants received pembrolizumab 200 mg IV Q3W for up to 35 administrations (up to ~2 years).

| | |
|-----------------------|--------------|
| Reporting group title | Chemotherapy |
|-----------------------|--------------|

Reporting group description:

Participants received capecitabine, eribulin, gemcitabine, or vinorelbine as TPC in accordance with local regulations and guidelines.

| | |
|-----------------------|-----------------------------|
| Reporting group title | Pembrolizumab Second Course |
|-----------------------|-----------------------------|

Reporting group description:

Qualified participants who received the first course of pembrolizumab 200 mg IV Q3W for up to 35 administrations (up to ~2 years), but experienced disease progression, initiated a second course of pembrolizumab at the investigator's discretion, at 200 mg IV Q3W for up to 17 administrations (up to ~1 year).

| Serious adverse events | Pembrolizumab First Course | Chemotherapy | Pembrolizumab Second Course |
|---|----------------------------|-------------------|-----------------------------|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 65 / 309 (21.04%) | 60 / 292 (20.55%) | 1 / 8 (12.50%) |
| number of deaths (all causes) | 283 | 289 | 0 |
| number of deaths resulting from adverse events | 1 | 2 | 0 |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Cancer pain | | | |
| subjects affected / exposed | 3 / 309 (0.97%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| Infected neoplasm | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |

| | | | |
|---|-----------------|-----------------|---------------|
| Inflammatory carcinoma of the breast | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Myelodysplastic syndrome | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pelvic neoplasm | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Tumour associated fever | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 | | | |
| Circulatory collapse | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| Deep vein thrombosis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Jugular vein thrombosis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Peripheral ischaemia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |

| | | | |
|--|-----------------|-----------------|---------------|
| Thrombosis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| General disorders and administration site conditions | | | |
| Chest pain | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Death | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 4 / 292 (1.37%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 4 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 4 | 0 / 0 |
| Fatigue | | | |
| subjects affected / exposed | 3 / 309 (0.97%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 3 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Hyperthermia | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Influenza like illness | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Malaise | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Mucosal inflammation | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|---|-----------------|-----------------|---------------|
| Oedema peripheral | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Pyrexia | | | |
| subjects affected / exposed | 4 / 309 (1.29%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 4 | 2 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Reproductive system and breast disorders | | | |
| Breast pain | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Respiratory, thoracic and mediastinal disorders | | | |
| Asthma | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Dyspnoea | | | |
| subjects affected / exposed | 3 / 309 (0.97%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 3 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Haemothorax | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| Interstitial lung disease | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Oropharyngeal pain | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Pleural effusion | | | |
| subjects affected / exposed | 8 / 309 (2.59%) | 3 / 292 (1.03%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 8 | 1 / 3 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pneumonitis | | | |
| subjects affected / exposed | 2 / 309 (0.65%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 2 / 2 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pneumothorax | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Pulmonary embolism | | | |
| subjects affected / exposed | 2 / 309 (0.65%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 2 | 1 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Respiratory failure | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Psychiatric disorders | | | |
| Completed suicide | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Depression | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Investigations | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| Alanine aminotransferase increased subjects affected / exposed | 2 / 309 (0.65%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 2 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Aspartate aminotransferase increased | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Blood corticotrophin abnormal | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Injury, poisoning and procedural complications | | | |
| Ankle fracture | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Femur fracture | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Post procedural complication | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Radiation associated pain | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Toxicity to various agents | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |

| | | | |
|---|-----------------|-----------------|---------------|
| Cardiac disorders | | | |
| Cardiac arrest | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Cardio-respiratory arrest | | | |
| subjects affected / exposed | 2 / 309 (0.65%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 2 | 0 / 0 | 0 / 0 |
| Cardiogenic shock | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Sinus tachycardia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Nervous system disorders | | | |
| Brain oedema | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Headache | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Horner's syndrome | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Lethargy | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |

| | | | |
|---|-----------------|-----------------|---------------|
| Neuralgia | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Neuropathy peripheral | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Post herpetic neuralgia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Seizure | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Spinal cord compression | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Syncope | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Transient ischaemic attack | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Blood and lymphatic system disorders | | | |
| Anaemia | | | |
| subjects affected / exposed | 2 / 309 (0.65%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 2 / 2 | 2 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Febrile neutropenia | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 1 / 309 (0.32%) | 5 / 292 (1.71%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 6 / 6 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Neutropenia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 4 / 292 (1.37%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 5 / 6 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pancytopenia | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| Thrombocytopenia | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Gastrointestinal disorders | | | |
| Abdominal pain | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Colitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Constipation | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 3 / 292 (1.03%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 3 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Diarrhoea | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 2 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Large intestine polyp | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Oesophageal achalasia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Small intestinal perforation | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Vomiting | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Hepatobiliary disorders | | | |
| Cholangitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Cholecystitis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Cholelithiasis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Liver disorder | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Hepatotoxicity | | | |

| | | | |
|---|-----------------|-----------------|----------------|
| subjects affected / exposed | 0 / 309 (0.00%) | 0 / 292 (0.00%) | 1 / 8 (12.50%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 1 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Skin and subcutaneous tissue disorders | | | |
| Decubitus ulcer | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Rash maculo-papular | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Urticaria | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Renal and urinary disorders | | | |
| Acute kidney injury | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| Tubulointerstitial nephritis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Endocrine disorders | | | |
| Secondary adrenocortical insufficiency | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Musculoskeletal and connective tissue disorders | | | |
| Arthralgia | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Back pain | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Flank pain | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Muscular weakness | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Myositis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Rhabdomyolysis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Infections and infestations | | | |
| Bronchitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Cellulitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Device related infection | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 2 / 309 (0.65%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Device related sepsis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Enterococcal sepsis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Erysipelas | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Gastroenteritis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Herpes zoster | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Infectious pleural effusion | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Klebsiella infection | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Liver abscess | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Lower respiratory tract infection | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Mastitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pharyngotonsillitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pneumonia | | | |
| subjects affected / exposed | 6 / 309 (1.94%) | 8 / 292 (2.74%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 6 | 2 / 8 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 2 | 0 / 0 |
| Pyelonephritis | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Respiratory tract infection | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Sepsis | | | |
| subjects affected / exposed | 2 / 309 (0.65%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 2 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| Staphylococcal bacteraemia | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Systemic candida | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Tonsillitis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Upper respiratory tract infection | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Urinary tract infection | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Wound infection | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Metabolism and nutrition disorders | | | |
| Cachexia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| Decreased appetite | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Dehydration | | | |

| | | | |
|---|-----------------|-----------------|---------------|
| subjects affected / exposed | 0 / 309 (0.00%) | 2 / 292 (0.68%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Diabetic ketoacidosis | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Hypercalcaemia | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Hyperglycaemia | | | |
| subjects affected / exposed | 0 / 309 (0.00%) | 1 / 292 (0.34%) | 0 / 8 (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 |
| Hypocalcaemia | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (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 |
| Type 1 diabetes mellitus | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 0 / 292 (0.00%) | 0 / 8 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 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 | Pembrolizumab First Course | Chemotherapy | Pembrolizumab Second Course |
|---|----------------------------|--------------------|-----------------------------|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 259 / 309 (83.82%) | 263 / 292 (90.07%) | 4 / 8 (50.00%) |
| General disorders and administration site conditions | | | |
| Asthenia | | | |
| subjects affected / exposed | 36 / 309 (11.65%) | 38 / 292 (13.01%) | 0 / 8 (0.00%) |
| occurrences (all) | 40 | 42 | 0 |
| Malaise | | | |

| | | | |
|---|-------------------|-------------------|----------------|
| subjects affected / exposed | 9 / 309 (2.91%) | 15 / 292 (5.14%) | 0 / 8 (0.00%) |
| occurrences (all) | 9 | 17 | 0 |
| Fatigue | | | |
| subjects affected / exposed | 55 / 309 (17.80%) | 54 / 292 (18.49%) | 1 / 8 (12.50%) |
| occurrences (all) | 67 | 61 | 2 |
| Oedema peripheral | | | |
| subjects affected / exposed | 16 / 309 (5.18%) | 14 / 292 (4.79%) | 0 / 8 (0.00%) |
| occurrences (all) | 17 | 17 | 0 |
| Mucosal inflammation | | | |
| subjects affected / exposed | 1 / 309 (0.32%) | 22 / 292 (7.53%) | 0 / 8 (0.00%) |
| occurrences (all) | 1 | 22 | 0 |
| Pyrexia | | | |
| subjects affected / exposed | 35 / 309 (11.33%) | 34 / 292 (11.64%) | 0 / 8 (0.00%) |
| occurrences (all) | 46 | 49 | 0 |
| Influenza like illness | | | |
| subjects affected / exposed | 3 / 309 (0.97%) | 4 / 292 (1.37%) | 1 / 8 (12.50%) |
| occurrences (all) | 4 | 4 | 3 |
| Respiratory, thoracic and mediastinal disorders | | | |
| Cough | | | |
| subjects affected / exposed | 53 / 309 (17.15%) | 31 / 292 (10.62%) | 0 / 8 (0.00%) |
| occurrences (all) | 60 | 33 | 0 |
| Dyspnoea | | | |
| subjects affected / exposed | 37 / 309 (11.97%) | 32 / 292 (10.96%) | 0 / 8 (0.00%) |
| occurrences (all) | 41 | 39 | 0 |
| Psychiatric disorders | | | |
| Insomnia | | | |
| subjects affected / exposed | 9 / 309 (2.91%) | 17 / 292 (5.82%) | 0 / 8 (0.00%) |
| occurrences (all) | 9 | 18 | 0 |
| Investigations | | | |
| Alanine aminotransferase increased | | | |
| subjects affected / exposed | 22 / 309 (7.12%) | 24 / 292 (8.22%) | 1 / 8 (12.50%) |
| occurrences (all) | 25 | 43 | 1 |
| Aspartate aminotransferase increased | | | |
| subjects affected / exposed | 32 / 309 (10.36%) | 28 / 292 (9.59%) | 1 / 8 (12.50%) |
| occurrences (all) | 39 | 51 | 1 |
| Neutrophil count decreased | | | |

| | | | |
|--|-------------------------|--------------------------|---------------------|
| subjects affected / exposed occurrences (all) | 3 / 309 (0.97%) 8 | 44 / 292 (15.07%) 144 | 0 / 8 (0.00%) 0 |
| White blood cell count decreased subjects affected / exposed occurrences (all) | 5 / 309 (1.62%) 11 | 30 / 292 (10.27%) 103 | 0 / 8 (0.00%) 0 |
| Weight decreased subjects affected / exposed occurrences (all) | 10 / 309 (3.24%) 10 | 16 / 292 (5.48%) 16 | 0 / 8 (0.00%) 0 |
| Blood bilirubin increased subjects affected / exposed occurrences (all) | 3 / 309 (0.97%) 3 | 8 / 292 (2.74%) 9 | 1 / 8 (12.50%) 1 |
| Nervous system disorders | | | |
| Dizziness subjects affected / exposed occurrences (all) | 14 / 309 (4.53%) 15 | 20 / 292 (6.85%) 21 | 0 / 8 (0.00%) 0 |
| Headache subjects affected / exposed occurrences (all) | 44 / 309 (14.24%) 61 | 34 / 292 (11.64%) 43 | 0 / 8 (0.00%) 0 |
| Neuropathy peripheral subjects affected / exposed occurrences (all) | 4 / 309 (1.29%) 4 | 26 / 292 (8.90%) 28 | 0 / 8 (0.00%) 0 |
| Peripheral sensory neuropathy subjects affected / exposed occurrences (all) | 6 / 309 (1.94%) 6 | 19 / 292 (6.51%) 20 | 0 / 8 (0.00%) 0 |
| Blood and lymphatic system disorders | | | |
| Anaemia subjects affected / exposed occurrences (all) | 28 / 309 (9.06%) 31 | 46 / 292 (15.75%) 80 | 0 / 8 (0.00%) 0 |
| Neutropenia subjects affected / exposed occurrences (all) | 2 / 309 (0.65%) 2 | 61 / 292 (20.89%) 146 | 0 / 8 (0.00%) 0 |
| Gastrointestinal disorders | | | |
| Abdominal pain subjects affected / exposed occurrences (all) | 18 / 309 (5.83%) 18 | 15 / 292 (5.14%) 18 | 0 / 8 (0.00%) 0 |
| Constipation | | | |

| | | | |
|---|-------------------------|--------------------------|---------------------|
| subjects affected / exposed occurrences (all) | 50 / 309 (16.18%) 56 | 51 / 292 (17.47%) 59 | 0 / 8 (0.00%) 0 |
| Diarrhoea subjects affected / exposed occurrences (all) | 29 / 309 (9.39%) 34 | 60 / 292 (20.55%) 83 | 1 / 8 (12.50%) 1 |
| Nausea subjects affected / exposed occurrences (all) | 50 / 309 (16.18%) 63 | 89 / 292 (30.48%) 117 | 0 / 8 (0.00%) 0 |
| Vomiting subjects affected / exposed occurrences (all) | 23 / 309 (7.44%) 30 | 33 / 292 (11.30%) 44 | 0 / 8 (0.00%) 0 |
| Stomatitis subjects affected / exposed occurrences (all) | 6 / 309 (1.94%) 7 | 23 / 292 (7.88%) 24 | 0 / 8 (0.00%) 0 |
| Skin and subcutaneous tissue disorders | | | |
| Alopecia subjects affected / exposed occurrences (all) | 2 / 309 (0.65%) 2 | 43 / 292 (14.73%) 44 | 0 / 8 (0.00%) 0 |
| Palmar-plantar erythrodysesthesia syndrome subjects affected / exposed occurrences (all) | 2 / 309 (0.65%) 2 | 36 / 292 (12.33%) 47 | 0 / 8 (0.00%) 0 |
| Pruritus subjects affected / exposed occurrences (all) | 35 / 309 (11.33%) 44 | 12 / 292 (4.11%) 12 | 0 / 8 (0.00%) 0 |
| Rash subjects affected / exposed occurrences (all) | 23 / 309 (7.44%) 25 | 13 / 292 (4.45%) 14 | 0 / 8 (0.00%) 0 |
| Renal and urinary disorders | | | |
| Leukocyturia subjects affected / exposed occurrences (all) | 0 / 309 (0.00%) 0 | 0 / 292 (0.00%) 0 | 1 / 8 (12.50%) 1 |
| Endocrine disorders | | | |
| Hypothyroidism subjects affected / exposed occurrences (all) | 25 / 309 (8.09%) 26 | 4 / 292 (1.37%) 4 | 0 / 8 (0.00%) 0 |
| Musculoskeletal and connective tissue disorders | | | |

| | | | |
|------------------------------------|-------------------|-------------------|----------------|
| Arthralgia | | | |
| subjects affected / exposed | 37 / 309 (11.97%) | 24 / 292 (8.22%) | 1 / 8 (12.50%) |
| occurrences (all) | 46 | 28 | 1 |
| Back pain | | | |
| subjects affected / exposed | 22 / 309 (7.12%) | 30 / 292 (10.27%) | 0 / 8 (0.00%) |
| occurrences (all) | 24 | 33 | 0 |
| Pain in extremity | | | |
| subjects affected / exposed | 19 / 309 (6.15%) | 24 / 292 (8.22%) | 1 / 8 (12.50%) |
| occurrences (all) | 20 | 28 | 1 |
| Muscular weakness | | | |
| subjects affected / exposed | 4 / 309 (1.29%) | 4 / 292 (1.37%) | 1 / 8 (12.50%) |
| occurrences (all) | 4 | 4 | 1 |
| Musculoskeletal chest pain | | | |
| subjects affected / exposed | 11 / 309 (3.56%) | 4 / 292 (1.37%) | 1 / 8 (12.50%) |
| occurrences (all) | 11 | 4 | 1 |
| Infections and infestations | | | |
| Nasopharyngitis | | | |
| subjects affected / exposed | 18 / 309 (5.83%) | 14 / 292 (4.79%) | 0 / 8 (0.00%) |
| occurrences (all) | 22 | 20 | 0 |
| Urinary tract infection | | | |
| subjects affected / exposed | 16 / 309 (5.18%) | 20 / 292 (6.85%) | 0 / 8 (0.00%) |
| occurrences (all) | 18 | 24 | 0 |
| Metabolism and nutrition disorders | | | |
| Decreased appetite | | | |
| subjects affected / exposed | 30 / 309 (9.71%) | 38 / 292 (13.01%) | 0 / 8 (0.00%) |
| occurrences (all) | 31 | 43 | 0 |
| Hyperglycaemia | | | |
| subjects affected / exposed | 12 / 309 (3.88%) | 17 / 292 (5.82%) | 0 / 8 (0.00%) |
| occurrences (all) | 14 | 21 | 0 |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|-------------------|---|
| 28 January 2016 | Amendment 1: The primary reason for this amendment was to update the description and proper formulation of eribulin in the Investigational Products section. |
| 08 September 2017 | Amendment 2: The primary reasons for this amendment were to revise the primary and secondary objectives, statistical analysis plan, and trial design of this study. |
| 25 October 2017 | Amendment 3: The primary reason for this amendment was to update the timing of the interim/final analysis and the target events for final analysis and sample size and power calculation in the Statistical Analysis Plan Summary section. |
| 22 December 2017 | Amendment 4: The primary reasons for this amendment were to update the Trial Summary, Trial Design, and several other sections of the protocol. |
| 03 April 2018 | Amendment 5: The primary reasons for this amendment were to revise the study objectives, hypotheses, and statistical analysis plan to include participants with PD-L1 positive tumors with a higher combined positive score (CPS) cutoff of ≥ 10 (CPS ≥ 10). |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported