



## Clinical trial results:

### Multinational, Phase 3, Randomized, Double-blind, Placebo-controlled Efficacy and Safety Study of Enzalutamide Plus Androgen Deprivation Therapy (ADT) Versus Placebo Plus ADT in Patients With Metastatic Hormone Sensitive Prostate Cancer (mHSPC)

#### Summary

EudraCT number	2015-003869-28
Trial protocol	NL BE ES DK FI SE DE SK GB FR IT
Global end of trial date	

#### Results information

Result version number	v1
This version publication date	23 April 2020
First version publication date	23 April 2020

#### Trial information

##### Trial identification

Sponsor protocol code	9785-CL-0335
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02677896
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	Astellas Pharma Global Development, Inc. (APGD)
Sponsor organisation address	1 Astellas Way, Northbrook, IL, United States, 60062
Public contact	Clinical Trial Disclosure, Astellas Pharma Global Development, Inc. (APGD), <a href="mailto:astellas.resultsdisclosure@astellas.com">astellas.resultsdisclosure@astellas.com</a>
Scientific contact	Clinical Trial Disclosure, Astellas Pharma Global Development, Inc. (APGD), <a href="mailto:astellas.resultsdisclosure@astellas.com">astellas.resultsdisclosure@astellas.com</a>

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	Interim
Date of interim/final analysis	14 October 2018
Is this the analysis of the primary completion data?	Yes
Primary completion date	14 October 2018
Global end of trial reached?	No

Notes:

## General information about the trial

Main objective of the trial:

The primary objective of this study was to determine the benefit of enzalutamide plus ADT as compared to placebo plus ADT as assessed by radiographic progression-free survival (rPFS) based on independent central review (ICR).

Protection of trial subjects:

This clinical study was written, conducted and reported in accordance with the protocol, International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) Good Clinical Practice (GCP) Guidelines, and applicable local regulations, including the European Directive 2001/20/EC, on the protection of human rights, and with the ethical principles that have their origin in the Declaration of Helsinki. Astellas ensures that the use and disclosure of protected health information (PHI) obtained during a research study complies with the federal, national and/or regional legislation related to the privacy and protection of personal information.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	09 March 2016
Long term follow-up planned	Yes
Long term follow-up rationale	Safety, Efficacy
Long term follow-up duration	31 Months
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	Japan: 92
Country: Number of subjects enrolled	Taiwan: 30
Country: Number of subjects enrolled	Korea, Republic of: 25
Country: Number of subjects enrolled	Australia: 47
Country: Number of subjects enrolled	New Zealand: 23
Country: Number of subjects enrolled	Russian Federation: 139
Country: Number of subjects enrolled	Slovakia: 81
Country: Number of subjects enrolled	Italy: 68
Country: Number of subjects enrolled	Denmark: 62
Country: Number of subjects enrolled	Romania: 57
Country: Number of subjects enrolled	Spain: 55
Country: Number of subjects enrolled	Netherlands: 54
Country: Number of subjects enrolled	Poland: 47
Country: Number of subjects enrolled	France: 44
Country: Number of subjects enrolled	Finland: 39
Country: Number of subjects enrolled	Belgium: 15

Country: Number of subjects enrolled	Sweden: 12
Country: Number of subjects enrolled	Germany: 10
Country: Number of subjects enrolled	United Kingdom: 2
Country: Number of subjects enrolled	United States: 122
Country: Number of subjects enrolled	Canada: 41
Country: Number of subjects enrolled	Argentina: 10
Country: Number of subjects enrolled	Chile: 52
Country: Number of subjects enrolled	Israel: 23
Worldwide total number of subjects	1150
EEA total number of subjects	546

Notes:

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### Subjects enrolled per age group

In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	300
From 65 to 84 years	824
85 years and over	26

## Subject disposition

### Recruitment

Recruitment details:

Participants with metastatic hormone sensitive prostate cancer (mHSPC) were enrolled in 204 study sites worldwide.

### Pre-assignment

Screening details:

The randomization was stratified by volume of disease (low vs high) and prior docetaxel therapy for prostate cancer (no prior docetaxel, 1 to 5 cycles, 6 cycles).

### Period 1

Period 1 title	Overall Study (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator, Monitor, Carer

### Arms

Are arms mutually exclusive?	Yes
<b>Arm title</b>	Enzalutamide + Androgen Deprivation Therapy (ADT)

Arm description:

Participants received enzalutamide orally once daily. ADT (either bilateral orchiectomy or luteinizing hormone-releasing hormone (LHRH) agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock. In this arm 'completed' refers to participants still on treatment. Overall survival assessed when at least 342 deaths are observed.

Arm type	Experimental
Investigational medicinal product name	Enzalutamide
Investigational medicinal product code	MDV3100
Other name	
Pharmaceutical forms	Capsule
Routes of administration	Oral use

Dosage and administration details:

Participants received 4 capsules (40 mg each) of enzalutamide orally once a day, for a total daily dose of 160 mg. Treatment was given with or without food and as close as possible to the same time each day.

<b>Arm title</b>	Placebo + Androgen Deprivation Therapy (ADT)
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Arm description:

Participants received matching placebo orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock. In this arm 'completed' refers to participants still on treatment. Overall survival assessed when at least 342 deaths are observed.

Arm type	Placebo
Investigational medicinal product name	Placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Capsule
Routes of administration	Oral use

Dosage and administration details:

Participants received 4 capsules of matching placebo orally once a day. Treatment was given with or without food and as close as possible to the same time each day.

<b>Number of subjects in period 1</b>	<b>Enzalutamide + Androgen Deprivation Therapy (ADT)</b>	<b>Placebo + Androgen Deprivation Therapy (ADT)</b>
Started	574	576
Treated	572	574
Completed	437	332
Not completed	137	244
Adverse event, serious fatal	9	7
Withdrawal by patient:	25	30
Progressive disease:	65	171
Adverse event, non-fatal	28	21
Protocol deviation	2	1
Miscellaneous	6	11
Did not receive study drug	2	2
Lost to follow-up	-	1

## Baseline characteristics

### Reporting groups

Reporting group title	Enzalutamide + Androgen Deprivation Therapy (ADT)
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Reporting group description:

Participants received enzalutamide orally once daily. ADT (either bilateral orchiectomy or luteinizing hormone-releasing hormone (LHRH) agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock. In this arm 'completed' refers to participants still on treatment. Overall survival assessed when at least 342 deaths are observed.

Reporting group title	Placebo + Androgen Deprivation Therapy (ADT)
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Reporting group description:

Participants received matching placebo orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock. In this arm 'completed' refers to participants still on treatment. Overall survival assessed when at least 342 deaths are observed.

Reporting group values	Enzalutamide + Androgen Deprivation Therapy (ADT)	Placebo + Androgen Deprivation Therapy (ADT)	Total
Number of subjects	574	576	1150
Age categorical			
Units: Subjects			

Age continuous			
All randomized participants.			
Units: years			
arithmetic mean	69.5	69.5	
standard deviation	± 8	± 8.4	-
Gender categorical			
All randomized participants.			
Units: Subjects			
Female	0	0	0
Male	574	576	1150
Race (NIH/OMB)			
All randomized participants.			
Units: Subjects			
American Indian or Alaska Native	0	0	0
Asian	75	80	155
Native Hawaiian or Other Pacific Islander	0	0	0
Black or African American	8	8	16
White	466	460	926
More than one race	0	0	0
Unknown or Not Reported	25	28	53
Ethnicity (NIH/OMB)			
All randomized participants.			
Units: Subjects			
Hispanic or Latino	46	37	83
Not Hispanic or Latino	504	514	1018
Unknown or Not Reported	24	25	49

Volume of Disease			
High volume of disease was defined as metastases involving the viscera or, in the absence of visceral lesions, 4 or more bone lesions, at least 1 of which was in a bony structure beyond the vertebral column and pelvic bone. Low volume was anything that wasn't considered high volume by definition provided. Intent-to-Treat (ITT) population is defined as all participants who were randomized in this study.			
Units: Subjects			
Low	220	203	423
High	354	373	727
Prior Docetaxel Therapy Use			
ITT			
Units: Subjects			
None	471	474	945
1 to 5 cycles	14	11	25
6 cycles	89	91	180

## End points

### End points reporting groups

Reporting group title	Enzalutamide + Androgen Deprivation Therapy (ADT)
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Reporting group description:

Participants received enzalutamide orally once daily. ADT (either bilateral orchiectomy or luteinizing hormone-releasing hormone (LHRH) agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock. In this arm 'completed' refers to participants still on treatment. Overall survival assessed when at least 342 deaths are observed.

Reporting group title	Placebo + Androgen Deprivation Therapy (ADT)
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Reporting group description:

Participants received matching placebo orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock. In this arm 'completed' refers to participants still on treatment. Overall survival assessed when at least 342 deaths are observed.

Subject analysis set title	Enzalutamide + ADT
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Subject analysis set type	Intention-to-treat
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Subject analysis set description:

Participants received enzalutamide orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock.

Subject analysis set title	Placebo + ADT
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Subject analysis set type	Intention-to-treat
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Subject analysis set description:

Participants received matching placebo orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock.

### Primary: Radiographic Progression-Free Survival (rPFS) Based on Independent Central Review (ICR) of Bone Scan According to Prostate Cancer Clinical Trials Working Group 2 (PCWG2) Criteria

End point title	Radiographic Progression-Free Survival (rPFS) Based on Independent Central Review (ICR) of Bone Scan According to Prostate Cancer Clinical Trials Working Group 2 (PCWG2) Criteria
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End point description:

rPFS was calculated as the time from the date of randomization to the first objective evidence of radiographic progression disease (rPD) at any time or death up to 24 weeks after study drug discontinuation without documented radiographic progression, whichever occurred first. rPD was defined as progressive disease by RECIST version 1.1 for soft tissue disease or by appearance of 2 or more new lesions on bone scan compared to baseline or week 13 according to PCWG2 criteria, as assessed by ICR or death. In participants with no rPFS event, rPFS was censored on the date of last evaluable radiographic assessment prior to the data analysis cutoff date. In participants with no baseline radiographic assessment, participants with no postbaseline radiographic assessments and participants with all postbaseline radiographic assessments documented as "not evaluable (NE)," rPFS was censored on the date of randomization. ITT population. "99999" denotes data not reached due to low number of events.

End point type	Primary
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End point timeframe:

From randomization until the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months



End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	99999 (99999 to 99999)	19.4 (16.59 to 99999)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
Statistical analysis description: rPFS Treatment Comparison	
Comparison groups	Placebo + ADT v Enzalutamide + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001 <sup>[1]</sup>
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.3
upper limit	0.5

Notes:

[1] - Stratified by volume of disease (low vs high) and prior docetaxel use (yes vs no) during screening period.

## Primary: rPFS Based on ICR of Bone Scan According to Protocol Assessment Criteria

End point title	rPFS Based on ICR of Bone Scan According to Protocol Assessment Criteria
End point description: rPFS was calculated as the time from the date of randomization to the first objective evidence of rPD at any time or death up to 24 weeks after study drug discontinuation without documented radiographic progression, whichever occurred first. rPD was defined as progressive disease by RECIST version 1.1 for soft tissue disease or by appearance of 2 or more new lesions on bone scan compared to baseline for week 13 or the best response on treatment for week 25 or later assessments, as assessed by ICR or death. In participants with no rPFS event, rPFS was censored on the date of last evaluable radiographic assessment prior to the data analysis cutoff date. In participants with no baseline radiographic assessment, participants with no postbaseline radiographic assessments and participants with all postbaseline radiographic assessments documented as "not evaluable(NE)," rPFS was censored on the date of randomization.ITT population."99999" denotes data not reached due to low number of events.	
End point type	Primary
End point timeframe: From randomization until the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months.	

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	99999 (99999 to 99999)	19.0 (16.59 to 22.24)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
Statistical analysis description: rPFS Treatment Comparision	
Comparison groups	Enzalutamide + ADT v Placebo + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Logrank
Parameter estimate	Cox proportional hazards model
Point estimate	0.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.3
upper limit	0.5

## Secondary: Overall Survival (OS)

End point title	Overall Survival (OS)
End point description: OS was defined as the time from randomization to death due to any cause. In participants still alive at the date of the analysis cutoff point, OS was censored on the last date the participant was known to be alive.	
End point type	Secondary
End point timeframe: Up to 78 months	

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	0 <sup>[2]</sup>	0 <sup>[3]</sup>		
Units: months				
median (confidence interval 95%)	( to )	( to )		

Notes:

[2] - Outcome measure data will be reported at final analysis stage.

[3] - Outcome measure data will be reported at final analysis stage.

## Statistical analyses

No statistical analyses for this end point

### Secondary: Time to Prostate Specific Antigen (PSA) Progression

End point title	Time to Prostate Specific Antigen (PSA) Progression
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End point description:

Time to PSA progression was calculated as the time from the date of randomization to the first observation of PSA progression. A PSA progression was defined as a  $\geq 25\%$  increase and an absolute increase of  $\geq 2$  ng/mL above the nadir, which was confirmed by a second consecutive value at least 3 weeks later. In participants with no PSA progression, time to PSA progression was censored on the date of the last PSA sample taken (or last value prior to 2 or more consecutive missed PSA assessments). ITT population. "99999" denotes data not reached due to low number of events.

End point type	Secondary
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End point timeframe:

From randomization until the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	99999 (99999 to 99999)	99999 (16.59 to 99999)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
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Statistical analysis description:

Time to PSA Progression Treatment Comparison

Comparison groups	Enzalutamide + ADT v Placebo + ADT
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Number of subjects included in analysis	1150
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Analysis specification	Pre-specified
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Analysis type	superiority
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P-value	< 0.0001 <sup>[4]</sup>
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Method	Logrank
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Parameter estimate	Cox hazard ratio
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Point estimate	0.19
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Confidence interval	
level	95 %
sides	2-sided
lower limit	0.13
upper limit	0.26

Notes:

[4] - Stratified by volume of disease (low vs high) and prior docetaxel use (yes vs no) during screening period.

## Secondary: Time to Start of New Antineoplastic Therapy

End point title	Time to Start of New Antineoplastic Therapy
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End point description:

In participants with a new antineoplastic therapy initiated for prostate cancer after randomization, time to start of a new antineoplastic therapy was defined as the time interval from randomization to the date of the first dose administration of the first antineoplastic therapy. In participants with no new antineoplastic therapy initiated for prostate cancer after randomization, time to start of new antineoplastic therapy was censored on the last visit date or the date of randomization, whichever occurred last. ITT population. "-99999" and "99999" denotes data not reached due to low number of events.

End point type	Secondary
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End point timeframe:

From randomization until the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	30.2 (-99999 to 99999)	99999 (21.06 to 99999)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
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Statistical analysis description:

Time to Start of New Therapy Treatment Comparison

Comparison groups	Enzalutamide + ADT v Placebo + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001 <sup>[5]</sup>
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.28

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.2
upper limit	0.4

Notes:

[5] - Stratified by volume of disease (low vs high) and prior docetaxel use (yes vs no) during screening period.

## Secondary: PSA Undetectable Rate

End point title	PSA Undetectable Rate
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End point description:

The PSA undetectable rate was defined as the percentage of participants with undetectable (< 0.2 ng/mL) PSA values at any time during study treatment, of those participants with detectable ( $\geq$  0.2 ng/mL) PSA values at baseline. ITT with detectable PSA at baseline.

End point type	Secondary
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End point timeframe:

Up to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	511	506		
Units: percentage of participants				
number (confidence interval 95%)				
percentage of participants	68.1 (63.9 to 72.1)	17.6 (14.4 to 21.2)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
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Statistical analysis description:

PSA Undetectable Rate Treatment Comparison

Comparison groups	Enzalutamide + ADT v Placebo + ADT
Number of subjects included in analysis	1017
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001 <sup>[6]</sup>
Method	Cochran-Mantel-Haenszel
Parameter estimate	Difference in rate
Point estimate	50.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	45.3
upper limit	55.7

Notes:

[6] - Stratified by volume of disease (low vs high) and prior docetaxel use (yes vs no) during screening period.

## Secondary: Objective Response Rate (ORR)

End point title	Objective Response Rate (ORR)
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End point description:

The ORR was calculated as the percentage of participants who achieved a completed response (CR) or a partial response (PR) (unconfirmed responses) in their soft tissue disease using the Response Evaluation Criteria in Solid Tumors (RECIST) version 1.1 assessed by ICR. ITT participants with measurable disease at baseline.

End point type	Secondary
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End point timeframe:

Up to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	177	182		
Units: percentage of participants				
number (confidence interval 95%)				
percentage of participants	83.1 (76.7 to 88.3)	63.7 (56.3 to 70.7)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
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Statistical analysis description:

ORR Treatment Comparison

Comparison groups	Placebo + ADT v Enzalutamide + ADT
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Number of subjects included in analysis	359
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Analysis specification	Pre-specified
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Analysis type	superiority
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P-value	< 0.0001 [7]
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Method	Cochran-Mantel-Haenszel
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Parameter estimate	Difference in rate
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Point estimate	19.3
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Confidence interval

level	95 %
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sides	2-sided
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lower limit	10.4
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upper limit	28.2
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Notes:

[7] - Stratified by volume of disease (low vs high) and prior docetaxel use (yes vs no) during screening period.

## Secondary: Time to Deterioration in Urinary Symptoms

End point title	Time to Deterioration in Urinary Symptoms
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**End point description:**

In participants with deterioration, time to deterioration was calculated as the time interval between randomization and the first deterioration in urinary symptoms at any postbaseline visit. Deterioration in urinary symptoms was defined as an increase in the Quality of Life Prostate-specific Questionnaire (QLQ-PR25) modified urinary symptoms. Subscale score by  $\geq 50\%$  of the standard deviation observed in the QLQ-PR25 modified urinary symptoms subscale score at baseline. Modified urinary symptoms subscale score consisted of 3-items (Q31–Q33) from the QLQ-PR25, each scored from 1 (not at all) to 4 (very much). Total modified urinary symptoms subscale score ranges from 0–100, higher scores represent a higher level of symptomatology/problems. In participants without deterioration in urinary symptoms, the time to deterioration in urinary symptoms was censored on the date the last urinary symptoms QLQ-PR25 score was calculable. ITT. "99999" denotes data not reached due to low number of events.

End point type	Secondary
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**End point timeframe:**

From randomization to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	99999 (19.35 to 99999)	16.8 (14.06 to 99999)		

**Statistical analyses**

Statistical analysis title	Statistical analysis 1
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**Statistical analysis description:**

Time to Deterioration of Urinary Symptoms Treatment Comparison

Comparison groups	Placebo + ADT v Enzalutamide + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2162 <sup>[8]</sup>
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.72
upper limit	1.08

**Notes:**

[8] - Stratified by volume of disease (low vs high) and prior docetaxel use (yes vs no) during screening period.

**Secondary: Time to First Symptomatic Skeletal Event (SSE)**

End point title	Time to First Symptomatic Skeletal Event (SSE)
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**End point description:**

Time to first SSE was calculated as the time from randomization to the occurrence of the first SSE prior to the data analysis cut-off date. An SSE was defined as radiation to bone, surgery to bone, clinically apparent pathological bone fracture, or spinal cord compression. In participants with no SSE by the time of the data cut-off point, time to SSE was censored on the last visit date or the date of randomization, whichever occurred last. ITT population. "99999" denotes data not reached due to low number of events.

End point type	Secondary
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**End point timeframe:**

From randomization to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	99999 (99999 to 99999)	99999 (99999 to 99999)		

**Statistical analyses**

Statistical analysis title	Statistical analysis 1
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**Statistical analysis description:**

Time to SSE Treatment Comparison

Comparison groups	Placebo + ADT v Enzalutamide + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0026
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.52
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.33
upper limit	0.8

**Secondary: Time to Castration Resistance**

End point title	Time to Castration Resistance
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**End point description:**

Time to castration resistance was calculated as the time from randomization to the first castration-resistant event. A castration resistance event was defined as any of the following in the presence of castrate levels of testosterone (< 50 ng/dL): radiographic disease progression, PSA progression or SSE, whichever occurred first. In participants with no documented castration resistance event, the time to



castration resistance was censored on the latest date from: the date of last radiologic assessment, the last PSA sample taken prior to the start of any new prostate cancer therapy and prior to 2 or more consecutive missed PSA assessments (if applicable), and the last visit date performed. ITT population. "99999" denotes data not reached due to low number of events.

End point type	Secondary
End point timeframe:	
From randomization to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months	

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	99999 (99999 to 99999)	13.9 (11.40 to 17.18)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
Statistical analysis description:	
Time to Castration Resistance Treatment Comparison	
Comparison groups	Enzalutamide + ADT v Placebo + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.28
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.22
upper limit	0.36

## Secondary: Time to Deterioration of Quality of Life (QoL) in Functional Assessment of Cancer Therapy-Prostate (FACT-P)

End point title	Time to Deterioration of Quality of Life (QoL) in Functional Assessment of Cancer Therapy-Prostate (FACT-P)
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End point description:

Time to deterioration of QoL was calculated as the time interval from the date of randomization to the first date a decline from baseline of 10 points or more in the FACT-P total score was recorded. The FACT-P consists of 27 core items that assess participant function in 4 domains and 12 prostate cancer-related items grouped into 5 subscales as follows: physical wellbeing, social/family wellbeing, emotional wellbeing, functional wellbeing and prostate cancer subscale. Each item is rated on a 0 to 4 Likert-type scale. The FACT-P total score is the sum of all 5 subscale scores of the FACT-P questionnaire and ranges

from 0 to 156), where high score represent better quality of life. In participants without FACT-P progression, the time to deterioration of QoL was censored on the date of the last FACT-P total score was calculable. ITT population.

End point type	Secondary
End point timeframe:	
From randomization to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months	

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	11.3 (11.04 to 13.83)	11.1 (8.48 to 13.83)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
Statistical analysis description:	
Time to Deterioration of QoL in FACT-P Treatment Comparison	
Comparison groups	Placebo + ADT v Enzalutamide + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6548
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.14

## Secondary: Time to Pain Progression Based on Brief Pain Inventory-Short Form (BPI-SF)

End point title	Time to Pain Progression Based on Brief Pain Inventory-Short Form (BPI-SF)
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End point description:

Time to pain progression was defined as time from randomization to the first pain progression event. Pain progression was defined as an increase of  $\geq 30\%$  from baseline in the average BPI-SF pain severity score. BPI-SF contains 9 questions with rating scales from 0 (no pain/no interference) to 10 (worst pain/interferes completely). Total score was calculated as the average of each question. Higher scores represent a higher level of pain or interference. In participants with no pain progression event, time to pain progression was censored on the last visit date where BPI-SF was collected. ITT population.

End point type	Secondary
End point timeframe:	
From randomization to the data cut-off date of 14 October 2018; maximum duration of treatment was 26.6 months	

End point values	Enzalutamide + ADT	Placebo + ADT		
Subject group type	Subject analysis set	Subject analysis set		
Number of subjects analysed	574	576		
Units: months				
median (confidence interval 95%)				
months	8.3 (8.25 to 10.91)	8.3 (5.65 to 8.38)		

## Statistical analyses

Statistical analysis title	Statistical analysis 1
Statistical analysis description:	
Time to Pain Progression Based on BPI-SF Treatment Comparison	
Comparison groups	Enzalutamide + ADT v Placebo + ADT
Number of subjects included in analysis	1150
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2715
Method	Logrank
Parameter estimate	Cox hazard ratio
Point estimate	0.92
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.78
upper limit	1.07

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

From first dose of study drug up to 30 days after last dose of study or prior to initiation of new therapy for prostate cancer, whichever occurred first. Maximum duration of treatment to the data cut-off date of 14 October 2018 was 26.6 months.

Adverse event reporting additional description:

Safety Analysis Set (SAF) consisted of all randomized participants who received at least one dose of study drug.

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	21
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### Reporting groups

Reporting group title	Enzalutamide + ADT
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Reporting group description:

Participants received enzalutamide orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock.

Reporting group title	Placebo + ADT
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Reporting group description:

Participants received matching placebo orally once daily. ADT (either bilateral orchiectomy or LHRH agonist/antagonist) was maintained during study treatment as per standard of care and provided by the site's pharmacy stock.

Serious adverse events	Enzalutamide + ADT	Placebo + ADT	
Total subjects affected by serious adverse events			
subjects affected / exposed	104 / 572 (18.18%)	112 / 574 (19.51%)	
number of deaths (all causes)	39	45	
number of deaths resulting from adverse events	14	10	
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Adenocarcinoma gastric			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Basal cell carcinoma			
subjects affected / exposed	4 / 572 (0.70%)	4 / 574 (0.70%)	
occurrences causally related to treatment / all	0 / 4	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Benign pancreatic neoplasm			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bladder cancer			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bone cancer			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bronchial carcinoma			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cancer pain			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Colon cancer			
subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 2	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diffuse large B-cell lymphoma			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastric cancer			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Laryngeal squamous cell carcinoma			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lung adenocarcinoma			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lung adenocarcinoma stage 0			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lung adenocarcinoma stage I			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lung neoplasm malignant			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Malignant melanoma in situ			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Malignant neoplasm progression			
subjects affected / exposed	6 / 572 (1.05%)	3 / 574 (0.52%)	
occurrences causally related to treatment / all	0 / 6	0 / 4	
deaths causally related to treatment / all	0 / 4	0 / 2	
Metastases to liver			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Monoclonal gammopathy			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neuroendocrine carcinoma			
subjects affected / exposed	2 / 572 (0.35%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	1 / 2	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Non-small cell lung cancer			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Paraproteinaemia			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Plasmacytoma			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Squamous cell carcinoma			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Squamous cell carcinoma of head and neck			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Squamous cell carcinoma of skin			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Transitional cell carcinoma			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Tumour pain			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vascular disorders			
Aortic aneurysm			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Aortic dissection			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Aortic dissection rupture			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Deep vein thrombosis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Granulomatosis with polyangiitis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypertensive crisis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Peripheral ischaemia			



subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Phlebitis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Thrombosis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vena cava thrombosis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Death			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Euthanasia			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 1	0 / 1	
Fatigue			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	3 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
General physical health deterioration			

subjects affected / exposed	1 / 572 (0.17%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 1	3 / 3	
deaths causally related to treatment / all	0 / 1	1 / 1	
Malaise			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyrexia			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sudden cardiac death			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Sudden death			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 2	
Reproductive system and breast disorders			
Benign prostatic hyperplasia			
subjects affected / exposed	2 / 572 (0.35%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pelvic pain			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory, thoracic and mediastinal disorders			
Chronic obstructive pulmonary disease			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dyspnoea			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Interstitial lung disease			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonia aspiration			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pulmonary embolism			
subjects affected / exposed	3 / 572 (0.52%)	3 / 574 (0.52%)	
occurrences causally related to treatment / all	1 / 3	0 / 3	
deaths causally related to treatment / all	0 / 2	0 / 0	
Psychiatric disorders			
Completed suicide			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Confusional state			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Delirium			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Investigations			

Alanine aminotransferase increased			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	3 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Antineutrophil cytoplasmic antibody increased			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Aspartate aminotransferase increased			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	3 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood alkaline phosphatase increased			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood bilirubin increased			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood creatinine increased			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood testosterone increased			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
General physical condition abnormal			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Intraocular pressure increased			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Liver function test abnormal			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Transaminases increased			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Accidental overdose			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bone fissure			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cervical vertebral fracture			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Clavicle fracture			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Comminuted fracture			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Coronary artery restenosis			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Fall			
subjects affected / exposed	3 / 572 (0.52%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	1 / 3	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Femoral neck fracture			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Fracture displacement			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Limb injury			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lumbar vertebral fracture			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Multiple fractures			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Peripheral artery restenosis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Radius fracture			

subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Road traffic accident			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Stenosis of vesicourethral anastomosis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Subarachnoid haemorrhage			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Subdural haematoma			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Thoracic vertebral fracture			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Ulna fracture			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary retention postoperative			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract stoma complication			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Wound			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Acute coronary syndrome			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Angina pectoris			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Angina unstable			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	1 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Arteriosclerosis coronary artery			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrial fibrillation			
subjects affected / exposed	2 / 572 (0.35%)	4 / 574 (0.70%)	
occurrences causally related to treatment / all	0 / 2	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrial flutter			
subjects affected / exposed	1 / 572 (0.17%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 1	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrioventricular block			



subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrioventricular block complete			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrioventricular block second degree			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac arrest			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac failure			
subjects affected / exposed	2 / 572 (0.35%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	1 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac failure chronic			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardio-respiratory arrest			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 1	0 / 1	
Cardiopulmonary failure			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Myocardial infarction			

subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 2	2 / 2	
deaths causally related to treatment / all	0 / 1	0 / 0	
Ventricular fibrillation			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nervous system disorders			
Carotid arteriosclerosis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cerebellar infarction			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cerebral haemorrhage			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cerebral ischaemia			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cerebrovascular accident			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Cervicobrachial syndrome			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dementia			

subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Guillain-Barre syndrome			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Ischaemic stroke			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Lethargy			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Monoparesis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Paraparesis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Seizure			
subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	2 / 2	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Spinal cord compression			
subjects affected / exposed	3 / 572 (0.52%)	6 / 574 (1.05%)	
occurrences causally related to treatment / all	2 / 3	0 / 6	
deaths causally related to treatment / all	0 / 0	0 / 0	
Syncope			

subjects affected / exposed	3 / 572 (0.52%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	2 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Toxic encephalopathy			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Transient global amnesia			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Transient ischaemic attack			
subjects affected / exposed	1 / 572 (0.17%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 1	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood and lymphatic system disorders			
Anaemia			
subjects affected / exposed	4 / 572 (0.70%)	3 / 574 (0.52%)	
occurrences causally related to treatment / all	0 / 4	0 / 5	
deaths causally related to treatment / all	0 / 0	0 / 0	
Immune thrombocytopenic purpura			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	6 / 6	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Eye disorders			
Eye haemorrhage			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Retinal detachment			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Ulcerative keratitis			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 2	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Colitis ischaemic			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diarrhoea			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diverticulum intestinal haemorrhagic			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Duodenal ulcer perforation			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Duodenitis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dyspepsia			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Epiploic appendagitis			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastritis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastritis erosive			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Gastrointestinal haemorrhage			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	1 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Impaired gastric emptying			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Incarcerated inguinal hernia			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Inguinal hernia			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Large intestinal obstruction			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Large intestine perforation			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nausea			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumoperitoneum			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Proctalgia			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Retroperitoneal fibrosis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Small intestinal obstruction			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Subileus			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatobiliary disorders			
Cholecystitis acute			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatic function abnormal			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Jaundice cholestatic			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 2	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bladder perforation			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Calculus bladder			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dysuria			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Haematuria			
subjects affected / exposed	4 / 572 (0.70%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 4	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hydronephrosis			
subjects affected / exposed	4 / 572 (0.70%)	3 / 574 (0.52%)	
occurrences causally related to treatment / all	0 / 4	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal colic			



subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal failure			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal impairment			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Ureterolithiasis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urethral obstruction			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urethral stenosis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary retention			
subjects affected / exposed	3 / 572 (0.52%)	4 / 574 (0.70%)	
occurrences causally related to treatment / all	0 / 3	0 / 4	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract obstruction			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Endocrine disorders			
Goitre			

subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyperparathyroidism			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Musculoskeletal and connective tissue disorders			
Back pain			
subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 2	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bone pain			
subjects affected / exposed	2 / 572 (0.35%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Muscular weakness			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Musculoskeletal chest pain			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neck pain			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Osteoarthritis			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pain in extremity			

subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pathological fracture			
subjects affected / exposed	1 / 572 (0.17%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 1	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Spinal osteoarthritis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations			
Anorectal infection			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Appendicitis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bronchitis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bronchopulmonary aspergillosis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cellulitis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cholecystitis infective			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Device related infection			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diverticulitis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Erysipelas			
subjects affected / exposed	1 / 572 (0.17%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 1	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Escherichia pyelonephritis			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Escherichia urinary tract infection			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Genital abscess			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Groin abscess			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infected lymphocele			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Influenza			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Otitis media chronic			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonia			
subjects affected / exposed	2 / 572 (0.35%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 2	0 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyelonephritis			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sepsis			
subjects affected / exposed	3 / 572 (0.52%)	3 / 574 (0.52%)	
occurrences causally related to treatment / all	0 / 4	0 / 3	
deaths causally related to treatment / all	0 / 1	0 / 1	
Septic shock			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	
Urinary tract infection			
subjects affected / exposed	0 / 572 (0.00%)	2 / 574 (0.35%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract infection bacterial			

subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urosepsis			
subjects affected / exposed	2 / 572 (0.35%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 2	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Metabolism and nutrition disorders			
Cachexia			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dehydration			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypercalcaemia			
subjects affected / exposed	1 / 572 (0.17%)	0 / 574 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypoglycaemia			
subjects affected / exposed	0 / 572 (0.00%)	1 / 574 (0.17%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	

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

<b>Non-serious adverse events</b>	Enzalutamide + ADT	Placebo + ADT	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	353 / 572 (61.71%)	348 / 574 (60.63%)	
Investigations			
Weight increased			
subjects affected / exposed	35 / 572 (6.12%)	44 / 574 (7.67%)	
occurrences (all)	46	50	
Vascular disorders			

Hot flush subjects affected / exposed occurrences (all)	155 / 572 (27.10%) 173	128 / 574 (22.30%) 132	
Hypertension subjects affected / exposed occurrences (all)	46 / 572 (8.04%) 54	32 / 574 (5.57%) 33	
Nervous system disorders Dizziness subjects affected / exposed occurrences (all)	29 / 572 (5.07%) 30	20 / 574 (3.48%) 22	
General disorders and administration site conditions Asthenia subjects affected / exposed occurrences (all)	31 / 572 (5.42%) 42	26 / 574 (4.53%) 33	
Fatigue subjects affected / exposed occurrences (all)	111 / 572 (19.41%) 127	88 / 574 (15.33%) 98	
Oedema peripheral subjects affected / exposed occurrences (all)	29 / 572 (5.07%) 33	38 / 574 (6.62%) 46	
Gastrointestinal disorders Constipation subjects affected / exposed occurrences (all)	28 / 572 (4.90%) 30	31 / 574 (5.40%) 31	
Diarrhoea subjects affected / exposed occurrences (all)	34 / 572 (5.94%) 38	33 / 574 (5.75%) 34	
Nausea subjects affected / exposed occurrences (all)	37 / 572 (6.47%) 43	29 / 574 (5.05%) 29	
Musculoskeletal and connective tissue disorders Arthralgia subjects affected / exposed occurrences (all)	70 / 572 (12.24%) 86	61 / 574 (10.63%) 73	
Back pain			

subjects affected / exposed	42 / 572 (7.34%)	60 / 574 (10.45%)	
occurrences (all)	50	62	
Musculoskeletal pain			
subjects affected / exposed	36 / 572 (6.29%)	23 / 574 (4.01%)	
occurrences (all)	39	27	



## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
02 June 2016	The changes included: • Added 2 exclusion criteria to o exclude patients who had not received bisphosphonates or denosumab at a stable dose (unless diagnosed with osteoporosis) and o exclude patients who had shown a hypersensitivity reaction to any of the study capsule components. • Revised test drug information to remove information related to tablet formulations and add information related to the capsule formulation of study drug and placebo (chemical name, physical description and storage requirements).
14 December 2017	The changes included: • Revised the number of events required for the primary endpoint to reflect that primary analysis was to occur when 262 rPD events were confirmed by independent central imaging review. All secondary endpoints were to be evaluated at the time of primary analysis (and are considered final, except for OS [Section 5.5.5]). • Specified a step-wise approach for the statistical testing of the key secondary endpoints. To maintain the family-wise 2-sided type I error rate at 0.05, a parallel testing strategy between OS (with allocated type I error rate 0.04) and the other 4 endpoints (with allocated type I error rate 0.01) was developed. If the interim results of the OS analysis were statistically significant, no further analysis of OS would be completed. • Specified that unblinding of study treatment assignment could have been performed if a patient discontinued due to disease progression and in the investigator's opinion this information was necessary to determine the next course of therapy.
10 December 2018	The changes included: • Added an open-label extension period. Following unblinding at the end of the doubleblind period and demonstration of a statistically significant advantage of enzalutamide over placebo when added to ADT, as assessed by the primary endpoint, all eligible patients could be treated on study with open-label enzalutamide at the discretion of the patient and investigator. • Specific QoL assessments related to deterioration of urinary symptoms and QoL were added to the secondary endpoints.

Notes:

### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

None reported