



## Clinical trial results:

### A phase Ib/II, open-label, multi-center study of INC280 in combination with PDR001 or PDR001 single agent in advanced hepatocellular carcinoma

#### Summary

EudraCT number	2015-005417-76
Trial protocol	DE IT
Global end of trial date	24 June 2021

#### Results information

Result version number	v2 (current)
This version publication date	12 August 2023
First version publication date	11 June 2022
Version creation reason	

#### Trial information

##### Trial identification

Sponsor protocol code	CINC280X2108
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02795429
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	Novartis Pharma AG
Sponsor organisation address	CH-4056, Basel, Switzerland,
Public contact	Clinical Disclosure Office, Novartis Pharma AG, 41 613241111, novartis.email@novartis.com
Scientific contact	Clinical Disclosure Office, Novartis Pharma AG, 41 613241111, novartis.email@novartis.com

Notes:

#### Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

## Results analysis stage

Analysis stage	Final
Date of interim/final analysis	24 June 2021
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	24 June 2021
Was the trial ended prematurely?	No

Notes:

## General information about the trial

Main objective of the trial:

The primary objectives of the trial were:

- Phase Ib part: To characterize the safety and tolerability of capmatinib in combination with spartalizumab and identify the maximum tolerated dose (MTD) and/or the recommended phase 2 dose (RP2D).
- Phase II part: To compare the efficacy of capmatinib in combination with spartalizumab vs. spartalizumab single agent.

Protection of trial subjects:

The study was in compliance with the ethical principles derived from the Declaration of Helsinki and the International Conference on Harmonization (ICH) Good Clinical Practice (GCP) guidelines. All the local regulatory requirements pertinent to safety of trial subjects were also followed during the conduct of the trial.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	15 June 2016
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	China: 4
Country: Number of subjects enrolled	Canada: 8
Country: Number of subjects enrolled	France: 19
Country: Number of subjects enrolled	Germany: 5
Country: Number of subjects enrolled	Hong Kong: 15
Country: Number of subjects enrolled	Italy: 25
Country: Number of subjects enrolled	Korea, Republic of: 7
Country: Number of subjects enrolled	Taiwan: 6
Worldwide total number of subjects	89
EEA total number of subjects	49

Notes:

### Subjects enrolled per age group

In utero	0
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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)	43
From 65 to 84 years	45
85 years and over	1

## Subject disposition

### Recruitment

Recruitment details:

Participants took part in 18 investigative sites in 8 countries.

### Pre-assignment

Screening details:

The screening period began once patients had signed the study informed consent. Screening evaluations were performed within 21 days prior to the first dose of study medication. After screening, the treatment period started on Cycle 1 Day 1.

### 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
<b>Arm title</b>	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W

Arm description:

Capmatinib 200 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib

Arm type	Experimental
Investigational medicinal product name	Spartalizumab
Investigational medicinal product code	PDR001
Other name	
Pharmaceutical forms	Solution for infusion
Routes of administration	Intravenous use

Dosage and administration details:

Spartalizumab 300 mg was administered via intravenous (i.v.) infusion once every 3 weeks (Q3W)

Investigational medicinal product name	Capmatinib
Investigational medicinal product code	INC280
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

Capmatinib 200 mg was administered orally as a tablet twice daily (BID)

<b>Arm title</b>	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W
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Arm description:

Capmatinib 300 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib

Arm type	Experimental
Investigational medicinal product name	Capmatinib
Investigational medicinal product code	INC280
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

Capmatinib 300 mg was administered orally as a tablet twice daily (BID)

Investigational medicinal product name	Spartalizumab
Investigational medicinal product code	PDR001
Other name	
Pharmaceutical forms	Solution for infusion
Routes of administration	Intravenous use
Dosage and administration details:	
Spartalizumab 300 mg was administered via intravenous (i.v.) infusion once every 3 weeks (Q3W)	
<b>Arm title</b>	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Arm description:	
Capmatinib 400 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Arm type	Experimental
Investigational medicinal product name	Spartalizumab
Investigational medicinal product code	PDR001
Other name	
Pharmaceutical forms	Solution for infusion
Routes of administration	Intravenous use
Dosage and administration details:	
Spartalizumab 300 mg was administered via intravenous (i.v.) infusion once every 3 weeks (Q3W)	
Investigational medicinal product name	Capmatinib
Investigational medicinal product code	INC280
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use
Dosage and administration details:	
Capmatinib 400 mg was administered orally as a tablet twice daily (BID)	
<b>Arm title</b>	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Arm description:	
Capmatinib 400 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase II	
Arm type	Experimental
Investigational medicinal product name	Capmatinib
Investigational medicinal product code	INC280
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use
Dosage and administration details:	
Capmatinib 400 mg was administered orally as a tablet twice daily (BID)	
Investigational medicinal product name	Spartalizumab
Investigational medicinal product code	PDR001
Other name	
Pharmaceutical forms	Solution for infusion
Routes of administration	Intravenous use
Dosage and administration details:	
Spartalizumab 300 mg was administered via intravenous (i.v.) infusion once every 3 weeks (Q3W)	
<b>Arm title</b>	Phase II: Spartalizumab 300 mg Q3W
Arm description:	
Spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase II	
Arm type	Active comparator

Investigational medicinal product name	Spartalizumab
Investigational medicinal product code	PDR001
Other name	
Pharmaceutical forms	Solution for infusion
Routes of administration	Intravenous use

Dosage and administration details:

Spartalizumab 300 mg was administered via intravenous (i.v.) infusion once every 3 weeks (Q3W)

<b>Number of subjects in period 1</b>	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Started	6	10	11
Completed	0	0	0
Not completed	6	10	11
Physician decision	-	-	2
Death	1	-	1
Adverse event	1	2	1
Progressive disease	3	7	6
Subject/guardian decision	1	1	1

<b>Number of subjects in period 1</b>	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W
Started	32	30
Completed	0	0
Not completed	32	30
Physician decision	1	5
Death	2	1
Adverse event	2	1
Progressive disease	26	20
Subject/guardian decision	1	3

## Baseline characteristics

### Reporting groups

Reporting group title	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 200 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Reporting group title	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 300 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Reporting group title	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 400 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Reporting group title	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 400 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase II	
Reporting group title	Phase II: Spartalizumab 300 mg Q3W
Reporting group description: Spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase II	

Reporting group values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Number of subjects	6	10	11
Age categorical Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	2	6	5
From 65-84 years	4	4	6
85 years and over	0	0	0
Age Continuous Units: years			
arithmetic mean	68.5	63.2	64.6
standard deviation	± 7.42	± 10.24	± 8.99

Sex: Female, Male Units: participants			
Female	0	2	2
Male	6	8	9
Race/Ethnicity, Customized Units: Subjects			
Asian	3	3	4
White	3	7	6
Unknown	0	0	1

<b>Reporting group values</b>	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W	Total
Number of subjects	32	30	89
Age categorical Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	15	15	43
From 65-84 years	16	15	45
85 years and over	1	0	1
Age Continuous Units: years			
arithmetic mean	64.8	63.4	
standard deviation	± 10.02	± 9.97	-
Sex: Female, Male Units: participants			
Female	3	5	12
Male	29	25	77
Race/Ethnicity, Customized Units: Subjects			
Asian	12	12	34
White	10	10	36
Unknown	10	8	19



## End points

### End points reporting groups

Reporting group title	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 200 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Reporting group title	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 300 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Reporting group title	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 400 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase Ib	
Reporting group title	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Reporting group description: Capmatinib 400 mg administered orally on a continuous twice daily (BID) dosing schedule in combination with spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase II	
Reporting group title	Phase II: Spartalizumab 300 mg Q3W
Reporting group description: Spartalizumab 300 mg administered intravenously once every 3 weeks (Q3W) in Phase II	

### Primary: Phase Ib: Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the on-treatment period

End point title	Phase Ib: Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the on-treatment period <sup>[1][2]</sup>
End point description: Number of participants with AEs and SAEs, including changes from baseline in vital signs, electrocardiograms and laboratory results qualifying and reported as AEs. The on-treatment period is defined from the day of first administration of study treatment up to 30 days after the date of its last administration. AE grades to characterize the severity of the AEs were based on the Common Terminology Criteria for Adverse Events (CTCAE) version 4.03. For CTCAE v4.03, Grade 1 = mild; Grade 2 = moderate; Grade 3 = severe; Grade 4 = life-threatening; Grade 5 = death related to AE.	
End point type	Primary
End point timeframe: From first dose of study medication up to 30 days after last dose, with a maximum duration of 3.3 years	

#### Notes:

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

Justification: No statistical analysis were planned for this primary endpoint.

[2] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	6	10	11	
Units: participants				
AEs	6	10	10	
Treatment-related AEs	5	7	10	
AEs with grade $\geq 3$	6	7	7	
Treatment-related AEs with grade $\geq 3$	4	4	6	
SAEs	1	1	6	
Treatment-related SAEs	0	0	5	
Fatal SAEs	1	0	1	
Treatment-related fatal SAEs	0	0	1	
AEs leading to discontinuation	3	4	4	
Treatment-related AEs leading to discontinuation	2	1	4	
AEs leading to dose adjustment/interruption	3	6	7	
AEs requiring additional therapy	6	9	10	
AE due to infusion reaction	0	0	1	

## Statistical analyses

No statistical analyses for this end point

## Primary: Phase Ib: Number of participants with dose reductions and dose interruptions of capmatinib and spartalizumab

End point title	Phase Ib: Number of participants with dose reductions and dose interruptions of capmatinib and spartalizumab <sup>[3]</sup> <sup>[4]</sup>
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End point description:

Number of participants with at least one dose reduction of capmatinib and spartalizumab and number of participants with at least one dose interruption of capmatinib and spartalizumab.

No dose modifications (i.e. dose reduction) were allowed for spartalizumab.

End point type	Primary
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End point timeframe:

From first dose of study medication up to last dose, with a maximum duration of 3.2 years

Notes:

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

Justification: No statistical analysis were planned for this primary endpoint.

[4] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	6	10	11	
Units: participants				
Capmatinib dose reduction	2	4	8	
Capmatinib dose interruption	4	6	8	
Spartalizumab dose reduction	0	0	0	
Spartalizumab dose interruption	4	4	7	

## Statistical analyses

No statistical analyses for this end point

### Primary: Phase Ib: Number of participants with Dose-Limiting Toxicities (DLTs) during the first 2 cycles of treatment

End point title	Phase Ib: Number of participants with Dose-Limiting Toxicities (DLTs) during the first 2 cycles of treatment <sup>[5][6]</sup>
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End point description:

A dose-limiting toxicity (DLT) is defined as an adverse event or abnormal laboratory value of Common Terminology Criteria for Adverse Events (CTCAE) grade  $\geq 3$  assessed as unrelated to disease, disease progression, inter-current illness or concomitant medications that occurs within the first 2 cycles of treatment with capmatinib in combination with spartalizumab during the dose escalation part of the study. Other clinically significant toxicities may be considered to be DLTs, even if not CTCAE grade 3 or higher. The duration of one treatment cycle is 21 days.

End point type	Primary
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End point timeframe:

42 days

Notes:

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

Justification: No statistical analysis were planned for this primary endpoint.

[6] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	6	8	9	
Units: participants	0	0	1	

## Statistical analyses

No statistical analyses for this end point

**Primary: Phase Ib: Dose intensity of capmatinib**

End point title	Phase Ib: Dose intensity of capmatinib <sup>[7][8]</sup>
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End point description:

Dose intensity of capmatinib was calculated as actual cumulative dose in milligrams divided by duration of exposure in days.

End point type	Primary
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End point timeframe:

From first dose of study medication up to last dose, with a maximum duration of 3.2 years

Notes:

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

Justification: No statistical analysis were planned for this primary endpoint.

[8] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	6	10	11	
Units: mg/day				
median (full range (min-max))	391.2 (294 to 400)	580.0 (390 to 600)	755.6 (371 to 800)	

**Statistical analyses**

No statistical analyses for this end point

**Primary: Phase Ib: Dose intensity of spartalizumab**

End point title	Phase Ib: Dose intensity of spartalizumab <sup>[9][10]</sup>
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End point description:

Dose intensity of spartalizumab was calculated as actual cumulative dose in milligrams divided by duration of exposure in weeks and then multiplied by 3 weeks (3W).

End point type	Primary
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End point timeframe:

From first dose of study medication up to last dose, with a maximum duration of 3.2 years

Notes:

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

Justification: No statistical analysis were planned for this primary endpoint.

[10] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	6	10	11	
Units: mg/3W				
median (full range (min-max))	293.18 (235.7 to 300.0)	300.00 (225.0 to 300.0)	300.00 (272.7 to 300.0)	

## Statistical analyses

No statistical analyses for this end point

### Primary: Phase II: Overall Response Rate (ORR) per RECIST v1.1

End point title	Phase II: Overall Response Rate (ORR) per RECIST v1.1 <sup>[11]</sup>
End point description:	
Tumor response was based on local investigator assessment as per Response Evaluation Criteria In Solid Tumors (RECIST) v1.1. ORR per RECIST v1.1 is defined as the percentage of participants with a best overall response of Complete Response (CR) or Partial Response (PR). For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameter of all target lesions, taking as reference the baseline sum of diameters.	
End point type	Primary
End point timeframe:	
From start of treatment until end of treatment, assessed up to 2.2 years	

Notes:

[11] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase II arms.

End point values	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	32	30		
Units: percentage of participants				
number (confidence interval 95%)	9.4 (2.0 to 25.0)	10.0 (2.1 to 26.5)		

## Statistical analyses

Statistical analysis title	combination vs. single agent
Statistical analysis description:	
Posterior probability of Odds ratio [ORR(spartalizumab+capmatinib) to ORR(spartalizumab)] was $\geq 1$	
Comparison groups	Phase II: Spartalizumab 300 mg Q3W v Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W

Number of subjects included in analysis	62
Analysis specification	Pre-specified
Analysis type	
Method	Bayesian Logistic Regression Model
Parameter estimate	Odds ratio (OR)
Point estimate	0.561
Confidence interval	
level	Other: 0 %
sides	1-sided
upper limit	999

### Secondary: Phase Ib and Phase II: Best Overall Response (BOR) per RECIST v1.1

End point title	Phase Ib and Phase II: Best Overall Response (BOR) per RECIST v1.1
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#### End point description:

BOR is defined as the best response recorded from the start of the study treatment until disease progression/recurrence, based on local investigator assessment per RECIST v1.1.

For RECIST v1.1, R=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameters of all target lesions, taking as reference the baseline sum of diameters; PD= At least a 20% increase in the sum of diameters of all measured target lesions, taking as reference the smallest sum of diameter of all target lesions recorded at or after baseline. In addition, the sum must also demonstrate an absolute increase of at least 5 mm; SD= Neither sufficient shrinkage to qualify for PR or CR nor an increase in lesions which would qualify for progression).

The number of participants in each response category is reported in the table.

End point type	Secondary
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#### End point timeframe:

From start of treatment until end of treatment, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: participants				
Complete Response (CR)	0	0	0	0
Partial Response (PR)	2	0	2	3
Stable Disease (SD)	1	7	2	12
Progressive Disease (PD)	3	2	7	13
Unknown	0	1	0	4

End point values	Phase II: Spartalizumab 300 mg Q3W			
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Subject group type	Reporting group			
Number of subjects analysed	30			
Units: participants				
Complete Response (CR)	0			
Partial Response (PR)	3			
Stable Disease (SD)	9			
Progressive Disease (PD)	15			
Unknown	3			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Best Overall Response (BOR) per irRC

End point title	Phase Ib and Phase II: Best Overall Response (BOR) per irRC
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End point description:

BOR is defined as the best response recorded from the start of the study treatment until disease progression/recurrence, based on local investigator assessment per Immune-related Response Criteria (irRC).

For irRC, irCR=Disappearance of all non-nodal target lesions and non-target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; irPR= At least a 30% decrease in the sum of diameters of all target lesions including new measurable lesions, taking as reference the baseline sum of diameters; irPD= At least a 20% increase in the sum of diameters of all measured target lesions including new measurable lesions, taking as reference the smallest sum of diameter of all target lesions recorded at or after baseline. In addition, the sum must also demonstrate an absolute increase of at least 5 mm; irSD= Neither sufficient shrinkage to qualify for irPR or irCR nor an increase in lesions which would qualify for irPD).

End point type	Secondary
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End point timeframe:

From start of treatment until end of treatment, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: participants				
Immune-related Complete Response (irCR)	0	0	0	0
Immune-related Partial Response (irPR)	2	0	3	4
Immune-related Stable Disease (irSD)	1	7	3	15
Immune-related Progressive Disease (irPD)	3	2	5	10
Unknown	0	1	0	3

<b>End point values</b>	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: participants				
Immune-related Complete Response (irCR)	0			
Immune-related Partial Response (irPR)	3			
Immune-related Stable Disease (irSD)	9			
Immune-related Progressive Disease (irPD)	14			
Unknown	4			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib: Overall Response Rate (ORR) per RECIST v1.1

End point title	Phase Ib: Overall Response Rate (ORR) per RECIST v1.1 <sup>[12]</sup>
End point description:	
Tumor response was based on local investigator assessment as per RECIST v1.1. ORR per RECIST v1.1 is defined as the percentage of participants with a best overall response of Complete Response (CR) or Partial Response (PR). For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameter of all target lesions, taking as reference the baseline sum of diameters.	
End point type	Secondary
End point timeframe:	
From start of treatment until end of treatment, assessed up to 3.2 years	

Notes:

[12] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

<b>End point values</b>	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	6	10	11	
Units: percentage of participants				
number (confidence interval 95%)	33.3 (4.3 to 77.7)	0 (0.0 to 30.8)	18.2 (2.3 to 51.8)	

## Statistical analyses

No statistical analyses for this end point



**Secondary: Phase Ib and Phase II: Overall Response Rate (ORR) per irRC**

End point title	Phase Ib and Phase II: Overall Response Rate (ORR) per irRC
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End point description:

Tumor response was based on local investigator assessment as per irRC. ORR per irRC is defined as the percentage of participants with a best overall response of immune related Complete Response (irCR) or immune related Partial Response (irPR).

For irRC, irCR=Disappearance of all non-nodal target lesions and non-target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; irPR= At least a 30% decrease in the sum of diameters of all target lesions including new measurable lesions, taking as reference the baseline sum of diameters.

End point type	Secondary
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End point timeframe:

From start of treatment until end of treatment, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: percentage of participants				
number (confidence interval 95%)	33.3 (4.3 to 77.7)	0 (0.0 to 30.8)	27.3 (6.0 to 61.0)	12.5 (3.5 to 29.0)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: percentage of participants				
number (confidence interval 95%)	10.0 (2.1 to 26.5)			

**Statistical analyses**

No statistical analyses for this end point

**Secondary: Phase Ib and Phase II: Duration of Response (DOR) per RECIST v1.1**

End point title	Phase Ib and Phase II: Duration of Response (DOR) per RECIST v1.1
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End point description:

DOR only applies to patients for whom best overall response is complete response (CR) or partial response (PR) based on local investigator assessment of overall lesion response according to RECIST v1.1. DOR is defined as the time from the date of first documented response (confirmed CR or confirmed PR) to the date of first documented disease progression or death due to any cause. If a patient not had an event, duration was censored at the date of last adequate tumor assessment before the start of a new anticancer therapy, if any.

According to the statistical analysis plan (SAP), summary estimates of DOR using the Kaplan-Meier

method were planned to be reported if there were at least 10 patients achieving a confirmed CR or PR in each treatment group/arm.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.

End point type	Secondary
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End point timeframe:

From first documented response to first documented disease progression or death due to any cause, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	2	0 <sup>[13]</sup>	2	3
Units: months				
median (confidence interval 95%)	999 (999 to 999)	( to )	999 (999 to 999)	999 (999 to 999)

Notes:

[13] - No patients with CR or PR

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	3			
Units: months				
median (confidence interval 95%)	999 (999 to 999)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Duration of Response (DOR) per irRC

End point title	Phase Ib and Phase II: Duration of Response (DOR) per irRC
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End point description:

DOR only applies to patients for whom best overall response is immune-related complete response (irCR) or immune-related partial response (irPR) based on local investigator assessment of overall lesion response according to irRC. DOR is defined as the time from the date of first documented response (confirmed irCR or confirmed irPR) to the date of first documented disease progression or death due to any cause. If a patient not had an event, duration was censored at the date of last adequate tumor assessment before the start of a new anticancer therapy, if any. According to the SAP, summary estimates of DOR using the Kaplan-Meier method were planned to be reported if there were at least 10 patients achieving confirmed irCR or irPR in each treatment group. Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'

End point type	Secondary
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End point timeframe:

From first documented response to first documented disease progression or death due to any cause,

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	2	0 <sup>[14]</sup>	3	4
Units: months				
median (confidence interval 95%)	999 (999 to 999)	( to )	999 (999 to 999)	999 (999 to 999)

Notes:

[14] - No patients with CR or PR

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	3			
Units: months				
median (confidence interval 95%)	999 (999 to 999)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Time to Response (TTR) per RECIST v1.1

End point title	Phase Ib and Phase II: Time to Response (TTR) per RECIST v1.1
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End point description:

TTR is defined as the time from the date of start of treatment to the date of first documented response (CR or PR, which must be confirmed subsequently) for patients who achieved a confirmed CR or PR.

Tumor response was based on local investigator assessment per RECIST v1.1.

Patients who did not achieve a confirmed CR or PR were censored at the maximum follow-up time for patients who had a PFS event (i.e. either progressed or died due to any cause), or at the date of last adequate tumor assessment before the start of a new anticancer therapy (if any) otherwise.

According to the SAP, summary estimates of TTR using the Kaplan-Meier method were planned to be reported if there were at least 10 patients achieving confirmed CR or PR in each treatment group.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.

End point type	Secondary
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End point timeframe:

From start of treatment until first documented response, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				
median (confidence interval 95%)	999 (999 to 999)	999 (999 to 999)	999 (999 to 999)	999 (999 to 999)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	999 (999 to 999)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Time to Response (TTR) per irRC

End point title	Phase Ib and Phase II: Time to Response (TTR) per irRC
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End point description:

TTR is defined as the time from the date of start of treatment to the date of first documented response (irCR or irPR, which must be confirmed subsequently) for patients who achieved confirmed irCR or irPR. Tumor response was based on local investigator assessment per irRC.

Patients who did not achieve confirmed irCR or irPR were censored at the maximum follow-up time for patients who had a PFS event (i.e. either progressed or died due to any cause), or at the date of last adequate tumor assessment before the start of a new anticancer therapy (if any) otherwise.

According to the SAP, summary estimates of TTR using the Kaplan-Meier method were planned to be reported if there were at least 10 patients achieving confirmed irCR or irPR in each treatment group.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating not available). Therefore, not available values because of insufficient number of participants with events are indicated as '999'

End point type	Secondary
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End point timeframe:

From start of treatment until first documented response, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				
median (confidence interval 95%)	999 (999 to 999)	999 (999 to 999)	999 (999 to 999)	999 (999 to 999)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	999 (999 to 999)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Progression-Free Survival (PFS) per RECIST v1.1

End point title	Phase Ib and Phase II: Progression-Free Survival (PFS) per RECIST v1.1
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End point description:

PFS is defined as the time from the date of start of treatment to the date of the first documented progression per RECIST v1.1 or death due to any cause. If a patient did not experience an event or started a new anticancer therapy, PFS was censored at the date of the last adequate tumor evaluation before the start of a new anticancer therapy, if any. Tumor response was based on local investigator assessment per RECIST v1.1.

PFS was estimated using the Kaplan-Meier Method.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.

End point type	Secondary
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End point timeframe:

From start of treatment until first documented progression or death due to any cause, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				

median (confidence interval 95%)	3.42 (1.18 to 999)	4.44 (1.25 to 999)	1.35 (1.22 to 13.73)	2.79 (2.60 to 3.88)
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<b>End point values</b>	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	2.79 (1.45 to 4.07)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Progression-Free Survival (PFS) per irRC

End point title	Phase Ib and Phase II: Progression-Free Survival (PFS) per irRC
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End point description:

PFS is defined as the time from the date of start of treatment to the date of the first documented and confirmed progression per irRC or death due to any cause. If a patient did not experience an event or started a new anticancer therapy, PFS was censored at the date of the last adequate tumor evaluation before the start of a new anticancer therapy, if any. Tumor response was based on local investigator assessment per irRC.

PFS was estimated using the Kaplan-Meier Method.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.

End point type	Secondary
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End point timeframe:

From start of treatment until first documented progression or death due to any cause, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

<b>End point values</b>	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				
median (confidence interval 95%)	3.42 (1.18 to 999)	4.44 (1.68 to 999)	5.55 (1.25 to 999)	3.06 (2.63 to 4.17)

<b>End point values</b>	Phase II: Spartalizumab			
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	300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	2.79 (1.61 to 5.75)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Time to Progression (TTP) per RECIST v1.1

End point title	Phase Ib and Phase II: Time to Progression (TTP) per RECIST v1.1
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End point description:

TTP is defined as the time from the date of start of treatment to the date of the first documented progression per RECIST v1.1 or death due to underlying cancer. If a patient did not experience an event or started a new anticancer therapy, TTP was censored at the date of the last adequate tumor evaluation before the start of a new anticancer therapy, if any. Tumor response was based on local investigator assessment per RECIST v1.1.

TTP was estimated using the Kaplan-Meier Method.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.

End point type	Secondary
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End point timeframe:

From start of treatment until first documented progression or death due to underlying cancer, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				
median (confidence interval 95%)	3.42 (1.18 to 999)	4.44 (1.25 to 999)	1.35 (1.22 to 999)	2.79 (2.60 to 3.88)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	2.79 (1.45 to 4.07)			

## Statistical analyses

No statistical analyses for this end point

### Secondary: Phase Ib and Phase II: Time to Progression (TTP) per irRC

End point title	Phase Ib and Phase II: Time to Progression (TTP) per irRC
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End point description:

TTP is defined as the time from the date of start of treatment to the date of the first documented and confirmed progression per irRC or death due to underlying cancer. If a patient did not experience an event or started a new anticancer therapy, TTP was censored at the date of the last adequate tumor evaluation before the start of a new anticancer therapy, if any. Tumor response was based on local investigator assessment per irRC.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.

End point type	Secondary
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End point timeframe:

From start of treatment until first documented progression or death due to underlying cancer, assessed up to 3.2 years in Phase Ib and up to 2.2 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				
median (confidence interval 95%)	3.42 (1.18 to 999)	4.44 (1.68 to 999)	5.55 (1.25 to 999)	3.06 (2.63 to 4.17)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	2.79 (1.61 to 5.75)			

## Statistical analyses



No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Overall Survival (OS)

End point title	Phase Ib and Phase II: Overall Survival (OS)
End point description: OS is defined as the time from date of start of treatment to date of death due to any cause. If a patient was not known to have died, OS time was censored at the date of last contact. OS was estimated using the Kaplan-Meier Method. Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not available'). Therefore, not available values because of insufficient number of participants with events are indicated as '999'.	
End point type	Secondary
End point timeframe: From start of treatment until death due to any cause, assessed up to 3.6 years in Phase Ib and up to 2.9 years in Phase II	

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: months				
median (confidence interval 95%)	14.98 (2.37 to 999)	12.11 (1.68 to 19.45)	16.53 (2.83 to 999)	14.88 (9.00 to 19.48)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: months				
median (confidence interval 95%)	9.78 (3.65 to 22.31)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase II: Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the on-treatment period

End point title	Phase II: Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the on-treatment period <sup>[15]</sup>
End point description: Number of participants with AEs and SAEs, including changes from baseline in vital signs, electrocardiograms and laboratory results qualifying and reported as AEs. The on-treatment period is defined from the day of first administration of study treatment up to 30 days	

after the date of its last administration.

AE grades to characterize the severity of the AEs were based on the Common Terminology Criteria for Adverse Events (CTCAE) version 4.03. For CTCAE v4.03, Grade 1 = mild; Grade 2 = moderate; Grade 3 = severe; Grade 4 = life-threatening; Grade 5 = death related to AE.

End point type	Secondary
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End point timeframe:

From first dose of study medication up to 30 days after last dose, with a maximum duration of 2.3 years

Notes:

[15] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase II arms.

End point values	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	32	30		
Units: participants				
AEs	32	30		
Treatment-related AEs	30	18		
AEs with grade $\geq 3$	25	15		
Treatment-related AEs with grade $\geq 3$	18	3		
SAEs	14	10		
Treatment-related SAEs	7	1		
Fatal SAEs	1	1		
AEs leading to discontinuation	10	1		
Treatment-related AEs leading to discontinuation	7	0		
AEs leading to dose adjustment/interruption	22	11		
AEs requiring additional therapy	30	29		
AE due to infusion reaction	1	0		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase II: Number of participants with dose reductions and dose interruptions of capmatinib and spartalizumab

End point title	Phase II: Number of participants with dose reductions and dose interruptions of capmatinib and spartalizumab <sup>[16]</sup>
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End point description:

Number of participants with at least one dose reduction of capmatinib and spartalizumab and number of participants with at least one dose interruption of capmatinib and spartalizumab.

No dose modifications (i.e. dose reduction) were allowed for spartalizumab.

Due to EudraCT system limitations, data fields in the table cannot contain letters (eg. NA indicating 'not applicable'). Therefore, not applicable values are indicated as '999'.

End point type	Secondary
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End point timeframe:

From first dose of study medication up to last dose, with a maximum duration of 2.2 years

Notes:

[16] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase II arms.

End point values	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	32	30		
Units: participants				
Capmatinib dose reduction	18	999		
Capmatinib dose interruption	22	999		
Spartalizumab dose reduction	0	0		
Spartalizumab dose interruption	12	13		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase II: Dose intensity of capmatinib

End point title	Phase II: Dose intensity of capmatinib <sup>[17]</sup>
End point description:	
Dose intensity of capmatinib was calculated as actual cumulative dose in milligrams divided by duration of exposure in days.	
End point type	Secondary
End point timeframe:	
From first dose of study medication up to last dose, with a maximum duration of 2.2 years	

Notes:

[17] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase II arms.

End point values	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	32	0 <sup>[18]</sup>		
Units: mg/day				
median (full range (min-max))	696.4 (167 to 800)	( to )		

Notes:

[18] - Patients did not receive capmatinib

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib: Maximum observed plasma concentration (Cmax) of capmatinib

End point title	Phase Ib: Maximum observed plasma concentration (Cmax) of capmatinib <sup>[19]</sup>
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End point description:

Pharmacokinetic (PK) parameters were calculated based on capmatinib plasma concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed plasma concentration following a dose.

End point type	Secondary
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End point timeframe:

pre-dose, 0.5, 1, 2, 4 and 8 hours post capmatinib dose on Cycle 2 Day 1 (C2D1). The duration of one cycle was 21 days.

Notes:

[19] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	4	5	7	
Units: ng/mL				
geometric mean (geometric coefficient of variation)	1680 ( $\pm$ 64.0)	3110 ( $\pm$ 61.2)	4980 ( $\pm$ 23.0)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase II: Dose intensity of spartalizumab

End point title	Phase II: Dose intensity of spartalizumab <sup>[20]</sup>
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End point description:

Dose intensity of spartalizumab was calculated as actual cumulative dose in milligrams divided by duration of exposure in weeks and then multiplied by 3 weeks (3W).

End point type	Secondary
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End point timeframe:

From first dose of study medication up to last dose, with a maximum duration of 2.2 years

Notes:

[20] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase II arms.

<b>End point values</b>	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	32	30		
Units: mg/3W				
median (full range (min-max))	300.00 (200.0 to 300.0)	300.00 (166.7 to 300.0)		

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib: Time to reach maximum plasma concentration (Tmax) of capmatinib

End point title	Phase Ib: Time to reach maximum plasma concentration (Tmax) of capmatinib <sup>[21]</sup>
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End point description:

Pharmacokinetic (PK) parameters were calculated based on capmatinib plasma concentrations by using non-compartmental methods. Tmax is defined as the time to reach maximum (peak) plasma concentration following a dose. Actual recorded sampling times were considered for the calculations.

End point type	Secondary
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End point timeframe:

pre-dose, 0.5, 1, 2, 4 and 8 hours post capmatinib dose on Cycle 2 Day 1 (C2D1). The duration of one cycle was 21 days.

Notes:

[21] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

<b>End point values</b>	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	4	5	7	
Units: hours				
median (full range (min-max))	0.959 (0.567 to 1.00)	1.00 (1.00 to 2.05)	1.00 (1.00 to 4.22)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib: Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of capmatinib

End point title	Phase Ib: Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration
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## End point description:

Pharmacokinetic (PK) parameters were calculated based on capmatinib plasma concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUClast calculation.

End point type	Secondary
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## End point timeframe:

pre-dose, 0.5, 1, 2, 4 and 8 hours post capmatinib dose on Cycle 2 Day 1 (C2D1). The duration of one cycle was 21 days.

## Notes:

[22] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase 1b arms.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	4	5	7	
Units: hours*ng/mL				
geometric mean (geometric coefficient of variation)	5740 (± 51.6)	8570 (± 60.7)	16000 (± 30.6)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase II: Pre-dose plasma concentration of capmatinib

End point title	Phase II: Pre-dose plasma concentration of capmatinib <sup>[23]</sup>
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## End point description:

Capmatinib plasma concentration was assessed in samples taken at pre-dose. Pre-dose samples were collected before the next dose administration.

End point type	Secondary
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## End point timeframe:

Pre-dose of capmatinib on Cycle 2 Day 1, Cycle 3 Day 1, Cycle 4 Day 1, Cycle 5 Day 1 and Cycle 6 Day 1. The duration of one cycle was 21 days.

## Notes:

[23] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: This endpoint is only applicable to Phase II arms.

End point values	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Spartalizumab 300 mg Q3W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	32	0 <sup>[24]</sup>		
Units: ng/mL				
geometric mean (geometric coefficient of variation)				
Cycle 2 Day 1 (n=16,0)	607 (± 99.4)	( )		

Cycle 3 Day 1 (n=16,0)	345 (± 110)	( )		
Cycle 4 Day 1 (n=16,0)	410 (± 132)	( )		
Cycle 5 Day 1 (n=10,0)	363 (± 68.6)	( )		
Cycle 6 Day 1 (n=11,0)	275 (± 102)	( )		

Notes:

[24] - Patients did not receive capmatinib

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Maximum observed serum concentration (Cmax) of spartalizumab

End point title	Phase Ib and Phase II: Maximum observed serum concentration (Cmax) of spartalizumab
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End point description:

Pharmacokinetic (PK) parameters were calculated based on spartalizumab serum concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed serum concentration following a dose.

End point type	Secondary
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End point timeframe:

pre-dose, 1, 24, 48, 72, 168, 240, 336 and 504 hours after completion of spartalizumab infusion on Cycle 1 and Cycle 3. The duration of one cycle was 21 days.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: µg/mL				
geometric mean (geometric coefficient of variation)				
Cycle 1 (n=6,9,11,32,30)	75.7 (± 22.6)	77.2 (± 20.9)	84.7 (± 23.3)	81.7 (± 30.1)
Cycle 3 (n=5,8,7,27,21)	105 (± 35.8)	101 (± 22.3)	128 (± 20.9)	115 (± 30.2)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: µg/mL				
geometric mean (geometric coefficient of variation)				
Cycle 1 (n=6,9,11,32,30)	72.8 (± 30.9)			
Cycle 3 (n=5,8,7,27,21)	101 (± 42.2)			

## Statistical analyses

No statistical analyses for this end point

### Secondary: Phase Ib and Phase II: Time to reach maximum serum concentration (Tmax) of spartalizumab

End point title	Phase Ib and Phase II: Time to reach maximum serum concentration (Tmax) of spartalizumab
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End point description:

Pharmacokinetic (PK) parameters were calculated based on spartalizumab serum concentrations by using non-compartmental methods. Tmax is defined as the time to reach maximum (peak) serum concentration following a dose. Actual recorded sampling times were considered for the calculations.

End point type	Secondary
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End point timeframe:

pre-dose, 1, 24, 48, 72, 168, 240, 336 and 504 hours after completion of spartalizumab infusion on Cycle 1 and Cycle 3. The duration of one cycle was 21 days.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: hours				
median (full range (min-max))				
Cycle 1 (n=6,9,11,32,30)	1.51 (1.42 to 1.77)	1.50 (0.583 to 1.67)	1.50 (1.18 to 1.73)	1.64 (0.917 to 581)
Cycle 3 (n=5,8,7,27,21)	1.53 (1.50 to 1.60)	1.47 (1.42 to 22.6)	1.52 (1.45 to 1.92)	1.75 (0.00 to 24.2)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: hours				
median (full range (min-max))				
Cycle 1 (n=6,9,11,32,30)	1.59 (0.633 to 22.9)			
Cycle 3 (n=5,8,7,27,21)	1.58 (1.33 to 22.3)			



## Statistical analyses

No statistical analyses for this end point

### Secondary: Phase Ib and Phase II: Area under the serum concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of spartalizumab

End point title	Phase Ib and Phase II: Area under the serum concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of spartalizumab
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End point description:

Pharmacokinetic (PK) parameters were calculated based on spartalizumab serum concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUClast calculation.

End point type	Secondary
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End point timeframe:

pre-dose, 1, 24, 48, 72, 168, 240, 336 and 504 hours after completion of spartalizumab infusion on Cycle 1 and Cycle 3. The duration of one cycle was 21 days.

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6	10	11	32
Units: day*µg/mL				
geometric mean (geometric coefficient of variation)				
Cycle 1 (n=6,9,11,32,30)	739 (± 24.7)	726 (± 20.9)	813 (± 19.4)	805 (± 33.4)
Cycle 3 (n=5,8,7,27,21)	1280 (± 39.2)	1220 (± 25.5)	1630 (± 23.2)	1330 (± 41.6)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30			
Units: day*µg/mL				
geometric mean (geometric coefficient of variation)				
Cycle 1 (n=6,9,11,32,30)	693 (± 35.3)			
Cycle 3 (n=5,8,7,27,21)	883 (± 79.1)			

## Statistical analyses

No statistical analyses for this end point

## Secondary: Phase Ib and Phase II: Percent marker area for CD8 expression in tumor samples

End point title	Phase Ib and Phase II: Percent marker area for CD8 expression in tumor samples
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End point description:

The expression of CD8 was measured in tumor samples by immunohistochemical methods. This record summarizes the percent marker area for CD8 expression in tumor samples.

End point type	Secondary
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End point timeframe:

Baseline (screening) and post-baseline (assessed throughout the treatment up to maximum 115 days).

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	4	9	8	22
Units: CD8 percent marker area				
median (full range (min-max))				
Baseline (n=4,7,7,19,19)	0.6 (0 to 1)	0.9 (0 to 37)	0.4 (0 to 3)	0.5 (0 to 5)
Post-baseline (n=1,8,3,10,12)	3.0 (3 to 3)	2.6 (0 to 14)	1.0 (0 to 1)	1.3 (0 to 7)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	23			
Units: CD8 percent marker area				
median (full range (min-max))				
Baseline (n=4,7,7,19,19)	0.3 (0 to 27)			
Post-baseline (n=1,8,3,10,12)	0.9 (0 to 21)			

## Statistical analyses

No statistical analyses for this end point

### Secondary: Phase Ib and Phase II: PD-L1 percent positive tumor

End point title	Phase Ib and Phase II: PD-L1 percent positive tumor
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End point description:

The expression of programmed cell death-ligand 1 (PD-L1) was measured in tumor samples by immunohistochemical methods. This record summarizes the PD-L1 positivity percentage in tumor samples.

End point type	Secondary
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End point timeframe:

Baseline (screening) and post-baseline (assessed throughout the treatment up to maximum 115 days).

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	4	10	8	26
Units: PD-L1 positivity percentage				
median (full range (min-max))				
Baseline (n=4,8,7,21,22)	0.0 (0 to 5)	0.0 (0 to 90)	0.0 (0 to 2)	0.0 (0 to 7)
Post-baseline (n=2,8,3,10,10)	12.5 (0 to 25)	0.0 (0 to 100)	0.0 (0 to 5)	0.0 (0 to 3)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	24			
Units: PD-L1 positivity percentage				
median (full range (min-max))				
Baseline (n=4,8,7,21,22)	0.0 (0 to 3)			
Post-baseline (n=2,8,3,10,10)	0.0 (0 to 5)			

### Statistical analyses

No statistical analyses for this end point

### Post-hoc: Phase Ib and Phase II: All-Collected Deaths

End point title	Phase Ib and Phase II: All-Collected Deaths
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End point description:

On-treatment and post-treatment safety follow-up deaths were collected from first dose of study medication to 150 days after the last dose of study medication, for a maximum duration of 3.6 years in Phase Ib and 2.6 years in Phase II.

Post-treatment survival follow-up deaths were collected from day 151 after last dose of study medication to end of study, up to 3.6 years in Phase Ib and 2.9 years in Phase II.

All deaths refer to the sum of on-treatment and post-treatment safety follow-up deaths plus post-

treatment survival follow-up deaths.

End point type	Post-hoc
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End point timeframe:

On-treatment and post-treatment safety follow-up deaths: up to 3.6 years in Phase Ib and 2.6 years in Phase II. Post treatment survival follow-up deaths: up to 3.6 years in Phase Ib and 2.9 years in Phase II

End point values	Phase Ib: Capmatinib 200 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 300 mg BID + Spartalizumab 300 mg Q3W	Phase Ib: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W	Phase II: Capmatinib 400 mg BID + Spartalizumab 300 mg Q3W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	6 <sup>[25]</sup>	10 <sup>[26]</sup>	11 <sup>[27]</sup>	32 <sup>[28]</sup>
Units: participants				
On-treatment and post-treatment safety FU deaths	3	3	4	8
Post-treatment survival FU deaths	3	5	4	15
All deaths	6	8	8	23

Notes:

[25] - n= 6 (on-treatment and safety FU), 3 (survival), 6 (all)

[26] - n= 10 (on-treatment and safety FU), 7 (survival), 10 (all)

[27] - n= 11 (on-treatment and safety FU), 7 (survival), 11 (all)

[28] - n= 32 (on-treatment and safety FU), 24 (survival), 32 (all)

End point values	Phase II: Spartalizumab 300 mg Q3W			
Subject group type	Reporting group			
Number of subjects analysed	30 <sup>[29]</sup>			
Units: participants				
On-treatment and post-treatment safety FU deaths	13			
Post-treatment survival FU deaths	10			
All deaths	23			

Notes:

[29] - n= 30 (on-treatment and safety FU), 17 (survival), 30 (all)

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Up to 3.6 years in Phase Ib and 2.6 years in Phase II.

AEs were collected from first dose to 150 days after last dose (on-treatment and post-treatment safety FU).

Adverse event reporting additional description:

Consistent with EudraCT disclosure specifications, Novartis has reported under the Serious adverse events field "number of deaths resulting from adverse events" all those deaths, resulting from serious adverse events that are deemed to be causally related to treatment by the investigator.

Deaths in the survival FU are not considered AEs.

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	24.0
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### Reporting groups

Reporting group title	Ib: Capmatinib 200mg BID + Spartalizumab 300mg Q3W-Safety FU
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Reporting group description:

AEs during on-treatment period and post-treatment safety follow-up (FU) (up to 150 days post-treatment)

Reporting group title	II: Spartalizumab 300mg Q3W-Safety FU
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Reporting group description:

AEs during on-treatment period and post-treatment safety follow-up (FU) (up to 150 days post-treatment)

Reporting group title	II: Capmatinib 400mg BID + Spartalizumab 300mg Q3W-Safety FU
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Reporting group description:

AEs during on-treatment period and post-treatment safety follow-up (up to 150 days post-treatment)

Reporting group title	Ib: Capmatinib 300mg BID + Spartalizumab 300mg Q3W-Safety FU
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Reporting group description:

AEs during on-treatment period and post-treatment safety follow-up (up to 150 days post-treatment)

Reporting group title	Ib: Capmatinib 400mg BID + Spartalizumab 300mg Q3W-Safety FU
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Reporting group description:

AEs during on-treatment period and post-treatment safety follow-up (up to 150 days post-treatment)

Serious adverse events	Ib: Capmatinib 200mg BID + Spartalizumab 300mg Q3W-Safety FU	II: Spartalizumab 300mg Q3W-Safety FU	II: Capmatinib 400mg BID + Spartalizumab 300mg Q3W-Safety FU
Total subjects affected by serious adverse events			
subjects affected / exposed	1 / 6 (16.67%)	12 / 30 (40.00%)	14 / 32 (43.75%)
number of deaths (all causes)	3	13	8
number of deaths resulting from adverse events	0	0	0
General disorders and administration site conditions			

Oedema peripheral			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 1	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pyrexia			
subjects affected / exposed	1 / 6 (16.67%)	2 / 30 (6.67%)	3 / 32 (9.38%)
occurrences causally related to treatment / all	0 / 1	0 / 4	2 / 3
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Immune system disorders			
Hypersensitivity			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Respiratory, thoracic and mediastinal disorders			
Chronic obstructive pulmonary disease			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Acute respiratory distress syndrome			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 1	0 / 0
Investigations			
Blood bilirubin increased			
subjects affected / exposed	0 / 6 (0.00%)	2 / 30 (6.67%)	0 / 32 (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
Blood corticotrophin decreased			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Liver function test abnormal			

subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Injury, poisoning and procedural complications			
Post procedural fever			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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			
Acute myocardial infarction			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Atrial fibrillation			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac arrest			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Encephalopathy			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hepatic encephalopathy			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Eye disorders			
Vision blurred			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Ascites			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	5 / 32 (15.63%)
occurrences causally related to treatment / all	0 / 0	0 / 1	1 / 5
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Haemoperitoneum			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Diarrhoea			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Melaena			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Upper gastrointestinal haemorrhage			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 1
Abdominal pain			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Oesophageal varices haemorrhage			



subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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			
Bile duct stenosis			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Biliary obstruction			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Hepatorenal syndrome			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 5	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Hyperbilirubinaemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hypertransaminasaemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Immune-mediated hepatitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Rash pruritic			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Renal and urinary disorders			

Acute kidney injury			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Chronic kidney disease			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Haematuria			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Bacteraemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Influenza			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Sepsis			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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			
Dehydration			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Hyperkalaemia			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (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
Hypoglycaemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hyponatraemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

<b>Serious adverse events</b>	Ib: Capmatinib 300mg BID + Spartalizumab 300mg Q3W-Safety FU	Ib: Capmatinib 400mg BID + Spartalizumab 300mg Q3W-Safety FU	
Total subjects affected by serious adverse events			
subjects affected / exposed	1 / 10 (10.00%)	6 / 11 (54.55%)	
number of deaths (all causes)	3	4	
number of deaths resulting from adverse events	0	1	
General disorders and administration site conditions			
Oedema peripheral			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pyrexia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Immune system disorders			
Hypersensitivity			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	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 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Acute respiratory distress syndrome			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Investigations			
Blood bilirubin increased			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood corticotrophin decreased			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Liver function test abnormal			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Post procedural fever			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Acute myocardial infarction			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Atrial fibrillation			

subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac arrest			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	1 / 1	
Nervous system disorders			
Encephalopathy			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatic encephalopathy			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood and lymphatic system disorders			
Anaemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Eye disorders			
Vision blurred			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastrointestinal disorders			
Ascites			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Haemoperitoneum			

subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diarrhoea			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Melaena			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Upper gastrointestinal haemorrhage			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Abdominal pain			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Oesophageal varices haemorrhage			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatobiliary disorders			
Bile duct stenosis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Biliary obstruction			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatorenal syndrome			

subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyperbilirubinaemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypertransaminasaemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Immune-mediated hepatitis			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin and subcutaneous tissue disorders			
Rash pruritic			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Chronic kidney disease			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Haematuria			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations			

Bacteraemia			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cellulitis			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences causally related to treatment / all	0 / 0	6 / 6	
deaths causally related to treatment / all	0 / 0	0 / 0	
Influenza			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sepsis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Metabolism and nutrition disorders			
Dehydration			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyperkalaemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hypoglycaemia			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyponatraemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 0	
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>	<b>Ib: Capmatinib 200mg BID + Spartalizumab 300mg Q3W-Safety FU</b>	<b>II: Spartalizumab 300mg Q3W-Safety FU</b>	<b>II: Capmatinib 400mg BID + Spartalizumab 300mg Q3W-Safety FU</b>
Total subjects affected by non-serious adverse events			
subjects affected / exposed	6 / 6 (100.00%)	30 / 30 (100.00%)	32 / 32 (100.00%)
<b>Vascular disorders</b>			
Hot flush			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Haematoma			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	1	0	1
Hypertension			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	2 / 32 (6.25%)
occurrences (all)	0	0	2
Hypotension			
subjects affected / exposed	2 / 6 (33.33%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	2	0	2
<b>General disorders and administration site conditions</b>			
Chills			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	5 / 32 (15.63%)
occurrences (all)	0	0	8
Asthenia			
subjects affected / exposed	2 / 6 (33.33%)	10 / 30 (33.33%)	14 / 32 (43.75%)
occurrences (all)	2	11	30
Fatigue			
subjects affected / exposed	2 / 6 (33.33%)	2 / 30 (6.67%)	4 / 32 (12.50%)
occurrences (all)	2	3	4
Malaise			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Influenza like illness			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences (all)	1	1	1

Nodule			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	0	1	0
Non-cardiac chest pain			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Oedema peripheral			
subjects affected / exposed	4 / 6 (66.67%)	6 / 30 (20.00%)	15 / 32 (46.88%)
occurrences (all)	7	7	26
Oedema			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Pain			
subjects affected / exposed	0 / 6 (0.00%)	2 / 30 (6.67%)	1 / 32 (3.13%)
occurrences (all)	0	2	1
Pyrexia			
subjects affected / exposed	3 / 6 (50.00%)	5 / 30 (16.67%)	14 / 32 (43.75%)
occurrences (all)	4	6	28
Immune system disorders			
Anaphylactic reaction			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Respiratory, thoracic and mediastinal disorders			
Chronic obstructive pulmonary disease			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Cough			
subjects affected / exposed	0 / 6 (0.00%)	2 / 30 (6.67%)	5 / 32 (15.63%)
occurrences (all)	0	8	7
Dyspnoea			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	4 / 32 (12.50%)
occurrences (all)	0	2	5
Dyspnoea exertional			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	1	0	1
Oropharyngeal pain			

subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Pneumonitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Pulmonary embolism			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	1	0	1
Productive cough			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	0	1	0
Respiratory tract congestion			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Rhinorrhoea			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Psychiatric disorders			
Depression			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Insomnia			
subjects affected / exposed	0 / 6 (0.00%)	4 / 30 (13.33%)	3 / 32 (9.38%)
occurrences (all)	0	4	5
Irritability			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	3 / 6 (50.00%)	6 / 30 (20.00%)	4 / 32 (12.50%)
occurrences (all)	3	7	5
Amylase increased			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	4 / 32 (12.50%)
occurrences (all)	0	2	4
Aspartate aminotransferase increased			

subjects affected / exposed	3 / 6 (50.00%)	10 / 30 (33.33%)	7 / 32 (21.88%)
occurrences (all)	3	11	9
Bilirubin conjugated increased			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	3 / 32 (9.38%)
occurrences (all)	0	3	6
Blood alkaline phosphatase increased			
subjects affected / exposed	2 / 6 (33.33%)	4 / 30 (13.33%)	3 / 32 (9.38%)
occurrences (all)	2	6	3
Blood bilirubin increased			
subjects affected / exposed	2 / 6 (33.33%)	4 / 30 (13.33%)	8 / 32 (25.00%)
occurrences (all)	2	5	9
Creatinine renal clearance decreased			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Blood creatinine increased			
subjects affected / exposed	3 / 6 (50.00%)	0 / 30 (0.00%)	5 / 32 (15.63%)
occurrences (all)	4	0	8
Electrocardiogram QT prolonged			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Lipase increased			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	6 / 32 (18.75%)
occurrences (all)	0	1	7
Lymphocyte count decreased			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences (all)	0	1	2
Neutrophil count decreased			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	2	0	0
Platelet count decreased			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	2 / 32 (6.25%)
occurrences (all)	1	1	2
Weight increased			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Weight decreased			

subjects affected / exposed occurrences (all)	2 / 6 (33.33%) 2	1 / 30 (3.33%) 1	2 / 32 (6.25%) 3
Injury, poisoning and procedural complications Procedural pain subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	3 / 30 (10.00%) 3	1 / 32 (3.13%) 1
Cardiac disorders Angina pectoris subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Angina unstable subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Atrioventricular block first degree subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Nervous system disorders Dizziness subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	3 / 32 (9.38%) 3
Cerebral ischaemia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Dysaesthesia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Dysgeusia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	2 / 32 (6.25%) 2
Headache subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	3 / 30 (10.00%) 3	5 / 32 (15.63%) 7
Neuralgia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Serotonin syndrome			

subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Paraesthesia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	2 / 32 (6.25%) 3
Blood and lymphatic system disorders			
Leukopenia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	2 / 32 (6.25%) 2
Anaemia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	3 / 30 (10.00%) 5	4 / 32 (12.50%) 4
Neutropenia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 2	1 / 30 (3.33%) 1	2 / 32 (6.25%) 2
Thrombocytopenia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	1 / 30 (3.33%) 2	3 / 32 (9.38%) 4
Ear and labyrinth disorders			
Tinnitus subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	1 / 30 (3.33%) 1	0 / 32 (0.00%) 0
Vertigo subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	2 / 32 (6.25%) 2
Eye disorders			
Cataract subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Conjunctival haemorrhage subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Dry eye subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	0 / 32 (0.00%) 0
Diplopia			

subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	0 / 30 (0.00%) 0	2 / 32 (6.25%) 3
Gastrointestinal disorders			
Abdominal discomfort			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Abdominal pain			
subjects affected / exposed	1 / 6 (16.67%)	5 / 30 (16.67%)	7 / 32 (21.88%)
occurrences (all)	1	5	9
Abdominal distension			
subjects affected / exposed	1 / 6 (16.67%)	3 / 30 (10.00%)	4 / 32 (12.50%)
occurrences (all)	1	3	5
Abdominal pain upper			
subjects affected / exposed	1 / 6 (16.67%)	3 / 30 (10.00%)	5 / 32 (15.63%)
occurrences (all)	1	3	6
Anal fissure			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Abdominal tenderness			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Aphthous ulcer			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Aptyalism			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Ascites			
subjects affected / exposed	1 / 6 (16.67%)	5 / 30 (16.67%)	7 / 32 (21.88%)
occurrences (all)	1	5	9
Chapped lips			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Constipation			
subjects affected / exposed	1 / 6 (16.67%)	3 / 30 (10.00%)	4 / 32 (12.50%)
occurrences (all)	1	4	5

Dry mouth			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	1	2	0
Diarrhoea			
subjects affected / exposed	2 / 6 (33.33%)	6 / 30 (20.00%)	10 / 32 (31.25%)
occurrences (all)	2	10	25
Dyspepsia			
subjects affected / exposed	0 / 6 (0.00%)	4 / 30 (13.33%)	3 / 32 (9.38%)
occurrences (all)	0	5	3
Flatulence			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	3 / 32 (9.38%)
occurrences (all)	0	0	3
Gastrooesophageal reflux disease			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences (all)	0	1	1
Nausea			
subjects affected / exposed	2 / 6 (33.33%)	2 / 30 (6.67%)	15 / 32 (46.88%)
occurrences (all)	3	2	26
Plicated tongue			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Stomatitis			
subjects affected / exposed	1 / 6 (16.67%)	2 / 30 (6.67%)	2 / 32 (6.25%)
occurrences (all)	1	2	2
Vomiting			
subjects affected / exposed	2 / 6 (33.33%)	1 / 30 (3.33%)	9 / 32 (28.13%)
occurrences (all)	3	1	17
Toothache			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Hepatobiliary disorders			
Hyperbilirubinaemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	2 / 32 (6.25%)
occurrences (all)	0	0	2
Liver injury			



subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Skin and subcutaneous tissue disorders			
Alopecia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Blister			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	2	0	0
Decubitus ulcer			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Dermatitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	2 / 32 (6.25%)
occurrences (all)	0	0	2
Dry skin			
subjects affected / exposed	2 / 6 (33.33%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences (all)	2	1	1
Dermatitis acneiform			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Erythema			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Eczema			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Lichen planus			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Palmar-plantar erythrodysaesthesia syndrome			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Pruritus			

subjects affected / exposed	3 / 6 (50.00%)	8 / 30 (26.67%)	4 / 32 (12.50%)
occurrences (all)	4	9	7
Rash			
subjects affected / exposed	1 / 6 (16.67%)	4 / 30 (13.33%)	4 / 32 (12.50%)
occurrences (all)	2	6	5
Psoriasis			
subjects affected / exposed	0 / 6 (0.00%)	2 / 30 (6.67%)	0 / 32 (0.00%)
occurrences (all)	0	3	0
Rash erythematous			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Rash maculo-papular			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	3 / 32 (9.38%)
occurrences (all)	0	0	3
Rash pruritic			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	2 / 32 (6.25%)
occurrences (all)	0	2	2
Skin ulcer			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Stasis dermatitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Lichenoid keratosis			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Dysuria			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Pollakiuria			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	0	1	0

Endocrine disorders			
Hyperthyroidism			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences (all)	0	1	1
Adrenal insufficiency			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Hypothyroidism			
subjects affected / exposed	0 / 6 (0.00%)	3 / 30 (10.00%)	1 / 32 (3.13%)
occurrences (all)	0	3	1
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	1 / 6 (16.67%)	3 / 30 (10.00%)	5 / 32 (15.63%)
occurrences (all)	1	10	6
Back pain			
subjects affected / exposed	1 / 6 (16.67%)	3 / 30 (10.00%)	3 / 32 (9.38%)
occurrences (all)	1	4	3
Bone pain			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	1	1	0
Joint swelling			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Lumbar spinal stenosis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Muscular weakness			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Muscle spasms			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	2 / 32 (6.25%)
occurrences (all)	0	1	2
Myalgia			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	3 / 32 (9.38%)
occurrences (all)	1	1	4
Musculoskeletal pain			

subjects affected / exposed	0 / 6 (0.00%)	2 / 30 (6.67%)	1 / 32 (3.13%)
occurrences (all)	0	2	1
Neck pain			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Pain in extremity			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	1	0	1
Infections and infestations			
Abscess neck			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Bronchitis			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	2 / 32 (6.25%)
occurrences (all)	0	1	2
Cellulitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Folliculitis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Nasopharyngitis			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	0	1	0
Oral fungal infection			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	3 / 32 (9.38%)
occurrences (all)	0	1	3
Oral candidiasis			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	2 / 32 (6.25%)
occurrences (all)	0	0	2
Upper respiratory tract infection			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	1 / 32 (3.13%)
occurrences (all)	0	1	1
Pneumonia			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	0	1	0

Paronychia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	0	0	0
Urinary tract infection			
subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	0 / 32 (0.00%)
occurrences (all)	0	1	0
Metabolism and nutrition disorders			
Decreased appetite			
subjects affected / exposed	0 / 6 (0.00%)	3 / 30 (10.00%)	15 / 32 (46.88%)
occurrences (all)	0	4	18
Hypercalcaemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	0	0	1
Hyperglycaemia			
subjects affected / exposed	0 / 6 (0.00%)	0 / 30 (0.00%)	2 / 32 (6.25%)
occurrences (all)	0	0	2
Hyperkalaemia			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	2 / 32 (6.25%)
occurrences (all)	1	1	2
Hypoalbuminaemia			
subjects affected / exposed	2 / 6 (33.33%)	4 / 30 (13.33%)	9 / 32 (28.13%)
occurrences (all)	2	4	12
Hypocalcaemia			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	0 / 32 (0.00%)
occurrences (all)	1	0	0
Hypomagnesaemia			
subjects affected / exposed	0 / 6 (0.00%)	2 / 30 (6.67%)	3 / 32 (9.38%)
occurrences (all)	0	2	4
Hypokalaemia			
subjects affected / exposed	1 / 6 (16.67%)	1 / 30 (3.33%)	4 / 32 (12.50%)
occurrences (all)	1	1	6
Hyponatraemia			
subjects affected / exposed	1 / 6 (16.67%)	0 / 30 (0.00%)	1 / 32 (3.13%)
occurrences (all)	1	0	2
Hypophosphataemia			

subjects affected / exposed	0 / 6 (0.00%)	1 / 30 (3.33%)	2 / 32 (6.25%)
occurrences (all)	0	1	2

<b>Non-serious adverse events</b>	Ib: Capmatinib 300mg BID + Spartalizumab 300mg Q3W-Safety FU	Ib: Capmatinib 400mg BID + Spartalizumab 300mg Q3W-Safety FU	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	10 / 10 (100.00%)	10 / 11 (90.91%)	
<b>Vascular disorders</b>			
Hot flush			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Haematoma			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Hypertension			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Hypotension			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
<b>General disorders and administration site conditions</b>			
Chills			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences (all)	0	2	
Asthenia			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences (all)	0	2	
Fatigue			
subjects affected / exposed	3 / 10 (30.00%)	4 / 11 (36.36%)	
occurrences (all)	3	4	
Malaise			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Influenza like illness			

subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Nodule			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Non-cardiac chest pain			
subjects affected / exposed	2 / 10 (20.00%)	1 / 11 (9.09%)	
occurrences (all)	2	1	
Oedema peripheral			
subjects affected / exposed	6 / 10 (60.00%)	6 / 11 (54.55%)	
occurrences (all)	12	7	
Oedema			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Pain			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Pyrexia			
subjects affected / exposed	0 / 10 (0.00%)	4 / 11 (36.36%)	
occurrences (all)	0	8	
Immune system disorders			
Anaphylactic reaction			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	6	
Respiratory, thoracic and mediastinal disorders			
Chronic obstructive pulmonary disease			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Cough			
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	2	
Dyspnoea			
subjects affected / exposed	1 / 10 (10.00%)	3 / 11 (27.27%)	
occurrences (all)	1	4	
Dyspnoea exertional			

subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Oropharyngeal pain			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	2	0	
Pneumonitis			
subjects affected / exposed	0 / 10 (0.00%)	3 / 11 (27.27%)	
occurrences (all)	0	3	
Pulmonary embolism			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Productive cough			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Respiratory tract congestion			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Rhinorrhoea			
subjects affected / exposed	2 / 10 (20.00%)	0 / 11 (0.00%)	
occurrences (all)	2	0	
Psychiatric disorders			
Depression			
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	1	
Insomnia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	2	
Irritability			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	2 / 10 (20.00%)	5 / 11 (45.45%)	
occurrences (all)	3	6	
Amylase increased			



subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)
occurrences (all)	0	10
Aspartate aminotransferase increased		
subjects affected / exposed	2 / 10 (20.00%)	3 / 11 (27.27%)
occurrences (all)	4	3
Bilirubin conjugated increased		
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)
occurrences (all)	0	0
Blood alkaline phosphatase increased		
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)
occurrences (all)	0	1
Blood bilirubin increased		
subjects affected / exposed	2 / 10 (20.00%)	2 / 11 (18.18%)
occurrences (all)	3	2
Creatinine renal clearance decreased		
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)
occurrences (all)	0	1
Blood creatinine increased		
subjects affected / exposed	2 / 10 (20.00%)	3 / 11 (27.27%)
occurrences (all)	3	8
Electrocardiogram QT prolonged		
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)
occurrences (all)	0	0
Lipase increased		
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)
occurrences (all)	0	12
Lymphocyte count decreased		
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)
occurrences (all)	0	1
Neutrophil count decreased		
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)
occurrences (all)	0	0
Platelet count decreased		
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)
occurrences (all)	1	2

Weight increased subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Weight decreased subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Injury, poisoning and procedural complications Procedural pain subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	0 / 11 (0.00%) 0	
Cardiac disorders Angina pectoris subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Angina unstable subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Atrioventricular block first degree subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Nervous system disorders Dizziness subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	2 / 11 (18.18%) 2	
Cerebral ischaemia subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Dysaesthesia subjects affected / exposed occurrences (all)	1 / 10 (10.00%) 1	0 / 11 (0.00%) 0	
Dysgeusia subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	2 / 11 (18.18%) 3	
Headache subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	0 / 11 (0.00%) 0	

Neuralgia			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Serotonin syndrome			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Paraesthesia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Blood and lymphatic system disorders			
Leukopenia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Anaemia			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	5	0	
Neutropenia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Thrombocytopenia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Ear and labyrinth disorders			
Tinnitus			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Vertigo			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Eye disorders			
Cataract			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Conjunctival haemorrhage			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Dry eye			

subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Diplopia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Gastrointestinal disorders			
Abdominal discomfort			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Abdominal pain			
subjects affected / exposed	1 / 10 (10.00%)	3 / 11 (27.27%)	
occurrences (all)	1	5	
Abdominal distension			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences (all)	0	2	
Abdominal pain upper			
subjects affected / exposed	2 / 10 (20.00%)	2 / 11 (18.18%)	
occurrences (all)	3	2	
Anal fissure			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Abdominal tenderness			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Aphthous ulcer			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Aptyalism			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Ascites			
subjects affected / exposed	2 / 10 (20.00%)	0 / 11 (0.00%)	
occurrences (all)	2	0	
Chapped lips			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	

Constipation			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Dry mouth			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Diarrhoea			
subjects affected / exposed	3 / 10 (30.00%)	3 / 11 (27.27%)	
occurrences (all)	4	15	
Dyspepsia			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences (all)	0	2	
Flatulence			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Gastrooesophageal reflux disease			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	3	
Nausea			
subjects affected / exposed	2 / 10 (20.00%)	5 / 11 (45.45%)	
occurrences (all)	3	9	
Plicated tongue			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Stomatitis			
subjects affected / exposed	4 / 10 (40.00%)	0 / 11 (0.00%)	
occurrences (all)	4	0	
Vomiting			
subjects affected / exposed	1 / 10 (10.00%)	3 / 11 (27.27%)	
occurrences (all)	1	4	
Toothache			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Hepatobiliary disorders			
Hyperbilirubinaemia			

subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Liver injury			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Skin and subcutaneous tissue disorders			
Alopecia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Blister			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Decubitus ulcer			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Dermatitis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Dry skin			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Dermatitis acneiform			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Erythema			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Eczema			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Lichen planus			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Palmar-plantar erythrodysaesthesia syndrome			

subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Pruritus			
subjects affected / exposed	2 / 10 (20.00%)	4 / 11 (36.36%)	
occurrences (all)	3	5	
Rash			
subjects affected / exposed	3 / 10 (30.00%)	3 / 11 (27.27%)	
occurrences (all)	3	4	
Psoriasis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Rash erythematous			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Rash maculo-papular			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	2	
Rash pruritic			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Skin ulcer			
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	1	
Stasis dermatitis			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Lichenoid keratosis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	2	0	
Dysuria			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	

Pollakiuria subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Endocrine disorders			
Hyperthyroidism subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Adrenal insufficiency subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Hypothyroidism subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Musculoskeletal and connective tissue disorders			
Arthralgia subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 2	
Back pain subjects affected / exposed occurrences (all)	3 / 10 (30.00%) 3	0 / 11 (0.00%) 0	
Bone pain subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	0 / 11 (0.00%) 0	
Joint swelling subjects affected / exposed occurrences (all)	0 / 10 (0.00%) 0	1 / 11 (9.09%) 1	
Lumbar spinal stenosis subjects affected / exposed occurrences (all)	1 / 10 (10.00%) 1	0 / 11 (0.00%) 0	
Muscular weakness subjects affected / exposed occurrences (all)	1 / 10 (10.00%) 1	0 / 11 (0.00%) 0	
Muscle spasms subjects affected / exposed occurrences (all)	2 / 10 (20.00%) 2	0 / 11 (0.00%) 0	
Myalgia			



subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	1	
Musculoskeletal pain			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Neck pain			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Pain in extremity			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Infections and infestations			
Abscess neck			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Bronchitis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Cellulitis			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences (all)	0	2	
Folliculitis			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Nasopharyngitis			
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	2	
Oral fungal infection			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Oral candidiasis			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Upper respiratory tract infection			
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	1	

Pneumonia			
subjects affected / exposed	0 / 10 (0.00%)	2 / 11 (18.18%)	
occurrences (all)	0	3	
Paronychia			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Urinary tract infection			
subjects affected / exposed	1 / 10 (10.00%)	1 / 11 (9.09%)	
occurrences (all)	1	1	
Metabolism and nutrition disorders			
Decreased appetite			
subjects affected / exposed	2 / 10 (20.00%)	3 / 11 (27.27%)	
occurrences (all)	3	3	
Hypercalcaemia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Hyperglycaemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Hyperkalaemia			
subjects affected / exposed	1 / 10 (10.00%)	0 / 11 (0.00%)	
occurrences (all)	1	0	
Hypoalbuminaemia			
subjects affected / exposed	3 / 10 (30.00%)	3 / 11 (27.27%)	
occurrences (all)	5	3	
Hypocalcaemia			
subjects affected / exposed	0 / 10 (0.00%)	0 / 11 (0.00%)	
occurrences (all)	0	0	
Hypomagnesaemia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Hypokalaemia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Hyponatraemia			

subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	
Hypophosphataemia			
subjects affected / exposed	0 / 10 (0.00%)	1 / 11 (9.09%)	
occurrences (all)	0	1	

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
27 June 2016	<p>Based on Health Authority requests, the following changes were implemented:</p> <ul style="list-style-type: none"><li>• Subjects who refused sorafenib treatment were excluded from the subject population to be enrolled in this study. To be eligible, subjects should have received prior systemic sorafenib treatment for HCC with documented progression during or after discontinuation of sorafenib treatment, or were intolerant to sorafenib (that led to sorafenib discontinuation).</li><li>• A mandatory HIV test was introduced at screening. Considering the limited clinical experience with PD-1 inhibitors in HIV positive subjects, to reduce the potential risk of virus reactivation, HIV testing was mandated and HIV positive subjects were excluded from the study.</li><li>• Thrombocytopenia CTCAE grade 3 with clinically significant bleeding was listed as DLT, as well as nausea/vomiting grade 4 (regardless of anti-emetic treatment) and diarrhea grade 4 (regardless of anti-diarrheal treatment).</li><li>• Enrollment of subjects potentially eligible for any loco regional liver treatment (e.g. hepatic resection, hepatic arterial embolization, radiofrequency ablation) was not allowed.</li><li>• History of organ transplant was added as an additional exclusion criterion. Limited data were reported for the efficacy and toxicity, such as organ rejection, of immune checkpoints including PD-1 inhibitors in subjects with organ transplant, therefore considering the risk, subjects with a history of organ transplant were excluded from the study.</li></ul>
07 November 2017	<p>The main purpose for this amendment was threefold. The first was to reduce the focus on the cMET high population; the second was to expand the eligible clinical population to include subjects with HCV, and subjects with mild ascites; and the third to introduce additional biomarker collections based on emerging PD data.</p>
27 March 2018	<p>The main purpose of this amendment was to update the exclusion criteria, the list of prohibited medications, the list of medications used with caution and the criteria for dose modifications based on the available capmatinib clinical data as per capmatinib Investigator's Brochure edition 8 with primary focus on pneumonitis/ILD events that were reported with capmatinib.</p>
14 September 2018	<p>The primary purpose of this amendment was to incorporate health authority-requested language requiring study treatment discontinuation in the event of Stevens-Johnson syndrome/ Toxic epidermal necrolysis (SJS/TEN). After the occurrence of a case of SJS in a study with spartalizumab in combination with another investigational agent, the dose modification guidelines for protocols using spartalizumab were updated to mandate permanent discontinuation of study treatment for subjects who experienced SJS or Lyell syndrome/TEN. This change was already implemented as part of an urgent safety measure released on 15-Jun-2018. This protocol amendment was now formalizing these changes in the dose modification section and corresponding table describing the criteria for dose reduction/interruption and re-initiation of treatment for adverse drug reactions. In addition, based on a health authority request, subjects with indolent malignancies that have never required therapy were no longer considered eligible for this study. Exclusion criterion 'Malignant disease, other than that being treated in this study. Exceptions to this exclusion included the following: malignancies that were treated curatively and have not recurred within 2 years prior to study treatment; completely resected basal cell and squamous cell skin cancers; any malignancy considered to be indolent and that has never required therapy; and completely resected carcinoma in situ of any type' was updated accordingly.</p>

14 February 2020	<p>The primary purpose of this amendment was to incorporate dose modification and management guidelines for myocarditis, as well as the option for subjects to be transferred to another study or an alternative treatment option to continue study treatment at the time of end of this study.</p> <p>After the occurrence of a case of myocarditis, the dose modification guidelines for protocols using capmatinib in combination with spartalizumab were updated to mandate permanent discontinuation of study treatment in case of myocarditis grade <math>\geq 2</math> or other cardiac event grade <math>\geq 3</math>. In addition, recommended clinical management guidelines in case of such an event were provided.</p> <p>This protocol amendment revised the definition of end of study to include the option for subjects still on study treatment and who, in the opinion of the Investigator, were still deriving clinical benefit at the time of end of study, to transfer to another study or to an alternative treatment option to continue providing study treatment to these subjects.</p>
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Notes:

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## Interruptions (globally)

Were there any global interruptions to the trial? No

## Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

Due to EudraCT system limitations, which EMA is aware of, data using 999 as data points in this record are not an accurate representation of the clinical trial results. Please use <https://www.novctrd.com> for complete trial results.

Notes: