

**Clinical trial results:****A Phase III Randomized Study to Investigate the Efficacy and Safety of Atezolizumab (Anti-PD-L1 Antibody) in Combination With Neoadjuvant Anthracycline/Nab-Paclitaxel-Based Chemotherapy Compared With Placebo and Chemotherapy in Patients With Primary Invasive Triple-Negative Breast Cancer****Summary**

EudraCT number	2016-004734-22
Trial protocol	DE GB BE PL ES IT
Global end of trial date	28 September 2022

Results information

Result version number	v2 (current)
This version publication date	14 October 2023
First version publication date	14 April 2021
Version creation reason	

Trial information**Trial identification**

Sponsor protocol code	W039392
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT03197935
WHO universal trial number (UTN)	-
Other trial identifiers	Other Sponsor ID: IMpassion031

Notes:

Sponsors

Sponsor organisation name	F. Hoffmann-La Roche AG
Sponsor organisation address	Grenzacherstrasse 124, Basel, Switzerland, CH-4070
Public contact	F. Hoffmann-La Roche AG, F. Hoffmann-La Roche AG, 41 616878333, global.trial_information@roche.com
Scientific contact	F. Hoffmann-La Roche AG, F. Hoffmann-La Roche AG, 41 616878333, global.trial_information@roche.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	28 September 2022
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	28 September 2022
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

The main objectives of this study were to evaluate the efficacy, safety, and pharmacokinetics of neoadjuvant nab-paclitaxel and atezolizumab followed by doxorubicin and cyclophosphamide with atezolizumab or neoadjuvant nab-paclitaxel and placebo followed by doxorubicin and cyclophosphamide with placebo in participants with T2-4d triple-negative breast cancer (TNBC).

Protection of trial subjects:

All study subjects were required to read and sign an Informed Consent Form.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	24 July 2017
Long term follow-up planned	Yes
Long term follow-up rationale	Efficacy, Safety
Long term follow-up duration	49 Months
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Australia: 4
Country: Number of subjects enrolled	Belgium: 15
Country: Number of subjects enrolled	Brazil: 113
Country: Number of subjects enrolled	Canada: 11
Country: Number of subjects enrolled	Germany: 48
Country: Number of subjects enrolled	Spain: 4
Country: Number of subjects enrolled	United Kingdom: 6
Country: Number of subjects enrolled	Italy: 2
Country: Number of subjects enrolled	Japan: 36
Country: Number of subjects enrolled	Korea, Republic of: 27
Country: Number of subjects enrolled	Poland: 5
Country: Number of subjects enrolled	Taiwan: 21
Country: Number of subjects enrolled	United States: 41
Worldwide total number of subjects	333
EEA total number of subjects	74

Notes:

Subjects enrolled per age group	
In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	287
From 65 to 84 years	46
85 years and over	0

Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

Participants with clinically assessed T2-4d early or primary invasive triple-negative breast cancer (TNBC) who were eligible for surgery were included in the study.

Period 1

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

Arms

Are arms mutually exclusive?	Yes
Arm title	Placebo and Chemotherapy

Arm description:

Participants received placebo matched to atezolizumab via IV infusion every 2 weeks in combination with nab-paclitaxel (125 mg/m²) via IV infusion every week for 12 weeks, followed by placebo matched to atezolizumab every 2 weeks in combination with doxorubicin (60 mg/m²) and cyclophosphamide (600 mg/m²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants will continue to be followed after surgery.

Arm type	Placebo
Investigational medicinal product name	Placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Placebo matched to atezolizumab was administered intravenously every 2 weeks for 20 weeks.

Investigational medicinal product name	Cyclophosphamide
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Cyclophosphamide was administered after completion or early discontinuation of nab-paclitaxel at a dose of 600 mg/m² every 2 weeks intravenously for 4 doses.

Investigational medicinal product name	Doxorubicin
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Doxorubicin was administered after completion or early discontinuation of nab-paclitaxel at a dose of 60 mg/m² every 2 weeks intravenously for 4 doses.

Investigational medicinal product name	Nab-paclitaxel
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion

Routes of administration	Intravenous use
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Dosage and administration details:

Nab-paclitaxel was administered at a dose of 125 milligrams per square meter [mg/m²] intravenously every week for 12 weeks.

Arm title	Atezolizumab and Chemotherapy
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Arm description:

Participants received atezolizumab (840 milligrams [mg]) via intravenous (IV) infusion every 2 weeks in combination with nab-paclitaxel (125 milligrams per square meter [mg/m²]) via IV infusion every week for 12 weeks, followed by atezolizumab (840 mg) every 2 weeks in combination with doxorubicin (60 mg/m²) and cyclophosphamide (600 mg/m²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants continued to receive unblinded atezolizumab post-surgery at a fixed dose of 1200 mg by IV infusion every 3 weeks for 11 doses, for a total of approximately 12 months of atezolizumab therapy.

Arm type	Experimental
Investigational medicinal product name	Atezolizumab
Investigational medicinal product code	
Other name	MPDL3280A, Tecentriq
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Atezolizumab was administered intravenously at a dose of 840 milligrams every 2 weeks for 20 weeks. Participants continued to receive unblinded atezolizumab post-surgery at a fixed dose of 1200 mg intravenously every 3 weeks for 11 doses, for a total of approximately 12 months of atezolizumab therapy.

Investigational medicinal product name	Cyclophosphamide
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Cyclophosphamide was administered after completion or early discontinuation of nab-paclitaxel at a dose of 600 mg/m² every 2 weeks intravenously for 4 doses.

Investigational medicinal product name	Doxorubicin
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Doxorubicin was administered after completion or early discontinuation of nab-paclitaxel at a dose of 60 mg/m² every 2 weeks intravenously for 4 doses.

Investigational medicinal product name	Nab-paclitaxel
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Infusion
Routes of administration	Intravenous use

Dosage and administration details:

Nab-paclitaxel was administered at a dose of 125 milligrams per square meter [mg/m²] intravenously every week for 12 weeks.

Number of subjects in period 1	Placebo and Chemotherapy	Atezolizumab and Chemotherapy
Started	168	165
Completed	121	136
Not completed	47	29
Consent withdrawn by subject	16	8
Physician decision	2	1
Death due to any cause	26	15
Lost to follow-up	3	5

Baseline characteristics

Reporting groups

Reporting group title	Placebo and Chemotherapy
Reporting group description:	
Participants received placebo matched to atezolizumab via IV infusion every 2 weeks in combination with nab-paclitaxel (125 mg/m ²) via IV infusion every week for 12 weeks, followed by placebo matched to atezolizumab every 2 weeks in combination with doxorubicin (60 mg/m ²) and cyclophosphamide (600 mg/m ²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants will continue to be followed after surgery.	
Reporting group title	Atezolizumab and Chemotherapy
Reporting group description:	
Participants received atezolizumab (840 milligrams [mg]) via intravenous (IV) infusion every 2 weeks in combination with nab-paclitaxel (125 milligrams per square meter [mg/m ²]) via IV infusion every week for 12 weeks, followed by atezolizumab (840 mg) every 2 weeks in combination with doxorubicin (60 mg/m ²) and cyclophosphamide (600 mg/m ²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants continued to receive unblinded atezolizumab post-surgery at a fixed dose of 1200 mg by IV infusion every 3 weeks for 11 doses, for a total of approximately 12 months of atezolizumab therapy.	

Reporting group values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy	Total
Number of subjects	168	165	333
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)	139	148	287
From 65-84 years	29	17	46
85 years and over	0	0	0
Age Continuous Units: Years			
arithmetic mean	50.3	50.1	
standard deviation	± 13.2	± 11.6	-
Sex: Female, Male Units: Participants			
Female	168	165	333
Male	0	0	0
Race (NIH/OMB) Units: Subjects			
American Indian or Alaska Native	0	0	0
Asian	41	47	88
Native Hawaiian or Other Pacific Islander	0	0	0
Black or African American	15	9	24
White	108	102	210
More than one race	0	4	4

Unknown or Not Reported	4	3	7
Ethnicity (NIH/OMB)			
Units: Subjects			
Hispanic or Latino	47	45	92
Not Hispanic or Latino	114	114	228
Unknown or Not Reported	7	6	13

End points

End points reporting groups

Reporting group title	Placebo and Chemotherapy
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Reporting group description:

Participants received placebo matched to atezolizumab via IV infusion every 2 weeks in combination with nab-paclitaxel (125 mg/m²) via IV infusion every week for 12 weeks, followed by placebo matched to atezolizumab every 2 weeks in combination with doxorubicin (60 mg/m²) and cyclophosphamide (600 mg/m²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants will continue to be followed after surgery.

Reporting group title	Atezolizumab and Chemotherapy
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Reporting group description:

Participants received atezolizumab (840 milligrams [mg]) via intravenous (IV) infusion every 2 weeks in combination with nab-paclitaxel (125 milligrams per square meter [mg/m²]) via IV infusion every week for 12 weeks, followed by atezolizumab (840 mg) every 2 weeks in combination with doxorubicin (60 mg/m²) and cyclophosphamide (600 mg/m²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants continued to receive unblinded atezolizumab post-surgery at a fixed dose of 1200 mg by IV infusion every 3 weeks for 11 doses, for a total of approximately 12 months of atezolizumab therapy.

Primary: Number of Participants with Pathologic Complete Response (pCR) Using American Joint Committee on Cancer (AJCC) Staging System in ITT Population

End point title	Number of Participants with Pathologic Complete Response (pCR) Using American Joint Committee on Cancer (AJCC) Staging System in ITT Population
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End point description:

Number of participants with Pathologic Complete Response (pCR) Using American Joint Committee on Cancer (AJCC) Staging System in ITT Population. pCR is defined as eradication of invasive tumor from both breast and lymph nodes (ypT0/is ypN0). pCR was evaluated for each participant after neoadjuvant study treatment and surgery. Participants whose pCR assessment was missing will be counted as not achieving a pCR.

End point type	Primary
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End point timeframe:

After neoadjuvant study treatment and surgery, up to primary analysis data cut off on 03 April 2020.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	168	165		
Units: Number of Participants	69	95		

Statistical analyses

Statistical analysis title	pCR ITT Statistical Analysis
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Statistical analysis description:

Stratified analysis. Strata are: tumor PD-L1 status (IC0 vs. IC1/2/3) and clinical stage at presentation (Stage II vs. III).

Comparison groups	Atezolizumab and Chemotherapy v Placebo and Chemotherapy
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Number of subjects included in analysis	333
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0044 ^[1]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Absolute difference in pCR
Point estimate	16.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	5.91
upper limit	27.1

Notes:

[1] - (one-sided)

Primary: Number of Participants with pCR in Subpopulation with PD-L1-Positive Tumor Status (tumor-infiltrating immune cell [IC] 1/2/3) Using AJCC Staging System

End point title	Number of Participants with pCR in Subpopulation with PD-L1-Positive Tumor Status (tumor-infiltrating immune cell [IC] 1/2/3) Using AJCC Staging System
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End point description:

Number of participants with Pathologic Complete Response (pCR) Using American Joint Committee on Cancer (AJCC) Staging System in the subpopulation with programmed death-ligand1 (PD-L1)-positive tumor status(tumor-infiltrating immune cell [IC] IC1/2/3) . pCR is defined as eradication of invasive tumor from both breast and lymph nodes (ypT0/is ypN0). pCR was evaluated for each participant after neoadjuvant study treatment and surgery. Participants whose pCR assessment was missing will be counted as not achieving a pCR.

End point type	Primary
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End point timeframe:

After neoadjuvant study treatment and surgery, up to primary analysis data cut off on 03 April 2020.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	75	77		
Units: Number of Participants	37	53		

Statistical analyses

Statistical analysis title	pCR PD-L1-Positive Statistical Analysis
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Statistical analysis description:

Stratified analysis. Strata are: AJCC stage at diagnosis (II vs. III).

Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
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Number of subjects included in analysis	152
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0206 ^[2]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Difference in pCR
Point estimate	19.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	4.17
upper limit	34.83

Notes:

[2] - (one-sided)

Secondary: Event-Free Survival (EFS) in Subpopulation with PD-L1-Positive Tumor Status

End point title	Event-Free Survival (EFS) in Subpopulation with PD-L1-Positive Tumor Status
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End point description:

Event-free survival (EFS) defined as the time from randomization to the first documented occurrence of disease recurrence, disease progression, or death from any cause in the subpopulation with PD-L1-positive tumor status. Recurrent disease includes local, regional, or distant recurrence and contralateral breast cancer. Ipsilateral or contralateral in situ disease and second primary non-breast cancers (including in situ carcinomas and non-melanoma skin cancers) will not be counted as progressive disease or recurrent disease. Note: 999999=not estimable.

End point type	Secondary
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End point timeframe:

From randomization and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	75	77		
Units: Months				
number (confidence interval 95%)	999999 (999999 to 999999)	999999 (999999 to 999999)		

Statistical analyses

Statistical analysis title	EFS Subpopulation With PD-L1-Positive Tumor Status
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Statistical analysis description:

Stratified analysis. Strata are: AJCC stage at diagnosis (II vs. III).

Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
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Number of subjects included in analysis	152
Analysis specification	Pre-specified
Analysis type	other ^[3]
Method	Stratified log-rank test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.55
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.26
upper limit	1.18

Notes:

[3] - This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoint of EFS. The analyses of this secondary endpoint are descriptive in nature.

Secondary: Event-Free Survival (EFS) in All Participants

End point title	Event-Free Survival (EFS) in All Participants
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End point description:

Event-free survival (EFS) defined as the time from randomization to the first documented occurrence of disease recurrence, disease progression, or death from any cause in all participants. Recurrent disease includes local, regional, or distant recurrence and contralateral breast cancer. Ipsilateral or contralateral in situ disease and second primary non-breast cancers (including in situ carcinomas and non-melanoma skin cancers) will not be counted as progressive disease or recurrent disease. Note: 999999=not estimable.

End point type	Secondary
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End point timeframe:

From randomization and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	168	165		
Units: Months				
median (confidence interval 95%)	999999 (999999 to 999999)	999999 (999999 to 999999)		

Statistical analyses

Statistical analysis title	EFS All Participants Statistical Analysis
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Statistical analysis description:

Stratified analysis. Strata are: Tumor PD-L1 status (IC0 vs IC1/2/3) and AJCC stage at diagnosis (II vs. III).

Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
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Number of subjects included in analysis	333
Analysis specification	Pre-specified
Analysis type	other ^[4]
Method	Stratified log-rank test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.76
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.47
upper limit	1.21

Notes:

[4] - This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoint of EFS. The analyses of this secondary endpoint are descriptive in nature.

Secondary: Disease-Free Survival (DFS) in All Participants Who Undergo Surgery

End point title	Disease-Free Survival (DFS) in All Participants Who Undergo Surgery
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End point description:

Disease-free survival (DFS) defined as the time from surgery to the first documented disease recurrence or death from any cause, whichever occurs first. DFS is analyzed with the use of the same methodology as specified for EFS for all participants. Note: 999999=not estimable.

End point type	Secondary
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End point timeframe:

From surgery and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	153	155		
Units: Months				
median (confidence interval 95%)	999999 (999999 to 999999)	999999 (999999 to 999999)		

Statistical analyses

Statistical analysis title	DFS ITT Statistical Analysis
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Statistical analysis description:

Stratified analysis. Strata are: Tumor PD-L1 status (IC0 vs IC1/2/3) and AJCC stage at diagnosis (II vs. III).

Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
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Number of subjects included in analysis	308
Analysis specification	Pre-specified
Analysis type	other ^[5]
Method	Stratified log-rank test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.76
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.44
upper limit	1.3

Notes:

[5] - This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoint of DFS. The analyses of this secondary endpoint are descriptive in nature.

Secondary: Disease-Free Survival (DFS) in Subpopulation of Participants with PD-L1-Positive Tumor Status Who Undergo Surgery

End point title	Disease-Free Survival (DFS) in Subpopulation of Participants with PD-L1-Positive Tumor Status Who Undergo Surgery
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End point description:

Disease-free survival (DFS) defined as the time from surgery to the first documented disease recurrence or death from any cause, whichever occurs first. DFS is analyzed with the use of the same methodology as specified for EFS for the subpopulation of participants with PD-L1-positive tumor status. Note: 999999=not estimable.

End point type	Secondary
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End point timeframe:

From surgery and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	67	73		
Units: Months				
median (confidence interval 95%)	999999 (999999 to 999999)	999999 (999999 to 999999)		

Statistical analyses

Statistical analysis title	DFS PD-L1-Positive Tumor Status
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Statistical analysis description:

Stratified analysis. Strata are: AJCC stage at diagnosis (II vs. III).

Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
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Number of subjects included in analysis	140
Analysis specification	Pre-specified
Analysis type	other ^[6]
Method	Stratified log-rank test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.57
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.23
upper limit	1.43

Notes:

[6] - This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoint of DFS. The analyses of this secondary endpoint are descriptive in nature.

Secondary: Overall survival (OS) in All Participants

End point title	Overall survival (OS) in All Participants
End point description:	
Overall survival (OS) defined as the time from randomization to the date of death from any cause in all participants. Note: 999999=not estimable.	
End point type	Secondary
End point timeframe:	
From randomization and up to study final analysis data cut off on 28 September 2022.	

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	168	165		
Units: Months				
median (confidence interval 95%)	999999 (999999 to 999999)	999999 (999999 to 999999)		

Statistical analyses

Statistical analysis title	OS All Participants Statistical Analysis
Statistical analysis description:	
Stratified analysis. Strata are: Tumor PD-L1 status (IC0 vs IC1/2/3) and AJCC stage at diagnosis (II vs. III).	
Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
Number of subjects included in analysis	333
Analysis specification	Pre-specified
Analysis type	other ^[7]
Method	Stratified log-rank test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.56

Confidence interval	
level	95 %
sides	2-sided
lower limit	0.3
upper limit	1.04

Notes:

[7] - This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoint of OS. The analyses of this secondary endpoint are descriptive in nature.

Secondary: Overall survival (OS) in Subpopulation with PD-L1-Positive Tumor Status

End point title	Overall survival (OS) in Subpopulation with PD-L1-Positive Tumor Status
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End point description:

Overall survival (OS) defined as the time from randomization to the date of death from any cause in the subpopulation with PD-L1-positive tumor status. Note: 999999=not estimable.

End point type	Secondary
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End point timeframe:

From randomization and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	75	77		
Units: Months				
median (confidence interval 95%)	999999 (999999 to 999999)	999999 (999999 to 999999)		

Statistical analyses

Statistical analysis title	OS Subpopulation with PD-L1-Positive Tumor Status
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Statistical analysis description:

Stratified analysis. Strata are: AJCC stage at diagnosis (II vs. III).

Comparison groups	Placebo and Chemotherapy v Atezolizumab and Chemotherapy
Number of subjects included in analysis	152
Analysis specification	Pre-specified
Analysis type	other ^[8]
Method	Stratified log-rank test
Parameter estimate	Hazard ratio (HR)
Point estimate	0.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.26
upper limit	1.91

Notes:

[8] - This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoint of OS. The analyses of this secondary endpoint are descriptive in nature.

Secondary: Mean Scores for Function (Role/Physical) and GHS/HRQoL by Cycle and Between Treatment Arms as Assessed by the EORTC QLQ-C30

End point title	Mean Scores for Function (Role/Physical) and GHS/HRQoL by Cycle and Between Treatment Arms as Assessed by the EORTC QLQ-C30
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End point description:

Mean score in function (role, physical) and global health status(GHS)/ health-related quality of life (HRQoL) by cycle and between treatment arms as assessed by the functional and HRQoL scales of the European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Questionnaire Core30(QLQ C30). The score range for each scale and single-item measure is 0 to 100, where higher scores indicate a higher response level (i.e., better functioning, better QoL). Analysis population included all randomized participants with non-missing baseline assessment and at least one non-missing post-baseline assessment. Note: SDC=Study Drug Completion, ED=Early Discontinuation, SFU=Survival Follow-Up.

End point type	Secondary
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End point timeframe:

From randomization and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	167	161		
Units: Score on a 0-100 scale				
arithmetic mean (confidence interval 95%)				
GHS/QoL Baseline (n=167, 161)	76.45 (73.47 to 79.42)	79.24 (76.34 to 82.14)		
GHS/QoL Cycle 2 Day 1 (n=164, 157)	71.90 (69.04 to 74.76)	71.55 (68.53 to 74.57)		
GHS/QoL Cycle 3 Day 1 (n=152, 143)	65.30 (62.25 to 68.34)	62.65 (58.94 to 66.36)		
GHS/QoL Cycle 4 Day 1 (n=153, 149)	62.36 (59.15 to 65.58)	59.84 (56.62 to 63.07)		
GHS/QoL Cycle 5 Day 1 (n=147, 139)	60.37 (56.87 to 63.87)	53.60 (49.71 to 57.48)		
GHS/QoL Cycle 6 Day 1 (n=134, 132)	74.25 (70.86 to 77.65)	70.14 (66.97 to 73.31)		
GHS/QoL Cycle 7 Day 1 (n=122, 128)	76.50 (73.39 to 79.62)	73.57 (70.92 to 76.22)		
GHS/QoL Cycle 8 Day 1 (n=119, 122)	77.17 (74.35 to 79.99)	72.06 (69.01 to 75.11)		
GHS/QoL Cycle 9 Day 1 (n=121, 121)	75.62 (72.54 to 78.69)	72.18 (69.18 to 75.17)		
GHS/QoL Cycle 10 Day 1 (n=114, 122)	75.22 (72.22 to 78.22)	70.56 (67.09 to 74.03)		
GHS/QoL Cycle 11 Day 1 (n=119, 122)	75.98 (73.17 to 78.79)	71.93 (68.53 to 75.32)		
GHS/QoL Cycle 12 Day 1 (n=119, 122)	75.84 (72.93 to 78.75)	72.40 (69.27 to 75.54)		
GHS/QoL Cycle 13 Day 1 (n=119, 121)	74.72 (71.35 to 78.08)	72.87 (69.67 to 76.06)		

GHS/QoL Cycle 14 Day 1 (n=119, 116)	74.79 (71.61 to 77.97)	71.19 (67.65 to 74.43)		
GHS/QoL Cycle 15 Day 1 (n=112, 116)	75.00 (71.85 to 78.15)	74.07 (71.08 to 77.06)		
GHS/QoL Cycle 16 Day 1 (n=111, 114)	77.70 (74.70 to 80.71)	74.93 (71.69 to 78.16)		
GHS/QoL SDC/ED (n=130, 137)	75.38 (72.18 to 78.59)	72.51 (68.96 to 76.05)		
GHS/QoL SFU Month 3 (n=131, 142)	76.97 (73.87 to 80.07)	72.65 (69.33 to 75.98)		
GHS/QoL SFU Month 6 (n=125, 136)	74.93 (71.28 to 78.59)	75.61 (72.09 to 79.14)		
GHS/QoL SFU Month 9 (n=116, 132)	75.00 (71.32 to 76.68)	75.19 (71.78 to 78.60)		
GHS/QoL SFU Month 12 (n=111, 126)	75.15 (71.66 to 78.64)	74.87 (71.13 to 78.60)		
GHS/QoL SFU Month 18 (n=102, 112)	76.39 (72.29 to 80.48)	75.60 (72.01 to 79.18)		
GHS/QoL SFU Month 24 (n=83, 108)	78.31 (74.89 to 81.73)	74.46 (70.55 to 78.37)		
GHS/QoL SFU Month 30 (n=65, 72)	78.33 (74.08 to 82.59)	73.50 (68.56 to 78.43)		
GHS/QoL SFU Month 36 (n=62, 69)	78.63 (74.53 to 82.73)	76.93 (71.85 to 82.01)		
GHS/QoL SFU Month 48 (n=2, 7)	58.33 (-259.32 to 375.99)	63.10 (47.77 to 78.42)		
Physical Functioning Baseline (n=166, 161)	90.03 (87.82 to 92.24)	90.85 (88.53 to 93.17)		
Physical Functioning Cycle 2 Day 1 (n=164, 157)	83.50 (80.79 to 86.21)	84.93 (82.55 to 87.31)		
Physical Functioning Cycle 3 Day 1 (n=152, 142)	78.33 (75.19 to 81.48)	77.29 (74.04 to 80.54)		
Physical Functioning Cycle 4 Day 1 (n=152, 149)	70.42 (67.06 to 73.77)	69.02 (65.52 to 72.51)		
Physical Functioning Cycle 5 Day 1 (n=146, 139)	67.91 (64.18 to 71.65)	64.27 (60.40 to 68.13)		
Physical Functioning Cycle 6 Day 1 (n=134, 132)	79.49 (76.38 to 82.60)	78.10 (74.10 to 81.20)		
Physical Functioning Cycle 7 Day 1 (n=122, 128)	82.73 (79.76 to 85.71)	80.78 (77.96 to 83.60)		
Physical Functioning Cycle 8 Day 1 (n=119, 122)	85.15 (82.75 to 87.56)	81.75 (78.59 to 84.90)		
Physical Functioning Cycle 9 Day 1 (n=121, 122)	84.19 (81.57 to 86.81)	83.99 (81.36 to 86.62)		
Physical Functioning Cycle 10 Day 1 (n=114, 122)	84.78 (82.16 to 87.40)	83.88 (81.21 to 86.55)		
Physical Functioning Cycle 11 Day 1 (n=119, 121)	85.48 (83.18 to 87.77)	84.24 (81.33 to 87.15)		
Physical Functioning Cycle 12 Day 1 (n=119, 122)	86.97 (84.66 to 89.29)	83.44 (80.55 to 86.34)		
Physical Functioning Cycle 13 Day 1 (n=119, 121)	86.16 (83.40 to 88.93)	83.36 (80.27 to 86.45)		
Physical Functioning Cycle 14 Day 1 (n=119, 117)	86.22 (83.56 to 88.88)	84.96 (82.18 to 87.73)		
Physical Functioning Cycle 15 Day 1 (n=112, 116)	84.69 (81.67 to 87.71)	84.28 (81.23 to 87.34)		
Physical Functioning Cycle 16 Day 1 (n=111, 114)	87.19 (84.34 to 90.04)	84.33 (81.37 to 87.29)		
Physical Functioning SDC/ED (n=130, 137)	84.21 (81.31 to 87.10)	82.34 (79.24 to 85.43)		
Physical Functioning SFU Month 3 (n=131, 142)	85.29 (82.65 to 87.93)	82.35 (79.29 to 85.41)		

Physical Functioning SFU Month 6 (n=125,136)	84.96 (82.15 to 87.77)	84.17 (81.11 to 87.22)		
Physical Functioning SFU Month 9 (n=116, 132)	85.11 (82.46 to 87.77)	83.48 (80.01 to 86.96)		
Physical Functioning SFU Month 12 (n=111, 126)	85.05 (81.79 to 88.30)	83.17 (79.67 to 86.68)		
Physical Functioning SFU Month 18 (n=102, 112)	85.23 (81.63 to 88.82)	84.29 (80.85 to 87.72)		
Physical Functioning SFU Month 24 (n=82, 108)	85.69 (82.05 to 89.33)	85.43 (81.67 to 89.20)		
Physical Functioning SFU Month 30 (n=65, 72)	87.08 (83.41 to 90.75)	84.54 (80.35 to 88.73)		
Physical Functioning SFU Month 36 (n=62, 69)	86.24 (81.63 to 90.84)	85.80 (81.87 to 89.73)		
Physical Functioning SFU Month 48 (n=2, 7)	90.00 (-37.06 to 217.06)	88.57 (75.88 to 101.26)		
Role Functioning Baseline (n=166, 161)	88.86 (85.67 to 92.04)	89.44 (86.10 to 92.78)		
Role Functioning Cycle 2 Day 1 (n=164, 157)	80.39 (76.77 to 84.00)	77.18 (73.47 to 80.88)		
Role Functioning Cycle 3 Day 1 (n=152, 142)	70.39 (65.96 to 74.83)	69.48 (65.29 to 73.67)		
Role Functioning Cycle 4 Day 1 (n=153, 149)	61.11 (56.70 to 65.53)	56.60 (51.56 to 61.64)		
Role Functioning Cycle 5 Day 1 (n=146, 139)	56.05 (51.06 to 61.04)	51.08 (46.15 to 56.00)		
Role Functioning Cycle 6 Day 1 (n=134, 132)	66.17 (61.45 to 70.89)	62.88 (57.70 to 68.06)		
Role Functioning Cycle 7 Day 1 (n=122, 128)	73.77 (69.21 to 78.33)	69.92 (65.46 to 74.39)		
Role Functioning Cycle 8 Day 1 (n=119, 122)	77.59 (73.57 to 81.62)	72.95 (68.13 to 77.77)		
Role Functioning Cycle 9 Day 1 (n=121, 122)	77.13 (72.98 to 81.29)	74.32 (70.21 to 78.42)		
Role Functioning Cycle 10 Day 1 (n=114, 122)	78.51 (74.50 to 82.51)	75.27 (70.94 to 79.61)		
Role Functioning Cycle 11 Day 1 (n=119, 122)	79.97 (76.41 to 83.53)	75.68 (71.44 to 79.93)		
Role Functioning Cycle 12 Day 1 (n=119, 122)	81.79 (78.04 to 85.55)	75.14 (70.52 to 79.75)		
Role Functioning Cycle 13 Day 1 (n=119, 121)	81.79 (78.16 to 85.42)	74.38 (69.60 to 79.16)		
Role Functioning Cycle 14 Day 1 (n=119, 117)	80.81 (76.61 to 85.01)	75.50 (70.60 to 80.40)		
Role Functioning Cycle 15 Day 1 (n=112, 116)	79.02 (75.14 to 82.90)	77.59 (73.05 to 82.13)		
Role Functioning Cycle 16 Day 1 (n=111, 114)	83.03 (78.87 to 87.20)	78.65 (74.05 to 83.26)		
Role Functioning SDC/ED (n=130, 137)	80.00 (76.07 to 83.93)	74.09 (69.37 to 78.81)		
Role Functioning SFU Month 3 (n=131, 142)	81.93 (78.24 to 85.63)	75.47 (70.97 to 79.97)		
Role Functioning SFU Month 6 (n=126, 136)	78.53 (74.01 to 83.06)	76.10 (71.38 to 80.83)		
Role Functioning SFU Month 9 (n=116, 132)	81.61 (77.90 to 85.32)	76.39 (71.36 to 81.42)		
Role Functioning SFU Month 12 (n=111, 126)	81.68 (77.46 to 85.91)	76.98 (71.47 to 82.50)		
Role Functioning SFU Month 18 (n=102, 112)	81.86 (76.88 to 86.85)	77.98 (72.77 to 83.18)		
Role Functioning SFU Month 24 (n=82, 108)	79.47 (73.62 to 85.32)	80.09 (75.03 to 85.15)		

Role Functioning SFU Month 30 (n=65, 72)	81.54 (75.51 to 87.56)	78.24 (71.20 to 85.28)		
Role Functioning SFU Month 36 (n=62, 69)	85.48 (79.88 to 91.09)	81.64 (75.23 to 88.05)		
Role Functioning SFU Month 48 (n=2, 7)	83.33 (-128.44 to 295.10)	76.19 (-228.44 to 195.10)		

Statistical analyses

No statistical analyses for this end point

Secondary: Mean Change From Baseline Scores for Function (Role, Physical) and GHS/HRQoL by Cycle and Between Treatment Arms as Assessed by the EORTC QLQ-C30

End point title	Mean Change From Baseline Scores for Function (Role, Physical) and GHS/HRQoL by Cycle and Between Treatment Arms as Assessed by the EORTC QLQ-C30
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End point description:

Mean change from baseline score in function (role, physical) and global health status(GHS)/ health-related quality of life (HRQoL) by cycle and between treatment arms as assessed by the functional and HRQoL scales of the European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Questionnaire Core30(QLQ C30). Analysis Population included all randomized participants with non-missing baseline assessment and at least one non-missing post-baseline assessment. Note: SDC=Study Drug Completion, ED=Early Discontinuation, SFU=Survival Follow-Up.

End point type	Secondary
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End point timeframe:

From randomization and up to study final analysis data cut off on 28 September 2022.

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	167	161		
Units: Score on a 0-100 scale				
arithmetic mean (confidence interval 95%)				
GHS/QoL Cycle 2 Day 1 (n=164, 157)	-4.62 (-7.89 to -1.36)	-7.91 (-11.09 to -4.72)		
GHS/QoL Cycle 3 Day 1 (n=152, 143)	-12.72 (-16.34 to -9.10)	-17.07 (-21.15 to -13.00)		
GHS/QoL Cycle 4 Day 1 (n=153, 149)	-14.49 (-18.35 to -10.62)	-19.80 (-23.50 to -16.09)		
GHS/QoL Cycle Cycle 5 Day 1 (n=147, 139)	-17.06 (-21.18 to -12.94)	-26.02 (-30.34 to -21.70)		
GHS/QoL Cycle 6 Day 1 (n=134, 132)	-2.49 (-6.70 to 1.72)	-8.78 (-12.71 to -4.84)		
GHS/QoL Cycle 7 Day 1 (n=122, 128)	-0.61 (-4.64 to 3.41)	-5.40 (-9.15 to -1.66)		
GHS/QoL Cycle 8 Day 1 (n=119, 122)	0.77 (-3.30 to 4.84)	-6.69 (-10.49 to -2.90)		
GHS/QoL Cycle 9 Day 1 (n=121,121)	-0.28 (-4.10 to 3.55)	-6.13 (-9.94 to -2.32)		
GHS/QoL Cycle 10 Day 1 (n=114,122)	-1.17 (-5.02 to 2.68)	-8.40 (-12.50 to -4.30)		

GHS/QoL Cycle 11 Day 1 (n=119,122)	0.35 (-3.42 to 4.13)	-7.04 (-11.11 to -2.96)		
GHS/QoL Cycle 12 Day 1 (n=119,122)	-0.63 (-4.64 to 3.38)	-6.56 (-10.48 to -2.64)		
GHS/QoL Cycle 13 Day 1 (n=119,121)	-1.26 (-5.19 to 2.67)	-5.85 (-9.83 to -1.88)		
GHS/QoL Cycle 14 Day 1 (n=119,116)	-1.05 (-4.95 to 2.85)	-7.47 (-11.44 to -3.50)		
GHS/QoL Cycle 15 Day 1 (n=112,116)	0.00 (-4.21 to 4.21)	-4.67 (-8.71 to -0.63)		
GHS/QoL Cycle 16 Day 1 (n=111,114)	2.10 (-1.66 to 5.86)	-3.73 (-7.93 to 0.48)		
GHS/QoL SDC/ED (n=130,137)	0.06 (-3.99 to 4.12)	-6.20 (-10.47 to -1.94)		
GHS/QoL SFU Month 3 (n=131,142)	0.64 (-3.54 to 4.81)	-6.57 (-10.28 to -2.87)		
GHS/QoL SFU Month 6 (n=125,136)	-2.00 (-6.16 to 2.16)	-3.37 (-7.24 to 0.50)		
GHS/QoL SFU Month 9 (n=116,132)	0.93 (-5.26 to 3.39)	-4.42 (-8.07 to -0.77)		
GHS/QoL SFU Month 12 (n=111,126)	-1.65 (-5.91 to 2.61)	-4.50 (-8.67 to -0.32)		
GHS/QoL SFU Month 18 (n=102,112)	-0.98 (-6.10 to 4.14)	-4.17 (-8.67 to 0.34)		
GHS/QoL SFU Month 24 (n=83, 108)	1.31 (-3.50 to 6.12)	-6.17 (-10.96 to -1.39)		
GHS/QoL SFU Month 30 (n=65, 72)	-2.18 (-8.05 to 3.69)	-9.14 (-14.26 to -4.03)		
GHS/QoL SFU Month 36 (n=62,69)	-1.08 (-6.42 to 4.27)	-5.56 (-11.22 to 0.11)		
GHS/QoL SFU Month 48 (n=2,7)	-25.00 (-342.66 to 292.66)	-21.43 (-37.99 to -4.86)		
Physical Functioning Cycle 2 Day 1 (n=163, 157)	-6.37 (-8.58 to -4.16)	-5.73 (-8.18 to -3.29)		
Physical Functioning Cycle 3 Day 1 (n=151, 142)	-12.17 (-15.43 to -8.92)	-12.90 (-16.62 to -9.17)		
Physical Functioning Cycle 4 Day 1 (n=151, 149)	-19.48 (-22.51 to -16.45)	-21.68 (-25.66 to -17.70)		
Physical Functioning Cycle 5 Day 1 (n=145, 139)	-21.59 (-25.17 to -18.01)	-26.43 (-30.61 to -22.25)		
Physical Functioning Cycle 6 Day 1 (n=134, 132)	-10.20 (-13.46 to -6.94)	-12.20 (-15.39 to -9.00)		
Physical Functioning Cycle 7 Day 1 (n=122,128)	-7.43 (-10.48 to -4.38)	-8.96 (-12.22 to -5.69)		
Physical Functioning Cycle 8 Day 1 (n=119,122)	-4.80 (-7.52 to -2.09)	-7.70 (-11.21 to -4.19)		
Physical Functioning Cycle 9 Day 1 (n=121,122)	-5.40 (-8.20 to -2.60)	-5.74 (-9.04 to -2.44)		
Physical Functioning Cycle 10 Day 1 (n=114,122)	-4.87 (-7.82 to -1.92)	-6.17 (-9.25 to -3.10)		
Physical Functioning Cycle 11 Day 1 (n=119,121)	-3.99 (-6.77 to -1.21)	-5.73 (-9.09 to -2.37)		
Physical Functioning Cycle 12 Day 1 (n=119,122)	-2.59 (-5.39 to 0.21)	-6.61 (-9.60 to -3.62)		
Physical Functioning Cycle 13 Day 1 (n=119,121)	-3.63 (-6.77 to -0.48)	-6.72 (-10.01 to -3.43)		
Physical Functioning Cycle 14 Day 1 (n=119,117)	-3.42 (-6.33 to -0.51)	-5.07 (-8.25 to -1.89)		
Physical Functioning Cycle 15 Day 1 (n=112,116)	-4.24 (-7.59 to -0.89)	-5.89 (-9.22 to -2.56)		

Physical Functioning Cycle 16 Day 1 (n=111,114)	-2.42 (-5.70 to 0.86)	-5.79 (-9.05 to -2.53)		
Physical Functioning SDC/ED (n=130,137)	-5.58 (-8.88 to -2.27)	-8.66 (-12.12 to -5.21)		
Physical Functioning SFU Month 3 (n=131,142)	-4.16 (-6.77 to -1.55)	-8.54 (-11.83 to -5.26)		
Physical Functioning SFU Month 6 (n=125,136)	-5.21 (-7.90 to -2.53)	-6.91 (-10.10 to -3.72)		
Physical Functioning SFU Month 9 (n=116,132)	-3.97 (-6.65 to -1.28)	-7.78 (-11.20 to -4.36)		
Physical Functioning SFU Month 12 (n=111,126)	-4.43 (-7.23 to -1.62)	-7.46 (-11.07 to -3.85)		
Physical Functioning SFU Month 18 (n=102,112)	-4.90 (-8.58 to -1.22)	-6.61 (-10.17 to -3.05)		
Physical Functioning SFU Month 24 (n=82,108)	-4.07 (-7.64 to -0.49)	-6.30 (-9.94 to -2.65)		
Physical Functioning SFU Month 30 (n=65,72)	-3.36 (-6.90 to 0.18)	-10.46 (-14.68 to -6.25)		
Physical Functioning SFU Month 36 (n=62,69)	-4.06 (-8.93 to 0.81)	-8.70 (-12.47 to -4.92)		
Physical Functioning SFU Month 48 (n=2,7)	-3.33 (-45.69 to 39.02)	-11.43 (-24.12 to 1.26)		
Role Functioning Cycle 2 Day 1 (n=163, 157)	-8.08 (-12.05 to -4.11)	-12.42 (-16.70 to -8.14)		
Role Functioning Cycle 3 Day 1 (n=151, 142)	-19.54 (-24.57 to -14.50)	-19.84 (-24.92 to -14.76)		
Role Functioning Cycle 4 Day 1 (n=152, 149)	-28.29 (-33.49 to -23.09)	-33.56 (-39.19 to -27.93)		
Role Functioning Cycle 5 Day 1 (n=145, 139)	-32.99 (-38.45 to -27.53)	-38.97 (-44.44 to -33.50)		
Role Functioning Cycle 6 Day 1 (n=134, 132)	-22.39 (-27.55 to -17.23)	-26.14 (-31.45 to -20.83)		
Role Functioning Cycle 7 Day 1 (n=122,128)	-14.21 (-19.06 to -9.35)	-18.36 (-23.36 to -13.36)		
Role Functioning Cycle 8 Day 1 (n=119,122)	-10.50 (-15.16 to -5.85)	-14.89 (-20.37 to -9.41)		
Role Functioning Cycle 9 Day 1 (n=121,122)	-10.74 (-15.21 to -6.28)	-13.80 (-19.13 to -8.47)		
Role Functioning Cycle 10 Day 1 (n=114,122)	-9.36 (-13.94 to -4.77)	-13.39 (-18.13 to -8.64)		
Role Functioning Cycle 11 Day 1 (n=119,122)	-8.26 (-12.65 to -3.88)	-12.98 (-17.53 to -8.43)		
Role Functioning Cycle 12 Day 1 (n=119,122)	-6.86 (-11.40 to -2.33)	-13.52 (-18.06 to -8.99)		
Role Functioning Cycle 13 Day 1 (n=119,121)	-6.30 (-10.16 to -2.44)	-14.46 (-19.69 to -9.24)		
Role Functioning Cycle 14 Day 1 (n=119,117)	-7.28 (-11.77 to -2.80)	-13.82 (-18.80 to -8.84)		
Role Functioning Cycle 15 Day 1 (n=112,116)	-8.63 (-13.14 to -4.12)	-11.78 (-16.96 to -6.60)		
Role Functioning Cycle 16 Day 1 (n=111,114)	-4.65 (-9.70 to 0.39)	-10.82 (-15.56 to -6.07)		
Role Functioning SDC/ED (n=130,137)	-8.46 (-13.54 to -3.38)	-16.42 (-21.64 to -11.21)		
Role Functioning SFU Month 3 (n=131,142)	-5.98 (-10.57 to -1.39)	-14.44 (-19.35 to -9.53)		
Role Functioning SFU Month 6 (n=125,136)	-10.67 (-15.66 to -5.68)	-13.97 (-18.84 to -9.10)		
Role Functioning SFU Month 9 (n=116,132)	-7.61 (-12.23 to -3.00)	-13.76 (-18.45 to -9.08)		
Role Functioning SFU Month 12 (n=111,126)	-7.66 (-11.90 to -3.41)	-12.83 (-18.13 to -7.53)		

Role Functioning SFU Month 18 (n=102,112)	-7.03 (-12.54 to -1.51)	-12.05 (-17.15 to -6.95)		
Role Functioning SFU Month 24 (n=82,108)	-9.96 (-15.85 to -4.07)	-10.96 (-16.19 to -5.72)		
Role Functioning SFU Month 30 (n=52,72)	-8.72 (-15.45 to -1.98)	-16.44 (-23.12 to -9.75)		
Role Functioning SFU Month 36 (n=62,69)	-5.65 (-12.45 to 1.16)	-12.56 (-18.94 to -6.18)		
Role Functioning SFU Month 48 (n=2,7)	-16.67 (-228.44 to 195.10)	-21.43 (-47.70 to 4.84)		

Statistical analyses

No statistical analyses for this end point

Secondary: Minimum Observed Serum Atezolizumab Concentration (Cmin)

End point title	Minimum Observed Serum Atezolizumab Concentration
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End point description:

Minimum observed serum atezolizumab concentration.

End point type	Secondary
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End point timeframe:

Pre-dose on Day 1 of Cycles 2, 3, 4, 6, 8, 12, and 16 (cycle length = 28 days from Cycles 1 to 5, and 21 days from Cycles 6 to 16)

Notes:

[9] - 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: No statistical analysis for this end point.

End point values	Atezolizumab and Chemotherapy			
Subject group type	Reporting group			
Number of subjects analysed	164			
Units: µg/mL				
arithmetic mean (standard deviation)				
Cycle 2 Day 1	142 (± 54.3)			
Cycle 3 Day 1	189 (± 64.2)			
Cycle 4 Day 1	207 (± 77.3)			
Cycle 6 Day 1	78.7 (± 50.3)			
Cycle 8 Day 1	204 (± 62.7)			
Cycle 12 Day 1	267 (± 81.1)			
Cycle 16 Day 1	303 (± 89.1)			

Statistical analyses

No statistical analyses for this end point

Secondary: Maximum Observed Serum Atezolizumab Concentration (Cmax)

End point title	Maximum Observed Serum Atezolizumab Concentration
End point description: Maximum observed atezolizumab concentration (Cmax).	
End point type	Secondary
End point timeframe: Day 1 of Cycle 1 post dose (cycle length = 28 days)	
Notes: [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: No statistical analysis for this end point.	

End point values	Atezolizumab and Chemotherapy			
Subject group type	Reporting group			
Number of subjects analysed	164			
Units: µg/mL				
arithmetic mean (standard deviation)	334 (± 63.3)			

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants with Anti-Drug Antibodies (ADAs) to Atezolizumab

End point title	Percentage of Participants with Anti-Drug Antibodies (ADAs) to Atezolizumab ^[11]
End point description: Percentage of participants with anti-drug antibodies (ADAs) to atezolizumab.	
End point type	Secondary
End point timeframe: Baseline up to approximately 20 months	
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: No statistical analysis for this end point.	

End point values	Atezolizumab and Chemotherapy			
Subject group type	Reporting group			
Number of subjects analysed	162			
Units: Percentage of participants				
number (not applicable)				
Baseline evaluable participants	2.5			
Post-baseline evaluable participants	13.4			

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With at Least One Adverse Events (AEs)

End point title	Percentage of Participants With at Least One Adverse Events (AEs)
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End point description:

Percentage of participants with at least one adverse event.

End point type	Secondary
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End point timeframe:

Baseline up to approximately 62 months

End point values	Placebo and Chemotherapy	Atezolizumab and Chemotherapy		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	167	164		
Units: Percentage of participants	100	100		

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From the first study drug and up to study final analysis data cut off on 28 September 2022.

Adverse event reporting additional description:

Safety evaluable population is defined as all participants who received at least one dose of study medication.

Assessment type	Systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	25.1
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Reporting groups

Reporting group title	Atezolizumab + Nab-paclitaxel + AC
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Reporting group description:

Participants received atezolizumab (840 milligrams [mg]) via intravenous (IV) infusion every 2 weeks in combination with nab-paclitaxel (125 milligrams per square meter [mg/m²]) via IV infusion every week for 12 weeks, followed by atezolizumab (840 mg) every 2 weeks in combination with doxorubicin (60 mg/m²) and cyclophosphamide (600 mg/m²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants continued to receive unblinded atezolizumab post-surgery at a fixed dose of 1200 mg by IV infusion every 3 weeks for 11 doses, for a total of approximately 12 months of atezolizumab therapy.

Reporting group title	Placebo + Nab-paclitaxel + AC
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Reporting group description:

Participants received placebo matched to atezolizumab via IV infusion every 2 weeks in combination with nab-paclitaxel (125 mg/m²) via IV infusion every week for 12 weeks, followed by placebo matched to atezolizumab every 2 weeks in combination with doxorubicin (60 mg/m²) and cyclophosphamide (600 mg/m²) every 2 weeks via IV infusions with filgrastim/pegfilgrastim support for 4 doses. Participants will continue to be followed after surgery.

Serious adverse events	Atezolizumab + Nab-paclitaxel + AC	Placebo + Nab-paclitaxel + AC	
Total subjects affected by serious adverse events			
subjects affected / exposed	59 / 164 (35.98%)	36 / 167 (21.56%)	
number of deaths (all causes)	16	28	
number of deaths resulting from adverse events	0	1	
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Tumour haemorrhage			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vascular disorders			
Embolism			

subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Thrombosis			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
General disorders and administration site conditions			
Pyrexia			
subjects affected / exposed	4 / 164 (2.44%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 4	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Malaise			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Impaired healing			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
General physical health deterioration			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Asthenia			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Immune system disorders			
Drug hypersensitivity			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Respiratory, thoracic and mediastinal disorders			
Interstitial lung disease			
subjects affected / exposed	1 / 164 (0.61%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Haemoptysis			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dyspnoea			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	1 / 1	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory failure			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pulmonary embolism			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumothorax			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonitis			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	1 / 1	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Aspartate aminotransferase increased			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutrophil count decreased			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	0 / 1	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Platelet count decreased			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Injury, poisoning and procedural complications			
Fracture			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infusion related reaction			
subjects affected / exposed	1 / 164 (0.61%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	1 / 1	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonitis chemical			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	1 / 1	
Post procedural haematoma			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Road traffic accident			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 1	0 / 0	

Wound dehiscence			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Cardiac disorders			
Cardiac failure			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nervous system disorders			
Syncope			
subjects affected / exposed	3 / 164 (1.83%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	2 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Polyneuropathy			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Peripheral sensory neuropathy			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	1 / 1	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Peripheral motor neuropathy			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Guillain-Barre syndrome			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Blood and lymphatic system disorders			
Anaemia			

subjects affected / exposed	1 / 164 (0.61%)	3 / 167 (1.80%)	
occurrences causally related to treatment / all	1 / 1	3 / 3	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenia			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	1 / 1	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Febrile neutropenia			
subjects affected / exposed	16 / 164 (9.76%)	13 / 167 (7.78%)	
occurrences causally related to treatment / all	16 / 18	14 / 14	
deaths causally related to treatment / all	0 / 0	0 / 0	
Gastrointestinal disorders			
Obstructive pancreatitis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nausea			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	1 / 1	2 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Intestinal obstruction			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diarrhoea			
subjects affected / exposed	2 / 164 (1.22%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Colitis			
subjects affected / exposed	2 / 164 (1.22%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 2	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Abdominal distension			

subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Small intestinal obstruction			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Abdominal pain			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vomiting			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Stomatitis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hepatobiliary disorders			
Hepatic function abnormal			
subjects affected / exposed	3 / 164 (1.83%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	3 / 3	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin and subcutaneous tissue disorders			
Dermatomyositis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dermatitis			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Renal and urinary disorders			

Renal infarct			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Endocrine disorders			
Hypopituitarism			
subjects affected / exposed	1 / 164 (0.61%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	1 / 1	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations			
Cellulitis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Candida infection			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Bacillus bacteraemia			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Abdominal infection			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diverticulitis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Encephalitis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Gastroenteritis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infection			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Influenza			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Mastitis			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Neutropenic sepsis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Periorbital cellulitis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumocystis jirovecii pneumonia			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Pneumonia			
subjects affected / exposed	6 / 164 (3.66%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	4 / 6	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 1	
Pyelonephritis acute			

subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Respiratory tract infection			
subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Sepsis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Staphylococcal bacteraemia			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Upper respiratory tract infection			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urinary tract infection			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	2 / 4	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Urosepsis			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vascular device infection			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Metabolism and nutrition disorders			
Vitamin D deficiency			

subjects affected / exposed	0 / 164 (0.00%)	1 / 167 (0.60%)	
occurrences causally related to treatment / all	0 / 0	1 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Hyponatraemia			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Diabetes mellitus			
subjects affected / exposed	1 / 164 (0.61%)	0 / 167 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Dehydration			
subjects affected / exposed	1 / 164 (0.61%)	2 / 167 (1.20%)	
occurrences causally related to treatment / all	1 / 1	1 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	

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

Non-serious adverse events	Atezolizumab + Nab-paclitaxel + AC	Placebo + Nab-paclitaxel + AC	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	162 / 164 (98.78%)	167 / 167 (100.00%)	
Vascular disorders			
Hypertension			
subjects affected / exposed	15 / 164 (9.15%)	17 / 167 (10.18%)	
occurrences (all)	27	29	
Hot flush			
subjects affected / exposed	28 / 164 (17.07%)	17 / 167 (10.18%)	
occurrences (all)	32	20	
General disorders and administration site conditions			
Mucosal inflammation			
subjects affected / exposed	18 / 164 (10.98%)	15 / 167 (8.98%)	
occurrences (all)	24	19	
Asthenia			

subjects affected / exposed	42 / 164 (25.61%)	36 / 167 (21.56%)	
occurrences (all)	66	40	
Fatigue			
subjects affected / exposed	65 / 164 (39.63%)	65 / 167 (38.92%)	
occurrences (all)	94	86	
Malaise			
subjects affected / exposed	15 / 164 (9.15%)	17 / 167 (10.18%)	
occurrences (all)	35	18	
Oedema peripheral			
subjects affected / exposed	24 / 164 (14.63%)	24 / 167 (14.37%)	
occurrences (all)	30	27	
Pain			
subjects affected / exposed	20 / 164 (12.20%)	11 / 167 (6.59%)	
occurrences (all)	22	11	
Pyrexia			
subjects affected / exposed	37 / 164 (22.56%)	21 / 167 (12.57%)	
occurrences (all)	55	25	
Reproductive system and breast disorders			
Breast pain			
subjects affected / exposed	17 / 164 (10.37%)	15 / 167 (8.98%)	
occurrences (all)	19	15	
Respiratory, thoracic and mediastinal disorders			
Cough			
subjects affected / exposed	41 / 164 (25.00%)	32 / 167 (19.16%)	
occurrences (all)	52	39	
Dyspnoea			
subjects affected / exposed	23 / 164 (14.02%)	20 / 167 (11.98%)	
occurrences (all)	25	22	
Epistaxis			
subjects affected / exposed	25 / 164 (15.24%)	24 / 167 (14.37%)	
occurrences (all)	26	26	
Oropharyngeal pain			
subjects affected / exposed	19 / 164 (11.59%)	18 / 167 (10.78%)	
occurrences (all)	20	19	
Rhinorrhoea			

subjects affected / exposed occurrences (all)	10 / 164 (6.10%) 12	0 / 167 (0.00%) 0	
Psychiatric disorders			
Anxiety			
subjects affected / exposed	12 / 164 (7.32%)	11 / 167 (6.59%)	
occurrences (all)	13	11	
Depression			
subjects affected / exposed	11 / 164 (6.71%)	6 / 167 (3.59%)	
occurrences (all)	11	6	
Insomnia			
subjects affected / exposed	49 / 164 (29.88%)	29 / 167 (17.37%)	
occurrences (all)	61	30	
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	39 / 164 (23.78%)	35 / 167 (20.96%)	
occurrences (all)	63	53	
Aspartate aminotransferase increased			
subjects affected / exposed	37 / 164 (22.56%)	28 / 167 (16.77%)	
occurrences (all)	64	44	
Blood alkaline phosphatase increased			
subjects affected / exposed	14 / 164 (8.54%)	4 / 167 (2.40%)	
occurrences (all)	19	4	
Blood lactate dehydrogenase increased			
subjects affected / exposed	10 / 164 (6.10%)	7 / 167 (4.19%)	
occurrences (all)	11	7	
Neutrophil count decreased			
subjects affected / exposed	29 / 164 (17.68%)	30 / 167 (17.96%)	
occurrences (all)	60	67	
Weight decreased			
subjects affected / exposed	15 / 164 (9.15%)	8 / 167 (4.79%)	
occurrences (all)	17	8	
White blood cell count decreased			
subjects affected / exposed	14 / 164 (8.54%)	15 / 167 (8.98%)	
occurrences (all)	33	35	
Injury, poisoning and procedural complications			

Infusion related reaction subjects affected / exposed occurrences (all)	16 / 164 (9.76%) 28	10 / 167 (5.99%) 16	
Procedural pain subjects affected / exposed occurrences (all)	14 / 164 (8.54%) 17	2 / 167 (1.20%) 2	
Radiation skin injury subjects affected / exposed occurrences (all)	32 / 164 (19.51%) 32	0 / 167 (0.00%) 0	
Nervous system disorders			
Dizziness subjects affected / exposed occurrences (all)	20 / 164 (12.20%) 33	15 / 167 (8.98%) 16	
Dysgeusia subjects affected / exposed occurrences (all)	16 / 164 (9.76%) 20	25 / 167 (14.97%) 27	
Headache subjects affected / exposed occurrences (all)	51 / 164 (31.10%) 86	36 / 167 (21.56%) 46	
Neuropathy peripheral subjects affected / exposed occurrences (all)	40 / 164 (24.39%) 48	34 / 167 (20.36%) 42	
Paraesthesia subjects affected / exposed occurrences (all)	12 / 164 (7.32%) 13	19 / 167 (11.38%) 22	
Polyneuropathy subjects affected / exposed occurrences (all)	10 / 164 (6.10%) 10	14 / 167 (8.38%) 15	
Taste disorder subjects affected / exposed occurrences (all)	10 / 164 (6.10%) 11	13 / 167 (7.78%) 13	
Peripheral sensory neuropathy subjects affected / exposed occurrences (all)	58 / 164 (35.37%) 65	42 / 167 (25.15%) 45	
Blood and lymphatic system disorders			

Leukopenia			
subjects affected / exposed	23 / 164 (14.02%)	17 / 167 (10.18%)	
occurrences (all)	46	29	
Anaemia			
subjects affected / exposed	64 / 164 (39.02%)	65 / 167 (38.92%)	
occurrences (all)	89	80	
Thrombocytopenia			
subjects affected / exposed	13 / 164 (7.93%)	5 / 167 (2.99%)	
occurrences (all)	16	6	
Neutropenia			
subjects affected / exposed	65 / 164 (39.63%)	59 / 167 (35.33%)	
occurrences (all)	141	123	
Eye disorders			
Dry eye			
subjects affected / exposed	13 / 164 (7.93%)	6 / 167 (3.59%)	
occurrences (all)	13	6	
Lacrimation increased			
subjects affected / exposed	18 / 164 (10.98%)	18 / 167 (10.78%)	
occurrences (all)	21	18	
Vision blurred			
subjects affected / exposed	16 / 164 (9.76%)	11 / 167 (6.59%)	
occurrences (all)	16	12	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	23 / 164 (14.02%)	16 / 167 (9.58%)	
occurrences (all)	29	21	
Abdominal pain upper			
subjects affected / exposed	21 / 164 (12.80%)	13 / 167 (7.78%)	
occurrences (all)	23	16	
Diarrhoea			
subjects affected / exposed	74 / 164 (45.12%)	74 / 167 (44.31%)	
occurrences (all)	110	117	
Dry mouth			
subjects affected / exposed	10 / 164 (6.10%)	5 / 167 (2.99%)	
occurrences (all)	11	6	
Dyspepsia			

subjects affected / exposed	19 / 164 (11.59%)	21 / 167 (12.57%)	
occurrences (all)	22	23	
Nausea			
subjects affected / exposed	108 / 164 (65.85%)	110 / 167 (65.87%)	
occurrences (all)	218	189	
Stomatitis			
subjects affected / exposed	40 / 164 (24.39%)	29 / 167 (17.37%)	
occurrences (all)	48	32	
Vomiting			
subjects affected / exposed	63 / 164 (38.41%)	51 / 167 (30.54%)	
occurrences (all)	105	70	
Constipation			
subjects affected / exposed	51 / 164 (31.10%)	55 / 167 (32.93%)	
occurrences (all)	74	64	
Skin and subcutaneous tissue disorders			
Alopecia			
subjects affected / exposed	125 / 164 (76.22%)	129 / 167 (77.25%)	
occurrences (all)	127	132	
Dermatitis acneiform			
subjects affected / exposed	6 / 164 (3.66%)	10 / 167 (5.99%)	
occurrences (all)	8	10	
Dry skin			
subjects affected / exposed	18 / 164 (10.98%)	13 / 167 (7.78%)	
occurrences (all)	20	13	
Erythema			
subjects affected / exposed	15 / 164 (9.15%)	5 / 167 (2.99%)	
occurrences (all)	17	5	
Nail discolouration			
subjects affected / exposed	26 / 164 (15.85%)	29 / 167 (17.37%)	
occurrences (all)	28	29	
Nail disorder			
subjects affected / exposed	21 / 164 (12.80%)	10 / 167 (5.99%)	
occurrences (all)	22	10	
Pruritus			
subjects affected / exposed	36 / 164 (21.95%)	25 / 167 (14.97%)	
occurrences (all)	49	31	

Rash			
subjects affected / exposed	52 / 164 (31.71%)	42 / 167 (25.15%)	
occurrences (all)	68	53	
Rash maculo-papular			
subjects affected / exposed	12 / 164 (7.32%)	12 / 167 (7.19%)	
occurrences (all)	12	14	
Endocrine disorders			
Hypothyroidism			
subjects affected / exposed	22 / 164 (13.41%)	0 / 167 (0.00%)	
occurrences (all)	22	0	
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	50 / 164 (30.49%)	42 / 167 (25.15%)	
occurrences (all)	76	61	
Back pain			
subjects affected / exposed	24 / 164 (14.63%)	20 / 167 (11.98%)	
occurrences (all)	27	24	
Bone pain			
subjects affected / exposed	13 / 164 (7.93%)	11 / 167 (6.59%)	
occurrences (all)	14	12	
Myalgia			
subjects affected / exposed	51 / 164 (31.10%)	40 / 167 (23.95%)	
occurrences (all)	86	49	
Pain in extremity			
subjects affected / exposed	27 / 164 (16.46%)	19 / 167 (11.38%)	
occurrences (all)	36	26	
Infections and infestations			
Nasopharyngitis			
subjects affected / exposed	23 / 164 (14.02%)	14 / 167 (8.38%)	
occurrences (all)	29	17	
Paronychia			
subjects affected / exposed	19 / 164 (11.59%)	21 / 167 (12.57%)	
occurrences (all)	20	21	
Upper respiratory tract infection			
subjects affected / exposed	23 / 164 (14.02%)	16 / 167 (9.58%)	
occurrences (all)	30	16	

Urinary tract infection subjects affected / exposed occurrences (all)	18 / 164 (10.98%) 25	11 / 167 (6.59%) 11	
Metabolism and nutrition disorders			
Decreased appetite subjects affected / exposed occurrences (all)	28 / 164 (17.07%) 37	33 / 167 (19.76%) 36	
Hypokalaemia subjects affected / exposed occurrences (all)	12 / 164 (7.32%) 24	7 / 167 (4.19%) 9	

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
04 May 2017	Protocol was amended to add a cardiac safety cohort. A mandatory baseline pulmonary function evaluation conducted via spirometry has been added to the Schedule of Activities. It has been clarified that patients who do not initially meet all eligibility criteria, other than TNBC status, may be rescreened only once. Pregnancy reporting timeline requirement for nab-paclitaxel has been amended to be 1 month after last dose. Event-free survival (EFS) has been clarified, EFS is defined as "the time from randomization to the first documented occurrence of disease recurrence, disease progression, or death from any cause." Language has been updated to indicate that if nab-paclitaxel is discontinued due to any reason, patients can proceed to AC chemotherapy plus atezolizumab/placebo at the discretion of the investigator. If AC chemotherapy is discontinued, the date of surgery can be brought forward and patients can proceed to surgery at the discretion of the investigator.
11 May 2018	Protocol was amended to include addition of history of cerebrovascular accident within 12 months prior to randomization as an exclusion criteria. Ductal carcinoma in situ (DCIS) is no longer an exception to the exclusion criterion of history of other malignancy within 5 years prior to screening as there was already a dedicated section to DCIS. History of a cerebrovascular accident within 12 months prior to randomization has been added as an exclusion criterion. It has been clarified that anticipation of need for a major surgical procedure as an exclusion criterion does not pertain to anticipated breast surgery. The risks associated with atezolizumab have been updated to include hypophysitis and myocarditis as adverse events. The safety profile of and risk management guidelines for nab-paclitaxel has been updated or clarified to include febrile neutropenia, infections, and depression.
10 October 2018	Protocol was amended to add an adaptive two stage design using accumulating data to inform the study. Study duration and recruitment period were updated to reflect potential change in study duration. The primary efficacy objective was modified to include the endpoint of pCR in the subpopulation with the PD-L1-positive tumor status (moved from the secondary efficacy objective). The secondary efficacy endpoints were modified to include disease-free survival. Lists of risks for atezolizumab and guidelines for managing participants who experience atezolizumab-associated adverse events have been revised to include nephritis.
07 June 2019	Protocol was amended to clarify the baseline staging and surgical management of clinically enlarged and/or suspicious internal mammary and infraclavicular and/or supraclavicular lymph nodes. Language has been modified to reflect the fact that systemic immune activation is a potential risk with atezolizumab, regardless of whether atezolizumab is given alone or in combination with other immunomodulating agents. The lists of risks associated with doxorubicin and cyclophosphamide have been updated to align with the latest safety information available on their corresponding SmPCs.

11 February 2020	Protocol was amended to include changing "immune-related" to "immune-mediated" when describing events associated with atezolizumab. Systemic immune activation has been replaced by hemophagocytic lymphohistiocytosis and macrophage activation syndrome in the list of potential risks for atezolizumab and the management guidelines for systemic immune activation have been replaced with management guidelines for hemophagocytic lymphohistiocytosis and macrophage activation syndrome. In addition, systemic immune activation has been removed from the list of adverse events of special interest. To align with the nab-paclitaxel (Abraxane®) prescribing information, the risk of tumor lysis syndrome has been included. The atezolizumab adverse event management guidelines have been revised to add laboratory and cardiac imaging abnormalities as signs or symptoms that are suggestive of myocarditis. The management guidelines for infusion-related reactions associated with atezolizumab have been updated to include guidelines for cytokine-release syndrome (CRS).
08 February 2021	Protocol was amended to include revision to the list of identified risks for atezolizumab to include severe cutaneous adverse reactions. Revision to Appendix 8 included caution should be used when considering atezolizumab in participants who have previously experienced a severe or life-threatening skin adverse reaction while receiving another immunostimulatory anti-cancer agent.

Notes:

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.

This study was not designed nor formally powered to demonstrate statistically significant improvements in the secondary efficacy endpoints of EFS, DFS and OS. The analyses of these secondary endpoints are descriptive in nature.

Notes: