



Clinical trial results:

Effect and safety of semaglutide 2.4 mg once-weekly in subjects with overweight or obesity who have reached target dose during run-in period

Summary

| | |
|--------------------------|----------------|
| EudraCT number | 2017-003473-34 |
| Trial protocol | SE NL PT DK ES |
| Global end of trial date | 20 March 2020 |

Results information

| | |
|--------------------------------|---------------|
| Result version number | v1 (current) |
| This version publication date | 19 March 2021 |
| First version publication date | 19 March 2021 |

Trial information

Trial identification

| | |
|-----------------------|-------------|
| Sponsor protocol code | NN9536-4376 |
|-----------------------|-------------|

Additional study identifiers

| | |
|------------------------------------|-----------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT03548987 |
| WHO universal trial number (UTN) | U1111-1201-0898 |

Notes:

Sponsors

| | |
|------------------------------|---|
| Sponsor organisation name | Novo Nordisk A/S |
| Sponsor organisation address | Novo Allé, Bagsvaerd, Denmark, 2880 |
| Public contact | Clinical Reporting Anchor and Disclosure (1452), Novo Nordisk A/S, +1 866 8677178, clinicaltrials@novonordisk.com |
| Scientific contact | Clinical Reporting Anchor and Disclosure (1452), Novo Nordisk A/S, +1 866 8677178, clinicaltrials@novonordisk.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 | 16 July 2020 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 22 February 2020 |
| Global end of trial reached? | Yes |
| Global end of trial date | 20 March 2020 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

To compare the effect of semaglutide s.c. 2.4 mg once-weekly versus semaglutide placebo as an adjunct to reduced-calorie diet and increased physical activity in subjects with overweight or obesity who have reached target dose of semaglutide during the run-in period, on body weight.

Protection of trial subjects:

The trial was conducted in accordance with the Declaration of Helsinki (2013) ICH Good Clinical Practice (2016) and FDA 21 CFR 312.120.

Background therapy: -

Evidence for comparator:

Not applicable.

| | |
|---|--------------|
| Actual start date of recruitment | 04 June 2018 |
| 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 | Switzerland: 69 |
| Country: Number of subjects enrolled | Denmark: 60 |
| Country: Number of subjects enrolled | Spain: 70 |
| Country: Number of subjects enrolled | Israel: 60 |
| Country: Number of subjects enrolled | Netherlands: 42 |
| Country: Number of subjects enrolled | Portugal: 35 |
| Country: Number of subjects enrolled | Sweden: 49 |
| Country: Number of subjects enrolled | Ukraine: 66 |
| Country: Number of subjects enrolled | United States: 381 |
| Country: Number of subjects enrolled | South Africa: 70 |
| Worldwide total number of subjects | 902 |
| EEA total number of subjects | 256 |

Notes:

Subjects enrolled per age group

| | |
|--|---|
| In utero | 0 |
| Preterm newborn - gestational age < 37 | 0 |

| | |
|--|-----|
| wk | |
| 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) | 844 |
| From 65 to 84 years | 58 |
| 85 years and over | 0 |

Subject disposition

Recruitment

Recruitment details:

The trial was conducted in 73 sites in Denmark (2), Israel (6), Netherlands (3), Portugal (6), South Africa (6), Spain (7), Sweden (4), Switzerland (6), Ukraine (5), and United States (28).

Pre-assignment

Screening details:

Subjects started with Semaglutide 0.25 mg dose from week 0 to 20 (run-in period) and the dose was increased every 4th week until 2.4 mg was reached. The run-in completers were randomised in 2:1 ratio either to receive semaglutide 2.4 mg or placebo till 48 weeks. The treatment is an adjunct to reduced-calorie diet and increased physical activity.

Period 1

| | |
|------------------------------|-----------------------------------|
| Period 1 title | Run-in period (week 0 to week 20) |
| Is this the baseline period? | No |
| Allocation method | Non-randomised - controlled |
| Blinding used | Not blinded |

Blinding implementation details:

The trial products Semaglutide B 1.0 mg/mL and Semaglutide B 3.0 mg/mL were packed open labelled during the run-in period (0-20 weeks)

Arms

| | |
|-----------|-------------|
| Arm title | Semaglutide |
|-----------|-------------|

Arm description:

Subjects were to receive once-weekly subcutaneous (s.c) injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly semaglutide s.c 2.4 mg until week 68.

| | |
|--|--|
| Arm type | Experimental |
| Investigational medicinal product name | Semaglutide |
| Investigational medicinal product code | |
| Other name | Semaglutide B 1.0 mg/mL PDS290, Semaglutide B 3.0 mg/mL PDS290 |
| Pharmaceutical forms | Solution for injection |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg, 2.4 mg

| Number of subjects in period 1 | Semaglutide |
|--------------------------------|-------------|
| Started | 902 |
| Completed | 803 |
| Not completed | 99 |
| Consent withdrawn by subject | 11 |
| Adverse event, non-fatal | 48 |
| Other | 9 |
| Pregnancy | 1 |

| | |
|--|----|
| Run-in failure | 19 |
| Lost to follow-up | 8 |
| Safety concern as judged by investigator | 2 |
| Protocol deviation | 1 |

Period 2

| | |
|------------------------------|---|
| Period 2 title | Maintenance period (week 20 to week 68) |
| Is this the baseline period? | Yes ^[1] |
| Allocation method | Randomised - controlled |
| Blinding used | Double blind |
| Roles blinded | Subject, Investigator |

Blinding implementation details:

Semaglutide ((Semaglutide B 3.0 mg/mL PDS290) and placebo were identical in appearance and were packed and labelled to fulfil the requirements for double-blind procedures. The subjects, investigators and Novo Nordisk remained blinded during the randomised (maintenance) period and follow-up period and until after data base lock (DBL).

Arms

| | |
|------------------------------|--------------------|
| Are arms mutually exclusive? | Yes |
| Arm title | Semaglutide 2.4 mg |

Arm description:

Subjects were to receive once-weekly subcutaneous (s.c) injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly semaglutide s.c 2.4 mg until week 68.

| | |
|--|--------------------------------|
| Arm type | Experimental |
| Investigational medicinal product name | Semaglutide B 3.0 mg/mL PDS290 |
| Investigational medicinal product code | |
| Other name | semaglutide |
| Pharmaceutical forms | Solution for injection |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

2.4 mg/week

| | |
|------------------|---------|
| Arm title | Placebo |
|------------------|---------|

Arm description:

Subjects were to receive once-weekly s.c injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly placebo until week 68.

| | |
|--|------------------------|
| Arm type | Placebo |
| Investigational medicinal product name | Placebo |
| Investigational medicinal product code | |
| Other name | semaglutide placebo |
| Pharmaceutical forms | Solution for injection |
| Routes of administration | Subcutaneous use |

Dosage and administration details:

2.4 mg/week

Notes:

[1] - Period 1 is not the baseline period. It is expected that period 1 will be the baseline period.

Justification: To comply with the aim of the withdrawal trial design, the period 2 (week 20 to week 68) was considered as baseline since the subjects who have reached the target dose of semaglutide during period 1 (week 0 to week 20) were randomised at week 20 to receive either semaglutide or placebo.

| Number of subjects in period 2 ^[2] | Semaglutide 2.4 mg | Placebo |
|---|--------------------|---------|
| | | |
| Started | 535 | 268 |
| Completed | 504 | 237 |
| Not completed | 31 | 31 |
| Consent withdrawn by subject | 1 | 1 |
| Adverse event, non-fatal | 13 | 6 |
| Other | 12 | 23 |
| Pregnancy | 2 | - |
| Lost to follow-up | 2 | 1 |
| Protocol deviation | 1 | - |

Notes:

[2] - The number of subjects reported to be in the baseline period are not the same as the worldwide number enrolled in the trial. It is expected that these numbers will be the same.

Justification: Out 902 subjects who were enrolled worldwide, 99 subjects have not completed the run-in period (0-20 weeks). Thus, 803 subjects who have completed run-in were randomised in baseline period (20-68 weeks).

Baseline characteristics

Reporting groups

| | |
|-----------------------|--------------------|
| Reporting group title | Semaglutide 2.4 mg |
|-----------------------|--------------------|

Reporting group description:

Subjects were to receive once-weekly subcutaneous (s.c) injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly semaglutide s.c 2.4 mg until week 68.

| | |
|-----------------------|---------|
| Reporting group title | Placebo |
|-----------------------|---------|

Reporting group description:

Subjects were to receive once-weekly s.c injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly placebo until week 68.

| Reporting group values | Semaglutide 2.4 mg | Placebo | Total |
|---------------------------------------|--------------------|---------|-------|
| Number of subjects | 535 | 268 | 803 |
| Age Categorical Units: Subjects | | | |
| Adults (18-64 years) | 503 | 252 | 755 |
| From 65-84 years | 32 | 16 | 48 |
| 85 years and over | 0 | 0 | 0 |
| Age Continuous Units: years | | | |
| arithmetic mean | 47 | 46 | |
| standard deviation | ± 12 | ± 12 | - |
| Gender Categorical Units: Subjects | | | |
| Female | 429 | 205 | 634 |
| Male | 106 | 63 | 169 |

End points

End points reporting groups

| | |
|---|--------------------|
| Reporting group title | Semaglutide |
| Reporting group description: Subjects were to receive once-weekly subcutaneous (s.c) injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly semaglutide s.c 2.4 mg until week 68. | |
| Reporting group title | Semaglutide 2.4 mg |
| Reporting group description: Subjects were to receive once-weekly subcutaneous (s.c) injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly semaglutide s.c 2.4 mg until week 68. | |
| Reporting group title | Placebo |
| Reporting group description: Subjects were to receive once-weekly s.c injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20, to receive once weekly placebo until week 68. | |

Primary: Change in body weight (%)

| | |
|---|---------------------------|
| End point title | Change in body weight (%) |
| End point description: Change in body weight from baseline (week 20) to week 68 is presented. The endpoint was evaluated based on the data from both in-trial and on-treatment observation periods. In-trial observation period: the uninterrupted time interval from start of run-in (week 0) to last trial-related subject-site contact (week 75). On-treatment observation period: includes all time intervals in which subjects are considered to be on treatment from the first (week 0) to last trial product administration (week 68) including 2 weeks of follow-up. It excludes any period of temporary treatment interruption. Temporary treatment interruption is defined as more than 2 consecutive missed doses (off-treatment period). | |
| End point type | Primary |
| End point timeframe: From randomisation (week 20) to week 68 | |

| End point values | Semaglutide 2.4 mg | Placebo | | |
|--------------------------------------|--------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 520 | 250 | | |
| Units: Percentage point | | | | |
| arithmetic mean (standard deviation) | | | | |
| In-trial observation period | -8.3 (± 8.1) | 6.5 (± 7.7) | | |
| On-treatment observation period | -8.8 (± 7.8) | 6.1 (± 7.7) | | |

Statistical analyses

| Statistical analysis title | Semaglutide 2.4 mg vs Placebo |
|---|-------------------------------|
| Statistical analysis description: ANCOVA: Week 68 responses were analysed using an analysis of covariance model with randomised treatment as factor and baseline body weight as covariate. RD-MI: Missing observations were multiple (x1000) imputed from retrieved subjects of the same randomised treatment arm. | |
| Comparison groups | Semaglutide 2.4 mg v Placebo |
| Number of subjects included in analysis | 770 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[1] |
| P-value | < 0.0001 |
| Method | ANCOVA |
| Parameter estimate | Treatment difference |
| Point estimate | -14.75 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -16 |
| upper limit | -13.5 |

Notes:

[1] - Treatment policy estimand

| Statistical analysis title | Semaglutide 2.4 mg vs Placebo |
|---|-------------------------------|
| Statistical analysis description: MMRM: All responses prior to first discontinuation of treatment (or initiation of other anti-obesity medication or bariatric surgery) were included in a mixed model for repeated measurements with randomised treatment as factor and baseline body weight as covariate, all nested within visit. | |
| Comparison groups | Semaglutide 2.4 mg v Placebo |
| Number of subjects included in analysis | 770 |
| Analysis specification | Pre-specified |
| Analysis type | other ^[2] |
| P-value | < 0.0001 |
| Method | Mixed models analysis |
| Parameter estimate | Treatment difference |
| Point estimate | -15.33 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | -16.52 |
| upper limit | -14.13 |

Notes:

[2] - Hypothetical estimand

Secondary: Change in waist circumference (cm)

| | |
|--|------------------------------------|
| End point title | Change in waist circumference (cm) |
| End point description: Change in waist circumference from baseline (week 20) to week 68 is presented. The endpoint was evaluated based on the data from in-trial observation period. In-trial observation period: the uninterrupted time interval from start of run-in (week 0) to last trial-related subject-site contact (week 75). | |
| End point type | Secondary |

End point timeframe:

From randomisation (week 20) to week 68

| End point values | Semaglutide 2.4 mg | Placebo | | |
|--------------------------------------|-----------------------|------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 518 | 248 | | |
| Units: Centimeter (cm) | | | | |
| arithmetic mean (standard deviation) | -6.9 (\pm 7.5) | 3.2 (\pm 7.0) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change in systolic blood pressure (mmHg)

| | |
|---|--|
| End point title | Change in systolic blood pressure (mmHg) |
| End point description: Change in systolic blood pressure from week 20 to week 68 is presented. The endpoint was evaluated based on the data from in-trial observation period. In-trial observation period: the uninterrupted time interval from start of run-in (week 0) to last trial-related subject-site contact (week 75). | |
| End point type | Secondary |
| End point timeframe: From randomisation (week 20) to week 68 | |

| End point values | Semaglutide 2.4 mg | Placebo | | |
|--------------------------------------|-----------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 518 | 248 | | |
| Units: Millimeters of mercury (mmHg) | | | | |
| arithmetic mean (standard deviation) | 0 (\pm 14) | 5 (\pm 13) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change in physical functioning score (SF-36)

| | |
|---|--|
| End point title | Change in physical functioning score (SF-36) |
| End point description: SF-36 is a 36-item patient-reported survey of patient health that measures the subject's overall health-related quality of life (HRQoL). SF-36v2™ questionnaire measured eight domains of functional health and well-being as well as two component summary scores (physical component summary and mental component summary). The 0-100 scale scores from the SF-36 were converted to norm-based scores to enable a direct interpretation in relation to the distribution of the scores in the 2009 U.S. general population. In the metric of norm-based scores, 50 and 10 corresponds to the mean and standard | |

deviation respectively. Change from week 20 in the domain scores and component summary scores were evaluated at week 68. A positive change score indicates an improvement since baseline. These endpoints were evaluated based on the data from in-trial observation period which is the uninterrupted time interval from start of run-in (week 0) to last trial-related subject-site contact (week 75).

| | |
|---|-----------|
| End point type | Secondary |
| End point timeframe: | |
| From randomisation (week 20) to week 68 | |

| End point values | Semaglutide 2.4 mg | Placebo | | |
|---|-----------------------|-------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 515 | 245 | | |
| Units: Scores on a scale | | | | |
| arithmetic mean (standard deviation) | | | | |
| Change in physical functioning score (SF-36) | 1.0 (\pm 3.8) | -1.2 (\pm 4.5) | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

week 0 to week 75

Results are based on the SAS which included all subjects who received at least one dose of semaglutide or placebo.

Adverse event reporting additional description:

All AEs mentioned here are TEAE defined as an event that had onset date (or increase in severity) on or after the first day of exposure to randomised treatment and no later than the date of last dose + 7 weeks.

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

Dictionary used

| | |
|--------------------|--------|
| Dictionary name | MedDRA |
| Dictionary version | 22 |

Reporting groups

| | |
|-----------------------|----------------------------|
| Reporting group title | Semaglutide: Run-in period |
|-----------------------|----------------------------|

Reporting group description:

Subjects were to receive once-weekly s.c injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in run-in period (week 0 to week 20) with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached.

| | |
|-----------------------|-----------------------------------|
| Reporting group title | Semaglutide 2.4: Treatment period |
|-----------------------|-----------------------------------|

Reporting group description:

Subjects were to receive once-weekly s.c injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20. Thus, out of 803, 535 subjects were continued to receive once weekly semaglutide s.c 2.4 mg until week 68.

| | |
|-----------------------|---------------------------|
| Reporting group title | Placebo: treatment period |
|-----------------------|---------------------------|

Reporting group description:

Subjects were to receive once-weekly s.c injection of semaglutide using a PDS290 pre-filled pen-injector with a 3 mL cartridge containing semaglutide 1.0 mg/mL or 3.0 mg/mL in 20 week run-in period with dose escalation (0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg) every fourth week until maintenance dose of 2.4 mg of semaglutide was reached. The subjects with target dose reached were randomised in 2:1 at week 20. Thus, out of 803, 268 subjects were switched to receive once weekly placebo until week 68.

| Serious adverse events | Semaglutide: Run-in period | Semaglutide 2.4: Treatment period | Placebo: treatment period |
|---|----------------------------|-----------------------------------|---------------------------|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 21 / 902 (2.33%) | 41 / 535 (7.66%) | 15 / 268 (5.60%) |
| number of deaths (all causes) | 0 | 1 | 1 |
| number of deaths resulting from adverse events | 0 | 0 | 0 |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Endometrial adenocarcinoma | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Endometrial cancer stage II | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Haemangioma | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Intraductal proliferative breast lesion | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Invasive breast carcinoma | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Invasive ductal breast carcinoma | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Lung cancer metastatic | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| Malignant melanoma | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Marginal zone lymphoma | | | |

| | | | |
|--|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Uterine leiomyoma | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Vascular disorders | | | |
| Hypertension | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Hypotension | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Surgical and medical procedures | | | |
| Arthroscopic surgery | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Orthognathic surgery | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Pregnancy, puerperium and perinatal conditions | | | |
| Morning sickness | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| General disorders and administration site conditions | | | |
| Death | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Non-cardiac chest pain | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Reproductive system and breast disorders | | | |
| Menorrhagia | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Ovarian cyst | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Respiratory, thoracic and mediastinal disorders | | | |
| Pulmonary embolism | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Product issues | | | |
| Lead dislodgement | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Injury, poisoning and procedural complications | | | |
| Ankle fracture | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Arthropod bite | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Corneal abrasion | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Fall | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Incisional hernia | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Lower limb fracture | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Meniscus injury | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Post lumbar puncture syndrome | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Road traffic accident | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Spinal compression fracture | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 | 2 / 902 (0.22%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Atrial fibrillation | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 2 / 268 (0.75%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Supraventricular tachycardia | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Nervous system disorders | | | |
| Carotid sinus syndrome | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Hemiparaesthesia | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Hemiparesis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Migraine | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 2 / 535 (0.37%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Paraesthesia | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Quadriplegia | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Syncope | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Transient global amnesia | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 | | | |
| Pancytopenia | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Ear and labyrinth disorders | | | |
| Vertigo | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Gastrointestinal disorders | | | |
| Abdominal pain | | | |
| subjects affected / exposed | 2 / 902 (0.22%) | 1 / 535 (0.19%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 1 / 2 | 0 / 1 | 1 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Constipation | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|---|-----------------|-----------------|-----------------|
| Diverticular perforation | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Intestinal obstruction | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Nausea | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Vomiting | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Hepatobiliary disorders | | | |
| Biliary cyst | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Cholecystitis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Cholelithiasis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 5 / 535 (0.93%) | 2 / 268 (0.75%) |
| occurrences causally related to treatment / all | 0 / 0 | 5 / 5 | 2 / 2 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Renal and urinary disorders | | | |
| Nephrolithiasis | | | |
| subjects affected / exposed | 2 / 902 (0.22%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 1 / 2 | 1 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

| | | | |
|---|-----------------|-----------------|-----------------|
| Ureterolithiasis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Endocrine disorders | | | |
| Hypothyroidism | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Musculoskeletal and connective tissue disorders | | | |
| Intervertebral disc protrusion | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Osteoarthritis | | | |
| subjects affected / exposed | 3 / 902 (0.33%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Infections and infestations | | | |
| Abscess neck | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Appendicitis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Cellulitis | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Diverticulitis | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Gastroenteritis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 2 / 535 (0.37%) | 0 / 268 (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 |
| Induced abortion infection | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Pertussis | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Pyelonephritis acute | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (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 |
| Tooth abscess | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Urinary tract infection | | | |
| subjects affected / exposed | 0 / 902 (0.00%) | 0 / 535 (0.00%) | 1 / 268 (0.37%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 1 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Metabolism and nutrition disorders | | | |
| Dehydration | | | |
| subjects affected / exposed | 1 / 902 (0.11%) | 0 / 535 (0.00%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |
| Type 2 diabetes mellitus | | | |

| | | | |
|---|-----------------|-----------------|-----------------|
| subjects affected / exposed | 0 / 902 (0.00%) | 1 / 535 (0.19%) | 0 / 268 (0.00%) |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | 0 / 0 |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | 0 / 0 |

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

| Non-serious adverse events | Semaglutide: Run-in period | Semaglutide 2.4: Treatment period | Placebo: treatment period |
|---|----------------------------|-----------------------------------|---------------------------|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 670 / 902 (74.28%) | 295 / 535 (55.14%) | 114 / 268 (42.54%) |
| Nervous system disorders | | | |
| Headache | | | |
| subjects affected / exposed | 96 / 902 (10.64%) | 41 / 535 (7.66%) | 10 / 268 (3.73%) |
| occurrences (all) | 119 | 48 | 10 |
| General disorders and administration site conditions | | | |
| Fatigue | | | |
| subjects affected / exposed | 67 / 902 (7.43%) | 26 / 535 (4.86%) | 6 / 268 (2.24%) |
| occurrences (all) | 69 | 29 | 6 |
| Gastrointestinal disorders | | | |
| Abdominal distension | | | |
| subjects affected / exposed | 50 / 902 (5.54%) | 8 / 535 (1.50%) | 2 / 268 (0.75%) |
| occurrences (all) | 53 | 10 | 2 |
| Abdominal pain | | | |
| subjects affected / exposed | 67 / 902 (7.43%) | 34 / 535 (6.36%) | 8 / 268 (2.99%) |
| occurrences (all) | 82 | 45 | 9 |
| Abdominal pain upper | | | |
| subjects affected / exposed | 49 / 902 (5.43%) | 20 / 535 (3.74%) | 3 / 268 (1.12%) |
| occurrences (all) | 64 | 22 | 3 |
| Constipation | | | |
| subjects affected / exposed | 200 / 902 (22.17%) | 62 / 535 (11.59%) | 16 / 268 (5.97%) |
| occurrences (all) | 232 | 75 | 18 |
| Diarrhoea | | | |
| subjects affected / exposed | 212 / 902 (23.50%) | 77 / 535 (14.39%) | 19 / 268 (7.09%) |
| occurrences (all) | 309 | 114 | 26 |
| Dyspepsia | | | |

| | | | |
|---|--------------------|-------------------|-------------------|
| subjects affected / exposed | 103 / 902 (11.42%) | 9 / 535 (1.68%) | 2 / 268 (0.75%) |
| occurrences (all) | 127 | 9 | 2 |
| Eruption | | | |
| subjects affected / exposed | 71 / 902 (7.87%) | 14 / 535 (2.62%) | 1 / 268 (0.37%) |
| occurrences (all) | 88 | 15 | 1 |
| Flatulence | | | |
| subjects affected / exposed | 50 / 902 (5.54%) | 14 / 535 (2.62%) | 3 / 268 (1.12%) |
| occurrences (all) | 73 | 44 | 4 |
| Gastroesophageal reflux disease | | | |
| subjects affected / exposed | 58 / 902 (6.43%) | 5 / 535 (0.93%) | 1 / 268 (0.37%) |
| occurrences (all) | 60 | 6 | 1 |
| Nausea | | | |
| subjects affected / exposed | 422 / 902 (46.78%) | 75 / 535 (14.02%) | 13 / 268 (4.85%) |
| occurrences (all) | 629 | 104 | 13 |
| Vomiting | | | |
| subjects affected / exposed | 140 / 902 (15.52%) | 54 / 535 (10.09%) | 8 / 268 (2.99%) |
| occurrences (all) | 239 | 87 | 13 |
| Musculoskeletal and connective tissue disorders | | | |
| Arthralgia | | | |
| subjects affected / exposed | 21 / 902 (2.33%) | 25 / 535 (4.67%) | 14 / 268 (5.22%) |
| occurrences (all) | 23 | 28 | 16 |
| Back pain | | | |
| subjects affected / exposed | 26 / 902 (2.88%) | 28 / 535 (5.23%) | 18 / 268 (6.72%) |
| occurrences (all) | 28 | 32 | 19 |
| Infections and infestations | | | |
| Influenza | | | |
| subjects affected / exposed | 28 / 902 (3.10%) | 39 / 535 (7.29%) | 19 / 268 (7.09%) |
| occurrences (all) | 28 | 45 | 23 |
| Nasopharyngitis | | | |
| subjects affected / exposed | 92 / 902 (10.20%) | 58 / 535 (10.84%) | 39 / 268 (14.55%) |
| occurrences (all) | 102 | 77 | 54 |
| Metabolism and nutrition disorders | | | |
| Decreased appetite | | | |
| subjects affected / exposed | 102 / 902 (11.31%) | 7 / 535 (1.31%) | 0 / 268 (0.00%) |
| occurrences (all) | 115 | 7 | 0 |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|--------------|---|
| 04 June 2018 | <p>This protocol is amended for the following reasons:</p> <ol style="list-style-type: none">1. Removal of criteria for discontinuation of trial treatment for subjects included in the trial in violation of the inclusion and/or exclusion criteria and/or randomisation criteria. Subjects will not be discontinued from trial product if considered safe to continue. However, prospective approval of protocol deviations to recruitment and enrolment criteria, also known as protocol waivers or exemptions, is not permitted and deviations from the protocol should be avoided.2. Classifications of risks have been removed from the protocol and instead a reference to the IB or any updates hereof has been added for further details of the risks associated with semaglutide treatment.3. Minor clarification of content and correction of minor errors and typos. |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported