Clinical trial results:
A randomised, double-blind, placebo-controlled, parallel-group, multi-centre trial to evaluate the efficacy, safety, and tolerability of tralokinumab monotherapy in adolescent subjects with moderate-to-severe atopic dermatitis who are candidates for systemic therapy - ECZTRA 6 (ECZema TRAlokinumab trial no.6)

Summary

EudraCT number	2017-005143-33
Trial protocol	FR PL DE NL BE GB
Global end of trial date	16 March 2021

Results information

Result version number	v2 (current)
This version publication date	20 July 2022
First version publication date	01 October 2021
Version creation reason	• Correction of full data set Error corrected.

Trial information

Trial identification

Sponsor protocol code	LP0162-1334

Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT03526861
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	LEO Pharma A/S
Sponsor organisation address	Industriparken 55, Ballerup, Denmark, 2750
Public contact	Clinical Disclosure Specialist, LEO Pharma A/S , +45 44945888, disclosure@leo-pharma.com
Scientific contact	Clinical Disclosure Specialist, LEO Pharma A/S , +45 44945888, disclosure@leo-pharma.com

Notes:

Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	Yes
EMA paediatric investigation plan number(s)	EMEA-001900-PIP02-17
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?	Yes

Notes:

Results analysis stage

Analysis stage	Final
Date of interim/final analysis	12 May 2021
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	16 March 2021
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

To evaluate the efficacy of subcutaneous administration of tralokinumab compared with placebo in treating adolescent subjects (age 12 to <18 years) with moderate-to-severe atopic dermatitis.

Protection of trial subjects:

This clinical trial was conducted to conform to the principles of the Declaration of Helsinki as adopted by the 18th World Medical Association General Assembly, 1964, and subsequent amendments. Subjects and their legally acceptable representative received written and verbal information concerning the clinical trial and were given an opportunity to ask questions and sufficient time to consider before consenting. Subjects not of legal age assented to participation in the trial, and for such subjects, one or more legally authorised representatives provided consent. Subjects or legally authorised representatives were asked to consent to their personal data being recorded, collected, processed and transferred to EU and non-EU countries in accordance with any national legislation regulating privacy and data protection. Some subjects were randomised to initial treatment with placebo, and subjects who achieved a clinical response at Week 16 with placebo were assigned to continue placebo treatment until Week 52. If medically necessary (i.e. to control intolerable atopic dermatitis [AD] symptoms), rescue treatment for AD could be provided to subjects throughout the trial, both during the initial treatment period and the maintenance treatment period, at the discretion of the investigator. For the first 3 investigational medicinal product (IMP) dosing visits in both the initial treatment period (i.e. Weeks 0, 2, and 4) and in open-label treatment, subjects were monitored after IMP administration for immediate drug reactions for a minimum of 2 hours with vital signs taken every 30 minutes or until stable, whichever was later. Vital signs were documented in the electronic case report forms. Appropriate drugs, such as epinephrine, antihistamines, corticosteroids, etc., and medical equipment to treat acute anaphylactic reactions were immediately available at trial sites, and trial personnel was trained to recognise and respond to anaphylaxis according to local guidelines

Background therapy:

All subjects were to use an emollient twice daily (or more, as needed) for at least 14 days before randomisation and were to continue this treatment throughout the trial.

Evidence for comparator: -

Actual start date of recruitment	13 July 2018
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	United States: 105
Country: Number of subjects enrolled	Canada: 52
Country: Number of subjects enrolled	Australia: 14

Country: Number of subjects enrolled	Japan: 32
Country: Number of subjects enrolled	Netherlands: 13
Country: Number of subjects enrolled	Poland: 54
Country: Number of subjects enrolled	United Kingdom: 4
Country: Number of subjects enrolled	Belgium: 8
Country: Number of subjects enrolled	France: 8
Country: Number of subjects enrolled	Germany: 11
Worldwide total number of subjects	301
EEA total number of subjects	94

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)	301
Adults (18-64 years)	0
From 65 to 84 years	0
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

Trial start date: 13-Jul-2018. Primary completion date: 15-Apr-2020, Trial completion date: March 16 2021. The trial was conducted in 10 countries: United States, Australia, Canada, United Kingdom, Poland, Belgium, Germany, France, Japan, and the Netherlands.

Pre-assignment

Screening details:

The screening period was 2 to 6 weeks and included 1 or 2 visits. The exact duration depended on the washout period defined by the exclusion criteria. If no wash-out or only a 2-week wash-out was required, screening Visits 1 and 2 were combined. Eligibility was assessed at the (first) screening visit and on Day 0 prior to randomisation.

Period 1

Period 1 title	Initial treatment period
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator, Monitor, Data analyst, Carer, Assessor

Blinding implementation details:

This was a double-blind trial in which tralokinumab and placebo were visually distinct from each other. The IMP was handled and administered by a qualified, unblinded healthcare professional (HCP) at the site who was not involved in the management of trial subjects and who did not perform any of the assessments.

Arms

Are arms mutually exclusive?	Yes
Arm title	Initial treatment period - Tralokinumab 300 mg Q2W

Arm description:

Subjects in the initial treatment period (Week 0 to Week 16) treated with tralokinumab 300 mg every second week (Q2W)

Arm type	Experimental
Investigational medicinal product name	Tralokinumb 300 mg Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At Day 0, each subject received 4 subcutaneous injections (each 1.0 mL) of 150 mg tralokinumab to receive a total loading dose of 600 mg tralokinumab (4.0 mL). At subsequent visits (Q2W) each subject received 2 SC injections (each 1.0 mL) of 150 mg tralokinumab to receive a total dose of 300 mg tralokinumab. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Arm title	Initial treatment period - Tralokinumab 150 mg Q2W

Arm description:

Subjects in the initial treatment period (Week 0 to Week 16) treated with tralokinumab 150 mg every second week (Q2W)

Arm type	Experimental

Investigational medicinal product name	Tralokinumb 150 mg Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At Day 0, each subject received 2 subcutaneous injections (each 1.0 mL) of 150 mg tralokinumab and 2 SC injections (each 1.0 mL) of placebo to receive a total loading dose of 300 mg tralokinumab (4.0 mL). At subsequent visits (Q2W) each subject received 1 SC injection (1.0 mL) of 150 mg tralokinumab and 1 SC injection (1.0 mL) of placebo to receive a total dose of 150 mg tralokinumab. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Arm title	Initial treatment period - Placebo Q2W

Arm description:

Subjects in the initial treatment period (Week 0 to Week 16) treated with placebo every second week (Q2W).

Arm type	Placebo
Investigational medicinal product name	Placebo Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At Day 0, each subject received 4 subcutaneous injections (each 1.0 mL) of placebo to receive a total loading dose (4.0 mL). At subsequent visits (Q2W) each subject received 2 SC injections (each 1.0 mL) of placebo. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Number of subjects in period 1	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W
Started	101	100	100
Completed	94	93	86
Not completed	7	7	14
Excluded from trial+FAS due to quality/GCP issues	3	1	5
Discontinued IMP before Week 16	3	5	8
Not dosed	1	1	1

Period 2

Period 2 title	Open-label treatment period
Is this the baseline period?	No
Allocation method	Not applicable
Blinding used	Not blinded

Arms

Arm title	Open-label Treatment - Tralokinumab 300 mg Q2W + optional TCS

Arm description:

Subjects in the open-label treatment period (Week 16 to Week 52) treated with tralokinumab every second week (Q2W) + optional TCS. Subjects transferred to open-label treatment at Week 16 if they did not achieve protocol-defined clinical response at Week 16 without use of rescue medication from Week 2 to Week 16 OR after Week 16 if they lost clinical response during the maintenance treatment period. Loss of clinical response during the maintenance treatment period was defined as:
-IGA of at least 2 and not achieving EASI75 over at least a 4-week period (3 consecutive visits) for subjects with IGA=0 at Week 16
-IGA of at least 3 and not achieving EASI75 over at least a 4-week period (3 consecutive visits) for subjects with IGA=1 at Week 16
-Not achieving EASI75 over at least a 4-week period (3 consecutive visits) for subjects with IGA>1 at Week 1

Arm type	Experimental
Investigational medicinal product name	Tralokinumb 300 mg Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At each visit, subject received 2 subcutaneous injections (each 1.0 mL) of 150 mg tralokinumab Q2W to receive a total dose of 300 mg. IMP was administered by a qualified HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Number of subjects in period 2[1]	Open-label Treatment - Tralokinumab 300 mg Q2W + optional TCS
Started	242
Completed	214
Not completed	28
Excluded from trial+FAS due to quality/GCP issues	8
Discontinued IMP before Week 52	19
Received IMP and withdrew from trial at Week 50	1

Notes:

[1] - The number of subjects starting the period is not consistent with the number completing the preceding period. It is expected the number of subjects starting the subsequent period will be the same as the number completing the preceding period.
Justification: The open-label treatment period was in parallel to the maintenance treatment period. Subjects from the initial treatment period entered either into the open-label treatment period or maintenance treatment period.

Period 3

Period 3 title	Maintenance treatment period
Is this the baseline period?	No
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator, Monitor, Data analyst, Carer, Assessor

Blinding implementation details:

This was a double-blind trial in which tralokinumab and placebo were visually distinct from each other.

The IMP was handled and administered by a qualified, unblinded HCP at the site who was not involved in the management of trial subjects and who did not perform any of the assessments. Maintenance treatment period was in parallel to the Open-label treatment period.

Arms

Are arms mutually exclusive?	Yes
Arm title	Maintenance Treatment Period - Tralokinumab 300 mg Q2W

Arm description:

Subjects initially randomised to tralokinumab 300 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 300 mg Q2W maintenance treatment.

Arm type	Experimental
Investigational medicinal product name	Tralokinumb 300 mg Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At each visit, subject received 2 subcutaneous injections (each 1.0 mL) of 150 mg tralokinumab Q2W to receive a total dose of 300 mg tralokinumab. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Arm title	Maintenance Treatment Period - Tralokinumab 300 mg Q4W

Arm description:

Subjects initially randomised to tralokinumab 300 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 300 mg Q4W maintenance treatment.

Arm type	Experimental
Investigational medicinal product name	Tralokinumb 300 mg Q4W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At each visit, subject received alternating dose administrations: 2 subcutaneous injections (each 1.0 mL) of 150 mg tralokinumab Q2W to receive a total dose of 300 mg tralokinumab or 2 subcutaneous injections (each 1.0 mL) of placebo. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Arm title	Maintenance Treatment Period - Tralokinumab 150 mg Q2W

Arm description:

Subjects initially randomised to tralokinumab 150 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 150 mg Q2W maintenance treatment.

Arm type	Experimental
Investigational medicinal product name	Tralokinumb 150 mg Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At each visit, subject received 1 subcutaneous injection (1.0 mL) of 150 mg tralokinumab and 1 subcutaneous injection (1.0 mL) of placebo Q2W to receive a total dose of 150 mg tralokinumab. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous

tissue of the upper arm, anterior thigh, or abdomen.

Arm title	Maintenance Treatment Period - Tralokinumab 150 mg Q4W

Arm description:

Subjects initially randomised to tralokinumab 150 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 150 mg Q4W maintenance treatment.

Arm type	Experimental
Investigational medicinal product name	Tralokinumb 150 mg Q4W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At each visit, subject received alternating dose administrations: 1 subcutaneous injection (1.0 mL) of 150 mg tralokinumab and 1 subcutaneous injection (1.0 mL) of placebo to receive a total dose of 300 mg tralokinumab or 2 subcutaneous injections (each 1.0 mL) of placebo. IMP was administered by a qualified, unblinded HCP. The injections were administered into the subcutaneous tissue of the upper arm, anterior thigh, or abdomen.

Arm title	Maintenance Treatment Period - Placebo Q2W

Arm description:

Subjects initially randomised to placebo, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-assigned to placebo maintenance treatment.

Arm type	Experimental
Investigational medicinal product name	Placebo Q2W
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection in pre-filled syringe
Routes of administration	Subcutaneous use

Dosage and administration details:

At each visit, subject received 2 SC injections (each 1.0 mL) of placebo. IMP was administered by a qualified, unblinded HCP. The injections were administered into the SC tissue of the upper arm, anterior thigh, or abdomen, separated by at least 3 cm.

Number of subjects in period 3[2]	Maintenance Treatment Period - Tralokinumab 300 mg Q2W	Maintenance Treatment Period - Tralokinumab 300 mg Q4W	Maintenance Treatment Period - Tralokinumab 150 mg Q2W
Started	13	14	12
Completed	5	8	8
Not completed	8	6	4
Transferred to open-label treatment	6	5	4
Excluded from trial+FAS due to quality/GCP issues	1	-	-
Discontinued IMP before Week 52	1	1	-

Number of subjects in period 3[2]	Maintenance Treatment Period - Tralokinumab 150 mg Q4W	Maintenance Treatment Period - Placebo Q2W
Started	14	6
Completed	8	4
Not completed	6	2
Transferred to open-label treatment	5	2
Excluded from trial+FAS due to quality/GCP issues	-	-
Discontinued IMP before Week 52	1	-

Notes:

[2] - The number of subjects starting the period is not consistent with the number completing the preceding period. It is expected the number of subjects starting the subsequent period will be the same as the number completing the preceding period.

Justification: The maintenance treatment period was in parallel to the open-label treatment period. Subjects from the initial treatment phase entered either into the maintenance treatment period or the open-label treatment period.

Baseline characteristics

Reporting groups	
Reporting group title	Initial treatment period - Tralokinumab 300 mg Q2W
Reporting group description:	
Subjects in the initial treatment period (Week 0 to Week 16) treated with tralokinumab 300 mg every second week (Q2W)	
Reporting group title	Initial treatment period - Tralokinumab 150 mg Q2W
Reporting group description:	
Subjects in the initial treatment period (Week 0 to Week 16) treated with tralokinumab 150 mg every second week (Q2W)	
Reporting group title	Initial treatment period - Placebo Q2W
Reporting group description:	
Subjects in the initial treatment period (Week 0 to Week 16) treated with placebo every second week (Q2W).	

Reporting group values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W
Number of subjects	101	100	100
Age categorical Units: Subjects			
Adolescents (12-17 years)	101	100	100
Age continuous Units: years			
arithmetic mean	14.6	14.8	14.4
standard deviation	± 1.8	± 1.7	± 1.6
Gender categorical Units: Subjects			
Female	52	48	46
Male	49	52	54
Race Units: Subjects			
White	59	56	58
Black or African American	14	8	12
Asian	21	28	23
American Indian or Alaska native	0	2	1
Native Hawaiian or other Pacific islander	2	0	2
Other	5	6	4
Ethnicity Units: Subjects			
Hispanic or Latino	12	10	10
Not Hispanic or Latino	89	90	90
Unknown or Not Reported	0	0	0
Investigator's Global Assessment			
The Investigator's Global Assessment (IGA) is an instrument used in clinical trials to rate the severity of the subject's global atopic dermatitis and is based on a 5-point scale ranging from 0 (clear) to 4 (severe).			
Units: Subjects			
Clear	0	0	0

Almost Clear	0	0	0
Mild	0	0	0
Moderate	52	55	54
Severe	48	44	45
Missing	1	1	1
Eczema Area and Severity Index			
Measure description: The Eczema Area and Severity Index (EASI) is a validated measure used in clinical practice and clinical trials to assess the severity and extent of atopic dermatitis. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.			
Units: Units on a scale			
arithmetic mean	31.90	31.89	31.25
standard deviation	± 13.74	± 12.97	± 14.19
Scoring Atopic Dermatitis			
The Scoring Atopic Dermatitis (SCORAD) is a validated tool to evaluate the extent and severity of AD lesions, along with subjective symptoms. The maximum total score is 103, with higher values indicating more severe disease.			
Units: Units on a scale			
arithmetic mean	68.41	67.42	67.70
standard deviation	± 13.51	± 14.51	± 14.77
Children's Dermatology Life Quality Index			
The Children's Dermatology Life Quality Index (CDLQI) consists of 10 items addressing the subject's perception of the impact of their skin disease on various aspects of their quality of life (QoL) over the last week such as dermatology-related symptoms and feelings, leisure, school or holidays, personal relationships, sleep, and the treatment. Each item is scored on a 4-point Likert scale (0 = 'not at all'; 1 = 'only a little'; 2 = 'quite a lot'; 3 = 'very much'). The total score is the sum of the 10 items (0 to 30); a high score is indicative of a poor health-related quality of life.			
Units: units on a scale			
arithmetic mean	13.29	12.86	13.14
standard deviation	± 7.18	± 6.27	± 5.99
Adolescent Worst Pruritus NRS (weekly average)			
Subjects assessed their worst itch severity over the past 24 hours using an 11-point numeric rating scale ('Adolescent Worst Pruritus NRS') each morning, with 0 indicating 'no itch' and 10 indicating 'worst itch possible'.			
Units: units on a scale			
arithmetic mean	7.79	7.49	7.45
standard deviation	± 1.53	± 1.58	± 1.62
Body surface area affected by atopic dermatitis (AD)			
Units: percentage affected			
arithmetic mean	49.8	52.0	50.9
standard deviation	± 23.0	± 22.5	± 23.5
Age of onset of atopic dermatitis (AD)			
Units: years			
arithmetic mean	2.5	2.1	2.4
standard deviation	± 3.5	± 3.3	± 3.5
Duration of atopic dermatitis (AD)			
Units: years			
arithmetic mean	12.1	12.7	12.0
standard deviation	± 3.7	± 3.7	± 3.4

Reporting group values	Total		
Number of subjects	301		

Age categorical Units: Subjects			
Adolescents (12-17 years)	301		
Age continuous Units: years arithmetic mean standard deviation	- -		
Gender categorical Units: Subjects			
Female	146		
Male	155		
Race Units: Subjects			
White	173		
Black or African American	34		
Asian	72		
American Indian or Alaska native	3		
Native Hawaiian or other Pacific islander	4		
Other	15		
Ethnicity Units: Subjects			
Hispanic or Latino	32		
Not Hispanic or Latino	269		
Unknown or Not Reported	0		
Investigator's Global Assessment			
The Investigator's Global Assessment (IGA) is an instrument used in clinical trials to rate the severity of the subject's global atopic dermatitis and is based on a 5-point scale ranging from 0 (clear) to 4 (severe).			
Units: Subjects			
Clear	0		
Almost Clear	0		
Mild	0		
Moderate	161		
Severe	137		
Missing	3		
Eczema Area and Severity Index			
Measure description: The Eczema Area and Severity Index (EASI) is a validated measure used in clinical practice and clinical trials to assess the severity and extent of atopic dermatitis. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.			
Units: Units on a scale arithmetic mean standard deviation	- -		
Scoring Atopic Dermatitis			
The Scoring Atopic Dermatitis (SCORAD) is a validated tool to evaluate the extent and severity of AD lesions, along with subjective symptoms. The maximum total score is 103, with higher values indicating more severe disease.			
Units: Units on a scale arithmetic mean standard deviation	- -		
Children's Dermatology Life Quality Index			

The Children's Dermatology Life Quality Index (CDLQI) consists of 10 items addressing the subject's perception of the impact of their skin disease on various aspects of their quality of life (QoL) over the last week such as dermatology-related symptoms and feelings, leisure, school or holidays, personal relationships, sleep, and the treatment. Each item is scored on a 4-point Likert scale (0 = 'not at all'; 1 = 'only a little'; 2 = 'quite a lot'; 3 = 'very much'). The total score is the sum of the 10 items (0 to 30); a high score is indicative of a poor health-related quality of life.			
Units: units on a scale arithmetic mean standard deviation	-		
Adolescent Worst Pruritus NRS (weekly average)			
Subjects assessed their worst itch severity over the past 24 hours using an 11-point numeric rating scale ('Adolescent Worst Pruritus NRS') each morning, with 0 indicating 'no itch' and 10 indicating 'worst itch possible'.			
Units: units on a scale arithmetic mean standard deviation	-		
Body surface area affected by atopic dermatitis (AD) Units: percentage affected arithmetic mean standard deviation	-		
Age of onset of atopic dermatitis (AD) Units: years arithmetic mean standard deviation	-		
Duration of atopic dermatitis (AD) Units: years arithmetic mean standard deviation	-		

End points

End points reporting groups

Reporting group title	Initial treatment period - Tralokinumab 300 mg Q2W
Reporting group description:	
Subjects in the initial treatment period (Week 0 to Week 16) treated with tralokinumab 300 mg every second week (Q2W)	

Reporting group title	Initial treatment period - Tralokinumab 150 mg Q2W
Reporting group description:	
Subjects in the initial treatment period (Week 0 to Week 16) treated with tralokinumab 150 mg every second week (Q2W)	

Reporting group title	Initial treatment period - Placebo Q2W
Reporting group description:	
Subjects in the initial treatment period (Week 0 to Week 16) treated with placebo every second week (Q2W).	

Reporting group title	Open-label Treatment - Tralokinumab 300 mg Q2W + optional TCS
Reporting group description:	
Subjects in the open-label treatment period (Week 16 to Week 52) treated with tralokinumab every second week (Q2W) + optional TCS. Subjects transferred to open-label treatment at Week 16 if they did not achieve protocol-defined clinical response at Week 16 without use of rescue medication from Week 2 to Week 16 OR after Week 16 if they lost clinical response during the maintenance treatment period. Loss of clinical response during the maintenance treatment period was defined as: -IGA of at least 2 and not achieving EASI75 over at least a 4-week period (3 consecutive visits) for subjects with IGA=0 at Week 16 -IGA of at least 3 and not achieving EASI75 over at least a 4-week period (3 consecutive visits) for subjects with IGA=1 at Week 16 -Not achieving EASI75 over at least a 4-week period (3 consecutive visits) for subjects with IGA>1 at Week 1	

Reporting group title	Maintenance Treatment Period - Tralokinumab 300 mg Q2W
Reporting group description:	
Subjects initially randomised to tralokinumab 300 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 300 mg Q2W maintenance treatment.	

Reporting group title	Maintenance Treatment Period - Tralokinumab 300 mg Q4W
Reporting group description:	
Subjects initially randomised to tralokinumab 300 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 300 mg Q4W maintenance treatment.	

Reporting group title	Maintenance Treatment Period - Tralokinumab 150 mg Q2W
Reporting group description:	
Subjects initially randomised to tralokinumab 150 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 150 mg Q2W maintenance treatment.	

Reporting group title	Maintenance Treatment Period - Tralokinumab 150 mg Q4W
Reporting group description:	
Subjects initially randomised to tralokinumab 150 mg Q2W, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-randomised to tralokinumab 150 mg Q4W maintenance treatment.	

Reporting group title	Maintenance Treatment Period - Placebo Q2W
Reporting group description:	
Subjects initially randomised to placebo, achieving a clinical response (defined as Investigator's Global Assessment score of 0 or 1, or at least 75% reduction in Eczema Area and Severity Index) at Week 16 without use of rescue medication from Week 2 to Week 16, and re-assigned to placebo maintenance treatment.	

Primary: Subjects With Investigator's Global Assessment (IGA) Score of 0 (Clear) or 1 (Almost Clear) at Week 16

End point title	Subjects With Investigator's Global Assessment (IGA) Score of 0 (Clear) or 1 (Almost Clear) at Week 16

End point description:

The IGA is an instrument used in clinical trials to rate the severity of the subject's global AD and is based on a 5-point scale ranging from 0 (clear) to 4 (severe).

End point type	Primary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects with response	17	21	4	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects with IGA score of 0 (clear) or 1 (almost clear) at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[1]
P-value	= 0.002 [2]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	13.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	5.3
upper limit	22.3

Notes:

[1] - Primary endpoint tested sequentially at a 5% significance level.

[2] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects with IGA score of 0 (clear) or 1 (almost clear) at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[3]
P-value	< 0.001 [4]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	17.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	8.4
upper limit	26.6

Notes:

[3] - Primary endpoint tested sequentially at a 5% significance level.

[4] - Based on the primary analysis of the primary estimand 'composite'.

Primary: Subjects With at Least 75% Reduction in Eczema Area and Severity Index (EASI75) at Week 16

End point title	Subjects With at Least 75% Reduction in Eczema Area and Severity Index (EASI75) at Week 16

End point description:

The EASI is a validated measure used in clinical practice and clinical trials to assess the severity and extent of AD. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.

End point type	Primary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects with response	27	28	6	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 75% reduction in EASI at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[5]
P-value	> 0.001 [6]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	22
Confidence interval	
level	95 %
sides	2-sided
lower limit	12
upper limit	32

Notes:

[5] - Primary endpoint tested sequentially at a 5% significance level.

[6] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 75% reduction in EASI at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[7]
P-value	< 0.001 [8]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	22.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	12.4
upper limit	32.6

Notes:

[7] - Primary endpoint tested sequentially at a 5% significance level.

[8] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Subjects With Reduction of Adolescent Worst Pruritus Numeric Rating Scale (NRS) (Weekly Average) of at Least 4 From Baseline to Week 16

End point title	Subjects With Reduction of Adolescent Worst Pruritus Numeric Rating Scale (NRS) (Weekly Average) of at Least 4 From

	Baseline to Week 16

End point description:

The Adolescent Worst Pruritus NRS is used by subjects to assess their worst itch over the past 24 hours using an 11-point NRS with 0 indicating 'no itch' and 10 indicating 'worst itch possible'.

End point type	Secondary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	96[9]	95[10]	90[11]	
Units: Number of subjects with response	24	22	3	

Notes:

[9] - Subjects in the full analysis set with baseline Adolescent Worst Pruritus weekly average ≥4.

[10] - Subjects in the full analysis set with baseline Adolescent Worst Pruritus weekly average ≥4.

[11] - Subjects in the full analysis set with baseline Adolescent Worst Pruritus weekly average ≥4.

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects with at least 4-point reduction in Adolescent Worst Pruritus NRS were considered responders. Subjects with missing data or who received rescue medication from Week 2 to Week 16 were considered non-responders.
Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	186
Analysis specification	Pre-specified
Analysis type	superiority[12]
P-value	< 0.001 [13]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	21.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	12.3
upper limit	31.1

Notes:

[12] - This secondary endpoint was tested sequentially using the Holm-Bonferroni method for multiplicity adjustment at a 2.5% significance level after the sequential testing of the primary endpoints.
[13] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects with at least 4-point reduction in Adolescent Worst Pruritus NRS were considered responders.

Subjects with missing data or who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	185
Analysis specification	Pre-specified
Analysis type	superiority[14]
P-value	< 0.001 [15]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	19.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	10.6
upper limit	29.2

Notes:

[14] - This secondary endpoint was tested sequentially using the Holm-Bonferroni method for multiplicity adjustment at a 5% significance level after the sequential testing of the primary endpoints.
[15] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Change in Scoring Atopic Dermatitis (SCORAD) From Baseline to Week 16

End point title	Change in Scoring Atopic Dermatitis (SCORAD) From Baseline to Week 16

End point description:

The SCORAD is a validated tool to evaluate the extent and severity of AD lesions, along with subjective symptoms. The maximum total score is 103, with higher values indicating more severe disease.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	98	97	94	
Units: Adjusted mean change				
least squares mean (standard error)	-29.1 (± 2.4)	-27.5 (± 2.4)	-9.5 (± 3.0)	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in

the analysis.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[16]
P-value	< 0.001 [17]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-19.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	-27.1
upper limit	-12.2

Notes:

[16] - This secondary endpoint was tested sequentially using the Holm-Bonferroni method for multiplicity adjustment at a 2.5% significance level after the sequential testing of the primary endpoints.
[17] - Based on the primary analysis of the primary estimand 'hypothetical'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[18]
P-value	< 0.001 [19]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-18
Confidence interval	
level	95 %
sides	2-sided
lower limit	-25.6
upper limit	-10.4

Notes:

[18] - This secondary endpoint was tested sequentially using the Holm-Bonferroni method for multiplicity adjustment at a 5% significance level after the sequential testing of the primary endpoints.
[19] - Based on the primary analysis of the primary estimand 'hypothetical'.

Secondary: Change in Children’s Dermatology Life Quality Index (CDLQI) Score From Baseline to Week 16

End point title	Change in Children’s Dermatology Life Quality Index (CDLQI) Score From Baseline to Week 16

End point description:

The CDLQI is a validated questionnaire with content specific to those with dermatology conditions. It consists of 10 items addressing the subject's perception of the impact of their skin disease on various aspects of their quality of life over the last week such as dermatology-related symptoms and feelings, leisure, school or holidays, personal relationships, sleep, and the treatment. Each item is scored on a 4-point Likert scale (0 = 'not at all'; 1 = 'only a little'; 2 = 'quite a lot'; 3 = 'very much'). Item 7 (on school time) has one additional response category 'prevented school', which is also scored '3'. The total

score of the CDLQI is the sum of the 10 items (0 to 30); a high score is indicative of a poor quality of life.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	94[20]	95[21]	89[22]	
Units: Adjusted mean change				
least squares mean (standard error)	-6.7 (± 0.6)	-6.1 (± 0.6)	-4.1 (± 0.7)	

Notes:

[20] - Subjects in the full analysis set with non-missing baseline CDLQI score

[21] - Subjects in the full analysis set with non-missing baseline CDLQI score

[22] - Subjects in the full analysis set with non-missing baseline CDLQI score

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	183
Analysis specification	Pre-specified
Analysis type	superiority[23]
P-value	= 0.007 [24]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-2.6
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4.5
upper limit	-0.7

Notes:

[23] - This secondary endpoint was tested sequentially using the Holm-Bonferroni method for multiplicity adjustment at a 2.5% significance level after the sequential testing of the primary endpoints.

[24] - Based on the primary analysis of the primary estimand 'hypothetical'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	184
Analysis specification	Pre-specified
Analysis type	superiority[25]
P-value	= 0.04 [26]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-3.9
upper limit	-0.1

Notes:

[25] - This secondary endpoint was tested sequentially using the Holm-Bonferroni method for multiplicity adjustment at a 5% significance level after the sequential testing of the primary endpoints.
[26] - Based on the primary analysis of the primary estimand 'hypothetical'.

Secondary: Number of Adverse Events

End point title	Number of Adverse Events

End point description:

Overall number of AEs during the Initial treatment period is presented. For a complete description of AEs and SAEs by MedDRA system organ class (SOC) and preferred term (PT) during the initial treatment period, maintenance treatment period, open-label treatment period, and safety follow-up period, see the Adverse Events Overview section.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of adverse events	130	175	134	

Statistical analyses

No statistical analyses for this end point

Secondary: Presence of Anti-drug Antibodies

End point title	Presence of Anti-drug Antibodies

End point description:

Anti-tralokinumab antibody levels were analysed using a validated bioanalytical method.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects	1	7	2	

Statistical analyses

No statistical analyses for this end point

Secondary: Subjects With at Least 50% Reduction in Eczema Area and Severity Index (EASI50) at Week 16.

End point title	Subjects With at Least 50% Reduction in Eczema Area and Severity Index (EASI50) at Week 16.

End point description:

The EASI is a validated measure used in clinical practice and clinical trials to assess the severity and extent of AD. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.

End point type	Secondary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects with response	50	45	13	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 50% reduction in EASI at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[27]
P-value	< 0.001 [28]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	38.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	26.8
upper limit	50.2

Notes:

[27] - The statistical test was not controlled for multiplicity.

[28] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 50% reduction in EASI at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[29]
P-value	< 0.001 [30]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	32.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	20.6
upper limit	44.1

Notes:

[29] - The statistical test was not controlled for multiplicity.

[30] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Subjects With at Least 90% Reduction in Eczema Area and Severity Index (EASI90) at Week 16.

End point title	Subjects With at Least 90% Reduction in Eczema Area and Severity Index (EASI90) at Week 16.

End point description:

The EASI is a validated measure used in clinical practice and clinical trials to assess the severity and extent of AD. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.

End point type	Secondary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects with response	17	19	4	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 90% reduction in EASI at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[31]
P-value	= 0.002 [32]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	13.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	5.2
upper limit	22.2

Notes:

[31] - The statistical test was not controlled for multiplicity.

[32] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 90% reduction in EASI at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[33]
P-value	< 0.001 [34]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	15.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	6.5
upper limit	24.1

Notes:

[33] - The statistical test was not controlled for multiplicity.

[34] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Change in Eczema Area and Severity Index (EASI) Score From Baseline to Week 16

End point title	Change in Eczema Area and Severity Index (EASI) Score From Baseline to Week 16

End point description:

The EASI is a validated measure used in clinical practice and clinical trials to assess the severity and extent of AD. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Adjusted mean change				
least squares mean (standard error)	-18.1 (± 1.3)	-18.1 (± 1.4)	-8.7 (± 1.6)	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[35]
P-value	< 0.001 [36]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-9.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	-13.5
upper limit	-5.3

Notes:

[35] - The statistical test was not controlled for multiplicity.

[36] - Based on the primary analysis of the primary estimand 'hypothetical'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[37]
P-value	< 0.001 [38]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-9.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	-13.6
upper limit	-5.3

Notes:

[37] - The statistical test was not controlled for multiplicity.

[38] - Based on the primary analysis of the primary estimand 'hypothetical'.

Secondary: Subjects With at Least 75% Reduction in Scoring Atopic Dermatitis (SCORAD75) at Week 16

End point title	Subjects With at Least 75% Reduction in Scoring Atopic Dermatitis (SCORAD75) at Week 16

End point description:

The SCORAD is a validated tool to evaluate the extent and severity of atopic dermatitis lesions, along with subjective symptoms. The score ranges from 0 to 103, with a higher values indicating a more extensive and/or severe condition.

End point type	Secondary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects with response	12	16	1	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 75% reduction in SCORAD at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[39]
P-value	= 0.002 [40]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	11.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	4.5
upper limit	18.4

Notes:

[39] - The statistical test was not controlled for multiplicity.

[40] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 75% reduction in SCORAD at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[41]
P-value	< 0.001 [42]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	15.6
Confidence interval	
level	95 %
sides	2-sided
lower limit	7.8
upper limit	23.3

Notes:

[41] - The statistical test was not controlled for multiplicity.

[42] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Subjects With at Least 50% Reduction in Scoring Atopic Dermatitis (SCORAD50) at Week 16

End point title	Subjects With at Least 50% Reduction in Scoring Atopic Dermatitis (SCORAD50) at Week 16

End point description:

The SCORAD is a validated tool to evaluate the extent and severity of atopic dermatitis lesions, along with subjective symptoms. The score ranges from 0 to 103, with a higher values indicating a more extensive and/or severe condition.

End point type	Secondary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	97	98	94	
Units: Number of subjects with response	30	30	5	

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 50% reduction in SCORAD at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 300 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	191
Analysis specification	Pre-specified
Analysis type	superiority[43]
P-value	< 0.001 [44]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	26.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	16.1
upper limit	36.3

Notes:

[43] - The statistical test was not controlled for multiplicity.

[44] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects who achieved at least 50% reduction in SCORAD at Week 16 were considered responders. Subjects with missing data or subjects who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	192
Analysis specification	Pre-specified
Analysis type	superiority[45]
P-value	< 0.001 [46]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	25.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	15.3
upper limit	35.7

Notes:

[45] - The statistical test was not controlled for multiplicity.

[46] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Change in Adolescent Worst Pruritus Numeric Rating Scale (NRS) (Weekly Average) From Baseline to Week 16

End point title	Change in Adolescent Worst Pruritus Numeric Rating Scale (NRS) (Weekly Average) From Baseline to Week 16

End point description:

The Adolescent Worst Pruritus NRS is used by subjects to assess their worst itch over the past 24 hours using an 11-point NRS with 0 indicating 'no itch' and 10 indicating 'worst itch possible'.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	96[47]	96[48]	92[49]	
Units: Adjusted mean change				
least squares mean (standard error)	-3.0 (± 0.3)	-2.7 (± 0.3)	-1.5 (± 0.3)	

Notes:

[47] - Subjects in the full analysis set with non-missing baseline Adolescent Worst Pruritus NRS score.

[48] - Subjects in the full analysis set with non-missing baseline Adolescent Worst Pruritus NRS score.

[49] - Subjects in the full analysis set with non-missing baseline Adolescent Worst Pruritus NRS score.

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	188
Analysis specification	Pre-specified
Analysis type	superiority[50]
P-value	< 0.001 [51]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-1.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.4
upper limit	-0.6

Notes:

[50] - The statistical test was not controlled for multiplicity.

[51] - Based on the primary analysis of the primary estimand 'hypothetical'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	188
Analysis specification	Pre-specified
Analysis type	superiority[52]
P-value	= 0.007 [53]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-1.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.1
upper limit	-0.3

Notes:

[52] - The statistical test was not controlled for multiplicity.

[53] - Based on the primary analysis of the primary estimand 'hypothetical'.

Secondary: Subjects With Reduction of Adolescent Worst Pruritus Numeric Rating Scale (NRS) (Weekly Average) of at Least 3 From Baseline to Week 16

End point title	Subjects With Reduction of Adolescent Worst Pruritus Numeric Rating Scale (NRS) (Weekly Average) of at Least 3 From Baseline to Week 16

End point description:

The Adolescent Worst Pruritus NRS is used by subjects to assess their worst itch over the past 24 hours using an 11-point NRS with 0 indicating 'no itch' and 10 indicating 'worst itch possible'.

End point type	Secondary

End point timeframe:

At Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	96[54]	95[55]	91[56]	
Units: Number of subjects with response	28	29	8	

Notes:

[54] - Subjects in the full analysis set with baseline Adolescent Worst Pruritus weekly average ≥3.

[55] - Subjects in the full analysis set with baseline Adolescent Worst Pruritus weekly average ≥3.

[56] - Subjects in the full analysis set with baseline Adolescent Worst Pruritus weekly average ≥3.

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Subjects with at least 3-point reduction in Adolescent Worst Pruritus NRS were considered responders. Subjects with missing data or who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	187
Analysis specification	Pre-specified
Analysis type	superiority[57]
P-value	< 0.001 [58]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	20.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	9.7
upper limit	31

Notes:

[57] - The statistical test was not controlled for multiplicity.

[58] - Based on the primary analysis of the primary estimand 'composite'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Subjects with at least 3-point reduction in Adolescent Worst Pruritus NRS were considered responders. Subjects with missing data or who received rescue medication from Week 2 to Week 16 were considered non-responders. Analysis was performed using Cochran-Mantel-Haenszel test stratified by region and baseline disease severity. The null hypothesis of no difference in response rate between tralokinumab 150 mg Q2W and placebo was tested against the 2-sided alternative that there is a difference.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	186
Analysis specification	Pre-specified
Analysis type	superiority[59]
P-value	< 0.001 [60]
Method	Cochran-Mantel-Haenszel
Parameter estimate	Risk difference (RD)
Point estimate	21.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	10.9
upper limit	32.7

Notes:

[59] - The statistical test was not controlled for multiplicity.

[60] - Based on the primary analysis of the primary estimand 'composite'.

Secondary: Change in Patient Oriented Eczema Measure (POEM) From Baseline to Week 16

End point title	Change in Patient Oriented Eczema Measure (POEM) From Baseline to Week 16

End point description:

The POEM is a validated questionnaire used to assess disease symptoms in atopic eczema patients in both clinical practice and clinical trials. The tool consists of 7 items each addressing a specific symptom (itching, sleep, bleeding, weeping, cracking, flaking, and dryness). Subjects will score how often they have experienced each symptom over the previous week on a 5-point categorical response scale (0 = 'no days'; 1 = '1 to 2 days'; 2 = '3 to 4 days'; 3 = '5 to 6' days; 4 = 'every day'). The total score is the sum of the 7 items (range 0 to 28) and reflects disease-related morbidity; a high score is indicative of a worse disease severity.

End point type	Secondary

End point timeframe:

From Week 0 to Week 16

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W	Initial treatment period - Placebo Q2W	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	94[61]	95[62]	87[63]	
Units: Adjusted mean change				
least squares mean (standard error)	-8.4 (± 0.8)	-7.8 (± 0.8)	-2.4 (± 1.0)	

Notes:

[61] - Subjects in the full analysis set with non-missing baseline POEM score.

[62] - Subjects in the full analysis set with non-missing baseline POEM score.

[63] - Subjects in the full analysis set with non-missing baseline POEM score.

Statistical analyses

Statistical analysis title	Tralokinumab 300 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 300 mg Q2W v Initial treatment period - Placebo Q2W
Number of subjects included in analysis	181
Analysis specification	Pre-specified
Analysis type	superiority[64]
P-value	< 0.001 [65]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-6
Confidence interval	
level	95 %
sides	2-sided
lower limit	-8.4
upper limit	-3.6

Notes:

[64] - The statistical test was not controlled for multiplicity.

[65] - ents
Based on the primary analysis of the primary estimand 'hypothetical'.

Statistical analysis title	Tralokinumab 150 mg Q2W versus Placebo

Statistical analysis description:

Repeated measurements model on post-baseline data. In case of no post-baseline assessments before initiation of rescue medication, the Week 2 change was imputed as 0. Data collected after permanent discontinuation of IMP or after use of rescue treatment from Week 2 to Week 16 were not included in the analysis.

Comparison groups	Initial treatment period - Tralokinumab 150 mg Q2W v Initial treatment period - Placebo Q2W

Number of subjects included in analysis	182
Analysis specification	Pre-specified
Analysis type	superiority[66]
P-value	< 0.001 [67]
Method	Repeated measurements model
Parameter estimate	Difference of least square means
Point estimate	-5.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	-7.9
upper limit	-3

Notes:

[66] - The statistical test was not controlled for multiplicity.

[67] - Based on the primary analysis of the primary estimand 'hypothetical'.

Secondary: Tralokinumab Serum Trough Concentration at Week 16

End point title	Tralokinumab Serum Trough Concentration at Week 16[68]

End point description:

Serum samples for determination of tralokinumab concentrations were analysed by a laboratory using a validated bioanalytical method.

End point type	Secondary

End point timeframe:

At Week 16

Notes:

[68] - 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: Tralokinumab serum trough concentration was not analysed for subjects who were not randomised to tralokinumab.

End point values	Initial treatment period - Tralokinumab 300 mg Q2W	Initial treatment period - Tralokinumab 150 mg Q2W		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	89	87		
Units: microgram/mL				
geometric mean (geometric coefficient of variation)	105.7 (± 39.0)	56.4 (± 35.4)		

Statistical analyses

No statistical analyses for this end point

Secondary: Subjects With Investigator’s Global Assessment (IGA) Score of 0 (Clear) or 1 (Almost Clear) at Week 52 Among Subjects With IGA Score of 0 or 1 at Week 16 After Initial Randomisation to Tralokinumab and Without Use of Rescue From Week 2 to Week 16

End point title	Subjects With Investigator’s Global Assessment (IGA) Score of 0 (Clear) or 1 (Almost Clear) at Week 52 Among Subjects With IGA Score of 0 or 1 at Week 16 After Initial Randomisation to

	Tralokinumab and Without Use of Rescue From Week 2 to Week 16

End point description:

The IGA is an instrument used in clinical trials to rate the severity of the subject's global AD and is based on a 5-point scale ranging from 0 (clear) to 4 (severe).

End point type	Secondary

End point timeframe:

At Week 52

End point values	Maintenance Treatment Period - Tralokinumab 300 mg Q2W	Maintenance Treatment Period - Tralokinumab 300 mg Q4W	Maintenance Treatment Period - Tralokinumab 150 mg Q2W	Maintenance Treatment Period - Tralokinumab 150 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	11	13	12	14
Units: Number of subjects with response	4	7	6	7

Statistical analyses

No statistical analyses for this end point

Secondary: Subjects With at Least 75% Reduction in Eczema Area and Severity Index (EASI75) at Week 52 Among Subjects With at Least 75% Reduction in EASI at Week 16 After Initial Randomisation to Tralokinumab and Without Use of Rescue From Week 2 to Week 16

End point title	Subjects With at Least 75% Reduction in Eczema Area and Severity Index (EASI75) at Week 52 Among Subjects With at Least 75% Reduction in EASI at Week 16 After Initial Randomisation to Tralokinumab and Without Use of Rescue From Week 2 to Week 16

End point description:

The EASI is a validated measure used in clinical practice and clinical trials to assess the severity and extent of AD. The EASI is a composite index with scores ranging from 0 to 72, with higher values indicating more severe and/or more extensive condition.

End point type	Secondary

End point timeframe:

At Week 52

End point values	Maintenance Treatment Period - Tralokinumab 300 mg Q2W	Maintenance Treatment Period - Tralokinumab 300 mg Q4W	Maintenance Treatment Period - Tralokinumab 150 mg Q2W	Maintenance Treatment Period - Tralokinumab 150 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	11	13	12	14
Units: Number of subjects with response	5	7	7	7

Statistical analyses

No statistical analyses for this end point

Secondary: Tralokinumab Serum Trough Concentration at Week 66

End point title	Tralokinumab Serum Trough Concentration at Week 66

End point description:

Serum samples for determination of tralokinumab concentrations were analysed by a laboratory using a validated bioanalytical method.

End point type	Secondary

End point timeframe:

At Week 66

End point values	Open-label Treatment - Tralokinumab 300 mg Q2W + optional TCS	Maintenance Treatment Period - Tralokinumab 300 mg Q2W	Maintenance Treatment Period - Tralokinumab 300 mg Q4W	Maintenance Treatment Period - Tralokinumab 150 mg Q2W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	234	1	5	4
Units: microgram/mL				
geometric mean (geometric coefficient of variation)	4.4 (± 136.5)	5.9 (± 0)	1.0 (± 458.0)	1.5 (± 168.6)

End point values	Maintenance Treatment Period - Tralokinumab 150 mg Q4W			
Subject group type	Reporting group			
Number of subjects analysed	3			
Units: microgram/mL				
geometric mean (geometric coefficient of variation)	2.6 (± 75.6)			

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information	
Timeframe for reporting adverse events:	
Timeframe for AE	
Adverse event reporting additional description:	
AE additional description	
Assessment type	Non-systematic

Dictionary used	
Dictionary name	MedDRA
Dictionary version	20

Reporting groups	
Reporting group title	Initial Treatment Period - Tralokinumab 300 Q2W
Reporting group description: -	
Reporting group title	Initial Treatment Period - Tralokinumab 150 Q2W
Reporting group description: -	
Reporting group title	Initial Treatment Period - Placebo
Reporting group description: -	
Reporting group title	Maintenance Treatment Period - Tralokinumab 300 Q2W
Reporting group description: -	
Reporting group title	Maintenance Treatment Period - Tralokinumab 300 Q4W
Reporting group description: -	
Reporting group title	Maintenance Treatment Period - Tralokinumab 150 Q2W
Reporting group description: -	
Reporting group title	Maintenance Treatment Period - Tralokinumab 150 Q4W
Reporting group description: -	
Reporting group title	Maintenance Treatment Period - Placebo
Reporting group description: -	
Reporting group title	Open-label Treatment - Tralokinumab 300 Q2W + optional TCS
Reporting group description: -	
Reporting group title	Safety Follow-up
Reporting group description: -	

Serious adverse events	Initial Treatment Period - Tralokinumab 300 Q2W	Initial Treatment Period - Tralokinumab 150 Q2W	Initial Treatment Period - Placebo
Total subjects affected by serious adverse events			
subjects affected / exposed	1 / 97 (1.03%)	3 / 98 (3.06%)	5 / 94 (5.32%)
number of deaths (all causes)	0	0	0
number of deaths resulting from adverse events	0	0	0
Injury, poisoning and procedural complications			
Concussion			

subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Intentional overdose			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Radius fracture			
subjects affected / exposed	1 / 97 (1.03%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	0 / 94 (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
Immune system disorders			
Anaphylactic reaction			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Gastritis			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Respiratory, thoracic and mediastinal disorders			
Acute respiratory failure			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Asthma			

subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Dermatitis atopic			
subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	1 / 94 (1.06%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Psychiatric disorders			
Anorexia nervosa			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Obsessive-compulsive disorder			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Suicidal ideation			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Renal and urinary disorders			
Renal injury			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Appendicitis perforated			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			

subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	0 / 94 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infectious mononucleosis			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Serious adverse events	Maintenance Treatment Period - Tralokinumab 300 Q2W	Maintenance Treatment Period - Tralokinumab 300 Q4W	Maintenance Treatment Period - Tralokinumab 150 Q2W
Total subjects affected by serious adverse events			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
number of deaths (all causes)	0	0	0
number of deaths resulting from adverse events	0	0	0
Injury, poisoning and procedural complications			
Concussion			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Intentional overdose			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Radius fracture			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Immune system disorders			
Anaphylactic reaction			

subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Gastritis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Respiratory, thoracic and mediastinal disorders			
Acute respiratory failure			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Asthma			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Dermatitis atopic			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Psychiatric disorders			
Anorexia nervosa			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Obsessive-compulsive disorder			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Suicidal ideation			

subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Renal and urinary disorders			
Renal injury			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Appendicitis perforated			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infectious mononucleosis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Serious adverse events	Maintenance Treatment Period - Tralokinumab 150 Q4W	Maintenance Treatment Period - Placebo	Open-label Treatment - Tralokinumab 300 Q2W + optional TCS
Total subjects affected by serious adverse events			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	7 / 234 (2.99%)
number of deaths (all causes)	0	0	0
number of deaths resulting from adverse events	0	0	0
Injury, poisoning and procedural complications			
Concussion			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Intentional overdose			

subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Radius fracture			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Immune system disorders			
Anaphylactic reaction			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Gastritis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Respiratory, thoracic and mediastinal disorders			
Acute respiratory failure			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Asthma			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Dermatitis atopic			

subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Psychiatric disorders			
Anorexia nervosa			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Obsessive-compulsive disorder			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Suicidal ideation			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Renal and urinary disorders			
Renal injury			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Appendicitis perforated			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infectious mononucleosis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Serious adverse events	Safety Follow-up		
Total subjects affected by serious adverse events			
subjects affected / exposed	3 / 234 (1.28%)		
number of deaths (all causes)	0		
number of deaths resulting from adverse events	0		
Injury, poisoning and procedural complications			
Concussion			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Intentional overdose			
subjects affected / exposed	1 / 234 (0.43%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Radius fracture			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Immune system disorders			
Anaphylactic reaction			
subjects affected / exposed	1 / 234 (0.43%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastrointestinal disorders			
Gastritis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			

Acute respiratory failure			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Asthma			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Skin and subcutaneous tissue disorders			
Dermatitis atopic			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Psychiatric disorders			
Anorexia nervosa			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Obsessive-compulsive disorder			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Suicidal ideation			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Renal and urinary disorders			
Renal injury			
subjects affected / exposed	1 / 234 (0.43%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
Appendicitis perforated			

subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Cellulitis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Infectious mononucleosis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		

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

Non-serious adverse events	Initial Treatment Period - Tralokinumab 300 Q2W	Initial Treatment Period - Tralokinumab 150 Q2W	Initial Treatment Period - Placebo
Total subjects affected by non-serious adverse events			
subjects affected / exposed	44 / 97 (45.36%)	47 / 98 (47.96%)	36 / 94 (38.30%)
Injury, poisoning and procedural complications			
Inappropriate schedule of drug administration			
subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	0 / 94 (0.00%)
occurrences (all)	0	1	0
Procedural anxiety			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Wrong drug administered			
subjects affected / exposed	1 / 97 (1.03%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	1	0	0
Nervous system disorders			
Headache			
subjects affected / exposed	6 / 97 (6.19%)	5 / 98 (5.10%)	3 / 94 (3.19%)
occurrences (all)	6	5	3
Migraine			

subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences (all)	0	0	1
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	0 / 97 (0.00%)	4 / 98 (4.08%)	4 / 94 (4.26%)
occurrences (all)	0	4	4
Injection site reaction			
subjects affected / exposed	2 / 97 (2.06%)	6 / 98 (6.12%)	0 / 94 (0.00%)
occurrences (all)	3	9	0
Malaise			
subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	0 / 94 (0.00%)
occurrences (all)	0	2	0
Immune system disorders			
Hypersensitivity			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Eye disorders			
Cataract			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Conjunctivitis allergic			
subjects affected / exposed	2 / 97 (2.06%)	2 / 98 (2.04%)	2 / 94 (2.13%)
occurrences (all)	2	2	3
Respiratory, thoracic and mediastinal disorders			
Oropharyngeal pain			
subjects affected / exposed	4 / 97 (4.12%)	1 / 98 (1.02%)	3 / 94 (3.19%)
occurrences (all)	4	2	3
Rhinorrhoea			
subjects affected / exposed	1 / 97 (1.03%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences (all)	1	0	1
Skin and subcutaneous tissue disorders			
Acne			
subjects affected / exposed	3 / 97 (3.09%)	0 / 98 (0.00%)	4 / 94 (4.26%)
occurrences (all)	3	0	4
Dermatitis allergic			

subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Dermatitis atopic			
subjects affected / exposed	7 / 97 (7.22%)	12 / 98 (12.24%)	11 / 94 (11.70%)
occurrences (all)	7	16	15
Dermatitis contact			
subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	0 / 94 (0.00%)
occurrences (all)	0	1	0
Psychiatric disorders			
Abnormal behaviour			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Attention deficit/hyperactivity disorder			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Endocrine disorders			
Adrenal insufficiency			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Musculoskeletal and connective tissue disorders			
Bursitis			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Infections and infestations			
Acute sinusitis			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences (all)	0	0	1
Bacterial vaginosis			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Conjunctivitis			
subjects affected / exposed	0 / 97 (0.00%)	2 / 98 (2.04%)	0 / 94 (0.00%)
occurrences (all)	0	2	0
Furuncle			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0

Herpes zoster			
subjects affected / exposed	0 / 97 (0.00%)	1 / 98 (1.02%)	0 / 94 (0.00%)
occurrences (all)	0	1	0
Infectious mononucleosis			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	0 / 94 (0.00%)
occurrences (all)	0	0	0
Influenza			
subjects affected / exposed	2 / 97 (2.06%)	2 / 98 (2.04%)	1 / 94 (1.06%)
occurrences (all)	2	2	1
Oral herpes			
subjects affected / exposed	0 / 97 (0.00%)	0 / 98 (0.00%)	1 / 94 (1.06%)
occurrences (all)	0	0	1
Pharyngitis			
subjects affected / exposed	0 / 97 (0.00%)	2 / 98 (2.04%)	4 / 94 (4.26%)
occurrences (all)	0	2	4
Upper respiratory tract infection			
subjects affected / exposed	11 / 97 (11.34%)	8 / 98 (8.16%)	4 / 94 (4.26%)
occurrences (all)	11	10	5
Viral upper respiratory tract infection			
subjects affected / exposed	12 / 97 (12.37%)	19 / 98 (19.39%)	8 / 94 (8.51%)
occurrences (all)	16	22	10

Non-serious adverse events	Maintenance Treatment Period - Tralokinumab 300 Q2W	Maintenance Treatment Period - Tralokinumab 300 Q4W	Maintenance Treatment Period - Tralokinumab 150 Q2W
Total subjects affected by non-serious adverse events			
subjects affected / exposed	7 / 11 (63.64%)	6 / 13 (46.15%)	7 / 12 (58.33%)
Injury, poisoning and procedural complications			
Inappropriate schedule of drug administration			
subjects affected / exposed	0 / 11 (0.00%)	1 / 13 (7.69%)	0 / 12 (0.00%)
occurrences (all)	0	1	0
Procedural anxiety			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Wrong drug administered			

subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
Nervous system disorders			
Headache			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
Migraine			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Injection site reaction			
subjects affected / exposed	0 / 11 (0.00%)	1 / 13 (7.69%)	0 / 12 (0.00%)
occurrences (all)	0	1	0
Malaise			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	6
Immune system disorders			
Hypersensitivity			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Eye disorders			
Cataract			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Conjunctivitis allergic			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	1
Respiratory, thoracic and mediastinal disorders			
Oropharyngeal pain			
subjects affected / exposed	0 / 11 (0.00%)	1 / 13 (7.69%)	0 / 12 (0.00%)
occurrences (all)	0	1	0
Rhinorrhoea			

subjects affected / exposed	0 / 11 (0.00%)	1 / 13 (7.69%)	0 / 12 (0.00%)
occurrences (all)	0	1	0
Skin and subcutaneous tissue disorders			
Acne			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	1
Dermatitis allergic			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	1
Dermatitis atopic			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	1
Dermatitis contact			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	1
Psychiatric disorders			
Abnormal behaviour			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Attention deficit/hyperactivity disorder			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
Endocrine disorders			
Adrenal insufficiency			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Musculoskeletal and connective tissue disorders			
Bursitis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
Infections and infestations			
Acute sinusitis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	2
Bacterial vaginosis			

subjects affected / exposed	0 / 11 (0.00%)	1 / 13 (7.69%)	0 / 12 (0.00%)
occurrences (all)	0	1	0
Conjunctivitis			
subjects affected / exposed	0 / 11 (0.00%)	1 / 13 (7.69%)	0 / 12 (0.00%)
occurrences (all)	0	1	0
Furuncle			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
Herpes zoster			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	0	0	0
Infectious mononucleosis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	0	0	1
Influenza			
subjects affected / exposed	2 / 11 (18.18%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	2	0	0
Oral herpes			
subjects affected / exposed	1 / 11 (9.09%)	0 / 13 (0.00%)	0 / 12 (0.00%)
occurrences (all)	1	0	0
Pharyngitis			
subjects affected / exposed	0 / 11 (0.00%)	0 / 13 (0.00%)	3 / 12 (25.00%)
occurrences (all)	0	0	4
Upper respiratory tract infection			
subjects affected / exposed	2 / 11 (18.18%)	0 / 13 (0.00%)	1 / 12 (8.33%)
occurrences (all)	2	0	2
Viral upper respiratory tract infection			
subjects affected / exposed	2 / 11 (18.18%)	1 / 13 (7.69%)	1 / 12 (8.33%)
occurrences (all)	2	1	2

Non-serious adverse events	Maintenance Treatment Period - Tralokinumab 150 Q4W	Maintenance Treatment Period - Placebo	Open-label Treatment - Tralokinumab 300 Q2W + optional TCS
Total subjects affected by non-serious adverse events			
subjects affected / exposed	8 / 14 (57.14%)	4 / 6 (66.67%)	100 / 234 (42.74%)
Injury, poisoning and procedural complications			

Inappropriate schedule of drug administration			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	2 / 234 (0.85%)
occurrences (all)	0	0	2
Procedural anxiety			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences (all)	0	0	1
Wrong drug administered			
subjects affected / exposed	0 / 14 (0.00%)	1 / 6 (16.67%)	0 / 234 (0.00%)
occurrences (all)	0	1	0
Nervous system disorders			
Headache			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	12 / 234 (5.13%)
occurrences (all)	0	0	17
Migraine			
subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	2 / 234 (0.85%)
occurrences (all)	1	0	2
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Injection site reaction			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	10 / 234 (4.27%)
occurrences (all)	0	0	16
Malaise			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	2 / 234 (0.85%)
occurrences (all)	0	0	12
Immune system disorders			
Hypersensitivity			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences (all)	0	0	1
Eye disorders			
Cataract			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Conjunctivitis allergic			

subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	4 / 234 (1.71%)
occurrences (all)	1	0	4
Respiratory, thoracic and mediastinal disorders			
Oropharyngeal pain			
subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	4 / 234 (1.71%)
occurrences (all)	1	0	4
Rhinorrhoea			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	2 / 234 (0.85%)
occurrences (all)	0	0	2
Skin and subcutaneous tissue disorders			
Acne			
subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	3 / 234 (1.28%)
occurrences (all)	1	0	3
Dermatitis allergic			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Dermatitis atopic			
subjects affected / exposed	2 / 14 (14.29%)	1 / 6 (16.67%)	19 / 234 (8.12%)
occurrences (all)	2	1	26
Dermatitis contact			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences (all)	0	0	1
Psychiatric disorders			
Abnormal behaviour			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Attention deficit/hyperactivity disorder			
subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	1	0	0
Endocrine disorders			
Adrenal insufficiency			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Musculoskeletal and connective tissue disorders			

Bursitis			
subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	1 / 234 (0.43%)
occurrences (all)	1	0	1
Infections and infestations			
Acute sinusitis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Bacterial vaginosis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Conjunctivitis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	4 / 234 (1.71%)
occurrences (all)	0	0	6
Furuncle			
subjects affected / exposed	0 / 14 (0.00%)	1 / 6 (16.67%)	0 / 234 (0.00%)
occurrences (all)	0	1	0
Herpes zoster			
subjects affected / exposed	0 / 14 (0.00%)	1 / 6 (16.67%)	1 / 234 (0.43%)
occurrences (all)	0	1	1
Infectious mononucleosis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	0 / 234 (0.00%)
occurrences (all)	0	0	0
Influenza			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	3 / 234 (1.28%)
occurrences (all)	0	0	3
Oral herpes			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	6 / 234 (2.56%)
occurrences (all)	0	0	7
Pharyngitis			
subjects affected / exposed	0 / 14 (0.00%)	0 / 6 (0.00%)	6 / 234 (2.56%)
occurrences (all)	0	0	6
Upper respiratory tract infection			
subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	25 / 234 (10.68%)
occurrences (all)	1	0	34
Viral upper respiratory tract infection			

subjects affected / exposed	1 / 14 (7.14%)	0 / 6 (0.00%)	44 / 234 (18.80%)
occurrences (all)	1	0	60

Non-serious adverse events	Safety Follow-up		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	16 / 234 (6.84%)		
Injury, poisoning and procedural complications			
Inappropriate schedule of drug administration			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Procedural anxiety			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Wrong drug administered			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Nervous system disorders			
Headache			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Migraine			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Injection site reaction			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Malaise			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Immune system disorders			
Hypersensitivity			

subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Eye disorders			
Cataract			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Conjunctivitis allergic			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Respiratory, thoracic and mediastinal disorders			
Oropharyngeal pain			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Rhinorrhoea			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Skin and subcutaneous tissue disorders			
Acne			
subjects affected / exposed	1 / 234 (0.43%)		
occurrences (all)	1		
Dermatitis allergic			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Dermatitis atopic			
subjects affected / exposed	8 / 234 (3.42%)		
occurrences (all)	9		
Dermatitis contact			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Psychiatric disorders			
Abnormal behaviour			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Attention deficit/hyperactivity disorder			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		

Endocrine disorders			
Adrenal insufficiency			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Musculoskeletal and connective tissue disorders			
Bursitis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Infections and infestations			
Acute sinusitis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Bacterial vaginosis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Conjunctivitis			
subjects affected / exposed	2 / 234 (0.85%)		
occurrences (all)	2		
Furuncle			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Herpes zoster			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Infectious mononucleosis			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Influenza			
subjects affected / exposed	2 / 234 (0.85%)		
occurrences (all)	2		
Oral herpes			
subjects affected / exposed	0 / 234 (0.00%)		
occurrences (all)	0		
Pharyngitis			
subjects affected / exposed	1 / 234 (0.43%)		
occurrences (all)	1		

Upper respiratory tract infection subjects affected / exposed occurrences (all)	3 / 234 (1.28%) 3		
Viral upper respiratory tract infection subjects affected / exposed occurrences (all)	1 / 234 (0.43%) 2		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
12 June 2018	The main reason for this amendment was extension of the post-IMP observation period at the first 3 visits in the initial treatment period and in the in open label treatment period from 30 minutes to 2 hours.
06 February 2020	The main reason for this amendment was introduction of the possibility for eligible subjects in selected countries to continue in a long-term extension trial (ECZTEND). Subjects could enter ECZTEND from completion of the treatment period and up to 26 weeks from their last IMP injection in the present trial to the first IMP injection in ECZTEND.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported