



Clinical trial results:

Avelumab + Paclitaxel/ Ramucirumab as second line treatment in gastro-esophageal adenocarcinoma: a phase II trial of the AIO. The RAP-Trial.

Summary

| | |
|--------------------------|------------------|
| EudraCT number | 2018-002938-20 |
| Trial protocol | DE |
| Global end of trial date | 29 November 2022 |

Results information

| | |
|--------------------------------|-----------------|
| Result version number | v1 (current) |
| This version publication date | 27 January 2024 |
| First version publication date | 27 January 2024 |

Trial information

Trial identification

| | |
|-----------------------|--------------|
| Sponsor protocol code | AIO-STO-0218 |
|-----------------------|--------------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT03966118 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|---|
| Sponsor organisation name | Charité - Universitätsmedizin Berlin |
| Sponsor organisation address | Charitéplatz 1, Berlin, Germany, 10117 |
| Public contact | PD Dr. med. Peter Thuss-Patience, Charité-University Medicine Berlin – Campus Virchow Klinikum Med. Klinik m.S. Hämatologie, Onkologi, +49 30 450653193, peter.thuss@charite.de |
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Notes:

Paediatric regulatory details

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

Notes:

Results analysis stage

| | |
|--|------------------|
| Analysis stage | Final |
| Date of interim/final analysis | 14 December 2022 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 29 November 2022 |
| Global end of trial reached? | Yes |
| Global end of trial date | 29 November 2022 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

The primary clinical objective is to determine the efficacy of a standard second-line regimen (paclitaxel + ramucirumab) with avelumab in patients with metastatic gastro-oesophageal cancer in terms of overall survival rate (OSR) at 6 months (according to RECIST v1.1).

Protection of trial subjects:

The responsible investigator ensured that this study is conducted in agreement with either the Declaration of Helsinki (in its current version) or the laws and regulations in its current version. Safety assessments will include physical examinations including vital signs (blood pressure, heart rate), performance status (ECOG), clinical laboratory profile, concomitant medication and adverse events. All observed toxicities and side effects will be graded according to NCI CTCAE v5.0 (NCI 2018) for all patients. The adverse events will also be analysed in accordance to their relation to the study treatment. Treatment related serious adverse events rate (SAE), defined as SAEs considered possibly, probably or definitely related to treatment, will be determined.

Background therapy:

Second-line chemotherapy prolongs survival in metastatic gastro-esophageal cancer compared to best supportive care. In the RAINBOW trial (Wilke et al. 2014; Shitara et al. 2016) ramucirumab + paclitaxel was compared to placebo + paclitaxel and showed an improvement of response rate and overall survival. PD-1 and PD-L1 inhibitors are a very promising treatment option in gastro-esophageal adenocarcinoma, but currently there are no treatment options incorporating PD-1 blockade in the second line setting in gastro-esophageal adenocarcinomas.

Due to these reasons a combination of PD-L1 inhibition with the best established second line chemotherapy (paclitaxel+ramucirumab) is the logical next step to improve survival of metastatic gastric cancer patients and to establish PD-L1 blockade in the second line setting in combination with the currently available best second line regimen.

Evidence for comparator: -

| | |
|---|---------------|
| Actual start date of recruitment | 20 March 2019 |
| 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 | Germany: 60 |
| Worldwide total number of subjects | 60 |
| EEA total number of subjects | 60 |

Notes:

Subjects enrolled per age group

| | |
|---|----|
| In utero | 0 |
| Preterm newborn - gestational age < 37 wk | 0 |
| Newborns (0-27 days) | 0 |
| Infants and toddlers (28 days-23 months) | 0 |
| Children (2-11 years) | 0 |
| Adolescents (12-17 years) | 0 |
| Adults (18-64 years) | 30 |
| From 65 to 84 years | 30 |
| 85 years and over | 0 |

Subject disposition

Recruitment

Recruitment details:

The study was conducted at 13 study sites in Germany, between Date (15/05/2019) and Date (06/11/2020). Only in 10 study sites were patients recruited.

Pre-assignment

Screening details:

According to the inclusion and exclusion criteria gastric/GEJ adenocarcinoma adult patients with documented objective radiological or clinical disease progression during or within 6 months of the last dose of first-line platinum and fluoropyrimidine doublet with or without anthracycline, docetaxel or trastuzumab were 60 patients recruited.

Period 1

| | |
|------------------------------|--------------------------------|
| Period 1 title | overall trial (overall period) |
| Is this the baseline period? | Yes |
| Allocation method | Not applicable |
| Blinding used | Not blinded |

Blinding implementation details:

This is a single arm, multicenter phase II trial designed to assess the clinical performance of avelumab in combination with paclitaxel and ramucirumab as second-line treatment in patients with gastric or gastro-oesophageal junction adenocarcinoma.

Arms

| | |
|-----------|----------------------------|
| Arm title | Standard Regime + Avelumab |
|-----------|----------------------------|

Arm description:

This is a single arm, multicenter phase II trial designed to assess the clinical performance of avelumab in combination with paclitaxel and ramucirumab as second-line treatment in patients with gastric or gastro-oesophageal junction adenocarcinoma. The dose of the therapy is dependent upon the patient's baseline body weight in kilograms and the body surface. Premedication 30 to 60 minutes prior to the first 4 infusions of avelumab is mandatory. A premedication with antihistamine (for example 4 mg dimetindenmaleat), H2 blocker (for example 50mg ranitidin), 500 mg paracetamol i.v. or oral, 10 mg dexamethason before treatment infusion. Avelumab should be administered in a setting that allows for immediate access to an intensive care unit or equivalent environment. After administration of avelumab there must be a break of at least 30 minutes before therapy with ramucirumab is given. Also for ramucirumab a premedication with an antihistamine is recommended.

| | |
|--|---------------------------------------|
| Arm type | Experimental |
| Investigational medicinal product name | AVELUMAB |
| Investigational medicinal product code | SUB180078 |
| Other name | Bavencio |
| Pharmaceutical forms | Infusion |
| Routes of administration | Concentrate for solution for infusion |

Dosage and administration details:

Avelumab at a dose of 10 mg/kg will be given by i.v. infusion over 60 to 90 min on day 1 and 15 of a 28-day cycle.

| | |
|--|---------------------------------------|
| Investigational medicinal product name | Ramucirumab |
| Investigational medicinal product code | SUB32795 |
| Other name | Cyramza |
| Pharmaceutical forms | Infusion |
| Routes of administration | Concentrate for solution for infusion |

Dosage and administration details:

Ramucirumab at dose of 8 mg/kg will be given by i.v. infusion over 60 minutes on day 1 and 15 of a 28-day cycle.

| | |
|--|---------------------------------------|
| Investigational medicinal product name | Paclitaxel |
| Investigational medicinal product code | SUB09583MIG |
| Other name | |
| Pharmaceutical forms | Infusion |
| Routes of administration | Concentrate for solution for infusion |

Dosage and administration details:

Paclitaxel at a dose of 80 mg/m² will be given by i.v. infusion over 60 minutes on day 1, 8 and 15 of a 28-day cycle.

| Number of subjects in period 1 | Standard Regime + Avelumab |
|---------------------------------------|----------------------------|
| Started | 60 |
| Completed | 40 |
| Not completed | 20 |
| Adverse event, serious fatal | 5 |
| Consent withdrawn by subject | 1 |
| Physician decision | 2 |
| progress disease | 12 |

Baseline characteristics

Reporting groups

| | |
|-----------------------|---------------|
| Reporting group title | overall trial |
|-----------------------|---------------|

Reporting group description: -

| Reporting group values | overall trial | Total | |
|---|---------------|-------|--|
| Number of subjects | 60 | 60 | |
| Age categorical | | | |
| Units: Subjects | | | |
| In utero | 0 | 0 | |
| Preterm newborn infants (gestational age < 37 wks) | 0 | 0 | |
| Newborns (0-27 days) | 0 | 0 | |
| Infants and toddlers (28 days-23 months) | 0 | 0 | |
| Children (2-11 years) | 0 | 0 | |
| Adolescents (12-17 years) | 0 | 0 | |
| Adults (18-64 years) | 30 | 30 | |
| From 65-84 years | 30 | 30 | |
| 85 years and over | 0 | 0 | |
| Gender categorical | | | |
| Units: Subjects | | | |
| Female | 12 | 12 | |
| Male | 48 | 48 | |

End points

End points reporting groups

| | |
|--|----------------------------|
| Reporting group title | Standard Regime + Avelumab |
| Reporting group description: | |
| <p>This is a single arm, multicenter phase II trial designed to assess the clinical performance of avelumab in combination with paclitaxel and ramucirumab as second-line treatment in patients with gastric or gastro-oesophageal junction adenocarcinoma. The dose of the therapy is dependent upon the patient's baseline body weight in kilograms and the body surface. Premedication 30 to 60 minutes prior to the first 4 infusions of avelumab is mandatory. A premedication with antihistamine (for example 4 mg dimetindenmaleat), H2 blocker (for example 50mg ranitidin), 500 mg paracetamol i.v. or oral, 10 mg dexamethason before treatment infusion. Avelumab should be administered in a setting that allows for immediate access to an intensive care unit or equivalent environment After administration of avelumab there must be a break of at least 30 minutes before therapy with ramucirumab is given. Also for ramucirumab a premedication with an antihistamine is recommended.</p> | |

Primary: survival (OS) rate at 6 month

| | |
|---|--|
| End point title | survival (OS) rate at 6 month ^[1] |
| End point description: | |
| End point type | Primary |
| End point timeframe: | |
| <p>The Overall Survival Rate at 6 months (primary endpoint) will be determined by the proportion of ITT patients being alive 6 months after treatment start with first day first cycle divided by the total number of ITT patients.</p> | |

Notes:

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

Justification: If p values are calculated (e.g. for comparison of subgroups), they will be presented explicitly without referring to hypotheses or a significance level. All p values will be two-sided. Patients with higher versus lower than median T cell repertoire richness showed an elevated median OS of 20.4 compared to 8.3 months (HR 0.43, 95% CI 0.23-0.81; p=0.008).

Patients with lower versus higher than median cfDNA burden: median OS of 19.2 compared to 7.3 months (HR 0.30, 95% CI 0.16-0.59; p<0.001).

| End point values | Standard Regime + Avelumab | | | |
|--|----------------------------|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 59 | | | |
| Units: months | | | | |
| number (confidence interval 95%) | | | | |
| Overall survival rate at 6 months (H0≤50%, H1≥65%) | 71.2 (61.5 to 83.7) | | | |
| median OS (ITT) | 10.6 (8.4 to 12.8) | | | |
| patients with PD-L1 CPS<5 | 9.4 (7.2 to 11.7) | | | |
| patients PD-L1 CPS≥5 | 14.0 (6.0 to 22.1) | | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

During the course of the study all AEs and SAEs should be proactively followed up for each subject.

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

Dictionary used

| | |
|-----------------|-------|
| Dictionary name | CTCAE |
|-----------------|-------|

| | |
|--------------------|-----|
| Dictionary version | 5.0 |
|--------------------|-----|

Reporting groups

| | |
|-----------------------|----------------------------|
| Reporting group title | Standard Regime + Avelumab |
|-----------------------|----------------------------|

Reporting group description: -

| Serious adverse events | Standard Regime + Avelumab | | |
|---|-------------------------------|--|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 21 / 59 (35.59%) | | |
| number of deaths (all causes) | 7 | | |
| number of deaths resulting from adverse events | 0 | | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| hematemesis | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Meningeosis carcinomatosa | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 1 | | |
| bleeding brain metastasis | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Vascular disorders | | | |
| thromboembolic event | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | |
|--|--|--|--|
| General disorders and administration site conditions | | | |
| fever | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Enterothorax | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Pleural effusion | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 1 | | |
| Investigations | | | |
| ALT increased | Additional description: Alanine transaminase (ALT) | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Neutrophil count decreased | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Injury, poisoning and procedural complications | | | |
| port/ catheter related infection | | | |
| subjects affected / exposed | 4 / 59 (6.78%) | | |
| occurrences causally related to treatment / all | 0 / 4 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| obstruction tracheal stent | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Nervous system disorders | | | |

| | | | |
|--|--|--|--|
| Peripheral sensory neuropathy subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Blood and lymphatic system disorders | | | |
| Febrile neutropenia | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Ear and labyrinth disorders | | | |
| Vertigo | Additional description: worsening of vertigo | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Gastrointestinal disorders | | | |
| Ileus | Additional description: Ileus/ Ileua of small intestine/Subileus | | |
| subjects affected / exposed | 3 / 59 (5.08%) | | |
| occurrences causally related to treatment / all | 0 / 3 | | |
| deaths causally related to treatment / all | 0 / 1 | | |
| Vomiting | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Duodenal stenosis | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Nausea | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Dysphagia | Additional description: esophagial thrush | | |

| | | | |
|---|-------------------------------------|--|--|
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| oral hemorrhage | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Pancreatitis | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Abdominal pain | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| mucositis | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Renal and urinary disorders | | | |
| Hematuria | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Musculoskeletal and connective tissue disorders | | | |
| Back pain | | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |
| Neck pain | Additional description: Cervicalgie | | |
| subjects affected / exposed | 1 / 59 (1.69%) | | |
| occurrences causally related to treatment / all | 0 / 1 | | |
| deaths causally related to treatment / all | 0 / 0 | | |

| | | | |
|--|-----------------------------------|--|--|
| Infections and infestations Pneumonia subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 6 / 59 (10.17%) 0 / 6 0 / 1 | | |
| sepsis (abdominal/unknown focus) subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 3 / 59 (5.08%) 0 / 3 0 / 1 | | |
| Urinary tract infection subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 1 / 59 (1.69%) 0 / 1 0 / 0 | | |
| Bronchitis subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 1 / 59 (1.69%) 0 / 1 0 / 0 | | |
| Metabolism and nutrition disorders Hyperglycaemia subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all | 1 / 59 (1.69%) 0 / 1 0 / 0 | | |

Frequency threshold for reporting non-serious adverse events: 4 %

| | | | |
|--|----------------------------|--|--|
| Non-serious adverse events | Standard Regime + Avelumab | | |
| Total subjects affected by non-serious adverse events subjects affected / exposed | 39 / 59 (66.10%) | | |
| Vascular disorders Hypertension subjects affected / exposed occurrences (all) | 8 / 59 (13.56%) 13 | | |
| General disorders and administration site conditions Fatigue | | | |

| | | | |
|--|---|--|--|
| subjects affected / exposed occurrences (all) | 35 / 59 (59.32%) 48 | | |
| Edema limbs subjects affected / exposed occurrences (all) | 8 / 59 (13.56%) 12 | | |
| Fever subjects affected / exposed occurrences (all) | 9 / 59 (15.25%) 10 | | |
| Pain | Additional description: Pain+ bone pain+ non chardiac chest pain + throat pain+ pain after radio frequency ablation | | |
| subjects affected / exposed occurrences (all) | 13 / 59 (22.03%) 13 | | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Epistaxis subjects affected / exposed occurrences (all) | 18 / 59 (30.51%) 23 | | |
| Dyspnea subjects affected / exposed occurrences (all) | 16 / 59 (27.12%) 17 | | |
| Cough subjects affected / exposed occurrences (all) | 5 / 59 (8.47%) 7 | | |
| Investigations | | | |
| Neutrophil count decreased subjects affected / exposed occurrences (all) | 20 / 59 (33.90%) 45 | | |
| White blood cell count decreased | Additional description: Leucopenia | | |
| subjects affected / exposed occurrences (all) | 20 / 59 (33.90%) 44 | | |
| CRP increased subjects affected / exposed occurrences (all) | 6 / 59 (10.17%) 7 | | |
| Nervous system disorders | | | |
| Peripheral motorsensory neuropathy subjects affected / exposed occurrences (all) | 26 / 59 (44.07%) 31 | | |
| Taste disorders | Additional description: Dysgeusia+ taste disorders | | |

| | | | |
|--|---|--|--|
| subjects affected / exposed occurrences (all) | 14 / 59 (23.73%) 16 | | |
| Paresthesia subjects affected / exposed occurrences (all) | 4 / 59 (6.78%) 6 | | |
| Blood and lymphatic system disorders Anemia subjects affected / exposed occurrences (all) | 14 / 59 (23.73%) 14 | | |
| Leucocytosis subjects affected / exposed occurrences (all) | 5 / 59 (8.47%) 6 | | |
| Ear and labyrinth disorders Vertigo subjects affected / exposed occurrences (all) | 12 / 59 (20.34%) 13 | | |
| | Additional description: Vertigo + Dizziness | | |
| Eye disorders vision disorders subjects affected / exposed occurrences (all) | 6 / 59 (10.17%) 8 | | |
| Gastrointestinal disorders Diarrhoea subjects affected / exposed occurrences (all) | 23 / 59 (38.98%) 42 | | |
| Nausea subjects affected / exposed occurrences (all) | 20 / 59 (33.90%) 27 | | |
| Mucositis oral subjects affected / exposed occurrences (all) | 14 / 59 (23.73%) 16 | | |
| Vomiting subjects affected / exposed occurrences (all) | 8 / 59 (13.56%) 15 | | |
| Dysphagia subjects affected / exposed occurrences (all) | 10 / 59 (16.95%) 13 | | |
| Constipation | | | |

| | | | |
|---|---|--|--|
| subjects affected / exposed | 11 / 59 (18.64%) | | |
| occurrences (all) | 11 | | |
| Abdominal/stomach/gastrointestinal pain | | | |
| subjects affected / exposed | 14 / 59 (23.73%) | | |
| occurrences (all) | 15 | | |
| Skin and subcutaneous tissue disorders | | | |
| Alopecia | | | |
| subjects affected / exposed | 23 / 59 (38.98%) | | |
| occurrences (all) | 26 | | |
| nail changes/ loss/ dystrophy | | | |
| subjects affected / exposed | 7 / 59 (11.86%) | | |
| occurrences (all) | 9 | | |
| Palmar-plantar erythrodysesthesia syndrome | | | |
| subjects affected / exposed | 5 / 59 (8.47%) | | |
| occurrences (all) | 5 | | |
| Rash acneiform | | | |
| subjects affected / exposed | 7 / 59 (11.86%) | | |
| occurrences (all) | 7 | | |
| Endocrine disorders | | | |
| Hypothyroidism | | | |
| subjects affected / exposed | 9 / 59 (15.25%) | | |
| occurrences (all) | 10 | | |
| Musculoskeletal and connective tissue disorders | | | |
| Pain in extremity | | | |
| subjects affected / exposed | 6 / 59 (10.17%) | | |
| occurrences (all) | 7 | | |
| Back pain | Additional description: Back+ Flank+back ribage+spinal disk area pain | | |
| subjects affected / exposed | 7 / 59 (11.86%) | | |
| occurrences (all) | 9 | | |
| Generalized muscle weakness | | | |
| subjects affected / exposed | 12 / 59 (20.34%) | | |
| occurrences (all) | 14 | | |
| Infections and infestations | | | |
| Urinary tract infection | | | |

| | | | |
|--|------------------------|--|--|
| subjects affected / exposed occurrences (all) | 7 / 59 (11.86%) 8 | | |
| Rash (papulopustular/pustular) subjects affected / exposed occurrences (all) | 7 / 59 (11.86%) 7 | | |
| Metabolism and nutrition disorders Anorexia subjects affected / exposed occurrences (all) | 19 / 59 (32.20%) 21 | | |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|----------------|--|
| 16 April 2019 | late registration of additional study site |
| 23 July 2019 | late registration of additional study site |
| 08 August 2019 | update Study protocol version 1.2 |
| 27 July 2020 | update information about Avelimab Version 9, dated 03/06/2019 update Information about Paclitaxel and Ramucirumab (01/2020) |
| 29 July 2020 | update Investigator´s Brochure Version 11 |
| 13 June 2022 | Extension of the study duration until 31/12/2022 |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported