



## Clinical trial results:

### A Phase 2, Open-Label, Randomized, Multicenter Study to Evaluate the Efficacy and Safety of Pemigatinib Plus Pembrolizumab Versus Pemigatinib Alone Versus Standard of Care as First Line Treatment for Metastatic or Unresectable Urothelial Carcinoma in Cisplatin-Ineligible Participants Whose Tumors Express FGFR3 Mutation or Rearrangement (FIGHT-205)

#### Summary

EudraCT number	2019-000721-50
Trial protocol	ES BE DE FI FR PL AT PT HU BG GB IT
Global end of trial date	18 April 2021

#### Results information

Result version number	v1
This version publication date	02 April 2022
First version publication date	02 April 2022

#### Trial information

##### Trial identification

Sponsor protocol code	INCB 54828-205
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT04003610
WHO universal trial number (UTN)	-

Notes:

#### Sponsors

Sponsor organisation name	Incyte Corporation
Sponsor organisation address	1801 Augustine Cutoff Drive, Wilmington, United States, 19803
Public contact	Study Director, Incyte Corporation, 1 18554633463, medinfo@incyte.com
Scientific contact	Study Director, Incyte Corporation, 1 18554633463, medinfo@incyte.com

Notes:

#### Paediatric regulatory details

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

Notes:

## Results analysis stage

Analysis stage	Final
Date of interim/final analysis	18 April 2021
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	18 April 2021
Was the trial ended prematurely?	Yes

Notes:

## General information about the trial

Main objective of the trial:

The purpose of this study was to evaluate the safety and efficacy of pemigatinib plus pembrolizumab or pemigatinib alone versus the standard of care for participants with metastatic or unresectable urothelial carcinoma who were not eligible to receive cisplatin, were harboring FGFR3 mutation or rearrangement, and who had not received prior treatment.

Protection of trial subjects:

This study was performed in accordance with ethical principles that have their origin in the Declaration of Helsinki and conducted in adherence to the study Protocol, applicable Good Clinical Practices, and applicable laws and country-specific regulations in which the study was being conducted. An IDMC was formed, but because of slow recruitment and low enrollment (n=7), it was never convened.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	14 May 2020
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	Italy: 2
Country: Number of subjects enrolled	Spain: 1
Country: Number of subjects enrolled	France: 1
Country: Number of subjects enrolled	Japan: 3
Worldwide total number of subjects	7
EEA total number of subjects	4

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)	1
From 65 to 84 years	6
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details: -

### Pre-assignment

Screening details:

This study was conducted (enrolled participants) at 7 sites located in France, Italy, Spain, and Japan.

### Period 1

Period 1 title	Overall Study (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Not blinded

### Arms

Are arms mutually exclusive?	Yes
<b>Arm title</b>	Pemigatinib 13.5 mg plus pembrolizumab 200 mg

Arm description:

Pemigatinib was self-administered at 13.5 mg QD PO until disease progression during each 21-day treatment cycle. Participants not reaching the target serum phosphate level ( $> 5.5$  mg/dL) during Cycle 1 despite being study drug compliant increased the daily pemigatinib dose to 18 mg starting at Cycle 2 as long as they were not experiencing an ongoing Grade 2 or higher treatment-related AE. Pembrolizumab 200 mg was administered intravenously (IV) on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

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

Dosage and administration details:

13.5 mg daily dose; administered once a day every day for each 21-day cycle

Investigational medicinal product name	Pembrolizumab
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Concentrate for solution for infusion
Routes of administration	Intravenous use

Dosage and administration details:

200 mg daily; administered on Day 1 of each 21-day cycle for up to 35 cycles

<b>Arm title</b>	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab
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Arm description:

Participants received either gemcitabine plus carboplatin or pembrolizumab as standard of care. Participants received gemcitabine 1000 mg/meters squared (m<sup>2</sup>) IV over 30 minutes on Days 1 and 8 of each 3-week treatment cycle, followed by carboplatin (dosed to target area under the concentration-time curve [AUC] of 5 mg/milliliters [mL]/minute [min] or 4.5 mg/mL/min if required per local guidelines) on Day 1 or Day 2 of each 3-week treatment cycle. Treatment continued for 4 to 6 cycles (or per institutional standards) until disease progression or intolerable toxicity. Pembrolizumab 200 mg was administered IV on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

Arm type	Placebo
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Investigational medicinal product name	Gemcitabine
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder for solution for infusion
Routes of administration	Intravenous use

Dosage and administration details:

1000 mg/m<sup>2</sup> per administration; administered over 30 minutes on Days 1 and 8 of each 3-week cycle for up to 6 cycles (minimum of 4 cycles) in absence of progression or per institutional standard

Investigational medicinal product name	Carboplatin
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Concentrate for solution for infusion
Routes of administration	Intravenous use

Dosage and administration details:

AUC 5 mg/mL/min (or AUC 4.5 mg/mL/min if required per local guidelines); administered on Day 1 or Day 2 of each 21-day cycle for up to 6 cycles (minimum of 4 cycles) in absence of progression or per institutional standard

Number of subjects in period 1	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab
Started	1	6
Completed	0	0
Not completed	1	6
Adverse event, serious fatal	-	3
Study Terminated by Sponsor	-	3
Lost to follow-up	1	-

## Baseline characteristics

### Reporting groups

Reporting group title	Pemigatinib 13.5 mg plus pembrolizumab 200 mg
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Reporting group description:

Pemigatinib was self-administered at 13.5 mg QD PO until disease progression during each 21-day treatment cycle. Participants not reaching the target serum phosphate level ( $> 5.5$  mg/dL) during Cycle 1 despite being study drug compliant increased the daily pemigatinib dose to 18 mg starting at Cycle 2 as long as they were not experiencing an ongoing Grade 2 or higher treatment-related AE.

Pembrolizumab 200 mg was administered intravenously (IV) on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

Reporting group title	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab
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Reporting group description:

Participants received either gemcitabine plus carboplatin or pembrolizumab as standard of care.

Participants received gemcitabine 1000 mg/meters squared (m<sup>2</sup>) IV over 30 minutes on Days 1 and 8 of each 3-week treatment cycle, followed by carboplatin (dosed to target area under the concentration-time curve [AUC] of 5 mg/milliliters [mL]/minute [min] or 4.5 mg/mL/min if required per local guidelines) on Day 1 or Day 2 of each 3-week treatment cycle. Treatment continued for 4 to 6 cycles (or per institutional standards) until disease progression or intolerable toxicity. Pembrolizumab 200 mg was administered IV on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

Reporting group values	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab	Total
Number of subjects	1	6	7
Age Categorical			
Units: participants			
In Utero	0	0	0
Pre-term newborn - gestational age < 37 wk	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	0	1	1
Elderly (From 65-84 years)	1	5	6
Elderly 85 years and over	0	0	0
Sex: Female, Male			
Due to low participant enrollment in the pemigatinib 13.5 mg plus pembrolizumab 200 mg arm, data are not being reported, as doing so may risk participant identification.			
Units:			
Female	0	4	4
Male	0	2	2
Unknown or Not Reported	1	0	1
Race (NIH/OMB)			
Due to low participant enrollment in the pemigatinib 13.5 mg plus pembrolizumab 200 mg arm, data are not being reported, as doing so may risk participant identification.			
Units: Subjects			
American Indian or Alaska Native	0	0	0
Asian	0	3	3
Native Hawaiian or Other Pacific Islander	0	0	0
Black or African American	0	0	0

White	0	3	3
More than one race	0	0	0
Unknown or Not Reported	1	0	1
Ethnicity (NIH/OMB)			
Due to low participant enrollment in the pemigatinib 13.5 mg plus pembrolizumab 200 mg arm, data are not being reported, as doing so may risk participant identification.			
Units: Subjects			
Hispanic or Latino	0	0	0
Not Hispanic or Latino	0	5	5
Unknown or Not Reported	1	1	2

## End points

### End points reporting groups

Reporting group title	Pemigatinib 13.5 mg plus pembrolizumab 200 mg
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Reporting group description:

Pemigatinib was self-administered at 13.5 mg QD PO until disease progression during each 21-day treatment cycle. Participants not reaching the target serum phosphate level ( $> 5.5$  mg/dL) during Cycle 1 despite being study drug compliant increased the daily pemigatinib dose to 18 mg starting at Cycle 2 as long as they were not experiencing an ongoing Grade 2 or higher treatment-related AE. Pembrolizumab 200 mg was administered intravenously (IV) on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

Reporting group title	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab
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Reporting group description:

Participants received either gemcitabine plus carboplatin or pembrolizumab as standard of care. Participants received gemcitabine 1000 mg/meters squared (m<sup>2</sup>) IV over 30 minutes on Days 1 and 8 of each 3-week treatment cycle, followed by carboplatin (dosed to target area under the concentration-time curve [AUC] of 5 mg/milliliters [mL]/minute [min] or 4.5 mg/mL/min if required per local guidelines) on Day 1 or Day 2 of each 3-week treatment cycle. Treatment continued for 4 to 6 cycles (or per institutional standards) until disease progression or intolerable toxicity. Pembrolizumab 200 mg was administered IV on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

### Primary: Progression-free survival (PFS)

End point title	Progression-free survival (PFS) <sup>[1]</sup>
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End point description:

PFS was defined as the time from the randomization date until the date of disease progression (as measured by a blinded independent central review [BICR] per Response Evaluation Criteria in Solid Tumors version 1.1 [RECIST v1.1]) or death due to any cause, whichever occurred first.

End point type	Primary
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End point timeframe:

up to 130 days

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: The Sponsor made a decision unrelated to safety to halt study enrollment. Due to early termination of the study with only 7 participants, no analysis of this endpoint was done.

End point values	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[2]</sup>	0 <sup>[3]</sup>		
Units: days				
median (confidence interval 95%)	( to )	( to )		

Notes:

[2] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[3] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

### Statistical analyses

No statistical analyses for this end point

### Secondary: Overall survival (OS)



End point title	Overall survival (OS)
End point description:	
OS was defined as the time from the date of randomization until death due to any cause.	
End point type	Secondary
End point timeframe:	
up to 225 days	

<b>End point values</b>	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[4]</sup>	0 <sup>[5]</sup>		
Units: days				
median (confidence interval 95%)	( to )	( to )		

Notes:

[4] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[5] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

### Statistical analyses

No statistical analyses for this end point

### Secondary: Objective response rate (ORR)

End point title	Objective response rate (ORR)
End point description:	
ORR was defined as the proportion of participants with a best overall response of complete response (CR) or partial response (PR) per RECIST v1.1 (as measured by BICR).	
End point type	Secondary
End point timeframe:	
up to 148 days	

<b>End point values</b>	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	1 <sup>[6]</sup>	6 <sup>[7]</sup>		
Units: percentage of participants				
number (not applicable)	0	0		

Notes:

[6] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[7] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

### Statistical analyses

No statistical analyses for this end point

### Secondary: Duration of response (DOR)

End point title	Duration of response (DOR)
End point description: DOR was defined as the time from the date of the first assessment of CR or PR until the date of the first disease progression (per RECIST v1.1) or death, whichever occurred first (as measured by BICR).	
End point type	Secondary
End point timeframe: up to 148 days	

<b>End point values</b>	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[8]</sup>	0 <sup>[9]</sup>		
Units: days				
median (confidence interval 95%)	( to )	( to )		

Notes:

[8] - As measured by BICR, there were no responders; thus, DOR was not calculated.

[9] - As measured by BICR, there were no responders; thus, DOR was not calculated.

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of participants with treatment-emergent adverse events

End point title	Number of participants with treatment-emergent adverse events
End point description: A treatment-emergent adverse event was defined as an adverse event that was either reported for the first time or the worsening of a pre-existing event after the first dose of study drug until 30 days after the last dose of study drug.	
End point type	Secondary
End point timeframe: up to 178 days	

<b>End point values</b>	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	1	6		
Units: participants	1	6		

## Statistical analyses

No statistical analyses for this end point

### Secondary: EORTC QLQ-C30 score

End point title	EORTC QLQ-C30 score
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End point description:

The European Organization for the Research and Treatment of Cancer Core Quality of Life Questionnaire (EORTC QLQ-C30) contains 30 items and measures 5 functional dimensions (i.e., physical, role, emotional, cognitive, and social), 3 symptom items (i.e., fatigue, nausea/vomiting, and pain), 6 single items (i.e., dyspnea, sleep disturbance, appetite loss, constipation, diarrhea, and financial impact), and a global health and quality of life scale. For each scale and single item, a linear transformation was applied to standardize the scores between 0 (worst) and 100 (best) as described in the EORTC QLQ-C30 Scoring Manual.

End point type	Secondary
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End point timeframe:

up to 160 days

End point values	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[10]</sup>	0 <sup>[11]</sup>		
Units: scores on a scale				
arithmetic mean (standard deviation)	()	()		

Notes:

[10] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[11] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change from baseline in the EORTC QLQ-C30 score

End point title	Change from baseline in the EORTC QLQ-C30 score
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End point description:

The European Organization for the Research and Treatment of Cancer Core Quality of Life Questionnaire (EORTC QLQ-C30) contains 30 items and measures 5 functional dimensions (i.e., physical, role, emotional, cognitive, and social), 3 symptom items (i.e., fatigue, nausea/vomiting, and pain), 6 single items (i.e., dyspnea, sleep disturbance, appetite loss, constipation, diarrhea, and financial impact), and a global health and quality of life scale. For each scale and single item, a linear transformation was applied to standardize the scores between 0 (worst) and 100 (best) as described in the EORTC QLQ-C30 Scoring Manual.

End point type	Secondary
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End point timeframe:  
Baseline; up to 160 days

End point values	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[12]</sup>	0 <sup>[13]</sup>		
Units: scores on a scale				
arithmetic mean (standard deviation)	()	()		

Notes:

[12] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[13] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

### Statistical analyses

No statistical analyses for this end point

### Secondary: EQ-5D-5L score

End point title	EQ-5D-5L score
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End point description:

The EQ-5D-5L is a standardized instrument for use as a measure of health outcome. The EQ-5D-5L provides data for use in economic models and analyses including developing health utilities or quality adjusted life years. The 5 health state dimensions in this instrument include: mobility, self-care, usual activities, pain/discomfort, and anxiety/depression. Each dimension is rated on a 3-point scale from 1 (extreme problem) to 3 (no problem). The EQ-5D-5L also includes a graded (0 to 100) vertical visual analog scale on which the participant rates his or her general state of health at the time of the assessment. The EQ-5D-5L was to be completed by participants first before completing the EORTC QLQ-C30.

End point type	Secondary
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End point timeframe:

up to 160 days

End point values	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[14]</sup>	0 <sup>[15]</sup>		
Units: scores on a scale				
arithmetic mean (standard deviation)	()	()		

Notes:

[14] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[15] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

### Statistical analyses

No statistical analyses for this end point

## Secondary: Change from baseline in EQ-5D-5L score

End point title	Change from baseline in EQ-5D-5L score
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End point description:

The 5-level version of the EuroQol-5D (EQ-5D-5L) is a standardized instrument for use as a measure of health outcome. The EQ-5D-5L provides data for use in economic models and analyses including developing health utilities or quality adjusted life years. The 5 health state dimensions in this instrument include: mobility, self-care, usual activities, pain/discomfort, and anxiety/depression. Each dimension is rated on a 3-point scale from 1 (extreme problem) to 3 (no problem). The EQ-5D-5L also includes a graded (0 to 100) vertical visual analog scale on which the participant rates his or her general state of health at the time of the assessment. The EQ-5D-5L was to be completed by participants first before completing the EORTC QLQ-C30.

End point type	Secondary
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End point timeframe:

Baseline; up to 160 days

End point values	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	0 <sup>[16]</sup>	0 <sup>[17]</sup>		
Units: scores on a scale				
arithmetic mean (standard deviation)	()	()		

Notes:

[16] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

[17] - Due to low participant enrollment (n=7), efficacy analyses were not conducted.

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

up to 148 days

Adverse event reporting additional description:

Treatment-emergent adverse events, defined as adverse events that were either reported for the first time or the worsening of pre-existing events after the first dose of study drug until 30 days after the last dose of study drug, are reported for the Safety Population (all randomized participants who received at least one dose of study treatment).

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	16
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### Reporting groups

Reporting group title	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab
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Reporting group description:

Participants received either gemcitabine plus carboplatin or pembrolizumab as standard of care. Participants received gemcitabine 1000 mg/meters squared (m<sup>2</sup>) IV over 30 minutes on Days 1 and 8 of each 3-week treatment cycle, followed by carboplatin (dosed to target area under the concentration-time curve [AUC] of 5 mg/milliliters [mL]/minute [min] or 4.5 mg/mL/min if required per local guidelines) on Day 1 or Day 2 of each 3-week treatment cycle. Treatment continued for 4 to 6 cycles (or per institutional standards) until disease progression or intolerable toxicity. Pembrolizumab 200 mg was administered IV on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

Reporting group title	Pemigatinib 13.5 mg plus pembrolizumab 200 mg
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Reporting group description:

Pemigatinib was self-administered at 13.5 milligrams (mg) once a day (QD) orally (PO) until disease progression during each 21-day treatment cycle. Participants not reaching the target serum phosphate level (> 5.5 milligrams per deciliter [mg/dL]) during Cycle 1 despite being study drug compliant increased the daily pemigatinib dose to 18 mg starting at Cycle 2 as long as they were not experiencing an ongoing Grade 2 or higher treatment-related adverse event (AE). Pembrolizumab 200 mg was administered intravenously (IV) on Day 1 of each 21-day treatment cycle for up to 35 cycles or disease progression.

<b>Serious adverse events</b>	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	
Total subjects affected by serious adverse events			
subjects affected / exposed	1 / 6 (16.67%)	1 / 1 (100.00%)	
number of deaths (all causes)	3	0	
number of deaths resulting from adverse events	0	0	
Musculoskeletal and connective tissue disorders			
Bone pain			
subjects affected / exposed	0 / 6 (0.00%)	1 / 1 (100.00%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations			

COVID-19			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Frequency threshold for reporting non-serious adverse events: 0 %

<b>Non-serious adverse events</b>	Gemcitabine 1000 mg/m <sup>2</sup> plus carboplatin or pembrolizumab	Pemigatinib 13.5 mg plus pembrolizumab 200 mg	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	6 / 6 (100.00%)	1 / 1 (100.00%)	
Vascular disorders			
Vascular pain			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
General disorders and administration site conditions			
Asthenia			
subjects affected / exposed	2 / 6 (33.33%)	0 / 1 (0.00%)	
occurrences (all)	2	0	
Malaise			
subjects affected / exposed	2 / 6 (33.33%)	0 / 1 (0.00%)	
occurrences (all)	2	0	
Oedema peripheral			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Reproductive system and breast disorders			
Penile pain			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Respiratory, thoracic and mediastinal disorders			
Dyspnoea			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Psychiatric disorders			

Delirium subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Investigations Alanine aminotransferase increased subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	1 / 1 (100.00%) 1	
Aspartate aminotransferase increased subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	1 / 1 (100.00%) 1	
Blood alkaline phosphatase increased subjects affected / exposed occurrences (all)	2 / 6 (33.33%) 2	0 / 1 (0.00%) 0	
Platelet count decreased subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Nervous system disorders Neuropathy peripheral subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Blood and lymphatic system disorders Anaemia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Hypofibrinogenaemia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Neutropenia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Gastrointestinal disorders Stomatitis subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	1 / 1 (100.00%) 1	
Abdominal pain			



subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	2	0	
Cheilitis			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Constipation			
subjects affected / exposed	3 / 6 (50.00%)	0 / 1 (0.00%)	
occurrences (all)	3	0	
Diarrhoea			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Dry mouth			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Nausea			
subjects affected / exposed	2 / 6 (33.33%)	0 / 1 (0.00%)	
occurrences (all)	2	0	
Vomiting			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Hepatobiliary disorders			
Hypertransaminasaemia			
subjects affected / exposed	0 / 6 (0.00%)	1 / 1 (100.00%)	
occurrences (all)	0	1	
Skin and subcutaneous tissue disorders			
Erythema multiforme			
subjects affected / exposed	0 / 6 (0.00%)	1 / 1 (100.00%)	
occurrences (all)	0	1	
Pruritus			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Dry skin			
subjects affected / exposed	1 / 6 (16.67%)	0 / 1 (0.00%)	
occurrences (all)	1	0	
Musculoskeletal and connective tissue disorders			

Bone pain subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Infections and infestations			
Cellulitis subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Escherichia bacteraemia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Pyelonephritis subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Metabolism and nutrition disorders			
Hyperphosphataemia subjects affected / exposed occurrences (all)	0 / 6 (0.00%) 0	1 / 1 (100.00%) 1	
Decreased appetite subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Hyperkalaemia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	
Hypocalcaemia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1	0 / 1 (0.00%) 0	

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
17 April 2020	Changes were made to address requests by Health Authorities for certain changes as well as feedback from Scientific Steering Committee to help with enrollment of participants.

Notes:

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### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

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

The Sponsor made a decision unrelated to safety to halt study enrollment. Due to early termination of the study with only 7 participants, no analysis of efficacy endpoints was done.

Notes: