



Clinical trial results:

A Phase 3, Rollover Study to Evaluate the Safety of Long-term Treatment With Lumacaftor/Ivacaftor Combination Therapy in Subjects Aged 2 Years and Older With Cystic Fibrosis, Homozygous for the F508del-CFTR Mutation

Summary

EudraCT number	2019-003112-31
Trial protocol	Outside EU/EEA
Global end of trial date	17 July 2019

Results information

Result version number	v2 (current)
This version publication date	25 October 2020
First version publication date	01 February 2020
Version creation reason	

Trial information

Trial identification

Sponsor protocol code	VX16-809-116
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT03125395
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Vertex Pharmaceuticals Incorporated
Sponsor organisation address	50 Northern Avenue, Boston, Massachusetts, United States,
Public contact	Medical Monitor, Vertex Pharmaceuticals Incorporated, +1 617 341 6777, medicalinfo@vrtx.com
Scientific contact	Medical Monitor, Vertex Pharmaceuticals Incorporated, +1 617 341 6777, medicalinfo@vrtx.com

Notes:

Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	Yes
EMA paediatric investigation plan number(s)	EMA-001582-PIP01-13
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	20 August 2019
Is this the analysis of the primary completion data?	Yes
Primary completion date	17 July 2019
Global end of trial reached?	Yes
Global end of trial date	17 July 2019
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

To evaluate the long-term safety of lumacaftor (LUM)/ivacaftor (IVA) combination therapy in subjects aged 2 years and older with cystic fibrosis (CF), homozygous for F508del.

Protection of trial subjects:

The study was conducted in accordance with the ethical principles stated in the Declaration of Helsinki and the International Council on Harmonization (ICH) Guideline for Good Clinical Practice (GCP).

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	12 May 2017
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	Canada: 7
Country: Number of subjects enrolled	United States: 50
Worldwide total number of subjects	57
EEA total number of subjects	0

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)	57
Adolescents (12-17 years)	0
Adults (18-64 years)	0
From 65 to 84 years	0
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

This study was planned to have 2 cohorts: Treatment Cohort and Observational Cohort. Only the Treatment Cohort is presented in results as there were no subjects enrolled in the Observational Cohort.

Pre-assignment

Screening details:

This study was conducted in subjects with CF aged 2 years and older who participated in parent study VX15-809-115 Part B (NCT02797132).

Period 1

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

Arms

Arm title	LUM/IVA
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Arm description:

LUM/IVA granules or tablets were administered orally every 12 hours (subjects aged 2 through 5 years received LUM 100 milligram (mg)/IVA 125 mg granules or LUM 150 mg/IVA 188 mg granules based on body weight. Subjects ≥ 6 years of age were to receive LUM 200 mg/IVA 250 mg tablets). Doses were adjusted upward for changes in weight and age.

Arm type	Experimental
Investigational medicinal product name	LUM/IVA
Investigational medicinal product code	VX-809/VX-770
Other name	Lumacaftor/Ivacaftor
Pharmaceutical forms	Granules, Tablet
Routes of administration	Oral use

Dosage and administration details:

Subjects who received LUM/IVA every 12 hours.

Number of subjects in period 1	LUM/IVA
Started	57
Completed	47
Not completed	10
Physician decision	2
Commercial Drug is Available for Subject	5
Adverse Event	2
Withdrawal of Consent (Not Due to AE)	1

Baseline characteristics

Reporting groups

Reporting group title	LUM/IVA
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Reporting group description:

LUM/IVA granules or tablets were administered orally every 12 hours (subjects aged 2 through 5 years received LUM 100 milligram (mg)/IVA 125 mg granules or LUM 150 mg/IVA 188 mg granules based on body weight. Subjects ≥6 years of age were to receive LUM 200 mg/IVA 250 mg tablets). Doses were adjusted upward for changes in weight and age.

Reporting group values	LUM/IVA	Total	
Number of subjects	57	57	
Age categorical Units: Subjects			
Age continuous Units: months arithmetic mean standard deviation	43.2 ± 12.17	-	
Gender categorical Units: Subjects			
Female	28	28	
Male	29	29	
Ethnicity Units: Subjects			
Hispanic or Latino	3	3	
Not Hispanic or Latino	54	54	
Unknown or Not Reported	0	0	
Race Units: Subjects			
American Indian or Alaska Native	0	0	
Asian	0	0	
Native Hawaiian or Other Pacific Islander	0	0	
Black or African American	0	0	
White	56	56	
More than one race	0	0	
Unknown or Not Reported	1	1	

End points

End points reporting groups

Reporting group title	LUM/IVA
Reporting group description: LUM/IVA granules or tablets were administered orally every 12 hours (subjects aged 2 through 5 years received LUM 100 milligram (mg)/IVA 125 mg granules or LUM 150 mg/IVA 188 mg granules based on body weight. Subjects ≥ 6 years of age were to receive LUM 200 mg/IVA 250 mg tablets). Doses were adjusted upward for changes in weight and age.	

Primary: Safety as Assessed by Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs)

End point title	Safety as Assessed by Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs) ^[1]
End point description: Study 116 safety set included all subjects dosed in study 115B who were exposed to any amount of study drug in current study 116 treatment cohort.	
End point type	Primary
End point timeframe: Day 1 up to Week 98	

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: Only descriptive statistics were planned. No statistical comparisons were planned for primary safety endpoint.

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: subjects				
AEs	56			
SAEs	15			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Sweat Chloride

End point title	Absolute Change in Sweat Chloride
End point description: Sweat samples were collected using an approved collection device. Study 116 Full Analysis Set (FAS) included all subjects who were enrolled and exposed to any amount of study drug in current study 116.	
End point type	Secondary
End point timeframe: From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: millimole per liter (mmol/L)				
arithmetic mean (standard deviation)	-29.6 (\pm 12.7)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Body Mass Index (BMI)

End point title	Absolute Change in Body Mass Index (BMI)
End point description:	BMI was defined as weight in kilogram (kg) divided by height in square meter (m ²). Study 116 FAS.
End point type	Secondary
End point timeframe:	From Parent Study 115B Baseline at Week 96

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: kg/m ²				
arithmetic mean (standard deviation)	0.30 (\pm 1.21)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in BMI-for-age Z-score

End point title	Absolute Change in BMI-for-age Z-score
End point description:	BMI was defined as weight in kilograms divided by height in m ² . z-score is a statistical measure to describe whether a mean was above or below the standard. A z-score of 0 is equal to the mean and is considered normal. Lower numbers indicate values lower than the mean and higher numbers indicate values higher than the mean. Study 116 FAS.
End point type	Secondary
End point timeframe:	From Parent Study 115B Baseline at Week 96

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: z-score				
arithmetic mean (standard deviation)	0.27 (\pm 0.73)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Weight

End point title	Absolute Change in Weight
End point description: Study 116 FAS.	
End point type	Secondary
End point timeframe: From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: kg				
arithmetic mean (standard deviation)	6.0 (\pm 2.0)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Weight-for-age Z-score

End point title	Absolute Change in Weight-for-age Z-score
End point description: Z-score is a statistical measure to describe whether a mean was above or below the standard. A z-score of 0 is equal to the mean and is considered normal. Lower numbers indicate values lower than the mean and higher numbers indicate values higher than the mean. Study 116 FAS.	
End point type	Secondary
End point timeframe: From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: z-score				
arithmetic mean (standard deviation)	0.23 (± 0.56)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change From Baseline in Stature (Height)

End point title	Absolute Change From Baseline in Stature (Height)
End point description:	
Study 116 FAS.	
End point type	Secondary
End point timeframe:	
From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: centimeter				
arithmetic mean (standard deviation)	16.1 (± 2.3)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Stature-for-age Z-score

End point title	Absolute Change in Stature-for-age Z-score
End point description:	
Z-score is a statistical measure to describe whether a mean was above or below the standard. A z-score of 0 is equal to the mean and is considered normal. Lower numbers indicate values lower than the mean and higher numbers indicate values higher than the mean. Study 116 FAS.	
End point type	Secondary
End point timeframe:	
From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: z-score				
arithmetic mean (standard deviation)	0.07 (± 0.39)			

Statistical analyses

No statistical analyses for this end point

Secondary: Time-to-first Pulmonary Exacerbation

End point title	Time-to-first Pulmonary Exacerbation
End point description:	
Pulmonary exacerbation was defined as new or changed treatment with oral, inhaled, or intravenous antibiotics and fulfillment of pre-specified protocol-defined criteria. Study 115B FAS (N=60) included all subjects who were enrolled and exposed to any amount of study drug in parent study 115B. Here, 99999 represents "Not Available" as Upper limit of inter-quartile range could not be estimated because less than 75% of subjects had events.	
End point type	Secondary
End point timeframe:	
From Parent Study 115B Baseline through Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57 ^[2]			
Units: days				
median (inter-quartile range (Q1-Q3))	600.0 (98.0 to 99999)			

Notes:

[2] - Study 115B FAS included 60 subjects.

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Pulmonary Exacerbations

End point title	Number of Pulmonary Exacerbations
End point description:	
Pulmonary exacerbation was defined as new or changed treatment with oral, inhaled, or intravenous antibiotics and fulfillment of pre-specified protocol-defined criteria. Study 115B FAS.	
End point type	Secondary
End point timeframe:	
From Parent Study 115B Baseline through Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57 ^[3]			
Units: pulmonary exacerbation events	82			

Notes:

[3] - Study 115B FAS included 60 subjects.

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Cystic Fibrosis Related Hospitalizations

End point title	Number of Cystic Fibrosis Related Hospitalizations
End point description:	Study 115B FAS.
End point type	Secondary
End point timeframe:	From Parent Study 115B Baseline through Week 96

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57 ^[4]			
Units: hospitalizations	28			

Notes:

[4] - Study 115B FAS included 60 subjects.

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Fecal Elastase-1 (FE-1) Levels

End point title	Absolute Change in Fecal Elastase-1 (FE-1) Levels
End point description:	Study 116 FAS.
End point type	Secondary
End point timeframe:	From Parent Study 115B Baseline at Week 96

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: microgram per gram (mcg/g)				
arithmetic mean (standard deviation)	132.6 (± 174.2)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Immunoreactive Trypsinogen (IRT) Serum Levels

End point title	Absolute Change in Immunoreactive Trypsinogen (IRT) Serum Levels
End point description:	
Study 116 FAS.	
End point type	Secondary
End point timeframe:	
From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	57			
Units: nanogram per milliliter (ng/mL)				
arithmetic mean (standard deviation)	-108.5 (± 306.6)			

Statistical analyses

No statistical analyses for this end point

Secondary: Number of Subjects With Microbiology Culture Status (Positive or Negative)

End point title	Number of Subjects With Microbiology Culture Status (Positive or Negative)
End point description:	
Following microbial tests were performed: Burkholderia, Methicillin Resistant Staphylococcus Aureus (MRSA), Methicillin Susceptible Staphylococcus Aureus (MSSA), Pseudomonas Aeruginosa Muroid (P. Aeruginosa Muroid), P. Aeruginosa Non-Muroid, P. Aeruginosa Small Colony Variant and Stenotrophomonas Maltophilia. Study 116 FAS. Here "Subject analysed" signifies those subjects who were evaluated for this outcome at Week 96.	
End point type	Secondary
End point timeframe:	
Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	46			
Units: Subjects				
Burkholderia (Positive)	0			
Burkholderia (Negative)	46			
MRSA (Positive)	4			
MRSA (Negative)	42			
MSSA (Positive)	15			
MSSA (Negative)	31			
P. Aeruginosa Muroid (Positive)	0			
P. Aeruginosa Muroid (Negative)	46			
P. Aeruginosa Non-Muroid (Positive)	1			
P. Aeruginosa Non-Muroid (Negative)	45			
P. Aeruginosa Small Colony Variant (Positive)	0			
P. Aeruginosa Small Colony Variant (Negative)	46			
Stenotrophomonas Maltophilia (Positive)	2			
Stenotrophomonas Maltophilia (Negative)	44			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Lung Clearance Index (LCI) 2.5

End point title	Absolute Change in Lung Clearance Index (LCI) 2.5
End point description:	
LCI 2.5 represents the number of lung turnovers required to reduce the end tidal inert gas concentration to 1/40th of its starting value. Study 116 LCI substudy set included all subjects who signed the informed consent/assent to the optional LCI substudy and were enrolled and exposed to any amount of study drug in current study 116.	
End point type	Secondary
End point timeframe:	
From Parent Study 115B Baseline at Week 96	

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	31			
Units: lung clearance index				
arithmetic mean (standard deviation)	-0.20 (± 1.55)			

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute Change in Lung Clearance Index (LCI) 5.0

End point title	Absolute Change in Lung Clearance Index (LCI) 5.0
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End point description:

LCI 5.0 represents the number of lung turnovers required to reduce the end tidal inert gas concentration to 1/20th of its starting value. Study 116 LCI substudy set.

End point type	Secondary
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End point timeframe:

From Parent Study 115B Baseline at Week 96

End point values	LUM/IVA			
Subject group type	Reporting group			
Number of subjects analysed	31			
Units: lung clearance index				
arithmetic mean (standard deviation)	0.11 (\pm 0.65)			

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

Day 1 Up to Week 98

Assessment type	Systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	22.0
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Reporting groups

Reporting group title	LUM/IVA
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Reporting group description:

LUM/IVA granules or tablets were administered orally every 12 hours (subjects aged 2 through 5 years received LUM 100 mg/IVA 125 mg granules or LUM 150 mg/IVA 188 mg granules based on body weight. Subjects ≥6 years of age were to receive LUM 200 mg/IVA 250 mg tablets). Doses were adjusted upward for changes in weight and age.

Serious adverse events	LUM/IVA		
Total subjects affected by serious adverse events			
subjects affected / exposed	15 / 57 (26.32%)		
number of deaths (all causes)	0		
number of deaths resulting from adverse events			
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	1 / 1		
deaths causally related to treatment / all	0 / 0		
Aspartate aminotransferase increased			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	1 / 1		
deaths causally related to treatment / all	0 / 0		
Gastrointestinal disorders			
Constipation			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Haematemesis			

subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Pancreatitis			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	1 / 1		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			
Sleep apnoea syndrome			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
Appendicitis			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Chronic sinusitis			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastritis viral			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastroenteritis viral			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastroenteritis adenovirus			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Infective pulmonary exacerbation of cystic fibrosis			
subjects affected / exposed	6 / 57 (10.53%)		
occurrences causally related to treatment / all	3 / 9		
deaths causally related to treatment / all	0 / 0		
Pneumonia			
subjects affected / exposed	2 / 57 (3.51%)		
occurrences causally related to treatment / all	0 / 3		
deaths causally related to treatment / all	0 / 0		
Respiratory tract infection viral			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Metabolism and nutrition disorders			
Weight gain poor			
subjects affected / exposed	1 / 57 (1.75%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

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

Non-serious adverse events	LUM/IVA		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	55 / 57 (96.49%)		
Investigations			
Alanine aminotransferase increased			
subjects affected / exposed	10 / 57 (17.54%)		
occurrences (all)	19		
Aspartate aminotransferase increased			
subjects affected / exposed	5 / 57 (8.77%)		
occurrences (all)	8		
Forced expiratory volume decreased			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	4		
Gamma-glutamyltransferase increased			

<p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Pseudomonas test positive</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Staphylococcus test positive</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p>	<p>4 / 57 (7.02%)</p> <p>4</p> <p>9 / 57 (15.79%)</p> <p>9</p> <p>12 / 57 (21.05%)</p> <p>14</p>		
<p>General disorders and administration site conditions</p> <p>Fatigue</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Pyrexia</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Vessel puncture site pain</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p>	<p>5 / 57 (8.77%)</p> <p>6</p> <p>23 / 57 (40.35%)</p> <p>42</p> <p>4 / 57 (7.02%)</p> <p>14</p>		
<p>Ear and labyrinth disorders</p> <p>Ear pain</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p>	<p>3 / 57 (5.26%)</p> <p>3</p>		
<p>Gastrointestinal disorders</p> <p>Abdominal pain</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Constipation</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Abdominal pain upper</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Diarrhoea</p> <p>subjects affected / exposed</p> <p>occurrences (all)</p> <p>Vomiting</p>	<p>7 / 57 (12.28%)</p> <p>8</p> <p>7 / 57 (12.28%)</p> <p>9</p> <p>4 / 57 (7.02%)</p> <p>5</p> <p>6 / 57 (10.53%)</p> <p>6</p>		

subjects affected / exposed	17 / 57 (29.82%)		
occurrences (all)	22		
Respiratory, thoracic and mediastinal disorders			
Cough			
subjects affected / exposed	47 / 57 (82.46%)		
occurrences (all)	159		
Dyspnoea			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	3		
Lower respiratory tract congestion			
subjects affected / exposed	4 / 57 (7.02%)		
occurrences (all)	4		
Nasal discharge discolouration			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	3		
Nasal congestion			
subjects affected / exposed	25 / 57 (43.86%)		
occurrences (all)	37		
Oropharyngeal pain			
subjects affected / exposed	10 / 57 (17.54%)		
occurrences (all)	12		
Productive cough			
subjects affected / exposed	5 / 57 (8.77%)		
occurrences (all)	8		
Rhinorrhoea			
subjects affected / exposed	18 / 57 (31.58%)		
occurrences (all)	26		
Sinus congestion			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	3		
Sputum increased			
subjects affected / exposed	5 / 57 (8.77%)		
occurrences (all)	8		
Upper respiratory tract congestion			

subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	5		
Wheezing			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	4		
Skin and subcutaneous tissue disorders			
Rash			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	3		
Infections and infestations			
Conjunctivitis			
subjects affected / exposed	4 / 57 (7.02%)		
occurrences (all)	5		
Ear infection			
subjects affected / exposed	12 / 57 (21.05%)		
occurrences (all)	21		
Hand-foot-and-mouth disease			
subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	3		
Infective pulmonary exacerbation of cystic fibrosis			
subjects affected / exposed	10 / 57 (17.54%)		
occurrences (all)	17		
Influenza			
subjects affected / exposed	4 / 57 (7.02%)		
occurrences (all)	4		
Nasopharyngitis			
subjects affected / exposed	8 / 57 (14.04%)		
occurrences (all)	20		
Pharyngitis streptococcal			
subjects affected / exposed	6 / 57 (10.53%)		
occurrences (all)	11		
Otitis media			
subjects affected / exposed	7 / 57 (12.28%)		
occurrences (all)	9		
Pneumonia			

subjects affected / exposed	3 / 57 (5.26%)		
occurrences (all)	4		
Sinusitis			
subjects affected / exposed	12 / 57 (21.05%)		
occurrences (all)	17		
Upper respiratory tract infection			
subjects affected / exposed	13 / 57 (22.81%)		
occurrences (all)	16		
Viral upper respiratory tract infection			
subjects affected / exposed	4 / 57 (7.02%)		
occurrences (all)	4		
Metabolism and nutrition disorders			
Decreased appetite			
subjects affected / exposed	6 / 57 (10.53%)		
occurrences (all)	6		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? No

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported