



Clinical trial results:

A Global, Multicenter, Randomized, Placebo-Controlled Phase 3 Trial to Compare the Efficacy and Safety of Fruquintinib Plus Best Supportive Care to Placebo Plus Best Supportive Care in Patients with Refractory Metastatic Colorectal Cancer (FRESCO-2)

Summary

| | |
|--------------------------|-------------------------|
| EudraCT number | 2020-000158-88 |
| Trial protocol | HU FR DE AT BE IT CZ PL |
| Global end of trial date | 24 April 2024 |

Results information

| | |
|--------------------------------|---------------|
| Result version number | v1 (current) |
| This version publication date | 21 March 2025 |
| First version publication date | 21 March 2025 |

Trial information

Trial identification

| | |
|-----------------------|----------------|
| Sponsor protocol code | 2019-013-GLOB1 |
|-----------------------|----------------|

Additional study identifiers

| | |
|------------------------------------|-------------|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT04322539 |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|---|
| Sponsor organisation name | Hutchison MediPharma Limited |
| Sponsor organisation address | Building 4, 720 Cailun Road, Shanghai, China, 201203 |
| Public contact | William Schelman, HUTCHMED International, +1 973-306-4490, williams@hutch-med.com |
| Scientific contact | William Schelman, HUTCHMED International , +1 973-306-4490, williams@hutch-med.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 | 24 April 2024 |
| Is this the analysis of the primary completion data? | No |
| Global end of trial reached? | Yes |
| Global end of trial date | 24 April 2024 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

The main objective of this was to evaluate the overall survival of Fruquintinib plus best supportive care (BSC) compared to placebo plus BSC in subjects with refractory metastatic colorectal cancer (mCRC).

Protection of trial subjects:

The study was conducted in accordance with the protocol; the ethical principles derived from international guidelines, including the Declaration of Helsinki and Council for International Organizations of Medical Sciences International Ethical Guidelines; applicable International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) Good Clinical Practice (GCP) Guidelines; and other applicable regulations and guidelines governing clinical study conduct.

Background therapy: -

Evidence for comparator: -

| | |
|---|----------------|
| Actual start date of recruitment | 12 August 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 | Australia: 16 |
| Country: Number of subjects enrolled | Japan: 56 |
| Country: Number of subjects enrolled | Austria: 11 |
| Country: Number of subjects enrolled | United Kingdom: 3 |
| Country: Number of subjects enrolled | United States: 124 |
| Country: Number of subjects enrolled | Belgium: 13 |
| Country: Number of subjects enrolled | Czechia: 14 |
| Country: Number of subjects enrolled | Estonia: 9 |
| Country: Number of subjects enrolled | France: 64 |
| Country: Number of subjects enrolled | Germany: 19 |
| Country: Number of subjects enrolled | Hungary: 69 |
| Country: Number of subjects enrolled | Italy: 111 |
| Country: Number of subjects enrolled | Poland: 2 |
| Country: Number of subjects enrolled | Spain: 180 |
| Worldwide total number of subjects | 691 |
| EEA total number of subjects | 492 |

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) | 366 |
| From 65 to 84 years | 324 |
| 85 years and over | 1 |

Subject disposition

Recruitment

Recruitment details:

The study was conducted at 124 study sites in the United States, Europe region, Japan, and Australia.

Pre-assignment

Screening details:

A total of 691 subjects were randomized and treated in this study.

Period 1

| | |
|------------------------------|--|
| Period 1 title | Overall Study (overall period) |
| Is this the baseline period? | Yes |
| Allocation method | Randomised - controlled |
| Blinding used | Double blind |
| Roles blinded | Investigator, Carer, Assessor, Subject |

Arms

| | |
|------------------------------|---|
| Are arms mutually exclusive? | Yes |
| Arm title | Fruquintinib + Best Supportive Care (BSC) Group |

Arm description:

Subjects received 5 milligrams (mg) of fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| | |
|--|-------------------|
| Arm type | Experimental |
| Investigational medicinal product name | Fruquintinib 5 mg |
| Investigational medicinal product code | |
| Other name | HMPL-013 |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Subjects received 5 mg of fruquintinib oral capsule in combination with BSC once daily for 3 weeks.

| | |
|------------------|---------------------|
| Arm title | Placebo + BSC Group |
|------------------|---------------------|

Arm description:

Subjects received placebo matched to fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| | |
|--|--------------|
| Arm type | Experimental |
| Investigational medicinal product name | Placebo |
| Investigational medicinal product code | |
| Other name | |
| Pharmaceutical forms | Capsule |
| Routes of administration | Oral use |

Dosage and administration details:

Subjects received placebo matched to fruquintinib oral capsule in combination with BSC once daily for 3 weeks.

| Number of subjects in period 1 | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group |
|----------------------------------|---|---------------------|
| | | |
| Started | 461 | 230 |
| Safety Population (SP) | 456 | 230 |
| Pharmacokinetic (PK) Population | 329 | 2 |
| Completed | 0 | 0 |
| Not completed | 461 | 230 |
| Consent withdrawn by subject | 14 | 8 |
| Adverse event, non-fatal | 2 | - |
| Death | 411 | 203 |
| Sponsor Decision | 19 | 14 |
| Unspecified | 6 | 4 |
| Radiological Disease Progression | 6 | - |
| Lost to follow-up | 3 | 1 |

Baseline characteristics

Reporting groups

| | |
|-----------------------|---|
| Reporting group title | Fruquintinib + Best Supportive Care (BSC) Group |
|-----------------------|---|

Reporting group description:

Subjects received 5 milligrams (mg) of fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| | |
|-----------------------|---------------------|
| Reporting group title | Placebo + BSC Group |
|-----------------------|---------------------|

Reporting group description:

Subjects received placebo matched to fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| Reporting group values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | Total |
|------------------------------------|---|---------------------|-------|
| Number of subjects | 461 | 230 | 691 |
| Age categorical Units: Subjects | | | |

| | | | |
|---|-----------------|----------------|-----|
| Age continuous Units: years arithmetic mean standard deviation | 62.2 ± 10.41 | 62.4 ± 9.67 | - |
| Gender categorical Units: Subjects | | | |
| Female | 216 | 90 | 306 |
| Male | 245 | 140 | 385 |
| Race/Ethnicity, Customized Units: Subjects | | | |
| American Indian or Alaska Native | 0 | 1 | 1 |
| Asian | 43 | 18 | 61 |
| Black or African American | 13 | 7 | 20 |
| Native Hawaiian or Other | 3 | 2 | 5 |
| White | 367 | 192 | 559 |
| Other | 5 | 2 | 7 |
| Multiple races | 2 | 0 | 2 |
| Not reported/unknown | 28 | 8 | 36 |
| Ethnicity (NIH/OMB) Units: Subjects | | | |
| Hispanic or Latino | 20 | 14 | 34 |
| Not Hispanic or Latino | 405 | 202 | 607 |
| Unknown or Not Reported | 36 | 14 | 50 |

End points

End points reporting groups

| | |
|-----------------------|---|
| Reporting group title | Fruquintinib + Best Supportive Care (BSC) Group |
|-----------------------|---|

Reporting group description:

Subjects received 5 milligrams (mg) of fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| | |
|-----------------------|---------------------|
| Reporting group title | Placebo + BSC Group |
|-----------------------|---------------------|

Reporting group description:

Subjects received placebo matched to fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| | |
|----------------------------|--|
| Subject analysis set title | Fruquintinib:Pooled Studies for Exposure and Safety Analysis |
|----------------------------|--|

| | |
|---------------------------|---------------|
| Subject analysis set type | Full analysis |
|---------------------------|---------------|

Subject analysis set description:

Subjects in the current 2019-013-GLOB1 study received 5 mg of fruquintinib oral capsules once daily for 3 weeks of continuous dosing, followed by a 1-week break during each 28-day treatment cycle. Subjects in the 2009-013-00CH1 study received 1 mg to 6 mg of fruquintinib oral capsule once daily and 5 mg to 6 mg of fruquintinib oral capsule for 3 weeks on and 1 week off during each 28-day treatment cycle. Subjects in the 2012-013-00CH3 study received 4 mg of fruquintinib capsule once daily in 28-day cycles. Subjects in the Study 2015-013- 00US1 with advanced solid tumors of any type or with mCRC received fruquintinib 3 mg or 5 mg once daily for 3 weeks on and 1 week off in each 28-day treatment cycle until disease progression, unacceptable toxicity, use of other antitumor treatment, withdrawal of consent, or discontinuation by the Investigator, whichever occurred first.

| | |
|----------------------------|--|
| Subject analysis set title | Fruquintinib:Pooled Studies for Exposure and Efficacy Analysis |
|----------------------------|--|

| | |
|---------------------------|---------------|
| Subject analysis set type | Full analysis |
|---------------------------|---------------|

Subject analysis set description:

Subjects in the current 2019-013-GLOB1 study received 5 mg of fruquintinib oral capsules once daily for 3 weeks of continuous dosing, followed by a 1-week break during each 28-day treatment cycle. Subjects in Cohort B of Study 2015-013-00US1 with metastatic colorectal carcinoma (mCRC) and prior treatment with chemotherapy and trifluridine, tipiracil, and/or regorafenib received fruquintinib 5 mg capsules once daily for 3 weeks on and 1 week off in each 28-day treatment cycle until disease progression, unacceptable toxicity, use of other antitumor treatment, withdrawal of consent, or discontinuation by the Investigator, whichever occurred first.

Primary: Overall Survival (OS)

| | |
|-----------------|-----------------------|
| End point title | Overall Survival (OS) |
|-----------------|-----------------------|

End point description:

OS was defined as the time (months) from date of randomization to death from any cause. OS was calculated as (date of death or last known alive – date of randomization + 1)/30.4375. Subjects without report of death at the time of analysis will be censored at the date last known alive. Intent to treat (ITT) population included all randomized subjects.

| | |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

From date of randomization to death from any cause (up to 22 months)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|----------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 461 | 230 | | |
| Units: months | | | | |
| median (confidence interval 95%) | 7.4 (6.7 to 8.2) | 4.8 (4.0 to 5.8) | | |

Statistical analyses

| Statistical analysis title | Fruquintinib + BSC Group Vs Placebo + BSC Group |
|---|---|
| Comparison groups | Fruquintinib + Best Supportive Care (BSC) Group v Placebo + BSC Group |
| Number of subjects included in analysis | 691 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.001 ^[1] |
| Method | stratified log-rank test |
| Parameter estimate | Stratified Hazard ratio |
| Point estimate | 0.662 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.549 |
| upper limit | 0.8 |

Notes:

[1] - Raw unadjusted p-value was obtained by using a stratified log-rank test accounting for the randomization schedule stratification factors.

Secondary: Progression Free Survival (PFS), as Assessed by the Investigator Using Response Evaluation Criteria In Solid Tumors (RECIST) v1.1

| | |
|-----------------|---|
| End point title | Progression Free Survival (PFS), as Assessed by the Investigator Using Response Evaluation Criteria In Solid Tumors (RECIST) v1.1 |
|-----------------|---|

End point description:

PFS was defined as the time (months) from randomization until the first radiographic documentation of objective progression as assessed by investigator using RECIST v1.1, or death from any cause, whichever comes first. More specifically, PFS was determined using all data until the last evaluable visit prior to or on the date of: (i) radiographic disease progression (PD) per RECIST v1.1; (ii) withdrawal of consent to obtain additional scans on study; or (iii) initiation of subsequent anticancer therapy other than the study drugs, whichever was earlier. PD was defined as: at least a 20% increase in the sum of diameters of target lesions, taking as reference the smallest sum on study, including baseline; an absolute increase of at least 5 mm in the sum of diameters of target lesions; and the appearance of one or more new lesions. ITT population included all randomized subjects.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

From randomization until the first documentation of objective progression or death, whichever comes first (up to 22 months)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|----------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 461 | 230 | | |
| Units: months | | | | |
| median (confidence interval 95%) | 3.7 (3.5 to 3.8) | 1.8 (1.8 to 1.9) | | |

Statistical analyses

| Statistical analysis title | Fruquintinib + BSC Group Vs Placebo + BSC Group |
|---|---|
| Comparison groups | Placebo + BSC Group v Fruquintinib + Best Supportive Care (BSC) Group |
| Number of subjects included in analysis | 691 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.001 ^[2] |
| Method | stratified log-rank test |
| Parameter estimate | Stratified Hazard ratio |
| Point estimate | 0.321 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.267 |
| upper limit | 0.386 |

Notes:

[2] - Raw unadjusted p-value was obtained by using a stratified log-rank test accounting for the randomization schedule stratification factors.

Secondary: Objective Response Rate (ORR) Per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1)

| | |
|-----------------|---|
| End point title | Objective Response Rate (ORR) Per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1) |
|-----------------|---|

End point description:

ORR was defined as the percentage of subjects who achieved a best overall response of confirmed complete response (CR) or partial response (PR), per RECIST v1.1, as determined by the investigator. PR: At least a 30 percent (%) decrease in the sum of diameters of target lesions, taking as reference the baseline sum of diameters. CR: Disappearance of all target lesions. Any pathological lymph nodes (whether target or non-target) must have reduction in short axis to less than (<)10 millimeters (mm). ITT population included all randomized subjects.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

From randomization until PD, death, new anticancer treatment, or study treatment discontinuation, whichever occurred first (up to 22 months)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|----------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 461 | 230 | | |
| Units: percentage of subjects | | | | |
| number (confidence interval 95%) | 1.5 (0.6 to 3.1) | 0 (0.0 to 1.6) | | |

Statistical analyses

| Statistical analysis title | Fruquintinib + BSC Group Vs Placebo + BSC Group |
|---|---|
| Comparison groups | Fruquintinib + Best Supportive Care (BSC) Group v Placebo + BSC Group |
| Number of subjects included in analysis | 691 |
| Analysis specification | Pre-specified |
| Analysis type | superiority ^[3] |
| P-value | = 0.059 ^[4] |
| Method | Cochran-Mantel-Haenszel |
| Parameter estimate | Adjusted difference |
| Point estimate | 1.5 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 0.4 |
| upper limit | 2.7 |

Notes:

[3] - The adjusted difference and its 95% CI were calculated using the Wald method from Cochran-Mantel Haenszel test to account for the randomization schedule stratification factors.

[4] - p-value was calculated from a stratified Cochran-Mantel Haenszel test accounting for the randomization schedule stratification factors.

Secondary: Disease Control Rate (DCR) Per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1)

| | |
|-----------------|--|
| End point title | Disease Control Rate (DCR) Per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1) |
|-----------------|--|

End point description:

DCR was defined as percentage of subjects achieving a best overall response of confirmed CR, PR, or stable disease (SD) (for at least 7 weeks) per RECIST v1.1, as determined by the investigator. PR: At least a 30% decrease in the sum of diameters of target lesions, taking as reference the baseline sum of diameters. CR: Disappearance of all target lesions. Any pathological lymph nodes (whether target or non-target) must have reduction in short axis to <10 mm. SD: Neither sufficient shrinkage to qualify for PR nor sufficient increase to qualify for progressive disease (PD), taking as reference the smallest sum on study. PD: At least a 20% increase in the sum of diameters of target lesions, taking as reference the smallest sum on study (nadir), including baseline. ITT population included all randomized subjects.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

From randomization until PD, death, new anticancer treatment, or study treatment discontinuation, whichever occurred first (up to 22 months)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|----------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 461 | 230 | | |
| Units: percentage of subjects | | | | |
| number (confidence interval 95%) | 55.5 (50.9 to 60.1) | 16.1 (11.6 to 21.5) | | |

Statistical analyses

| Statistical analysis title | Fruquintinib + BSC Group Vs Placebo + BSC Group |
|---|---|
| Comparison groups | Fruquintinib + Best Supportive Care (BSC) Group v Placebo + BSC Group |
| Number of subjects included in analysis | 691 |
| Analysis specification | Pre-specified |
| Analysis type | superiority |
| P-value | < 0.001 ^[5] |
| Method | Cochran-Mantel-Haenszel |
| Parameter estimate | Adjusted difference |
| Point estimate | 39.4 |
| Confidence interval | |
| level | 95 % |
| sides | 2-sided |
| lower limit | 32.8 |
| upper limit | 46 |

Notes:

[5] - p-value was calculated from a stratified Cochran-Mantel Haenszel test accounting for the randomization schedule stratification factors.

Secondary: Number of Subjects With Treatment-emergent Adverse Events (TEAEs) and Serious TEAEs

| | |
|-----------------|---|
| End point title | Number of Subjects With Treatment-emergent Adverse Events (TEAEs) and Serious TEAEs |
|-----------------|---|

End point description:

An adverse event (AE) was any untoward medical occurrence in a clinical investigation participant administered a pharmaceutical product and that does not necessarily have a causal relationship with this treatment. An AE was considered a TEAE if the onset date was on or after the start of study treatment or if the onset date was missing, or if the AE had an onset date before the start of study treatment but worsened in severity after the study treatment until 30 days after the last dose of study treatment or a new treatment of anti-tumor therapy, whichever was earlier. After this period, treatment-related SAEs were also considered as TEAEs. AEs with an unknown/not reported onset date were also included. SP included all randomized subjects who received at least 1 dose of study drug.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

From start of study drug administration up to approximately 40 months

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|-----------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 456 | 230 | | |
| Units: Count of subjects | | | | |
| Subjects with TEAEs | 451 | 214 | | |
| Subjects with Serious TEAEs | 173 | 88 | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Observed Plasma Concentrations of Fruquintinib and Metabolite M11

| | |
|-----------------|--|
| End point title | Observed Plasma Concentrations of Fruquintinib and Metabolite M11 ^[6] |
|-----------------|--|

End point description:

Plasma samples were collected from the subjects at the defined time points. Plasma concentrations were measured using a validated, specific, and sensitive liquid chromatography tandem mass spectrometry method. M11 is the active metabolite for the study drug. PK population was used for tabulation of fruquintinib and M11 concentrations from PK plasma samples collected from the Fruquintinib + BSC Group. PK samples for the Placebo + BSC Group were not analyzed. Here "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at the specified timepoints. Here "C" indicates "Cycle", "D" indicates "Day" an "Conc." indicates "Concentration". Here "99999" indicates "Standard deviation", was not evaluable for single subject.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Cycle 1 (Day 1 and 21): Pre-dose, 1, 2, 3 and 4 hours; Cycle 2 (Day 21): Predose and 2 hours, Cycle 3 (Day 1): Pre-dose, Cycle 3 (Day 21): Pre-dose and 2 hours, Cycle 5, 7, 9, 11, 13, 15 and 17 (Day 1): Pre-dose (Each cycle = 28 days)

Notes:

[6] - 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: As per planned analysis, data for this endpoint was analysed for Fruquintinib arm only.

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | | | |
|--|---|--|--|--|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 312 | | | |
| Units: nanogram/milliliter (ng/mL) | | | | |
| arithmetic mean (standard deviation) | | | | |
| C1D1:1 hour (Plasma Conc. of Fruquintinib)(n=171) | 59.9 (± 51.0) | | | |
| C1D1:1 hour (Plasma Conc. of M11) (n=171) | 1.06 (± 8.36) | | | |
| C1D1:2 hours (Plasma Conc. of Fruquintinib)(n=304) | 91.5 (± 48.2) | | | |
| C1D1:2 hours (Plasma Conc. of M11) (n=304) | 1.03 (± 6.81) | | | |
| C1D1:3 hours (Plasma Conc. of Fruquintinib)(n=171) | 98.5 (± 47.1) | | | |

| | | | | |
|--|---------------|--|--|--|
| C1D1:3 hours (Plasma Conc. of M11)(n=171) | 1.96 (± 9.51) | | | |
| C1D1:4 hours (Plasma Conc. of Fruquintinib)(n=171) | 99.7 (± 44.6) | | | |
| C1D1:4 hours (Plasma Conc. of M11)(n=171) | 2.71 (± 10.7) | | | |
| C1D21:Predose(Plasma Conc. of Fruquintinib)(n=227) | 219 (± 82.6) | | | |
| C1D21:Predose (Plasma Conc. of M11)(n=227) | 94.5 (± 52.6) | | | |
| C1D21:1 hour (Plasma Conc. of Fruquintinib)(n=112) | 255 (± 101) | | | |
| C1D21:1 hour (Plasma Conc. of M11) (n=112) | 92.0 (± 54.3) | | | |
| C1D21:2 hours(Plasma Conc. of Fruquintinib)(n=214) | 279 (± 91.6) | | | |
| C1D21:2 hours (Plasma Conc. of M11)(n=214) | 89.9 (± 49.5) | | | |
| C1D21:3 hours(Plasma Conc. of Fruquintinib)(n=113) | 293 (± 95.2) | | | |
| C1D21:3 hours (Plasma Conc. of M11)(n=113) | 88.0 (± 50.4) | | | |
| C1D21:4 hours(Plasma Conc. of Fruquintinib)(n=114) | 294 (± 88.0) | | | |
| C1D21:4 hours (Plasma Conc. of M11)(n=114) | 89.2 (± 49.0) | | | |
| C2D21:Predose(Plasma Conc. of Fruquintinib)(n=204) | 222 (± 82.0) | | | |
| C2D21:Predose (Plasma Conc. of M11)(n=204) | 97.6 (± 53.7) | | | |
| C2D21:2 hours(Plasma Conc. of Fruquintinib)(n=193) | 284 (± 95.2) | | | |
| C2D21:2 hours (Plasma Conc. of M11)(n=193) | 94.2 (± 52.8) | | | |
| C3D1:Predose(Plasma Conc. of Fruquintinib)(n=177) | 16.7 (± 18.9) | | | |
| C3D1:Predose (Plasma Conc. of M11)(n=177) | 22.6 (± 18.2) | | | |
| C3D21:Predose(Plasma Conc. of Fruquintinib)(n=137) | 212 (± 74.6) | | | |
| C3D21:Predose (Plasma Conc. of M11)(n=137) | 90.6 (± 54.1) | | | |
| C3D21:2 hours(Plasma Conc. of Fruquintinib)(n=123) | 275 (± 78.6) | | | |
| C3D21:2hours (Plasma Conc. of M11)(n=123) | 92.8 (± 54.2) | | | |
| C5D1:Predose(Plasma Conc. of Fruquintinib)(n=103) | 16.9 (± 20.5) | | | |
| C5D1:Predose (Plasma Conc. of M11)(n=103) | 23.2 (± 20.9) | | | |
| C7D1:Predose(Plasma Conc. of Fruquintinib)(n=46) | 18.2 (± 33.0) | | | |
| C7D1:Predose (Plasma Conc. of M11)(n=46) | 20.1 (± 12.1) | | | |
| C9D1:Predose(Plasma Conc. of Fruquintinib)(n=13) | 12.2 (± 12.6) | | | |
| C9D1:Predose (Plasma Conc. of M11)(n=13) | 19.1 (± 17.1) | | | |
| C11D1:Predose (Plasma Conc. of Fruquintinib)(n=6) | 13.4 (± 13.4) | | | |
| C11D1:Predose (Plasma Conc. of M11)(n=6) | 17.1 (± 15.3) | | | |

| | | | | |
|--|----------------|--|--|--|
| C13D1:Predose (Plasma Conc. of Fruquintinib)(n=1) | 15.4 (± 99999) | | | |
| C13D1:Predose (Plasma Conc. of M11)(n=1) | 23.1 (± 99999) | | | |
| C15D1:Predose (Plasma Conc. of Fruquintinib)(n=1) | 10.8 (± 99999) | | | |
| C15D1:Predose (Plasma Conc. of M11)(n=1) | 19.2 (± 99999) | | | |
| C17D1:Predose (Plasma Conc. of Fruquintinib)(n=1) | 10.6 (± 99999) | | | |
| C17D1:Predose (Plasma Conc. of M11)(n=1) | 15.2 (± 99999) | | | |
| C1D1:Predose (Plasma Conc. of Fruquintinib)(n=312) | 2.90 (± 19.9) | | | |
| C1D1:Predose (Plasma Conc. of M11)(n=312)) | 0.585 (± 6.61) | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Duration of Response (DOR) Per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1)

| | |
|-----------------|--|
| End point title | Duration of Response (DOR) Per Response Evaluation Criteria in Solid Tumors Version 1.1 (RECIST 1.1) |
|-----------------|--|

End point description:

DOR was defined as the time (in months) from the first occurrence of PR or CR by RECIST Version 1.1, until the first date that progressive disease is documented by RECIST Version 1.1, or death, whichever comes first. Only those subjects with confirmed responses of CR or PR were included in this analysis. DOR was calculated as (date of death or PD or last assessment – date of first occurrence of confirmed CR or PR + 1)/30.4375. Analysis was performed on subset of subjects who had a response. Here, '0' in 'overall number of subjects analyzed represents that DOR could only be analyzed in subjects who achieved a response. As no subject in the Placebo Plus BSC Group cohort achieved any response, no DOR is available. Here "99999" means upper limit of 95 percent (%) confidence interval (CI) was not estimable due to limited number of subjects with events.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

From first occurrence of PR or CR until the first documentation of progression or death, whichever comes first (up to 22 months)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|----------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 7 | 0 ^[7] | | |
| Units: months | | | | |
| median (confidence interval 95%) | 10.7 (3.9 to 99999) | (to) | | |

Notes:

[7] - Since no subject in the Placebo Plus BSC Group cohort achieved any response, no DOR is available.

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline of Electrocardiogram (ECG) Results - QTcF Intervals Using Fridericia's Formula

| | |
|-----------------|---|
| End point title | Change From Baseline of Electrocardiogram (ECG) Results - QTcF Intervals Using Fridericia's Formula |
|-----------------|---|

End point description:

QT Interval: Ventricular depolarization plus ventricular repolarization Normal Range: 400 to 460 milliseconds (msec). QTc: QT interval corrected based on the patient's heart rate. QTcF: An electrocardiographic finding in which the QT interval corrected for heart rate using Fridericia's formula. $QTc = QT/(RR)^{1/3}$ RR = Respiration rate. SP included all randomized subjects who received at least 1 dose of study drug. Here "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at the specified timepoints.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline, Cycle 1 (Day 1 and 21): Pre-dose, 1, 2, 3 and 4 hours; Cycle 2 and 3 (Day 21): Pre-dose (Each cycle = 28 days)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|--------------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 272 | 131 | | |
| Units: millisecond (msec) | | | | |
| arithmetic mean (standard deviation) | | | | |
| Cycle 1 Day 1 - Pre-dose (n=261,126) | 1.9 (± 21.33) | 0.1 (± 17.95) | | |
| Cycle 1 Day 1 - 1 hour (n=149,71) | -0.1 (± 19.60) | 2.5 (± 19.70) | | |
| C1D1-2 hours(n=272,131) | 1.9 (± 22.58) | 3.5 (± 20.13) | | |
| C1D1-3 hours (n=143,70) | 2.6 (± 19.77) | 3.3 (± 18.03) | | |
| C1D1-4 hours (n=136,67) | 1.2 (± 20.48) | 0.9 (± 17.66) | | |
| C1D21-Pre-dose (n=184,95) | 3.2 (± 20.94) | -2.2 (± 20.31) | | |
| C1D21-1 hour (n=109,62) | 4.0 (± 19.56) | -0.2 (± 16.77) | | |
| C1D21-2 hours (n=222,121) | 5.0 (± 20.06) | 2.8 (± 18.23) | | |
| C1D21-3 hours (n=111,61) | 5.9 (± 19.46) | 0.2 (± 14.70) | | |
| C1D21-4 hours (n=103,58) | 3.9 (± 20.98) | -0.6 (± 18.13) | | |
| C2D21-2 hours (n=229,86) | 1.4 (± 22.41) | 4.9 (± 24.28) | | |
| C3D21-2 hours (n=141,28) | 2.6 (± 31.61) | 2.0 (± 20.08) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline of ECG Results -QTcB Intervals Using Bazzett's Formula

| | |
|-----------------|---|
| End point title | Change From Baseline of ECG Results -QTcB Intervals Using Bazzett's Formula |
|-----------------|---|

End point description:

QT Interval: Ventricular depolarization plus ventricular repolarization Normal Range: 400 to 460 msec.
QTc: QT interval corrected based on the patient's heart rate. QTcB: An electrocardiographic finding in which the QT interval corrected for heart rate using Bazett's formula. SP included all randomized subjects who received at least 1 dose of study drug. Here "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at the specified timepoints.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline, Cycle 1 (Day 1 and 21): Pre-dose, 1, 2, 3 and 4 hours; Cycle 2 and 3 (Day 21): Pre-dose
(Each cycle = 28 days)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|--------------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 258 | 122 | | |
| Units: msec | | | | |
| arithmetic mean (standard deviation) | | | | |
| C1D1-Pre-dose (n=249,118) | 2.9 (± 39.49) | 0.3 (± 20.55) | | |
| C1D1-1 hour (n=142,69) | -3.1 (± 23.95) | 1.9 (± 20.11) | | |
| C1D1-2 hours (n=258,122) | -2.0 (± 23.95) | 1.9 (± 20.11) | | |
| C1D1-3 hours (n=136,68) | -0.9 (± 24.47) | 3.9 (± 19.75) | | |
| C1D1-4 hours (n=130,65) | -1.9 (± 24.47) | 2.4 (± 20.11) | | |
| C1D21-Pre-dose (n=177,91) | 3.9 (± 49.99) | 5.0 (± 50.43) | | |
| C1D21-1 hour (n=177,60) | -1.3 (± 25.60) | 0.9 (± 20.48) | | |
| C1D21-2 hours (n=212,117) | 1.6 (± 42.28) | 4.3 (± 19.57) | | |
| C1D21-3 hours (n=107,59) | 1.2 (± 25.41) | 2.9 (± 18.29) | | |
| C1D21-4 hours (n=99,56) | 0.2 (± 25.91) | 2.8 (± 20.13) | | |
| C2D21-2 hours (n=213,83) | 1.7 (± 40.61) | 5.9 (± 24.96) | | |
| C3D21-2 hours (n=132,28) | 4.2 (± 72.35) | 1.6 (± 22.06) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Correlation Between Fruquintinib Exposure (CmaxSS) and Safety Parameters (Any Grade [Gr] and Grade 3+ [Gr3+]: Dermatological Toxicity, Proteinuria and Gr Hemorrhage)

| | |
|-----------------|---|
| End point title | Correlation Between Fruquintinib Exposure (CmaxSS) and Safety Parameters (Any Grade [Gr] and Grade 3+ [Gr3+]: Dermatological Toxicity, Proteinuria and Gr Hemorrhage) |
|-----------------|---|

End point description:

Model-predicted steadystate maximum plasma concentration (CmaxSS) of fruquintinib based on assigned dose investigated as fruquintinib exposure measure for safety exposure-response (E-R) analysis. Correlation between exposure and probability of experiencing AEs evaluated using logistic regression analysis, with slope serving as estimate. Safety E-R analysis included subjects from 2019-013-GLOB1, 2009-013-00CH1, 2012-013-00CH3, and 2015-013-00US1. "Unit" i.e., '1/(nanogram per milliliter)' corresponds to the coefficient that describes the relationship between probability of occurrence of safety parameter and CmaxSS value. Safety E-R analyses had subjects evaluable for population PK analysis, PK parameter estimates to enable estimation of fruquintinib exposure and

evaluated for endpoint in question. "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at specified timepoints. The population included subjects from 2019-013- GLOB1, 2009-013- 00CH1, 212-013-00CH3, and 2015-013-00US.

| | |
|----------------------|-----------|
| End point type | Secondary |
| End point timeframe: | |
| Up to 22 months | |

| | | | | |
|---|---|--|--|--|
| End point values | Fruquintinib:Po oled Studies for Exposure and Safety Analysis | | | |
| Subject group type | Subject analysis set | | | |
| Number of subjects analysed | 515 | | | |
| Units: 1/ (nanogram per milliliter) | | | | |
| number (not applicable) | | | | |
| CmaxS S Coefficient for Any G Derma Toxicity | 0.00134 | | | |
| CmaxSS Coefficient for G3+ Derma Toxicity | 0.00411 | | | |
| CmaxSS Coefficient for Any G Proteinuria | -0.0010 | | | |
| CmaxSS Coefficient for G3+ Proteinuria | 0.00143 | | | |
| CmaxSS Coefficient for Any G Hemorrhage | 0.00180 | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Correlation Between Fruquintinib Exposure (CminSS) and Efficacy Parameters (OS)

| | |
|-----------------|---|
| End point title | Correlation Between Fruquintinib Exposure (CminSS) and Efficacy Parameters (OS) |
|-----------------|---|

End point description:

Model-predicted steady-state minimum plasma concentrations (CminSS) of fruquintinib based on starting dose or adjusted for relative dose intensity(RDI) used as exposure measures in efficacy exposure-response analyses. Correlation between OS and exposure estimated using multivariable Cox proportional hazards modeling with OS analyzed as time-to-event variable using survival model. Analysis included subjects from 2019-013-GLOB1(N=328) and Cohort B of 2015-013-00US1(N=40). "Unit" i.e., '1/(nanogram per milliliter)', corresponds to the coefficient that describes the relationship between probability of survival and CminSS value. Efficacy exposure- response analyses included subjects evaluable for population PK analysis, had PK parameter estimates to enable estimation of fruquintinib exposure and evaluated for parameter in question. "N" = subjects evaluable for this endpoint; "n"= subjects evaluable at specified timepoints. Population included subjects from 2015-013-00US1 and current study.

| | |
|----------------------|-----------|
| End point type | Secondary |
| End point timeframe: | |
| Up to 22 months | |

| | | | | |
|---|---|--|--|--|
| End point values | Fruquintinib: Pooled Studies for Exposure and Efficacy Analysis | | | |
| Subject group type | Subject analysis set | | | |
| Number of subjects analysed | 368 | | | |
| Units: 1/ (nanogram per milliliter) | | | | |
| number (not applicable) | | | | |
| CminSS Coefficient Based on Starting Dose | 0.00193 | | | |
| CminSS Coefficient Based on Adjusted RDI | 0.000407 | | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in European Organization for Research and Treatment of Cancer Quality of Life (QOL) Questionnaire Core 30 (EORTC QLQ-C30) Global Health Status/Quality of Life Scale Score

| | |
|-----------------|---|
| End point title | Change From Baseline in European Organization for Research and Treatment of Cancer Quality of Life (QOL) Questionnaire Core 30 (EORTC QLQ-C30) Global Health Status/Quality of Life Scale Score |
|-----------------|---|

End point description:

EORTC QLQ-C30 contains 30 items across 5 functional scales (physical, role, cognitive, emotional, and social), 9 symptom scales (fatigue, nausea and vomiting, pain, dyspnea, sleep disturbance, appetite loss, constipation, diarrhea, and financial difficulties) and global health status/QOL scale. EORTC QLQ-C30 contains 28 questions (4-point scale where 1=Not at all [best] to 4=Very Much [worst]) and 2 questions (7-point scale where 1=Very poor [worst] to 7=Excellent [best]). Raw scores are standardized and converted into scale scores ranging from 0-100. For global health status/QOL scale, higher scores=better QOL. Negative change from baseline=condition worsened. Change from baseline in the EORTC QLQ-C30 Global Health Status/Quality of Life Scale scores was performed by visit (i.e., cycle), using restricted maximum likelihood (REML)-based mixed model repeated measures (MMRM) approach. ITT population. "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at the specified timepoints.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline, Cycle 2, 3 and 4 (Each cycle=28 days)

| | | | | |
|-------------------------------------|---|---------------------|--|--|
| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 330 | 149 | | |
| Units: score on a scale | | | | |
| least squares mean (standard error) | | | | |
| Cycle 2 (n=330,149) | -2.1 (± 1.59) | -3.7 (± 1.95) | | |
| Cycle 3 (n=229, 53) | -4.5 (± 1.69) | -6.1 (± 2.54) | | |
| Cycle 4 (n=182,29) | -4.2 (± 1.76) | -2.1 (± 3.03) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in EuroQoL 5 Dimension 5 Level (EQ-5D-5L) Visual Analog Scale (VAS) Score

| | |
|-----------------|--|
| End point title | Change From Baseline in EuroQoL 5 Dimension 5 Level (EQ-5D-5L) Visual Analog Scale (VAS) Score |
|-----------------|--|

End point description:

The EQ-5D-5L is a self-reported health status questionnaire that consisted of six questions used to calculate a health utility score. There were two components to the EQ-5D-5L: a five-item health state profile that assessed mobility, self-care, usual activities, pain/discomfort, and anxiety/depression used to obtain an Index Utility Score and a general VAS score for health status. EQ-5D VAS was used to record subjects's rating for his/her current health-related quality of life state on a vertical VAS with scores ranging from 0 to 100, where 0 = worst imaginable health state and 100 = best imaginable health state. The higher the score the better the health status. A negative change from baseline value represents patient condition worsened. Change from baseline in the EQ-5D-5L VAS scores was performed by visit (i.e. cycle), using a REML-based MMRM approach. ITT population. "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at the specified timepoints.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline, Cycle 2, 3 and 4 (Each cycle=28 days)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|-------------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 337 | 151 | | |
| Units: score on a scale | | | | |
| least squares mean (standard error) | | | | |
| Cycle 2 (n=337,151) | -0.3 (± 1.38) | -0.9 (± 1.69) | | |
| Cycle 3 (n=232,54) | -1.1 (± 1.48) | -2.5 (± 2.22) | | |
| Cycle 4 (n=185,30) | -4.0 (± 1.59) | -2.1 (± 2.79) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Health Care Resource Utilization: Duration of Hospital Visits by Subjects

| | |
|-----------------|---|
| End point title | Health Care Resource Utilization: Duration of Hospital Visits by Subjects |
|-----------------|---|

End point description:

Duration of hospital visit was calculated as = stop date – start date + 1. Mean and standard deviation data for duration of hospital visits (in days) by subjects was reported in this endpoint. ITT population included all randomized subjects.

| | |
|---|-----------|
| End point type | Secondary |
| End point timeframe: | |
| From start of study drug administration up to 22 months | |

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|--------------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 461 | 230 | | |
| Units: days per visit | | | | |
| arithmetic mean (standard deviation) | 3.3 (± 6.81) | 4.4 (± 7.53) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Health Care Resource Utilization: Number of Subjects With Any Concomitant Medications Prescribed

| | |
|-----------------|--|
| End point title | Health Care Resource Utilization: Number of Subjects With Any Concomitant Medications Prescribed |
|-----------------|--|

End point description:

Number of subjects with any concomitant medications prescribed were reported. ITT population included all randomized subjects.

| | |
|---|-----------|
| End point type | Secondary |
| End point timeframe: | |
| From start of study drug administration up to 22 months | |

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|-----------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 461 | 230 | | |
| Units: Subjects | 116 | 63 | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in EuroQoL 5 Dimension 5 Level (EQ-5D-5L) Health Utility Index Scores

| | |
|-----------------|--|
| End point title | Change From Baseline in EuroQoL 5 Dimension 5 Level (EQ-5D-5L) Health Utility Index Scores |
|-----------------|--|

End point description:

EQ-5D-5L consisted of 2 components: health state profile and optional VAS. EQ-5D health state profile had 5 dimensions: mobility, self-care, usual activities, pain/discomfort, anxiety/depression. Each dimension has 5 levels: 1= no problem, 2= slight problem, 3= moderate problem, 4= severe problem, and 5= extreme problem. The response levels collected from the EQ-5D-5L five dimensions as a health profile are converted into an EQ-5D-5L index (utility) scores to represent participants' utility value. Range of health utility index score is from -0.285 to 1, where higher value indicates perfect health and a negative value represents a state worse than dead. Change from baseline in EQ-5D-5L health utility index scores was performed by visit (i.e., cycle), using a REML-based MMRM approach. ITT population. "N"=subjects evaluable for this endpoint; "n"=subjects evaluable at the specified timepoints.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

Baseline, Cycle 2, 3 and 4 (Each cycle=28 days)

| End point values | Fruquintinib + Best Supportive Care (BSC) Group | Placebo + BSC Group | | |
|-------------------------------------|---|---------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 337 | 151 | | |
| Units: score on a scale | | | | |
| least squares mean (standard error) | | | | |
| Cycle 2 (n=337,151) | 0.0 (± 0.01) | 0.0 (± 0.02) | | |
| Cycle 3 (n=232,54) | 0.0 (± 0.01) | 0.0 (± 0.02) | | |
| Cycle 4 (n=185,30) | -0.1 (± 0.02) | 0.0 (± 0.03) | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From start of study drug administration up to approximately 40 months

Adverse event reporting additional description:

All-Cause Mortality, Serious AEs and Non-Serious AEs data were collected based on safety population that included randomized subjects who received at least 1 dose of study drug.

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

Dictionary used

| | |
|-----------------|--------|
| Dictionary name | MedDRA |
|-----------------|--------|

| | |
|--------------------|------|
| Dictionary version | 26.0 |
|--------------------|------|

Reporting groups

| | |
|-----------------------|---------------------|
| Reporting group title | Placebo + BSC Group |
|-----------------------|---------------------|

Reporting group description:

Subjects received placebo matched to fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| | |
|-----------------------|--------------------------|
| Reporting group title | Fruquintinib + BSC Group |
|-----------------------|--------------------------|

Reporting group description:

Subjects received 5 mg of fruquintinib oral capsule in combination with BSC once daily for 3 weeks of continuous dosing followed by a 1-week break during a treatment cycle (Each cycle length was 28 days).

| Serious adverse events | Placebo + BSC Group | Fruquintinib + BSC Group | |
|---|---------------------|--------------------------|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 88 / 230 (38.26%) | 173 / 456 (37.94%) | |
| number of deaths (all causes) | 203 | 408 | |
| number of deaths resulting from adverse events | 45 | 49 | |
| Neoplasms benign, malignant and unspecified (incl cysts and polyps) | | | |
| Metastases to central nervous system | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metastases to liver | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Metastases to meninges | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metastasis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Lung cancer metastatic | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Tumour invasion | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Neoplasm progression | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Malignant neoplasm progression | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Tumour associated fever | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tumour pain | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vascular disorders | | | |
| Hypotension | | | |

| | | | |
|--|-------------------|------------------|--|
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Deep vein thrombosis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypertensive crisis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypertension | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 6 / 456 (1.32%) | |
| occurrences causally related to treatment / all | 0 / 0 | 6 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Haemorrhage | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| General disorders and administration site conditions | | | |
| Disease progression | | | |
| subjects affected / exposed | 28 / 230 (12.17%) | 27 / 456 (5.92%) | |
| occurrences causally related to treatment / all | 0 / 32 | 0 / 28 | |
| deaths causally related to treatment / all | 0 / 27 | 0 / 26 | |
| General physical health deterioration | | | |
| subjects affected / exposed | 5 / 230 (2.17%) | 10 / 456 (2.19%) | |
| occurrences causally related to treatment / all | 0 / 7 | 0 / 13 | |
| deaths causally related to treatment / all | 0 / 2 | 0 / 2 | |
| Asthenia | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 5 / 456 (1.10%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pyrexia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 2 / 230 (0.87%) | 4 / 456 (0.88%) | |
| occurrences causally related to treatment / all | 2 / 2 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Condition aggravated | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 1 / 2 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 2 | |
| Death | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 2 | 0 / 2 | |
| Non-cardiac chest pain | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Chest pain | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Multiple organ dysfunction syndrome | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 1 | |
| Discomfort | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Sudden death | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Pain | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ulcer | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Malaise | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Generalised Odema | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Immune system disorders | | | |
| Hypersensitivity | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Reproductive system and breast disorders | | | |
| Female genital tract fistula | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Intermenstrual bleeding | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Bronchopleural fistula | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hydrothorax | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Dyspnoea | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 6 / 456 (1.32%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 6 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Pulmonary embolism | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 5 / 456 (1.10%) | |
| occurrences causally related to treatment / all | 0 / 0 | 3 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Acute respiratory distress syndrome | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Bronchospasm | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Epistaxis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Respiratory failure | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Pleural effusion | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 2 / 230 (0.87%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumonitis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Atelectasis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pneumothorax | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Cough | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Respiratory distress | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Interstitial lung disease | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Psychiatric disorders | | | |
| Confusional state | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Anxiety | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Product issues | | | |
| Device dislocation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Investigations | | | |
| Blood creatinine increased | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Alanine aminotransferase increased | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Aspartate aminotransferase increased | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Liver function test abnormal | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| SARS-CoV-2 test positive | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Blood bilirubin increased | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 4 / 456 (0.88%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Injury, poisoning and procedural complications | | | |
| Sternal fracture | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Recall phenomenon | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Joint injury | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Fall | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Femur fracture | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac disorders | | | |
| Acute myocardial infarction | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac arrest | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 1 / 1 | 0 / 0 | |
| Cardiac failure congestive | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Atrial fibrillation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cardiac failure | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Tachycardia | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nervous system disorders | | | |
| Spinal cord compression | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Encephalopathy | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Posterior reversible encephalopathy syndrome | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Transient ischaemic attack | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatic encephalopathy | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Headache | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Epilepsy | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Depressed level of consciousness | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebrovascular accident | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebral infarction | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cerebral haemorrhage | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ischaemic stroke | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Blood and lymphatic system disorders | | | |
| Polycythaemia | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Leukocytosis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Thrombocytopenia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Anaemia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 1 / 1 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal disorders | | | |
| Rectal haemorrhage | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 4 / 456 (0.88%) | |
| occurrences causally related to treatment / all | 0 / 0 | 2 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Small intestinal obstruction | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 5 / 456 (1.10%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Intestinal obstruction | | | |
| subjects affected / exposed | 6 / 230 (2.61%) | 7 / 456 (1.54%) | |
| occurrences causally related to treatment / all | 1 / 7 | 0 / 7 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Abdominal pain | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 7 / 456 (1.54%) | |
| occurrences causally related to treatment / all | 1 / 2 | 0 / 8 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Haematemesis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Colitis | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Abdominal pain upper | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Subileus | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Stomatitis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 1 | 2 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 2 | |
| Small intestinal perforation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Large intestine perforation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal perforation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastric perforation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastric haemorrhage | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Gastrointestinal haemorrhage | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Colonic fistula | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Intestinal perforation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 4 / 456 (0.88%) | |
| occurrences causally related to treatment / all | 0 / 0 | 3 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 1 / 1 | |
| Diarrhoea | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ileus | | | |
| subjects affected / exposed | 5 / 230 (2.17%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 5 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Constipation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vomiting | | | |
| subjects affected / exposed | 3 / 230 (1.30%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 3 | 1 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Oesophageal obstruction | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Abdominal distension | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Oesophagitis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Nausea | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rectal perforation | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pancreatitis acute | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Large intestinal obstruction | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Rectal stenosis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Enterovesical fistula | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pancreatitis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ascites | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Upper gastrointestinal haemorrhage | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatobiliary disorders | | | |
| Biliary obstruction | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Cholangitis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatic failure | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 3 | 0 / 4 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 1 | |
| Cholecystitis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypertransaminaemia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hyperbilirubinaemia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Jaundice | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 2 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hepatic function abnormal | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 3 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Bile duct stone | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Bile duct stenosis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Skin and subcutaneous tissue disorders | | | |
| Rash | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Skin necrosis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal and urinary disorders | | | |

| | | | |
|---|-----------------|-----------------|--|
| Urinary tract obstruction | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Haematuria | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hydronephrosis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Acute kidney injury | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 5 / 456 (1.10%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 5 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Proteinuria | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Renal impairment | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Vesicocutaneous fistula | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Ureteric obstruction | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Endocrine disorders | | | |

| | | | |
|---|-----------------|-----------------|--|
| Hypothyroidism | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Musculoskeletal and connective tissue disorders | | | |
| Muscular weakness | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Back pain | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 6 / 456 (1.32%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Fistula | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 2 / 456 (0.44%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 2 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Infections and infestations | | | |
| Pneumonia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 9 / 456 (1.97%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 12 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 3 | |
| Sepsis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 5 / 456 (1.10%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Abscess limb | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Biliary tract infection | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

| | | | |
|---|-----------------|-----------------|--|
| Bronchitis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Urinary tract infection | | | |
| subjects affected / exposed | 3 / 230 (1.30%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 6 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Pyelonephritis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Septic shock | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Clostridium difficile colitis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Clostridium difficile infection | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Device related infection | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Empyema | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Fournier's gangrene | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Infection | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Osteomyelitis chronic | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Perirectal abscess | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Urosepsis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Bronchopulmonary aspergillosis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| COVID-19 pneumonia | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Cellulitis | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| COVID-19 | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 3 / 230 (1.30%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 4 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 1 | 0 / 0 | |
| Wound sepsis | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Wound infection bacterial | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 1 | |
| Coronavirus infection | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Metabolism and nutrition disorders | | | |
| Dehydration | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hyponatraemia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 3 / 456 (0.66%) | |
| occurrences causally related to treatment / all | 0 / 1 | 1 / 3 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypokalaemia | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypoalbuminaemia | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypernatraemia | | | |

| | | | |
|---|-----------------|-----------------|--|
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Diabetes mellitus inadequate control | | | |
| subjects affected / exposed | 0 / 230 (0.00%) | 1 / 456 (0.22%) | |
| occurrences causally related to treatment / all | 0 / 0 | 1 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hyperglycaemia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |
| Hypovolaemia | | | |
| subjects affected / exposed | 1 / 230 (0.43%) | 0 / 456 (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: 5 %

| Non-serious adverse events | Placebo + BSC Group | Fruquintinib + BSC Group | |
|---|---------------------|--------------------------|--|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 205 / 230 (89.13%) | 446 / 456 (97.81%) | |
| Vascular disorders | | | |
| Hypertension | | | |
| subjects affected / exposed | 21 / 230 (9.13%) | 166 / 456 (36.40%) | |
| occurrences (all) | 24 | 274 | |
| General disorders and administration site conditions | | | |
| Fatigue | | | |
| subjects affected / exposed | 37 / 230 (16.09%) | 93 / 456 (20.39%) | |
| occurrences (all) | 41 | 139 | |
| Asthenia | | | |
| subjects affected / exposed | 52 / 230 (22.61%) | 153 / 456 (33.55%) | |
| occurrences (all) | 75 | 304 | |
| Pyrexia | | | |

| | | | |
|--|------------------------|-------------------------|--|
| subjects affected / exposed occurrences (all) | 22 / 230 (9.57%) 25 | 43 / 456 (9.43%) 58 | |
| Mucosal inflammation subjects affected / exposed occurrences (all) | 6 / 230 (2.61%) 7 | 62 / 456 (13.60%) 97 | |
| Oedema peripheral subjects affected / exposed occurrences (all) | 17 / 230 (7.39%) 20 | 23 / 456 (5.04%) 34 | |
| Respiratory, thoracic and mediastinal disorders Dysphonia subjects affected / exposed occurrences (all) | 12 / 230 (5.22%) 12 | 75 / 456 (16.45%) 84 | |
| Cough subjects affected / exposed occurrences (all) | 21 / 230 (9.13%) 24 | 39 / 456 (8.55%) 50 | |
| Dyspnoea subjects affected / exposed occurrences (all) | 22 / 230 (9.57%) 27 | 39 / 456 (8.55%) 49 | |
| Psychiatric disorders Insomnia subjects affected / exposed occurrences (all) | 12 / 230 (5.22%) 12 | 26 / 456 (5.70%) 26 | |
| Investigations Weight decreased subjects affected / exposed occurrences (all) | 21 / 230 (9.13%) 21 | 58 / 456 (12.72%) 82 | |
| Aspartate aminotransferase increased subjects affected / exposed occurrences (all) | 10 / 230 (4.35%) 13 | 50 / 456 (10.96%) 74 | |
| Alanine aminotransferase increased subjects affected / exposed occurrences (all) | 8 / 230 (3.48%) 10 | 49 / 456 (10.75%) 74 | |
| Blood bilirubin increased subjects affected / exposed occurrences (all) | 10 / 230 (4.35%) 14 | 33 / 456 (7.24%) 43 | |
| Blood thyroid stimulating hormone | | | |

| | | | |
|--------------------------------------|-------------------|-------------------|--|
| increased | | | |
| subjects affected / exposed | 3 / 230 (1.30%) | 32 / 456 (7.02%) | |
| occurrences (all) | 3 | 35 | |
| Platelet count decreased | | | |
| subjects affected / exposed | 2 / 230 (0.87%) | 28 / 456 (6.14%) | |
| occurrences (all) | 2 | 38 | |
| Blood alkaline phosphatase increased | | | |
| subjects affected / exposed | 10 / 230 (4.35%) | 24 / 456 (5.26%) | |
| occurrences (all) | 11 | 29 | |
| Nervous system disorders | | | |
| Headache | | | |
| subjects affected / exposed | 10 / 230 (4.35%) | 40 / 456 (8.77%) | |
| occurrences (all) | 11 | 47 | |
| Blood and lymphatic system disorders | | | |
| Anaemia | | | |
| subjects affected / exposed | 28 / 230 (12.17%) | 38 / 456 (8.33%) | |
| occurrences (all) | 39 | 55 | |
| Thrombocytopenia | | | |
| subjects affected / exposed | 3 / 230 (1.30%) | 30 / 456 (6.58%) | |
| occurrences (all) | 4 | 47 | |
| Gastrointestinal disorders | | | |
| Abdominal pain upper | | | |
| subjects affected / exposed | 8 / 230 (3.48%) | 35 / 456 (7.68%) | |
| occurrences (all) | 9 | 45 | |
| Stomatitis | | | |
| subjects affected / exposed | 7 / 230 (3.04%) | 67 / 456 (14.69%) | |
| occurrences (all) | 8 | 108 | |
| Constipation | | | |
| subjects affected / exposed | 22 / 230 (9.57%) | 75 / 456 (16.45%) | |
| occurrences (all) | 25 | 82 | |
| Abdominal pain | | | |
| subjects affected / exposed | 36 / 230 (15.65%) | 80 / 456 (17.54%) | |
| occurrences (all) | 44 | 107 | |
| Nausea | | | |
| subjects affected / exposed | 43 / 230 (18.70%) | 82 / 456 (17.98%) | |
| occurrences (all) | 48 | 102 | |
| Vomiting | | | |

| | | | |
|--|-------------------------|---------------------------|--|
| subjects affected / exposed occurrences (all) | 25 / 230 (10.87%) 32 | 67 / 456 (14.69%) 81 | |
| Diarrhoea subjects affected / exposed occurrences (all) | 24 / 230 (10.43%) 31 | 113 / 456 (24.78%) 173 | |
| Skin and subcutaneous tissue disorders Palmar-plantar erythrodysaesthesia syndrome subjects affected / exposed occurrences (all) | 6 / 230 (2.61%) 6 | 89 / 456 (19.52%) 224 | |
| Renal and urinary disorders Proteinuria subjects affected / exposed occurrences (all) | 12 / 230 (5.22%) 25 | 81 / 456 (17.76%) 167 | |
| Endocrine disorders Hypothyroidism subjects affected / exposed occurrences (all) | 1 / 230 (0.43%) 1 | 94 / 456 (20.61%) 101 | |
| Musculoskeletal and connective tissue disorders Back pain subjects affected / exposed occurrences (all) | 17 / 230 (7.39%) 24 | 48 / 456 (10.53%) 61 | |
| Pain in extremity subjects affected / exposed occurrences (all) | 6 / 230 (2.61%) 7 | 28 / 456 (6.14%) 39 | |
| Arthralgia subjects affected / exposed occurrences (all) | 10 / 230 (4.35%) 11 | 52 / 456 (11.40%) 60 | |
| Metabolism and nutrition disorders Decreased appetite subjects affected / exposed occurrences (all) | 41 / 230 (17.83%) 48 | 127 / 456 (27.85%) 178 | |
| Hypokalaemia subjects affected / exposed occurrences (all) | 4 / 230 (1.74%) 6 | 29 / 456 (6.36%) 36 | |

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|-------------------|--|
| 08 April 2020 | Global Amendment 1: -Added language allowing subjects to continue receiving treatment following PD by RECIST v1.1 -Modified requirement for prior treatment with TAS-102 or regorafenib |
| 30 October 2020 | Global Amendment 2: -Increased the number of subjects to up to 687 and the planned number of sites from 100 sites to 140 sites -Provided country-level flexibility for molecular characterization of MSI/MMR status |
| 16 March 2021 | Global Amendment 3: -Added notes regarding temporary change of PK sampling, ECG collection, and ctDNA sample collection -Added specification to prohibit live vaccines during the study and for 3 months after the last dose of study drug(s) -Added specification that study drug should have been administered around the same time each day and that a missed dose could have been administered within 12 hours of usual administration time -Clarified statistical methods |
| 24 June 2021 | Global Amendment 4: -Removed instruction to avoid proton pump inhibitor drugs and H2 blockers -Increased the number of the planned study sites from 140 to 160 -Removed requirement for the collection of blood to evaluate ctDNA -Changed the protein level for which a 24-hour urine assessment was required |
| 01 September 2022 | Global Amendment 4 Addendum 1: Described the long-term extension plan, which was in place since the original protocol; visits and assessments to be performed for subjects continuing to receive fruquintinib were described to ensure their safety and clinical oversight. |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported