Clinical trial results:
A Phase II, Multicenter, Randomized, Double Masked, Active Comparator-controlled Study to Investigate the Efficacy, Safety, Tolerability, Pharmacokinetics, and Pharmacodynamics of RO7200220 Administered Intravitreally in Patients With Diabetic Macular Edema

Summary

EudraCT number	2021-003756-16
Trial protocol	ES CZ PL
Global end of trial date	21 April 2025

Results information

Result version number	v1 (current)
This version publication date	03 May 2026
First version publication date	03 May 2026

Trial information

Trial identification

Sponsor protocol code	BP43445

Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT05151731
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	F. Hoffmann-La Roche AG
Sponsor organisation address	Grenzacherstrasse 124, Basel, Switzerland, CH-4058
Public contact	F. Hoffmann-La Roche AG, F. Hoffmann-La Roche AG, +41 616878333, global.trial_information@roche.com
Scientific contact	F. Hoffmann-La Roche AG, F. Hoffmann-La Roche AG, +41 616878333, global.trial_information@roche.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	21 April 2025
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	21 April 2025
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

The main aim of the study was to evaluate the effects of vamikibart on visual function by assessing changes from baseline in best-corrected visual acuity (BCVA) in treatment-naïve participants with diabetic macular edema (DME).

Protection of trial subjects:

All study subjects were required to read and sign an Informed Consent Form (ICF).

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	31 December 2021
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	United States: 231
Country: Number of subjects enrolled	Poland: 16
Country: Number of subjects enrolled	Korea, Republic of: 16
Country: Number of subjects enrolled	United Kingdom: 11
Country: Number of subjects enrolled	Spain: 12
Country: Number of subjects enrolled	Czechia: 25
Country: Number of subjects enrolled	Canada: 9
Country: Number of subjects enrolled	Argentina: 74
Worldwide total number of subjects	394
EEA total number of subjects	53

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)	215
From 65 to 84 years	179
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

A total of 394 participants with DME took part in the study at 74 investigative sites across Argentina, Canada, Czech Republic, Spain, Republic of Korea, Poland, the United Kingdom and the United States from 31 December 2021 to 21 April 2025.

Pre-assignment

Screening details:

Participants were randomized into 1:1:1:1 ratio to 4-parallel arms- 0.25 milligrams (mg) Vamikibart every 8th week (Q8W), 1 mg Vamikibart Q8W, 1 mg Vamikibart every 4th week (Q4W), and 0.5 mg Ranibizumab Q4W, to receive treatment up to Week 44, followed by off-treatment observation.

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	Subject, Investigator, Assessor, Monitor, Carer, Data analyst

Arms

Are arms mutually exclusive?	Yes
Arm title	Arm A: Vamikibart 0.25 mg Q8W

Arm description:

Participants received vamikibart, 0.25 mg, intravitreal (IVT) injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.

Arm type	Experimental
Investigational medicinal product name	Vamikibart
Investigational medicinal product code	RO7200220
Other name	
Pharmaceutical forms	Solution for injection
Routes of administration	Intravitreal use

Dosage and administration details:

Vamikibart, 0.25 mg, by IVT injection, on Day 1 and Q8W up to Week 44.

Arm title	Arm B: Vamikibart 1 mg Q8W

Arm description:

Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.

Arm type	Experimental
Investigational medicinal product name	Vamikibart
Investigational medicinal product code	RO7200220
Other name	
Pharmaceutical forms	Solution for injection
Routes of administration	Intravitreal use

Dosage and administration details:

Vamikibart, 1 mg, by IVT injection, on Day 1 and Q8W up to Week 44.

Arm title	Arm C: Vamikibart 1 mg Q4W

Arm description:

Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q4W for a

total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.

Arm type	Experimental
Investigational medicinal product name	Vamikibart
Investigational medicinal product code	RO7200220
Other name	
Pharmaceutical forms	Solution for injection
Routes of administration	Intravitreal use

Dosage and administration details:

Vamikibart, 1 mg, by IVT injection, on Day 1 and Q4W up to Week 44.

Arm title	Arm D: Ranibizumab 0.5 mg Q4W

Arm description:

Participants received ranibizumab, 0.5 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.

Arm type	Active comparator
Investigational medicinal product name	Ranibizumab
Investigational medicinal product code	
Other name	Lucentis
Pharmaceutical forms	Solution for injection
Routes of administration	Intravitreal use

Dosage and administration details:

Ranibizumab, 0.5 mg, by IVT injection, on Day 1 and Q4W up to Week 44.

Number of subjects in period 1	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W
Started	95	101	98
Safety-evaluable Population	94	100	98
Treatment-naïve Intent-to-treat (ITT)	65	65	64
Previously Treated ITT Population	30 [1]	36 [2]	34 [3]
Completed	57	64	64
Not completed	38	37	34
Physician decision	1	2	4
Consent withdrawn by subject	6	3	6
Adverse Event	8	9	9
Death	1	1	1
Reason Not Specified	6	11	6
Non-compliance With Study Drug	-	-	1
Lost to follow-up	3	1	4
Need for Rescue Treatment	11	10	1
Protocol deviation	2	-	2

Number of subjects in period 1	Arm D: Ranibizumab 0.5 mg Q4W
Started	100
Safety-evaluable Population	98

Treatment-naïve Intent-to-treat (ITT)	65 [4]
Previously Treated ITT Population	35 [5]
Completed	84
Not completed	16
Physician decision	-
Consent withdrawn by subject	6
Adverse Event	3
Death	1
Reason Not Specified	2
Non-compliance With Study Drug	1
Lost to follow-up	3
Need for Rescue Treatment	-
Protocol deviation	-

Notes:

[1] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: The number of participants in the respective analysis population are presented here.

[2] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: The number of participants in the respective analysis population are presented here.

[3] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: The number of participants in the respective analysis population are presented here.

[4] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: The number of participants in the respective analysis population are presented here.

[5] - The number of subjects at this milestone seems inconsistent with the number of subjects in the arm. It is expected that the number of subjects will be greater than, or equal to the number that completed, minus those who left.

Justification: The number of participants in the respective analysis population are presented here.

Baseline characteristics

Reporting groups	
Reporting group title	Arm A: Vamikibart 0.25 mg Q8W
Reporting group description:	
Participants received vamikibart, 0.25 mg, intravitreal (IVT) injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.	
Reporting group title	Arm B: Vamikibart 1 mg Q8W
Reporting group description:	
Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.	
Reporting group title	Arm C: Vamikibart 1 mg Q4W
Reporting group description:	
Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.	
Reporting group title	Arm D: Ranibizumab 0.5 mg Q4W
Reporting group description:	
Participants received ranibizumab, 0.5 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.	

Reporting group values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W
Number of subjects	95	101	98
Age categorical Units: Subjects			
Age Continuous Units: years			
arithmetic mean	64.2	63.2	62.8
standard deviation	± 9.8	± 10.0	± 8.7
Sex: Female, Male Units: participants			
Female	51	45	43
Male	44	56	55
Race (NIH/OMB) Units: Subjects			
American Indian or Alaska Native	2	1	1
Asian	5	6	5
Native Hawaiian or Other Pacific Islander	0	0	0
Black or African American	10	6	6
White	36	45	49
More than one race	0	0	0
Unknown or Not Reported	42	43	37
Ethnicity (NIH/OMB) Units: Subjects			

Hispanic or Latino	15	14	10
Not Hispanic or Latino	42	47	54
Unknown or Not Reported	38	40	34

Reporting group values	Arm D: Ranibizumab 0.5 mg Q4W	Total	
Number of subjects	100	394	
Age categorical Units: Subjects			
Age Continuous Units: years			
arithmetic mean	59.8		
standard deviation	± 9.8	-	
Sex: Female, Male Units: participants			
Female	45	184	
Male	55	210	
Race (NIH/OMB) Units: Subjects			
American Indian or Alaska Native	0	4	
Asian	6	22	
Native Hawaiian or Other Pacific Islander	0	0	
Black or African American	6	28	
White	50	180	
More than one race	0	0	
Unknown or Not Reported	38	160	
Ethnicity (NIH/OMB) Units: Subjects			
Hispanic or Latino	8	47	
Not Hispanic or Latino	55	198	
Unknown or Not Reported	37	149	

End points

End points reporting groups

Reporting group title	Arm A: Vamikibart 0.25 mg Q8W
Reporting group description:	
Participants received vamikibart, 0.25 mg, intravitreal (IVT) injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.	
Reporting group title	Arm B: Vamikibart 1 mg Q8W
Reporting group description:	
Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.	
Reporting group title	Arm C: Vamikibart 1 mg Q4W
Reporting group description:	
Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.	
Reporting group title	Arm D: Ranibizumab 0.5 mg Q4W
Reporting group description:	
Participants received ranibizumab, 0.5 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.	

Primary: Change From Baseline in BCVA Averaged Over Week 44 and Week 48, in Treatment-naïve Participants

End point title	Change From Baseline in BCVA Averaged Over Week 44 and Week 48, in Treatment-naïve Participants
End point description:	
BCVA was measured at a starting test distance of 4 meters (m) for both eyes, prior to dilation by using set of three Precision visionTM or Lighthouse distance acuity charts (modified early treatment diabetic retinopathy study [ETDRS] charts 1, 2 and R) by trained & certified personnel at study sites at each study visit. BCVA letter score ranges from 0-100 (best score attainable), & gain in BCVA letter score from baseline indicates improved visual acuity. This analysis used a Mixed Model for Repeated Measurements (MMRM) model. Adjusted mean has been reported. Treatment-naïve ITT population=all randomized participants who were naïve to IVT anti-vascular endothelial growth factor (VEGF) or periocular/IVT corticosteroids treatment. Participants were grouped according to treatment assigned at randomization.	
End point type	Primary
End point timeframe:	
Baseline, Weeks 44 and 48	

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	65	65	64	65
Units: ETDRS letters				
arithmetic mean (standard error)	7.1 (± 1.28)	4.6 (± 1.26)	5.5 (± 1.29)	13.0 (± 1.26)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0012
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	-8.9
upper limit	-3
Variability estimate	Standard error of the mean
Dispersion value	1.79

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-8.4
Confidence interval	
level	90 %
sides	2-sided
lower limit	-11.3
upper limit	-5.4
Variability estimate	Standard error of the mean
Dispersion value	1.78

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W

Number of subjects included in analysis	129
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.5
Confidence interval	
level	90 %
sides	2-sided
lower limit	-10.5
upper limit	-4.5
Variability estimate	Standard error of the mean
Dispersion value	1.8

Secondary: Number of Participants With Systemic and Ocular Adverse Events (AEs)

End point title	Number of Participants With Systemic and Ocular Adverse Events (AEs)

End point description:

An AE was any untoward medical occurrence in a participant or clinical investigation participant administered a pharmaceutical product and which does not necessarily have to have a causal relationship with this treatment. An AE can therefore be any unfavorable and unintended sign (including an abnormal laboratory finding), symptom, or disease temporally associated with the use of a medicinal product, whether or not considered related to the medicinal product. Systemic AEs include all non-ocular AEs. Only one eye was selected as the study eye, while the other was referred to as the fellow eye. Safety analysis population included all participants randomized to study treatment and who received at least one dose of the study treatment, whether prematurely withdrawn from the study or not. Participants were grouped according to the actual treatment received.

End point type	Secondary

End point timeframe:

Up to Week 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	94	100	98	98
Units: participants				
Systemic AEs	43	58	54	65
Ocular AEs in Study Eye	39	46	41	31
Ocular AEs in Fellow Eye	13	25	24	29

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in BCVA Averaged Over Week 44 and Week 48, in

Previously Treated Participants

End point title	Change From Baseline in BCVA Averaged Over Week 44 and Week 48, in Previously Treated Participants

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Previously treated ITT population included all randomized participants who were previously treated with IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 44 and 48

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	30	36	34	35
Units: ETDRS letters				
arithmetic mean (standard error)	2.0 (± 2.74)	-0.5 (± 2.39)	-0.4 (± 2.49)	9.6 (± 2.21)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	65
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.034
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.6
Confidence interval	
level	90 %
sides	2-sided
lower limit	-13.4
upper limit	-1.7
Variability estimate	Standard error of the mean
Dispersion value	3.52

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W

Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0027
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-10.1
Confidence interval	
level	90 %
sides	2-sided
lower limit	-15.5
upper limit	-4.7
Variability estimate	Standard error of the mean
Dispersion value	3.26

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	69
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0036
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-10
Confidence interval	
level	90 %
sides	2-sided
lower limit	-15.5
upper limit	-4.4
Variability estimate	Standard error of the mean
Dispersion value	3.32

Secondary: Change From Baseline in BCVA Averaged Over Week 44 and Week 48, in Overall Enrolled Population

End point title	Change From Baseline in BCVA Averaged Over Week 44 and Week 48, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants.

End point type	Secondary

End point timeframe:

Baseline, Weeks 44 and 48

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: ETDRS letters				
arithmetic mean (standard error)	5.2 (± 1.19)	3.3 (± 1.13)	3.8 (± 1.16)	11.7 (± 1.09)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	195
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-6.5
Confidence interval	
level	90 %
sides	2-sided
lower limit	-9.2
upper limit	-3.8
Variability estimate	Standard error of the mean
Dispersion value	1.61

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	201
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-8.4
Confidence interval	
level	90 %
sides	2-sided
lower limit	-11
upper limit	-5.8

Variability estimate	Standard error of the mean
Dispersion value	1.57

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	198
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	-10.5
upper limit	-5.2
Variability estimate	Standard error of the mean
Dispersion value	1.59

Secondary: Change From Baseline in BCVA Averaged Over Week 32 and Week 36, in Treatment-naïve Participants

End point title	Change From Baseline in BCVA Averaged Over Week 32 and Week 36, in Treatment-naïve Participants

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Treatment-naïve ITT population included all randomized participants who were naïve to IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 32 and 36

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	65	65	64	65
Units: ETDRS letters				
arithmetic mean (standard error)	5.8 (± 1.24)	3.4 (± 1.23)	5.8 (± 1.26)	13.0 (± 1.23)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.2
Confidence interval	
level	90 %
sides	2-sided
lower limit	-10.1
upper limit	-4.3
Variability estimate	Standard error of the mean
Dispersion value	1.75

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-9.5
Confidence interval	
level	90 %
sides	2-sided
lower limit	-12.4
upper limit	-6.7
Variability estimate	Standard error of the mean
Dispersion value	1.74

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W

Number of subjects included in analysis	129
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.2
Confidence interval	
level	90 %
sides	2-sided
lower limit	-10.1
upper limit	-4.3
Variability estimate	Standard error of the mean
Dispersion value	1.76

Secondary: Change From Baseline in BCVA Averaged Over Week 32 and Week 36, in Previously Treated Participants

End point title	Change From Baseline in BCVA Averaged Over Week 32 and Week 36, in Previously Treated Participants

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Previously treated ITT population included all randomized participants who were previously treated with IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 32 and 36

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	30	36	34	35
Units: ETDRS letters				
arithmetic mean (standard error)	2.0 (± 1.31)	3.4 (± 1.14)	4.4 (± 1.20)	8.5 (± 1.12)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W

Number of subjects included in analysis	65
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-6.5
Confidence interval	
level	90 %
sides	2-sided
lower limit	-9.4
upper limit	-3.6
Variability estimate	Standard error of the mean
Dispersion value	1.73

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0022
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5
Confidence interval	
level	90 %
sides	2-sided
lower limit	-7.7
upper limit	-2.4
Variability estimate	Standard error of the mean
Dispersion value	1.6

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	69
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0141
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-4.1

Confidence interval	
level	90 %
sides	2-sided
lower limit	-6.8
upper limit	-1.4
Variability estimate	Standard error of the mean
Dispersion value	1.64

Secondary: Change From Baseline in BCVA Averaged Over Week 32 and Week 36, in Overall Enrolled Population

End point title	Change From Baseline in BCVA Averaged Over Week 32 and Week 36, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants.

End point type	Secondary

End point timeframe:

Baseline, Weeks 32 and 36

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: ETDRS letters				
arithmetic mean (standard error)	4.4 (± 0.93)	3.6 (± 0.88)	5.5 (± 0.91)	11.4 (± 0.88)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	195
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7

Confidence interval	
level	90 %
sides	2-sided
lower limit	-9.1
upper limit	-4.9
Variability estimate	Standard error of the mean
Dispersion value	1.28

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	201
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.8
Confidence interval	
level	90 %
sides	2-sided
lower limit	-9.9
upper limit	-5.8
Variability estimate	Standard error of the mean
Dispersion value	1.24

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	198
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	-8
upper limit	-3.8
Variability estimate	Standard error of the mean
Dispersion value	1.27

Secondary: Change From Baseline in BCVA Averaged Over Week 20 and Week 24, in Treatment-naïve Participants

End point title	Change From Baseline in BCVA Averaged Over Week 20 and Week 24, in Treatment-naïve Participants

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Treatment-naïve ITT population included all randomized participants who were naïve to IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 20 and 24

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	65	65	64	65
Units: ETDRS letters				
arithmetic mean (standard error)	6.4 (± 1.19)	3.5 (± 1.18)	5.3 (± 1.20)	11.1 (± 1.19)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0051
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-4.8
Confidence interval	
level	90 %
sides	2-sided
lower limit	-7.6
upper limit	-2
Variability estimate	Standard error of the mean
Dispersion value	1.69

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg

	Q4W
Number of subjects included in analysis	129
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0006
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	-8.6
upper limit	-3.1
Variability estimate	Standard error of the mean
Dispersion value	1.69

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-7.6
Confidence interval	
level	90 %
sides	2-sided
lower limit	-10.4
upper limit	-4.8
Variability estimate	Standard error of the mean
Dispersion value	1.68

Secondary: Change From Baseline in BCVA Averaged Over Week 20 and Week 24, in Previously Treated Participants

End point title	Change From Baseline in BCVA Averaged Over Week 20 and Week 24, in Previously Treated Participants

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Previously treated ITT population included all randomized participants who were previously treated with IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:
Baseline, Weeks 20 and 24

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	30	36	34	35
Units: ETDRS letters				
arithmetic mean (standard error)	2.7 (± 1.36)	2.8 (± 1.19)	5.4 (± 1.22)	8.4 (± 1.18)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	65
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.002
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5.7
Confidence interval	
level	90 %
sides	2-sided
lower limit	-8.7
upper limit	-2.7
Variability estimate	Standard error of the mean
Dispersion value	1.8

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	69
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0796
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-3

Confidence interval	
level	90 %
sides	2-sided
lower limit	-5.8
upper limit	-0.2
Variability estimate	Standard error of the mean
Dispersion value	1.7

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0012
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5.6
Confidence interval	
level	90 %
sides	2-sided
lower limit	-8.4
upper limit	-2.8
Variability estimate	Standard error of the mean
Dispersion value	1.68

Secondary: Change From Baseline in BCVA Averaged Over Week 20 and Week 24, in Overall Enrolled Population

End point title	Change From Baseline in BCVA Averaged Over Week 20 and Week 24, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants.

End point type	Secondary

End point timeframe:

Baseline, Weeks 20 and 24

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: ETDRS letters				
arithmetic mean (standard error)	5.1 (± 0.92)	3.3 (± 0.87)	5.4 (± 0.89)	10.2 (± 0.88)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	195
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-5.1
Confidence interval	
level	90 %
sides	2-sided
lower limit	-7.2
upper limit	-3
Variability estimate	Standard error of the mean
Dispersion value	1.27

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	201
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-6.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	-8.9
upper limit	-4.8
Variability estimate	Standard error of the mean
Dispersion value	1.24

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	198
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	-4.8
Confidence interval	
level	90 %
sides	2-sided
lower limit	-6.8
upper limit	-2.7
Variability estimate	Standard error of the mean
Dispersion value	1.25

Secondary: Change From Baseline in BCVA Over Time, in Overall Enrolled Population

End point title	Change From Baseline in BCVA Over Time, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 4, 8, 12, 16, 20, 24, 28, 32, 36, 40, 44, 48, 52, 56, 60, 64, 68, 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: ETDRS letters				
arithmetic mean (standard error)				
Change at Week 4 (n=89, 97, 94, 96)	3.0 (± 0.65)	2.3 (± 0.63)	3.8 (± 0.64)	6.2 (± 0.63)
Change at Week 8 (n=85, 96, 90, 93)	4.3 (± 0.68)	3.3 (± 0.65)	5.1 (± 0.66)	7.6 (± 0.66)
Change at Week 12 (n=78, 96, 87, 92)	4.4 (± 0.87)	4.2 (± 0.82)	4.6 (± 0.84)	8.2 (± 0.83)
Change at Week 16 (n=83, 92, 89, 88)	4.5 (± 0.85)	3.7 (± 0.81)	5.0 (± 0.83)	9.1 (± 0.83)
Change at Week 20 (n=78, 91, 83, 91)	5.2 (± 0.98)	3.5 (± 0.92)	5.0 (± 0.95)	10.2 (± 0.93)
Change at Week 24 (n=76, 85, 80, 85)	5.0 (± 0.93)	3.2 (± 0.88)	5.9 (± 0.90)	10.3 (± 0.89)
Change at Week 28 (n=74, 85, 74, 84)	4.6 (± 0.95)	3.1 (± 0.90)	5.3 (± 0.93)	10.6 (± 0.91)
Change at Week 32 (n=69, 79, 67, 87)	4.5 (± 0.95)	3.4 (± 0.90)	5.8 (± 0.94)	11.3 (± 0.90)
Change at Week 36 (n=69, 80, 69, 83)	4.2 (± 0.98)	3.6 (± 0.92)	5.2 (± 0.96)	11.4 (± 0.92)

Change at Week 40 (n=65, 70, 68, 82)	4.7 (± 1.25)	2.3 (± 1.19)	4.5 (± 1.22)	11.8 (± 1.14)
Change at Week 44 (n=64, 71, 66, 81)	5.3 (± 1.22)	3.5 (± 1.16)	4.3 (± 1.19)	11.7 (± 1.12)
Change at Week 48 (n=59, 67, 66, 83)	4.9 (± 1.22)	2.9 (± 1.16)	3.2 (± 1.19)	11.5 (± 1.11)
Change at Week 52 (n=53, 62, 64, 82)	4.8 (± 1.11)	4.1 (± 1.05)	4.7 (± 1.07)	10.4 (± 1.01)
Change at Week 56 (n=47, 60, 53, 76)	4.3 (± 1.34)	2.5 (± 1.26)	4.1 (± 1.30)	9.8 (± 1.20)
Change at Week 60 (n=46, 55, 50, 67)	4.3 (± 1.41)	3.5 (± 1.32)	3.3 (± 1.37)	8.8 (± 1.25)
Change at Week 64 (n=41, 54, 48, 54)	4.8 (± 1.45)	3.7 (± 1.35)	2.4 (± 1.40)	9.2 (± 1.30)
Change at Week 68 (n=40, 48, 44, 53)	5.6 (± 1.36)	4.2 (± 1.28)	2.9 (± 1.32)	9.7 (± 1.22)
Change at Week 72 (n=37, 47, 39, 47)	4.5 (± 1.39)	3.6 (± 1.29)	2.9 (± 1.35)	9.2 (± 1.24)

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants Gaining Greater Than or Equal to (≥) 15, ≥ 10, ≥ 5, or ≥ 0 Letters in BCVA From Baseline Over Time, in Overall Enrolled Population

End point title	Percentage of Participants Gaining Greater Than or Equal to (≥) 15, ≥ 10, ≥ 5, or ≥ 0 Letters in BCVA From Baseline Over Time, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. Percentages have been summarized. Overall ITT population included all randomized participants. Number analyzed is the number of participants with data available for analysis.

End point type	Secondary

End point timeframe:

From baseline up to Week 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	94	100	98	98
Units: percentage of participants				
number (not applicable)				
Participants gaining ≥ 0 Letters	97.9	98.0	99.0	100
Participants gaining ≥ 5 Letters	79.8	83.0	76.5	94.9
Participants gaining ≥ 10 Letters	51.1	60.0	56.1	75.5
Participants gaining ≥ 15 Letters	26.6	28.0	34.7	58.2

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants Avoiding a Loss of ≥ 15, ≥ 10, or ≥ 5 Letters in BCVA From Baseline Over Time, in Overall Enrolled Population

End point title	Percentage of Participants Avoiding a Loss of ≥ 15, ≥ 10, or ≥ 5 Letters in BCVA From Baseline Over Time, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 to 100 (best score attainable), and a gain in BCVA letter score from baseline indicates an improvement in visual acuity. Percentages have been summarized. Overall ITT population included all randomized participants. Number analyzed is the number of participants with data available for analysis.

End point type	Secondary

End point timeframe:

From baseline up to Week 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	94	100	98	98
Units: percentage of participants				
number (not applicable)				
Participants avoiding a loss of ≥ 5 Letters	70.2	61.0	64.3	83.7
Participants avoiding a loss of ≥ 10 Letters	85.1	80.0	87.8	93.9
Participants avoiding a loss of ≥ 15 Letters	92.6	87.0	89.8	95.9

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With BCVA ≥ 69 Letters (20/40 Snellen Equivalent) Over Time, in Overall Enrolled Population

End point title	Percentage of Participants With BCVA ≥ 69 Letters (20/40 Snellen Equivalent) Over Time, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 (Snellen equivalent <20/800) to 100 (Snellen equivalent of 20/10) letters. A gain in BCVA letter score from baseline indicates an improvement in visual acuity. Percentages have been summarized. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 1, 4, 8, 12, 16, 20, 24, 28, 32, 36, 40, 44, 48, 52, 56, 60, 64, 68, and 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: percentage of participants				
number (not applicable)				
Baseline (n=95, 101, 98, 100)	34.7	32.7	43.9	35.0
Week 1 (n=90, 97, 95, 97)	45.6	44.3	53.7	53.6
Week 4 (n=89, 97, 94, 96)	50.6	49.5	55.3	65.6
Week 8 (n=85, 96, 90, 93)	56.5	46.9	63.3	73.1
Week 12 (n=78, 96, 87, 92)	59.0	51.0	63.2	78.3
Week 16 (n=83, 92, 89, 88)	57.8	52.2	61.8	77.3
Week 20 (n=78, 91, 83, 91)	62.8	50.5	61.4	79.1
Week 24 (n=76, 85, 80, 85)	64.5	52.9	65.0	83.5
Week 28 (n=74, 85, 74, 84)	63.5	52.9	68.9	77.4
Week 32 (n=69, 79, 67, 87)	71.0	51.9	67.2	81.6
Week 36 (n=69, 80, 69, 83)	65.2	53.8	66.7	84.3
Week 40 (n=65, 70, 68, 82)	64.6	57.1	72.1	81.7
Week 44 (n=64, 71, 66, 81)	68.8	62.0	69.7	84.0
Week 48 (n=59, 67, 66, 83)	67.8	62.7	57.6	84.3
Week 52 (n=53, 62, 64, 82)	66.0	61.3	65.6	75.6
Week 56 (n=47, 60, 53, 76)	78.7	60.0	73.6	77.6
Week 60 (n=46, 55, 50, 67)	67.4	58.2	76.0	80.6
Week 64 (n=41, 54, 48, 54)	75.6	57.4	72.9	83.3
Week 68 (n=40, 48, 44, 53)	70.0	58.3	65.9	84.9
Week 72 (n=37, 47, 39, 47)	67.6	66.0	74.4	83.0

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With BCVA ≥ 84 Letters (20/20 Snellen Equivalent) Over Time, in Overall Enrolled Population

End point title	Percentage of Participants With BCVA ≥ 84 Letters (20/20 Snellen Equivalent) Over Time, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 (Snellen equivalent <20/800) to 100 (Snellen equivalent of 20/10) letters. A gain in BCVA letter score from baseline indicates an improvement in visual acuity. Percentages have been summarized. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 1, 4, 8, 12, 16, 20, 24, 28, 32, 36, 40, 44, 48, 52, 56, 60, 64, 68, and 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: percentage of participants				
number (not applicable)				
Baseline (n=95, 101, 98, 100)	1.1	1.0	0	1.0
Week 1 (n=90, 97, 95, 97)	2.2	0	0	6.2
Week 4 (n=89, 97, 94, 96)	4.5	0	4.3	3.1
Week 8 (n=85, 96, 90, 93)	3.5	5.2	5.6	5.4
Week 12 (n=78, 96, 87, 92)	6.4	2.1	8.0	6.5
Week 16 (n=83, 92, 89, 88)	7.2	3.3	11.2	9.1
Week 20 (n=78, 91, 83, 91)	5.1	7.7	12.0	14.3
Week 24 (n=76, 85, 80, 85)	7.9	4.7	12.5	15.3
Week 28 (n=74, 85, 74, 84)	5.4	7.1	8.1	14.3
Week 32 (n=69, 79, 67, 87)	10.1	8.9	10.4	20.7
Week 36 (n=69, 80, 69, 83)	5.8	10.0	8.7	15.7
Week 40 (n=65, 70, 68, 82)	7.7	10.0	11.8	19.5
Week 44 (n=64, 71, 66, 81)	12.5	12.7	12.1	21.0
Week 48 (n=59, 67, 66, 83)	6.8	9.0	12.1	16.9
Week 52 (n=53, 62, 64, 82)	5.7	14.5	17.2	19.5
Week 56 (n=47, 60, 53, 76)	10.6	11.7	18.9	18.4
Week 60 (n=46, 55, 50, 67)	13.0	12.7	18.0	20.9
Week 64 (n=41, 54, 48, 54)	17.1	11.1	18.8	22.2
Week 68 (n=40, 48, 44, 53)	15.0	12.5	15.9	26.4
Week 72 (n=37, 47, 39, 47)	13.5	12.8	17.9	25.5

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With BCVA of Less Than or Equal to (≤) 38 Letters (Snellen Equivalent 20/200) Over Time, in Overall Enrolled Population

End point title	Percentage of Participants With BCVA of Less Than or Equal to (≤) 38 Letters (Snellen Equivalent 20/200) Over Time, in Overall Enrolled Population

End point description:

The BCVA, at a starting test distance of 4 m, was measured for both eyes, prior to dilating eyes by using the set of three Precision visionTM or Lighthouse distance acuity charts (modified ETDRS charts 1, 2 and R) by trained and certified personnel at the study sites and at each study visit. The BCVA letter score ranges from 0 (Snellen equivalent <20/800) to 100 (Snellen equivalent of 20/10) letters. A gain in BCVA letter score from baseline indicates an improvement in visual acuity. Percentages have been summarized. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 1, 4, 8, 12, 16, 20, 24, 28, 32, 36, 40, 44, 48, 52, 56, 60, 64, 68, and 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: percentage of participants				
number (not applicable)				
Baseline (n=95, 101, 98, 100)	1.1	1.0	1.0	1.0
Week 1 (n=90, 97, 95, 97)	2.2	3.1	1.1	0
Week 4 (n=89, 97, 94, 96)	1.1	2.1	1.1	0
Week 8 (n=85, 96, 90, 93)	1.2	1.0	0	0
Week 12 (n=78, 96, 87, 92)	1.3	1.0	1.1	0
Week 16 (n=83, 92, 89, 88)	1.2	1.1	2.2	1.1
Week 20 (n=78, 91, 83, 91)	1.3	3.3	3.6	0
Week 24 (n=76, 85, 80, 85)	1.3	2.4	1.3	0
Week 28 (n=74, 85, 74, 84)	0	2.4	1.4	0
Week 32 (n=69, 79, 67, 87)	0	1.3	1.5	0
Week 36 (n=69, 80, 69, 83)	0	1.3	2.9	0
Week 40 (n=65, 70, 68, 82)	0	1.4	4.4	0
Week 44 (n=64, 71, 66, 81)	0	0	3.0	0
Week 48 (n=59, 67, 66, 83)	1.7	1.5	3.0	0
Week 52 (n=53, 62, 64, 82)	3.8	0	1.6	0
Week 56 (n=47, 60, 53, 76)	0	1.7	3.8	0
Week 60 (n=46, 55, 50, 67)	0	1.8	4.0	0
Week 64 (n=41, 54, 48, 54)	0	1.9	4.2	0
Week 68 (n=40, 48, 44, 53)	0	2.1	2.3	0
Week 72 (n=37, 47, 39, 47)	0	2.1	5.1	0

Statistical analyses

No statistical analyses for this end point

Secondary: Change From Baseline in Central Subfield Thickness (CST) Averaged Over Weeks 44 and 48, in Treatment-naïve Participants

End point title	Change From Baseline in Central Subfield Thickness (CST) Averaged Over Weeks 44 and 48, in Treatment-naïve Participants

End point description:

CST was defined as the distance between the internal limiting membrane (ILM) and the retinal pigment epithelium (RPE), measured using Spectral Domain-Optical Coherence Tomography (SD-OCT). This analysis used a MMRM model. Adjusted mean has been reported. Treatment-naïve ITT population included all randomized participants who were naïve to IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 44 and 48

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	65	65	64	65
Units: micrometers (µm)				
arithmetic mean (standard error)	-68.4 (± 14.23)	-50.8 (± 14.18)	-67.5 (± 14.44)	-174.2 (± 13.95)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	105.8
Confidence interval	
level	90 %
sides	2-sided
lower limit	72.8
upper limit	138.7
Variability estimate	Standard error of the mean
Dispersion value	19.93

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	129
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	106.7
Confidence interval	
level	90 %
sides	2-sided
lower limit	73.5
upper limit	139.9

Variability estimate	Standard error of the mean
Dispersion value	20.09

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	123.3
Confidence interval	
level	90 %
sides	2-sided
lower limit	90.5
upper limit	156.2
Variability estimate	Standard error of the mean
Dispersion value	19.89

Secondary: Change From Baseline in CST Averaged Over Weeks 44 and 48, in Previously Treated Participants

End point title	Change From Baseline in CST Averaged Over Weeks 44 and 48, in Previously Treated Participants

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Previously treated ITT population included all randomized participants who were previously treated with IVT anti-VEGF or periocular/IVT corticosteroids. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 44 and 48

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	30	36	34	35
Units: µm				
arithmetic mean (standard error)	-40.9 (± 22.14)	-81.4 (± 19.39)	-75.8 (± 20.44)	-185.7 (± 18.54)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	65
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	144.8
Confidence interval	
level	90 %
sides	2-sided
lower limit	96.8
upper limit	192.8
Variability estimate	Standard error of the mean
Dispersion value	28.89

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	69
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	109.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	64
upper limit	155.8
Variability estimate	Standard error of the mean
Dispersion value	27.62

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	104.3

Confidence interval	
level	90 %
sides	2-sided
lower limit	59.7
upper limit	148.9
Variability estimate	Standard error of the mean
Dispersion value	26.82

Secondary: Change From Baseline in CST Averaged Over Weeks 44 and 48, in Overall Enrolled Population

End point title	Change From Baseline in CST Averaged Over Weeks 44 and 48, in Overall Enrolled Population

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants.

End point type	Secondary

End point timeframe:

Baseline, Weeks 44 and 48

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: µm				
arithmetic mean (standard error)	-57.3 (± 12.14)	-61.1 (± 11.64)	-70.5 (± 11.97)	-176.9 (± 11.32)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	195
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	119.7
Confidence interval	
level	90 %
sides	2-sided
lower limit	92.3
upper limit	147.1

Variability estimate	Standard error of the mean
Dispersion value	16.6

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	201
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	115.8
Confidence interval	
level	90 %
sides	2-sided
lower limit	89.1
upper limit	142.6
Variability estimate	Standard error of the mean
Dispersion value	16.23

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	198
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	106.4
Confidence interval	
level	90 %
sides	2-sided
lower limit	79.3
upper limit	133.6
Variability estimate	Standard error of the mean
Dispersion value	16.48

Secondary: Change From Baseline in CST Averaged Over Weeks 32 and 36, in Treatment-naïve Participants

End point title	Change From Baseline in CST Averaged Over Weeks 32 and 36, in Treatment-naïve Participants

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis

used a MMRM model. Adjusted mean has been reported. Treatment-naïve ITT population included all randomized participants who were naïve to IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 32 and 36

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	65	65	64	65
Units: µm				
arithmetic mean (standard error)	-57.1 (± 14.02)	-46.9 (± 13.94)	-64.8 (± 14.22)	-163.9 (± 13.87)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	106.7
Confidence interval	
level	90 %
sides	2-sided
lower limit	74.2
upper limit	139.3
Variability estimate	Standard error of the mean
Dispersion value	19.72

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	117

Confidence interval	
level	90 %
sides	2-sided
lower limit	84.5
upper limit	149.5
Variability estimate	Standard error of the mean
Dispersion value	19.66

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	129
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	99.1
Confidence interval	
level	90 %
sides	2-sided
lower limit	66.3
upper limit	131.9
Variability estimate	Standard error of the mean
Dispersion value	19.87

Secondary: Change From Baseline in CST Averaged Over Weeks 32 and 36, in Previously Treated Participants

End point title	Change From Baseline in CST Averaged Over Weeks 32 and 36, in Previously Treated Participants

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Previously treated ITT population included all randomized participants who were previously treated with IVT anti-VEGF or periocular/IVT corticosteroids. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 32 and 36

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	30	36	34	35
Units: µm				
arithmetic mean (standard error)	-35.4 (± 19.87)	-90.5 (± 17.45)	-81.5 (± 18.34)	-168.5 (± 17.10)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	65
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	133.1
Confidence interval	
level	90 %
sides	2-sided
lower limit	89.5
upper limit	176.7
Variability estimate	Standard error of the mean
Dispersion value	26.23

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.002
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	78
Confidence interval	
level	90 %
sides	2-sided
lower limit	37.3
upper limit	118.6
Variability estimate	Standard error of the mean
Dispersion value	24.41

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	69
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0008
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	87
Confidence interval	
level	90 %
sides	2-sided
lower limit	45.3
upper limit	128.8
Variability estimate	Standard error of the mean
Dispersion value	25.09

Secondary: Change From Baseline in CST Averaged Over Weeks 32 and 36, in Overall Enrolled Population

End point title	Change From Baseline in CST Averaged Over Weeks 32 and 36, in Overall Enrolled Population

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants.

End point type	Secondary

End point timeframe:

Baseline, Weeks 32 and 36

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: µm				
arithmetic mean (standard error)	-47.6 (± 11.57)	-62.1 (± 11.09)	-69.4 (± 11.41)	-164.8 (± 10.95)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	195
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	117.2
Confidence interval	
level	90 %
sides	2-sided
lower limit	90.9
upper limit	143.5
Variability estimate	Standard error of the mean
Dispersion value	15.93

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	201
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	102.6
Confidence interval	
level	90 %
sides	2-sided
lower limit	76.9
upper limit	128.3
Variability estimate	Standard error of the mean
Dispersion value	15.58

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	198
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	95.3

Confidence interval	
level	90 %
sides	2-sided
lower limit	69.2
upper limit	121.4
Variability estimate	Standard error of the mean
Dispersion value	15.82

Secondary: Change From Baseline in CST Averaged Over Weeks 20 and 24, in Treatment-naïve Participants

End point title	Change From Baseline in CST Averaged Over Weeks 20 and 24, in Treatment-naïve Participants

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Treatment-naïve ITT population included all randomized participants who were naïve to IVT anti-VEGF or periocular/IVT corticosteroids treatment. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 20 and 24

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	65	65	64	65
Units: µm				
arithmetic mean (standard error)	-48.5 (± 11.61)	-68.8 (± 11.53)	-68.5 (± 11.62)	-150.4 (± 11.56)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	101.9

Confidence interval	
level	90 %
sides	2-sided
lower limit	74.9
upper limit	129
Variability estimate	Standard error of the mean
Dispersion value	16.38

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	130
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	81.5
Confidence interval	
level	90 %
sides	2-sided
lower limit	54.6
upper limit	108.5
Variability estimate	Standard error of the mean
Dispersion value	16.32

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	129
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	81.9
Confidence interval	
level	90 %
sides	2-sided
lower limit	54.8
upper limit	109
Variability estimate	Standard error of the mean
Dispersion value	16.4

Secondary: Change From Baseline in CST Averaged Over Weeks 20 and 24, in Previously Treated Participants

End point title	Change From Baseline in CST Averaged Over Weeks 20 and 24, in Previously Treated Participants

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Previously treated ITT population included all randomized participants who were previously treated with IVT anti-VEGF or periocular/IVT corticosteroids. Participants were grouped according to the treatment assigned at randomization.

End point type	Secondary

End point timeframe:

Baseline, Weeks 20 and 24

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	30	36	34	35
Units: µm				
arithmetic mean (standard error)	-5.7 (± 20.88)	-81.7 (± 18.67)	-68.7 (± 19.22)	-146.4 (± 18.47)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	65
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	140.6
Confidence interval	
level	90 %
sides	2-sided
lower limit	94.3
upper limit	186.9
Variability estimate	Standard error of the mean
Dispersion value	27.89

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W

Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0157
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	64.6
Confidence interval	
level	90 %
sides	2-sided
lower limit	21
upper limit	108.2
Variability estimate	Standard error of the mean
Dispersion value	26.25

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	69
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0045
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	77.7
Confidence interval	
level	90 %
sides	2-sided
lower limit	33.4
upper limit	122
Variability estimate	Standard error of the mean
Dispersion value	26.67

Secondary: Change From Baseline in CST Averaged Over Weeks 20 and 24, in Overall Enrolled Population

End point title	Change From Baseline in CST Averaged Over Weeks 20 and 24, in Overall Enrolled Population

End point description:

CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants.

End point type	Secondary

End point timeframe:

Baseline, Weeks 20 and 24

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: µm				
arithmetic mean (standard error)	-36.1 (± 10.28)	-72.9 (± 9.88)	-69.0 (± 10.01)	-148.1 (± 9.86)

Statistical analyses

Statistical analysis title	Arm A vs Arm D
Comparison groups	Arm A: Vamikibart 0.25 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	195
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	112
Confidence interval	
level	90 %
sides	2-sided
lower limit	88.5
upper limit	135.5
Variability estimate	Standard error of the mean
Dispersion value	14.25

Statistical analysis title	Arm B vs Arm D
Comparison groups	Arm B: Vamikibart 1 mg Q8W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	201
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	75.2
Confidence interval	
level	90 %
sides	2-sided
lower limit	52.1
upper limit	98.2
Variability estimate	Standard error of the mean
Dispersion value	13.95

Statistical analysis title	Arm C vs Arm D
Comparison groups	Arm C: Vamikibart 1 mg Q4W v Arm D: Ranibizumab 0.5 mg Q4W
Number of subjects included in analysis	198
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	MMRM
Parameter estimate	Difference in Adjusted Means
Point estimate	79.1
Confidence interval	
level	90 %
sides	2-sided
lower limit	55.9
upper limit	102.3
Variability estimate	Standard error of the mean
Dispersion value	14.06

Secondary: Change From Baseline in CST Over Time, in Overall Enrolled Population	
End point title	Change From Baseline in CST Over Time, in Overall Enrolled Population
End point description:	
CST was defined as the distance between the ILM and the RPE, measured using SD-OCT. This analysis used a MMRM model. Adjusted mean has been reported. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.	
End point type	Secondary
End point timeframe:	
Baseline, Weeks 4, 8, 12, 16, 20, 24, 28, 32, 36, 40, 44, 48, 52, 56, 60, 64, 68, 72	

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: µm				
arithmetic mean (standard error)				
Change at Week 4 (n=88, 94, 93, 96)	-25.7 (± 8.06)	-26.6 (± 7.88)	-36.3 (± 7.93)	-106.9 (± 7.83)
Change at Week 8 (n=85, 94, 89, 92)	-31.2 (± 9.02)	-34.0 (± 8.76)	-50.9 (± 8.87)	-130.7 (± 8.76)
Change at Week 12 (n=79, 93, 86, 92)	-38.4 (± 9.66)	-52.9 (± 9.27)	-56.3 (± 9.41)	-131.4 (± 9.27)
Change at Week 16 (n=83, 90, 88, 88)	-39.3 (± 10.43)	-55.0 (± 10.06)	-59.5 (± 10.16)	-138.8 (± 10.08)
Change at Week 20 (n=78, 88, 82, 90)	-37.9 (± 10.88)	-71.5 (± 10.44)	-64.0 (± 10.59)	-139.9 (± 10.41)

Change at Week 24 (n=76, 83, 79, 85)	-30.7 (± 10.73)	-71.4 (± 10.31)	-69.7 (± 10.46)	-152.4 (± 10.27)
Change at Week 28 (n=73, 83, 73, 84)	-47.3 (± 11.36)	-66.7 (± 10.87)	-67.3 (± 11.14)	-158.9 (± 10.81)
Change at Week 32 (n=70, 78, 66, 87)	-47.2 (± 11.82)	-59.6 (± 11.33)	-69.6 (± 11.66)	-159.2 (± 11.18)
Change at Week 36 (n=70, 79, 67, 83)	-44.2 (± 12.07)	-61.6 (± 11.56)	-64.8 (± 11.93)	-166.8 (± 11.40)
Change at Week 40 (n=66, 69, 67, 82)	-50.3 (± 12.51)	-56.1 (± 12.03)	-69.7 (± 12.34)	-164.2 (± 11.74)
Change at Week 44 (n=64, 70, 64, 81)	-53.5 (± 12.26)	-56.4 (± 11.75)	-73.6 (± 12.11)	-174.4 (± 11.44)
Change at Week 48 (n=60, 66, 65, 83)	-58.4 (± 12.76)	-62.2 (± 12.24)	-63.1 (± 12.52)	-176.2 (± 11.82)
Change at Week 52 (n=53, 60, 63, 82)	-63.4 (± 13.52)	-72.0 (± 12.89)	-89.6 (± 13.01)	-112.4 (± 11.92)
Change at Week 56 (n=47, 59, 53, 77)	-67.6 (± 14.94)	-81.6 (± 13.84)	-74.6 (± 14.36)	-107.3 (± 12.66)
Change at Week 60 (n=46, 54, 50, 67)	-73.9 (± 14.17)	-77.2 (± 13.41)	-81.5 (± 13.69)	-111.0 (± 12.34)
Change at Week 64 (n=41, 53, 48, 55)	-66.1 (± 14.20)	-66.3 (± 13.31)	-81.1 (± 13.65)	-112.5 (± 12.48)
Change at Week 68 (n=40, 46, 43, 53)	-73.2 (± 14.64)	-88.8 (± 13.81)	-65.4 (± 14.13)	-115.2 (± 12.87)
Change at Week 72 (n=37, 46, 39, 46)	-73.9 (± 14.28)	-81.9 (± 13.45)	-78.8 (± 13.83)	-113.1 (± 12.61)

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With Absence of DME Over Time, in Overall Enrolled Population

End point title	Percentage of Participants With Absence of DME Over Time, in Overall Enrolled Population

End point description:

Absence of DME was defined as CST < 325 µm for spectralis SD-OCT, or < 315 µm for cirrus SD-OCT or topcon SD-OCT. SD-OCT was performed on a Spectralis instrument. Percentages have been summarized. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 4, 8, 12, 16, 20, 24, 28, 32, 36, 40, 44, 48, 52, 56, 60, 64, 68, 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: percentage of participants				
number (confidence interval 95%)				
Baseline (n=95, 98, 97, 100)	3.2 (0.0 to 6.7)	1.0 (0.0 to 3.0)	4.1 (0.2 to 8.1)	6.0 (1.3 to 10.7)

Week 4 (n=88, 95, 94, 96)	6.8 (1.6 to 12.1)	8.4 (2.8 to 14.0)	13.8 (6.9 to 20.8)	35.4 (25.8 to 45.0)
Week 8 (n=85, 96, 90, 92)	10.6 (4.0 to 17.1)	12.5 (5.9 to 19.1)	17.8 (9.9 to 25.7)	53.3 (43.1 to 63.5)
Week 12 (n=79, 95, 87, 92)	8.9 (2.6 to 15.1)	18.9 (11.1 to 26.8)	24.1 (15.1 to 33.1)	53.3 (43.1 to 63.5)
Week 16 (n=83, 92, 89, 88)	12.0 (5.0 to 19.1)	16.3 (8.8 to 23.9)	25.8 (16.7 to 34.9)	61.4 (51.2 to 71.5)
Week 20 (n=78, 90, 83, 90)	19.2 (10.5 to 28.0)	27.8 (18.5 to 37.0)	30.1 (20.3 to 40.0)	64.4 (54.6 to 74.3)
Week 24 (n=76, 85, 80, 85)	17.1 (8.6 to 25.6)	25.9 (16.6 to 35.2)	26.3 (16.6 to 35.9)	70.6 (60.9 to 80.3)
Week 28 (n=73, 85, 74, 84)	24.7 (14.8 to 34.5)	29.4 (19.7 to 39.1)	33.8 (23.0 to 44.6)	73.8 (64.4 to 83.2)
Week 32 (n=70, 80, 67, 87)	35.7 (24.5 to 46.9)	28.8 (18.8 to 38.7)	34.3 (23.0 to 45.7)	75.9 (66.9 to 84.9)
Week 36 (n=70, 80, 68, 83)	30.0 (19.3 to 40.7)	31.3 (21.1 to 41.4)	35.3 (23.9 to 46.7)	79.5 (70.8 to 88.2)
Week 40 (n=66, 70, 68, 82)	33.3 (22.0 to 44.7)	27.1 (16.7 to 37.6)	35.3 (23.9 to 46.7)	78.0 (69.1 to 87.0)
Week 44 (n=64, 71, 65, 81)	34.4 (22.7 to 46.0)	33.8 (22.8 to 44.8)	35.4 (23.8 to 47.0)	80.2 (71.6 to 88.9)
Week 48 (n=60, 67, 65, 83)	41.7 (29.2 to 54.1)	35.8 (24.3 to 47.3)	30.8 (19.5 to 42.0)	79.5 (70.8 to 88.2)
Week 52 (n=53, 61, 63, 82)	35.8 (22.9 to 48.8)	39.3 (27.1 to 51.6)	36.5 (24.6 to 48.4)	54.9 (44.1 to 65.6)
Week 56 (n=47, 60, 53, 77)	36.2 (22.4 to 49.9)	41.7 (29.2 to 54.1)	45.3 (31.9 to 58.7)	59.7 (48.8 to 70.7)
Week 60 (n=46, 55, 50, 67)	47.8 (33.4 to 62.3)	41.8 (28.8 to 54.9)	50.0 (36.1 to 63.9)	61.2 (49.5 to 72.9)
Week 64 (n=41, 54, 48, 55)	48.8 (33.5 to 64.1)	48.1 (34.8 to 61.5)	47.9 (33.8 to 62.0)	61.8 (49.0 to 74.7)
Week 68 (n=40, 47, 43, 53)	45.0 (29.6 to 60.4)	51.1 (36.8 to 65.4)	48.8 (33.9 to 63.8)	62.3 (49.2 to 75.3)
Week 72 (n=37, 47, 39, 46)	43.2 (27.3 to 59.2)	42.6 (28.4 to 56.7)	48.7 (33.0 to 64.4)	60.9 (46.8 to 75.0)

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With Absence of Intraretinal Fluid (IRF) Over Time, in Overall Enrolled Population

End point title	Percentage of Participants With Absence of Intraretinal Fluid (IRF) Over Time, in Overall Enrolled Population

End point description:

The absence of IRF in the study eye (defined as IRF absent or definite outside center subfield only) was assessed by the central reading center using SD-OCT. The percentage of participants with absence of IRF at foveal center were reported. Percentages have been summarized. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 4, 12, 24, 36, 48, and 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: percentage of participants				
number (not applicable)				
Baseline (n=95,99,97,100)	22.1	15.2	24.7	25.0
Week 4 (n=88,94,93,96)	21.6	26.6	32.3	46.9
Week 12 (n=77,95,84,91)	33.8	40.0	38.1	56.0
Week 24 (n=75,84,78,84)	34.7	45.2	53.8	64.3
Week 36 (n=66,78,66,81)	42.4	43.6	43.9	84.0
Week 48 (n=59,67,63,81)	49.2	47.8	44.4	77.8
Week 72 (n=37,47,39,46)	62.2	55.3	61.5	76.1

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage of Participants With Absence of Subretinal Fluid (SRF) Over Time, in Overall ITT Population

End point title	Percentage of Participants With Absence of Subretinal Fluid (SRF) Over Time, in Overall ITT Population

End point description:

The absence of SRF in the study eye (defined as SRF absent or definite outside center subfield only) was assessed by the central reading center using SD-OCT. The percentage of participants with absence of SRF at the foveal center were reported. Percentages have been summarized. Overall ITT population included all randomized participants. n= number of participants with data available for analysis at the specified timepoint.

End point type	Secondary

End point timeframe:

Baseline, Weeks 4, 12, 24, 36, 48, and 72

End point values	Arm A: Vamikibart 0.25 mg Q8W	Arm B: Vamikibart 1 mg Q8W	Arm C: Vamikibart 1 mg Q4W	Arm D: Ranibizumab 0.5 mg Q4W
Subject group type	Reporting group	Reporting group	Reporting group	Reporting group
Number of subjects analysed	95	101	98	100
Units: percentage of participants				
number (not applicable)				
Baseline (n=95,99,97,100)	62.1	61.6	68.0	67.0
Week 4 (n=88,95,93,96)	70.5	71.6	82.8	85.4
Week 12 (n=77,95,85,91)	81.8	77.9	87.1	96.7
Week 24 (n=75,84,79,84)	84.0	89.3	88.6	97.6
Week 36 (n=66,78,66,81)	87.9	89.7	93.9	100

Week 48 (n=59,67,63,81)	89.8	91.0	93.7	98.8
Week 72 (n=37,47,39,46)	94.6	93.6	97.4	95.7

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From baseline up to 72 weeks

Adverse event reporting additional description:

Safety analysis population included all participants randomized to study treatment & who received at least one dose of the study treatment, whether prematurely withdrawn from study or not. Participants were grouped according to actual treatment received.
Ocular AEs included both study eye & fellow eye.

Assessment type	Systematic

Dictionary used

Dictionary name	MedDRA
Dictionary version	28.0

Reporting groups

Reporting group title	Arm A: Vamikibart 0.25 mg Q8W

Reporting group description:

Participants received vamikibart, 0.25 mg, IVT injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.

Reporting group title	Arm D: Ranibizumab 0.5 mg Q4W

Reporting group description:

Participants received ranibizumab, 0.5 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.

Reporting group title	Arm C: Vamikibart 1 mg Q4W

Reporting group description:

Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q4W for a total of 12 injections up to Week 44. After Week 44, participants were followed for safety up to Week 72.

Reporting group title	Arm B: Vamikibart 1 mg Q8W

Reporting group description:

Participants received vamikibart, 1 mg, IVT injection in the specified study eye on Day 1 and Q8W for a total of 6 injections up to Week 44. A sham procedure was administered to participants at applicable visits to maintain masking between treatment arms. After Week 44, participants were followed for safety up to Week 72.

Serious adverse events	Arm A: Vamikibart 0.25 mg Q8W	Arm D: Ranibizumab 0.5 mg Q4W	Arm C: Vamikibart 1 mg Q4W
Total subjects affected by serious adverse events			
subjects affected / exposed	17 / 94 (18.09%)	20 / 98 (20.41%)	21 / 98 (21.43%)
number of deaths (all causes)	1	1	1
number of deaths resulting from adverse events	1	1	1
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Renal neoplasm			

subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Vascular disorders			
Aortic stenosis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hypertension			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hypertensive crisis			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 4	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hypotension			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Peripheral arterial occlusive disease			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
General disorders and administration site conditions			
Chest pain			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Generalised oedema			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Death			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 1	0 / 0
Respiratory, thoracic and mediastinal disorders			
Acute pulmonary oedema			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Acute respiratory failure			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Asthma			
subjects affected / exposed	0 / 94 (0.00%)	2 / 98 (2.04%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 2	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Dyspnoea			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pleural effusion			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Investigations			
Blood pressure increased			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Injury, poisoning and procedural complications			
Eye injury			

subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hip fracture			
subjects affected / exposed	1 / 94 (1.06%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Humerus fracture			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Lower limb fracture			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac disorders			
Acute myocardial infarction			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Angina pectoris			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Atrial fibrillation			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac failure congestive			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Coronary artery disease			

subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Coronary artery stenosis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ischaemic cardiomyopathy			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Myocardial infarction			
subjects affected / exposed	2 / 94 (2.13%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 3	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Ventricular extrasystoles			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	3 / 98 (3.06%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 3
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 1
Dizziness			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ischaemic stroke			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Transient ischaemic attack			

subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Eye disorders			
Cataract nuclear			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Bullous keratopathy			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Eye inflammation			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	1 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Glaucoma			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ocular vasculitis			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Iridocyclitis			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	1 / 1	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Retinal occlusive vasculitis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	2 / 98 (2.04%)
occurrences causally related to treatment / all	0 / 0	0 / 0	2 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Rhegmatogenous retinal detachment			

subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Tractional retinal detachment			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Uveitis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	3 / 98 (3.06%)
occurrences causally related to treatment / all	0 / 0	0 / 0	2 / 5
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Visual acuity reduced			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Vitreous haemorrhage			
subjects affected / exposed	0 / 94 (0.00%)	2 / 98 (2.04%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 2	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Vitritis			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	1 / 1	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Colitis			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal haemorrhage			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hernial eventration			

subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Small intestinal obstruction			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hepatobiliary disorders			
Bile duct stone			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cholelithiasis			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Diabetic foot			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	1 / 94 (1.06%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Chronic kidney disease			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	2 / 98 (2.04%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
End stage renal disease			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	2 / 98 (2.04%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Renal failure			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Musculoskeletal and connective tissue disorders			
Lumbar spinal stenosis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Abscess limb			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
COVID-19			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Chorioretinitis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Corneal abscess			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Eye infection toxoplasmal			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Infected skin ulcer			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infective exacerbation of asthma			
subjects affected / exposed	1 / 94 (1.06%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Influenza			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pneumonia			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Localised infection			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Osteomyelitis			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Sepsis			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Urinary tract infection			
subjects affected / exposed	0 / 94 (0.00%)	2 / 98 (2.04%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 2	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Staphylococcal infection			

subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 2	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Metabolism and nutrition disorders			
Diabetic complication			
subjects affected / exposed	0 / 94 (0.00%)	1 / 98 (1.02%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Fluid retention			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hyperglycaemia			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hypoglycaemia			
subjects affected / exposed	1 / 94 (1.06%)	1 / 98 (1.02%)	1 / 98 (1.02%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hyponatraemia			
subjects affected / exposed	0 / 94 (0.00%)	0 / 98 (0.00%)	0 / 98 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Serious adverse events	Arm B: Vamikibart 1 mg Q8W		
Total subjects affected by serious adverse events			
subjects affected / exposed	25 / 100 (25.00%)		
number of deaths (all causes)	1		
number of deaths resulting from adverse events	1		
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Renal neoplasm			

subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Vascular disorders			
Aortic stenosis			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Hypertension			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Hypertensive crisis			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Hypotension			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Peripheral arterial occlusive disease			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
General disorders and administration site conditions			
Chest pain			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Generalised oedema			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		

Death			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			
Acute pulmonary oedema			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Acute respiratory failure			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Asthma			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Dyspnoea			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Pleural effusion			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Investigations			
Blood pressure increased			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Injury, poisoning and procedural complications			
Eye injury			

subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Hip fracture				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Humerus fracture				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Lower limb fracture				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Cardiac disorders				
Acute myocardial infarction				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Angina pectoris				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Atrial fibrillation				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Cardiac failure congestive				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Coronary artery disease				

subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Coronary artery stenosis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Ischaemic cardiomyopathy				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Myocardial infarction				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Ventricular extrasystoles				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Nervous system disorders				
Cerebrovascular accident				
subjects affected / exposed	2 / 100 (2.00%)			
occurrences causally related to treatment / all	0 / 2			
deaths causally related to treatment / all	0 / 0			
Dizziness				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Ischaemic stroke				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Transient ischaemic attack				

subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Eye disorders				
Cataract nuclear				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Bullous keratopathy				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Eye inflammation				
subjects affected / exposed	2 / 100 (2.00%)			
occurrences causally related to treatment / all	2 / 2			
deaths causally related to treatment / all	0 / 0			
Glaucoma				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Ocular vasculitis				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	1 / 1			
deaths causally related to treatment / all	0 / 0			
Iridocyclitis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Retinal occlusive vasculitis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Rhegmatogenous retinal detachment				

subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Tractional retinal detachment				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Uveitis				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	1 / 1			
deaths causally related to treatment / all	0 / 0			
Visual acuity reduced				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Vitreous haemorrhage				
subjects affected / exposed	3 / 100 (3.00%)			
occurrences causally related to treatment / all	0 / 3			
deaths causally related to treatment / all	0 / 0			
Vitritis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Gastrointestinal disorders				
Colitis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Gastrointestinal haemorrhage				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Hernial eventration				

subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Small intestinal obstruction			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Hepatobiliary disorders			
Bile duct stone			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cholelithiasis			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Skin and subcutaneous tissue disorders			
Diabetic foot			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Chronic kidney disease			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
End stage renal disease			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		

Renal failure				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 1			
Musculoskeletal and connective tissue disorders				
Lumbar spinal stenosis				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 2			
deaths causally related to treatment / all	0 / 0			
Infections and infestations				
Abscess limb				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Cellulitis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
COVID-19				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Chorioretinitis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Corneal abscess				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Eye infection toxoplasmal				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			

Infected skin ulcer				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Infective exacerbation of asthma				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Influenza				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Pneumonia				
subjects affected / exposed	4 / 100 (4.00%)			
occurrences causally related to treatment / all	0 / 4			
deaths causally related to treatment / all	0 / 0			
Localised infection				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Osteomyelitis				
subjects affected / exposed	1 / 100 (1.00%)			
occurrences causally related to treatment / all	0 / 1			
deaths causally related to treatment / all	0 / 0			
Sepsis				
subjects affected / exposed	0 / 100 (0.00%)			
occurrences causally related to treatment / all	0 / 0			
deaths causally related to treatment / all	0 / 0			
Urinary tract infection				
subjects affected / exposed	2 / 100 (2.00%)			
occurrences causally related to treatment / all	0 / 2			
deaths causally related to treatment / all	0 / 0			
Staphylococcal infection				

subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Metabolism and nutrition disorders			
Diabetic complication			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Fluid retention			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Hyperglycaemia			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Hypoglycaemia			
subjects affected / exposed	0 / 100 (0.00%)		
occurrences causally related to treatment / all	0 / 0		
deaths causally related to treatment / all	0 / 0		
Hyponatraemia			
subjects affected / exposed	1 / 100 (1.00%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

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

Non-serious adverse events	Arm A: Vamikibart 0.25 mg Q8W	Arm D: Ranibizumab 0.5 mg Q4W	Arm C: Vamikibart 1 mg Q4W
Total subjects affected by non-serious adverse events			
subjects affected / exposed	25 / 94 (26.60%)	32 / 98 (32.65%)	36 / 98 (36.73%)
Vascular disorders			
Hypertension			
subjects affected / exposed	6 / 94 (6.38%)	7 / 98 (7.14%)	5 / 98 (5.10%)
occurrences (all)	6	7	6

Eye disorders			
Cataract			
subjects affected / exposed	1 / 94 (1.06%)	9 / 98 (9.18%)	5 / 98 (5.10%)
occurrences (all)	1	12	10
Conjunctival haemorrhage			
subjects affected / exposed	6 / 94 (6.38%)	6 / 98 (6.12%)	6 / 98 (6.12%)
occurrences (all)	6	9	8
Diabetic retinal oedema			
subjects affected / exposed	7 / 94 (7.45%)	5 / 98 (5.10%)	12 / 98 (12.24%)
occurrences (all)	7	6	12
Diabetic retinopathy			
subjects affected / exposed	5 / 94 (5.32%)	2 / 98 (2.04%)	4 / 98 (4.08%)
occurrences (all)	5	2	5
Vitreous haemorrhage			
subjects affected / exposed	3 / 94 (3.19%)	4 / 98 (4.08%)	6 / 98 (6.12%)
occurrences (all)	3	4	6
Infections and infestations			
COVID-19			
subjects affected / exposed	2 / 94 (2.13%)	4 / 98 (4.08%)	3 / 98 (3.06%)
occurrences (all)	2	4	3
Nasopharyngitis			
subjects affected / exposed	2 / 94 (2.13%)	5 / 98 (5.10%)	4 / 98 (4.08%)
occurrences (all)	2	5	4

Non-serious adverse events	Arm B: Vamikibart 1 mg Q8W		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	40 / 100 (40.00%)		
Vascular disorders			
Hypertension			
subjects affected / exposed	8 / 100 (8.00%)		
occurrences (all)	8		
Eye disorders			
Cataract			
subjects affected / exposed	7 / 100 (7.00%)		
occurrences (all)	9		
Conjunctival haemorrhage			

subjects affected / exposed occurrences (all)	10 / 100 (10.00%) 10		
Diabetic retinal oedema subjects affected / exposed occurrences (all)	10 / 100 (10.00%) 13		
Diabetic retinopathy subjects affected / exposed occurrences (all)	2 / 100 (2.00%) 2		
Vitreous haemorrhage subjects affected / exposed occurrences (all)	6 / 100 (6.00%) 7		
Infections and infestations COVID-19 subjects affected / exposed occurrences (all)	6 / 100 (6.00%) 6		
Nasopharyngitis subjects affected / exposed occurrences (all)	2 / 100 (2.00%) 2		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
11 July 2022	- Vamikibart administration was extended from Week 24 to Week 48. - The objectives and endpoints (including the primary endpoint), schedule of activities, and anticipated study duration were updated to reflect the extended dosing. - The role of masked assessors was clarified. - Participants previously treated with faricimab could be enrolled after an appropriate washout period.
23 April 2023	- Following the report of occlusive retinal vascular AEs in the study eye, certain modifications were implemented to mitigate the risk of such events, including changes to the criteria for stopping further treatment in cases of intraocular inflammation (IOI), and changes to study exclusion criteria. - Overall safety measures for assessment of early signs of IOI were added.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported