Sponsor

Novartis Pharmaceuticals

Generic Drug Name

KAZ954, spartalizumab (PDR001), taminadenant (NIR178) and NZV930

Trial Indication(s)

Microsatellite stable colorectal cancer (MSS CRC), cholangiocarcinoma, pancreatic cancer, esophageal, esophageal gastric junction (EGJ) or gastric cancer

Protocol Number

CKAZ954A12101

Protocol Title

A phase I/Ib, open-label, multi-center, study of KAZ954 as a single agent and in combination with Spartalizumab, NZV930 and NIR178 in patients with advanced solid tumors

Clinical Trial Phase

Phase 1

Phase of Drug Development

KAZ985 (phase 1), spartalizumab (phase 3), NIR178 (phase 2) and NZV930 (phase 1)

Study Start/End Dates

Study Start Date: February 20, 2020 (Actual) Primary Completion Date: September 15, 2023 (Actual) Study Completion Date: September 15, 2023 (Actual)

Reason for Termination (If applicable)

The study enrollment was halted on 14-Jun-2023, after the enrollment of 77 patients in the dose escalation portion of the study. Study enrollment was halted prior to enrollment into the KAZ954 + NZV930 combination treatment and prior to the expansion part of the study. No patients were receiving treatment at the time of enrollment halt and patient follow-up was to continue as per protocol. Based on the totality of the available data, it was decided not to progress further in the expansion phase of the study. Importantly, the recruitment halt was not a consequence of any safety concern.

Study Design/Methodology

This was an first in human (FIH), open-label, phase I/Ib, multi-center study of KAZ954 as a single agent and in combination with spartalizumab, NZV930 or NIR178 in patients with MSS CRC, cholangiocarcinoma, pancreatic cancer, esophageal, EGJ or gastric cancer.

In the first part of the study, dose escalation, patients were to be treated with escalating doses of KAZ954 alone and in combination with spartalizumab, NZV930 or NIR178 in order to identify the maximum tolerated dose/recommended dose for expansion (MTD/RD). The dose escalation arm KAZ954+NZV930 was not opened.

In the dose expansion part, patients were to be treated at the RD of KAZ954 as a single agent and in combination with spartalizumab, NZV930 or NIR178. The dose expansion part of the study was not started.

Centers

13 centers in 8 countries: Singapore(1), United States(5), Japan(1), Italy(2), Spain(1), Taiwan(1), Hong Kong(1), Canada(1)

Objectives:

The primary objective of the trial was to characterize the safety, tolerability, and maximum tolerated dose/recommended dose for expansion of single agent KAZ954 and KAZ954 in combination with spartalizumab, NIR178 or NZV930.

The secondary objectives were:

- To evaluate the preliminary anti-tumor activity of single agent KAZ954 and KAZ954 in combination with spartalizumab, NIR178 or NZV930
- To determine the pharmacokinetics (PK) and immunogenicity of KAZ954 as a single agent and KAZ954 in combination with spartalizumab, NIR178 or NZV930
- Assess the relationship between PD-L1 expression level in tumor and response to single agent KAZ954 and KAZ954 in combination with spartalizumab, NIR178 or NZV930

Test Product (s), Dose(s), and Mode(s) of Administration

For this study, the terms "investigational drug" or "study drug" refer to KAZ954, spartalizumab (PDR001), NZV930, and taminadenant (NIR178). The study treatment was defined as KAZ954 alone or in combination with spartalizumab (PDR001), or NIR178.

KAZ954 and spartalizumab were administered by intravenous (IV) infusion over 2 hours and 30 minutes, respectively. NIR178 was taken orally as capsules.

Prior to Cycle 1 Day 1 (C1D1), patients were assigned to one of the following three treatment arms and one of the three KAZ954 schedules:

- Arm A Single agent KAZ954
- Arm B Combination KAZ954 + spartalizumab administered once every 4 weeks (Q4W)
- Arm C Combination KAZ954 + NIR178 administered twice daily (b.i.d.) continuously

- Schedule 1 KAZ954 every 2 weeks (Q2W)
- Schedule 2 (from release of Protocol Amendment 3) KAZ954 with single priming dose at C1D1 followed by the experimental dose at Cycle 1 Day 15 (C1D15) and beyond on a Q2W schedule.
- Schedule 3 (from release of Protocol Amendment 3)– KAZ954 with two priming doses C1D1 and Cycle 1 Day 8 (C1D8) followed by the experimental dose at C1D15 and beyond on a Q2W schedule.

In Schedule 2 and 3, the priming doses were lower than the experimental dose. The use of a priming dose was hypothesized to mitigate the risk of first dose effect.

No patients received treatment with KAZ954 + NZV930 combination because study enrollment was halted prior to enrollment into this arm.

Statistical Methods

Safety: AEs were coded using MedDRA version 26.1 and assessed according to CTCAE version 5.0. AEs were assessed in the Safety Set comprising all patients who received at least one dose of study treatment (i.e. at least one dose of any component of the combination therapy). Patients were analyzed according to the study treatment received.

Tolerability of study drug was assessed by summarizing dose interruptions and dose reductions. Dose intensity of study treatment was also tabulated by treatment group for each component of the study treatment.

Identification of the maximum tolerated dose (MTD) of the study treatment was based upon the estimation of the probability of dose-limiting toxicities (DLTs) for patients in the Dose-determining (DDS) set and took into consideration other safety, clinical, PK and pharmacodynamics (PD) data. The dose escalation part of the study was guided by a Bayesian analysis of DLT data in the DLT period for each study treatment. The DDS for the experimental dose escalation included all patients who received at least one dose of study treatment and met the minimum exposure criterion and had sufficient safety evaluations (as determined by Novartis and Investigator) or experienced a DLT during the DLT-evaluation period.

Efficacy: Full analysis set (FAS) was used for the secondary efficacy. The FAS comprised all patients who received at least one dose of study treatment (i.e. at least one dose of any component of the combination therapy). Efficacy was assessed

by the investigator per Response Evaluation Criteria in Solid Tumors version 1.1 (RECIST v1.1) and immune-related Response Evaluation Criteria for Solid Tumors (iRECIST).

Pharmacokinetics: All PK data analysis and PK summary statistics were based on the Pharmacokinetic analysis set (PAS). The PAS included all patients who provided an evaluable PK profile. A profile was considered evaluable if all of the following conditions were satisfied:

- Patient received one of the planned treatments
- Patient provided at least one primary PK parameter

Immunogenicity: The immunogenicity was summarized by treatment group for each study treatment.

PD-L1 expression and anti-tumor activity endpoints (ORR and PFS): Programmed Death-Ligand 1 (PD-L1) expression at baseline was summarized by mean of descriptive statistics for responders and non-responders based on overall response rate (ORR/iORR). In addition, progression free survival (PFS) was summarized for patients with high/medium/low PD-L1 expression at baseline using the Kaplan Meier method.

Study Population: Key Inclusion/Exclusion Criteria

Inclusion Criteria:

- Patients with metastatic and/or advanced malignancies not amenable to curative treatment by surgery.
- Must have a site of disease amenable to biopsy and be a candidate for tumor biopsy according to the treating institution's guidelines. Patient must be willing to undergo a new tumor biopsy at screening and during the study.
- ECOG Performance Status of <2.

Exclusion Criteria:

 Presence of symptomatic central nervous system (CNS) metastases, or CNS metastases that require concurrent treatment - including surgery, radiation and/or corticosteroids.

- History of severe hypersensitivity reaction to any ingredient of study drug(s) and other mAbs and/or their excipients.
 Impaired cardiac function
- HIV
- Known history of tuberculosis
- Systemic chronic steroid therapy

Participant Flow Table

Overall Study

	KAZ9 54 30 mg	KAZ9 54 50 mg	KAZ9 54 100 mg	KAZ9 54 150 mg	KAZ9 54 300 mg	KAZ9 54 600 mg	KAZ9 54 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg	Tot al
Arm/Grou p Descripti on	KAZ9 54 30 mg IV Q2W	KAZ9 54 50 mg IV Q2W	KAZ9 54 100 mg IV Q2W	KAZ9 54 150 mg IV Q2W	KAZ9 54 300 mg IV Q2W	KAZ9 54 600 mg IV Q2W	KAZ9 54 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combinat ion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combinat ion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combinat ion with NIR178 240 mg oral b.i.d.	
Started	3	4	4	11	5	6	10	5	4	9	4	6	6	77
Complete d	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Not Complete d	3	4	4	11	5	6	10	5	4	9	4	6	6	77
Adverse Event	0	0	0	1	0	1	1	1	0	1	0	0	0	5
Death	0	1	0	0	0	0	1	1	0	1	0	0	0	4
New therapy for study indicatio n	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Patient went to hospice	0	0	0	0	0	0	1	0	0	0	1	0	0	2

Progres sive disease	3	3	4	9	5	5	7	3	3	7	2	6	6	63
Withdra wal by Subject	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Withdre w from trial	0	0	0	0	0	0	0	0	0	0	1	0	0	1

Baseline Characteristics

	KAZ9 54 30 mg	KAZ9 54 50 mg	KAZ95 4 100 mg	KAZ95 4 150 mg	KAZ95 4 300 mg	KAZ95 4 600 mg	KAZ9 54 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ95 4 300 mg + NIR178 160 mg	KAZ95 4 600 mg + NIR178 160 mg	KAZ95 4 600 mg + NIR178 240 mg	Total
Arm/Group Description	KAZ9 54 30 mg IV Q2W	KAZ9 54 50 mg IV Q2W	KAZ95 4 100 mg IV Q2W	KAZ95 4 150 mg IV Q2W	KAZ95 4 300 mg IV Q2W	KAZ95 4 600 mg IV Q2W	KAZ9 54 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ95 4 300 mg IV Q2W in combin ation with NIR178 160 mg oral b.i.d.	KAZ95 4 600 mg IV Q2W in combin ation with NIR178 160 mg oral b.i.d.	KAZ95 4 600 mg IV Q2W in combin ation with NIR178 240 mg oral b.i.d.	
Number of Participants [units: participants]	3	4	4	11	5	6	10	5	4	9	4	6	6	77
Baseline														

Baseline Analysis

Population Description														
Age Continuo (units: years) Analysis Popul Mean ± Standa	ous lation Type ard Deviation	e: Particip on	ants											
	57.7± 4.73	58.3± 6.18	60.0±1 2.41	61.2±1 0.47	56.6±1 3.50	60.2±1 2.73	53.7± 9.57	61.0±9.3 0	53.3±11. 41	54.8±15. 10	65.3±8. 77	58.0±1 0.92	57.8±1 3.04	59.3±1 0.95
Age, Customi (units: participa Analysis Popul Count of Partic	zed ants) lation Type cipants (No	: Particip t Applica	ants ble)											
18 - 64 years	3	3	3	6	3	3	5	3	3	7	2	4	4	49
65 - 84 years	0	1	1	5	2	3	5	2	1	2	2	2	2	28
>84 years	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sex: Female, (units: participa Analysis Popul Count of Partic	Male ants) lation Type cipants (No	: Particip t Applica	ants ble)											
Female	0	2	2	5	2	3	8	2	1	4	2	4	2	37
Male	3	2	2	6	3	3	2	3	3	5	2	2	4	40
Race/Ethnicity (units: participa Analysis Popul Count of Partic	y, Custom ants) lation Type cipants (No	ized : Particip t Applica	ants ble)											
Asian	1	2	2	2	1	2	1	1	2	0	1	1	1	17
Black Or African American	0	0	1	0	0	0	0	0	0	0	0	0	0	1
White	2	2	1	8	4	4	9	4	2	9	3	5	5	58
Unknown	0	0	0	1	0	0	0	0	0	0	0	0	0	1

Study Specific (Diagnosis of dia (units: participan Analysis Populat Count of Particip	Characte sease ts) ion Type ants (Not	e ristic : Participa t Applicat	ants ble)											
Cholangioc arcinoma	0	1	0	3	0	0	3	0	1	0	1	1	0	10
Colorectal cancer	2	2	2	5	1	4	2	2	2	2	2	5	5	36
Esophageal cancer	1	1	0	0	0	1	0	0	0	0	0	0	0	3
Pancreatic cancer	0	0	2	3	4	1	5	3	1	7	1	0	1	28

Primary Outcome Result(s)

Number of participants with Dose-Limiting Toxicities (DLTs)

 Description
 A dose-limiting toxicity (DLT) is defined as an adverse event or abnormal laboratory value of Common Terminology Criteria for Adverse

 Events (CTCAE) grade ≥ 3 assessed as unrelated to disease, disease progression, inter-current illness or concomitant medications, which occurs within the DLT period. The DLT period for Schedule 1 is 28 days and covers two infusions. The DLT period for Schedule 2 and

 Schedule 3 is 35 days to cover two infusions of the Experimental dose. Other clinically significant toxicities may be considered to be DLTs, even if not CTCAE grade 3 or higher.

Time Frame Up to 35 days

Analysis All patients who received at least one dose of study treatment, and who met the minimum exposure criterion defined in the protocol and had sufficient safety evaluations or had experienced a DLT during the DLT evaluation period.

KAZ954	KAZ954	KAZ954	KAZ954									
30 mg	50 mg	100 mg	150 mg	300 mg	600 mg	1200	300 mg	600 mg	1200 mg	300 mg	600 mg	600 mg
ee mg	ee mg		g	eee mg	eee mg	mg	+	+	+	+	+	+

								PDR001 400 mg	PDR001 400 mg	PDR001 400 mg	NIR178 160 mg	NIR178 160 mg	NIR178 240 mg
Arm/Gr oup Descrip tion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Particip ants Analyze d [units: particip ants]	3	4	3	10	5	6	7	4	3	7	2	5	5
Number of particip ants with Dose- Limiting Toxiciti es (DLTs) (units: participa nts)	Count of Particip ants (Percen tage)	Count of Particip ants (Percent age)	Count of Particip ants (Percent age)	Count of Particip ants (Percent age)	Count of Particip ants (Percen tage)	Count of Particip ants (Percen tage)	Count of Particip ants (Percen tage)						
Any DLT	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (16.67%)	0 (%)	1 (25%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
- Dissemi nated	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (16.67%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)

intravas cular coagulat ion													
- Myocard itis	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (25%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)

Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the ontreatment period

Description Number of participants with AEs (any AE regardless of seriousness) and SAEs, including changes from baseline in vital signs, electrocardiograms and laboratory results qualifying and reported as AEs. The on-treatment period is defined from the day of first administration of study treatment up to 30 days after the date of its last administration.

Time Frame Up to approximately 52 weeks (KAZ954 single agent), 20 weeks (KAZ954+PDR001) and 24 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment.

Population

Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gr oup Descrip tion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg Ⅳ Q2W	KAZ954 600 mg Ⅳ Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of	3	4	4	11	5	6	10	5	4	9	4	6	6

Particip ants Analyze d [units: particip ants]													
Number of particip ants with Advers e Events (AEs) and Serious Advers	Count of Particip ants												
Events (SAEs) during the on- treatme nt period (units: participa nts)	(Percen tage)	(Percent age)	(Percent age)	(Percent age)	(Percen tage)	(Percen tage)	(Percen tage)						
AEs	3 (100%)	4 (100%)	4 (100%)	11 (100%)	5 (100%)	6 (100%)	10 (100%)	5 (100%)	4 (100%)	9 (100%)	4 (100%)	6 (100%)	6 (100%)
Treatme nt- related AEs	3 (100%)	4 (100%)	4 (100%)	8 (72.73%)	5 (100%)	5 (83.33%)	8 (80%)	5 (100%)	3 (75%)	5 (55.56%)	3 (75%)	4 (66.67%)	6 (100%)
SAEs	1 (33 33%)	1 (25%)	4 (100%)	6 (54 55%)	3 (60%)	3 (50%)	5 (50%)	4 (80%)	2 (50%)	4 (44 44%)	3 (75%)	4 (66 67%)	3 (50%)

Treatme nt- related SAEs	1 (33.33%)	0 (%)	3 (75%)	2 (18.18%)	1 (20%)	3 (50%)	1 (10%)	3 (60%)	1 (25%)	2 (22.22%)	0 (%)	1 (16.67%)	3 (50%)	
Fatal SAEs	0 (%)	0 (%)	0 (%)	0 (%)	1 (20%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	
Treatme nt- related fatal SAEs	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	

Number of participants with dose reductions and dose interruptions of KAZ954

Description Number of participants with at least one dose reduction and at least one dose interruption of KAZ954. Dose or schedule adjustments were permitted for patients who did not tolerate the protocol-specified dosing schedule.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of KAZ954 Population

Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gr oup Descrip tion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combina tion with spartaliz umab	KAZ954 600 mg IV Q2W in combina tion with spartaliz umab	KAZ954 1200 mg IV Q2W in combina tion with spartaliz umab	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg

								400 mg IV Q4W	400 mg IV Q4W	400 mg IV Q4W	oral b.i.d.	oral b.i.d.	oral b.i.d.
Number of Particip ants Analyze d [units: particip ants]	3	4	4	11	5	6	10	5	4	9	4	6	6
Number of particip ants with dose reductio ns and	Count of Particip ants												
dose interrup tions of KAZ954 (units: participa nts)	(Percen tage)	(Percent age)	(Percent age)	(Percent age)	(Percen tage)	(Percen tage)	(Percen tage)						
At least one dose reductio n or interrupti on	0 (%)	0 (%)	2 (50%)	1 (9.09%)	1 (20%)	1 (16.67%)	2 (20%)	1 (20%)	2 (50%)	2 (22.22%)	1 (25%)	0 (%)	0 (%)
At least one dose reductio n	0 (%)	0 (%)	1 (25%)	0 (%)	0 (%)	0 (%)	1 (10%)	0 (%)	1 (25%)	0 (%)	0 (%)	0 (%)	0 (%)
At least one	0 (%)	0 (%)	1 (25%)	1 (9.09%)	1 (20%)	1 (16.67%)	2 (20%)	1 (20%)	1 (25%)	2 (22.22%)	1 (25%)	0 (%)	0 (%)

dose interrupti on

Number of participants with dose reductions and dose interruptions of PDR001

Description Number of participants with at least one dose reduction and at least one dose interruption of PDR001. Dose or schedule adjustments were permitted for patients who did not tolerate the protocol-specified dosing schedule. Dose reductions were not permitted for PDR001.

Time FrameUp to approximately 16 weeksAnalysisAll patients who received at least one dose of PDR001

Population Description

	KAZ954 300 mg + PDR001	KAZ954 600 mg + PDR001	KAZ954 1200 mg + PDR001
	400 mg	400 mg	400 mg
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 1200 mg IV Q2W in
	combination with spartalizumab	combination with spartalizumab	combination with spartalizumab
	400 mg IV Q4W	400 mg IV Q4W	400 mg IV Q4W
Number of Participants Analyzed [units: participants]	5	4	9
Number of participants with dose reductions and dose interruptions of PDR001 (units: participants)	Count of Participants	Count of Participants	Count of Participants
	(Percentage)	(Percentage)	(Percentage)
At least one dose reduction or interruption	0	1	0
	(%)	(25%)	(%)
At least one dose reduction	0	1	0
	(%)	(25%)	(%)
At least one dose interruption	0	1	0
	(%)	(25%)	(%)

Number of participants with dose reductions and dose interruptions of NIR178

- Description Number of participants with at least one dose reduction and at least one dose interruption of NIR178. Dose or schedule adjustments were permitted for patients who did not tolerate the protocol-specified dosing schedule.
- Time Frame Up to approximately 18 weeks

Analysis All patients who received at least one dose of NIR178 Population

Description

	KAZ954 300 mg + NIR178 160	KAZ954 600 mg + NIR178 160	KAZ954 600 mg + NIR178 240
	mg	mg	mg
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 600 mg IV Q2W in
	combination with NIR178 160	combination with NIR178 160	combination with NIR178 240
	mg oral b.i.d.	mg oral b.i.d.	mg oral b.i.d.
Number of Participants Analyzed [units: participants]	4	6	6
Number of participants with dose reductions and dose interruptions of NIR178 (units: participants)	Count of Participants (Percentage)	Count of Participants (Percentage)	Count of Participants (Percentage)
At least one dose reduction or interruption	1	1	2
	(25%)	(16.67%)	(33.33%)
At least one dose reduction	1	1	1
	(25%)	(16.67%)	(16.67%)
At least one dose interruption	1	1	2
	(25%)	(16.67%)	(33.33%)

Dose intensity of KAZ954

Description Dose intensity of KAZ954 was calculated as cumulative actual dose in milligrams divided by duration of exposure in days.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of KAZ954

Population Description

	KAZ9 54 30 mg	KAZ9 54 50 mg	KAZ9 54 100 mg	KAZ9 54 150 mg	KAZ9 54 300 mg	KAZ9 54 600 mg	KAZ9 54 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Grou p Descriptio n	KAZ95 4 30 mg IV Q2W	KAZ95 4 50 mg IV Q2W	KAZ95 4 100 mg IV Q2W	KAZ95 4 150 mg IV Q2W	KAZ95 4 300 mg IV Q2W	KAZ95 4 600 mg IV Q2W	KAZ95 4 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinatio n with spartalizum ab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinatio n with spartalizum ab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinatio n with spartalizum ab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combinati on with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combinati on with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combinati on with NIR178 240 mg oral b.i.d.
Number of Participan ts Analyzed [units: participan ts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Dose intensity of KAZ954 (units: mg/day)	Media n (Full Range)	Median (Full Range)	Median (Full Range)	Median (Full Range)	Median (Full Range)	Median (Full Range)	Median (Full Range)						
	2.14 (2.1 to 2.14)	3.57 (3.0 to 3.6)	6.35 (3.4 to 7.1)	10.71 (8.6 to 15.1)	17.86 (15.9 to 20.0)	32.14 (7.1 to 38.4)	58.25 (7.1 to 74.5)	17.54 (14.3 to 17.9)	27.40 (4.6 to 33.3)	61.62 (7.1 to 67.3)	16.07 (12.5 to 18.6)	33.64 (7.1 to 39.3)	33.93 (7.1 to 35.7)

Dose intensity of PDR001

Description Dose intensity of PDR001 was calculated as cumulative actual dose in milligrams divided by duration of exposure in days.

Time Frame Up to approximately 16 weeks

Analysis All patients who received at least one dose of PDR001 Population Description

	KAZ954 300 mg + PDR001	KAZ954 600 mg + PDR001	KAZ954 1200 mg + PDR001
	400 mg	400 mg	400 mg
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 1200 mg IV Q2W in
	combination with spartalizumab	combination with spartalizumab	combination with spartalizumab
	400 mg IV Q4W	400 mg IV Q4W	400 mg IV Q4W
Number of Participants Analyzed [units: participants]	5	4	9
Dose intensity of PDR001	Median	Median	Median
(units: mg/day)	(Full Range)	(Full Range)	(Full Range)
	14.29	14.04	14.29
	(12.7 to 14.3)	(13.1 to 14.3)	(14.0 to 16.2)

Dose intensity of NIR178

Description Dose intensity of NIR178 was calculated as cumulative actual dose in milligrams divided by duration of exposure in days.

Time Frame Up to approximately 18 weeks

Analysis All patients who received at least one dose of NIR178 Population Description

	KAZ954 300 mg + NIR178 160	KAZ954 600 mg + NIR178 160	KAZ954 600 mg + NIR178 240
	mg	mg	mg
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 600 mg IV Q2W in
	combination with NIR178 160	combination with NIR178 160	combination with NIR178 240
	mg oral b.i.d.	mg oral b.i.d.	mg oral b.i.d.
Number of Participants Analyzed [units: participants]	4	6	6

Dose intensity of NIR178	Median	Median	Median
(units: mg/day)	(Full Range)	(Full Range)	(Full Range)
	311.11	320.00	480.00
	(225.2 to 320.0)	(301.3 to 320.0)	(428.6 to 480.0)

Secondary Outcome Result(s)

Overall Response Rate (ORR) per RECIST v1.1

Description ORR is the percentage of patients with a best overall response of complete response (CR) or partial response (PR), based on local investigator assessment per Response Evaluation Criteria for Solid Tumors (RECIST) v1.1. For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameter of all target lesions, taking as reference the baseline sum of diameters.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment.

Population

Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gro up Descript ion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.

Number of Particip ants Analyze d [units: participa nts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Overall Respon se Rate (ORR) per RECIST v1.1 (units: percenta ge of participa nts)	Number (90% Confide nce Interval)	Number (90% Confiden ce Interval)	Number (90% Confiden ce Interval)	Number (90% Confiden ce Interval)	Number (90% Confide nce Interval)	Number (90% Confide nce Interval)	Number (90% Confide nce Interval)						
	0 (0.0 to 63.2)	0 (0.0 to 52.7)	0 (0.0 to 52.7)	0 (0.0 to 23.8)	0 (0.0 to 45.1)	0 (0.0 to 39.3)	0 (0.0 to 25.9)	0 (0.0 to 45.1)	0 (0.0 to 52.7)	0 (0.0 to 28.3)	0 (0.0 to 52.7)	0 (0.0 to 39.3)	0 (0.0 to 39.3)

Overall Response Rate (ORR) per iRECIST

Description ORR is the percentage of patients with a best overall response of complete response (iCR) or partial response (iPR), based on local investigator assessment per immune-related RECIST (iRECIST). For iRECIST, the principles used to determine objective tumor response are largely unchanged from RECIST v1.1, while the major change of iRECIST is the concept of 'resetting the bar' if RECIST v1.1 progression is followed by tumor shrinkage. Unlike RECIST v1.1, iRECIST requires the confirmation of progression.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment.

Population

Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gro up Descript ion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Particip ants Analyze d [units: participa nts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Overall Respon se Rate (ORR) per iRECIST (units: percenta ge of participa nts)	Number (90% Confide nce Interval)	Number (90% Confiden ce Interval)	Number (90% Confiden ce Interval)	Number (90% Confiden ce Interval)	Number (90% Confide nce Interval)	Number (90% Confide nce Interval)	Number (90% Confide nce Interval)						
	0 (0.0 to 63.2)	0 (0.0 to 52.7)	0 (0.0 to 52.7)	0 (0.0 to 23.8)	0 (0.0 to 45.1)	0 (0.0 to 39.3)	0 (0.0 to 25.9)	0 (0.0 to 45.1)	0 (0.0 to 52.7)	0 (0.0 to 28.3)	0 (0.0 to 52.7)	0 (0.0 to 39.3)	0 (0.0 to 39.3)

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Disease Control Rate (DCR) per RECIST v1.1

Description DCR is the percentage of patients with a best overall response of complete response (CR), partial response (PR) or stable disease (SD), based on local investigator assessment per Response Evaluation Criteria for Solid Tumors (RECIST) v1.1. For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameter of all target lesions, taking as reference the baseline sum of diameters; SD= Neither sufficient shrinkage to qualify for PR or CR nor an increase in lesions which would qualify for progression.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment.

Population

Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gro up Descript ion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Particip ants Analyze d [units: participa nts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Disease Control	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%	Number (90%

Rate (DCR) per RECIST v1.1 (units: percenta ge of participa nts)	Confide nce Interval)	Confiden ce Interval)	Confiden ce Interval)	Confiden ce Interval)	Confide nce Interval)	Confide nce Interval)	Confide nce Interval)						
	0 (0.0 to	0 (0.0 to	25.0 (1.3 to	36.4 (13.5 to	40.0 (7.6 to	16.7 (0.9 to	10.0 (0.5 to	20.0 (1.0 to	0 (0.0 to	11.1 (0.6 to	0 (0.0 to	16.7 (0.9 to	0 (0.0 to
	63.2)	52.7)	75.1)	65.0)	81.1)	58.2)	39.4)	65.7)	52.7)	42.9)	52.7)	58.2)	39.3)

Disease Control Rate (DCR) per iRECIST

Description DCR is the percentage of patients with a best overall response of complete response (iCR), partial response (iPR), stable disease (iSD), based on local investigator assessment per immune-related RECIST (iRECIST). For iRECIST, the principles used to determine objective tumor response are largely unchanged from RECIST v1.1, while the major change of iRECIST is the concept of 'resetting the bar' if RECIST v1.1 progression is followed by tumor shrinkage. Unlike RECIST v1.1, iRECIST requires the confirmation of progression.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment.

Population Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gro up Descript ion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu	KAZ954 600 mg IV Q2W in combinati on with spartalizu	KAZ954 1200 mg IV Q2W in combinati on with spartalizu	KAZ954 300 mg IV Q2W in combina tion with NIR178	KAZ954 600 mg IV Q2W in combina tion with NIR178	KAZ954 600 mg IV Q2W in combina tion with NIR178

								mab 400 mg IV Q4W	mab 400 mg IV Q4W	mab 400 mg IV Q4W	160 mg oral b.i.d.	160 mg oral b.i.d.	240 mg oral b.i.d.
Number of Particip ants Analyze d [units: participa nts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Disease Control Rate (DCR) per iRECIST (units: percenta ge of participa nts)	Number (90% Confide nce Interval)	Number (90% Confiden ce Interval)	Number (90% Confiden ce Interval)	Number (90% Confiden ce Interval)	Number (90% Confide nce Interval)	Number (90% Confide nce Interval)	Number (90% Confide nce Interval)						
	0 (0.0 to 63.2)	0 (0.0 to 52.7)	25.0 (1.3 to 75.1)	36.4 (13.5 to 65.0)	40.0 (7.6 to 81.1)	16.7 (0.9 to 58.2)	10.0 (0.5 to 39.4)	20.0 (1.0 to 65.7)	0 (0.0 to 52.7)	11.1 (0.6 to 42.9)	0 (0.0 to 52.7)	16.7 (0.9 to 58.2)	0 (0.0 to 39.3)

Progression-Free Survival (PFS) per RECIST v1.1

For assessment per RECIST v1.1, PFS is the time from date of start of treatment to the date of event defined as the first progression or death Description due to any cause. If a subject had not had an event, PFS was censored at the date of last adequate tumor assessment. PFS was analyzed using the Kaplan-Meier method.

Time Frame Up to approximately 52 weeks (KAZ954 single agent), 20 weeks (KAZ954+PDR001) and 24 weeks (KAZ954+NIR178)

All patients who received at least one dose of study treatment. Analysis

Population

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KA2954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KA2954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gro up Descripti on	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Participa nts Analyze d [units: participa nts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Progres sion- Free Survival (PFS) per RECIST v1.1 (units: months)	Median (90% Confide nce Interval)	Median (90% Confiden ce Interval)	Median (90% Confiden ce Interval)	Median (90% Confiden ce Interval)	Median (90% Confide nce Interval)	Median (90% Confide nce Interval)	Median (90% Confide nce Interval)						
	1.6 (1.6 to NA) ^[1]	1.4 (1.0 to NA) ^[1]	1.7 (1.0 to NA) ^[1]	1.8 (1.0 to 6.9)	1.6 (1.2 to NA) ^[1]	1.8 (1.5 to NA) ^[1]	1.8 (0.5 to 2.4)	2.1 (1.6 to NA) ^[1]	1.8 (1.6 to NA) ^[1]	1.7 (0.2 to 1.9)	2.0 (1.6 to NA) ^[1]	1.7 (1.4 to NA) ^[1]	1.6 (0.5 to NA) ^[1]

[1] Not estimable due to insufficient number of participants with events

Progression-Free Survival (iPFS) per iRECIST

For assessment per iRECIST, iPFS is the time from date of start of treatment to the date of event defined as the first documented confirmed Description progression or death due to any cause. If a subject had not had an event, iPFS was censored at the date of last adequate tumor assessment. PFS was analyzed using the Kaplan-Meier method.

Up to approximately 52 weeks (KAZ954 single agent), 20 weeks (KAZ954+PDR001) and 24 weeks (KAZ954+NIR178) Time Frame

Analysis All patients who received at least one dose of study treatment.

Population

Description

	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gro up Descripti on	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Participa nts Analyze d [units: participa nts]	3	4	4	11	5	6	10	5	4	9	4	6	6
Progres sion- Free Survival	Median (90% Confide nce	Median (90% Confiden	Median (90% Confiden	Median (90% Confiden	Median (90% Confide nce	Median (90% Confide nce	Median (90% Confide nce						

(iPFS) per iRECIST (units: months)	Interval)	Interval)	Interval)	Interval)	Interval)	Interval)	Interval)	ce Interval)	ce Interval)	ce Interval)	Interval)	Interval)	Interval)
	NA	1.5	1.7	2.7	1.6	1.8	1.8	2.1	1.8	1.7	2.0	1.7	1.6
	(1.6 to	(1.2 to	(1.0 to	(0.6 to	(1.2 to	(1.5 to	(0.7 to	(1.6 to	(1.6 to	(0.8 to	(1.6 to	(1.4 to	(0.5 to
	NA) ^[1]	NA) ^[1]	NA) ^[1]	5.6)	NA) ^[1]	NA) ^[1]	2.6)	NA) ^[1]					

[1] Not estimable due to insufficient number of participants with events

Maximum observed serum concentration (Cmax) of KAZ954

Description	Pharmacokinetic (PK) parameters were calculated based on free KAZ954 serum concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed concentration following a dose.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 3 Day 1 (C3D1): pre-dose, 1, 24, 72, 168, 240 and 360 hours after the end of the infusion. The duration of the infusion was 2 hours. One cycle=28 days
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received KAZ954 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter.

	KAZ95 4 30 mg	KAZ95 4 50 mg	KAZ95 4 100 mg	KAZ95 4 150 mg	KAZ95 4 300 mg	KAZ95 4 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ95 4 300 mg + NIR178 160 mg	KAZ95 4 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Group Description	KAZ95 4 30 mg IV Q2W	KAZ95 4 50 mg IV Q2W	KAZ95 4 100 mg IV Q2W	KAZ95 4 150 mg IV Q2W	KAZ95 4 300 mg IV Q2W	KAZ95 4 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combina tion with spartaliz umab 400 mg IV Q4W	KAZ95 4 300 mg IV Q2W in combin ation with NIR178 160 mg oral b i d	KAZ95 4 600 mg IV Q2W in combin ation with NIR178 160 mg oral b i d	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.

Number of Participants Analyzed [units: participants]	3	4	3	10	5	4	8	2	3	7	4	4	4
Maximum	Geome tric Mean	Geome tric Mean	Geome tric Mean	Geome tric Mean	Geome tric Mean	Geome tric Mean	Geomet ric Mean	Geomet ric Mean	Geomet ric Mean	Geomet ric Mean	Geome tric Mean	Geome tric Mean	Geomet ric Mean
concentration (Cmax) of KAZ954 (units: µg/mL)	(Geom etric Coeffic ient of Variati on)	(Geome tric Coeffici ent of Variatio n)	(Geome tric Coeffici ent of Variatio n)	(Geome tric Coeffici ent of Variatio n)	(Geome tric Coeffici ent of Variatio n)	(Geom etric Coeffic ient of Variati on)	(Geom etric Coeffic ient of Variati on)	(Geome tric Coeffici ent of Variatio n)					
Cycle 1 Day 1 (n=3,4,3,10,5,4,8, 2,3,7,4,4,4)	7.08 (2 8.4%)	15.6 (3 4.1%)	22.3 (5 0.4%)	43.4 (3 9.8%)	27.0 (2 1.6%)	32.5 (2 9.8%)	23.6 (12 4.7%)	28.1 (8. 8%)	27.1 (29 .1%)	23.5 (20 .9%)	35.4 (5 2.9%)	24.2 (5 8.6%)	10.3 (24 1.0%)
Cycle 3 Day 1 (n=0,0,1,5,3,2,2,0 ,0,2,0,2,1)			65.5	65.4 (3 1.4%)	152 (25 .5%)	350 (45 .4%)	548 (48. 3%)			382 (2.2 %)		198 (71 .0%)	134

Area under the serum concentration-time curve from time zero to 14 days post dose (AUC0-14d) of KAZ954

Description PK parameters were calculated based on free KAZ954 serum concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.

Time Frame Cycle 1 Day 1 (C1D1) and Cycle 3 Day 1 (C3D1): pre-dose, 1, 24, 72, 168, 240 and 360 hours after the end of the infusion. The duration of the infusion was 2 hours. One cycle=28 days

Analysis Patients in the pharmacokinetic analysis set (PAS) who received KAZ954 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter. Description

KAZ95	KAZ95	KAZ95	K 0 7 9 5 4	K 0 7 9 5 4	K 0 7 9 5 4	KAZ954	KAZ95	KAZ95	KAZ95	KAZ95	KAZ954	KAZ95
4 30	4 50	4 100	150 mg	300 mg	600 mg	1200	4 300	4 600	4 1200	4 300	600 mg	4 600
mg	mg	mg	loo liig	ooonig	ooonig	mg	mg +	mg +	mg +	mg +	+	mg +

								PDR00 1 400 mg	PDR00 1 400 mg	PDR00 1 400 mg	NIR178 160 mg	NIR178 160 mg	NIR178 240 mg
Arm/Group Description	KAZ95 4 30 mg IV Q2W	KAZ95 4 50 mg IV Q2W	KAZ95 4 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combin ation with spartali zumab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combin ation with spartali zumab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combin ation with spartali zumab 400 mg IV Q4W	KAZ95 4 300 mg IV Q2W in combin ation with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combinat ion with NIR178 160 mg oral b.i.d.	KAZ95 4 600 mg IV Q2W in combin ation with NIR178 240 mg oral b.i.d.
Number of Participants Analyzed [units: participants]	3	4	3	10	5	4	8	2	3	7	4	4	3
Area under the serum	Geom etric Mean	Geome tric Mean	Geome tric Mean	Geomet ric Mean	Geomet ric Mean	Geomet ric Mean	Geomet ric Mean	Geome tric Mean	Geome tric Mean	Geome tric Mean	Geome tric Mean	Geometr ic Mean	Geome tric Mean
time curve from time zero to 14 days post dose (AUC0-14d) of KAZ954 (units: hr*µg/mL)	(Geom etric Coeffi cient of Variati on)	(Geom etric Coeffic ient of Variati on)	(Geom etric Coeffic ient of Variati on)	(Geome tric Coeffici ent of Variatio n)	(Geome tric Coeffici ent of Variatio n)	(Geome tric Coeffici ent of Variatio n)	(Geome tric Coeffici ent of Variatio n)	(Geom etric Coeffic ient of Variati on)	(Geom etric Coeffic ient of Variati on)	(Geom etric Coeffic ient of Variati on)	(Geom etric Coeffic ient of Variati on)	(Geomet ric Coeffici ent of Variatio n)	(Geom etric Coeffic ient of Variati on)
Cycle 1 Day 1 (n=3,4,3,10,5,4, 8,2,3,7,4,4,3)	684 (2 5.3%)	1540 (3 0.0%)	3380 (1 5.0%)	5590 (4 4.4%)	3240 (1 3.2%)	3770 (3 1.9%)	2550 (1 80.4%)	3120 (3 7.8%)	2790 (5 3.5%)	2690 (1 7.2%)	4370 (3 9.6%)	3340 (35 .1%)	2380 (3 1.9%)
Cycle 3 Day 1 (n=0,0,1,5,3,2,2, 0,0,2,0,2,1)			12800	12100 (19.0%)	29800 (16.1%)	66000 (36.0%)	75200 (33.6%)			58900 (9.7%)		37200 (1 03.6%)	25700

Maximum observed serum concentration (Cmax) of PDR001

- Description PK parameters were calculated based on PDR001 serum concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed concentration following a dose.
- Time Frame Cycle 1 Day 1 (C1D1) and Cycle 3 Day 1 (C3D1): pre-dose, 1, 168, 336 and 672 hours after the end of the infusion. The duration of the infusion was 30 minutes. One cycle=28 days

Analysis Patients in the pharmacokinetic analysis set (PAS) who received PDR001 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter. Description

	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg
Arm/Group Description	KAZ954 300 mg IV Q2W in combination with spartalizumab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combination with spartalizumab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combination with spartalizumab 400 mg IV Q4W
Number of Participants Analyzed [units: participants]	1	2	3
Maximum observed serum concentration (Cmax) of PDR001 (units: µg/mL)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)
Cycle 1 Day 1 (n=1,2,3)	109	100 (41.6%)	90.8 (2.9%)

Cycle 3 Day 1 (n=0,0,1)

96.0

Area under the serum concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of PDR001

Description	PK parameters were calculated based on PDR001 serum concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 3 Day 1 (C3D1): pre-dose, 1, 168, 336 and 672 hours after the end of the infusion. The duration of the infusion was 30 minutes. One cycle=28 days
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received PDR001 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter.

	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg		
Arm/Group Description	KAZ954 300 mg IV Q2W in combination with spartalizumab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combination with spartalizumab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combination with spartalizumab 400 mg IV Q4W		
Number of Participants Analyzed [units: participants]	1	2	3		
Area under the serum concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of PDR001 (units: hr*µg/mL)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)		
Cycle 1 Day 1 (n=1,2,3)	32300	25500 (48.3%)	24100 (22.1%)		
Cycle 3 Day 1 (n=0,0,1)			30600		

Maximum observed plasma concentration (Cmax) of NIR178

- Description PK parameters were calculated based on NIR178 plasma concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed concentration following a dose.
- Time Frame Cycle 1 Day 1 (C1D1) and Cycle 2 Day 1 (C2D1): pre-dose, 15 minutes, 1, 2, 4 and 6 hours after morning dose and 12 hours after evening dose. One cycle=28 days

Analysis Patients in the pharmacokinetic analysis set (PAS) who received NIR178 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter. Description

	KAZ954 300 mg + NIR178 160	KAZ954 600 mg + NIR178 160	KAZ954 600 mg + NIR178 240
	mg	mg	mg
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 600 mg IV Q2W in
	combination with NIR178 160	combination with NIR178 160	combination with NIR178 240
	mg oral b.i.d.	mg oral b.i.d.	mg oral b.i.d.

Number of Participants Analyzed [units: participants]	3	5	5		
Maximum observed plasma concentration (Cmax) of NIR178 (units: ng/mL)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)		
Cycle 1 Day 1 (n=3,5,5)	62.1 (280.9%)	164 (1801.3%)	441 (40.9%)		
Cycle 2 Day 1 (n=3,4,5)	538 (268.2%)	444 (448.8%)	1490 (83.7%)		

Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of NIR178

Description	PK parameters were calculated based on NIR178 plasma concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 2 Day 1 (C2D1): pre-dose, 15 minutes, 1, 2, 4 and 6 hours after morning dose and 12 hours after evening dose. One cycle=28 days
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received NIR178 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter.

	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg		
Arm/Group Description	KAZ954 300 mg IV Q2W in combination with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combination with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combination with NIR178 240 mg oral b.i.d.		
Number of Participants Analyzed [units: participants]	3	5	5		
Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of NIR178 (units: hr*ng/mL)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)		
Cycle 1 Day 1 (n=3,5,5)	191 (142.3%)	411 (4778.2%)	1060 (48.1%)		
Cycle 2 Day 1 (n=3,4,5)	1660 (131.1%)	1100 (423.7%)	3560 (83.7%)		

Maximum observed plasma concentration (Cmax) of NJI765 (NIR178 metabolite)

- Description NJI765 is a NIR178 metabolite. PK parameters were calculated based on NJI765 plasma concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed concentration following a dose.
- Time Frame Cycle 1 Day 1 (C1D1) and Cycle 2 Day 1 (C2D1): pre-dose, 15 minutes, 1, 2, 4 and 6 hours after morning dose and 12 hours after evening dose. One cycle=28 days

Analysis Patients in the pharmacokinetic analysis set (PAS) who received NIR178 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter. Description

	KAZ954 300 mg + NIR178 160	KAZ954 600 mg + NIR178 160	KAZ954 600 mg + NIR178 240		
	mg	mg	mg		
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 600 mg IV Q2W in		
	combination with NIR178 160	combination with NIR178 160	combination with NIR178 240		
	mg oral b.i.d.	mg oral b.i.d.	mg oral b.i.d.		
Number of Participants Analyzed [units: participants]	4	5	5		
Maximum observed plasma concentration (Cmax) of NJI765 (NIR178 metabolite) (units: ng/mL)	Geometric Mean	Geometric Mean	Geometric Mean		
	(Geometric Coefficient of	(Geometric Coefficient of	(Geometric Coefficient of		
	Variation)	Variation)	Variation)		
Cycle 1 Day 1 (n=4,5,5)	9.71 (107.1%)	13.6 (63.6%)	33.1 (30.1%)		
Cycle 2 Day 1 (n=3,4,5)	20.0 (440.0%)	29.6 (48.9%)	65.6 (54.1%)		

Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of NJI765 (NIR178 metabolite)

- Description NJI765 is a NIR178 metabolite. PK parameters were calculated based on NJI765 plasma concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.
- Time Frame Cycle 1 Day 1 (C1D1) and Cycle 2 Day 1 (C2D1): pre-dose, 15 minutes, 1, 2, 4 and 6 hours after morning dose and 12 hours after evening dose. One cycle=28 days

Analysis Patients in the pharmacokinetic analysis set (PAS) who received NIR178 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received one of the planned treatments and provided at least one primary PK parameter. Description

	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg	
Arm/Group Description	KAZ954 300 mg IV Q2W in combination with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combination with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combination with NIR178 240 mg oral b.i.d.
Number of Participants Analyzed [units: participants]	4	5	5
Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration (AUClast) of NJI765 (NIR178 metabolite) (units: hr*ng/mL)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)	Geometric Mean (Geometric Coefficient of Variation)
Cycle 1 Day 1 (n=4,5,5)	29.7 (87.5%)	35.5 (139.6%)	97.2 (50.3%)
Cycle 2 Day 1 (n=3,4,5)	73.4 (535.0%)	102 (52.4%)	242 (62.5%)

Number of participants with anti-KAZ954 antibodies

DescriptionKAZ954 immunogenicity was evaluated in serum samples. Patient anti-drug antibodies (ADA) status was defined as follows: • ADA-negative
at baseline: ADA-negative sample at baseline • ADA-positive at baseline: ADA-positive sample at baseline: ADA-negative post-baseline:
ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples • Treatment-reduced ADA-
positive: ADA-positive sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples • Treatment-reduced ADA-
positive: ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples • Treatment-induced
ADA-positive: ADA-negative sample at baseline and at least 1 treatment-induced ADA-positive sample • Treatment-boosted ADA-positive:
ADA-positive sample at baseline and at least 1 treatment-boosted ADA-positive sampleTime FrameBaseline (before first dose) and post-baseline (assessed throughout the treatment, up to approximately 48 weeks, 16 weeks and 20 weeks for
KAZ954 single agent, KAZ954+PDR001 and KAZ954+NIR178, respectively)Analysis
Population
DescriptionAll patients who received at least 1 dose of KAZ954 and had a determinant baseline immunogenicity (IG) sample and at least 1 determinant
post-baseline IG sample for assessing anti-KAZ954 antibodies.

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	KAZ954 30 mg	KAZ954 50 mg	KAZ954 100 mg	KAZ954 150 mg	KAZ954 300 mg	KAZ954 600 mg	KAZ954 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg + PDR001 400 mg	KAZ954 300 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 160 mg	KAZ954 600 mg + NIR178 240 mg
Arm/Gr oup Descript ion	KAZ954 30 mg IV Q2W	KAZ954 50 mg IV Q2W	KAZ954 100 mg IV Q2W	KAZ954 150 mg IV Q2W	KAZ954 300 mg IV Q2W	KAZ954 600 mg IV Q2W	KAZ954 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinat ion with spartaliz umab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinat ion with spartaliz umab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinat ion with spartaliz umab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Particip ants Analyze d [units: particip ants]	3	4	4	11	5	6	9	4	3	8	3	4	6
Vumber of particip ants with anti- KAZ954 antibodi es (units: participa nts)	Count of Particip ants (Not Applica ble)	Count of Particip ants (Not Applica ble)	Count of Particip ants (Not Applica ble)	Count of Particip ants (Not Applica ble)	Count of Particip ants (Not Applica ble)	Count of Particip ants (Not Applica ble)	Count of Particip ants (Not Applica ble)						
ADA- negative at baseline	3 (100%)	4 (100%)	4 (100%)	11 (100%)	5 (100%)	6 (100%)	9 (100%)	4 (100%)	3 (100%)	8 (100%)	3 (100%)	4 (100%)	6 (100%)
ADA- positive at baseline	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
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ADA- negative post- baseline	3 (100%)	3 (75%)	4 (100%)	9 (81.82%)	5 (100%)	6 (100%)	9 (100%)	4 (100%)	3 (100%)	8 (100%)	3 (100%)	3 (75%)	5 (83.33%)
Treatme nt- reduced ADA- positive	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
Treatme nt- induced ADA- positive	0 (%)	1 (25%)	0 (%)	2 (18.18%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (25%)	1 (16.67%)
Treatme nt- boosted ADA- positive	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)

Number of participants with anti-PDR001 antibodies

- DescriptionPDR001 immunogenicity was evaluated in serum samples. Patient anti-drug antibodies (ADA) status was defined as follows: ADA-negative
at baseline: ADA-negative sample at baseline ADA-positive at baseline: ADA-positive sample at baseline ADA-negative post-baseline:
ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples Treatment-reduced ADA-
positive: ADA-positive sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples Treatment-induced
ADA-positive: ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples Treatment-induced
ADA-positive: ADA-negative sample at baseline and at least 1 treatment-induced ADA-positive sample Treatment-boosted ADA-positive:
ADA-positive sample at baseline and at least 1 treatment-induced ADA-positive sampleTime FrameBaseline (before first dose) and post-baseline (assessed throughout the treatment, up to approximately 16 weeks)
- Analysis All patients who received at least 1 dose of PDR001 and had a determinant baseline immunogenicity (IG) sample and at least 1 determinant post-baseline IG sample for assessing anti-PDR001 antibodies.

	KAZ954 300 mg + PDR001	KAZ954 600 mg + PDR001	KAZ954 1200 mg + PDR001
	400 mg	400 mg	400 mg
Arm/Group Description	KAZ954 300 mg IV Q2W in	KAZ954 600 mg IV Q2W in	KAZ954 1200 mg IV Q2W in
	combination with spartalizumab	combination with spartalizumab	combination with spartalizumab
	400 mg IV Q4W	400 mg IV Q4W	400 mg IV Q4W
Number of Participants Analyzed [units: participants]	5	1	7
Number of participants with anti-PDR001 antibodies (units: participants)	Count of Participants	Count of Participants	Count of Participants
	(Not Applicable)	(Not Applicable)	(Not Applicable)
ADA-negative at baseline	5	1	6
	(100%)	(100%)	(85.71%)
ADA-positive at baseline	0	0	1
	(%)	(%)	(14.29%)
ADA-negative post-baseline	5	1	5
	(100%)	(100%)	(71.43%)
Treatment-reduced ADA-positive	0	0	1
	(%)	(%)	(14.29%)
Treatment-induced ADA-positive	0	0	1
	(%)	(%)	(14.29%)
Treatment-boosted ADA-positive	0	0	0
	(%)	(%)	(%)

Overall Response Rate (ORR) using RECIST v1.1 by PD-L1 expression

DescriptionProgrammed Death-Ligand 1 (PD-L1) expression was assessed centrally using the 22C3 PharmDx assay. PD-L1 expression levels were
defined based on the tumor proportion score (TPS). The PD-L1 expression levels were categorized as high (TPS ≥ 50%), medium (TPS 1% -
49%) and low (TPS <1%) expressors. This record summarizes ORR using RECIST v1.1 by PD-L1 expression.</th>Time FrameUp to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment and had a valid assessment for the outcome measure. Population Description

	KAZ954: PD- L1 Low	KAZ954: PD- L1 Medium	KAZ954: PD- L1 High	KAZ954+PDR001: PD-L1 Low	KAZ954+PDR001: PD-L1 Medium	KAZ954+NIR178: PD-L1 Low	KAZ954+NIR178: PD-L1 Medium
Arm/Group Description	Treatment with KAZ954 single agent and PD-L1 expression levels low (TPS<1%)	Treatment with KAZ954 single agent and PD-L1 expression levels medium (TPS 1% - 49%)	Treatment with KAZ954 single agent and PD-L1 expression levels high (TPS>50%)	Treatment with KAZ954 in combination with spartalizumab and PD-L1 expression levels low (TPS<1%)	Treatment with KAZ954 in combination with spartalizumab and PD-L1 expression levels medium (TPS 1% - 49%)	Treatment with KAZ954 in combination with NIR178 and PD- L1 expression levels low (TPS<1%)	Treatment with KAZ954 in combination with NIR178 and PD- L1 expression levels medium (TPS 1% - 49%)
Number of Participants Analyzed [units: participants]	26	5	2	11	5	10	2
Overall Response Rate (ORR) using RECIST v1.1 by PD-L1 expression (units: percentage of participants)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)
	0 (0.0 to 10.9)	0 (0.0 to 45.1)	0 (0.0 to 77.6)	0 (0.0 to 23.8)	0 (0.0 to 45.1)	0 (0.0 to 25.9)	0 (0.0 to 77.6)

Overall Response Rate (ORR) using iRECIST by PD-L1 expression

Description PD-L1 expression was assessed centrally using the 22C3 PharmDx assay. PD-L1 expression levels were defined based on the tumor proportion score (TPS). The PD-L1 expression levels were categorized as high (TPS ≥ 50%), medium (TPS 1% - 49%) and low (TPS <1%) expressors. This record summarizes ORR using iRECIST by PD-L1 expression.

Time Frame Up to approximately 48 weeks (KAZ954 single agent), 16 weeks (KAZ954+PDR001) and 20 weeks (KAZ954+NIR178)

Analysis All patients who received at least one dose of study treatment and had a valid assessment for the outcome measure. Population Description

KAZ954: PD-	KAZ954: PD-	KAZ954: PD-	KAZ954+PDR001:	KAZ954+PDR001:	KAZ954+NIR178:	KAZ954+NIR178:
L1 Low	L1 Medium	L1 High	PD-L1 Low	PD-L1 Medium	PD-L1 Low	PD-L1 Medium

Arm/Group Description	Treatment with KAZ954 single agent and PD-L1 expression levels low (TPS<1%)	Treatment with KAZ954 single agent and PD-L1 expression levels medium (TPS 1% - 49%)	Treatment with KAZ954 single agent and PD-L1 expression levels high (TPS>50%)	Treatment with KAZ954 in combination with spartalizumab and PD-L1 expression levels low (TPS<1%)	Treatment with KAZ954 in combination with spartalizumab and PD-L1 expression levels medium (TPS 1% - 49%)	Treatment with KAZ954 in combination with NIR178 and PD- L1 expression levels low (TPS<1%)	Treatment with KAZ954 in combination with NIR178 and PD- L1 expression levels medium (TPS 1% - 49%)
Number of Participants Analyzed [units: participants]	26	5	2	11	5	10	2
Overall Response Rate (ORR) using iRECIST by PD-L1 expression (units: percentage of participants)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)	Number (90% Confidence Interval)
	0 (0.0 to 10.9)	0 (0.0 to 45.1)	0 (0.0 to 77.6)	0 (0.0 to 23.8)	0 (0.0 to 45.1)	0 (0.0 to 25.9)	0 (0.0 to 77.6)

Progression Free Survival (PFS) using RECIST v1.1 by PD-L1 expression

 Description
 PD-L1 expression was assessed centrally using the 22C3 PharmDx assay. PD-L1 expression levels were defined based on the tumor proportion score (TPS). The PD-L1 expression levels were categorized as high (TPS ≥ 50%), medium (TPS 1% - 49%) and low (TPS <1%) expressors. This record summarizes PFS using RECIST v1.1 by PD-L1 expression.</td>

 Time Frame
 Up to approximately 52 weeks (KAZ954 single agent), 20 weeks (KAZ954+PDR001) and 24 weeks (KAZ954+NIR178)

 Analysis
 All patients who received at least one dose of study treatment and had a valid assessment for the outcome measure.

 Description
 Description

	KAZ954: PD-	KAZ954: PD-	KAZ954: PD-	KAZ954+PDR001:	KAZ954+PDR001:	KAZ954+NIR178:	KAZ954+NIR178:
	L1 Low	L1 Medium	L1 High	PD-L1 Low	PD-L1 Medium	PD-L1 Low	PD-L1 Medium
Arm/Group Description	Treatment with KAZ954 single agent	Treatment with KAZ954 single agent	Treatment with KAZ954 single agent	Treatment with KAZ954 in combination with			

	and PD-L1 expression levels low (TPS<1%)	and PD-L1 expression levels medium (TPS 1% - 49%)	and PD-L1 expression levels high (TPS>50%)	spartalizumab and PD-L1 expression levels low (TPS<1%)	spartalizumab and PD-L1 expression levels medium (TPS 1% - 49%)	NIR178 and PD- L1 expression levels low (TPS<1%)	NIR178 and PD- L1 expression levels medium (TPS 1% - 49%)
Number of Participants Analyzed [units: participants]	26	5	2	11	5	10	2
Progression Free Survival (PFS) using RECIST v1.1 by PD-L1 expression (units: months)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)
	1.6 (1.5 to 1.9)	1.8 (0.7 to NA) ^[1]	1.5 (1.2 to NA) ^[1]	1.8 (0.2 to 2.0)	1.9 (1.5 to NA) ^[1]	1.7 (1.4 to 3.5)	1.1 (0.5 to NA) ^[1]

[1] Not estimable due to insufficient number of participants with events

Progression Free Survival (PFS) using iRECIST by PD-L1 expression

 Description
 PD-L1 expression was assessed centrally using the 22C3 PharmDx assay. PD-L1 expression levels were defined based on the tumor proportion score (TPS). The PD-L1 expression levels were categorized as high (TPS ≥ 50%), medium (TPS 1% - 49%) and low (TPS <1%) expressors. This record summarizes PFS using iRECIST by PD-L1 expression.</th>

 Time Frame
 Up to approximately 52 weeks (KAZ954 single agent), 20 weeks (KAZ954+PDR001) and 24 weeks (KAZ954+NIR178)

 Analysis
 All patients who received at least one dose of study treatment and had a valid assessment for the outcome measure.

Population Description

KAZ954: PD-KAZ954: PD-KAZ954: PD-KAZ954+PDR001: KAZ954+PDR001: KAZ954+NIR178: KAZ954+NIR178: PD-L1 Medium L1 Low L1 Medium L1 High PD-L1 Low PD-L1 Low PD-L1 Medium Treatment Treatment Treatment Treatment with Treatment with Treatment with Treatment with with KAZ954 with KAZ954 with KAZ954 KAZ954 in KAZ954 in KAZ954 in KAZ954 in Arm/Group single agent single agent combination with combination with combination with combination with single agent Description and PD-L1 and PD-L1 and PD-L1 spartalizumab and NIR178 and PD-NIR178 and PDspartalizumab and expression expression expression PD-L1 expression PD-L1 expression L1 expression L1 expression levels

	levels low	medium (TPS	levels high	levels low	levels medium	levels low	levels medium
	(TPS<1%)	1% - 49%)	(TPS>50%)	(TPS<1%)	(TPS 1% - 49%)	(TPS<1%)	(TPS 1% - 49%)
Number of Participants Analyzed [units: participants]	26	5	2	11	5	10	2
Progression Free Survival (PFS) using iRECIST by PD-L1 expression (units: months)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)	Median (90% Confidence Interval)
	1.7	1.8	1.5	1.9	1.9	1.7	1.1
	(1.3 to 2.4)	(0.7 to NA) ^[1]	(1.2 to NA) ^[1]	(0.8 to 2.1)	(1.5 to NA) ^[1]	(1.4 to 2.2)	(0.5 to NA) ^[1]

[1] Not estimable due to insufficient number of participants with events

Post-Hoc Outcome Result(s)

All-Collected Deaths

- Description On-treatment and post-treatment safety follow-up (FU) deaths were collected from first dose of study medication to 90 days after last dose of KAZ954 and KAZ954+NIR178 and 150 days after last dose of KAZ954+PDR001. Survival FU deaths were collected from 91 days after last dose of KAZ954 and KAZ954 and KAZ954+NIR178 and 151 days after last dose of NIR178+PDR001 until end of study. All deaths refer to the sum of on-treatment and post-treatment safety FU deaths plus survival FU deaths.
- Time Frame On-treatment and safety FU deaths: up to approximately 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001). Survival FU deaths: up to approximately 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001)

Analysis All patients who received at least one dose of study treatment. Population Description

KAZ9 54 30 mg	KAZ9 54 50 mg	KAZ9 54 100 mg	KAZ9 54 150 mg	KAZ9 54 300 mg	KAZ9 54 600 mg	KAZ9 54 1200 mg	KAZ954 300 mg + PDR001 400 mg	KAZ954 600 mg + PDR001 400 mg	KAZ954 1200 mg +	KAZ954 300 mg +	KAZ954 600 mg +	KAZ954 600 mg +
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										PDR001 400 mg	NIR178 160 mg	NIR178 160 mg	NIR178 240 mg
Arm/Group Description	KAZ9 54 30 mg IV Q2W	KAZ9 54 50 mg IV Q2W	KAZ9 54 100 mg IV Q2W	KAZ9 54 150 mg IV Q2W	KAZ9 54 300 mg IV Q2W	KAZ9 54 600 mg IV Q2W	KAZ9 54 1200 mg IV Q2W	KAZ954 300 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 600 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 1200 mg IV Q2W in combinati on with spartalizu mab 400 mg IV Q4W	KAZ954 300 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 160 mg oral b.i.d.	KAZ954 600 mg IV Q2W in combina tion with NIR178 240 mg oral b.i.d.
Number of Participants Analyzed [units: participants]	3	4	4	11	5	6	10	5	4	9	4	6	6
All-Collected Deaths (units: participants)													
On-treatment and post-treatment safety FU deaths (n=3,4,4,11,5,6,10,5,4 ,9,4,6,6)	1	2	1	1	1	2	7	2	1	5	2	2	3
Survival FU deaths (n=2,2,3,10,4,4,3,3,3, 4,2,4,3)	1	0	1	4	0	1	0	0	0	2	1	2	0
All deaths (n=3,4,4,11,5,6,10,5,4 ,9,4,6,6)	2	2	2	5	1	3	7	2	1	7	3	4	3

Safety Results



Time Frame	On- and post-treatment safety FU: from first dose of study medication to 90 days after last dose of KAZ954 and KAZ954+NIR178 and 150 days after last dose of KAZ954+PDR001, up to approx. 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001). Deaths in survival period: from 91 days after last dose of KAZ954 and KAZ954+NIR178 and 151 days after last dose of NIR178+PDR001 until end of study, up to approx. 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001).
Additional Description	Deaths in the survival period are not considered Adverse Events (AEs). No AEs were collected in the survival period.
Source Vocabulary for Table Default	MedDRA (26.1)
Collection	

Approach for Table Systematic Assessment Default

All-Cause Mortality

	KAZ 954 30 mg N = 3	KAZ 954 50 mg N = 4	KAZ 954 100 mg N = 4	KAZ 954 150 mg N = 11	KAZ 954 300 mg N = 5	KAZ 954 600 mg N = 6	KAZ 954 120 0 mg N = 10	KAZ954 300 mg + PDR001 400 mg N = 5	KAZ954 600 mg + PDR001 400 mg N = 4	KAZ954 1200 mg + PDR001 400 mg N = 9	KAZ954 300 mg + NIR178 160 mg N = 4	KAZ954 600 mg + NIR178 160 mg N = 6	KAZ954 600 mg + NIR178 240 mg N = 6	All patients_ On- and post- treatmen t safety FU N = 77	All patients_ Survival FU N = 47
	Safe	Safe	Safe	Safe	Safe	Safe	Safe	Safety	Safety	Safety	Safety	Safety	Safety	Safety	Deaths
	ty	ty	ty	ty	ty	ty	ty	data up to	data up to	data up to	data up	data up	data up	data up to	collected
	data	data	data	data	data	data	data	150 days	150 days	150 days	to 90	to 90	to 90	90 days	from 91
	up	up	up	up	up	up	up	after last	after last	after last	days	days	days	after last	days after
Arm/G	to	to	to	to	to	to	to	dose of	dose of	dose of	after last	after last	after last	dose of	last dose
roup	90	90	90	90	90	90	90	KAZ954+	KAZ954+	KAZ954+	dose of	dose of	dose of	KAZ954	of
Descri	day	day	day	day	day	day	day	PDR001	PDR001	PDR001	KAZ954+	KAZ954+	KAZ954+	and	KAZ954
ption	S	S	s	S	S	S	S				NIR178	NIR178	NIR178	KAZ954+	and
	after	after	after	after	after	after	after							NIR178	KAZ954+
	last	last	last	last	last	last	last							and 150	NIR178
	dos	dos	dos	dos	dos	dos	dos							days after	and 151
	e of	e of	e of	e of	e of	e of	e of							last dose	days after

	KAZ 954							of KAZ954+ PDR001	last dose of NIR178+ PDR001 until end of study						
Total Numb er Affect ed	1	2	1	1	1	2	7	2	1	5	2	2	3	30	12
Total Numb er At Risk	3	4	4	11	5	6	10	5	4	9	4	6	6	77	47

Serious Adverse Events

Time Frame	On- and post-treatment safety FU: from first dose of study medication to 90 days after last dose of KAZ954 and KAZ954+NIR178 and 150 days after last dose of KAZ954+PDR001, up to approx. 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001). Deaths in survival period: from 91 days after last dose of KAZ954 and KAZ954+NIR178 and 151 days after last dose of NIR178+PDR001 until end of study, up to approx. 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001).
Additional Description	Deaths in the survival period are not considered Adverse Events (AEs). No AEs were collected in the survival period.
Source Vocabulary for Table Default	MedDRA (26.1)
Collection Approach for Table Default	Systematic Assessment

	KAZ 954 30 mg N = 3	KAZ 954 50 mg N = 4	KAZ 954 100 mg N = 4	KAZ 954 150 mg N = 11	KAZ 954 300 mg N = 5	KAZ 954 600 mg N = 6	KAZ 954 1200 mg N = 10	KAZ954 300 mg + PDR001 400 mg N = 5	KAZ954 600 mg + PDR001 400 mg N = 4	KAZ954 1200 mg + PDR001 400 mg N = 9	KAZ95 4 300 mg + NIR178 160 mg N = 4	KAZ95 4 600 mg + NIR178 160 mg N = 6	KAZ95 4 600 mg + NIR178 240 mg N = 6	All patients _On- and post- treatme nt safety FU N = 77	All patients _Surviv al FU N = 0
Arm/Group Description	Safet y data up to 90 days after last dose of KAZ 954	Safety data up to 150 days after last dose of KAZ954 +PDR00 1	Safety data up to 150 days after last dose of KAZ954 +PDR00 1	Safety data up to 150 days after last dose of KAZ954 +PDR00 1	Safety data up to 90 days after last dose of KAZ954 +NIR17 8	Safety data up to 90 days after last dose of KAZ954 +NIR17 8	Safety data up to 90 days after last dose of KAZ954 +NIR17 8	Safety data up to 90 days after last dose of KAZ954 +NIR17 8 and 150 days after last dose of KAZ954 +PDR00 1	Deaths collected from 91 days after last dose of KAZ954 and KAZ954 +NIR178 and 151 days after last dose of NIR178+ PDR001 until end of study						
Total # Affected by any Serious Adverse Event	2	1	4	6	3	3	6	4	2	4	3	4	3	45	0
Total # at Risk by any Serious Adverse Event	3	4	4	11	5	6	10	5	4	9	4	6	6	77	0

Blood and lymphatic system disorders															
Anaemia	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
Thromboc ytopenia	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
Cardiac disorders															
Myocardia I infarction	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Myocarditi s	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Ear and labyrinth disorders															
Vertigo	0 (0. 00%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
Gastrointes tinal disorders															
Abdominal pain	1 (33 .33%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	1 (25.00 %)	1 (11.11 %)	2 (50.00 %)	1 (16.67 %)	0 (0.00 %)	8 (10.39 %)	
Abdominal pain upper	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
Ascites	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
Constipati on	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	

Large intestinal obstructio n	0 (0. 00%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Nausea	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Rectal haemorrh age	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
Upper gastrointe stinal haemorrh age	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Vomiting	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
General disorders and administrati on site conditions															
Fatigue	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	2 (20 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	
Pyrexia	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	3 (3.90 %)	
Hepatobilia ry disorders															
Cholangiti s	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	

Hypertran saminasa emia	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)
lmmune system disorders														
Cytokine release syndrome	1 (33 .33%)	0 (0. 00%)	3 (75 .00%)	2 (18 .18%)	1 (20 .00%)	2 (33 .33%)	0 (0. 00%)	2 (40.00 %)	1 (25.00 %)	2 (22.22 %)	0 (0.00 %)	1 (16.67 %)	3 (50.00 %)	18 (23.3 8%)
Infections and infestations														
Bacterae mia	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
Cellulitis	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)						
Device related infection	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)
Sepsis	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	2 (40 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	3 (3.90 %)
Urinary tract infection	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)				
Injury, poisoning and procedural complicatio ns														
Accidental overdose	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)				

Cardiac procedure complicati on	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Metabolism and nutrition disorders															
Decrease d appetite	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Hyperglyc aemia	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Hyponatra emia	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	2 (2.60 %)	
Musculoske letal and connective tissue disorders															
Back pain	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)	
Pain in extremity	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
Pathologic al fracture	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
Neoplasms benign,															

malignant and

unspecified (incl cysts and polyps)

Tumour thrombosi s	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)							
Nervous system disorders															
Neuritis	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)							
Psychiatric disorders															
Delirium	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Insomnia	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Mental status changes	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Reproducti ve system and breast disorders															
Female genital tract fistula	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)							
Respiratory , thoracic and mediastinal disorders															
Dyspnoea	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						

Pleural effusion	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Pneumoth orax	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Pulmonar y embolism	0 (0. 00%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	3 (3.90 %)	

Other (Not Including Serious) Adverse Events

Time Frame	On- and post-treatment safety FU: from first dose of study medication to 90 days after last dose of KAZ954 and KAZ954+NIR178 and 150 days after last dose of KAZ954+PDR001, up to approx. 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001). Deaths in survival period: from 91 days after last dose of KAZ954 and KAZ954+NIR178 and 151 days after last dose of NIR178+PDR001 until end of study, up to approx. 61 weeks (KAZ954), 37 weeks (KAZ954+NIR178) and 33 weeks (KAZ954+PDR001).
Additional Description	Deaths in the survival period are not considered Adverse Events (AEs). No AEs were collected in the survival period.
Source Vocabulary for Table Default	MedDRA (26.1)
Collection Approach for Table Default	Systematic Assessment

Frequent Event Reporting Threshold

5%

	KAZ9 54 30 mg N = 3	KAZ 954 50 Mg N = 4	KAZ 954 100 mg N = 4	KAZ 954 150 mg N = 11	KAZ 954 300 mg N = 5	KAZ 954 600 mg N = 6	KAZ 954 1200 mg N = 10	KAZ954 300 mg + PDR001 400 mg N = 5	KAZ954 600 mg + PDR001 400 mg N = 4	KAZ954 1200 mg + PDR001 400 mg N = 9	KAZ95 4 300 mg + NIR178 160 mg N = 4	KAZ95 4 600 mg + NIR178 160 mg N = 6	KAZ95 4 600 mg + NIR178 240 mg N = 6	All patients _On- and post- treatme nt safety FU N = 77	All patients _Surviv al FU N = 0
Arm/Grou p Descriptio n	Safet y data up to 90 days after last dose of KAZ9 54	Safet y data up to 90 days after last dose of KAZ 954	Safety data up to 150 days after last dose of KAZ954 +PDR00 1	Safety data up to 150 days after last dose of KAZ954 +PDR00 1	Safety data up to 150 days after last dose of KAZ954 +PDR00 1	Safety data up to 90 days after last dose of KAZ954 +NIR17 8	Safety data up to 90 days after last dose of KAZ954 +NIR17 8	Safety data up to 90 days after last dose of KAZ954 +NIR17 8	Safety data up to 90 days after last dose of KAZ954 +NIR17 8 and 150 days after last dose of KAZ954 +PDR00 1	Deaths collected from 91 days after last dose of KAZ954 and KAZ954 +NIR178 and 151 days after last dose of NIR178+ PDR001 until end of study					
Total # Affected by any Other Adverse Event	3	4	4	11	5	6	10	5	4	9	4	6	6	77	0
Total # at Risk by any Other Adverse Event	3	4	4	11	5	6	10	5	4	9	4	6	6	77	0

Blood and	
lymphatic	
system	
disorders	

Anaemia	1 (33. 33%)	2 (50 .00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	1 (16 .67%)	1 (10 .00%)	1 (20.00 %)	1 (25.00 %)	2 (22.22 %)	0 (0.00 %)	2 (33.33 %)	0 (0.00 %)	12 (15.5 8%)	
Dissemin ated intravasc ular coagulati on	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Leukocyt osis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Lymphop enia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	2 (40.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	1 (16.67 %)	1 (16.67 %)	7 (9.09 %)	
Thrombo cytopeni a	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	
Cardiac disorders															
Arrhythm ia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
Atrial fibrillatio n	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Myocardi tis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	1 (1.30 %)					
Sinus tachycar dia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	2 (2.60 %)					

Tachycar dia	2 (66. 67%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)						
Ear and labyrinth disorders															
Vertigo	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Endocrine disorders															
Hyperthy roidism	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)						
Thyroiditi s	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Eye disorders															
Altered visual depth perceptio n	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Conjunct ival haemorr hage	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Diplopia	0 (0.0 0%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Dry eye	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Vision blurred	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						

Gastrointe

stinal

disorders

Abdomin al discomfo rt	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Abdomin al distensio n	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	2 (18 .18%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	1 (11.11 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	6 (7.79 %)	
Abdomin al pain	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	4 (36 .36%)	1 (20 .00%)	1 (16 .67%)	3 (30 .00%)	0 (0.00 %)	0 (0.00 %)	3 (33.33 %)	2 (50.00 %)	1 (16.67 %)	0 (0.00 %)	16 (20.7 8%)	
Abdomin al pain upper	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	1 (20.00 %)	1 (25.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	6 (7.79 %)	
Ascites	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	4 (5.19 %)	
Constipa tion	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	3 (27 .27%)	1 (20 .00%)	2 (33 .33%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	1 (25.00 %)	2 (33.33 %)	2 (33.33 %)	14 (18.1 8%)	
Defaecat ion urgency	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)										
Diarrhoe a	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	3 (27 .27%)	0 (0. 00%)	1 (16 .67%)	2 (20 .00%)	3 (60.00 %)	1 (25.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	2 (33.33 %)	13 (16.8 8%)	
Dry mouth	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	4 (5.19 %)	
Dyspepsi a	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	2 (20 .00%)	0 (0.00 %)	3 (3.90 %)						
Dysphag ia	1 (33. 33%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)											

2 (2.60 %) 1 (1.30 %)
1 (1.30 %)
/~/
1 (1.30 %)
22 (28.5 7%)
3 (3.90 %)
1 (1.30 %)
3 (3.90 %)
1 (1.30 %)
14 (18.1 8%)

General

disorders

and administra

tion site

conditions

Asthenia	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	3 (27 .27%)	1 (20 .00%)	2 (33 .33%)	4 (40 .00%)	1 (20.00 %)	0 (0.00 %)	2 (22.22 %)	1 (25.00 %)	2 (33.33 %)	2 (33.33 %)	19 (24.6 8%)	
Chest discomfo rt	1 (33. 33%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Chest pain	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Chills	2 (66. 67%)	0 (0. 00%)	1 (25 .00%)	2 (18 .18%)	3 (60 .00%)	2 (33 .33%)	3 (30 .00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	3 (50.00 %)	18 (23.3 8%)	
Extravas ation	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Fatigue	1 (33. 33%)	1 (25 .00%)	0 (0. 00%)	5 (45 .45%)	3 (60 .00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	1 (11.11 %)	1 (25.00 %)	2 (33.33 %)	1 (16.67 %)	16 (20.7 8%)	
Feeling hot	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)						
Influenza like illness	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)						
Localise d oedema	1 (33. 33%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)						
Non- cardiac chest pain	0 (0.0 0%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)						
Oedema	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Oedema peripher al	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	4 (5.19 %)	

Pain	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	4 (5.19 %)	
Pyrexia	3 (10 0.00 %)	1 (25 .00%)	1 (25 .00%)	0 (0. 00%)	1 (20 .00%)	4 (66 .67%)	2 (20 .00%)	1 (20.00 %)	1 (25.00 %)	1 (11.11 %)	2 (50.00 %)	2 (33.33 %)	2 (33.33 %)	21 (27.2 7%)	
Hepatobili ary disorders															
Biliary obstructi on	1 (33. 33%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)											
Cholecys titis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Cholesta sis	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Hepatic function abnorma I	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	2 (2.60 %)						
Hyperbili rubinae mia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	2 (18 .18%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	4 (5.19 %)	
lmmune system disorders															
Cytokine release syndrom e	0 (0.0 0%)	1 (25 .00%)	1 (25 .00%)	1 (9. 09%)	0 (0. 00%)	1 (16 .67%)	2 (20 .00%)	1 (20.00 %)	1 (25.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	2 (33.33 %)	11 (14.2 9%)	
Hyperse nsitivity	1 (33. 33%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)											

Seasona I allergy	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Infections and infestation s															
Bacterae mia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
Bronchiti s	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Catheter site infection	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Conjunct ivitis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
COVID- 19	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	1 (25.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	3 (3.90 %)	
Cystitis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Device related infection	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Enteroco litis infectiou s	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Herpes zoster	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Rash pustular	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	

Sialoade nitis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)
Upper respirato ry tract infection	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)					
Urinary tract infection	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (16.67 %)	4 (5.19 %)
Injury, poisoning and procedura I complicati														
ons														
Fall	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)
Infusion related reaction	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	2 (40.00 %)	1 (25.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	1 (16.67 %)	7 (9.09 %)
Post procedur al inflamma tion	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)					
Procedur al nausea	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)					
Procedur al pain	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)					

Investigati ons

Alanine 1 (16 4 (40 aminotra 2 (66. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 2 (50.00 2 (22.22 0 (0.00 0 (0.00 0 (0.00 11 (14.2 .67% .00% nsferase 00%) %) 67%) 00%) 00%) 00%) %) %) %) %) %) 9%) increase)) d Amylase 2 (50 1 (10 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 3 (3.90 0 (0.0 0 (0. .0Ò% .00% increase 00%) 00%) 00%) 00%) `%) `%) %) 0%) %) %) %) %) d) Aspartat е 1 (25 1 (16 4 (40 2 (66. 0 (0. 1 (9. 0 (0. 0 (0.00 1 (25.00 2 (22.22 0 (0.00 0 (0.00 1 (16.67 13 (16.8 aminotra .00% .67% .00% **`**%) nsferase 67%) 00%) 09%) 00%) %) %) %) %) %) 8%)))) increase d Blood alkaline 1 (25 1 (16 1 (10 2 (18 2 (66. 0 (0. 0 (0. 1 (20.00 0 (0.00 1 (11.11 0 (0.00 2 (33.33 0 (0.00 11 (14.2 phosphat .18% .00% .67% .00% 67%) 00%) 00%) %) %) %) %) %) %) 9%) ase))) increase d Blood 2 (20 0 (0. 0 (0.00 bilirubin 2 (66. 0 (0. 0 (0. 0 (0. 0 (0. 1 (25.00 1 (11.11 1 (25.00 1 (16.67 2 (33.33 10 (12.9 .00% increase 67%) 00%) 00%) 00%) 00%) 00%) %) %) %) %) %) %) 9%)) d Blood cholester 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 1 (16.67 0 (0.00 1 (1.30 ol `%) `%) 00%) 00%) %) %) %) %) %) 0%) 00%) 00%) 00%) 00%) increase d Blood creatine 1 (20.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 phospho 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 1 (1.30 %) %) %) %) %) 0%) 00%) 00%) 00%) 00%) 00%) 00%) %) %) kinase increase d

Blood creatinin 1 (25 1 (16 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 1 (16.67 0 (0.00 3 (3.90 .00% .67% е 00%) 00%) 0%) 00%) 00%) %) %) %) %) %) %) %) increase)) d Blood lactate 1 (16 dehydro 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 1 (1.30 .67% 0%) 00%) 00%) 00%) 00%) 00%) %) %) %) %) %) %) %) genase) increase d Clostridi 1 (25.00 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 1 (1.30 um test 0%) 00%) 00%) 00%) 00%) 00%) 00%) %) %) %) %) %) %) %) positive Creactive 2 (33 0 (0. 0 (0. 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 0 (0.00 2 (2.60 .33% protein 00%) 00%) 00[`]%) 0%) 00%) 00%) %) %) %) %) %) %) %) increase) d Gammaglutamylt 1 (25 2 (18 2 (33 0 (0. 0 (0. 0 (0. 1 (20.00 0 (0.00 2 (22.22 ransfera 2 (66. 0 (0.00 2 (33.33 0 (0.00 12 (15.5 .00% .18% .33% 00%) 00[°]%) . %) `%) . %) se 67%) 00%) %) %) %) 8%)))) increase d Internati onal 1 (25 1 (16 0 (0. 0 (0.00 0 (0.00 normalis 0 (0.0 0 (0. 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 2 (2.60 .00% .67% 00%) . %) . %) . %) 0%) 00%) 00%) 00%) %) %) %) %) ed ratio)) increase d Lipase 2 (50 1 (25 1 (20 1 (10 0.0) 0 0 (0. 0 (0. 0 (0.00 0 (0.00 0 (0.00 0 (0.00 1 (16.67 0 (0.00 6 (7.79 .00% .00% .0Ò% .00% increase `%) `%) 0%) 00%) 00%) %) %) %) %) %) d) 2 (50 2 (66. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0. 0 (0.00 1 (25.00 1 (11.11 0 (0.00 1 (16.67 0 (0.00 7 (9.09 Lymphoc .00% 67%) 00%) 00%) 00%) 00%) 00%) %) %) %) %) %) %) %) yte count)

decrease d

u														
Pancreat ic enzymes decrease d	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)				
Platelet count decrease d	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)				
Transam inases increase d	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)
Weight decrease d	2 (66. 67%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	5 (6.49 %)
Weight increase d	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)				
Metabolis m and nutrition disorders														
Decreas ed appetite	2 (66. 67%)	0 (0. 00%)	0 (0. 00%)	2 (18 .18%)	1 (20 .00%)	1 (16 .67%)	3 (30 .00%)	1 (20.00 %)	1 (25.00 %)	1 (11.11 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	13 (16.8 8%)
Dehydrat ion	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	3 (27 .27%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	5 (6.49 %)
Hyperam ylasaemi a	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)

Hypercal caemia	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	
Hypergly caemia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	
Hyperkal aemia	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Hyperlip asaemia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Hyperph osphatae mia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Hyperuri caemia	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Hypoalb uminaem ia	2 (66. 67%)	2 (50 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	5 (6.49 %)	
Hypocalc aemia	0 (0.0 0%)	2 (50 .00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	3 (3.90 %)	
Hypokal aemia	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	3 (27 .27%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	5 (6.49 %)	
Hypoma gnesaem ia	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	3 (50.00 %)	6 (7.79 %)	
Hyponatr aemia	2 (66. 67%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	6 (7.79 %)	

Hypopho sphatae mia	0 (0.0 0%)	0 (0. 00%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	1 (25.00 %)	0 (0.00 %)	1 (16.67 %)	4 (5.19 %)	
Polydipsi a	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	1 (20.00 %)	0 (0.00 %)	2 (2.60 %)					
Musculos keletal and connectiv e tissue disorders															
Arthralgi a	2 (66. 67%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	1 (25.00 %)	2 (22.22 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	6 (7.79 %)	
Back pain	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	2 (18 .18%)	2 (40 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	2 (22.22 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	9 (11.69 %)	
Flank pain	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)					
Muscle spasms	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (16.67 %)	3 (3.90 %)	
Muscular weaknes s	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	2 (2.60 %)					
Musculo skeletal chest pain	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)					
Myalgia	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	1 (9. 09%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	4 (5.19 %)					
Neck pain	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	

Pain in extremity	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	1 (16 .67%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	4 (5.19 %)	
Temporo mandibul ar joint syndrom e	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Neoplasm s benign, malignant and unspecifie d (incl cysts and polyps)															
Melanoc ytic naevus	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Metastas es to central nervous system	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Nervous system disorders															
Dizzines s	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	1 (16 .67%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	4 (5.19 %)	
Dysgeusi a	2 (66. 67%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	
Headach e	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	3 (27 .27%)	1 (20 .00%)	0 (0. 00%)	4 (40 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	1 (16.67 %)	3 (50.00 %)	13 (16.8 8%)	

	Hypoaes thesia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
_	Lethargy	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
	Myoclon us	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
	Neuropat hy peripher al	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
_	Ophthal mic migraine	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
_	Paraesth esia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
	Peripher al sensory neuropat hy	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
_	Post herpetic neuralgia	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)					
	Restless legs syndrom e	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
	Sinus headach e	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
_	Somnole nce	0 (0.0 0%)	2 (50 .00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)					

Syncope	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)
Tension headach e	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)
Psychiatri c disorders														
Hallucina tion, auditory	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)
Insomnia	1 (33. 33%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	3 (50.00 %)	0 (0.00 %)	7 (9.09 %)
Restless ness	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)
Renal and urinary disorders														
Acute kidney injury	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)
Chromat uria	2 (66. 67%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)
Proteinur ia	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)
Reproduct ive system and breast disorders														
Breast pain	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)

Respirator y, thoracic and mediastin al disorders

Cough	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	1 (25.00 %)	1 (16.67 %)	0 (0.00 %)	4 (5.19 %)	
Dyspnoe a	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	2 (18 .18%)	0 (0. 00%)	1 (16 .67%)	0 (0. 00%)	1 (20.00 %)	1 (25.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	1 (16.67 %)	8 (10.39 %)	
Dyspnoe a exertiona I	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	2 (2.60 %)	
Epistaxis	0 (0.0 0%)	1 (25 .00%)	1 (25 .00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	3 (3.90 %)						
Hypoxia	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Nasal congesti on	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)					
Pleural effusion	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	2 (2.60 %)	
Producti ve cough	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	1 (1.30 %)					
Rhinorrh oea	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (10 .00%)	0 (0.00 %)	1 (1.30 %)						
Sputum increase d	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)					

Skin and
subcutane
ous tissue
disorders

Dry skin	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Nail disorder	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	1 (1.30 %)					
Pruritus	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	1 (9. 09%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Rash	0 (0.0 0%)	1 (25 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (1.30 %)						
Rash maculo- papular	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20.00 %)	0 (0.00 %)	1 (11.11 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (2.60 %)	
Urticaria	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	1 (1.30 %)	
Vascular disorders															
Deep vein thrombo sis	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	1 (1.30 %)	
Embolis m	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	2 (2.60 %)	
Hot flush	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	1 (20 .00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	1 (16.67 %)	2 (2.60 %)					
Hyperten sion	0 (0.0 0%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	2 (40 .00%)	1 (16 .67%)	1 (10 .00%)	0 (0.00 %)	4 (5.19 %)						

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	Hypoten sion	1 (33. 33%)	0 (0. 00%)	0 (0. 00%)	2 (18 .18%)	0 (0. 00%)	0 (0. 00%)	0 (0. 00%)	0 (0.00 %)	0 (0.00 %)	2 (22.22 %)	0 (0.00 %)	1 (16.67 %)	1 (16.67 %)	7 (9.09 %)
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Conclusion:

- The maximum tolerated dose/recommended dose for expansion (MTD/RDEs) were not reached prior to study termination. The maximum dose of KAZ954 administered was 1200 mg in the KAZ954 single agent and the KAZ954 + PDR001 groups and 600 mg in the KAZ954 + NIR178 group.
- ORR by RECIST, iRECIST and considering expression of PD-L1 was 0%. The best overall response in each group was stable disease. The KAZ954 single agent group had the highest DCR (20.9%). However, the results should be interpreted with caution considering the small sample size and large CI in each group.
- The incidence of treatment induced KAZ954 ADA-positive samples during the course of the study was low, 3 patients treated in the KAZ954 single agent group and 2 patients in the KAZ954 + NIR178 group. The incidence of treatment induced PDR001 ADA-positive samples during the course of the study was low, 1 patient in the KAZ954 + PDR001 group.
- Safety and tolerability in this study were acceptable and would not preclude further development of KAZ954 as a single agent or in combination with PDR001 or NIR178.

Date of Clinical Trial Report

26-Jun-2024