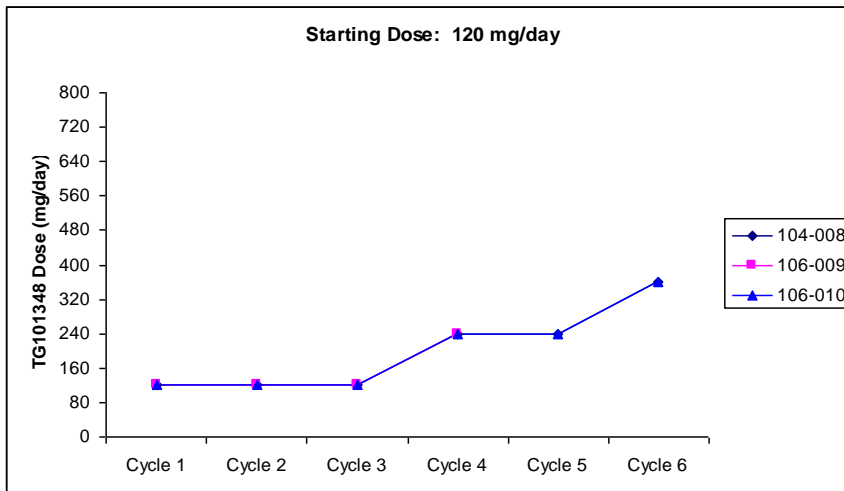
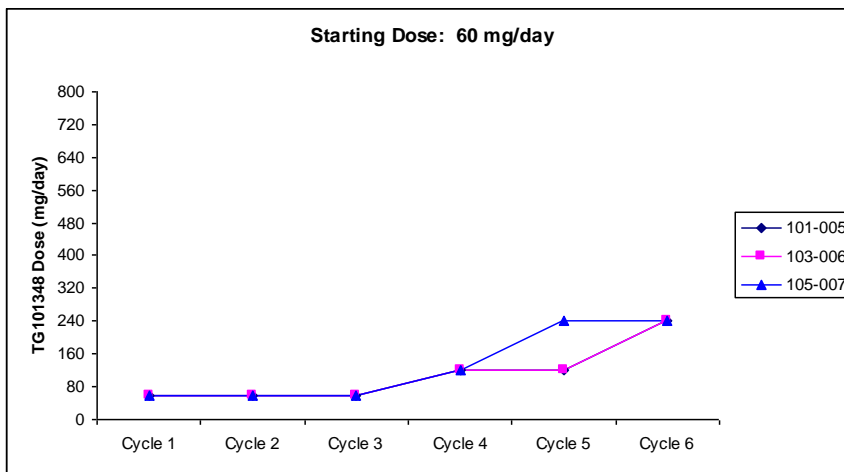
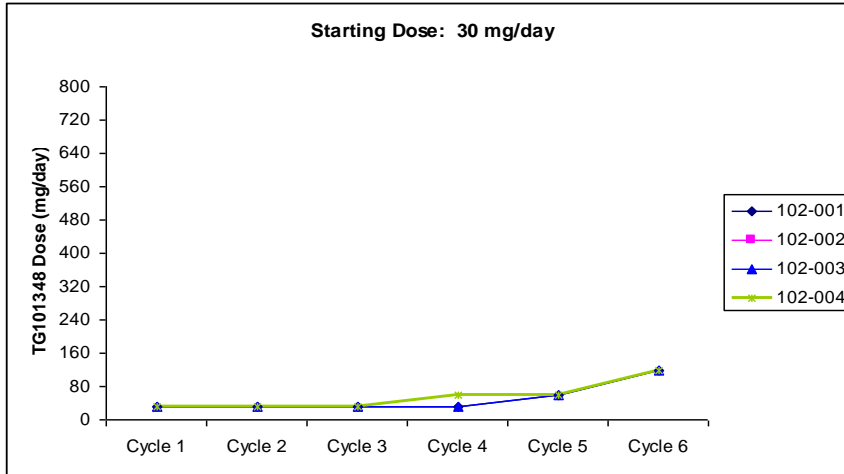
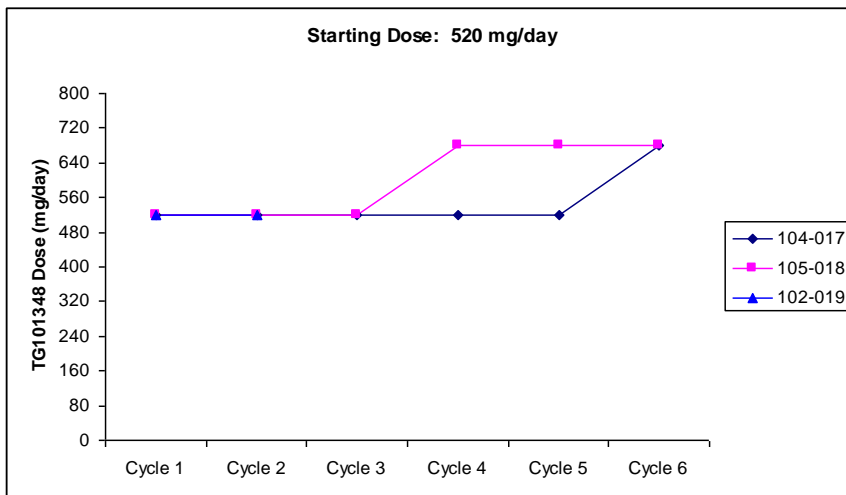
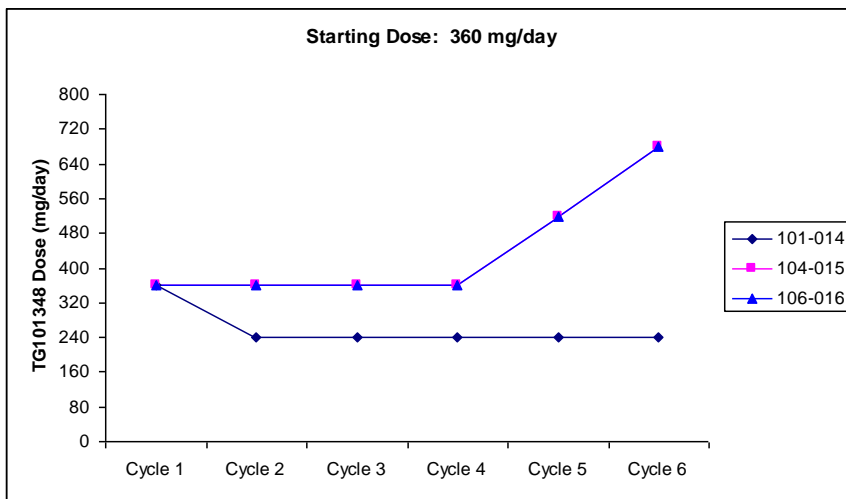
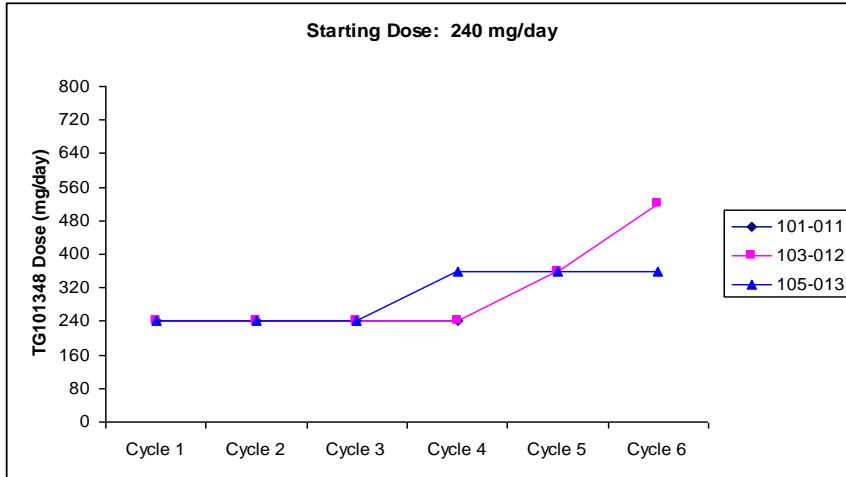


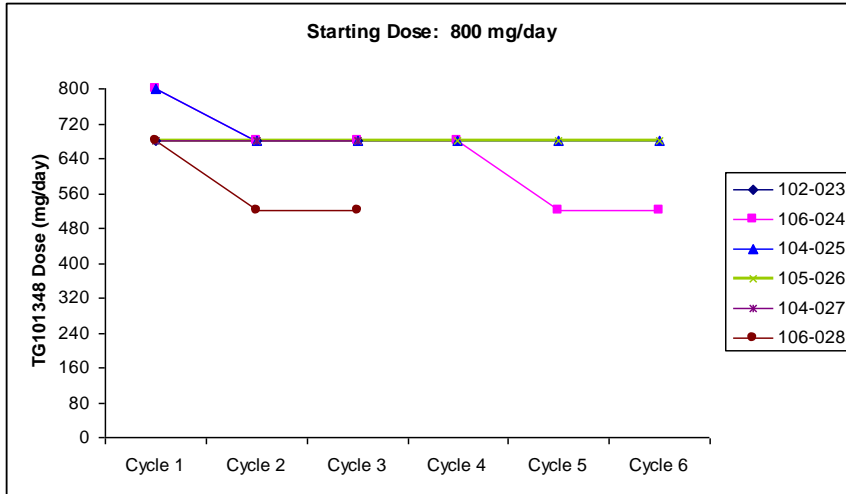
Safety and Efficacy of TG101348, a Selective JAK2 Inhibitor, in Myelofibrosis

Pardanani et al

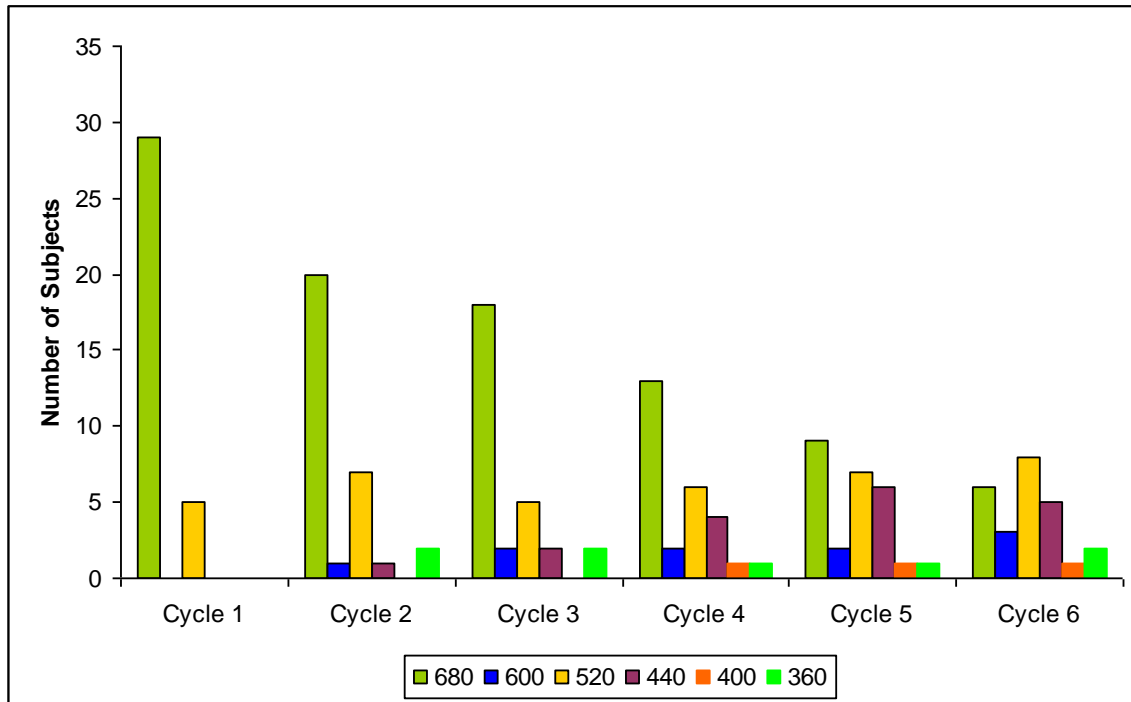
Supplemental Figure 1A. Distribution of TG101348 doses at the end of each cycle for subjects who initiated dosing at 30-520 mg/day and 800 mg/day (n = 25)



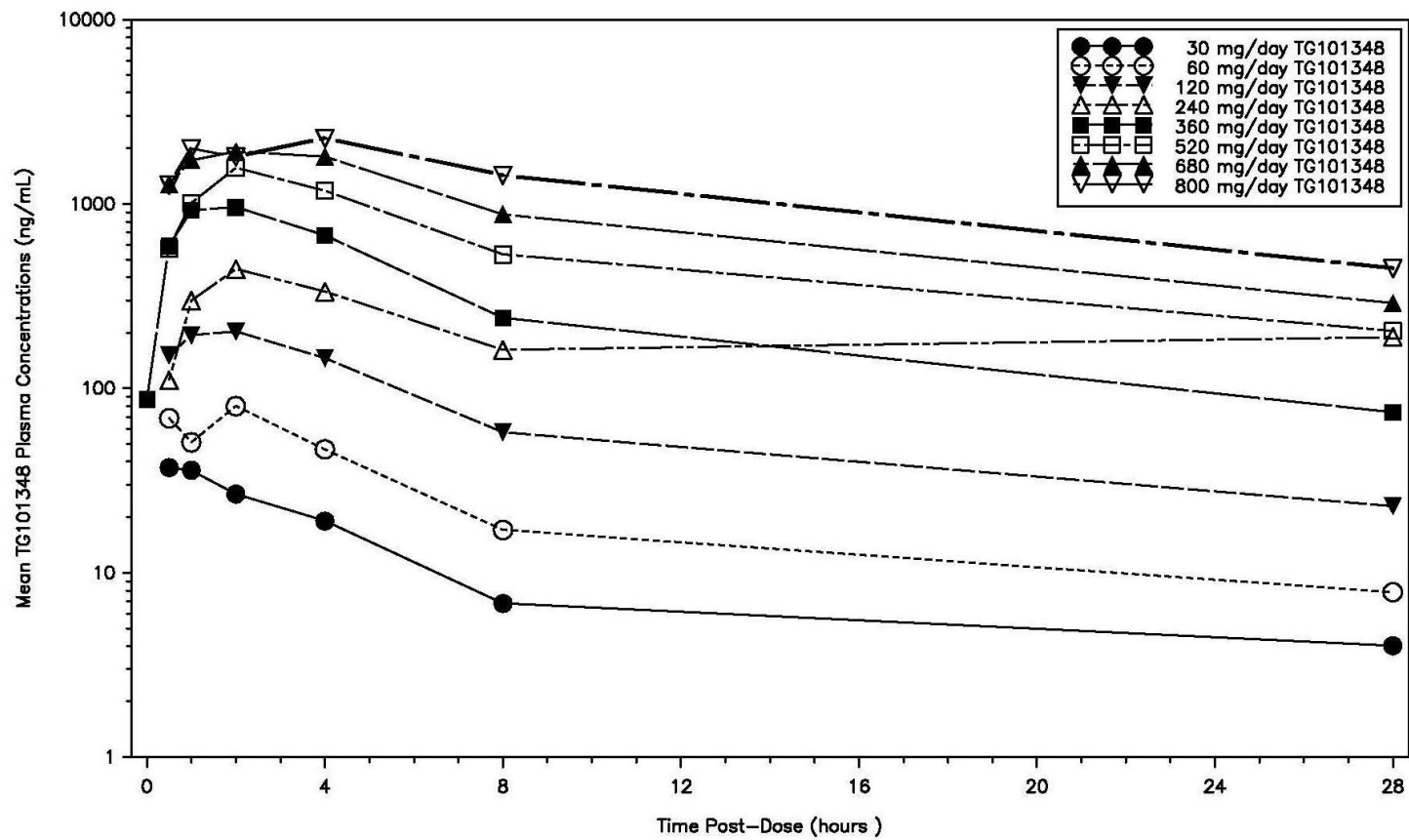




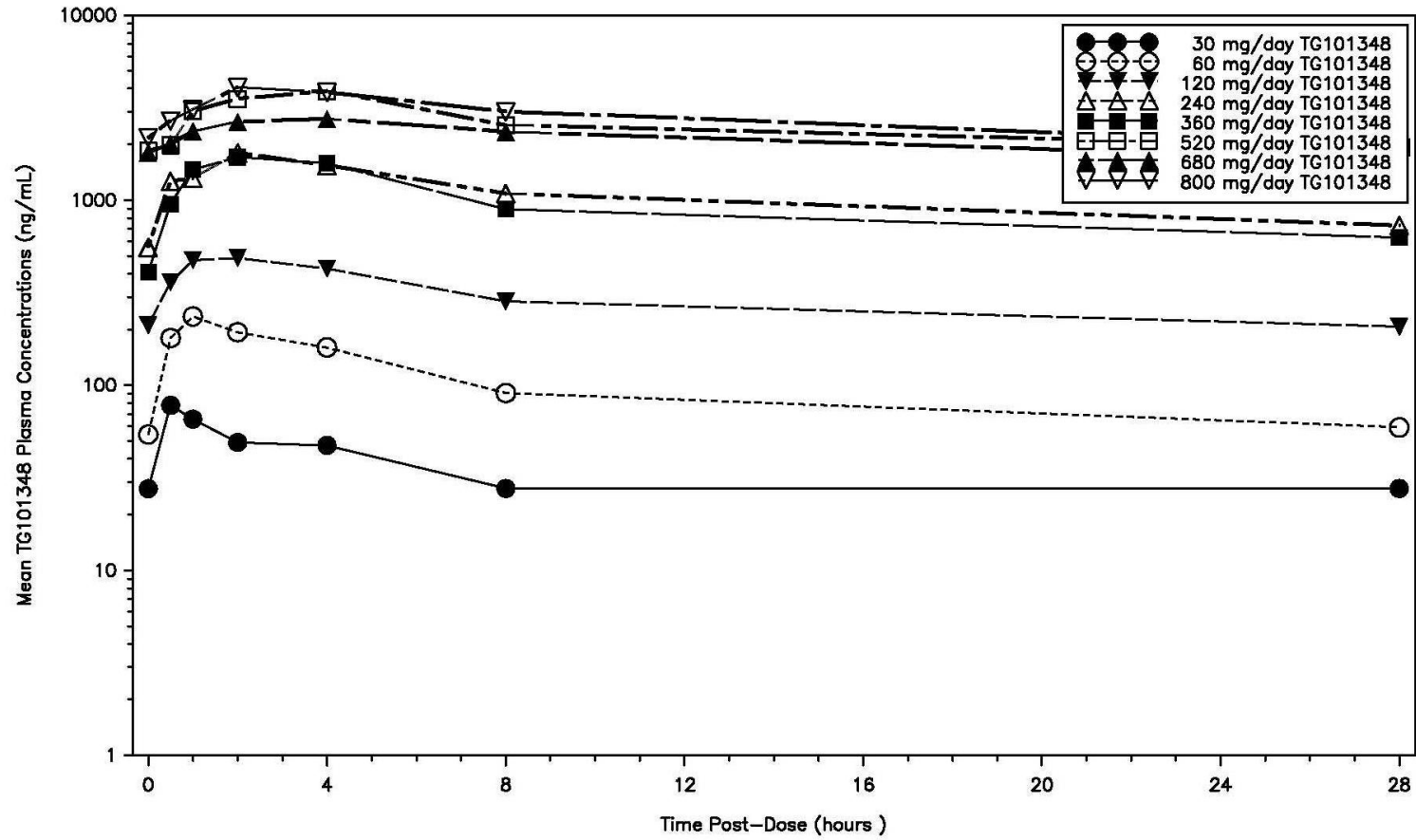
Supplemental Figure 1B. Distribution of TG101348 doses at the end of each cycle for subjects who initiated dosing at 680 mg/day (n = 34)



Supplemental Figure 2A. Plot of mean plasma TG101348 plasma concentrations versus time on a semi-log scale (Cycle 1, Day 1)

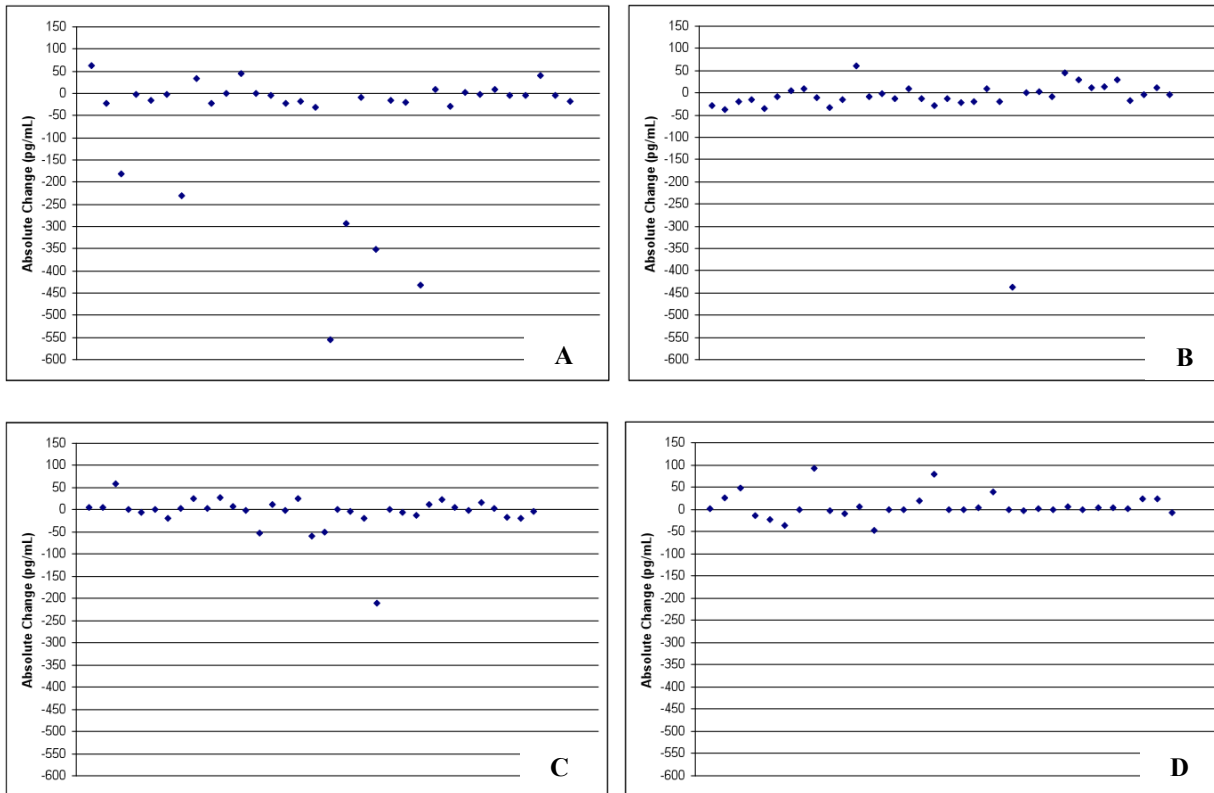


Supplemental Figure 2B. Plot of mean plasma TG101348 plasma concentrations versus time on a semi-log scale (Cycle 1, Day 28)



Supplemental Figure 3. Absolute changes in pro-inflammatory cytokine levels from baseline at Cycle 6:

IL-6 (A), TNF- α (B), IL-8 (C), and IL-2 (D)



Absolute differences in IL-6 (-4719 pg/mL) and IL-2 (-1827 pg/mL) are omitted from panels A and D, respectively, for 1 subject (101-039) because they skewed presentation of data for other subjects.

Supplemental Table 1. Detailed enrollment criteria for MF-TG101348-001

Inclusion Criteria	Exclusion Criteria
1. Diagnosis of MF (PMF, post-PV MF, or post-ET MF) according to the revised WHO criteria.*	1. Any chemotherapy, immunomodulatory drug therapy, immunosuppressive therapy, corticosteroids > 10 mg/day prednisone or equivalent, or growth factor treatment within 14 days (28 days in the case of darbepoetin) prior to initiation of TG101348.
2. High-risk MF (defined by Mayo PSS), or Mayo PSS intermediate-risk MF** accompanied by symptomatic splenomegaly and/or unresponsive to available therapy.	2. Major surgery or radiation therapy within 28 days prior to initiation of TG101348.
3. At least 18 years of age.	3. Concomitant treatment with agents known to inhibit or induce CYP3A4, unless approved by the sponsor.
4. Body weight \geq 50 kg.	4. Known hypersensitivity to any ingredients in the study drug formulation.
5. ECOG performance status \leq 2.	5. Active infection requiring antibiotics.
6. Within 4 days prior to initiation of TG101348: <ul style="list-style-type: none"> • ANC \geq 1×10^9/L • Platelet count \geq 50×10^9/L • Serum creatinine \leq 2.0 mg/dL • Total bilirubin \leq 2.0 mg/dL • AST or ALT \leq 3 times the ULN (unless clinically compatible with hepatic EMH) 	6. Uncontrolled CHF (NYHA Classification 3 or 4), angina, MI, CVA, coronary/peripheral artery bypass graft surgery, TIA, or pulmonary embolism within 3 months prior to initiation of study drug.
7. Life expectancy \geq 12 weeks.	7. Cardiac dysrhythmias requiring ongoing treatment, bundle branch block on ECG or QRS duration > 120 ms, or prolongation of the QTc (Fridericia) interval to > 450 ms for males or > 470 ms for females.
8. Negative serum pregnancy test result for women of childbearing potential.	8. Pregnant or lactating females.
9. Absence of active malignancy other than MF, with the exception of adequately treated basal cell carcinoma and squamous cell carcinoma of the skin.	9. Women of childbearing potential, unless surgically sterile for at least 3 months (i.e., hysterectomy), postmenopausal for at least 12 months (FSH > 30 U/mL), unless they agree to use effective, dual contraceptive methods (i.e., oral, injectable, or barrier method with male partner using a condom) while on study drug.
10. Provide written informed consent to participate.	10. Men who partner with a woman of childbearing potential, unless they agree to use effective, dual contraceptive methods (i.e., a condom, with female

Inclusion Criteria	Exclusion Criteria
11. Willing to comply with scheduled visits, treatment plans, laboratory assessments, and other study-related procedures.	partner using oral, injectable, or barrier method) while on study drug.
	11. Known HIV- or AIDS-related illness.
	12. Clinically active hepatitis B or C. 13. Any severe, acute or chronic medical, neurological, or psychiatric condition or laboratory abnormality that may increase the risk associated with study participation or study drug administration, may interfere with the informed consent process and/or with compliance with the requirements of the study, or may interfere with the interpretation of study results and, in the investigator's opinion, would make the patient inappropriate for entry into this study.

The study was conducted at six U.S. locations (UCSD Moores Cancer Center, Stanford Comprehensive Cancer Center, Dana Farber Cancer Institute, University of Michigan Comprehensive Cancer Center, Mayo Clinic, Rochester, and MD Anderson Cancer Center.

Abbreviations: AIDS = acquired immunodeficiency syndrome; ALT = alanine aminotransferase; ANC = absolute neutrophil count; AST = aspartate aminotransferase; CHF = congestive heart failure; CVA = cerebrovascular accident; ECG = electrocardiogram; ECOG = Eastern Cooperative Oncology Group; EMH = extramedullary hematopoiesis; FSH = follicle stimulating hormone; HIV = human immunodeficiency virus; MF = myelofibrosis; MI = myocardial infarction; NYHA = New York Heart Association; PSS = prognostic scoring system; TIA = transient ischemic attack; WBC = white blood cell.

*Tefferi and Vardiman. *Leukemia*. 2008 Jan;22(1):14-22

**High-risk disease requires two and intermediate-risk disease requires one of the following prognostic factors: hemoglobin < 10 g/dL, WBC count < 4 or > 30 × 10⁹/L, platelet count < 100 × 10⁹/L, absolute monocyte count ≥ 1 × 10⁹/L.

Supplemental Table 2. Mean (SD) plasma pharmacokinetic parameters following multiple daily doses of TG101348 (Cycle 1, Day 28) in MF-TG101348-001

Parameter	Dose/Day							
	30 mg (n = 3)	60 mg (n = 3)	120 mg (n = 3)	240 mg (n = 3)	360 mg (n = 3)	520 mg (n = 3)	680 mg (n = 27)	800 mg (n = 5)
C_{max} (ng/mL)	81.85 (95.630)	257.33 (121.138)	556.67 (135.500)	1796.67 (648.254)	1717.33 (1558.705)	3886.67 (3560.707)	3064.07 (1129.671)	4380.00 (1764.809)
T_{max}* (hr)	2.00 (0.5, 4.0)	1.00 (1.0, 4.0)	2.00 (0.5, 4.0)	2.00 (2.0, 2.1)	2.00 (2.0, 4.0)	4.00 (4.0, 4.0)	4.00 (0.0, 8.3)	2.25 (2.0, 4.0)
AUC_(0-t) (hr*ng/mL)	806.76 (806.973)	2426.53 (1048.264)	7645.69 (2810.740)	26193.40 (11767.460)	23879.05 (16898.162)	61749.22 (57240.295)	55111.68 (25702.038)	70840.97 (32668.886)
T_{1/2} (hr)	20.94 (7.039)	15.68 (3.464)	24.42 (8.434)	20.77 (6.238)	21.39 (7.090)	20.94 (5.006)	33.71 (33.674)	23.99 (9.674)
λ_z (1/hr)	0.0354 (0.01016)	0.0456 (0.00918)	0.0305 (0.00932)	0.0352 (0.00903)	0.0353 (0.01309)	0.0343 (0.00723)	0.0301 (0.01421)	0.0331 (0.01321)

*T_{max} is presented as median (min, max)

SD indicates standard deviation; C_{max}, peak plasma concentration; T_{max}, the time to the maximal concentration; AUC_(0-t), area under the concentration–time curve from time zero to the last measurable concentration; T_{1/2}, terminal half-life; and λ_z, the elimination rate constant.

Supplemental Table 3. Serious Adverse Events Assessed by Investigators as at Least Possibly Related to Therapy (MF-TG101348-001 and MF-TG101348-002)

Subject #	Event	Starting Dose/Dose at Event (mg/day)	Onset From Start of Dosing (days)	CTCAE Severity Grade	Action Taken With Study Drug	Outcome
105-013	Thrombocytopenia	240/360	215	4	None	Recovered/resolved
	Thrombocytopenia	240/360	247	4	Permanently discontinued	Not recovered/not resolved
	Hyperlipasemia	240/0	356	4	None	Recovered/resolved
104-015	Depression	360/520	256	3*	Permanently discontinued	Not recovered/not resolved
106-024	Nausea	800/680	87	2	Stopped temporarily	Recovered/resolved
	Vomiting	800/680	87	2	Stopped temporarily	Recovered/resolved
	Diarrhea	800/680	87	3	Stopped temporarily	Recovered/resolved
	Dehydration	800/680	87	2	Stopped temporarily	Recovered/resolved
	Tumor lysis syndrome	800/440	366	3	Stopped temporarily	Recovered/resolved
	Dehydration	800/400	474	3	None	Recovered/resolved
106-033	Pleuritic pain	680/680	8	2	Stopped temporarily	Recovered/resolved
106-045	Dehydration	680/440	170	3	Stopped temporarily	Recovered/resolved
101-047	Neutropenia	680/680	52	2	Stopped temporarily	Recovered/resolved
105-056	Cerebrovascular accident	680/680	22	4	Stopped temporarily	Recovered/resolved
	Gallbladder pain	680/520	95	3	Stopped temporarily	Recovered/resolved with sequelae
105-059	Hyperlipasemia	680/680	8	3	Stopped temporarily	Recovered/resolved
	Hyperlipasemia	680/520	28	3	Stopped temporarily	Recovered/resolved
	Cardiac arrest	680/360	42	5	Permanently discontinued	Fatal

*Subject died (suicide) approximately 12 weeks after discontinuation of study drug.

One subject presented with severe pulmonary hypertension and right heart failure during cycle 4 (at 240 mg/day); the event was considered unrelated to TG101348 per the investigator.

Supplemental Table 4. Subjects discontinuing study due to death, toxicity, withdrawal of consent, or intercurrent illness

MF-TG101348-001 Reasons for Discontinuation

Subject	Starting Dose (mg/day)	Dose at Termination (mg/day)	Duration of Treatment (days)	Reason
102-002	30	30	2	Investigator discretion – previously undiagnosed cardiac condition with long QT _c interval
106-009	120	240	109	Patient withdrew consent
101-011	240	240	100	Patient withdrew consent
102-019	520	520	42	Adverse event – neutropenia (grade 3; probably related)
102-023	800	680	70	Investigator discretion – recurrent Waldenstrom’s macroglobulinemia
104-027	800	680	77	Adverse event – thrombocytopenia (grade 4; possibly related)
106-028	800	520	44	Adverse event – thrombocytopenia (grade 4; possibly related)
104-029	680	680	44	Adverse event – endocarditis (grade 3; not related), embolic stroke (grade 3; not related)
101-032	680	680	8	Investigator discretion – Acquired factor VIII inhibitor
101-040	680	520	24	Adverse events – diarrhea (grade 3; possibly related)
103-043	680	360	68	Patient withdrew consent
103-046	680	680	26	Patient withdrew consent
102-051	680	600	108	Patient withdrew consent
102-054	680	680	75	Patient withdrew consent
105-059	680	360	27	Adverse event – cardiac arrest (grade 5; possibly related)

MF-TG101348-002 Reasons for Discontinuation

Subject	Starting Dose (mg/day)	Dose at Termination (mg/day)	Cumulative Duration of Treatment (days)	Reason
101-005	60	360	196	Investigator discretion – lack of response to treatment
106-010	120	520	185	Investigator discretion
105-013	240	360	321	Adverse event – thrombocytopenia (grade 4; possibly related)
104-015	360	520	257	Adverse event – depression (grade 3; possibly related)
106-016	360	680	527	Investigator discretion – lack of response to treatment
104-017	520	200	309	Investigator discretion – disease progression
105-021	680	520	357	Patient withdrew consent
101-047	680	320	233	Adverse event – elevated creatinine (grade 2; possibly related)

Supplemental Table 5. Change in weight during study treatment

Weight (kg)	Baseline		6 Cycles		12 Cycles	
	Overall (n=57)	MTD Cohort (n=38)	Overall (n=43)	MTD Cohort (n=28)	Overall (n=36)	MTD Cohort (n=26)
Median (range)	75.6 (48.2-105.2)	77.7 (48.2-96.1)	76.9 (51.4-105.8)	77.7 (51.4-97.6)	76.1 (49.8-106.8)	76.5 (49.8-99.5)
Change from baseline Median (range)	n/a	n/a	0.4 (-11.7-8.9)	0.6 (-9.2-8.9)	0.7 (-10.7-13.7)	0.35 (-10.7-13.7)

kg indicates kilograms; n, number, and MTD, maximum tolerated dose