Supplementary Online Content

Petrylak DP, Powles T, Bellmunt J, et al. Atezolizumab (MPDL3280A) monotherapy in metastatic urothelial cancer: long-term outcomes from a phase 1 study. *JAMA Oncol*. Published online February 8, 2018. doi:10.1001/jamaoncol.2017.5440

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Baseline Demographics and Clinical Characteristics of Patients With mUC (N = 95)

Characteristic	No. of Patients (%)
Age, years	
Median	66
Range	36-89
≥ 65 years	56 (59)
Sex	
Male	72 (76)
ECOG PS	
0	37 (39)
1	58 (61)
Primary tumor site: bladder	76 (80)
Metastatic sites	
Visceral	74 (78)
Liver	35 (37)
Hemoglobin < 10 g/dL	18 (19)
PD-L1 IC score[a]	
IC0	16 (17)
IC1	28 (30)
IC2	37 (39)
IC3	13 (14)
Prior cystectomy or nephroureterectomy	58 (61)
Prior BCG	27 (28)
≤ 3 months from prior chemotherapy[b]	39 (42)
Current line of therapy	
1	9 (9)
2	41 (43)
≥ 3	45 (47)
Prior platinum-based chemotherapy for metastatic disease	68 (72)

Abbreviations: BCG, bacille Calmette-Guérin; ECOG, Eastern Cooperative Oncology Group; IC, tumor-infiltrating immune cells; PD-L1, programmed death-ligand 1; PS, performance status.

Data cutoff: December 31, 2016; median follow-up, 38 months.

[a] Based on PD-L1 scoring at baseline. Includes mixed population of patients enrolled based on PD-L1 selection and nonselected all-comers. One patient had unknown PD-L1 status.

[b] n = 93.

eTable 2. Summary of AEs in Patients < 65 Years and ≥ 65 Years

	Age	
	< 65 years (n = 39)	**≥ 65 years (n = 56)**
All AEs, n (%)	39 (100)	54 (96)
SAEs	15 (39)	34 (61)
TRAEs	25 (64)	39 (70)
AEs leading to treatment withdrawal, n (%)	0	4 (7)
SAEs leading to treatment withdrawal	0	3 (5)
TRAEs leading to treatment withdrawal	0	1 (2)
AEs leading to dose modification (or interruption), n (%)	12 (31)	13 (23)
SAEs leading to dose modification (or interruption)	9 (23)	9 (16)
TRAEs leading to dose modification (or interruption)	2 (5)	3 (5)
AEs leading to death	1 (3)[a]	0

Abbreviations: AE, adverse event; SAE, serious adverse event; TRAE, treatment-related adverse event.

Data cutoff: December 31, 2016; median follow-up, 38 months.

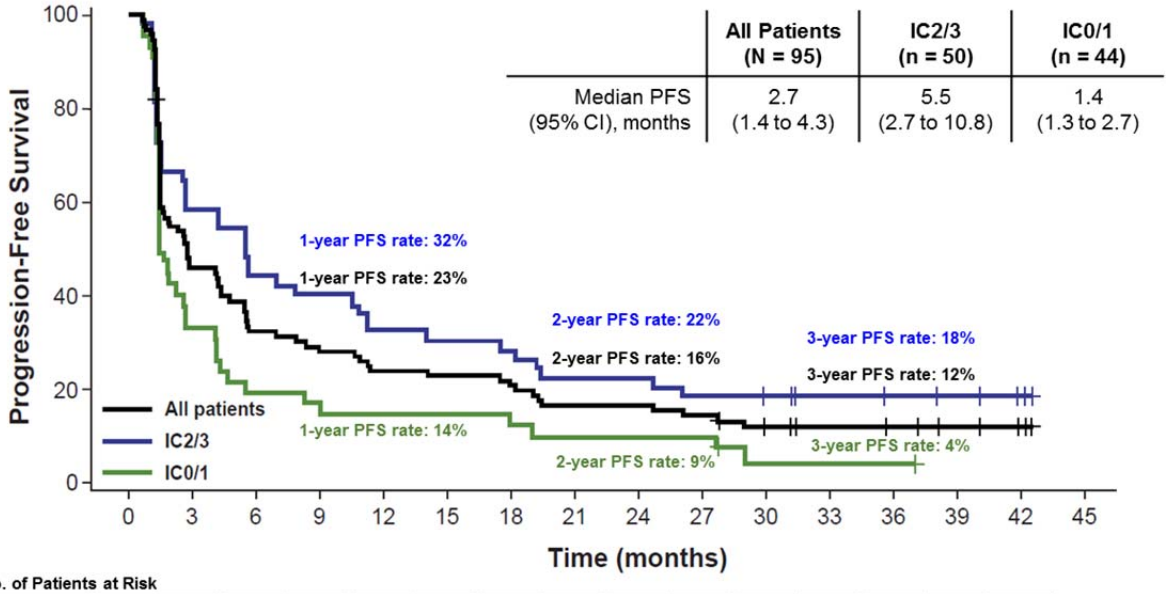
[a] One patient had an overdose resulting in death.

eTable 3. Treatment-related AEs Occurring Beyond 1 Year Following Initiation of Atezolizumab

Treatment-Related AE	No. of Events (%) (n = 37)[a]	
	Any grade, n (%)	Grades 3-4, n (%)
Any AE	15 (41)	2 (5)
Pruritus	3 (8)	0
Asthenia	2 (5)	0
Rash	2 (5)	0
Diarrhea	2 (5)	0
Arthralgia	2 (5)	0
Hypothyroidism	2 (5)	0
Dry skin	2 (5)	0
Myalgia	2 (5)	0
Raynaud's phenomenon	2 (5)	0
Rash maculo-papular	1 (3)	1 (3)
Neutropenia	1 (3)	1 (3)
Fatigue	1 (3)	0
Nausea	1 (3)	0
Pyrexia	1 (3)	0
ALT increased	1 (3)	0
AST increased	1 (3)	0
Influenza-like illness	1 (3)	0
Cough	1 (3)	0
Blood phosphorus decreased	1 (3)	0
Eosinophilia	1 (3)	0
Erythema	1 (3)	0
Lichen planus	1 (3)	0
Dyspnea	1 (3)	0
Epistaxis	1 (3)	0
Pneumonitis	1 (3)	0
Rhinitis	1 (3)	0
Urinary tract infection	1 (3)	0
Hypercalcemia	1 (3)	0
Seborrheic keratosis	1 (3)	0
Headache	1 (3)	0

[a] Includes all treatment-related adverse events in patients with ≥ 1 year of follow-up from first dose of atezolizumab (n = 37).

eFigure. Progression-Free Survival



	All Patients (N = 95)	IC2/3 (n = 50)	IC0/1 (n = 44)
Median PFS (95% CI), months	2.7 (1.4 to 4.3)	5.5 (2.7 to 10.8)	1.4 (1.3 to 2.7)

No. of Patients at Risk

All patients	95	43	30	26	22	21	19	15	15	13	9	7	6	4	2
IC2/3	50	29	22	20	16	15	14	11	11	9	8	6	5	4	2
IC0/1	44	14	8	6	6	6	5	4	4	4	1	1	1		

Kaplan-Meier estimates of progression-free survival (PFS) in all patients and based on programmed death-ligand 1 (PD-L1) status on tumor-infiltrating immune cells (IC). Censor marks are indicated by a plus (+) symbol. One patient with unknown PD-L1 IC IHC status is included in the all-patient curve.