

Supplementary Online Content

Gridelli C, de Castro Carpeno J, Dingemans A-MC, et al. Bevacizumab plus standard-of-care treatment beyond disease progression in patients with advanced non–small cell lung cancer: the AvaALL randomized clinical trial. *JAMA Oncol*. Published online August 30, 2018. doi:10.1001/jamaoncol.2018.3486

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

eTable 1. Baseline Characteristics and Disease History of the ITT Population

| | Bevacizumab Plus SOC (n = 245) | SOC Alone (n = 240) |
|--|-----------------------------------|------------------------|
| Median age, years (range) | 63.0 (26–84) | 63.0 (35–82) |
| Gender, no. (%) | | |
| Male | 155 (63.3) | 138 (57.5) |
| Female | 90 (36.7) | 102 (42.5) |
| Ethnicity, no. (%) | | |
| Asian | 29 (11.8) | 25 (10.4) |
| Non-Asian | 216 (88.2) | 215 (89.6) |
| Smoking status, no. (%) | | |
| Current | 89 (36.3) | 88 (36.7) |
| Former | 120 (49.0) | 117 (48.8) |
| Never | 36 (14.7) | 35 (14.6) |
| ECOG PS at baseline, no. (%) | | |
| 0 | 87 (35.5) | 94 (39.2) |
| 1 | 142 (58.0) | 138 (57.5) |
| 2 | 11 (4.5) | 3 (1.3) |
| Missing | 5 (2.0) | 5 (2.1) |
| Disease stage at initial diagnosis, no. (%) | | |
| 1 | 4 (1.6) | 5 (2.1) |
| 2 | 7 (2.9) | 9 (3.8) |
| 3A | 16 (6.5) | 14 (5.8) |
| 3B | 14 (5.7) | 7 (2.9) |

| | | |
|---|-------------|-------------|
| 4 | 204 (83.3) | 205 (85.4) |
| Median time since initial diagnosis, months (range) | 10.5 (3–88) | 10.3 (3–78) |
| Disease stage at start of first-line therapy, no. (%) | | |
| 3A | 8 (3.3) | 4 (1.7) |
| 3B | 12 (4.9) | 7 (2.9) |
| 4 | 225 (91.8) | 229 (95.4) |
| Median time from start of first-line therapy, months (range) | 8.6 (1–28) | 8.1 (3–44) |
| Current stage of disease, no. (%) | | |
| 3A | 3 (1.2) | 0 |
| 3B | 14 (5.7) | 5 (2.1) |
| 4 | 228 (93.1) | 235 (97.9) |
| Histology, no. (%) | | |
| Adenocarcinoma | 227 (92.7) | 226 (94.2) |
| Large cell carcinoma | 6 (2.4) | 6 (2.5) |
| Bronchioloalveolar carcinoma/adenocarcinoma in situ | 3 (1.2) | 2 (0.8) |
| Other | 9 (3.7) | 6 (2.5) |
| Centrally located tumor at start of first-line therapy, no. (%) | | |
| Yes | 77 (31.4) | 90 (37.5) |
| No | 168 (68.6) | 150 (62.5) |

| | | |
|---|------------|------------|
| Cavitated tumor at start of first-line therapy, no. (%) | | |
| Yes | 19 (7.8) | 12 (5.0) |
| No | 225 (91.8) | 228 (95.0) |
| Not done | 1 (0.4) | 0 |
| <i>EGFR</i> status assessment, no. (%) | | |
| Yes | 165 (67.3) | 168 (70.0) |
| Positive (<i>EGFR</i> activating mutation) | 1 (0.4) | 1 (0.4) |
| Negative (<i>EGFR</i> wild type) | 160 (65.3) | 161 (67.1) |
| Not evaluable | 4 (1.6) | 6 (2.5) |
| No | 80 (32.7) | 72 (30.0) |

Abbreviations: ECOG PS, Eastern Cooperative Oncology Group performance status; *EGFR*, epidermal growth factor receptor; ITT, intent to treat; SD, standard deviation; SOC, standard of care.

eTable 2. Patients Exposed to Bevacizumab in Both Treatment Arms
(Safety Population)

| | Bevacizumab Plus SOC (n = 240) | SOC Alone (n = 235) |
|---|--------------------------------------|------------------------|
| Mean number of cycles of bevacizumab, no. (SD) | 11.9 (9.8) | 1.0 (0) |
| Median treatment duration with bevacizumab, months (range) | 6.4 (0.03–40.0) | 0.03 (0.03–0.03) |
| Starting daily dose of bevacizumab, no. (%) | | |
| 7.5 mg/kg | 116 (48.3) | 0 |
| 15 mg/kg | 124 (51.7) | 0 |
| Mean cumulative dose of bevacizumab, mg (SD) | 8,826.2 (7,899.2) | 455.3 (395.6) |
| Patients with at least one bevacizumab treatment interruption, no. (%) | 17 (7.1) | 0 |

Abbreviations: SD, standard deviation; SOC, standard of care.

eTable 3. Grade 3 or 4 Adverse Events (Preferred Term Occurring in ≥10% of Patients With Grade 1 or 2 Events in Any Treatment Arm; Safety Population)

| System Organ Class and Preferred Term, no. (%) | Bevacizumab Plus SOC (n = 243) | SOC Alone (n = 232) |
|--|--------------------------------|---------------------|
| Any AE | 186 (76.5) | 140 (60.3) |
| General disorders and administrative site conditions | | |
| Fatigue | 47 (19.3) | 32 (13.8) |
| Asthenia | 12 (4.9) | 14 (6.0) |
| Asthenia | 16 (6.6) | 12 (5.2) |
| Gastrointestinal disorders | | |
| Diarrhea | 33 (13.6) | 20 (8.6) |
| Nausea | 11 (4.5) | 6 (2.6) |
| Constipation | 6 (2.5) | 4 (1.7) |
| Vomiting | 0 | 1 (0.4) |
| Vomiting | 5 (2.1) | 3 (1.3) |
| Respiratory, thoracic, and mediastinal disorders | | |
| Dyspnea | 36 (14.8) | 33 (14.2) |
| Epistaxis | 10 (4.1) | 13 (5.6) |
| Epistaxis | 0 | 1 (0.4) |
| Blood and lymphatic system disorders | | |
| Anemia | 74 (30.5) | 50 (21.6) |
| Anemia | 18 (7.4) | 20 (8.6) |
| Skin and subcutaneous tissue disorders | | |
| Alopecia | 17 (7.0) | 6 (2.6) |
| Alopecia | 0 | 0 |
| Metabolism and nutritional disorders | | |
| Decreased appetite | 28 (11.5) | 14 (6.0) |
| Decreased appetite | 12 (4.9) | 3 (1.3) |

| | | |
|-----------------------------|---------|---------|
| Renal and urinary disorders | 7 (2.9) | 2 (0.9) |
| Proteinuria | 3 (1.2) | 1 (0.4) |

Abbreviations: AE, adverse event; SOC, standard of care.

eTable 4. Treatment-Emergent Grade 5 Adverse Events by Body System and Preferred Term (Safety Population)

| System Organ Class and Preferred Term | Bevacizumab Plus SOC (n = 243) | SOC Alone (n = 232) |
|--|--------------------------------|---------------------|
| Any treatment-emergent grade 5 AE, no. (%) | 16 (6.6) | 12 (5.2) |
| General disorders and administrative site conditions | 4 (1.6) | 2 (0.9) |
| Fatigue | 1 (0.4) | 0 |
| Death | 1 (0.4) | 2 (0.9) |
| Decreased PS | 1 (0.4) | 0 |
| Sudden death | 1 (0.4) | 0 |
| Gastrointestinal disorders | 2 (0.8) | 0 |
| Large intestine perforation | 1 (0.4) | 0 |
| Intestinal perforation | 1 (0.4) | 0 |
| Respiratory, thoracic, and mediastinal disorders | 2 (0.8) | 1 (0.4) |
| Respiratory failure | 1 (0.4) | 0 |
| Aspiration | 1 (0.4) | 0 |
| Pulmonary embolism | 0 | 1 (0.4) |
| Infections and infestations | 5 (2.1) | 9 (3.9) |
| Pneumonia | 2 (0.8) | 8 (3.4) |
| Lung infection | 1 (0.4) | 1 (0.4) |
| Respiratory tract infection | 1 (0.4) | 0 |
| Bronchopulmonary aspergillosis | 1 (0.4) | 0 |

| | | |
|-----------------------------|---------|---|
| Nervous system disorders | 1 (0.4) | 0 |
| Cerebral infarction | 1 (0.4) | 0 |
| Renal and urinary disorders | 1 (0.4) | 0 |
| Nephrotic syndrome | 1 (0.4) | 0 |
| Cardiac disorders | 1 (0.4) | 0 |
| Myocardial ischemia | 1 (0.4) | 0 |

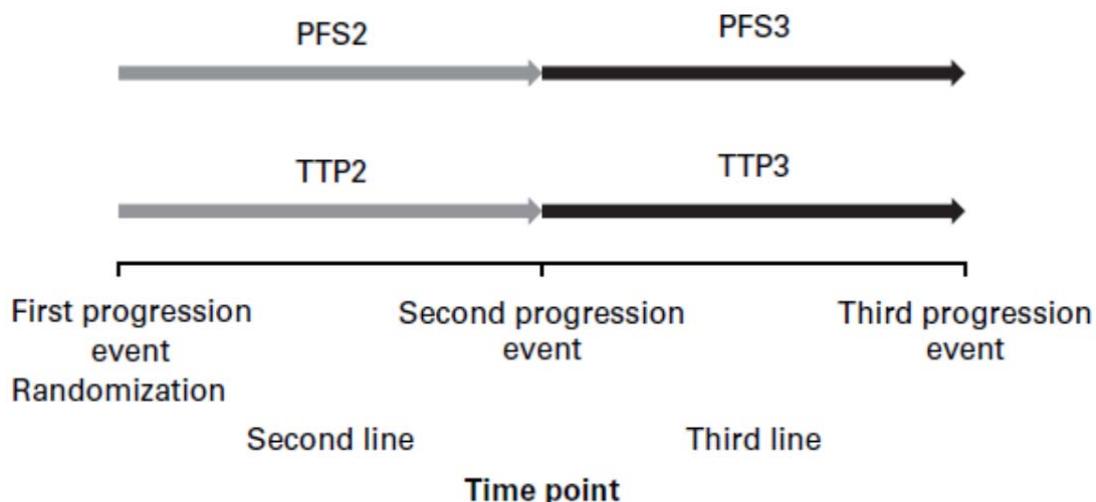
Abbreviations: AE, adverse event; PS, performance status; SOC, standard of care.

eTable 5. Cause of Death

| | Bevacizumab Plus SOC (n = 245) | SOC Alone (n = 240) |
|-----------------------------------|--------------------------------------|------------------------|
| Patients who died, no. (%) | 194 (79.2) | 193 (80.4) |
| Primary reason for death, no. (%) | | |
| Disease progression | 173 (70.6) | 172 (71.7) |
| AE | 16 (6.5) | 10 (4.2) |
| Other | 5 (2.0) | 11 (4.6) |

Abbreviations: AE, adverse event; SOC, standard of care.

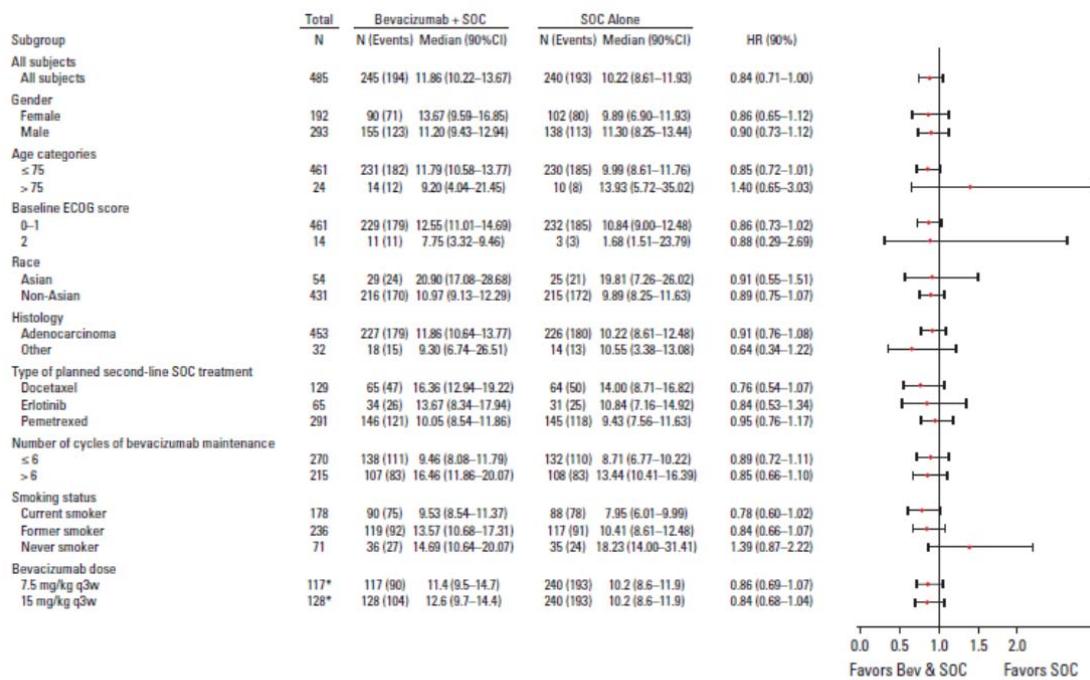
eFigure 1. Timeline of Progressive Disease and Study Endpoints



PFS was defined as time from randomization until progression or death; TTP was defined as time from randomization until objective tumor progression.

Abbreviations: PFS, progression-free survival; PFS2, time from randomization at first to second progression; PFS3, time from second to third progression; TTP, time to progression; TTP2, TTP from randomization at first to second progression; TTP3, TTP from second to third progression.

eFigure 2. Forest Plot of OS by Subgroups (Hazard Ratio Not Stratified)

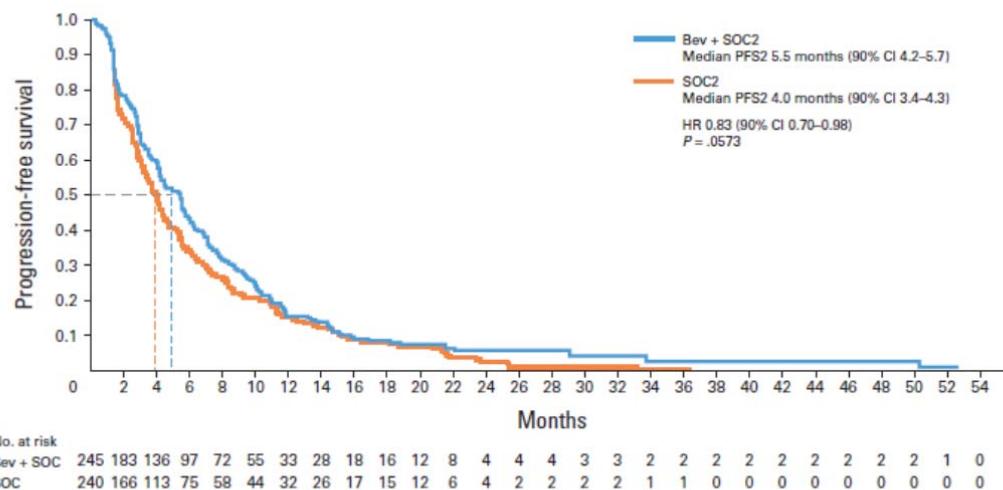


*Includes patients randomized to bevacizumab, therefore not summing up to the Total N.

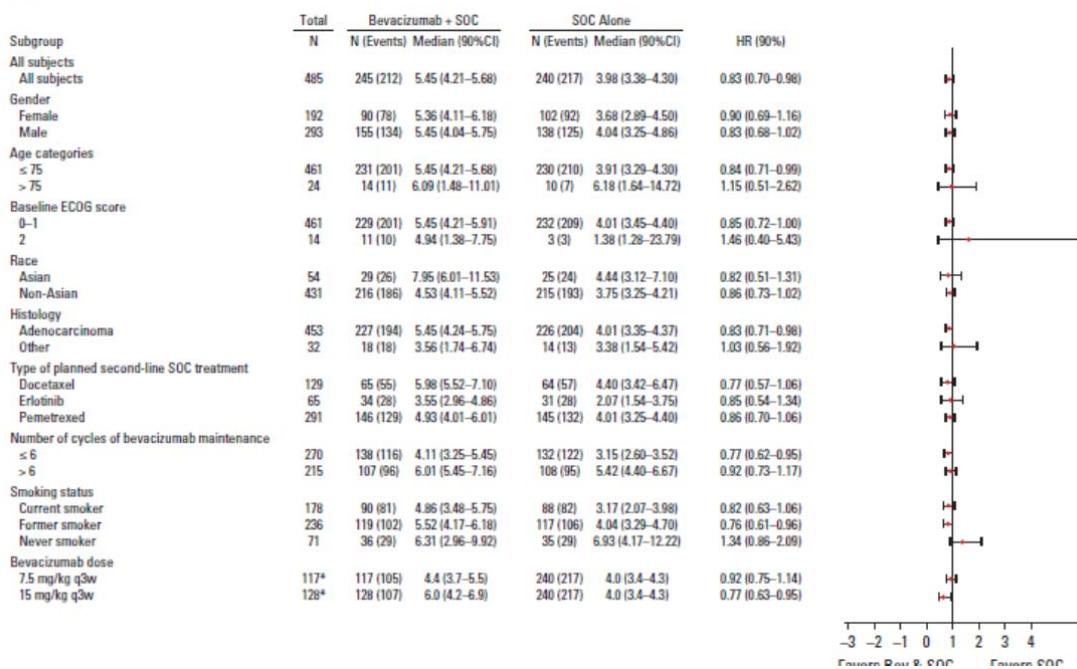
Abbreviations: CI, confidence interval; ECOG, Eastern Cooperative Oncology Group; HR, hazard ratio; q3w, every 3 weeks; SOC, standard of care.

eFigure 3. PFS: (A) Kaplan-Meier Plot of PFS2 in the ITT Population; (B) Forest Plot of PFS2 by Subgroups

A



B



*Includes patients randomized to bevacizumab, therefore not summing up to the Total N.

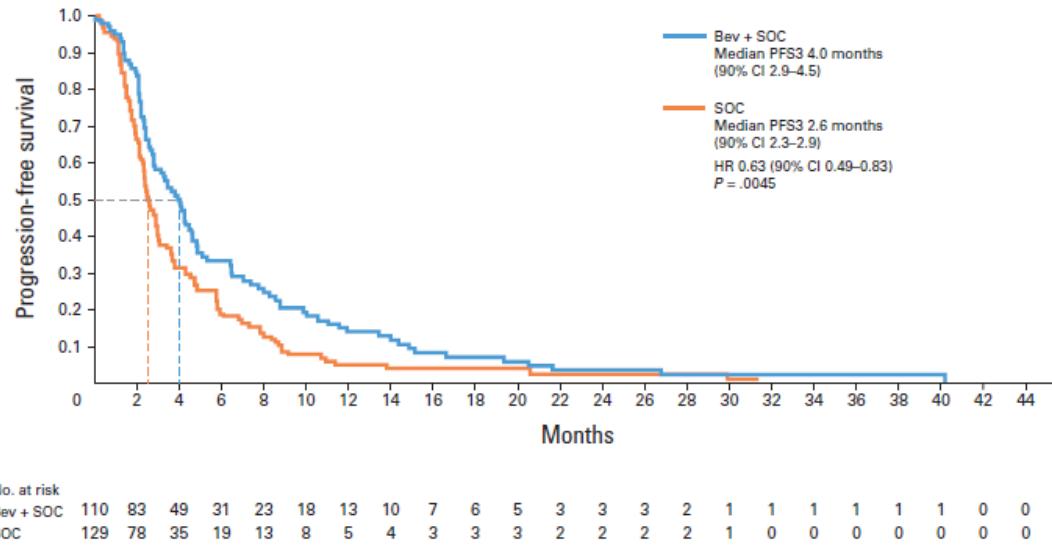
Abbreviations: Bev, bevacizumab; CI, confidence interval; ECOG, Eastern

Cooperative Oncology Group; HR, hazard ratio; ITT, intent to treat; PFS2,

progression-free survival from first to second progression; q3w, every 3 weeks; SOC, standard of care.

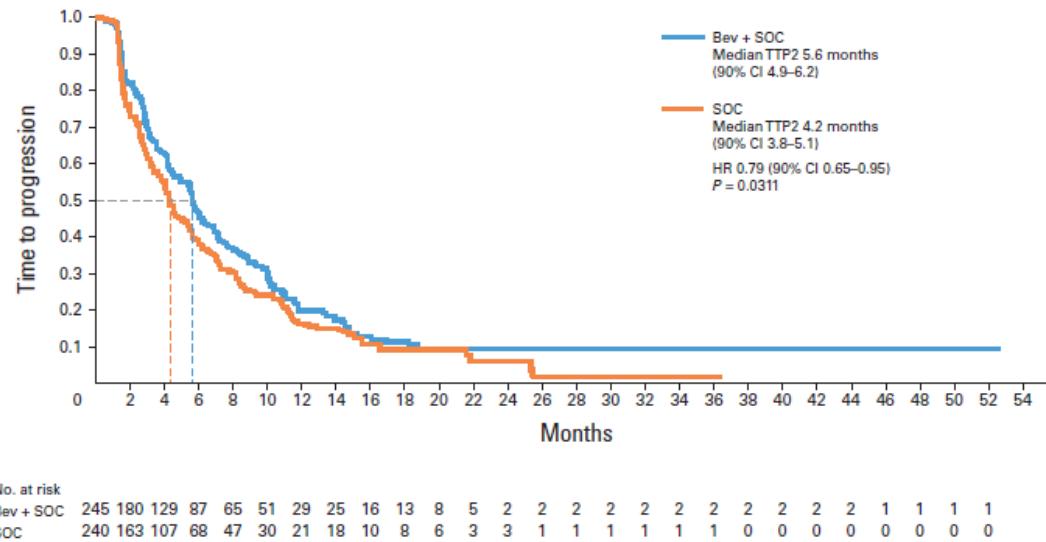
HR for the ITT population is stratified; HR for the subgroups is not stratified.

eFigure 4. PFS3 in the ITT Population



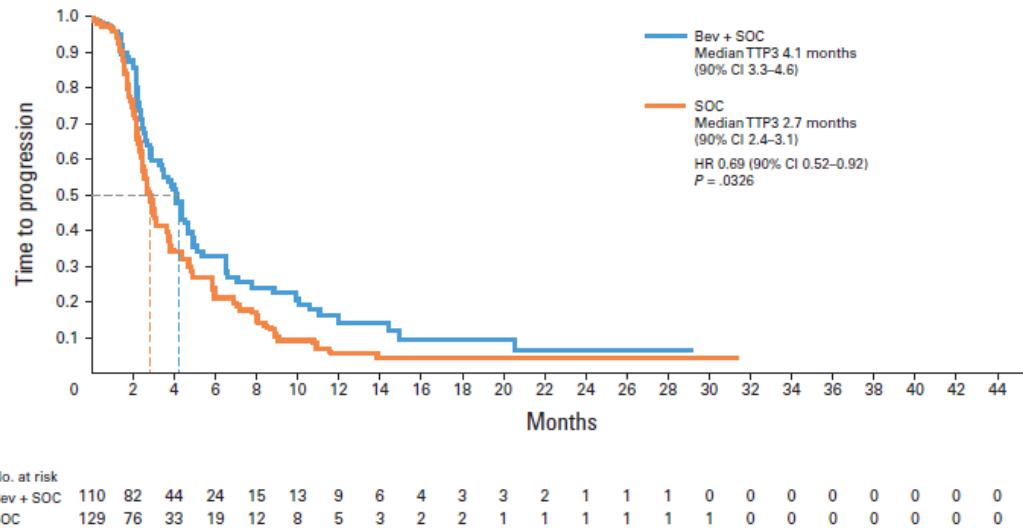
Abbreviations: Bev, bevacizumab; CI, confidence interval; HR, hazard ratio; ITT, intent to treat; PFS3, progression-free survival from second to third progression; SOC, standard of care.

eFigure 5. TTP2 in the ITT Population



Abbreviations: Bev, bevacizumab; CI, confidence interval; HR, hazard ratio; ITT, intent to treat; SOC, standard of care; TTP2, time to progression from randomization at first to second progression.

eFigure 6. TTP3 in the ITT Population



Abbreviations: Bev, bevacizumab; CI, confidence interval; HR, hazard ratio; ITT, intent to treat; SOC, standard of care; TTP3, time to progression from second to third progression.