Appendix 1. Cohort 1 Study Sites, Principal Investigators, and Number of Patients per Site

Study Site*	Principal Investigator	Number of Patients Per Site
Comprehensive Clinical Trials, LLC, West Palm Beach, FL 33409, United States	Ackerman, Ronald	11
Northeast Clinical Research of San Antonio, Schertz, TX 78154, United States	Akright, Bruce	1
Clinical Trials Management, LLC, Metairie, LA 70006, United States	Alexander, Samuel	3
Visions Clinical Research, Boynton Beach, FL 33472, United States	Aqua, Keith	6
Eastern Virginia Medical School, 6Norfolk, VA 23507, United States	Archer, David	2
Omega Research Consultants, LLC, Debary, FL 32713, United States	Ayesu, Kwabena	2
Wake Research Associates, LLC, Raleigh, NC 27612, United States	Bhiwandiwala, Pouru	16
Mount Vernon Clinical Research, LLC, Sandy Springs, GA 30328, United States	Blank, Stephen	8
Springfield Clinic, Dept Clinical Research, Springfield, IL 62703, United States	Bradley, E. Michael	1
Gyn-Care, Inc., Atlanta, GA 30308, United States	Brown, Eric	14
UT Southwestern Medical Center, Dallas, TX 75390-9032, United States	Carr, Bruce	2
Healthcare Clinical Data, Inc., North Miami, FL 33161, United States	Chavoustie, Steven	7
Axis Clinical Trials, Los Angeles, CA 90017, United States	Clarke, Patrick	8
Gynecology Reproductive, Endocrinology and Fertility Inst, Santurce, 00909, Puerto Rico	Cruz-Burgos, Rosa	2
The South Bend Clinic Granger, Granger, IN 46530, United States	Durbin, Edward	1
Miami Research Associates, South Miami, FL 33143, United States	Feldman, Robert	9
Womens Clinical Research, Encinitas, CA 92024, United States	Fenton, Douglas	2
University Hospitals of Cleveland, MacDonald Womens Hospital, Cleveland, OH 44106, United States	Gangestad, Angelina	2
Dr. Phyllis Gee, Frisco, TX, risco, TX 75035, United States	Gee, Phyllis	2

Carr BR, Stewart EA, Archer DF, Al-Hendy A, Bradley L, Watts NB, et al. Elagolix alone or with add-back therapy in women with heavy menstrual bleeding and uterine leiomyomas: a randomized controlled trial. Obstet Gynecol 2018; 132.
The authors provided this information as a supplement to their article.

Masters of Clinical Research, Inc., Augusta, GA 30909, United States	Grossman, Peter	4
North Spokane Women's Health, Spokane, WA 99207, United States	Hardy, Ronald	1
Axis Clinical Trials, Los Angeles, CA 90036, United States	Hazan, Lydie	13
Clinical Trials of Texas, Inc., San Antonio, TX 78229, United States	Hedges, Parke	3
Great Lakes Research Group, Inc., Bay City, MI 48706, United States	Heilbronn, Jr., Duane	2
The Woman's Hospital of Texas, Clinical Research Center, Clinical Research Center, Houston, TX 77054, United States	Hurtado, Sandra	5
Research Across America, Dallas, TX 75234, United States	Kapusta, Ronald	1
Magnolia Ob/Gyn Research Center, Myrtle Beach, SC 29572, United States	Kirkpatrick, Helena	1
Precision Research Organization, LLC., Miami Lakes, FL 33016, United States	Klein, Robert	7
Medical Center for Clinical Research, San Diego, CA 92108, United States	Koltun, William	3
Altus Research, Inc, Lake Worth, FL 33461, United States	Lederman, Samuel	8
Carolina Women's Research and, Wellness Center, Durham, NC 27713, United States	Lukes, Andrea	2
Mobile, Ob-Gyn, P.C., Mobile, AL 36608, United States	Madonia, Phillip	2
Eastern Carolina Women's Center, New Bern, NC 28562, United States	Michelson, Jeffrey	2
Instituto Chileno de Medicina, Reproductiva (ICMER), Santiago, Chile	Miranda, Maria	4
Vista Clinical Research, Columbia, SC 29201, United States	Moore, John	3
Tidewater Physicians for Women, Norfolk, VA 23502, United States	Morgan, Jr., Franklin	3
SUNY Downstate Medical Ctr, Brooklyn, NY 11203, United States	Muneyyirci-Delale, Ozgul	4
St. Johns Center for Clinical Research, Ponte Vedra Beach, FL 32081, United States	Myers, Richard	2
University of Toledo-HSC, Toledo, OH 43614, United States	Neuhoff, Ronica	1
Futura Research, Inc., Norwalk, CA 90650, United States	Nieto, Sandra	1
KO Clinical Research, LLC, Fort Lauderdale , FL 33316, United States	Osman, Khadra	6
Lyndhurst Clinical Research, Winston-Salem, NC 27103, United States	Parker, Jr., Robert	3
Women Under Study, New Orleans , LA 70115, United States	Perez, Brandon	3

Advances in Health, Inc., Houston, TX 77030, United States	Poindexter, Alfred	7
South Florida Clinical Research, Institute, LLC, Margate, FL 33063, United States	Reynolds, Ivonne	3
Clinica Davila, Departamento de Ginecologia, Santiago, Chile	Roa, Eutimio	1
Dr. Henry Rodriguez Ginorio, San Juan, 00917, Puerto Rico	Rodriguez Ginorio, Henry	6
MacArthur OB/GYN, Irving, TX 75062, United States	Sakovich, Stephen	3
Complete Healthcare for Women, Columbus, OH 43231, United States	Samuel, Milroy	4
Billings Clinic Research Center, Billings, MT 59101, United States	Severa, Larry	1
Memphis Research Associates, LLC, Memphis, TN 59101, United States	Simha, Samuel	9
James A. Simon, MD, PC, Washington, DC 20036, United States	Simon, James	5
DCT-Genesis HCWC, LLC, dba Discovery Clinical Trials, Dallas, TX 75231, United States	Smith, Liesl	3
Grossmont Center for Clinical, Research, La Mesa, CA 91942, United States	Smith-Nguyen, Gioi	4
Center for Womens Research, Chicago, IL 60612, United States	Soltes, Barbara	8
Alabama Clinical Therapeutics, LLC, Birmingham, AL 35235, United States	Summers, William	2
Clinical Trials Management, LLC, Mandeville, LA 70471, United States	Tydings, Albert	3
Premier Urology Associates, LLC dba, AdvanceMed Research, Lawrenceville, NJ 08648, United States	Ung, Kenneth	2
Instituto de Investigaciones Materno, Infantil (IDIMI), Hospital Clinic San Borja Arriaran, Santiago, Chile	Villarroel, Claudio	2
Clinical Research of West Florida, Inc., Clearwater, FL 33765, United States	Walter, Thomas	3
Atlanta Womens Research Institute, Atlanta, GA 30342, United States	Zane, Richard	7

*All listed sites had patients randomized in Cohort 1.

Appendix 2. Cohort 2 Study Sites, Principal Investigators, and Number of Patients per Site

Study Site*	Principal Investigator	Number of Patients Per Site
Comprehensive Clinical Trials, LLC, West Palm Beach, FL 33409, United States	Ackerman, Ronald	8
Gyn-Care, Inc., Paramount Research Solutions, Atlanta, GA 30363, United States	Adams, Anthony	9
Northeast Clinical Research of San, Antonio, Schertz, TX 78154, United States	Akright, Bruce	1
University Hospitals of Leicester NHS, Trust HQ, Leicester, United Kingdom	Al-Azzawi, Farook	2
Clinical Trials Management, LLC, Metairie, LA 70006, United States	Alexander, Samuel	8
Visions Clinical Research, Boynton Beach, FL 33472, United States	Aqua, Keith	5
Eastern Virginia Medical School, Norfolk, VA 23507, United States	Archer, David	2
Omega Research Consultants, LLC, Debary, FL 32713, United States	Ayesu, Kwabena	5
Wake Research Associates, LLC, Raleigh, NC 27612, United States	Bhiwandiwala, Pouru	6
Clinique OVO - OVO R and D, Montreal, QC H4P 2S4, Canada	Bissonnette, Francois	1
Mount Vernon Clinical Research, LLC, Sandy Springs, GA 30328, United States	Blank, Stephen	7
Springfield Clinic, Dept Clinical Research, Springfield, IL 62703, United States	Bradley, E. Michael	1
Gyn-Care, Inc., Atlanta, GA 30308, United States	Brown, Eric	5
UT Southwestern Medical Center, Dallas, TX 75390-9032, United States	Carr, Bruce	1
Chattanooga GYN Oncology LLC, Chattanooga, TN 37403, United States	Chamberlain, Donald	1
Healthcare Clinical Data, Inc., North Miami, FL 33161, United States	Chavoustie, Steven	5
Axis Clinical Trials, Los Angeles, CA 90017, United States	Clarke, Patrick	6
Univ Hosp Bristol NHS Foundation, Trust, St. Michaels University Hospital, Bristol, BS2 8EG, United Kingdom	Crouch, Naomi	1
Gynecology Reproductive, Endocrinology and Fertility Inst, Santurce, 00909, Puerto Rico	Cruz-Burgos, Rosa	1

Carr BR, Stewart EA, Archer DF, Al-Hendy A, Bradley L, Watts NB, et al. Elagolix alone or with add-back therapy in women with heavy menstrual bleeding and uterine leiomyomas: a randomized controlled trial. Obstet Gynecol 2018; 132.
The authors provided this information as a supplement to their article.

Drexel University College of Medicine, Philadelphia, PA 19102, United States	Della Badia, Carl	4
Bluegrass Clinical Research, Inc., Louisville, KY 40291, United States	Donovan, Arthur	2
University Hospitals of Cleveland, MacDonald Womens Hospital, Cleveland, OH 44106, United States	Gangestad, Angelina	3
Dr. Phyllis Gee, Frisco, TX 75035, United States	Gee, Phyllis	4
Greenville Pharmaceutical Research, Greenville, SC 29615, United States	Godwin, David	1
Masters of Clinical Research, Inc., Augusta, GA 30909, United States	Grossman, Peter	2
Liverpool Womens Hospital NHS, Foundation Trust, Liverpool, L8 7SS, United Kingdom	Hapangama, Dharani	1
North Spokane Women's Health, Spokane, WA 99207, United States	Hardy, Ronald	1
Axis Clinical Trials, Los Angeles, CA 90036, United States	Hazan, Lydie	2
Clinical Trials of Texas, Inc., San Antonio, TX 78229, United States	Hedges, Parke	3
Great Lakes Research Group, Inc., Bay City, MI 48706, United States	Heilbronn, Jr., Duane	1
The Woman's Hospital of Texas, Clinical Research Center, Clinical Research Center, Houston, TX 77054, United States	Hurtado, Sandra	11
Research Across America, Dallas, TX 75234, United States	Kapusta, Ronald	2
Precision Research Organization, LLC., Miami Lakes, FL 33016, United States	Klein, Robert	2
Medical Center for Clinical Research, San Diego, CA 92108, United States	Koltun, William	2
National Institute of Clinical Research, Los Angeles, CA 90057, United States	Lang, L. Khadijah	9
Altus Research, Inc, Lake Worth, FL 33461, United States	Lederman, Samuel	2
The Corvallis Clinic, PC, Corvallis, OR 97330, United States	Lee, Amey	1
Meridien Research, St. Petersburg, FL 33709, United States	Lefebvre, Gigi	2
Carolina Women's Research and, Wellness Center, Durham, NC 27713, United States	Lukes, Andrea	3
Mobile, Ob-Gyn, P.C., Mobile, AL 36608, United States	Madonia, Phillip	2
Lynn Institute of the Ozarks, Little Rock, AR 72205, United States	May, Caroline	2

Carr BR, Stewart EA, Archer DF, Al-Hendy A, Bradley L, Watts NB, et al. Elagolix alone or with add-back therapy in women with heavy menstrual bleeding and uterine leiomyomas: a randomized controlled trial. Obstet Gynecol 2018; 132.
The authors provided this information as a supplement to their article.

Instituto Chileno de Medicina, Reproductiva (ICMER), Santiago, Chile	Miranda, Maria	6
Vista Clinical Research, Columbia, SC 29201, United States	Moore, John	7
Tidewater Physicians for Women, Norfolk, VA 23502, United States	Morgan, Jr., Franklin	3
SUNY Downstate Medical Ctr, Brooklyn, NY 11203, United States	Muneyyirci-Delale, Ozgul	16
St. Johns Center for Clinical Research, Ponte Vedra Beach, FL 32081, United States	Myers, Richard	2
University of Toledo-HSC, Toledo, OH 43614, United States	Neuhoff, Ronica	1
Praetorian Pharmaceutical Research, LLC, SMarrero, LA 70072, United States	Nicholson-Uhl, C. Scott	1
Futura Research, Inc., Norwalk, CA 90650, United States	Nieto, Sandra	5
KO Clinical Research, LLC, Fort Lauderdale , FL 33316, United States	Osman, Khadra	3
Lyndhurst Clinical Research, Winston-Salem, NC 27103, United States	Parker, Jr., Robert	9
Women Under Study, New Orleans , LA 70115, United States	Perez, Brandon	2
Advanced Research Institute, Inc., New Port Richey, FL 34653, United States	Perez, Hugo	2
The Jackson Clinic, PA, Jackson, TN 38305, United States	Pierce, William	2
Advances in Health, Inc., Houston, TX 77030, United States	Poindexter, Alfred	12
Royal Preston Hospital, Lanchashire Teaching Hospitals NHS, Foundation Trust, Fulwood, Preston, PR2 9HT, United Kingdom	Prashar, Sanjeev	1
University Hospital Coventry and, Warwickshire NHS Trust, Coventry, CV2 2DX, United Kingdom	Quenby, Siobhan	1
South Florida Clinical Research, Institute, LLC, Margate, FL 33063, United States	Reynolds, Ivonne	6
Collaborative NeuroScience Network,, Inc., Long Beach, CA 90806, United States	Reynolds, Steven	1
Clinica Davila, Departamento de Ginecologia, Recoleta, Santiago,, Chile	Roa, Eutimio	2
Dr. Henry Rodriguez Ginorio, San, Juan, PR, San Juan, 00917, Puerto Rico	Rodriguez Ginorio, Henry	1
Centro de Investigaciones Clinicas, Vina del Mar, Jardin del Mar, Renaca - Vina del Mar, Chile	Rojas, Sergio	1

University of Puerto Rico, School of, Medicine, Univ District Hospital, Medical, Sciences Campus, Rio Piedras, 00935, Puerto Rico	Romaguera-Agrait, Josefina	2
MacArthur OB/GYN, Irving, TX 75062, United States	Sakovich, Stephen	4
Minimal Invasive Gynecologic Surgery, and Endometriosis Cente, San Juan, 00909, Puerto Rico	Salgado-Morales, Juan	1
Complete Healthcare for Women, Columbus, OH 43231, United States	Samuel, Milroy	3
MedStar Washington Hospital Center, Washington, DC 20010, United States	Scott, Rachel	1
Billings Clinic Research Center, Billings, MT 59101, United States	Severa, Larry	21
James A. Simon, MD, PC, Washington, DC 20036, United States	Simon, James	5
Howard University Hospital, Washington, DC 20060, United States	Smith, Kevin	2
DCT-Genesis HCWC, LLC, dba Discovery Clinical Trials, Dallas, TX 75231, United States	Smith, Liesl	8
Grossmont Center for Clinical, Research, La Mesa, CA 91942, United States	Smith-Nguyen, Gioi	2
Center for Womens Research, Chicago, IL 60612, United States	Soltes, Barbara	4
Alabama Clinical Therapeutics, LLC, Birmingham, AL 35235, United States	Summers, William	5
Victory Reproductive Care, ON N8W 5R7, Canada	Victory, Rahi	1
Instituto de Investigaciones Materno, Infantil (IDIMI), Hospital Clinic Santa Rosa 1234, Santiago, Chile	Villarroel, Claudio	7
Clinical Research of West Florida, Inc., Clearwater, FL 33765, United States	Walter, Thomas	5
Atlanta Womens Research Institute, Atlanta, GA 30342, United States	Zane, Richard	7

*All listed sites had patients randomized in Cohort 2.

Appendix 3. Supplemental Methods

During the study, women were required to use two non-hormonal forms of contraceptives (excluding intrauterine devices), and pregnancy tests were conducted monthly. Women were directed to take 400 IU vitamin D, 500 to 1000mg calcium, and if they were anemic at screening (hemoglobin <12g/dL), an iron supplement.

Endometrial biopsies were performed during screening and Month 6 (or at premature discontinuation) and read centrally (Q^2 Solutions, Valencia, CA). Vital signs and clinical laboratory tests, including lipid panel, hemoglobin, liver function tests, hormone and bone biomarker concentrations, were collected at screening, baseline, each treatment month or time of premature discontinuation, and clinical laboratory tests were read centrally (estradiol and progesterone, AbbVie, North Chicago, IL; all others, Q^2 Solutions, Valencia, CA).

The percentage of women who had menstrual blood loss volume of <80mL at the final month and separately, the percentage of women who had a ≥50% reduction in menstrual blood loss volume from baseline to final month, were each analyzed using a logistic regression model including treatment as the main factor and baseline menstrual blood loss volume as a covariate to compare versus placebo. The mean percent change from baseline to final month in menstrual blood loss volume was analyzed with a 1-way analysis of covariance with treatment as the factor and baseline as a covariate. Imputation methods for menstrual blood loss volume were the same as the primary endpoint.

The percentage of women who achieved amenorrhea or suppression of bleeding were each compared versus placebo using the Fisher's exact test, excluding women with <66 days of treatment. Amenorrhea was defined as having 0 days of bleeding or spotting during the last 56 days of treatment; if there was no sanitary product returned and there were 0 days of bleeding or spotting indicated by the e-diary, the woman

was considered amenorrheic. Suppression of bleeding allowed spotting but no bleeding during the last 56 days of treatment. The mean change from baseline to final visit in hemoglobin concentration was compared versus placebo using a 1-way analysis of covariance model with treatment as the factor and baseline as a covariate.

The percent change from baseline in the total leiomyoma volume (3 largest leiomyomas) and uterine volume were compared versus placebo using a Kruskal-Wallis analysis with treatment as a factor using observed data. Mean change from baseline to the final month in Uterine Fibroid Symptom and Health Related Quality of Life Questionnaire Symptom Severity and Health Related Quality of Life total scores were analyzed using analysis of covariance using observed data, with treatment as the main factor and baseline score as a covariate to compare versus placebo.

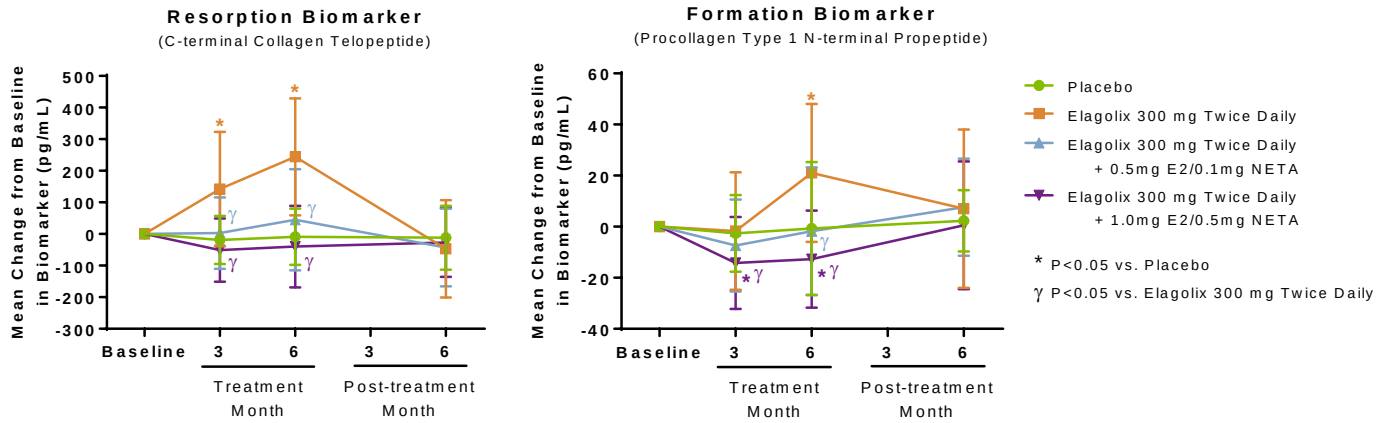
Adverse events were coded using the Medical Dictionary for Regulatory Activities (MedDRA) dictionary and summarized by preferred term for each treatment group. Mean change from baseline to Month 6 in high-density cholesterol (HDL), low-density cholesterol (LDL), triglycerides, total cholesterol and HDL:LDL ratio were compared versus placebo using an analysis of covariance model, with treatment as the main effect and the baseline value of corresponding parameter as a covariate.

Mean percent change from baseline to Month 6 in bone mineral density of the lumbar spine, total hip and femoral neck were analyzed using a 1-way analysis of variance for comparing versus placebo. Analyses of the bone biomarkers C-terminal collagen telopeptide (resorption) and procollagen type 1 N-terminal propeptide (bone formation) were exploratory. Mean change from baseline to Months 3 and 6 were

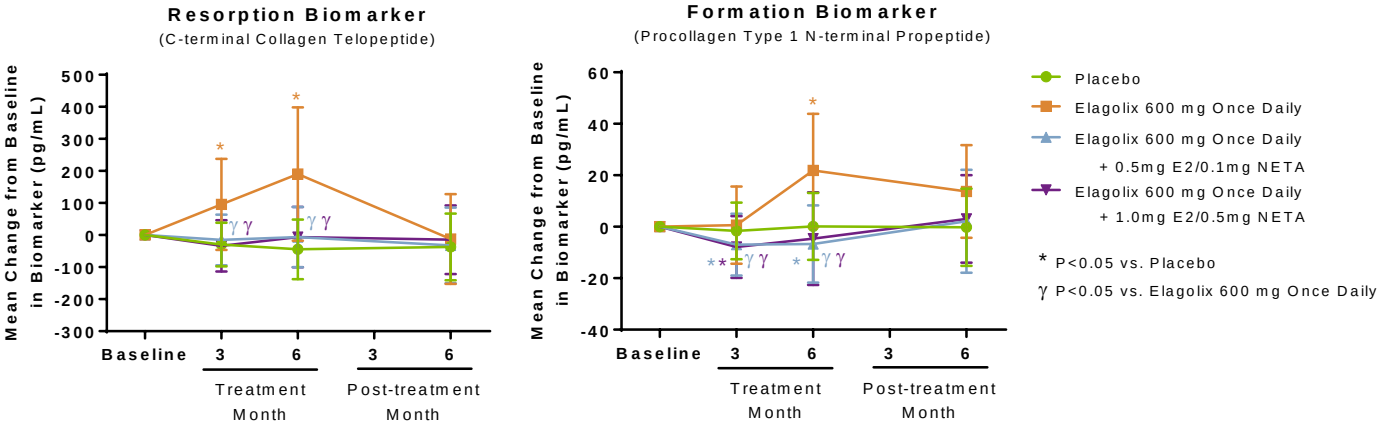
compared between elagolix groups and placebo as well as each elagolix alone group with its corresponding elagolix with add-back group, using a 1-way analysis of variance.

Appendix 4. Mean Change from Baseline in Bone Resorption and Formation Biomarkers

A. Cohort 1



B. Cohort 2



Significance (P<0.05) versus placebo (asterisks) and versus the elagolix alone group (ɣ) were tested in an exploratory analysis using an analysis of variance model with treatment as the main effect using observed data. E2= estradiol; NETA= norethindrone acetate

Carr BR, Stewart EA, Archer DF, Al-Hendy A, Bradley L, Watts NB, et al. Elagolix alone or with add-back therapy in women with heavy menstrual bleeding and uterine leiomyomas: a randomized controlled trial. Obstet Gynecol 2018; 132.
The authors provided this information as a supplement to their article.

Appendix 5. Median and Mean Estradiol and Progesterone Levels at Baseline and from Months 1-6

	Placebo (N=64)	Elagolix 300 mg twice daily			Placebo (N=76)	Elagolix 600 mg daily		
		Without Add-back (N=61)	+0.5 mg E2/0.1 mg NETA (N=58)	+1.0 mg E2/0.5 mg NETA (N=61)		Without Add-back (N=71)	+0.5 mg E2/ 0.1 mg NETA (N=72)	+1.0 mg E2/ 0.5 mg NETA (N=74)
Estradiol Concentration, pg/mL								
Baseline, Median	53	70	51	51	76	57	53	53
Mean (SD)	81 (83)	84 (64)	73 (58)	89 (86)	96 (73)	82 (69)	87 (84)	76 (78)
Months 1-6, Median	94	12	30	61	82	12	34	66
Mean (SD)	100 (60)	15 (13)	38 (30)	69 (46)	95 (56)	20 (20)	45 (31)	78 (50)
Progesterone Concentration, nmol/L								
Baseline, Median	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4
Mean (SD)	0.8 (2)	0.5 (0.5)	0.7 (0.7)	2 (7)	2 (8)	0.9 (2)	0.9 (2)	0.5 (0.6)
Months 1-6, Median	0.4	0.4	0.4	0.4	1	0.4	0.4	0.4
Mean (SD)	5 (9)	0.8 (3)	2 (8)	1 (3)	6 (10)	0.7 (2)	1.2 (5)	0.6 (2)

Based on observed data. E2= estradiol; NETA= norethindrone acetate

Appendix 6. Mean Percent Change in Serum Lipid Concentration During Treatment and Posttreatment Period

Mean (SD) Percent Change	Placebo (N=64)	Elagolix 300 mg twice daily			Placebo (N=76)	Elagolix 600 mg daily		
		Without Add-back (N=61)	+0.5 mg E2/0.1 mg NETA (N=58)	+1.0 mg E2/0.5 mg NETA (N=61)		Without Add-back (N=71)	+0.5 mg E2/0.1 mg NETA (N=72)	+1.0 mg E2/0.5 mg NETA (N=74)
Mean (SD) Percent Change from Baseline to Month 6								
Total cholesterol	1.2 (12.8)	19.2 (14.2)*	14.7 (15.0)*	7.4 (17.5)*	-1.7 (11.4)	11.8 (18.9)*	13.1 (15.8)*	7.6 (12.7)*
LDL-C	0.5 (18.2)	25.5 (22.6)*	18.3 (23.1)*	7.5 (26.7)	-1.1 (19.8)	18.0 (29.9)*	18.0 (22.8)*	12.7 (20.4)*
HDL-C	3.0 (14.3)	13.5 (17.5)*	10.6 (15.8)*	6.6 (18.0)	2.5 (14.8)	5.7 (16.9)	9.7 (16.4)*	3.2 (16.3)
Triglycerides	12.8 (39.2)	19.4 (37.0)	22.3 (39.9)	17.1 (43.2)	-4.7 (29.3)	14.0 (39.8)*	15.6 (44.1)*	8.7 (38.8)*
LDL-C/HDL-C	-1.2 (21.9)	13.9 (23.0)*	8.8 (23.4)*	2.9 (25.5)	-2.1 (23.3)	14.5 (29.3)*	9.8 (22.7)*	10.2 (29.4)*
Mean (SD) Percent Change from Baseline to Post-Treatment Month 3[a]								
Total cholesterol	-0.8 (12.0)	4.1 (13.4)	3.1 (12.0)	1.0 (0.5)	-1.1 (10.5)	1.4 (13.3)	0.7 (13.3)	0.6 (10.4)
LDL-C	-1.4 (19.1)	4.3 (17.1)	4.3 (20.3)	1.2 (17.1)	-1.5 (15.7)	3.8 (20.6)	0.2 (19.0)	3.2 (19.0)
HDL-C	-1.0 (13.3)	7.4 (22.7)	3.3 (13.9)	3.0 (15.5)	0.4 (15.6)	2.5 (16.2)	3.3 (16.6)	0.7 (13.4)
Triglycerides	14.5 (48.9)	10.0 (42.4)	10.0 (37.0)	2.2 (36.7)	8.0 (41.1)	-0.7 (37.7)	7.7 (41.7)	3.8 (31.3)
LDL-C/HDL-C	0.4 (21.0)	1.4 (21.4)	2.6 (21.2)	0.1 (21.0)	-0.4 (20.4)	3.9 (23.6)	0.2 (19.2)	3.7 (29.1)
Mean (SD) Percent Change from Baseline to Post-Treatment Month 6[a]								
Total cholesterol	-0.2 (11.6)	5.9 (12.1)	3.5 (12.0)	-0.2 (12.5)	-3.9 (8.5)	-0.9 (10.4)	1.2 (16.1)	-0.3 (12.4)
LDL-C	-0.03 (20.6)	6.9 (20.1)	3.9 (20.2)	-2.9 (17.5)	-5.2 (14.3)	-0.01 (15.9)	1.2 (26.2)	0.3 (18.3)
HDL-C	-1.8 (18.1)	6.7 (18.0)	4.6 (17.3)	2.7 (14.4)	-2.5 (14.9)	-0.5 (15.2)	1.1 (17.8)	0.4 (11.5)
Triglycerides	21.7 (63.0)	19.4 (51.3)	21.4 (44.2)	4.8 (37.4)	7.1 (53.0)	2.4 (29.6)	20.1 (56.7)	4.6 (43.1)
LDL-C/HDL-C	1.4 (23.1)	4.6 (26.0)	1.1 (22.4)	-3.6 (22.2)	-1.1 (20.2)	3.1 (21.5)	2.0 (24.0)	0.4 (17.4)

a. Mean (SD) changes from baseline to post-treatment Month 3 and 6 were not tested for statistical significance.

Significance versus placebo is indicated (*) for P<0.05. E2= estradiol; NETA= norethindrone acetate

Carr BR, Stewart EA, Archer DF, Al-Hendy A, Bradley L, Watts NB, et al. Elagolix alone or with add-back therapy in women with heavy menstrual bleeding and uterine leiomyomas: a randomized controlled trial. Obstet Gynecol 2018; 132.

The authors provided this information as a supplement to their article.

Appendix 7. Mean Changes in Liver Enzyme Serum Concentration

	Placebo	Elagolix 300 mg twice daily			Placebo	Elagolix 600 mg daily		
		Without Add-back	+0.5 mg E2/0.1 mg NETA	+1.0 mg E2/0.5 mg NETA		Without Add-back	+0.5 mg E2/0.1 mg NETA	+1.0 mg E2/0.5 mg NETA
Mean (SD)	N=64	N=61	N=58	N=61	N=76	N=71	N=72	N=74
Alanine aminotransferase, units/L	-22.8 (156)	7.3 (23.3)	1.4 (9.5)	0.3 (19.8)	0.8 (13.9)	3.3 (17.3)	-0.4 (4.9)	-1.9 (6.4)
Aspartate aminotransferase, units/L	-19.3 (132)	3.9 (14.5)	0.9 (7.0)	-0.2 (10.1)	-1.0 (9.1)	1.2 (8.5)	-0.5 (3.3)	-1.9 (5.2)
Total bilirubin, mg/dL	0.02 (0.15)	0.02 (0.15)	0.00 (0.18)	0.04 (0.14)	0.00 (0.17)	0.03 (0.15)	-0.02 (0.14)	0.04 (0.20)

Significance versus placebo is indicated (*) for P≤0.05 using observed data.

Appendix 8. Summary of Changes in Endometrial Thickness

	Placebo	Elagolix 300 mg twice daily			Placebo	Elagolix 600 mg daily		
		Without Add-back	+0.5 mg E2/0.1 mg NETA	+1.0 mg E2/0.5 mg NETA		Without Add-back	+0.5 mg E2/0.1 mg NETA	+1.0 mg E2/0.5 mg NETA
Endometrial Thickness in mm	N=43	N=33	N=39	N=34	N=46	N=42	N=36	N=30
At baseline	7.7	7.3	7.1	6.6	7.8	7.9	7.2	7.5
At Month 6	9.7	6.8	5.7	6.0	8.2	6.3	5.9	6.9
Mean (SD) change from baseline to month 6	2.1 (7.3)	-0.5 (9.6)	-1.3 (3.9)*	-0.6 (3.0)	0.4 (5.2)	-1.5 (4.5)*	-1.3 (3.6)	-0.6 (3.1)

Significance versus placebo is indicated for P≤0.05 (*) using observed data. E2= estradiol; NETA= norethindrone acetate.