Appendix

List of sites/investigators

Canada

(Stephen Welch) London Health Sciences Center; (Anna Tinker) BC Cancer Agency; (Clare Reade) Juravinski Cancer Centre; (Prafull Ghatage) Tom Baker Cancer Centre; (Vanessa Samouelian) Centre Hospitalier De L'universite De Montreal (CHUM); (Lucy Gilbert) McGill University Health Centre-Glen Site; (Jennifer Spratlin) Cross Cancer Institute; (Susan Ellard) BC Cancer Agency-Sindi Ahluwalia Hawkins Centre for the Southern Interior Europe

Denmark: (Mansoor Mirza) Rigshospitalet-Copenhagen University Hospital; (Per Pfeiffer) Odense University Hospital

France: (Cyril Adbeddaim) Centre de Lutte Contre le Cancer-Centre Oscar Lambret; (Yann-Alexandre Vano) Hopital Europeen Georges-Pompidou; (Renaud Sabatier) Institut Paoli Calmettes; (Florence Joly) Centre Francois Baclesse; (Dominique Berton) Institut de Cancerologie de l'Ouest-Rene Gauducheau

Italy: (Francesco Raspagliesi) Fondazione IRCCS Istituto Nazionale Tumori Milano; (Adriano Gravina) Istituto Nazionale Tumori IRCCS Fondazione Pascale; (Giuseppe Curigliano) Istituto Europeo di Oncologia

Poland: (Magdelena Sikorska) Wojewodzki Szpital Specjalistyczny w Olsztynie; (Małgorzata Suszko-Kazarnowicz) Olsztynski Osrodek Onkologiczny Kopernik sp. z o. o.; (Joanna Pikiel) Szpitale Pomorskie Spotka z ograniczona odpowiedzialnoscia

Spain: (Desamparados Roda) Hospital Clinico Universitario de Valencia; (Angel Luis Guerrero Zotano) Fundacion Instituto Valenciano de Oncologia; (Maria Pilar Barretina Ginesta) Institut Catala d Oncologia de Girona; (Javier García Corbacho) Hospital Clinic de Barcelona; (Andres Redondo) Hospital Universitario La Paz Madrid; (Valentina Boni) Centro Integral Oncologico Clara Campal, Hospital de Madrid Norte-San Chinarro; (Marta Gil Martin) Institut Catala D'oncologia; (Victor Moreno Garcia) Fundacion Jimenez Diaz; (Ana Oaknin Benzaquen) Hospital Vall d'Hebron; (José Manuel Trigo Pérez) Hospital Clinico Universitario Virgen de la Victoria; (Alejandro Falcon Gonzalez) HU. Virgen del Rocio; (Rafael Lopez) Hospital Clinico Universitario de Santiago de Compostela; (Antonio Antón Torres) Hospital Universitario Miguel Servet

UK: (Susana Banerjee) The Royal Marsden NHS Foundation Trust; (Sarah Blagden) Oxford University Hospitals NHS Foundation Trust; (Ruth Plummer) The Newcastle Upon Tyne Hospitals NHS Foundation Trust; (Gordon Jayson) The Christie NHS Foundation Trust; (Rowan Miller) University College London; (Paul Ross) Guys and Saint Thomas NHS Foundation Trust; (Leslie Samuel) Aberdeen Royal Infirmary

USA

(Kathleen Moore) Stephenson Cancer Center; (Hirva Mamdani) Karmanos Cancer Institute; (Jasgit Sachdev) Scottsdale Healthcare Hospitals DBA HonorHealth; (Emily Ko) University of Pennsylvania; (Angela Jain) Fox Chase Cancer Center; (Lee-May Chen) Mission Bay-UCSF Medical Center; (Yi-Chun Lee) SUNY Downstate Medical Center; (Janet Rader) Froedtert Hospital; (Cara Mathews) Women & Infants Hospital; (David O'Malley) OSU Wexner Medical Center; (Charles Leath III) UAB Comprehensive Cancer Center; (Bhavana Pothuri) Perlmutter Cancer Center; (Gini Fleming) The University of Chicago Medical Center; (Jubilee Brown) Levine Cancer Institute; (Brian Slomovitz) University of Miami Hospital & Clinics/Sylvester Comprehensive Cancer Center; (Ryan Sullivan) Massachusetts General Hospital; (Sharad Ghamande) Georgia Cancer Center at Augusta University; (Virgnia Kaklamani) CTRC at the University of Texas Health Science Center at San Antonio; (Theresa Werner) Huntsman Cancer Institute; (Leslie Bradford) Maine Medical Center; (Matthew Carlson) UT Southwestern Medical Center; (Elizabeth Swisher) University of Washington / Seattle Cancer Care Alliance; (Gottfried Konecny) UCLA Hematology & Oncology Clinic; (Linda Duska) University of Virginia; (Peter Schlegel) Cancer Care Northwest; (Michael McHale) UC San Diego Moores Cancer Center; (David Bajor) Case Western Reserve University (CWRU)-University Hospitals Case Medical Center; (Stephen Liu) Georgetown University Medical Center; (Joseph Beck) Highlands Oncology Group; (Ryan Sullivan) Dana-Farber Cancer Institute; (Joshua Press) Swedish Cancer Institute; (Andrea Jewell) University of Kansas Cancer Center; (John Mica) Gynecologic Oncology Associates; (Sardar Imam) San Juan Oncology Associates; (Heidi Godoy) Women's Cancer Care Associates, LLC; (Melanie Bergman) Providence Medical Research Center

Supplemental table 1 Immune-related efficacy endpoints

Immune-related secondary endpoints (irRECIST by investigator assessment)				
Cohort A1				
Variable	dMMR	MSI-H and MMRunk	Overall	
	(N=113)	(N=3)	(N=116*)	
Median follow-up (IQR), months	16.5	8.4	16.5	
	(9.9–24.9)	(0.03–22.1)	(9.9–24.9)	
irORR, n (%)	50 (44.2)	2 (66.7)	52 (44.8)	
irCR	7 (6.2)	1 (33.3)	8 (6.9)	
irPR	43 (38.1)	1 (33.3)	44 (37.9)	
irSD	20 (17.7)	0	20 (17.2)	
irPD	36 (31.9)	0	36 (31.0)	
NE	7 (6.2)	1 (33.3)	8 (6.9)	
irDCR,* n (%)	70 (63.6)	2 (66.7)	72 (63.7)	
irDOR, [†] months	NR	NR	NR	
Cohort A2				
Variable	MMRp (N=144)	MSS and MMRunk (N=16)	Overall (N=160 [†])	
Median follow-up (IQR), months	13.7	30.3	13.7	
	(11.0–25.2)	(30.3–30.3)	(11.0–30.3)	
irORR, n (%) irCR	20 (13.9) 3 (2.1)	3 (18.8)	23 (14.4) 3 (1.9)	
irPR	17 (11.8)	3 (18.8)	20 (12.5)	
irSD	41 (28.5)	1 (6.3)	42 (26.3)	
irPD	63 (43.8)	9 (56.3)	72 (45.0)	
NE	20 (13.9)	3 (18.8)	23 (14.4)	
irDCR, [‡] n (%)	61 (42.4)	4 (25.0)	65 (40.6)	
irDOR, [§] months		7.7	9.0	

*Includes eight (seven dMMR; one MSI-H) patients who had measurable disease at baseline by investigator assessment but not by BICR.

Includes four patients who had measurable disease at baseline by investigator assessment but not by BICR.

‡Responses required confirmation at a subsequent scan; SD had to be observed at ≥12 weeks on study to qualify as SD. \$Includes confirmed CR, PR, or SD at ≥12 weeks.

Four patients had measurable disease at baseline by investigator assessment but not by BICR.

BICR, blinded independent central review; CR, complete response; DCR, disease control rate; dMMR, mismatch repair deficient; DOR, duration of response; IQR, interquartile range; ir, immune-related; MMRunk, mismatch repair unknown; MSI-H, microsatellite instability-high; MSS, microsatellite stable; NE, not evaluable; ORR, objective response rate; PD, progressive disease; PR, partial response; RECIST, Response Evaluation Criteria in Solid Tumours; SD, stable disease.

Supplemental table 2 Immune-related TRAEs

Overall irTRAEs occurring in ≥2 patients,* n (%)	dMMR/MSI-H EC (N=129)	MMRp/MSS EC (N=161)	Overall (N=290)
Hypothyroidism	8 (6.2)	12 (7.5)	20 (6.9)
Diarrhea	6 (4.7)	5 (3.1)	11 (3.8)
Amylase increased	3 (2.3)	4 (2.5)	7 (2.4)
AST increased	2 (1.6)	4 (2.5)	6 (2.1)
ALT increased	3 (2.3)	2 (1.2)	5 (1.7)
Colitis	3 (2.3)	1 (0.6)	4 (1.4)
Hyperglycemia	0	4 (2.8)	4 (1.4)
Lipase increased	4 (3.1)	1 (0.6)	5 (1.7)
Adrenal insufficiency	1 (0.8)	2 (1.2)	3 (1.0)
Hyperthyroidism	3 (2.3)	2 (1.2)	5 (1.7)
Blood creatinine increased	1 (0.8)	2 (1.2)	3 (1.0)
Infusion-related reaction	0	2 (1.4)	2 (0.7)
Nephritis	1 (0.8)	1 (0.7)	2 (0.7)
Pruritus	2 (1.6)	0	2 (0.7)
Rash, maculopapular	1 (0.8)	1 (0.6)	2 (0.7)
Rash	0	2 (1.2)	2 (0.7)
Transaminases increased	2 (1.6)	0	2 (0.7)
Grade ≥3 irTRAEs occurring in ≥2 patients, n (%)		•	
ALT increased	2 (1.6)	2 (1.2)	4 (1.4)
Diarrhea	2 (1.6)	2 (1.2)	4 (1.4)
Amylase increased	1 (0.8)	3 (1.9)	4 (1.4)
AST increased	0	3 (1.9)	3 (1.0)
Hyperglycemia	0	3 (1.9)	3 (1.0)
Lipase increased	3 (2.3)	1 (0.6)	4 (1.4)
Colitis	2 (1.6)	0	2 (0.7)
Transaminases increased	2 (1.6)	0	2 (0.7)

*Immune-related adverse events are identified as any ≥grade 2 AEs based on a prespecified preferred terms list.

AE, adverse event; ALT, alanine aminotransferase; AST, aspartate aminotransferase; dMMR, mismatch repair deficient; EC, endometrial cancer; MMRp, mismatch repair proficient; MSI-H, microsatellite instability-high; MSS, microsatellite stable; ir, immune-related; TRAE, treatment-related adverse event.

Supplemental table 3 TRAEs leading to treatment discontinuation*

TRAEs, n (%)	dMMR/MSI-H	MMRp/MSS	Overall
	N=129	N=161	N=290
ALT increased	1 (0.8)	2 (1.2)	3 (1.0)
Transaminases increased	2 (1.6)	0	2 (0.7)
AST increased	1 (0.8)	1 (0.6)	2 (0.7)
Gamma-glutamyltransferase	1 (0.8)	0	1 (0.3)
Pancreatitis	1 (0.8)	0	1 (0.3)
Tubulointerstitial nephritis	1 (0.8)	0	1 (0.3)
Adrenal insufficiency	0	1 (0.6)	1 (0.3)
Amylase increased	0	1 (0.6)	1 (0.3)
Autoimmune hemolytic anemia	0	1 (0.6)	1 (0.3)
Autonomic seizure	0	1 (0.6)	1 (0.3)
Diarrhea	0	1 (0.6)	1 (0.3)
Infusion related reaction	0	1 (0.6)	1 (0.3)
Esophagitis	0	1 (0.6)	1 (0.3)
Pyrexia	0	1 (0.6)	1 (0.3)
Stomatitis	0	1 (0.6)	1 (0.3)
Vomiting	0	1 (0.6)	1 (0.3)

^{*}Some patients had more than 1 event listed as leading to discontinuation.

ALT, alanine aminotransferase; AST, aspartate transaminase; dMMR, mismatch repair deficient; MMRp, mismatch repair proficient; MSI-H, microsatellite instability-high; MSS, microsatellite stable; TRAE, treatment-related adverse event.

Supplemental table 4 Grade \geq 3 TRAEs that occurred in \geq 2 (0.5%) patients by grade (combined A1+A2 cohorts, N=290)

Preferred term	Grade 3	Grade 4	Grade 5	Overalll N=290
Anemia	8 (2.8)	0	0	8 (2.8)
ALT increased	4 (1.4)	0	0	4 (1.4)
Diarrhea	4 (1.4)	0	0	4 (1.4)
Fatigue	4 (1.4)	0	0	4 (1.4)
Amylase increased	3 (1.0)	1 (0.3)	0	4 (1.4)
AST increased	2 (0.7)	1 (0.3)	0	3 (1.0)
Hyperglycemia	3 (1.0)	0	0	3 (1.0)
Lipase increased	3 (1.0)	1 (0.3)	0	4 (1.4)
Colitis	2 (0.7)	0	0	2 (0.7)
Constipation	2 (0.7)	0	0	2 (0.7)
Hypertension	2 (0.7)	0	0	2 (0.7)
Nausea	2 (0.7)	0	0	2 (0.7)
Pulmonary embolism	2 (0.7)	0	0	2 (0.7)
Transaminases increased	2 (0.7)	0	0	2 (0.7)

Supplemental table 5 Selected TEAEs across GARNET part 2B cohorts, safety population (N=515)

TEAEs, n (%)	Any grade	≥Grade 3
Anemia	132 (25.6)	45 (8.7)
Nausea	129 (25.0)	10 (1.9)
Diarrhea	116 (22.5)	6 (1.2)
Vomiting	95 (18.4)	8 (1.6)
Rash*	85 (16.5)	6 (1.2)
Arthralgia	71 (13.8)	3 (0.6)
Transaminases increased [†]	63 (12.2)	13 (2.5)
Pyrexia	54 (10.5)	1 (0.2)
Hypothyroidism	52 (10.1)	0
Myalgia	34 (6.6)	0
Hyperthyroidism	20 (3.9)	0
Chills	19 (3.7)	0
Pneumonitis	15 (2.9)	1(0.2)
Colitis [‡]	12 (2.3)	5 (1.0)
Adrenal insufficiency	7 (1.4)	3 (0.6)
Pancreatitis	6 (1.2)	5 (1.0)
Infusion related reaction	6 (1.2)	1 (0.2)
Nephritis	4 (0.8)	0
Thyroiditis	4 (0.8)	0
Hepatitis	3 (0.6)	1 (0.2)
Hypophysitis	2 (0.4)	0
Type I diabetes mellitus	2 (0.4)	0
Uveitis	2 (0.4)	0
Diabetic ketoacidosis	1 (0.2)	0

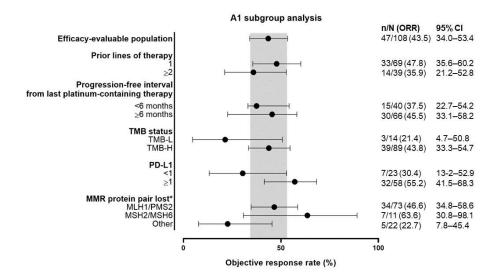
^{*}Includes rash, maculo-papular rash, erythema, macular rash, pruritic rash, erythematous rash, popular rash, toxic skin eruption, exfoliative rash, and pemphigoid.

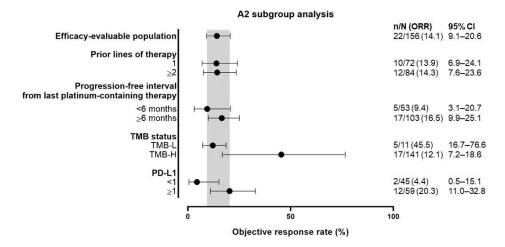
 $^{^{\}dagger}$ Includes transaminases increased, alanine aminotransferase increased, aspartate aminotransferase increased, and hypertransaminasemia.

[‡]Includes colitis, enterocolitis, and enterocolitis hemorrhagic.

TEAE, treatment-emergent adverse event.

Supplemental figure 1 Subgroup analyses





*Only patients with a known MMR status were included (N=106). MMR, mismatch repair; PD-L1, programmed death ligand 1; TMB, tumor mutational burden; TMB-H, tumor mutational burden high; TMB-L, tumor mutational burden low.